THE AUSTRALIA AFRICA COMMUNITY ENGAGEMENT SCHEME

Effective Partnerships for Sustainable Development
Program review 2011 - 2016
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The Australia Africa Community Engagement Scheme (AACES) ends 30 June 2016. The scheme has been highly successful in meeting and surpassing its objectives. AACES has continued to demonstrate strong results in maternal and child health, agricultural productivity, water and sanitation. Over 2,378,468 people have benefitted directly from AACES, of which 1,491,231 were women and girls: an estimated 479,413 people accessed maternal and child health services; approximately 817,933 people experienced improved agricultural productivity; and over 1,074,813 people were provided with water and sanitation services. A strong and clear focus on sustainability, gender equity, and women’s empowerment underpin the AACES model. The value-add of the scheme will be the sustainability of results - the stories of positive impacts and changed lives will continue - long after AACES has ended.

AACES has brought Australians and Africans together. There have been lessons for everyone. The scheme has strengthened and given hope to marginalised groups. Communities have become more inclusive, as they appreciate the role each individual can play (irrespective of gender, age or capability). Local governments have become more accountable as communities develop better understanding of their rights and hold duty-bearers to account. NGOs and donors appreciate have better understood the power of collaboration and partnership in influencing and impacting development outcomes. AACES has demonstrated that everyone has and can play a positive role in their communities. This has been key to the sustained strong results and brighter future prospects for many of the AACES communities.

DFAT sincerely thanks and commends everyone who has worked on AACES. The scheme has survived budget uncertainty, management and staff changes, and obstacles to program implementation. The legacy of the AACES partnership is impressive – partners have learned from each other, leaned on each other, and developed strongly in support of a common goal. Their hard work, commitment and dedication to the scheme remained unwavering and the strong, positive results are evidence of this.

This final review has been designed to enable the sharing of lessons learned throughout the life of AACES. It is intended to influence, shape and inform future programming – both by donors and by NGOs at large.

Matthew Neuhaus
Assistant Secretary, Middle East and Africa Division
Department of Foreign Affairs and Trade
The AACES NGO programs have collectively impacted more than 2.3 million women and marginalised people across the 11 countries.

The Australia Africa Community Engagement Scheme (AACES) was a five-year partnership between the Australian Government, 10 Australian NGOs and their in-Africa partner organisations. From 2011 until June 2016, the program worked across 11 countries in Africa (Ethiopia, Ghana, Kenya, Malawi, Mozambique, Rwanda, South Africa, Tanzania, Uganda, Zambia and Zimbabwe) in three sectors (food security, maternal and child health, and water, sanitation and hygiene). The A$83 million program focused on community-based interventions with particular attention to achieving change for women, youth and children, and people with disability.

DFAT sought to work with NGOs to leverage their existing experience in working with poor and marginalised people in Africa. The program was characterised by a partnership approach in order to maximise an effective working relationship between DFAT and the NGOs. The program theory of change brought together a number of important features of good development practice which worked to support good quality and ongoing results and impact. The combination of these elements underpinned an effective program.

The program has been successful in achieving its objectives. It has delivered outcomes and results that exceed original targets and expectations. The AACES NGO programs have collectively impacted more than 2.3 million women and marginalised people across the 11 countries. Evidence shows extensive change in access to services, resulting in measurable changes in health and well-being for women, children, youth and others in communities. AACES has influenced development practice across participating Australian NGOs and their partners including improving attention to gender and disability, increasing use of strengths-based, endogenous development and rights-based approaches, significantly increasing work around accountability and rights, and building capacity within the NGOs to work more effectively across programs within Africa and beyond. Local and district governments within Africa have taken up lessons and approaches developed in their area and are utilising these more widely in their engagement, particularly with marginalised people such as women and people with disability. AACES has, in some situations, influenced change at the national level.

AACES has been subject to extensive review, identifying several lessons for future NGO programs:

- A design process, which includes the opportunity for donors and implementers to come together to create collaborative relationships and shared intentions, is as important as formal design documents. Good design process requires investment of time and resources.
- In order for a program to benefit from a partnership approach, there needs to be considerable attention given to the behaviours and practices that will characterise the program, particularly how respectful and mutual working relationships will be established and maintained throughout the program. This requires changing normal power relationships between organisations, including those between NGOs and donors, and establishing systems and tools that will specifically serve the shared objectives of the partnership.
Moving away from a needs-based dependent relationship to one where there is appreciation of mutual strengths and abilities is a powerful basis for action and change.

The AACES program demonstrated the potential for working with both supply and demand elements of service delivery through a relational and problem-solving approach. Effective strategies included dialogue, shared analysis and joint work between citizens and duty bearers on practical solutions to specific problems.

Value for money (VfM) was a feature of the program as a whole. NGOs demonstrated a wide range of VfM methodologies. AACES was VfM for the Australian Aid Program.

The AACES experience suggests that innovative practice is not necessarily motivated by funding and resources alone. Flexibility and a focus on results may in fact be more important drivers. Partnership and a focus on collaboration and cooperation, rather than competition, also seem to be useful precursors to the risk-taking and learning required for good innovative practice.

Development staff need the space to be non-experts in some areas and the opportunity to learn through practice. This is likely to support good quality practice including empowerment of women and inclusion of people with disability.

Strong, well-resourced monitoring and evaluation systems that address learning as well as accountability needs are essential for good quality in programs.

Working effectively with NGOs requires DFAT to continue to change its way of working. It is not sufficient to simply provide grants to NGOs and then minimise engagement. Respectful ways of working, processes that share ownership and risk, and a valuing of diversity appear to be important preconditions to maximise the value of NGO approaches for DFAT-funded programs.
### ACRONYMS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AACES</td>
<td>Australia Africa Community Engagement Scheme</td>
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<td>ACBF</td>
<td>African Capacity Building Foundation</td>
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<td>ACFID</td>
<td>Australian Council for International Development</td>
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<td>AFAP</td>
<td>Australian Foundation for Peoples of Asia and the Pacific</td>
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<td>AMENCA</td>
<td>Australia Middle-East NGO Cooperation Agreement</td>
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<td>ANCP</td>
<td>Australian NGO Cooperation Program</td>
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<td>ANGO</td>
<td>Australian non-government organisation</td>
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<td>AOA</td>
<td>Anglican Overseas Aid</td>
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<td>APAC</td>
<td>Australian Partnerships with African Communities</td>
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<tr>
<td>AusAID</td>
<td>The former Australian Agency for International Development (Since 2013, Australia’s aid program has been administered by DFAT)</td>
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<td>CA</td>
<td>Caritas Australia</td>
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<td>CSO</td>
<td>Civil society organisation</td>
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<td>DFAT</td>
<td>Department of Foreign Affairs and Trade</td>
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<td>DPO</td>
<td>Disabled People’s Organisation</td>
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<tr>
<td>EAMNCH</td>
<td>East Africa Maternal Newborn and Child Health project (World Vision)</td>
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<td>GBV</td>
<td>Gender-based violence</td>
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<td>INGO</td>
<td>International non-government organisation</td>
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<td>M&amp;E</td>
<td>Monitoring and evaluation</td>
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<td>MCH</td>
<td>Maternal and child health</td>
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<td>MDGs</td>
<td>Millennium Development Goals</td>
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<td>MSC</td>
<td>Most Significant Change</td>
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<td>MSI</td>
<td>Marie Stopes International</td>
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<td>MTR</td>
<td>Mid-term review</td>
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<td>NGO</td>
<td>Non-government organisation</td>
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<td>PRAAC</td>
<td>Promoting Rights and Accountabilities in African Communities (Plan)</td>
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<td>PSC</td>
<td>Program Steering Committee</td>
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<td>PWD</td>
<td>People with disability</td>
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<td>RF</td>
<td>Resource Facility</td>
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<td>SBA</td>
<td>Strengths-based approach</td>
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<td>SFP</td>
<td>Shared Futures Project (AFAP)</td>
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<td>SINPA</td>
<td>Solomon Islands NGO Partnership Agreement</td>
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<td>TOC</td>
<td>Theory of change</td>
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<td>TRLT</td>
<td>The Road Less Travelled (AOA)</td>
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<td>VfM</td>
<td>Value for money</td>
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<td>WA</td>
<td>WaterAid</td>
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<tr>
<td>WASH</td>
<td>Water, sanitation and hygiene</td>
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<tr>
<td>WE-RISE</td>
<td>Women’s Empowerment: Improving Resilience, Income and Food Security Program (CARE)</td>
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<td>WVA</td>
<td>World Vision Australia</td>
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WHERE WE WORK

Ghana
Uganda
Ethiopia
Kenya
Tanzania
Malawi
Mozambique
Zimbabwe
SOUTH AFRICA

Where We Work
AACES OBJECTIVES
1. Marginalised people have sustainable access to the services they require.
2. Development programs, including AACES, are strengthened, particularly in their ability to target and serve the needs of marginalised people through learning, collaboration and exchange among AACES NGOs and between AACES NGOs and DFAT.

AACES NGOS
ActionAid Australia’s project is implemented in three districts (Mwingi, Isiolo and Mbeere) in Kenya, and five districts in Uganda (Amuru, Nwoya, Kumi, Bukeada and Katakwi). The project is working to improve sustainable access to food and agriculture-related services for over 4,500 farmers, of whom 70 percent are women. ActionAid Australia works in partnership with ActionAid Kenya and ActionAid Uganda.

The Australian Foundation for the Peoples of Asia and Pacific Ltd (AFAP) is implementing an integrated project in agricultural productivity, water, sanitation and hygiene, maternal and child health and governance. The project is aimed at alleviating poverty by strengthening existing capacities, supporting decentralisation processes and increasing the opportunities for marginalised people to advocate for services they require. The project works in Southern Malawi (Thyolo District), Mozambique (Niassa and Maputo Province) and Eastern Zimbabwe (Maslonaland East). AFAP works in partnership with Concern Universal Malawi, Concern Universal Mozambique and Community Technology Development Organisation in Zimbabwe.

Anglican Overseas Aid (AOA) works to improve maternal, neo-natal and child health in the Afar Region of Ethiopia, and in Laikipia and Samburu counties in Kenya. AOA works in partnership with the Nossal Institute for Global Health, the Afar Pastoralist Development Association in Ethiopia and the Mothers’ Union of the Anglican Church in Kenya.

Improving household food security and resilience by empowering women, particularly through increased agricultural productivity, is the project focus for CARE Australia. The project works with households in Dowa and Lilongwe districts in Malawi, in the Lindi and Mtwara districts in Tanzania, and the woredas of Shebedino, Dale and Loka Abaya in Ethiopia. In Malawi, CARE has partnered with Mponela Aids Information and Counseling Center, in Ethiopia CARE works with CARE Ethiopia and SoS Sahel, and in Tanzania with CARE Tanzania.

The cornerstone of Caritas Australia’s integrated project is to improve the provision of clean reliable water, promote hygiene and sanitation, and increase agricultural production for marginalised communities. The project is implemented in nine rural communities in the Dioceses of Mzuzu, Blantyre and Lilongwe in Malawi, and the Dioceses of Mbulu, Ifakara and Mahenge in Tanzania. Caritas Australia works in partnership with Caritas Tanzania and Catholic Development Commission in Malawi.
Marie Stopes International Australia’s (MSIA) project aims to increase access to and uptake of equity sensitive sexual and reproductive health services by marginalised populations in Kenya and Tanzania. The project delivers services through outreach and also works to strengthen private sector healthcare providers with the aim of providing sustainable, cost-effective quality sexual and reproductive health services. MSIA works in partnership with Marie Stopes Kenya in Coastal regions of Kilifi, KwaI, Taita, Tana River and Taveta, while Marie Stopes Tanzania works in Mtwaras, Tanga, Coast and Dar es Salaam regions.


Working in Kenya, Uganda and Zimbabwe, Plan International Australia’s project aims to enable marginalised people — particularly women and girls, young people and people with disability — to claim rights and access services. This includes prevention, as well as responding to violence against women and girls, women’s rights to land and property inheritance, health and education rights, and legal rights and services. Plan International works in partnership with Plan International Kenya, Plan International Uganda and Plan International Zimbabwe. In Zimbabwe, Musasa and St Peter’s Community Care Program were implementing organisations with Plan up to 2014–2015.

WaterAid Australia’s project aims to improve access to water, sanitation and hygiene in under-served communities and schools in rural and urban areas of Tanzania, Malawi and Ghana. WaterAid Australia works in partnership with WaterAid Ghana in Akuapem North Greater in the Eastern region, and in Dangme West and Accra Metro in the Accra region. In Tanzania, WaterAid works in Bahi and Chamwino in the Dodoma region, Singida Urban and Iramba in the Singida region and in Ngeza in the Tabora region. In Malawi, WaterAid operates in Ntchisi in the Central region.

The goal of World Vision Australia’s project is to improve maternal, newborn and child health in selected communities in Kenya (Kilifi District), Rwanda (Gicumbi District), Tanzania (Kilindi District) and Uganda (Kitgum District). This is being achieved by increased access to services through strengthened health systems, education at the community and facility level, and engagement with governments. World Vision Australia works in partnership with World Vision Kenya, World Vision Uganda, World Vision Rwanda and World Vision Tanzania.
AACES RESOURCE FACILITY

The African Capacity Building Foundation (ACBF) was contracted by DFAT as Resource Facility Manager for AACES. In this role, ACBF provides technical and administrative support to the program. ACBF is a non-profit international organization established in 1991 to build human and institutional capacity for good governance and economic development in Africa. The Foundation supports capacity building through grants, technical assistance and knowledge.
INTRODUCTION

The Australia Africa Community Engagement Scheme (AACES) was a five-year partnership between the Australian Government, Australian non-government organisations (NGOs) and their in-Africa partner organisations. From 2011 until June 2016, the program worked across 11 countries in Africa (Ethiopian, Ghana, Kenya, Malawi, Mozambique, Rwanda, South Africa, Tanzania, Uganda, Zambia and Zimbabwe) in three sectors (food security, maternal and child health, and water, sanitation and hygiene). The A$83 million program focused on community-based interventions with particular attention to achieving change for women, youth and children, and people living with disabilities.

AACES followed a previous program of support to Australian NGOs working in Africa (the Australian Partnerships for African Communities – APAC) seeking to learn lessons from that experience and work through a different approach to achieve increased outcomes. The goal of AACES was to Enable Australian NGOs and their partners to contribute to the DFAT strategy for Africa, through a partnership approach, focused on community-based interventions across the sectors of water and sanitation, food security and maternal and child health.2

AACES was initiated at a time when the Australian Government was seeking to engage in Africa in a way that would demonstrate the value of Australian interventions, going beyond aid to support people-to-people links. It was an opportunity to direct resources towards three sectors in line with the Millennium Development Goals (MDGs), which were identified by African governments and other stakeholders as areas where poor and marginalised people were significantly impacted. It was an opportunity to demonstrate Australia’s commitment to poverty alleviation in line with the priorities of various African nations. Acknowledging that Australia was a relatively small donor in the region, the Department of Foreign Affairs and Trade (DFAT) aimed for programs that would be catalytic, leveraging wider change through strategic and well targeted interventions.3

The initial theory of change (TOC) for the program drew from key assumptions, including that Australian NGOs had expertise in community-focused interventions and that they were well connected and experienced in various African countries. Therefore, by working together with these organisations, DFAT could support high-quality interventions focused on poor and marginalised people that built on existing programs and networks and thus leverage better value for the resources being invested. In turn, the NGOs would have the opportunity to undertake good quality, well-funded programs to achieve positive change for people.

A further assumption in the initial approach was that, given previous

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1. These include Anglian Overseas Aid (AOA), ActionAid Australia, Australian Foundation for the Peoples of Asia and the Pacific (AFAP), Caritas Australa (CA), CARE International Australia, Marie Stopes International Australia (MSI), Oxfam Australia, WaterAid Australia, Plan International Australia, World Vision Australia (WVA).
experience, a different way of working between DFAT and NGOs was required; one that would overcome the problems around inflexibility and lack of communication identified in the previous APAC program, and therefore provide for more effective and efficient results. DFAT proposed a partnership approach noting that working in partnership with NGOs can unlock benefits that are not realisable through a contractual (or even collaborative) arrangement, that is it offers a “distinct value add”.

Five years later, AACES has delivered outcomes and results that exceed original targets and expectations. As outlined in Box 1, the NGO programs have collectively impacted more than 2.3 million poor women and marginalised people across the 11 countries.

Each of the programs has been systematically evaluated and the outcomes and impact across the three sectors and beyond extensively documented. Evidence shows extensive change in access to services, resulting in measurable changes in health and well-being for women, children, youth and others in communities. There has been significant change in the capacity of individuals, in particular women, and that of communities, to work for their own development and to create change within their own situation. This has resulted in increased cooperation between communities, local governments and other stakeholders to work for sustained service delivery.

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5. Not all projects focused directly on the three sectors, for example the Plan project focused on health in one country, but in other locations worked to address gender-based violence and legal rights for women. This in turn enabled women’s improved health and livelihoods.
Local governments in turn are showing change in both their policies and programs. In some cases national government policy has also changed in ways that will ensure better services for marginalised groups of people.

As explored in the later chapters of this paper, AACES has influenced development practice across participating Australian NGOs and their partners including improving attention to gender and disability, increasing use of strengths-based, endogenous development and rights-based approaches, significantly increasing work around accountability and rights and building capacity within the NGOs to work more effectively across programs within Africa and beyond. Local and district governments within Africa have taken up lessons and approaches developed in their area and are utilising these more widely in their engagement, particularly with marginalised people such as women and people with disability (PWD). AACES has, in some situations, influenced change at the national level. The program has contributed to policy development within DFAT and provided the Australian Government with opportunities for effective diplomatic engagement. Lessons from the program have been documented in a wide range of publications and research reports which have been made available within Australia, Africa and globally. AACES has experimented with various models and approaches to practice, developing innovative programs and collaborative partnerships with government, the private sector and other stakeholders.

These results have contributed to a significantly greater return on investment than originally envisaged. The program learning will continue to be influential across both the NGO and the official aid sectors for many years to come. Stakeholders within DFAT suggest that it is likely one of the most effective NGO programs supported by the Australian Government overall. This is evidenced through DFAT assessment reports and documents which consistently rate AACES as one of the most effective programs in Africa.6

As part of the commitment by AACES partners to learning and effective practice, a review was commissioned to explore the program story and identify more thoroughly the theory of change and the lessons learned throughout the five years of implementation. To this end, an extensive review process was undertaken from November 2015 to April 2016. This paper presents the findings of that review.
The AACES model, outlined initially in a program concept paper, was premised upon a different way of working between DFAT and Australian NGOs – a partnership approach – that would enable the NGOs to work more effectively and thus achieve greater results for the resources provided by the Australian Government. Experience from elsewhere in the aid program, however, suggested that this approach would require more than simply a contractual relationship between DFAT and NGOs. Effective partnership would require change in the practice of all partners leading to collaborative ways of working built on trust and respect and mutual accountability.

As the design was developed, consultation with both DFAT and Australian NGOs, together with their in-country partners, indicated that this was also an opportunity to explore the different ways in which NGOs could contribute to effective aid.

Traditionally NGOs have been supported by the Australian Government around service delivery, but DFAT research available at the time suggested that they could also play a role in policy engagement and in communicating the aid program to the Australian public.

In addition, examples from effective aid and development around the world indicated that services are only likely to be sustained for people when there is a corresponding change in government policy and practice. In part this requires people and communities to improve in their ability to hold governments to account and work with those governments to maintain and expand basic services.

Beyond this, international research suggests that effective development practice is more likely to be achieved through a flexible and iterative approach that is adapted to local contexts and able to engage with local interests and strengths, thus developing solutions which are embedded in that understanding.

Australian NGOs have practical experience in working with communities and governments and bridging the service delivery and policy influencing roles. They also know how to work in iterative and creative ways. But such work is risky and difficult. It is hard to demonstrate short-term results and difficult to explain the changing program activities. NGOs identified at the time that they were reluctant to use donor funding for this sort of work. If DFAT wanted NGO programs to utilise their wider experience and work in the Africa program in more innovative ways, there would need to be a different understanding of how change would be achieved, reflected in both the design and the implementation arrangements.

NGOs also indicated that they would need time to develop good quality designs to address the challenges and outcomes likely to be sought through this program. They wanted to work with their existing partners and networks within Africa to build upon current areas of expertise and knowledge but also look at where they needed to work in different ways and with different approaches.

10. This research was summarised at the time in AusAID (2009), ‘AusAID Engagement with NGO’, Draft policy position. More recently it is referenced in DFAT (2015), ‘DFAT and NGOs: Effective Development Partners’.
Broader experience indicated that monitoring and evaluation systems would need to be more sophisticated in order to track change in what was likely to be a complex program.¹³

The monitoring and evaluation would need to track program progress throughout a flexible process of long-term change based on varying approaches. At the same time the monitoring and evaluation would have to address more short-term accountability needs of the Australian Government on a regular basis.

Finally DFAT had established that good quality aid programs needed to be both inclusive and ensure outcomes for women and girls.¹⁴

As implementation started, it became clear that few of the systems and mechanisms required for managing this type of program, in a partnership approach, were already in place and each would need to be developed. Processes of decision-making, reporting, communication, learning and change needed new or adapted systems.

The original program strategy therefore was underpinned by a broad range of drivers and assumptions (see Box 2 for a complete list). This led to an extensive design process and the creation of systems and tools to facilitate a different type of DFAT-funded NGO program. These are explored in detail in the following sections.

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Original drivers for AACES

- DFAT interested in what a partnership approach could do.
- APAC was problematic …let’s do better.
- NGOs wanted resources and a better process for design and implementation.
- The Australian Africa program was growing…there was support from good people to have a good quality program.

Key assumptions about ‘why’

- For Australia to make a real difference (as a modest donor) in the areas of maternal and child health (MCH), water, sanitation and hygiene (WASH) and food security in Africa, it needs to work in ways that reach the poorest.
- Also as a modest donor, Australia needs to work with others, including NGOs with wide international and partner connections.
- Civil society in Africa has the potential to contribute to service delivery, but also go beyond this to influence governments and leverage larger scale change.
- A good civil society program will complement and support other Australian investments in Africa.

Assumptions about ‘what’

- Australia should support Australian NGOs (ANGOs) and their partners differently in order to leverage the best of NGOs.
- ANGOs claim that their strengths are service delivery, policy input and influence and communication with the Australian public. Let’s bring these strengths to the Africa program.
- Programs that make a difference to the lives of poor people will include:
  - gender inclusive;
  - disability inclusive;
  - aware of other vulnerabilities and reasons why people are marginalised; and
  - able to build resilience and accountability.

Assumptions about ‘how’

- A partnership between the Australian Government and NGOs can leverage different strengths towards mutually agreed objectives.
- Partnerships between the NGOs and their partners will increase the lessons learned and sharing of ideas and therefore increase the program impact.
- A partnership approach will increase efficiency. (If we put in the work to get it right at the beginning, then it will all run better – better value for the money).
- ANGOs will partner with NGOs in Africa and build their capacity…eventually handing over power so this program is more Africa based and controlled.
Assumptions about ‘shape’

- Investment in design and a non-competitive environment will improve the quality of NGO designs. It will establish an approach to working with each other in a positive way.

- Management arrangements need to be clear and detailed. Will require formal commitment from everyone. But they also need to reflect a partnership approach.

- Communication is important. It needs to be guided by protocols and reflect the spirit of partnership.

- There should be a dispute resolution process so differences do not linger on.

- Monitoring and evaluation (M&E) is important. NGOs can have their own systems but overall the M&E must provide accountability, learning and program development.

- A resources facility is important to relieve DFAT of the management task (and enable it to engage in the partnership) plus facilitate learning and technical assistance.

And maybe …

- A focus on value for money will demonstrate the value of this overall approach and protect the program in the future.

- The strengths-based approach is in line with what we are trying to do and ought to be shared.

- NGO designs should be encouraged to be iterative – able to develop and change over time.
The AACES design process was focused on establishing the framework and the processes which would best support the overall intent of the program. It was informed by lessons from the previous program that pointed to the need for flexibility and processes that would support collaborative learning. As a multi-project, multi-country, multi-organisation program it was clear that the design also needed to move from a linear program modality to one that draws upon both systems and complex approaches to understanding change.16

Australian NGOs identified early in the process a potential conflict between the competitive selection processes required for Australian Government systems and the intention for an ongoing collaborative partnership approach. They were also reluctant to invest in an extensive design process with partners and communities without some greater certainty of eventual funding. Towards this end, DFAT undertook a two-step process. 17

Once NGOs were selected at concept stage they had certainty of funding, but were then required to enter into a detailed design process to ensure that their projects were supported by high quality analysis and program strategy.

At the same time, the overall AACES program design was developed in an iterative way, reflecting the engagement and ideas of the NGOs and their partners. The program design reflected the key elements of the NGO project designs but also established standards, outlined the framework and intent of the program and developed the tools and mechanisms for implementation.

NGOs were provided with guidelines about standards, quality and expectations for their designs and monitoring and evaluation frameworks. 18

They were supported through workshops and technical advice in their development of these and given the opportunity to revise and further develop their designs in response to feedback and support.

Concurrently, consultation was being undertaken between DFAT, NGOs, in-Africa partners and other stakeholders to bring together a program framework that identified the objectives and strategies for the whole of AACES, and the program level processes of management, governance and implementation, monitoring and evaluation, and risk management. This process led to the development of a document that identified the intentions and shape of the program and the important approaches and principles which needed to guide implementation. It did not outline a detailed plan for implementation, but was constructed to facilitate multiple and diverse interventions by the various NGO programs.

17. Australian NGOs were invited to submit a capacity statement in order to be selected for inclusion in the AACES program. Ten NGOs were selected based on their demonstrated capacity to implement good quality programming alongside demonstration of existing experience and networks within relevant countries in Africa. This selection process was a critical aspect of ensuring organisations that were selected were capable of the wider networking and leveraging being sought through the AACES program.
18. Specific guidelines were developed to outline what was expected in NGO designs and monitoring and evaluation frameworks. These guidelines required the NGOs to follow high quality design principles. For example, NGOs were expected to move beyond utilisation of simple log frames to develop program strategies based on well researched theories of change. NGO designs were also expected to give attention to a range of cross-cutting areas such as gender, disability, child protection, environmental sustainability and mitigation of climate change. They were directed to give appropriate attention to risk management and sustainability.
The overall design process was extensive and required more resources than would initially be focused on a program of this size (see Box 3). However, the process established a detailed set of agreements and tools about how AACES would operate. And the basis was laid for a different way of working between DFAT and NGOs, and between the NGOs themselves.

**AACES DESIGN PROCESS**

**CONCEPT PAPER**

1. Two consultants were contracted to develop the concept paper and to support the design of the overall AACES program and the individual NGO project designs. This included a design team leader and an M&E specialist.
2. Concept paper developed (following consultation with the Australian Council for International Development – ACFID – and other NGOs) and approved through DFAT quality assurance processes.

**Phase 1 (4 months)**

3. Call for NGO submissions against the concept paper which included a statement of NGO capacity and experience in Africa, as well as broad proposals for potential work areas.
4. DFAT chose 10 applications (including one consortium of three agencies) which best matched the scope, range and location of work in the wider DFAT Africa program. The ten agencies were provided with funding to develop project designs (NGOs covered 30% of the design costs and DFAT the remaining 70%).

**Phase 2 (7 months)**

5. The design process started with a partnership workshop with the Australian NGOs and DFAT to explore how partnerships differ to more traditional methods of management, and to identify behaviours that would reflect partnership during the design stage.
6. A design workshop to establish initial understanding and intentions was held in Canberra, then repeated in Nairobi so that in-country partners could attend.
7. A website was established with interactive access by all NGO partners and DFAT to maximise transparent communication between stakeholders.
8. The AACES program design was developed iteratively with the separate NGO designs.
9. A final workshop was held to agree on the systems and arrangements for the AACES program (based on what would best support the NGO designs).
10. The program design was peer reviewed through the DFAT quality systems, and the NGO designs were peer reviewed by the other NGOs as well as by DFAT and an external person. Agencies were given two weeks to make improvements in order to move to implementation.
Decisions about program governance, management and implementation were as far as possible negotiated with all stakeholders (including in-Africa partners) and recorded as part of the program design. The program design was reviewed through DFAT quality processes. NGO designs were subject to both DFAT quality assessment and an additional process of peer review between the NGOs, leading to considerable strengthening and further development of NGO strategies.19

Most importantly, DFAT the NGOs and in-Africa partners established what would be achieved and how. From the very beginning of this program there was therefore a sense of shared ownership and responsibility for delivery and achievements.

**AACES SECTORS AND OBJECTIVES**

AACES aimed to improve accessibility to services across the three sectors of water and sanitation, food security and maternal and child health. These three sectors provided NGOs with a range of entry points that were relevant both to community needs and national government focus. The sectors were broadly defined in the design document which allowed for different starting points in individual project designs that were relevant to the particular country and community needs. The sectors were a practical lens through which to engage with people, communities and government towards the overall program objectives.

*We went into the program focused on food security and water and sanitation. Along the way we went into other areas because we were led by the community. (Caritas)*

Three objectives were developed within the program design, reflecting both past learning and research about effective service delivery in Africa, and knowledge about the strengths of civil society. The objectives guided NGOs and their partners to the outcomes sought across the sectors. They introduced a set of ‘nested’ theories of change, within a whole-of-program approach to change.20

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19. Later reflection identified that this first attempt at a peer review process was challenging for many of the agencies. At the time there was some ongoing competition between agencies and a limited perspective on what a collaborative and partnership approach to program implementation might involve. This shifted after program implementation as the partnership approach began to shape the ways organisations and individuals related to each other.

A Parent Support Group has helped Owinya Jovine Gandi to be involved in maternal and child health care in Kitgum District, Northern Uganda. Photo by: Anita Komukama, World vision Uganda.
**OBJECTIVE ONE: MARGINALISED PEOPLE HAVE SUSTAINABLE ACCESS TO THE SERVICES THEY REQUIRE**

The first program objective absorbed the vast majority of funding under AACES. It outlined a set of expected results that would see change in what services people were able to access and their ability to advocate for further service improvement. Building on previous program experience, and in line with World Bank research around effective service provision, the objective pointed to the need to focus on those with power (the duty bearers) and change their relationship with and accountability to marginalised people and communities.

Emphasis was given to ensuring poor women and marginalised people were specifically targeted by the program.

**OBJECTIVE TWO: DFAT POLICIES AND PROGRAMS IN AFRICA ARE STRENGTHENED, PARTICULARLY IN THEIR ABILITY TO TARGET AND SERVE THE NEEDS OF MARGINALISED PEOPLE**

The second objective of the program reflected an interest by NGOs in contributing to government and other donor policies, in order to contribute a civil society perspective to aid implementation. It also reflected DFAT research that suggested there was much to be learned from NGOs and their extensive networks.

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21. Research from the APAC program indicated that there needed to be more focus in NGO programs on working with marginalised groups and increasing their links with formal structures, especially those at district level. This needed to be directed towards increasing the space for marginalised groups to engage in decision-making and influence at a number of levels. (Samuels, F., Sibale, B., & Selvester, K. (2009), ‘People in planning in Malawi: Lessons from the APAC program in Eastern and Southern Africa’, ODI Project Briefing number 18.)


23. There were a series of outcomes sought for this objective which pointed to what wider research suggested were the essential elements of change required for access to service delivery to be sustained:
   - Marginalised people, particularly women, have greater voice and engagement with decision-makers and duty bearers.
   - Policy formulation and implementation by duty bearers is more informed by local issues and evidence.
   - There is an increase in the capacity and focus of duty bearers to deliver inclusive and sustainable services.
   - There is an increase in the demand for services by marginalised people, particularly women.

24. The focus on inclusion was also supported in the World Bank research (Deverajan, S., Khemani, S., & Walton, M. (2011), ‘Civil Society, Public Action and Accountability in Africa’, the World Bank, Policy Research Working Paper no. 5733) which noted that a failure to adopt a highly inclusive strategy would likely lead to programs simply reinforcing existing inequalities.

The underlying assumption, supported by both DFAT and NGOs at the time, was that civil society expertise in service delivery for the most marginalised would contribute to the quality of other DFAT programming in Africa. A specific objective to this focus would ensure both DFAT and NGOs created the space for this contribution to be made.26

OBJECTIVE THREE: AUSTRALIAN PUBLIC ARE MORE INFORMED ABOUT DEVELOPMENT ISSUES IN AFRICA

The last objective reflected the emerging interest among NGOs about how to expand citizen connections in aid and development. DFAT recognised that contact with the Australian community was an area of NGO expertise and therefore agreed that a small proportion of program funding would be provided for innovative and creative strategies for community engagement. The expectation was that this would build relationships between Australian and African citizens; further, that it would contribute to program improvement through transparency and direct accountability.27

Taken together, the three objectives presented challenges for some of the NGOs, especially those with less experience in policy and influencing work, widening their focus beyond technical programs. They introduced three additional change approaches (change through increased accountability by service providers; change through donor policy and programming influence; change through informed citizen engagement). While these reflected the interests of both NGOs and DFAT at the time, the objectives presented an ambitious agenda for a five-year program.

I learnt that poverty is poverty, and it does not know any sector, so you cannot address poverty from a narrow sector perspective. The AACES program in Zambia has made a serious attempt to address poverty in a comprehensive manner by focusing on human development, as opposed to simply focusing on WASH as a sector. This can be seen in the investment on issues of inclusiveness, development, women empowerment and strengthening systems which facilitate human development and poverty reduction like the sub-district structures.

26. As discussed later in this report, this objective was revised, following the mid-term review, and rephrased as: Development programs, including AACES, are strengthened, particularly in their ability to target and serve the needs of marginalised people through learning, collaboration and exchange among AACES NGOs and between AACES NGOs and DFAT.

27. Following a change in Australian Government aid policy, this objective was cut from the program in years four and five (see the section on Objective 3).
After two years of working with the AACES program, I feel like I have attained a diploma in development. My view of poverty and my analysis of development have completely changed to that which is well balanced and reflects the realities on the ground.

Beyond AACES, the way forward is to facilitate the strengthening of the communities through the sub-district structures and key government departments, thanks to AACES. (In-Africa partner)

The objectives provided space for diversity. NGOs were not provided with a detailed implementation plan that would prescribe their approach. Because DFAT wanted to encourage innovation and demonstration of diverse Australian expertise, Australian NGOs and their partners were supported to design their own programs combining work in one or more sectors and advancing a wide range of strategies that would enable them to meet the program objectives across those sectors.

NGOs responded in a range of ways (see Annex Two for a summary of NGO program approaches). Some used one or more of the sectors as starting points and looked to how to expand their service delivery focus to one that embraced an empowerment approach. Others approached service delivery from a human rights perspective and therefore sought to achieve service outcomes for people by focusing on their rights to access. This resulted in a diverse mix of approaches to change. Taken together with the range of strategies developed under objectives two and three, it provided a series of experiments and innovations ideal for cross-learning and for maintaining a whole-of-program focus on effective outcomes.28

I expected the normal routine. But then it started and I realised there was going to be a lot of engagement. The program focused on results – almost all donors focus on the money and it diverts them from results. This program really focused on outcomes. And normally we are guided by the design; it’s like it is cast in concrete. This design was flexible and let us change. It was very different to other programs. (World Vision)

28. World Bank research around effective service delivery for marginalised groups in Africa acknowledges that the environment is complex and that there are no easy answers. It emphasises that what works in one location does not necessarily translate elsewhere. It therefore proposes that it is important to support local ideas and experimental interventions (Deverajan, S., Khemani, S. & Walton, M. (2011), ‘Civil Society, Public Action and Accountability in Africa’, the World Bank, Policy Research Working Paper No. 5733).
At the same time, having a wide range of multi-sector programs was not easy in terms of program coherence, especially in the beginning. It was not a simple matter for NGOs to understand and appreciate the work of others and how it compared to their approaches and ideas. NGOs needed opportunities to go beyond their immediate differences through both thematic workshops and additional opportunities provided for collaboration and learning. Underpinned by a partnership approach, the emphasis on diversity was eventually identified by all respondents to this review as a significant strength of the program, underpinning many of the additional outcomes identified by NGOs and their partners. Through embracing diversity, NGOs were able to add to the quality and value of each other’s programs and therefore increase the program overall outcomes.

The diversity also made it difficult to present the program in a comprehensive form to external stakeholders.

Over time AACES improved its external communication, particularly through a focus on cross-cutting themes that demonstrated program focus and achievement. But communicating the entire multifaceted and developing program to external audiences remained a challenge throughout the five years.

**FLEXIBLE AND ITERATIVE APPROACHES TO CHANGE**

The AACES objectives challenged NGOs to work for significant change across several areas with some of the most disadvantaged and excluded groups in remote and rural areas. The program required NGOs to work in ways which would address complex and interrelated challenges. It was clear from previous NGO programs in Africa and elsewhere, and relevant international research, that this would require a flexible program where individual NGO interventions were able, and in fact required, to learn, change and improve.

Towards this end, the AACES model included several elements that focused around promoting flexible program implementation.

The first element was an annual review and planning process. All agencies were required to review their work in detail and submit a revised plan of action for the following year. It was expected that activities might change and that each program would identify areas for improvement and/ or new directions. This proved to be a very powerful component of the program. Several respondents to this review identified that this approach provided a clear signal that DFAT was focused on tangible results, not simply adherence to predetermined program plans.

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29. The AACES mid-term review noted this challenge in particular.
30. Review of the previous NGO program in Africa, APAC, together with a review of the Solomon Islands NGO Partnership Agreement (SINPA) and the Australian Middle-East NGO Cooperation Agreement (AMENCA), highlighted that flexibility and learning were key to effective programming by NGOs. Lessons from these reviews identified the need to define clear objectives and first year plans but then require Australian NGOs and their partners to develop implementation activities along the way, throughout the life of the program. This is supported by African-based research that proposes that better development outcomes could be achieved by a more flexible and adaptive programming approach. (Riddell, R. (2013), ‘Assessing the overall impact of civil society on development at country level: an exploratory approach’, Development Policy Review, 31 (4) 371 – 396.)
Alongside the focus on annual strategy development, support was given to each NGO to develop high quality monitoring and evaluation systems. This was in response to previous APAC experience where the review suggested that there had been insufficient focus on assessment and learning and inadequate assessment for a program of its size.31

Our team became adaptive because the program was flexible and adaptive. In the report that was submitted each year, there was a section on ‘suggested areas for improvement’. So we knew we could adapt and change. For example we decided to integrate literacy into a program after observing that this was an issue for women. This considerably increased their confidence and proved to be a major step in their further empowerment. (AFAP)

The monitoring and evaluation for AACES started with acknowledgement of the various stakeholders’ needs that had to be addressed. This included accountability to the donor about the overall scope of the program and the cumulative change within the three sectors. Towards this end AACES developed a small set of agreed indicators that all NGOs could report against. These high-level indicators captured key elements of change being sought through the program and matched the DFAT performance assessment systems in place at the time.32 These indicators provided quantitative data that NGOs could utilise to demonstrate program breadth and inclusion (data was disaggregated by gender, disability and other important categories).

The second element was a series of case studies which illustrated important elements of NGOs’ work. This provided qualitative information for DFAT. Over time these case studies were drawn together into shared themes, illustrating program progress in particular sectors and cross-cutting areas. Each NGO was also required to produce an extensive annual report that would examine progress, identify challenges and, as outlined before, propose changes and new ways of working. This report was a more sophisticated and detailed analysis related to specific project activities and individual project theory of change.

In order to ensure the quality of this reporting, NGOs were tasked to develop monitoring and evaluation systems that matched their program theory of change and provided regular evidence-based assessment across the whole of their program of work. They were supported in this through a series of workshops and monitoring and evaluation technical advice. In the first year of the program each NGO monitoring and evaluation system was reviewed independently and through a process of peer review (which in turn built trust among the NGOs and led to the sharing of ideas and tools). This was to ensure good quality across what proved to be a diverse range of performance assessment systems.

32. The Australian Government had introduced a broad set of high-level indicators against which the aid program would be regularly assessed. AACES NGOs adapted a sub set of these indicators to apply to the three sectors of water and sanitation, food security and maternal and child health. These were the indicators utilised for reporting throughout the life of the program to provide comparability and consistent information around program focus and scope.
It was also understood that AACES was more than the sum of the parts. Towards this end assessment was undertaken at the program level as a separate process. Complementing this program-level review was ongoing research and examination of key areas of the program operation and regular review of areas such as partnership, value for money and gender inclusion. The program was also subject to independent mid-term review.

Taken together the focus on monitoring and evaluation across several areas was extensive (see Figure 1), providing a strong evidence base for AACES as it moved forward. Limitations were identified, learning recorded, progress towards results well documented. As a result, monitoring and evaluation processes proved to be a key element of ongoing program improvement and quality.

**FIGURE 1. SUMMARY OF AACES M&E APPROACH**
Finally, in line with international research on adaptive development programs, a significant process that supported program flexibility was the emphasis on peer learning and exchange. As part of their commitment to partnership, NGOs were supported to host field visits from other NGO partners, share their tools and documents and provide opportunities for others to learn from their expertise.

In practice the overall process took time to develop and was one that some NGOs struggled with, in part because of the diversity and difference between each organisation and also because of the wide geographical differences between programs. Over time, however, it appears to have become a powerful process to highlight best practice and areas for improvement across each of the NGO programs and further support the focus on learning and improvement.

THE AACES PARTNERSHIPS

Partnership was introduced to AACES in order to experiment with the way of working between DFAT and the Australian NGOs. The aim was to have a working relationship where ownership and responsibility for the program was equally shared between DFAT and the NGOs and where NGOs were able to trust both each other and DFAT sufficiently to be willing to collaborate, share resources and expertise and learn from both mistakes and achievements of each other.

WE WANTED A LEARNING MODEL FOR THE PROGRAM SO WE HAD TO DEVELOP A DIFFERENT RELATIONSHIP WHERE NGOS WERE ABLE TO BE HONEST WITH DFAT. WE HAD PEOPLE IN DFAT AT THE TIME WITH GOOD KNOWLEDGE ABOUT PARTNERSHIP APPROACHES AND WE UNDERSTOOD WHAT A DIFFERENT WORKING MODEL NEEDED TO LOOK LIKE. (DFAT)

Partnership extended and developed throughout the life of AACES. First it changed the way Australian NGOs worked together and then over time, impacted upon the way in-Africa partners were drawn into the program. In addition, it came to be an important characteristic of the different ways of working between NGOs and communities, local government and other stakeholders.

Partnership became many different things and operated in different ways throughout the program. But throughout all the examples explored in this review, common elements were identified, including respectful and mutual ways of working and a focus on using the strengths available through working with others.34

Partnership did not happen naturally or easily. Building on previous experience it was clear that partnership that led to a different way of working would require specific processes and practices that would lift both DFAT and NGOs out of their normal ways of engaging. To this end the design process included considerable discussion around principles of good partnership and the specific behaviours that would be associated with these principles throughout the life of AACES implementation (see Annex Three). This grounded principles of mutual accountability, transparency and communication into specific actions that would apply for this program. Reflecting this, a formal partnership agreement was signed between the 10 Australian NGOs, a number of the in-Africa partners and DFAT that represented high-level commitment from all the organisations to the agreed practices.

TOOLS

Particular attention was given to shared decision-making including the agreement to have a Program Steering Committee (PSC) where each NGO and DFAT would enjoy equal representation and therefore would share responsibility for program decision-making and control.36 Other procedures developed included communication and information protocols and processes for addressing grievances and disagreements between NGOs and/or between NGOs and DFAT.

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34. A survey conducted into partnership indicated that by 2013, AACES partners identified mutual respect, collaboration and trust as the most important principles guiding their way of working. People compared this favourably to the experience of “partnership” in other settings (ACBF (2013), “How AACES Partners Work Together”, Partnership Survey Report, May).

35. Review of the SINPa program revealed that attempts at partnership arrangements between Australian NGOs and DFAT had had limited success. MTR of that program indicates that it was difficult to encourage NGOs to work together and even when some cooperation was achieved, this still excluded DFAT. Further, that the programs stayed focused on SINPa projects and did not, as intended, extend the learning more widely. More recent review of the AMENCA 2 program has revealed a tendency by the NGOs to work in silos with limited sharing and knowledge exchange.

36. Decision making in the PSC was determined to be through majority vote where consensus could not be achieved. In addition it was agreed that the roles of PSC chair and deputy would change annually, with each partner expected to take on these roles over the life of the program.
Having learning workshops taught us to be non-experts – it was mutual learning. This was nonthreatening. Especially the disability inclusive workshop, this framed the way of working across the whole program. Oxfam could take this to other regions and share. And the value for money work taught us to think collectively – it supported a sense of learning and experimenting.

Having an annual report on themes was useful, it bought people together. It helped people to move to a program approach. (Oxfam)

An important process that supported the development of good relationships was a series of bi-annual learning workshops that brought together Australian and in-Africa NGOs and DFAT representatives to explore program achievements, learning and challenges. These regular meetings developed into significant opportunities for sharing program strategy and learning between the partners. They included field visits to AACES NGOs working in a particular country. Responsibility for the meetings was shared between the different NGOs. In-African partners, in particular, identified this process as key to their increased understanding and engagement with AACES partnership.

Underpinning the operation of the PSC was the development of a series of working groups to address particular tasks such as annual reports, and ongoing communities of practice around the program focus areas of water and sanitation, food security, maternal and child health and gender. The working groups varied in activity and approach, but were practical ways for partners to collaborate and share their knowledge to support program and policy development. Together with the PSC meetings, the working groups were important for the partnership norms and behaviours to be practised and expanded.

An additional support introduced to the program was the Resource Facility (RF). This mechanism was tasked with assisting DFAT with logistical and administrative arrangements, freeing up DFAT program staff to focus on direct engagement with NGOs. It provided technical support and supported program-level assessment and reporting. The RF was managed directly by DFAT but in the spirit of partnership, became accountable to both NGOs and DFAT through the PSC. The RF accountability to both NGOs and DFAT was an unusual feature and contrast to the typical role taken by a technical or managing facility utilised by a donor. While Australian NGOs were initially cautious about the RF, and the RF had its share of challenges in its early days of operation, the consensus for this review was that the mechanism became a key process in supporting and facilitating the shared ownership and responsibility between the NGOs and DFAT.

37. The African Capacity Building Foundation (ACBF), an independent non-profit organisation, was contracted to provide management and technical support to AACES through a Resource Facility (RF). The RF was staffed by experienced African staff with expertise in stakeholder management, communications and administration. The role of the RF evolved over time. The initial terms of reference for the mechanism were very broad and over ambitious (particularly given the resources available to this area). Over time the RF was able to establish a specific set of roles that supported both DFAT and the NGOs to operate more effectively. It provided a wide range of practical services including logistical arrangements for biannual meetings, facilitation of annual program reports and practical support, particularly to African NGOs, across areas of documentation, research and other requirements.
The RF also managed an online information platform which was identified as a valuable resource especially for in-Africa partners. The platform operated throughout the life of the program beginning with the design phase and continues to contain an extensive range of program documentation, research and reporting. It has provided a tangible process of information exchange and transparency between organisations and operates as an active communication tool.

VALUE AND OUTCOMES

The partnership met different objectives for the various partners. DFAT has a wide range of needs around accountability and reporting and information flow. The partnership arrangement facilitated the responsiveness of the NGOs to these needs. NGO programs required flexibility and opportunity to learn and change their programs. In this partnership approach, NGOs could step away from being individual experts to become part of a wider system of combined expertise. The regular meetings, working groups and the online platform supported information exchange and opportunities for learning. In-Africa partners welcomed both the practical skills that were shared across these meetings and also the space to contribute. The RF played a particular role in enabling and supporting this mutual cooperation and learning.

However, the partnership process took time to influence and change the normal practice of many of the NGOs. While people identified a different working relationship with DFAT from early in the program, it clearly took time for all stakeholders, including in-Africa partners, to see value in this different way of working and change their behaviour.
Partnership evolved throughout the life of AACES, extending in various ways through the program. In-country partnerships experienced varying degrees of effectiveness. They appear to have been most successful when there were investments in formal arrangements to facilitate collaboration.

For example in both Tanzania and Malawi, AACES NGOs met together for learning and program exchange and in both cases were able extend their collaboration to include joint advocacy and policy engagement.

Malawi

Caritas’s partner CADECOM, CARE, WaterAid and AFAP’s partner Concern Universal organised a country-based partnership in Malawi. The partnership has encouraged joint advocacy activities at national level; for example, engagement in policy dialogue with the government and bilateral donors through the Water and Environmental Sanitation Network which is composed of NGOs in the water and sanitation sector.

AACES partners from Tanzania, Kenya, Mozambique and Australia interact with local health government officials, community health workers and members of a nutrition counselling group during a field visit in Kilindi district, Tanzania. Photo by Douglas Waudo / AACES Resource Facility

38. Research conducted by AACES indicated that effective partnerships that supported action required both clear agreements and structures for areas such as decision making and information flow, as well as respectful relationships where power is shared and people are willing to learn from each other. (AACES (2015), ‘Achieving Sustainable Results through Community Partnerships: Lessons Learned from the AACES Program in Kenya and Tanzania’, Program Research Study.)
Partnerships also flourished across countries through NGO networks, with different country programs able to cooperate regionally to increase learning as well as influence their international organisation.

Beyond this, various partnerships were developed between implementing agencies, communities and other stakeholders such as local governments. Significantly, NGOs reported that they focused on developing partnerships where they could see value. While partnership was introduced as an approach to DFAT/NGO ways of working, it spread throughout all the levels of AACES implementation as different organisations came to see the value of collaborative and respectful ways of working.

Partnership ensured that AACES was much more than the sum of its parts. The learning and cooperation between NGOs provided the basis for them to work together to share ideas and improve each other’s programs. They were also able to undertake joint advocacy and influencing. For example, Australian NGOs worked to influence and contribute to Australian Government policy. In-Africa NGOs cooperated in countries and across regions to influence national and regional policies. Communities were supported to influence local policies and to learn to work in effective relationships with government and other stakeholders.

Current development thinking emphasises the importance of alliances and collaboration to address complex development challenges. But, institutional identity tends to mitigate against alliances. Donors have their requirements and accountabilities; NGOs, especially the large international agencies, have

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funding and branding imperatives. Local NGOs and partners often compete for funds rather than finding space to work together. These and other requirements push such institutions away from cooperation and effective working alliances. In contrast, the partnership approach under AACES allowed alliances to develop and in some areas to flourish.

**PARTNERSHIP COST TIME BUT IT’S BEEN WORTH IT. WE WERE GIVEN A CHANCE TO ADOPT IDEAS WHICH STRENGTHENED OUR WORK. AACES GAVE US THE CHANCE TO BUILD THE PARTNERSHIPS WE NEEDED. AND PARTNERSHIPS STRENGTHENED OUR PROGRAM. (WATERAID)**

**POWER**

The AACES partnership model challenged traditional power structures between donors and recipients, as well as among recipients. While AACES did not start with a power analysis, in its adoption of a partnership approach it challenged the power dynamics that traditionally operate in donor and NGO programs.\(^{40}\) DFAT was willing to forego its traditional donor power in order to try to achieve more substantial results. This shift echoed through the program. While it took time, in-Africa partners reported a shift in power between themselves and their Australian counterparts. They felt empowered to speak out, adding to directions and ideas. This supported their ways of working with communities through approaches that focused on mutual strengths in those communities. It also shifted the way communities and NGOs were able to work with government and other stakeholders.

\[^{39}\] Partnership research indicates that effective working relationships require a commitment to share power and change the formal rules that govern behaviour. (Elbers, W. & Schulpen, L. (2013), ‘Corridors of Power: The Institutional Design of North–South NGO Partnerships’, ISTR, 24:48-67.)
DIVERSITY

The partnership approach also assisted with managing difference and diversity. AACES was developed with an assumption that there was value in including a wide range of different NGOs, their partners and a donor NGO, all with varying experiences and perspectives and strengths.41

Acknowledging that the context and proposed program were complex with many challenges, AACES deliberately sought to have a wide variety of activity from which there would be considerable learning and thus an increased likelihood of effective development outcomes.

This approach is in line with recent findings around how donor agencies can work more effectively in complex development situations.42

For AACES, the value of diversity, supported through a partnership approach, echoed through the program. It supported in-Africa partners to cooperate and enabled them to value the respective strengths of other agencies. It supported a focus on inclusion in communities, suggesting that a wide range of perspectives through engagement of women, young people and people with disability, for example, would add value to community action and strategies.

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41. Supported by research that points to the need for multiple experiments and strategies to address challenging development scenarios (Snowdon, D. (2012), ‘Seven principles of intervention in complex systems’, http://cognitive-edge.com/blog/7-principles-of-intervention-in-complex-systems/)

42. Recent research argues that donors need to fund diversity because it is local actors who are most likely to come up with appropriate responses to development challenges. Donors tend to fund organisations with which they are comfortable and familiar and this in turn limits their ability to engage with a wide range of different actors who might be able to contribute in innovative ways to change situations. (Sriskandarajah, D. (2015), ‘Five reasons donors give for not funding local NGOs directly’, The Guardian, November.)
INNOVATION

The partnership approach also fostered innovation. Specific support for innovation was included in the first two years of AACES, with extra funding made available for NGOs to partner on additional innovative programs. This fund generated two programs, both in Kenya, with ActionAid and World Vision working together as well as Plan and MSI.

The innovation fund that was available for the early years of the program supported collaboration between the ActionAid and World Vision offices in Kenya. Initially challenges were experienced in identifying common areas of interest and to determine the expertise that each partner offers …. Ultimately a very successful initiative that focused bringing together youth to identify their needs and affect solutions was implemented drawing on World Vision’s expertise on reproductive and maternal health and ActionAid’s on economic empowerment. The tools developed have been more widely applied in AACES. (Action Aid end of program evaluation)

PROGRAM EFFICIENCY

Partnership in AACES increased transparency and communication between all players. This reduced the amount of energy and space usually required to ‘repackage’ programs to be acceptable to donors and NGO management systems. Respondents reported that this minimised the time and negotiation typically taken in a donor-funded program to explain program difficulties and changes to the donor, thus leading to more efficient decision-making and program management.
Normally a donor just bases their contract on agreements and achievements stated in the log-frame and validates them through reports rather than interactive communication and close partnership. In such cases, learning for both is at a minimum. In this program, DFAT provides that fund but also takes part of the responsibility toward the achievement of the objectives. We know that other donors also believe in capacity building and provide the resources but they do on request rather than mutual understanding on the need, it is also expensive since they are not part of the team to identify the necessary capacity that is required. But when I consider this program, AACES uses cost-effective systems like connecting organisations with proven approaches, closely discussing with NGOs and providing alternative options. Normally other donors respond to your capacity building requests which are reactive while AACES is more proactive and also involves NGOs to identify capacity gaps.

**WORKING IN PARTNERSHIP IS CRUCIAL TO ACHIEVE MEANINGFUL DEVELOPMENT. PARTNERSHIP IS VERTICAL OR HORIZONTAL. BOTH ARE VERY ESSENTIAL TO FACILITATE DECISION-MAKING, AVOID CONFUSION, FOR EFFICIENCY AND TO HAVE GOOD COMMON UNDERSTANDING. AACES PARTNERSHIP MODEL IS ONE OF THE RARE APPROACHES IN TERMS OF DONOR RECIPIENT RELATIONS. THIS RELATION HAS GREAT IMPACT ON THE ACHIEVEMENT OF THE PROGRAM OBJECTIVES.**

*IN-AFRICA PARTNER*

In addition, making use of each NGO’s expertise and knowledge reduced dependency on external advisors and consultants leading to increased program savings.

For a specialised agency we can identify what we bring, but need to work with others to address all the needs and community. We looked at what partners were doing in areas and formed alliances to work on issues. (MSI)

We had MSI as a partner. They trained health workers on family planning. So we were able to leverage on their expertise. Plan was good on disability and ActionAid on food security. So we could use all these partners and their expertise. *(World Vision)*
THE AACES PEOPLE

During implementation, it was clear that AACES was succeeding, partly due to the skill and commitment of NGOs and DFAT staff working on the program. Most of the staff brought with them years of hands-on expertise and experience and knowledge about civil society organisations (CSOs) and community focused development. This was critical as AACES experimented and evolved.

DFAT staff in both Australia and Africa brought long-term experience in complex development work and civil society engagement. They were particularly able to understand and work through different processes such as partnership. They were comfortable engaging with NGOs and their ways of operation. In particular, DFAT identified, understood and supported the need to share power and work in ways to facilitate an effective partnership approach.

Significantly, senior-level management in DFAT supported locally engaged staff in this role and provided organisational mandate for staff to work in a partnership approach.43

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Certified executive coach, partnership broker and public accountant

Previous employment with international NGOs and the private sector

At the start of AACES I drew from past experience to inform my role and identify the points of intervention. Over time I started to understand that I was working as an internal partnership broker. I had to move between using relationship skills, problem solving skills and technical skills in assessment and program management, to bring the right combination into each situation. I had to move between communicating the vision and purpose of AACES within DFAT and the NGOs and focusing on administrative and technical issues.

It was important to address the implicit power imbalance between DFAT and the NGOs. But also I had to work to draw in the in-Africa partners and support their increased power and participation.

I was strongly supported by my senior management who gave me the authority and responsibility to manage the program. At the same time I had to negotiate with my DFAT colleagues to ensure that the partnership approach was maintained throughout the program.

Conversely, I needed to maintain transparent but clear communication with the NGOs so that they were aware of DFAT requirements and their responsibilities to assist me in meeting these requirements.

43. Recent research identifies that effective innovation in international development requires strong trust in local staff and providing them with the freedom to bypass processes designed for a command and control approach to program management. (Quaggiotto, G. (2016), ‘The era of development mutants’, http://www.nesta.org.uk/blog/era-development-mutants)
NGOs committed experienced and often senior staff to management of this program. For some of the smaller Australian agencies, AACES was one of their major programs generating considerable attention within their organisation. Larger NGOs were fortunate to have experienced people in position, although sometimes these people were tasked with multiple responsibilities.

In-Africa partners brought high quality skills. Interviews for this review indicate that people were attracted to working with AACES because they recognised its unique approach and potential for effective change. It was important to many of these people that the program was working to deliberately shift and share power between participants and that it was focused on results not predetermined contractual milestones.

AACES invested in its people. Every six months, AACES partners (Australian NGOs, In-Africa partners and DFAT) would meet to share lessons and learn from each other through their experiences. This led to skills development and training in a wide range of program areas such as social inclusion, monitoring and evaluation and strengths-based approaches. AACES demonstrated in practice the principal that good development work supports mutual development, including that of staff and implementers.

**DAVID NONDE MWAMBA, PROGRAM MANAGER, OXFAM IN ZAMBIA**

**MSC Public Health, Higher Diploma Civil Engineering, Post Graduate Diploma Water Supply and Sanitation Development, Diploma Water Engineering**

**Previous employment with Government, Donors, INGOs, Local Authority and Commercial Water Utility**

**Significant experience in participatory community development, coordinating work between government agencies, local authorities, private companies and civil society organisations (including community structures)**

From the beginning of AACES I was clear that I did not want to do things in the same way. I’ve learned from my experience that digging a borehole or building a toilet won’t solve problems for the community. I had confidence from my wider experience that in this program we needed to be focused on people and what was changing in their lives.

Oxfam Zambia was willing to support me in this new type of thinking. From the beginning of the design phase I realised that we had the opportunity to work differently and that I could bring in both my technical and development skills to work with community as partners; to give them control.

I’ve had experience in working in advocacy and capacity development and beyond my technical expertise in water and sanitation, I was also able to draw upon training in human rights, gender inclusion and child protection. All of these skills were useful in AACES. But I have also learnt from this program, AACES exposed me to disability inclusion. This was the first time I have understood how important it is to include people with disability and I wish I had known this many years ago.

AACES breathed life into my passion for inclusiveness, participation and justice in development processes!

Conversely, I needed to maintain transparent but clear communication with the NGOs so that they were aware of DFAT requirements and their responsibilities to assist me in meeting these requirements.
The focus on learning and space to make, and learn from mistakes provided staff with opportunity to change and grow their expertise. Respondents to this review pointed to several learning opportunities and the value in being able to then explore how to operationalise that learning in practice. Staff were also encouraged to share their expertise and experience with others.

**TEAMS LOVED AACES. PEOPLE HAD TIME TO DO THINGS COMPARED WITH OTHER PROGRAMS WHICH WERE COMPLIANCE FOCUSED. THEY WERE ABLE TO FOCUS ON OUTCOMES. AACES TEAMS HAVE VERY STRONG STAFF AND THEY ARE VERY HIGHLY MOTIVATED. (EXTERNAL REVIEW CONSULTANT)**

AACES inducted new people. New staff were inducted into the program ways of working and important principles by their peers. Responses for this review show that stakeholders new to the program started with various perceptions but these quickly evolved to become a more coherent and shared understanding of what AACES was trying to achieve and how.

**ERNEST ETTI, PROGRAM COORDINATOR, AACES RESOURCE FACILITY**

**MBA Business Administration, Diploma in Economics, Bachelor of Arts, Diploma Monitoring and Evaluation**

**Previous employment in the private sector and government**

Currently employed by the African Capacity Building Foundation, an independent non-profit organisation established to build human and institutional capacity in Africa.

Building personal relationships in AACES was really critical. It was a big achievement getting the trust and good relationships with everyone, especially the Australian NGOs. The resource facility became the ‘oil’ in the program.

It was also important that I had the right technical skills, be able to program manage, prioritise, coordinate, and being open to ideas and suggestions. There was no model for how this resource facility was meant to operate, we had to learn and improve as we went along.

It helped that I had a strong monitoring and evaluation background and that I’ve worked as a program officer in advocacy work with civil society. I was also able to draw on my skills in writing and communication.

It felt like I needed a lot of everything to be able to do many things as AACES evolved.
The program was characterised by several themes and the cross-cutting areas which were advanced as key components of good quality development practice. These were taken up initially in different ways by NGOs but over time through sharing and cooperation came to characterise AACES as a whole.

Strengths-based approaches

A proposal in the original program design was for NGOs to consider the use of strengths-based approaches (SBA) in their analysis and implementation approaches. This focus was provided in part to broaden the analysis utilised by NGOs, moving them away from simple problem analysis to systems and other change strategies better suited to complex development situations.

Significantly, the smaller Australian NGOs and their partners were the initial leaders in the utilisation of this approach. These agencies drew from SBA and related approaches, such as endogenous development, in their original design and explored the application of these approaches from the beginning of their programs. The learning, shared across a five-day workshop on SBA early in the program life, and promoted further through NGO field visits and information sharing, was influential across the whole program. The approach became a significant driver of the positive change observed in communities particularly when aligned with a focus on empowerment and rights-based approaches.

44. A strengths-based approach and associated approaches, such as endogenous community development, asset-based approaches and locally controlled development, provide a foundation for increased local control and local determination of development strategies. These approaches closely align with current thinking around effective development, using local knowledge to inform and shape strategies for change (Overseas Development Institute (2014), Doing development differently: what does it look like?, Overseas Development Institute, London).
We have not used SBA before. It changed the whole relationship with partners. Now we’ve introduced this approach to all our African programs. We are seeing the changes and the differences where people are not dependent. (Caritas)

Its use has supported communities to operate independently and encouraged them to take an inclusive approach, including drawing on the strength of young people, women, PWD and others.

Communities have been better positioned as a result of this approach to manage their own development into the future, devising their own solutions to local development problems. Strengths-based approaches to program implementation have supported communities to develop the confidence to be able to negotiate with external groups including government and other donors.

Due to the flexibility of the program, in Zambia the program identified 20 women and trained them in construction, skills which were traditionally considered manly. This helped challenge deeply rooted gender beliefs resulting in acceptance of women’s involvement in community activities which are predominantly executed by men. (Oxfam)

Results suggest that communities working from this approach are having increasing success in their negotiation with duty bearers and in attracting supports and resources from elsewhere. Further, that local governments in some locations are identifying these communities as more resourceful and better able to negotiate for government attention.

In the Caritas project, having witnessed the achievements of the community in Endashang’wet (Tanzania) in rehabilitating and expanding its own water supply system, the Rural Energy Agency in Tanzania provided almost A$100,000 to connect electricity to the Endashang’wet water pump. The Karatu District Council, likewise encouraged, provided a further US$950 to the Endashang’wet Village Government for development activities. (Caritas)
RIGHTS OF PEOPLE WITH DISABILITY

For the longest time, people with disability (PWD) have faced discrimination in Masheerdez village in Zimbabwe, which has prevented them from accessing basic health services and participating in community development initiatives. The community has excluded PWD from communal life; some have even been locked indoors by their guardians who perceive them as shameful to the community. Plan International has promoted a supportive environment for PWD so that they can access maternal and child health services and have greater influence and engagement with decision makers.

Through Plan’s support, a community-based rehabilitation committee, comprising five PWD, has been formed to advocate for the rights of PWD as well as address stigma and fear about disability.

‘We began to conduct door-to-door visits targeting PWD and their guardians. Slowly they began to attend meetings and participate in community activities. We also visited people sometimes to counsel them and at times to empower them with knowledge on services available to them and how to demand their rights. Some parents and guardians allowed us into their homes to see and counsel PWD who had been hidden for fear of stigma.’

Hearing about the changes taking place in the community, representatives from the Department of Social Services and the Rehabilitation Department of Chipinge Hospital have visited the village. In partnership with Plan they are helping to set up more community-based rehabilitation committees with representation from PWD. (Plan)

RIGHTS OF WOMEN FARMERS

ActionAid has been working with smallholder women farmers facilitating the transformation of women’s groups toward collective action that calls for changes to policies and service delivery. Two examples of umbrella organisations are the Women’s Association of Kitui County (WAKC) in Mwingi, Kenya, and the Rural Women Development Link (RWODEL) in Katakwi, Uganda.

WAKC and RWODEL have utilised different strategies to make change. On 10 December 2013, WAKC – with ActionAid and other partners – brought together more than 1,000 rural women who proudly marched through Kitui town calling for their involvement in development. They also displayed placards bearing women’s dreams and aspirations before settling in the stadium, where they outlined their demands to County Government representatives. RWODEL have also successfully catalysed change through impressive lobbying and advocacy. Most recently they produced a simple report with photographs of dams and used it to petition local officials to take action to improve the volume of water they can hold for agricultural production by de-silting them. The Government had neither prioritised nor provided resources for de-silting, yet had committed to improving agricultural production. As a result, these officials have now committed to identify and allocate resources for the progressive de-silting of the dams.

RWODEL also overcame inequities in the National Agriculture Advisory Service. In reading the translated guidelines and discussions, members found the service classified farmers into tiers with those who are ‘market-oriented’ receiving the most inputs. Women were effectively excluded from this tier as a normal selection criteria was to own more than five acres of land. However, the women in the group had the confidence and tactics to attend an allocation meeting and nominate themselves. As a result, for the first time in local Katakwi history, 12 of the 20 farmers in the market-oriented tier were women. These 12 women farmers have used the trees, seeds and livestock inputs they received to improve their production and household consumption. (ActionAid)
**GENDER**

The AACES design focused on inclusion of women as a cross-cutting theme. Throughout the design, women were highlighted as a group likely to be excluded from program benefits without additional focus on their needs and participation. In response, all NGO programs referenced this focus. The high quality of AACES in this area has been identified in DFAT annual performance assessments as well as through recent independent assessments of gender empowerment in the Africa aid program.45

**OUR MAIN FOCUS IS ON ADDRESSING POWER RELATIONSHIPS IN GENDER. WE USE A TOOL CALLED ‘SOCIAL ANALYSIS AND ACTION’ THAT ADDRESSES NORMS THAT LIMIT ACTIONS OF WOMEN. WE ARE SEEING GREAT CHANGES THROUGH THE USE OF THIS TOOL AND OTHERS ARE NOW COMING TO LEARN.** (CARE)

However, as the program moved through implementation it became clear that some organisations had more expertise and experience than others about how to support women’s empowerment. To promote gender equality across AACES, those NGOs with more experience in effective women’s empowerment shared both strategies and tools. This included formal workshop presentations as well as opportunities to share tools and visit NGO work.

This sharing of experience resulted in several of the AACES NGOs undertaking further analysis and assessment of their own gender practice. The flexibility of the scheme and its focus on improvement supported these agencies to develop their approaches, further contributing to an improvement in gender empowerment outcomes.

The AOA MCH project began with gender awareness raising among staff, and transitioned into application of tools within communities to increase understanding of and commitment to gender equality. A participatory qualitative evaluation at project conclusion highlighted men taking on some of women’s ‘traditional’ duties, women being more actively engaged in decision-making and elected to leadership positions, along with increased harmony and productivity in the home, as some of the outcomes. (AOA)

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The emerging results from individual NGO evaluations indicate significant changes in gender relations and greater responsiveness of duty bearers to women and other marginalised groups. There have been particular highlights with women being supported to take up leadership positions and represent their community both nationally and internationally.

WaterAid’s AACES project is addressing the dire school WASH situation in Tanzania and contributing to a reduction in the high levels of school absenteeism.

National school WASH guidelines and toolkits have been developed through community consultation and in collaboration between NGOs and the Government of Tanzania.

Efforts have focused on menstrual hygiene research, adapting models and constructing school WASH facilities in rural and urban areas of Tanzania. This year, more than 8,000 pupils, 4,400 of whom are girls, have been provided with new toilets in 21 schools, which are private, clean and have menstrual hygiene facilities, a new reliable water supply, hand-washing facilities and hygiene education.

Some of the impacts of the menstrual hygiene work include increased girls’ attendance and confidence at school.

The project is testing and refining the models for school WASH facilities. This includes infrastructure, hygiene behaviour change and maintenance arrangements to ensure facilities are sustainable. It is expected this work will inform national guidelines so that all children in Tanzania benefit from improvements to their school WASH facilities and services (WaterAid).

Considerable learning and experience has been generated through the AACES work on gender inclusion and women’s empowerment which in turn has been utilised for wider influence.46

45. For example, Plan Australia has been able to use the Plan AACES project as an example of transformative gender programming, which is the aspiration of the Plan gender policy. This has included sharing the Plan AACES project with Plan International.
DISABILITY INCLUSION
The program design identified inclusion of people with disability (PWD) as a priority for AACES. This was in line with DFAT policy and NGO designs acknowledged the importance of this focus.

However, some Australian NGOs and many in-Africa partners had little experience of how to practically include PWD and how such inclusion could be combined with an empowerment approach. In response, a thematic workshop was conducted around this area early in the life of AACES (an important example of the way expertise in some agencies was utilised for whole-of-program benefit). NGOs identified this as a significant turning point, challenging them to consider how they would work differently and providing the practical ideas and examples that enabled them to shift their program approaches. In particular, it promoted the idea of partnerships with Disabled People’s Organisations (DPOs) which in turn has becomes a strength of various NGO programs.

There was significant interaction between the emphasis on SBA and rights-based approaches and the focus on inclusion. Bringing the elements together seems to have provided a basis for action in alliance with PWD. AACES has produced significant learning material about good practice for disability mainstreaming. This has been shared widely through formal publications and international networks.

INNOVATION
As noted, AACES began with strong attention to innovation, providing additional funding for NGOs to work together around innovative practices. While these projects demonstrated the potential for new ideas to emerge from within AACES, limited resources meant that this additional funding was not available for subsequent years.

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48. For example, Oxfam has worked on how to improve monitoring and evaluation that contributes to disability inclusion. The report on this work has been presented at the Australian Evaluation Conference. Plan’s experience in AACES on disability rights and inclusion has also informed a Plan Australia good practice note on disability inclusion.
Pauline (left) together with Marie Stopes Kenya staff in Kilifi, Kenya. AACES is promoting disability-inclusive development, removing physical barriers and providing services to people with disability, particularly women. Photo by Marie Stopes, Kenya.
Inclusion is now a big feature of program. People with disabilities can walk into clinics and access services. We worked with the National Council of People with Disability to identify the opportunities to better serve their members. But it does take time. We would like to see this continue in order to build its sustainability. (MSI)

AFAP has worked with two local associations of people with disability, the Association of the Blind and Partially Sighted of Mozambique (ACAMO) and the Network of Associations of Persons with Disability (FAMOD).

Following this collaborative partnership, ACAMO identified the need to focus on advocacy for disability inclusive education, which lobbies for national teacher-training curriculum at primary and secondary level to include Braille. For FADMOD, the partnership resulted in sign language training for 20 teachers and eight FAMOD staff members. This was provided in collaboration with the Ministry of Women and Social Action. This has been a useful platform from which to influence government policy, achieving significant changes with little difficulty.

The proposal-writing skills provided to FAMOD have enabled the association to submit a successful application for an income-generating activity in the form of a wheelchair production and appliance manufacturing unit. The project manufactures wheelchairs locally while providing technical skills to ensure that interested participants continue to gain employment and confidence. The wheelchairs are sold to the government and private individuals with proceeds reinvested and used to purchase spare parts and pay for the salaries of those working on their production (AFAP)

However, innovation continued to be a feature across the program. An important motivator appears to have been the program flexibility and emphasis on learning, as well as the opportunities provided to observe the work of different organisations.
Through AACES, MSI was able to innovate their service delivery model to become more inclusive. In Tanzania, the traditional outreach model was adapted to focus on young people, extending from a one day to a two day visit with activities designed to engage and educate young people about their reproductive health. When AACES began, 37% of MSI outreach clients were young people. This increased to almost half (47%) by the end of AACES (this compares to 31% for other outreach teams at the coast). (MSI)

In Zambia, community-based enterprises were established by Oxfam to conduct manual drilling, a cheaper and simpler way of drilling bore holes. This innovation resulted in increased reach as it was cheaper than conventional drilling and it also resulted in lasting empowerment for communities who were now able to use their skills for their livelihood. (Oxfam)

The government approached WaterAid for support to develop the water and sanitation plan for Ntchisi district in Malawi. This wasn’t in our original design but when government approached us to help the flexibility of the AACES program allowed us to support them. This is now supported ongoing service improvement for the communities in this district which includes AACES project area. (WaterAid)

The focus on results and change for marginalised groups, together with encouragement for flexibility and adaptation, appeared to contribute to adaptation in programming throughout the life of AACES.
VALUE FOR MONEY

AACES was designed at a time of increasing interest in DFAT in formal value for money (VfM) assessments. DFAT therefore proposed from the beginning of Year One that there would be systematic attention to this area for the life of the program.

A targeted focus on VfM was a new area for NGOs. While they were confident that they provided a cost-effective service, few had formal systems in place to provide comprehensive VfM assessments. As a result it was a challenging area for all involved, not least because DFAT was still developing its own position and policy.

DFAT and NGOs used the partnership approach to come together to explore a range of different possible methodologies and agree an overarching framework that would characterise their individual approaches. Notably, this framework also informed the official DFAT VfM policy.

The AACES mid-term review highlighted the focus being given by each NGO at that time to VfM. It noted that there was still slow progress around presenting rigorous VfM assessments in most organisations. The end of the program finds NGOs more confident in addressing this topic with organisations presenting comprehensive value for money reports.

To evaluate the impact of Family Planning (FP) services, MSI has developed the Impact 2 model, an innovative tool that converts FP services into high-level health and demographic impacts. Using this tool, MSI estimates that the FP services provided in the past year through AACES in Kenya and Tanzania have had the following impacts:

<table>
<thead>
<tr>
<th>Impact</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal deaths averted</td>
<td>145</td>
</tr>
<tr>
<td>Child deaths averted (due to improved birth spacing)</td>
<td>1,392</td>
</tr>
<tr>
<td>Total Disability Adjusted Life Years (DALYs) averted</td>
<td>126,696</td>
</tr>
<tr>
<td>Unsafe abortions averted</td>
<td>8,343</td>
</tr>
<tr>
<td>Direct healthcare costs saved</td>
<td>A$5,431,272</td>
</tr>
<tr>
<td>AACES program costs</td>
<td>A$1,560,106</td>
</tr>
<tr>
<td>Return on investment</td>
<td>A$3,871,166</td>
</tr>
<tr>
<td>Unintended pregnancies averted</td>
<td>61,158</td>
</tr>
</tbody>
</table>

This was based around the four ‘Es’ approach, that is giving attention to economy, efficiency, effectiveness and equity, drawn from research by the Australian Council for International Development (ACFID (2012), ACFID and Value for Money, Discussion Paper, September). The AACES NGOs then also added a fifth ‘E’ around ethics.

Agencies have used both quantitative and qualitative methodologies and most have drawn upon external independent expertise to validate and ensure the quality and rigour of their VfM assessments.

The work done in this area has been identified by many of the NGOs as significant and one which is influencing their approach to VfM assessment more widely. It provides a rich learning pool for DFAT and the wider NGO sector.

**AACES RESULTS**

As AACES draws to a conclusion in June 2016, each of the 10 NGO projects have been subject to a formal evaluation. Each of these evaluations has been reviewed to assess rigour and methodological quality. Each appears to provide good quality evidence-based assessment of program outcomes and information on any relevant limitations or lack of achievement.

**OBJECTIVE ONE**

The first program objective focused on building sustainable access to service for marginalised groups. This was through a focus on the rights and strengths of those people and also through engagement with the leaders, duty bearers and service providers. Change was expected for people and for groups and communities. Change was also required in the behaviour of local governments and other duty bearers.

At the mid-term review (MTR) of AACES, there was strong indication of positive change emerging for poor women and other marginalised groups, such as PWD and people marginalised because of geography and economy. However, that review identified a lack of evidence that sufficient change was being achieved with the supply side of service delivery (local and national government and other providers such as private sector) and how this engaged with the needs and aspirations of marginalised groups. The MTR noted that change in this outcome area was required for AACES to achieve its first objective.

A review of the 10 end-of-term evaluations indicates the following end-of-program results.

51. Each of these evaluations has been reviewed to assess rigour and methodological quality. Each appears to provide good quality evidence-based assessment of program outcomes and information on any relevant limitations or lack of achievement.
INDIVIDUALS AND HOUSEHOLDS

Change for individuals and households are widespread and impressive. Access to services in the three areas of food security, water and sanitation, and maternal and child health has improved in all locations. Better services are now available for legal rights and prevention of gender-based violence. Many of the independent evaluations point to the comparative significance of these results, noting that they are higher than those achieved by comparative interventions in similar areas.

AGATHA YOSEFE IS A 46-YEAR-OLD MOTHER OF TWO FROM NAMKUMBA VILLAGE, DOWA DISTRICT, IN MALAWI. SHE PREVIOUSLY HAD NO ACCESS TO SAFE DRINKING WATER.

She says: “My community and I used to share drinking water with livestock from shallow wells; the water was unprotected; diarrhea, bilharzia and abdominal complaints were the order of the day, especially during the rainy season.” This is now a thing of the past. Cases of water-borne diseases in the area have reduced as per the Ministry of Health surveillance reports (December 2015) for the area which indicated that only 2 people out of 10 suffer compared to 6 out of 10 before the project. Over 11,250 people are accessing safe and clean drinking water within the recommended radius of less than 500 metres.

The village was also affected by lack of sufficient food with families experiencing up to six months of food gap. This was due to poor rainfall and poor farming practices resulting in low food production. Through one of its interventions, AACES introduced the farmers to conservation farming and trained them on the use of modern agricultural practices. This resulted in an increase of food production. For Agatha, the farm production has increased from 12 bags of maize per farming calendar to 84 bags of 50kg on the same piece of land of 1 hectare.

To further improve the lives of the community, members were introduced to the culture of savings through the use of the Village Savings and Loans (VSL). Agatha belongs to one of the over 400 VSL groups currently in operation in Dowa. Through her savings and loans borrowed, she has managed to buy livestock. These are a source of food and also a source of income through the sale of some of the animals.

The effects of climate change in the Southern African country of Malawi have affected rainfall distribution, impacting greatly on subsistence farmers who have since time immemorial depended on rain-fed agriculture. After attending the strengths-based approach session Agatha and her entire community identified an economic treasure in the wetlands which were lying uncultivated in her area. Agatha is one of the 123 households participating in small-scale irrigation in the areas, growing a variety of high value crops. “I now don’t solely depend on rainfall, I have a small plot where I cultivate vegetable and maize which I sell, further increasing my income base,” says Agatha.

Agatha continues to applaud the AACES program and proudly says “the introduction of strengths-based approach in our village was a turning point for us; after the community came up with their vision, my husband and I went home and came up with our own vision. On top of the list was a decent house, which we now have”. In Namkumba village, 60% of the households have constructed better houses following the project interventions and the mind shift in positive thinking and taking up responsibility for economic and livelihood transformation. “We have realised that there is so much we can do on our own and that when we do it for ourselves; AACES has even opened doors for government programs in this village which we did not have five years ago,” says Agatha.

When Agatha felt she didn’t have access to education and all hope was gone, the Adult Literacy Project was started. She is now learning to read and write.

As a member of the Gender Action Forum (GAF) Agatha has now gained confidence to a level that allows her to now claim back her chieftaincy; she is now one of the few women traditional leaders. “Participation in this project has given me a voice; I am economically empowered and I also feel socially empowered. I stand with vigour to carry out my roles as a woman traditional leader.” (Caritas)
It is significant that all of the evaluations are able to detail both outcomes (that is, people served) and the impact (what this means for people). In line with the broader AACES experience, this suggests an ongoing focus on what has changed for people rather than simply what the program has achieved.

COMMUNITIES AND GROUPS

Beyond the changes identified for people and households, all the evaluations point to changes in community and group capacity and dynamics which are in line with the AACES outcomes for Objective One. That is, communities and marginalised groups are now better able to analyse their situation, more able to negotiate with duty bearers, operate more inclusively and continue to work for change in this situation.

Underpinning these effective outcomes has been a focus on coalition building and linking people together across diverse backgrounds.

There are some limitations identified. Some programs operate in such remote and geographically disadvantaged areas that local government services are largely non-existent. In these situations, strategies have continued to focus largely on community self-help and local mobilisation.

REFLECTING PLAN’S PROJECT DESIGN, STAFF UTILISED STRENGTHS-BASED, RIGHTS-BASED AND CULTURE IN DEVELOPMENT (CiD) APPROACHES IN THEIR ENGAGEMENT WITH THE COMMUNITY.

The CiD approach starts by appreciating local cultural norms, values and systems already in existence. It then builds on positive aspects of culture as a resource in community development, harmonising local (indigenous) and modern development approaches.

The Maronga community decided to use the bandhla cultural practice, which traditionally involved men meeting together to discuss issues affecting families and the community. In Maronga, bandhla was extended in two ways, by including women and young people in the meetings and by discussing the promotion of women’s rights and social inclusion. From March 2013 onwards, the male gender advocates facilitated monthly meetings, which actively engaged men.

By June 2014, there was a substantial reduction in gender-based violence (GBV) in Maronga. Assistance to women experiencing domestic violence is now available from community volunteers and the village court. Disputes in the family and among community members are able to be resolved through mediation by community volunteers, instead of escalating into violence. There is less acceptance of GBV due to knowledge of the law, sanctions by the village head and referrals to police and other services outside the community. (Plan, Zimbabwe)

In other contexts, the NGOs note that the space for advocacy and influencing work, holding local duty bearers to account, is limited. In such situations, strategies have focused on practical areas of community concern where they can collaborate with local authorities rather than directly advocate.
Hostel supervisor and young student in Afar region in Ethiopia. Photo by: Kate Holt - Arete, Anglican Overseas Aid.
GOVERNMENT AND OTHER DUTY BEARERS

Building on the findings from the MTR, particular attention was given to the degree to which the AACES program has been able to impact on power structures and decision-makers who are likely to determine the sustainability of access to services.

Alongside the evidence of increased community activity outlined above, the end-of-term evaluations point to a consistent focus on community relationship building with local government and other power holders. In some situations this also extended to national level engagement. Results in the evaluations show varied but significant outcomes resulting from this relationship building. While not all NGOs were able to achieve the same degree of change, the majority of the programs show evidence of considerable change in marginalised groups’ capacity to engage and in duty bearers’ responses, indicating a strong likelihood of ongoing improvements in access to and delivery of services.

The evaluations show how NGOs have used different approaches and strategies. Largely, this reflects the development of approaches appropriate to the local context acknowledging, as above, that in some locations there were restrictions on the space for direct advocacy and in others, considerable work needed to be first undertaken with partners and communities before relationship building with local authorities could commence.

Our experience shows that both women and men farmers can work with a demand driven approach. Women farmers can be empowered to ask for assistance from duty bearers, but in our experience violence and economic issues also have to be addressed. And solutions need to be context specific. Working to change government policy is not simple and you need to take various approaches. (ActionAid)
Further to this, NGOs started at different points. Oxfam in South Africa, for example, had considerable existing capacity and experience in mobilising partners to undertake influencing work. It had recently undertaken research in advocacy work in Africa and was therefore well positioned to build on this and extend this learning into its program in Zambia. Caritas was less directly experienced in promoting advocacy but through its experimentation with SBA it moved quickly to a situation where communities felt empowered, capable and ready to construct strategies for dialogue and engagement with local government. In turn, local governments were impressed by community strengths and engaged more readily.

There were clearly a number of quite sophisticated approaches being utilised that went far beyond simply bringing demand and supply together. Programs experimented with building relationships, undertaking dialogue, having various means of communication and utilising strategies that brought different stakeholders together to solve problems. These approaches align with what international research identify as critical steps to ensuring sustained services.  

Some particularly creative approaches were developed. For example, WaterAid in Ghana was able to work through the local socio and cultural meanings around water and hygiene in order to create a shared set of perspectives about these services between citizens and leaders. MSI worked with the private sector through a social franchising model which enhanced their capacity to provide sexual and reproductive health services alongside government. ActionAid and others identified that the marginalised people benefitted from coming together in groups and coalitions as a precursor to effective engagement with governments. Plan aligned with broader in-country coalitions in Uganda to increase the impact of advocacy on law reform for marriage, divorce and sexual offences and on the implementation of the Domestic Violence Act.

The evaluations also highlighted the limitations of what is possible through this approach. For example, while in all programs access to services had increased, other constraints have emerged. Many of the programs worked to link communities and groups with other technical providers to address new and emerging problems, but it was clear that there were limits to what AACES was able to achieve within its five-year lifespan.

At the national level, effective work with government has been enhanced through the partnership approach allowing agencies to collaborate. There are now several examples of effective national-level collaboration between the various NGOs.

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52 As noted in the AACES mid-term review, comprehensive study of effective provision of public services in African contexts indicates that rather than a simple approach to building demand and supply, what is required is building effective relationships between actors on both sides of the divide. This is far more than simply joining up demand and supply sides and has to do with building active engagement by all local stakeholders in joint problem-solving. (DFID (2012), ‘Africa Power and Politics Program’, Policy Brief 09, October.)
NGOs have analysed government policy producing public reports and sharing information with a wide range of stakeholders.53 In other locations there has been direct lobbying to change national government policy which in turn will have wider implications for communities and marginalised groups.

Results show changes in government policies and in some cases national government practice.54

However, given the short life of AACES, its influence at national government level was inevitably not extensive. Several of the NGOs and their partner agencies have noted that it took considerable time for them and communities to learn to work in political ways. Nevertheless, the successes to date point to some effective strategies being generated which in turn could provide important lessons for both donors and civil society going forward.

Finally, there were also challenges identified which were beyond the control of communities and local government and in some cases even national government. In a number of locations the impact of climate change was identified, together with changing economic conditions, as overarching constraints on development. These issues were not ignored under AACES and in some situations were taken up as research and policy areas under objective two. However, the space for program action was limited, raising further questions about how this program might have evolved if the opportunity to work with an expanding aid program in Africa had been realised, linking levels of intervention and attention.

The Kenyan Government has a ban on Traditional Birth Attendants (TBAs). We all support that women should go to Skilled Birth Attendants to give birth, but banning TBAs is a problem because it stops us from engaging with and educating them. So our partners, the Mothers Union of ACK, the Nossal Institute for Global Health, along with the African Medical and Research Foundation (AMREF), got funding from the Australian Government [Australia Development Research Awards] to do a two year study into this issue, and they wanted to launch their report at the same time we were about to launch the AACES annual report. So it made sense to link the two together.

The outcome was that we had over 200 people at the joint launch, and got good media coverage. The Head of AMREF was there, we got the Archbishop of the Anglican Church to speak, the Australian High Commissioner spoke, and there were all the Kenya AACES partners with their displays. There was a presentation on the research report and its findings. The Ministry of Health was represented and what they heard were all these voices saying that your ban on TBAs was not the best way to go about matters, and you should have a re-think. So the outcome is that they are reviewing their policy, and looking at ways to use TBAs to take pregnant women to clinics and hospitals to give birth. (AOA)

53. For example, ActionAid has published an analysis of government agricultural spending and policy implementation in Kenya and an assessment of the Ugandan Government agricultural development strategy and investment plan implementation.

54. For example, Plan Kenya has fostered the development of community advocacy committees which have lobbied duty bearers and county-level government on a range of issues including health facilities and service provision in various areas. One committee took a lead role in putting on the county agenda the need for a bill on sanitation which has now reached an advanced stage in the county legislative process.
Community Health Volunteers (CHV) are central to delivering many health services to communities, yet despite being poor themselves, they are often not adequately compensated. World Vision and a number of other AACES NGOs and partners have observed that NGOs that work through CHVs are not consistent in their approach to their remuneration which can lead to competition between NGOs and negatively affect sustainability.

Rwanda’s PBF scheme is an innovative financing model that provides monetary and other incentives to health workers and volunteers through an output incentive payment program, funded by national budget and donors. The scheme is designed to increase the delivery of primary health care services and the quality of care delivered.

World Vision Uganda (WVU) has been working closely with the Ministry of Health (MoH) to better support CHVs and is using the East Africa Maternal Newborn and Child Health (EAMNCH) project to explore new and innovative ways of doing this. During the Kigali-based implementation workshop, WVU facilitated a study tour for Ugandan MoH staff to gain an understanding of PBF. Mr Gilbert Muyambi, National Village Health Team (VHT) Coordinator, spent four days in Rwanda. The visit included discussions with Rwandan National MoH staff, discussions with World Vision Rwanda (WVR) staff and a field trip to a community where Performance Based Financing (PBF) is operating.

The discussions with WVR focused on the value add that NGOs can bring to strengthening the health system in the context of PBF. This interaction at various levels of operation (government, NGO and community) gave a holistic awareness of PBF and its potential opportunities and challenges.

The initial response from Uganda has been a positive one, with a formal report submitted within the MoH to pilot the project in Kitgum District. The result has been the establishment of a technical working group by the National VHT Coordination Committee to develop Terms of Reference (TOR) for development of a motivational strategy for VHTs/CHVs. The TOR has been developed with the participation of World Health Organisation (WHO), UNICEF, BRAC and WVU as members of the working group, with agreement on key timelines and budget to complete this exercise (World Vision).
WIDER CHANGE

Beyond the original targets for each of the 10 programs, there has been wider change leveraging additional resources for communities served by AACES and also for communities and groups beyond the project areas.

Some NGOs have used the model as a demonstration process which has led to adoption of program approaches and strategies within NGOs and beyond.

We have adopted the AACES program design approach into other donor funded programs being implemented by other partners including government and NGOs. (MSI)

The strengths based approach is being used in Tanzania and Malawi to build the capacity of communities to improve their livelihoods. Existing Caritas programs including ANCP are now adopting the approach and it is spreading across the Caritas network. (Caritas)

The partnership approach and program flexibility has encouraged AACES NGOs to bring in other actors and partners, including the private sector, which has expanded the resources and skills available to communities and groups.

The results have been influential in themselves. Agencies have been able to utilise the results from AACES projects to leverage support from other donors.

Communities have also been able to point to the effective outcomes they are achieving, and therefore attracting the support of government and other donors.

Following the successful roll-out of MSK’s 20 social franchises through the AACES project, Marie Stopes Kenya (MSK) has leveraged funding for a further 18 social franchises in the coastal region. Eight new private health clinics will be franchised by MSK with support from the Africa Health Market for Equity (AHME). Through partnership with AHME, this program will also see the inclusion of other franchised services such as malaria testing and treatment and Integrated Management of Childhood Illnesses, thereby addressing greater community health needs at benchmarked quality levels. This is expected not only to improve the breadth of services available to clients but also have the benefit of increasing the client base of the private providers. A further 10 private providers in Kwale County will be franchised by MSK through support from the European Union. (MSI)
MSI was able to work to link the private sector and government to provide sexual and reproductive health facilities and services in cost-effective ways. This will provide a basis for expansion of such services across the country. (MSI)

In order to address women’s empowerment we worked with other AACES NGOs in the area as well as district government officials, the Tanzanian Research Institution and the police. We also worked with legal centres to look at women’s rights. This all came together to support effective empowerment for women. (CARE)

THE SHARED FUTURES PROJECT (SFP) MANAGED TO LEVERAGE FUNDING FROM OTHER DONORS AS FOLLOWS: IN MOZAMBIQUE, THE PROJECT LEVERAGED A TOTAL OF US$1.3 MILLION. THE ADDITIONAL FUNDING WAS USED TO REACH AN ESTIMATED 47,000 PEOPLE IN NIASSA PROVINCE.

The leveraged funding facilitated innovative data collection, specifically the use of smartphones to update the WASH Information System database. In Malawi, the project leveraged a total of US$844,925, which was used to pilot innovations such as market linkages, sanitation marketing, the thermoelectric charger on the energy efficient stoves that the project introduced in 2012, construction of an additional 92-hectare irrigation scheme and support to climate smart technologies within the project area. The thermoelectric and LED light pilots have since been scaled up in other districts with funding from Irish AID. The project also piloted the use of livestock fairs and a voucher system which was adopted in other projects within and beyond Concern Universal Malawi. (AFAP)

Longewan Community Development Committee, formed under AOA’s MCH project in Kenya, has accessed funding directly from the Government Department of Social Responsibility to undertake projects that improve livelihoods. (AOA)

In Zambia, communities were trained and supported to develop ward plans which highlighted community development priorities and costs. Based on these plans, the community managed to secure funding from a World Bank funded project for canal clearance. The cleared canal is now being used by the community as a source of water for irrigation as they engage in year-round agriculture production for their livelihood. (Oxfam)

Encouraged by the achievements of the Caritas AACES communities, external national and international agencies have become involved in providing support: FAO in Phalombe (Malawi), JICA in Ifakara (Tanzania), Danish Church Aid in Rumphi (Malawi) and Caritas Ifakara (Tanzania), which has created linkages for marginalised farmers with the National Micro Finance Bank so that they can access financial services. (Caritas)
OBJECTIVE TWO

Objective two outcomes were much more limited than originally anticipated. While DFAT initiated some activities under this objective, such as identifying areas for policy engagement where they would welcome NGO input, this did not evolve into regular and in-depth exchanges. Further, a consolidation of the Australian Aid Program in Africa from early 2014, due to budget restrictions, reduced opportunities for these kinds of conversations.

Reports show that some outcomes were achieved around policy exchange, but NGOs responding to this review felt that they had not been able to make sufficient use of this opportunity. A review of the objective undertaken by an independent consultant in the second year of AACES found that NGOs were not clear what was required under the objective and what purpose it was meant to serve. The review suggested that a much clearer strategy should have been developed, with clear explanation about the roles to be played by NGOs and their partners.

Following the AACES MTR, this objective was revised to focus more on mutual learning and information exchange between NGOs and between NGOs and DFAT. While mutual learning between the NGOs came to be a strong feature of AACES, there is less evidence of substantial influence by AACES on DFAT practice.

We struggled with using AACES lessons for broader influence over policy in Africa forums. We struggled because there was no one who brought it together in a collated way. And AACES partners did not really have strategy or a target. For example, the European Union had forums where we could have inputted but we are too busy. Also we needed continent-wide evidence for this sort of advocacy and we needed more time to bring this together. (World Vision)

There was also a focus under this objective in using AACES to influence donor and government practice. While there have been several examples of AACES NGOs producing international publications and undertaking international presentations, there was never sufficient focus or organisation around this work to create a systematic contribution to change.

Reflecting on the objective for this review, respondents suggested that it required senior-level engagement from the beginning from both NGOs and DFAT. For the NGOs, there also needed to be greater synergy between staff working in advocacy and those managing the program work. If it was to demonstrate a systematic level of influence in DFAT or beyond, such work

56. The revised objective was ‘Development programs, including AACES, are strengthened, particularly in their ability to target and serve the needs of marginalised people through learning, collaboration and exchange among AACES NGOs and between AACES NGOs and DFAT’. 61
required a strategy, based on good analysis, as well as clear targets and a suitable time frame. People reflected such a strategy was likely to go beyond what could be brought together in a five-year program.

**OBJECTIVE THREE**

The third objective was always intended to be a small but significant component of AACES. It was the opportunity to build bridges between citizens in Australia and Africa, and help both understand the complex and interrelated development challenges that impact people’s lives.

Some NGOs saw the considerable potential of this objective and worked hard to collaborate with others around joint campaigns with good results. For example, CARE and MSI and worked together on the BARE campaign which focused on connecting young women in different parts of the world. The Australian Foundation for the Peoples of Asia and the Pacific (AFAP) and ActionAid worked on a food security initiative called 'exposing hunger: capturing solutions' which connected farmers in Kenya and Australia. These strategies prefigured what is now an emerging approach for civil society organisations trying to address complex development issues.

**BARE**

The Bare initiative was developed in partnership between CARE Australia and Marie Stopes International Australia. In 2013, Bare asked Australian women to ‘Go Bare’ without makeup for one day to raise awareness of women and girls living in poverty in Africa, who go without the basics every day.

In 2012, the initiative used a mix of paid and earned traditional media, and online activities to reach its objectives, achieving a total potential audience reach of 537,826 people.

In 2013, the initiative took a different, more cost-effective approach through public relations activities and had no traditional paid media. Increased focus was instead placed on free channels online, including social media, which allows for deeper audience engagement. Through these mixed channels, the Bare initiative achieved a total potential audience reach of 1.8 million Australians. (BARE Evaluation report, 2013)

57. A limited number of international NGOs in Australia are utilising this approach but it is more common among other types of civil society change organisations. It builds from the value of citizen-to-citizen links which in turn provide a basis for common analysis of development problems and increase the opportunity for joint action across different locations. It is an emerging strategy being utilised in areas such as action on climate change and women’s empowerment.
Similarly, Caritas used the opportunity to develop immersion programs and videos about communities in Africa applying strengths-based approaches. The material underpinned a broad set of educational tools which are being widely used within the West Australian school system.

Activities ceased under this objective from July 2014, following DFAT’s decision to discontinue funding for development awareness-raising activities.

Separately, DFAT concluded that it was probably over ambitious to include this objective in the AACES design and that it in fact distracted NGOs from their core work. Some NGO respondents agreed with this assessment, however, others did not. Some of the in-Africa partners in particular felt that there was potential in this objective which remained unrealised.

**CHANGE BEYOND AACES OBJECTIVES**

All of the AACES NGOs report that working in this program has had positive impact upon their organisation, increasing their skills and ability to better respond to complex development challenges. The changes are widespread and varied. Australian NGOs have increased both their understanding of development issues in Africa and have also expanded their ability to work effectively together in advocacy. All of the NGOs can point to learning that they have been able to take from the AACES model and adopt into other programs.
AACES is one of our most successful programs. There were effective results in health, there was innovation, there was good management, and there was learning. It was extra work but it was worth it for the outcomes. We now see the value in working with other agencies and it has built our staff capacity. (World Vision)

The flexibility of the program allowed us to test approaches to impact measurement. The ideas around this will now be used much more widely. (CARE)

The program changed us as an NGO. It increased the level of professionalism, bringing in new people with more development experience. It led to upgraded policies and procedures and impacted the way we approached partnership. We now have a more strategic approach overall to development work and a deeper engagement in specific development issues. (AOA)

We will now take the AACES approach to ActionAid global network. It would help to position ActionAid to have more strong focus on women’s rights and agriculture. (ActionAid)

The program has consistently raised standards in areas such as disability inclusion and child protection. These were then elevated in other Oxfam programs. (Oxfam)

As a small NGO, we could not do everything. AACES stimulated new ideas, for example value for money and theory of change. These are areas which the NGO is now taking up and applying to other programs. We now have theory of change for all programs and a more deliberate focus on learning. (AFAP)

The We-Rise program substantially influenced our other activities. There are concrete examples of this in the country-wide strategy and in the sector-level strategy, where you can see specific learning from AACES. (CARE)
In-Africa partners report that they have been better able to collaborate and are using the specific expertise developed through AACES in other locations. There were an overwhelming number of examples provided from each of the partners about how specific areas of learning are now being utilised in other aspects of their programs, improving quality, generating new ideas and stimulating new program approaches.

Significant changes that people have identified include:

- learning around strengths-based approaches and endogenous development;
- learning how to operationalise inclusive development including both strategies for empowerment of women and working effectively to include people with disability;
- strategies for effective work in complex development, in particular how to work with both marginalised groups and those with power to build relationships and cooperation between the two;
- knowledge about monitoring and evaluation including tools such as Most Significant Change;
- specific areas of information around value for money, donor systems and several other areas of expertise provided by different NGOs; and
- experience and knowledge about how to develop effective partnerships and coalitions.

We have shared our work on endogenous development across WaterAid. We are currently doing our country strategy and using this learning. Ideas about partnership have spread to other parts of WaterAid. We have become more engaged in working with others including government and other NGOs. The AACES methodology – to engage with the community and ask why there were limitations – has bought a new dimension to the water and sanitation sector. (WaterAid)
In addition, in-Africa NGOs reported increased confidence and capacity to deliver complex international programs. Respondents pointed to the many opportunities to learn from others. However, they also pointed to the significance of working in a program where power was shared and all participants were treated with respect. For many of the in-Africa respondents this was considered to be an essential feature in building their confidence and ability.

**I THINK THE MOST SIGNIFICANT CHANGE IN MY CASE HAS BEEN THE POWER TRANSITION.**

I was one of the few African partners who got the voting power in the program steering committee and to the extent that I rose to the level of Vice Chair of the program steering committee. For me it was not just a ceremonial position, I have had personal interaction with DFAT representatives in the region, especially Kenya where we have discussed policy issues relating to the program in collaboration with the Chair. Despite the distance of the program steering committee Chair who was based in Australia and myself based in Lilongwe, we communicated on a number of issues. It was confirming to me that in every decision, even moments I missed teleconferences, there was an email follow-up checking with me on the deliberations, my views before a decision is made and shared to the larger grouping. That was affirming that I had a role. (Caritas)

**MONITORING AND EVALUATION**

AACES placed considerable emphasis on high quality monitoring and evaluation. As a result, the AACES monitoring and evaluation framework has been rated as one of the highest quality among all Australian Government programs in Africa.58

Monitoring and evaluation was pivotal in supporting the program learning and improvement. It influenced many of the NGOs and their partners who now continue to focus on good quality and more extensive monitoring and evaluation systems.

The outcomes of this learning and development are most evident in the wide range of methodological approaches adopted throughout the end of project evaluations. The methodologies utilised by the 10 different NGO programs range from well-constructed quantitative assessments through to a variety

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58. Coffey International Development (2014), 'Monitoring and Evaluation stock take report'.
of sophisticated qualitative methodologies, such as Most Significant Change and Outcome Mapping. There is clearly a commitment to evidence-based assessment with detailed presentation of specific results and comparison to baseline data across all of the evaluations (see Annex Four for a summary of the range of methodologies utilised for the end-of-project evaluations).

This is a significant additional outcome from the AACES approach and potentially provides an opportunity for wider learning around the value of monitoring and evaluation systems that operate in complex and diverse programs. They also provide NGOs and DFAT with a creative mix of ideas to be adapted into future NGO program assessment.

IMPACT ON DFAT

As noted above, review of the DFAT assessment systems indicated that AACES was rated as one of the most high quality and effective programs. These assessments identified in particular the increased profile of Australian support and technical expertise brought about through AACES. They pointed to the value of the large reach of the program, extending into parts of Africa where Australia is not normally visible. AACES was valued for the way it linked communities, particularly marginalised groups of people, to their governments through a program approach. It helped to demonstrate that Australian aid was committed to effective approaches beyond stand-alone activities.

The program made a tangible and measurable difference to people’s lives, in particular the DFAT target groups of women and PWD. It provided excellent public diplomacy opportunities, with DFAT staff suggesting that the AACES program demonstrated the value of bringing together diplomatic and aid intentions even before the integration of AusAID and DFAT.

AACES has been described in DFAT assessments as an efficient delivery model. While additional resources were required to design and establish the program, once the partnership model was functioning, it enabled DFAT staff far greater efficiencies in program management. For example, DFAT staff were able to draw on NGOs for help with ad hoc reports and information requests. NGOs supported diplomatic and senior management visits, they provided policy input, they worked with DFAT around editing annual reports and other information documentation. As highlighted by several respondents, NGOs proactively cooperated with DFAT across times of change including when the aid budget was being restructured. It was noted by respondents that for a program of this size, few external consultants were required. NGOs were able to contribute their own expertise for training and capacity development and in areas of assessment and review. Despite the diversity, spread and complexity of the program, it was able to be managed by a small DFAT staff group, supported by the RF.
NGOs owned the program together with DFAT and, therefore, were understood to share program ‘risk’. At one level this supported small but important elements such as timely and high-quality reporting. But more broadly this led to NGOs being committed to program quality and achievement of outcomes. Rather than DFAT being left to drive the program towards its desired results, NGOs proactively sought to improve and change their own programs in order to avoid problems and increase the likelihood of effective outcomes.

Notwithstanding the limitations of objective two, both DFAT and NGOs report that there were contributions made to DFAT policy throughout the life of AACES. DFAT reports this was done both formally and informally, for example they were able to call upon NGOs in emergency response situations, such as the Horn of Africa crisis, to utilise their knowledge and experience in other countries in Africa. In addition they were able to request specific information to assist with policy development in areas such as water and sanitation and gender. Beyond Africa, DFAT has utilised AACES program ideas in other NGO programs such as the Civil Society WASH Fund, the Australia Middle-East NGO Cooperation Agreement (AMENCA) and the NGO program in Afghanistan.

AACES required DFAT to work differently from its typical role as donor. DFAT was actively engaged with the NGO partners, not simply managing from a distance through a managing contractor or other mechanisms. Assessment by respondents to this review considered that this was a worthwhile shift which led to far greater outcomes for the Australian Aid Program than could otherwise have recently been expected. It also demonstrated value for money for DFAT.

RESEARCH AND LEARNING

With an ongoing commitment to learning, AACES supported a wide range of formal publications and presentations alongside an extensive number of field-based and practice-based reports. This provides a rich repository of knowledge and future learning for NGO and DFAT programs.

LESSONS LEARNED

As AACES comes to its end in June 2016, it leaves both ongoing change and capacity in each location and a wide variety of learning for future programs.

AACES THEORY OF CHANGE

Reflecting on the program results and ways of working, the AACES strategy clearly drew from several theories about how effective change can be supported by NGOs and donor agencies. The program TOC brought together

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a number of important features of good development practice which worked to support good quality and ongoing results and impact. Rather than identify any one feature it was clearly the combination of these elements which underpinned an effective program and led to the increased value for money which DFAT was seeking. This strategy is summarised in Figure 2.

Respondents to the review compared the AACES experience to programs where particular elements have been adopted from AACES in isolation from the approach as a whole. It was strongly concluded that the outcomes from AACES cannot be achieved by adopting one or two aspects of the theory of change in the absence of others.

Nested within the theory of change were further strategies related to NGO practice and ways in which this could contribute to change (under each of the three objectives). The program also developed strategies around inclusion and effective work in gender empowerment as well as significant learning about facilitating citizen and community engagement with government. These additional approaches to change, located within the overall programme TOC, illustrate the multi-level and multi-dimensional nature of AACES. They point to the value of an adaptive learning model as a way of implementing a multi-faceted program.

**FIGURE 2: AACES THEORY OF CHANGE.**

![Figure 2: AACES Theory of Change](image)

AACES OBJECTIVES AND SECTORS

Respondents felt that the broad range of sectors identified for the program were useful and provided several starting points that were relevant to national governments and to communities. However, most respondents felt that three challenging and diverse objectives within the one program was too much (resulting as noted in far less activity in the latter two objectives, while acknowledging that objective one took up the majority of human and financial resources) and would recommend a smaller number of objectives in future programming.

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60. For example, AMENCA 3 has focused on encouraging collaboration between the NGOs in that program, requiring them to work together to achieve more synergy and learning.
Respondents believe that the first objective was relevant to the mandates from both NGOs and DFAT. The NGOs should continue to work in partnership with marginalised people, communities and government to support increased access to services and improved well-being. Strengths-based and rights-based approaches remain very relevant to this work.

Input to donor policy is an area where people believe NGOs and civil society continue to have a role. However, AACES has demonstrated that collective influencing of donor policy and practice alongside direct program implementation is not a simple process and requires good analysis and careful strategy development. Future work in this area needs more design and analysis in order to ensure its value.

In regard to the final objective, respondents noted that strategies supporting engagement with Australian citizens have enormous potential to support solutions to complex international development problems. However, from the AACES experience it appears that the impact and value of work in this area is still being explored and understood and therefore it is not an area where NGOs should seek donor support.

**THE AACES AMBITION**

The AACES program was an ambitious and far-reaching program. Reflecting on the widespread location of the program, across 11 countries and many, often very remote, locations within those countries, it is the view of respondents that this may have been appropriate as the starting point for a program expected to grow. However, the wide geographical spread made AACES difficult to manage and in some cases mitigated against the cooperation and partnership being sought. Respondents have suggested that future regional programs ought to start in a small number of countries, providing for more cooperation between NGOs and their partners and more efficient and effective sharing of experience and lessons. This might be expanded as resources permit.

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Respondents identified that the diverse range of organisations in the program was important. For the future, they suggested that having multiple and diverse partners in each country should be maintained to maximise sharing and improve program quality.

**DESIGN PROCESS**

A design process which includes the opportunity for donors and implementers to come together to create collaborative relationships and shared intentions is as important if not more important than formal design documents. Good design process requires investment of time and resources. The AACES experience is that this provided considerable value for money throughout the life of the program.

A further critical element of the design was the development of strategies and approaches that were relevant to local contexts and that built upon local strengths and areas of interest. The overall program design needed to provide a framework for collaborative action and assessment and also facilitate a diverse set of interventions. This required negotiation and an ongoing focus on quality and improvement. In this regard the design process continued throughout the life of AACES.

**PARTNERSHIP**

In order for a program to benefit from a partnership approach there needs to be considerable attention given to the behaviours and practices that will characterise the program, particularly how respectful and mutual working relationships will be established and maintained throughout the program. This requires changing normal power relationships between organisations, including those between NGOs and donors, and establishing systems and tools that will specifically serve the shared objectives of the partnership.

Further, partnership should not operate simply at one level of the program but ought to be reflected throughout the different interactions and levels of relationship in order for the maximum outcome. Experience from AACES was that mutual and respectful partnerships between DFAT, NGOs and in-African partners led to replication of that approach between implementing partners, communities, government and other stakeholders.

Partnerships need to be assessed and reviewed. In the early years of AACES this was conducted formally through partnership surveys. Over time it became part of the practice of partners to reflect on and assess the value of particular partnerships and the behaviours and attitudes reflected in these.

Partnership approaches are likely to be resisted by formal institutions and by people newly introduced to a program. Therefore, partnership agreements and practice need to be formally recorded and systems should be in place to induct new staff and participants into partnership principles and behaviours.
STRENGTHS-BASED APPROACHES

One of the significant lessons identified by several in-Africa partners was the shift in their understanding of communities through utilisation of strengths-based and other asset-based approaches to development. Moving away from a needs-based dependent relationship to one where there is appreciation of mutual strengths and abilities is a powerful basis for action and change. Some respondents observed that this approach could have been introduced more widely across the program. For example, more attention could have been given to bringing the views and strengths of implementing partners and of communities into AACES planning and learning from the beginning of the program.

SUPPLY AND DEMAND

The AACES program demonstrated the potential for working with both supply and demand elements of service delivery through a relational and problem-solving approach. A broad range of strategies and approaches were utilised by the NGOs and their partners in different countries and locations. These tended to coalesce around dialogue, shared analysis and joint work between citizens and duty bearers on practical solutions to specific problems.

These approaches drew largely from a rights-based understanding of development. They provide an important contribution to current thinking about how to support and facilitate locally led development and the role of civil society in supporting access to services.

VALUE FOR MONEY

VfM was an important concept in AACES. It was introduced by DFAT from the beginning of the program and was one of the few elements not jointly agreed and decided throughout the design process. However, NGOs embraced the challenge. They used their existing partnership approach and focus on learning to develop a range of good quality methodologies and approaches, and in turn produced good quality VfM assessments, informed DFAT policy and advanced the thinking and policy about VfM within their own organisations.

Beyond the individual NGO methodology, VfM became a feature of the program as a whole. As the program results became evident, together with indications of its wider impact and long-term value, there was increased appreciation of what was being achieved with the resources provided. Therefore AACES itself was a VfM story.

It was noted by several respondents that far greater value would have been achieved by continuing the program and building upon the investment, both in NGOs and their partners, and in the relationships and processes with local and national governments across the 11 countries. In the end, the failure to continue the program has probably been the most significant loss of potential value across the life of AACES.62

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62. Despite the considerable achievements through AACES, by 2016, the Australian Aid Program’s Sub-Saharan Africa budget had been reduced and programs consolidated.
INNOVATION

The AACES experience suggests that innovative practice is not necessarily motivated by funding and resources alone. Flexibility and a focus on results may in fact be more important drivers. Partnership and a focus on collaboration and cooperation, rather than competition, also seem to be useful precursors to the risk-taking and learning required for good innovative practice.

MAINSTREAMING GENDER EMPOWERMENT AND INCLUSION

Development staff need the space to be non-experts in some areas and the opportunity to learn through practice.

For AACES it was relevant to ensure consistent focus on gender empowerment and disability inclusion. The AACES experience suggests that ensuring effective gender practice in programs had to go beyond prescribing requirements within design documents and formal policies. People also needed to be introduced to practice and in some cases provided with the space and opportunity to learn about how empowerment and inclusion operated in practice.

Similarly with disability inclusion, when NGOs and communities were given the opportunity to see the value of the inclusion of PWD and other marginalised groups, they became strong advocates for inclusive development. AACES program flexibility then provided the opportunity to experiment with approaches relevant to specific contexts, leading to substantially effective outcomes.
MONITORING AND EVALUATION

AACES demonstrated the value of monitoring and evaluation closely aligned to practice. It showed it was possible to establish monitoring and evaluation systems which serve different needs. And to have assessment systems which track both short-term and immediate change as well as giving attention to longer-term outcomes and impact. AACES showed that with good investment, monitoring and evaluation systems can also serve learning and contribute to program improvement.

AACES monitoring and evaluation used a combination of quantitative and qualitative methodologies: a mixed method approach, which is increasingly being recognised as the best standard for development assessment.63 The wide range of methodologies utilised in the end of program evaluations demonstrated NGO capacity to use sophisticated quantitative measurement as well as innovative qualitative approaches. Documentation was also an important strategy in the program, allowing for communication of ideas and learning as well as wider sharing of experience. It also served accountability and transparency.

Overall, AACES demonstrated the value of investing in strong and good monitoring and evaluation systems as part of effective program delivery.

AACES COMMUNICATION

While many senior people in both DFAT and the NGOs are strong advocates of AACES, representatives from both institutions felt that they could have done more to communicate about the nature and the impact of the program within their organisations. AACES has been recognised through research and wider international presentation as innovative and successful, yet there is a view that it may be less well understood at some senior levels in the partner organisations. Respondents suggested that they could have done more to communicate the overall value and approach of the program earlier on and could have worked further to draw the connections between the experience of this program and lessons learned for NGO practice and the wider aid program.

DFAT SUPPORT FOR NGOS

AACES demonstrates the considerable value that NGOs are able to provide to the Australian Aid Program, particularly working with marginalised groups of people such as poor women and PWD and in their ability to work in risk-taking and innovative ways to engage diverse groups of stakeholders and actors for change.

Working effectively with NGOs requires DFAT to continue adapting and changing its ways of working. It is not sufficient to simply provide grants to NGOs and then minimise engagement. Respectful ways of working, processes that share ownership and risk, and a valuing of diversity appear to be important preconditions to maximise the value of NGO approaches for DFAT-funded programs.

In addition, DFAT is well served in its NGO engagement when it utilises skilled and experienced development staff. Providing support to those staff through a secretariat or resource facility appears to be critical to allowing it to delegate some of the more administrative tasks and focus on policy and relationship engagement.

CONCLUSIONS

AACES has demonstrated value on a number of levels. It has been an important space for learning and experimentation. It was a large investment for DFAT and given the opportunity to build further on this investment there would likely have been considerable further value derived from the work.

Nevertheless, on many measures it remains one of the most successful DFAT-funded NGO programs. It has demonstrated the innovative and creative ways in which a donor and civil society are able to work together for sustained and effective change.
Doreen Mwangala (right) and Ndondi Chikote, AACES trained pump technicians repairing a borehole pump in Luampa district, Zambia. Photo By Douglas Waudo, AACES Resource Facility

ANNEXES
The overall purpose of the AACES end-of-program review will be to **document the AACES approach, with particular attention to partnership, and explore how this approach has contributed to the results achieved by the program.**

The document that will result from the review is expected to be able to inform future practice of DFAT and other donors. It is also expected to contribute to future NGO practice. It will contribute to accountability requirements such as the DFAT Final Aid Quality Check.

**FOCUS**

The review will focus on AACES as a whole program rather than on the individual NGO projects. While specific project experience will be utilised to exemplify learning and outcomes throughout the review, the overall findings and recommendations from the review will focus on the program as a whole.

**METHODOLOGY**

As noted this review is not an evaluation of AACES or the individual NGO programs. It instead serves to bring together evidence about the program design and implementation and how this contributed to the overall value of the program from the perspective of stakeholders. It is intended to capture important learning, explore the evidence for that learning and associated assumptions, and present this in a way that contributes to practical knowledge for DFAT and the NGOs.

Towards this end, the methodology needs to be exploratory. At the same time it needs to give attention to evidence in order to provide rigour in the overall conclusions and lessons learned.

**APPROACH**

The proposed approach for the review is a critical methodological approach. A critical methodology looks to understand how particular outcomes are achieved with due reference to context, historical experience and influence, and attention to multiple and overlapping variables. It seeks to answer the question, why have these results been achieved? Significantly for the purpose of this review, it also seeks to understand what the implications are for the future and how further improvements can be facilitated.

A critical methodology utilises a triangulated approach to data collection and analysis, acknowledging the need to contrast and compare a range of data sources and perspectives in order to understand complicated and complex environments. This particularly suits review of this program where there are no opportunities for simple comparisons with other programs, nor a single set of outcomes which can be compared against targets. AACES has achieved multiple outcomes across different environments, with the various elements important to different stakeholders. The triangulated approach provides for tracking of similar and contrasting responses and exploration of the underlying influences.
DATA COLLECTION

Drawing from a triangulated approach, data collection will utilise multiple sources of information. This will include:

- a literature review drawing on current research and evidence of civil society practice and donor-funded NGO work to provide comparison for AACES approach and experience;

- existing reviews and reports, including the mid-term review, reviews undertaken of specific program objectives and reviews and reports available from Australian NGOs and their partners;

- interviews with both internal and external stakeholders. Internal stakeholders will include Australian NGOs, partner NGOs in Africa, the AACES Resource Facility and DFAT representatives responsible for the program. External stakeholders are likely to include senior NGO personnel without direct responsibility for this program, DFAT staff managing other similar programs or with experience in similar and comparable programs, and other people with knowledge of the program such as technical advisers, government staff and other civil society representatives. While care will need to be taken with explaining the purpose of the review, it is expected that these interviews, particularly those with external stakeholders, will be a rich source of data;

- comparisons with elements of other programs, including NGO programs funded by DFAT, and other DFAT programs in Africa and other donor programs with similar intent;

- theory of change exploration which identifies significant assumptions around approach and implementation for the program and examines available evidence at each of these points that supports or not the validity if those assumptions. This process is expected to serve as a framework for program examination in an initial review workshop to be held in early December;

- focus group discussions with internal stakeholders also to be held at the initial review workshop; and

- a review of available quantitative data from the perspective of absolute value and in comparison with other programs as above.
DATA ANALYSIS

Given the wide range of data sources and the fact that no one source in particular will yield all the information required, high-quality analysis of the data will be critical. As above, that analysis ought to be triangulated, drawing on a range of different viewpoints and perspectives. At a minimum this will include:

- analysis from the perspective of international experience and good practice obtained from relevant literature;
- initial qualitative and quantitative analysis undertaken by the independent consultant managing the review, with particular attention to the weight and rigour of evidence and identification of major points of congruence and disagreement between data sources;
- additional periodic analysis by internal stakeholders, primarily through the review working group, made up of representatives of Australian and African NGOs and DFAT; and
- final clarification and analysis by a whole-of-AACES program group and a final workshop proposed for May 2016.

Apart from the final process of clarification at the 2016 workshop, the analysis process is expected to be iterative. Where the analysis identifies insufficient evidence and/or strong contrary perspectives from different data sources, further enquiry will be undertaken to explore why and what this might mean.

LIMITATIONS

It is important to restate that this exercise is not an evaluation and will not be seeking to prove or estimate the value of AACES or its individual projects. At the same time it is intended to be an evidence-based review and therefore it is important to identify its limits.

While the process of triangulation for data collection and analysis will be important to establishing the robustness of available evidence, there will not be an opportunity to undertake new and original research and this will inevitably limit the strength of evidence and associated conclusions.

Furthermore, much of the accessible data will be drawn from existing reports and stakeholders closely associated with the program. They in turn will bring particular perspectives and experiences which add insight but also bring particular bias related to program implementation and outcomes. While the analysis process will try to give attention to this interaction, without additional independent research there are necessarily limits to this.

Finally, as outlined the focus will be on the program as a whole not on individual NGO projects and experiences. While this is important for ensuring that lessons learned and recommendations are applicable and able to be generalised into future situations, it will inevitably lose some of the richness and specific detail associated with each of those programs. It is expected that individual end-of-program evaluations will capture far greater detail but this will not be reflected in this review except where relevant examples are utilised to illustrate an overall point.
ACTIONAID FOOD FOR THOUGHT, RIGHTS FOR ACTION PROJECT

This project follows a theory of change that incorporates empowerment of women and men farmers by developing consciousness of their entitlements related to agriculture and livelihoods and facilitating the development of strong and active groups of farmers to negotiate these entitlements collectively (a rights-based approach). It also focuses on developing their capability in policy analysis including tools for measuring implementation and influencing to change policy and improve its implementation. Empowerment includes an element of direct service delivery to allow women small-holder farmers to provide them alternative models to negotiate on with Government and others including the private sector.

The project is being implemented in three districts (Mwingi, Isiolo and Mbeere) in Kenya and five in Uganda (Amuru, Nwoya, Kumi Bukeada and Katakwi) and has been working towards close to 4,500 farmers (of whom a minimum of 70% are women) with sustainable access to food- and agriculture-related services.

AFAP THE SHARED FUTURES PROJECT (SFP)

This is a multi-sector project (food security, WASH, maternal and child Health (MCH) and governance) which aims to alleviate poverty. The primary objective is to achieve measurable improvements to the sustainable livelihoods and well-being of 13,000 vulnerable households in 39 communities in Southern Malawi (Thyolo District), in 45 communities in Mozambique (Niassa and Maputo Province) and 30 communities in Eastern Zimbabwe (Mashonaland East). The principal focus of the project is to strengthen existing capacities and support decentralisation processes by increasing opportunities for marginalised people to advocate for the services that they require. This is achieved by strengthening linkages between marginalised communities and duty bearers through supporting existing national-, provincial- and district-level structures and processes. A key part of this process involves capacity development, sharing of knowledge and best practice, including strengthening the advocacy skills of local women and men and empowering other marginalised groups to lobby for their own development needs and services.

ANGLICAN OVERSEAS AID – THE ROAD LESS TRAVELLED (TRLT)

This project uses a participatory, strengths-based approach to work directly with communities through teams of locally engaged personnel in the Afar Region of Ethiopia, and the Laikipia and Samburu counties of Kenya. Adopting a comprehensive approach through a range of community development activities, the goal of the project is to improve maternal, neonatal and child health in target communities by addressing women’s access to primary health services and the key social determinants of health (such as nutrition, water and sanitation, economic development, literacy and gender equity).
CARE WOMEN’S EMPOWERMENT: IMPROVING RESILIENCE, INCOME AND FOOD SECURITY PROGRAM (WE-RISE)

This program focuses on improving household food security and resilience by empowering women, particularly through increased agricultural productivity. The project started in June 2011 and in its five-year implementation phase aims to engage 15,000 households in Dowa and Lilongwe districts of Malawi, 9,846 households in Lindi and Mtwarra districts of Tanzania, and 15,441 households in woredas of Shebedino, Dale, and Loka Abaya in Ethiopia. The program seeks to increase agricultural productivity; increase income through other income-generating activities; create enabling environments that promote women’s rights and gender-sensitive agricultural programming; and increase institutional capacity for improved gender-equitable programming at the global level.

CARITAS

The Caritas Australia (CA) AACES program is being implemented in nine rural communities in six Dioceses in Malawi and Tanzania to address community-defined development aspirations. CA’s aim in AACES is to facilitate holistic and sustainable community-led development to improve the lives and livelihoods of about 24,000 direct program participants. This is being done by fully involving the most marginalised (women, the elderly, people living with HIV/AIDS, people living with disabilities, orphans and vulnerable children) in CA’s Integrated Community Development program which is an holistic, inter-sectoral approach. The cornerstone of this program is the provision of clean reliable water, the promotion of hygiene and sanitation, and sustainable increases in agricultural production which generate many subsidiary benefits, including gender equity, increased incomes and improved sanitation.

MSI

The project has the overall goal of contributing to increased access to and uptake of equity-sensitive sexual and reproductive health (SRH) services by marginalised populations in Kenya and Tanzania. Marginalisation is defined in terms of geography, gender, age and disability, with a particular focus on coastal regions – areas that have a conservative approach to SRH with limited access to services and high rates of teen pregnancy.

With SRH service provision in 800 sites across five counties in Kenya and across 13 districts in three regions of Tanzania, the project aims to strengthen and expand provision of quality SRH information and services, building the capacity of project teams, the public and private sectors and other partners to deliver services to marginalised communities. The project employs a number of models, including providing services through mobile outreach to rural areas, partnering with private health providers through social franchising, providing on-the-job training to public health staff and working with youth and disability groups, to reach over 300,000 women, men and young people in project areas.
Oxfam

The Oxfam AACES program focuses on WASH in Zambia and South Africa. Both countries have large rural populations where WASH services are lacking despite progressive policies and the good intentions of both country governments. The overall goal of the program is to improve the health and quality of life of the poor and vulnerable in targeted areas of Zambia and South Africa. In Zambia the program builds on Oxfam’s experience in implementing WASH programs and is aligned to Zambian Government policies and standards. In South Africa the program is delivered through pre-existing non-governmental partners across the three existing programs (food security, HIV and child protection). The program is implemented through local NGO partners working with government institutions; the overarching approach is to leverage the WASH sector for greater community development and to broker greater development beyond the project areas and interventions.

Plan Promoting Rights and Accountabilities in African Communities (PRAAC)

PRAAC aims to enable marginalised people – particularly marginalised women, marginalised young people aged 10 to 24 years and people with disability – to claim rights and access appropriate services. PRAAC is working in a multi-pronged manner in targeted communities with rights-holders, duty bearers and government and civil society service providers. Emphasis is placed on legal rights and services in Uganda, on rights to health and health services in Kenya and protection from gender-based violence in Zimbabwe.

Complementing place-based work at community and district level, the program includes related policy engagement and influence work to promote changes in law and policies, and the effective implementation of policies at national and lower levels. There is a strong emphasis across all project activities on strengthening civil society capacity to engage in policy dialogue and hold governments to account for inclusive service delivery, resource allocation and creating an enabling environment to uphold the rights of marginalised people.

WaterAid

WaterAid’s AACES program aims to improve access to WASH in underserved communities and schools in rural and urban areas of Tanzania, Malawi and Ghana. Sub-Saharan Africa is the region furthest off-track from meeting the water and sanitation MDGs and WaterAid’s AACES program aims to improve progress towards achievement of the MDGs in this region through targeting underserved districts and marginalised communities. WaterAid’s AACES work is being undertaken in areas where WaterAid has extensive experience, knowledge and has worked previously with existing partners. Activities contribute to and complement local government plans and WaterAid’s own plans and strategies. Project work builds upon the work of WaterAid’s existing programs and research and draws lessons from these to inform its work. To ensure the sustainability of WASH services, WaterAid’s AACES program includes service delivery, capacity building and policy and influencing activities.
WORLD VISION EAST AFRICA MATERNAL NEWBORN AND CHILD HEALTH (EAMNCH) PROJECT

World Vision is delivering the East Africa Maternal and Child Health project. This project is working in communities in Kenya, Uganda, Rwanda and Tanzania to improve maternal, newborn and child survival by boosting the quality, supply and community demand for health services; promoting the adoption of positive health, hygiene and nutrition practices for mothers and children; and contributing to a more favourable policy environment across the region. This is being achieved by working with marginalised people, strengthening health systems, encouraging behaviour change, building community advocacy and influencing policy.
ANNEX THREE:
PRINCIPLES AND BEHAVIOURS INCLUDED IN THE AACES PARTNERSHIP AGREEMENT

<table>
<thead>
<tr>
<th>Principle</th>
<th>Associated behaviours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust</td>
<td>Practice open communication between each of the NGOs and with DFAT. Address and seek to eliminate any suspicions or miscommunications.</td>
</tr>
<tr>
<td>Flexibility</td>
<td>Practice and exhibit understanding of the complexities involved in each of the projects and in DFAT work. Recognise and respect differences between agencies and between NGOs and DFAT. Recognise and respect different approaches to monitoring and evaluation. Recognise that change will happen over time and the programs and projects will adjust to work for this change.</td>
</tr>
<tr>
<td>Accountability</td>
<td>Ensure that accountability is mutual between organisations as well as flowing both upwards to donors and down to communities and people.</td>
</tr>
<tr>
<td>Respect</td>
<td>Recognise and value in the different systems and identities between NGOs and DFAT and use this to inform the program. Look for common ground between organisations, building consensus where possible through consultation. Respect the boundaries of each organisation. Recognise that some systems cannot be modified and that each NGO and DFAT will have limits to their possible engagement in the partnership. Work to build positive relationships with each other. Where possible, orderlies jointly define processes and systems for the program including those for monitoring and review. Ensure regular and shared review of the partnership and its value towards the efficiency and effectiveness of the program. Respect and utilise all of the program documentation, both NGO projects and DFAT documentation. Respect the right of individual NGOs and/or DFAT to opt out of a particular publication/communication. Ensure agreed protocols for any representation of the program. Develop protocols for use of photos and sharing of information beyond AACES NGOs.</td>
</tr>
<tr>
<td>Principle</td>
<td>Associated behaviours</td>
</tr>
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<td>------------------------------------------------</td>
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</table>
| Collaboration                                  | Ensure there are clear roles and responsibilities assigned to all tasks.  
  Agree communication processes, in particular for any public communication about the program.  
  Ensure that planning and communication are undertaken in advance in order to provide reasonable time for arrangements and changes.  
  Support new members either from NGOs DFAT to understand the partnership approach of the program. |
| Transparency                                   | Ensure all agreements and dealings for the program are known and understood by all.  
  Recognise that individual NGOs will have specific agreements with DFAT which may not be able to be shared with other partners.                                                                                     |
| Learning                                       | Ensure that each of the organisations is committed as an institution to the partnership.  
  Ensure that each of the organisations is committed as an institution to their learning approach of the program.  
  Recognise that program and project failure is an opportunity to learn and therefore should be transparently and openly communicated within the program.                                                          |
| Commitment to the cause of poor and marginalised people | Ensure that all work undertaken in projects and across the program is gender and culturally appropriate.  
  Individuals will seek to work in ways that avoid dominating all patronising behaviours.  
  Both the NGOs and DFAT will seek to communicate and educate staff about the intention and approach of AACES.                                                                 |
ACTIONAID

Participatory qualitative data collection and analysis was for this summative enquiry that took place during the final year of the project. A form of ‘Outcome Harvesting’ methodology was used. Outcome Harvesting is a useful evaluation method in multi-dimensional projects where many inter-related and inter-dependent factors influence the results, and the process and pathway of change is unclear and less predictable.  

In this evaluation, Outcome Harvesting helped to provide clear parameters for the evaluation, which was needed given the wide scope and diversity within the project in terms of locations and types of activities and inputs. The evaluator with the project team identified key areas of change (result areas) to investigate. These results are representative of the scope of the project overall, taking into account the diversity of the different locations, and are directly related to the four key strategies and change domains in ActionAid’s TOC.

The evaluators designed specific tools for data collection and analysis. These were developed with ActionAid project staff based on the ideas and advice they provided during the evaluation planning workshop (Sept/Oct 2015), and linking them to tools that they had experience of using previously or had interest to test.

The tools used in the field data collection from the members of the farmer groups included a range of visual and interactive mapping activities, MSC stories, focus groups and individual interviews.

Semi-structured questionnaires and interview formats with some rating scales were used for remote data collection from project stakeholders that were ActionAid staff, partners, government officials, DFAT staff and other CSO actors.

The Outcome Harvesting framework and results areas guided collection and analysis of data from the project documents reviewed.

Guiding questions and frameworks were developed for the participatory analysis and validation processes that took place with community and with staff. These were modified to suit the specific groups and situation when they were used.

The evaluation was implemented over a six-month period.

AFAP

The evaluation adopted a mixed methods design executed through a peer review mechanism that included staff from the three countries. The design included collection of primary qualitative data and utilisation of secondary quantitative data. Primary data collection included key informant interviews, focus group discussions, case stories, site visits and participants in VfM workshops.

A regional debrief meeting was conducted to present, review and validate preliminary findings, conclusions, lessons learned and recommendations.

Figure 3 shows an overview of the evaluation methodology.

64. See www.managingforimpact.org/sites/default/files/resource/outcome_harvesting_brief_final_2012-05-2-1.pdf
The endline assessment was based on the design of the baseline assessment, which enabled a before/after measurement of the four key long-term outcomes for the project:

- adoption of health and cultural practices that promote the health and wellbeing of women and children;
- increased utilisation of formal maternal and child health services;
- increased empowerment of women and other marginalised groups to be involved in decisions that affect their health and well-being; and
- improved community access to essential resources and services.

The endline assessment utilised a mixed-method approach.

A quantitative household survey was undertaken in November 2015 to examine changes in the community in the four years since the baseline assessment was undertaken in November 2011. The same questionnaire was used for both the baseline and endline assessments. The questionnaire was based on a household survey tool developed by Afar Pastoralist Development Association (APDA) and
was designed to assess knowledge, attitudes and practices in the community related to health, safe motherhood, WASH, traditional harmful practices, HIV and education/literacy among a cross-sectional community sample. At endline, the questionnaire also focused on the extent to which community members had been exposed to the project, including accessing literacy classes and receiving basic treatments and health information from health workers and women’s extension workers.

The survey area selected included four kebeles within Sifra woreda and four kebeles within Yallo woreda. These areas were part of the AACES project area and also kebeles where APDA had not previously worked. These eight kebeles were chosen as example areas to track changes over the life of the AACES project.

High-school graduates were recruited to undertake data collection. They were trained by APDA (M&E team and Program Coordinator) in administering the questionnaire. Team composition aimed to place the interviewers in teams of two, one male and one female, to account for gender sensitivities, and so questions could be answered privately by each of the respondents. Survey data was entered into the Statistical Package for the Social Sciences and then transferred into Stata (version 13) for analysis.

The qualitative phase of the study was conducted over seven days in January 2016. Two kebeles from each Yallo and Sifra woredas were selected for the qualitative study. In each kebele, two focus group discussions (FGDs) and one in-depth interview (IDI) on a specific theme were conducted (total 8 FGDs and 4 IDIs).

Eight FGDs were conducted with separate groups of men and women in two kebeles in each woreda. There were approximately 10 individuals in each men’s and women’s group. Community members were purposively selected from each kebele by APDA’s Kebele Coordinators. Four in-depth interviews were conducted with selected community members in each kebele on the thematic areas of MCH, education and income-generation activities. One community member from each kebele was chosen by APDA’s field project officers for each theme. The selection criteria for the MCH theme was one woman who had recently delivered in a health facility but had previously had homebirths, and one husband whose wife had recently delivered in a health facility but previously had homebirths.

**CARE**

The baseline and endline evaluation used a mixed methods approach, combining a statistically representative quantitative survey with in-depth qualitative research to help to understand the project’s achievement against its indicators and some of the underlying social, economic and behavioural changes and challenges that influenced the project. TANGO International led the baseline survey, mid-term reviews and final evaluation of the WE-RISE program.

The WE-RISE baseline and endline quantitative surveys were ‘beneficiary based’ in that the sample was randomly drawn from a sample frame composed of all households with a female member in a collective with which WE-RISE was working. Designed as a longitudinal study, data was collected from the same households for both surveys. TANGO and CARE calculated a sample size that provided statistically representative results for household and individual level indicators at the project level. Due to attrition and the inclusion in the sample of households that registered for the project but did not participate, the endline sample was significantly reduced. The endline achieved a sample size of 609 against a target of 809, with an attrition and non-response rate of 31.9%.
The quantitative data was collected by a team of 25 Tanzanian enumerators who administered the household survey in Swahili using Nexus 7 tablets. Survey data was collected from 5 to 15 August 2015 in Mtwara and Lindi districts. Field supervisors reviewed the accuracy of the data daily and TANGO provided comprehensive daily feedback to CARE and the survey supervisors on data quality. TANGO used SPSS v20.0 software to collate and analyse the data. Statistical differences were determined with t-tests or non-parametric tests. Probability levels were reported for statistically significant differences only.

The qualitative survey was conducted by an eight-member team of highly experienced Tanzanian researchers in six communities that were a subset of the quantitative sample. The villages were purposively selected, maximising diversity of relevant criteria. The qualitative methods included focus group discussions, key informant interviews and ranking exercises. Factors affecting the overall study included possible errors in the sampling frame; the length of the questionnaire, which had the potential to lead to respondent fatigue and inaccurate answers; the excellent logistical support provided by CARE Mtwara; and the timing of the baseline survey, which was conducted during Ramadan, an event that may have influenced responses.

**CARITAS**

The key approach to this final review was to ensure the participation of all the key stakeholders involved in the implementation of Caritas Australia’s (CA) AACES projects. The staff of the dioceses were key in not only providing input but also making all the arrangements and coordinating interaction with stakeholders in project implementation areas, including the communities and their traditional leaders; relevant government officials; the National Office Program Coordinators in Malawi and Tanzania; and CA staff at the Nairobi Regional Office and Sydney Headquarters.

Key steps in the review included:

- visits to all dioceses by the team which included the AACES coordinators for CA Malawi and Tanzania and the Final Review Coordinator. The first step on arrival was to prepare the staff in both countries for the exercise. The first set-up meeting was in Mang’ula (Ifakara) in Tanzania and in Malawi this was held in Dowa (Lilongwe). The survey tools were then tested in the respective communities before being finalised for use;
- focus group discussions (FGD) and key informant interviews (KII) which were organised with project staff, community groups, leaders and government officers. For each of the six dioceses, FGDs and KIIs were held with project ‘champions’, women, the marginalised, leaders and a mixed group which included women, men and leaders. Detailed review sessions were held with staff after discussions with the other stakeholders. At least 38 FGDs were held as a part of this exercise;
- continuous discussions and brainstorming sessions which took place within the final review team to critique the exercise methodology and dig for more detailed information. A survey was conducted with 542 project participants taking part;
- receiving brief reports from each of the dioceses providing staff reflections, along with two case studies they felt represented the impact of the program in their implementation areas;
• a desk review of AACES reports, design and other documents; and
• preparing a report drafted by the Final Review Coordinator with input from CA and Malawi Program Coordinators and reviewed by project partners in Malawi, Tanzania and CA.

**MSI**

Design of the end-of-program review was based on the procedures and methods set out and agreed in the project design document, particularly the MSI AACES monitoring and evaluation framework. This outlined a mixed methods approach including feedback systems, participatory monitoring and evaluation, and quality assurance approaches, and associated evaluation questions and indicators as a means of verification. The framework and this review also incorporated and built upon the principles underpinning strengths-based approaches such as asset mapping and appreciative enquiry, which had applicability across six main domains of interest to this project and review: personal, associational, institutional, physical, financial and cultural.

Consistent with these principles and the review purpose and objectives, the end-of-program review employed an approach combining a participatory, action learning and capacity building methodology. This included:

• engaging project and review team members across different locations (Kenya, Tanzania, Australia and the UK) in designing the end-of-program review, including agreeing the scale and scope of the study; clarifying the project’s theories of change; refining evaluation questions developed for the mid-term evaluation; and identifying sources of evidence and sampling criteria for key data and stakeholder participation as well as contextual factors that may have had a bearing on the study; and

• engaging representative samples of the target beneficiaries and project participants (including service users and public and private providers) and key stakeholders in generating and reviewing monitoring and evaluation information, stories of significance/case studies and photo voice and sense making sessions.

Furthermore, utilisation of a mixed methods approach as was proposed in the project monitoring and evaluation framework allowed for the gathering and interrogation of qualitative and process information and quantitative data/metrics. Finally, triangulation of end-of-program review information was used as a simple but effective recognised technique to enhance the rigour and validity of findings and recommendations. This occurred in various ways at local, country and project levels and included comparing and contrasting emerging findings from across the different sources as outlined in Figure 4 (collected different times and locations), across and within the seven data gathering methods and within and across participant groups (target populations and other stakeholders).
The Oxfam AACES WASH program from the design phase included a monitoring and evaluation (M&E) framework, which had a set of qualitative and quantitative indicators. The framework provided the foundations for the development of partner quantitative and qualitative data collection methods and procedures, M&E systems and reporting data as well as M&E activities during the project’s life-span. Six-monthly snapshot reports were compiled, annual reports submitted by partners, annual partner reflection and learning work sessions held, and ongoing development of materials, identified research and documenting of changes were undertaken. Baselines were conducted in year one of the program, the MTR was conducted in year three, and quantitative data was collected and reported on every six months against the AACES stated core indicators.
The existing M&E data provided a large collection of documents produced during project design and implementation. These documents provided a rich repertoire of evidence across the program lifecycle (design, implementation, management, monitoring, finances, participation of partners, beneficiary reach and changes etc.) and therefore the end-of-program evaluation aimed to firstly consolidate the documents to provide an overview of the program and secondly determine achievements since the MTR findings (based on the parameters set out in the evaluation objectives). This included exploring further how the program was implemented, the effect of Oxfam’s capacity-building approach on partners and the developmental practice (primarily on WASH), and how elements of risk management, innovation and sustainability were incorporated into the program as it unfolded.

A further research activity was identified to document the two-country model to accompany the end-of-program evaluation. This was seen to be important by Oxfam and the partners (as discussed at the May 2015 annual reflection meeting) as although this was one program in two countries, both countries had different policies, different governmental implementation approaches, and program partners implemented the WASH activities differently but with the same outcomes in mind. The focus of this was to determine the common and differentiating essential practices from Oxfam and the local implementing partners that might best represent two concise models of high-impact community engagement processes and implementation activities under the umbrella of the AACES program. These findings have relevant implications and applications for further health, social and economic developmental programs in Southern Africa.

The evaluation process included the following:

- collaborative development of articulating and agreeing to the purpose, scope and utilisation of the evaluation by Oxfam in Australia, South Africa and Zambia. The broad scope was discussed with the partners to get their buy-in and input on how the results could benefit their work, Oxfam, DFAT and the broader development sector. The initial terms of reference were then developed further and two consultants appointed: one for the evaluation and one for the documenting of the two-country model;
- compilation of the existing documents, reports, materials and products developed or produced during the five-year period;
- a desk-top review of these documents to develop the first draft of the program overview and to inform the development of the evaluation tools;
- development of the study questions, research methods and tools, sample, transcription/reporting templates and administration guide for implementation. This included training Oxfam staff on the tools for implementation. The administration guide aimed to standardise implementation of the tools across all sites, highlight ethical issues and practice, and to ‘trouble-shoot’;
- field work conducted in the two countries during October 2015 to January 2016. The field work for the documenting of the two-country model occurred in February 2016;
- data analysis conducted in December 2015 to January 2016 using cross-sectional theme coding and categorical indexing (for example, across duty bearers, participants and Oxfam program staff);
- report writing and presentation of preliminary results at an Oxfam meeting with partners in Zambia in January 2016; and
- finalisation of the report and submission to DFAT (March 2016).
The following research methods were used to collect the relevant data:

- key informant interviews with Oxfam partners, including the Director and program staff;
- focus groups with approximately 10 participants and beneficiaries from the partner organisations participating in the Oxfam AACES WASH program;
- key informant interviews with stakeholders in both countries (as identified by partners);
- semi-structured interviews with four of the technical partners in South Africa;
- semi-structured interviews with four of the ‘Oxfam No Longer Vulnerable Programme partners’ in South Africa who had taken on WASH activities but were not part of the AACES program;
- documenting MSC stories in Zambia between October 2015 and January 2016; and
- during the partner meeting in Zambia in January 2016, gaining further information pertaining to management of risks, innovative practice, decision-making and sustainability.

**PLAN**

Overall, the methodology drew as much as possible on gathering information from the duty bearers and marginalised people living in the communities in which PRAAC had worked. Their voices and opinions were the source of much of the data. This evaluation employed six key methods:

1. A document review including targeted data from the Monitoring, Evaluation Reporting and Improvement(MERI) tools to describe what PRAAC had done across each country project, who it had reached and the initial findings, as well as reports and other research.
2. Revisiting the community success-ranking exercise which commenced during the MTR to understand the helping and hindering factors at different levels to see which communities had made the most progress and why. Assessments of communities ranked the highest, the lowest and the most improved were done by the teams.
3. Collection of new MSC stories to inform samples for interviews and further data collection. Three stories from young women, adult women, PWD, duty bearers and young men were sought to provide an overview of the types of changes for each group.
4. Community selection of MSC stories to ascertain community attitudes to changes.
5. Semi-structured interviews and focus group discussions with key stakeholders in selected communities and at the district and national level to triangulate the findings from MSC stories and collect further data.
6. Validation of the findings at a Summit workshop and generation of final lessons.
The project collected a great deal of monitoring data about the numbers and types of people reached with various types of activities and where in each country. In addition to registration data of services and participation, a large number of MSC stories were collected throughout the project from Community Volunteers (CVs), duty bearers and target group members across the project. In-depth cases studies were also conducted of focus communities. In terms of policy influence, data was collected using relevant tools to a greater or lesser extent in different locations. The task of collating this data was given to the country teams who compiled country-wide results charts. In addition to analysing the data against the key evaluation questions, the data was analysed according to plans and expectations outlined in the PRAAC annual plans and reports.

The country teams were asked to collect MSC stories from various project stakeholders and these were analysed in two ways:

1. thematic – the general and specific themes emerging from the stories were analysed to look for consistency of changes noted and any differences for each sub-group of the target group or location; and

2. informative – an informative analysis was undertaken whereby major or important changes noted by story tellers could be followed up at interview to ascertain if the changes were more widespread or to inform other data gathering (for example GBV statistics from police to triangulate MSC reports of reduced GBV).

During the MTR, PRAAC countries were asked to rank all of their communities according to the level of ‘success’ in terms of rights of marginalised people. This was done to explore reasons why some communities may be more open or able to change than others and identify strategies for increasing success of PRAAC activities. Teams reviewed their rankings subsequently and in this final evaluation were asked to collect specific data about three communities that were considered the most successful, three that were the least successful and the community that moved the most. This data was analysed to look for success factors and learning.

Following the MSC story collection and community success ranking, individuals and groups of people were identified to undertake key informant interviews. Specifically duty bearers (including local leaders, police, health staff and school staff), CVs, PWDs and other target group members as well as village savings and loans groups, advocacy teams, and community strengthening and inclusion plan committees were included in interview lists for two reasons:

1. to gather opinions on progress in relation to the key evaluation questions; and

2. to triangulate findings from earlier data such as MSC stories.

The key informant interviews were analysed according to either or both of these factors.

To ensure an additional element of validation and independence, community MSC selection processes were conducted with selected communities to allow peer groups from communities to read and rank the stories in order of importance or value of changes noted. This peer review process ensured that issues important to various target groups were better understood. The selection workshop reports were analysed to look for outcomes that marginalised people value and consider important.

The Summit workshop was the last element of the validation process where the data and findings were reviewed and confirmed using the draft report and key lessons identified for the final report. A ‘Most Significant Learning’ story collection and selection process was undertaken.
WaterAid Tanzania

The development and drafting of the review report involved review of existing literature such as monitoring reports, the program design process, the MTR report and progress implementation reports. Prior to tool development, and before laying down field protocols, several Skype meetings involving WaterAid Tanzania, Malawi, Ghana and Australia were held to align to the needs for performing final assessment of the AACES program.

Having agreed on an approach, the evaluation team prepared protocols and tools for assessing program performance and outcomes of the project. This was followed by training field researchers on data collection. Training of numerators was done for half a day.

The study deployed mixed methods, with both qualitative and quantitative data collected concurrently. Qualitative data was collected through participant observations, where the team observed WASH facilities in all schools visited and observed practices of pupils after critical conditions. The evaluation team used semi-closed ended questionnaires to key informants to capture qualitative data on various aspects of WASH services. Key informant interviews were administered to purposely sampled village council members, school committee members and school administrators. Closed-ended questionnaires were also administered to purposely sampled key informants at district level and implementing partners to capture quantitative data. The closed-ended questionnaire was also administered to school administrators.

Participants were selected using a non-probability sampling technique. Purposively sampling was chosen as the best approach given the need to collect information from the village authority and school committee members. Selection of study sites was also done purposively; the evaluation team together with the program manager decided on districts and schools to include for the study. The decision was centred on the grounds that at least one district should be sampled in each project region. Therefore, each region had one district included in the study except for Dodoma, where all available districts (two) were included. All districts were included due to heavy rainfall during the data collection period, which destroyed infrastructure to the extent that most schools in the first sampled district were unable to be accessed.

The sample size for schools was decided by taking two-thirds of project schools in each district. The same approach was used to sample village council and school committee members. The study did not sample the heads of schools as each school has only one school head. In this case, 17 heads of schools for the 17 sampled schools were included for the study.

The study interviewed a total of 44265 individuals (about 67% of the expected sample). The analysis of primary qualitative data was performed using content analysis techniques, whereas SPSS and Excel were used to analyse quantitative data. Secondary data that came from review of various literatures was triangulated with primary data. The two sources were used to inform each other on variables of interest.

The expected sample size for all three districts was 659 individuals; due to time challenges and weather conditions, WaterAid did not manage to reach all individuals.
GHANA

Based on the experience with the AACES MTR process, WaterAid Ghana (WAG), as well as the other WaterAid country programs within the AACES program, believed the best way to facilitate internal learning within the organisation was for staff to lead more directly in the knowledge management process. As a result, it was agreed that WAG program staff would utilise a peer review method to conduct a learning evaluation process focused on organisational learning. The primary audience would be each WaterAid Country Program (especially the program teams); the secondary audiences would include WaterAid West Africa, WaterAid Global and then finally, the wider WASH sector.

Concerned with maximising learning, WaterAid Ghana was clear that it did not want to produce an evaluation report with minimal practical use or value for different readers of the document. Instead, the WAG AACES team wanted to produce something that colleagues would actually read and perhaps repeatedly because the lessons were immediately accessible and could be easily brought to bear to influence program design, activity implementation, monitoring/evaluation and redesign. Therefore, it was not a typical evaluation.

A somewhat eclectic set of documents comprised the larger learning document. For example, although WAG used the customary case study to highlight some of the lessons it also used interviews and letters.

The two AACES learning and reflection workshops that took place each year provided an occasion for great conversations between the staff of a wide range of organisations. These in turn enabled great opportunities for learning. Both formal and informal conversations enabled participants in the learning and reflection workshop to listen, discuss and rethink how to do things. Recognising the power of conversations, WAG tried to capture some of its benefits. It conducted some interviews and shared them as learning documents. The reflection provided by the two interviewees provided a unique perspective on some of the key lessons.

In addition to the interviews, WAG’s learning document included two letters discussing budget tracking. Written in an informal style and meant to contrast with the bullet point structure common to the email/communication cultures of many INGOs/NGOs, this learning document employed letters to facilitate a process of reflection and sharing. It was assumed that the use of an unorthodox style may make the document more appealing to the reader. It was hoped the letter would draw in the reader and generate some different thinking. Critically, it was assumed that the letter also holds some potential in providing a different way to learn for readers.

WORLD VISION

The research methodology was mixed methods (qualitative and quantitative) with a variety of data collection and analysis approaches used to satisfy the requirements of the research questions. It was guided by the program TOC, which placed the implementing agency (World Vision) as an instigator and enabler of change rather than a direct actor. This approach created a level of interim achievements brought about by government, local organisations and the public that sat between World Vision’s own inputs and externally measurable health outcomes.

The focus on improving services now for health outcomes in the future limited the relevance of census or similar demographic data. Instead, program results were evaluated by examining the policy, service and behaviour landscapes for health, and how they were influenced by the last five years of the AACES
EAMNCH project. For many maternal, newborn and child health practices, sufficient empirical evidence already exists to state with confidence that their increase leads to improved child survival, and so investigation into this final outcome level was not within scope. However, the additional purpose of the evaluation in assessing current health status and opportunities merited the inclusion and consideration of standard health indicators such as nutrition status and mortality rates, with acknowledgement that the program was just one of many mechanisms contributing to this broader social change.

To undertake local evaluation in four countries (Kenya, Rwanda, Tanzania and Uganda), national consultants along with World Vision staff and volunteer data collectors received a standardised set of methods to allow for comparison of health status quo from baseline (2011) to endline (2016), or where baseline information was not available, from MTR (2014). The resulting country-level reports were then drawn into an aggregated analysis of results in sectors of maternal and child health while still retaining contextual relevance to inputs and outcomes at local level.

The surveys and data comparison were quasi-experimental in their approach, comparing demographically alike samples over time, rather than comparing target and ‘control’ scenarios using data from communities outside project areas. It is worth noting in this regard that the projects were working in districts where health indicators were usually below the national average due to the poverty and social vulnerabilities of the location, so that comparing like for like was the logical approach to mapping change.

Figure 5 shows the evaluation framework and the different approaches used to measure results at different phases of the project’s momentum.

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**Figure 5. Evaluation Framework**

<table>
<thead>
<tr>
<th>PROJECT PHASE</th>
<th>INDICATED BY</th>
<th>MEASURED/VALIDATED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>GOAL - LONG TERM</strong></td>
<td>Improved US child survival</td>
<td>• Projected with ‘reasonable’ confidence based on existing empirical conclusions</td>
</tr>
<tr>
<td></td>
<td>Improved maternal survival</td>
<td>• (local govt. statistics reflect current health status and inform future direction of MNCH/N efforts</td>
</tr>
<tr>
<td><strong>OUTCOMES - FINAL</strong></td>
<td>Improved nutrition in children under five</td>
<td>• Child monitoring records over time</td>
</tr>
<tr>
<td></td>
<td>Improved response and referral (household/institution)</td>
<td>• Health system strengthening case study</td>
</tr>
<tr>
<td></td>
<td>Ongoing community-govt-private sector dialogue/planning</td>
<td>• Triangulating qualitative feedback</td>
</tr>
<tr>
<td><strong>OUTCOMES - CAUSAL</strong></td>
<td>Improved MNCH/N practices</td>
<td>• Statistical analysis of</td>
</tr>
<tr>
<td></td>
<td>Improved health systems</td>
<td>- Household questionnaires</td>
</tr>
<tr>
<td></td>
<td>Inclusive approaches to health service provision</td>
<td>- Household dietary diversity tool</td>
</tr>
<tr>
<td></td>
<td>Improved household food resilience</td>
<td>- Household wealth index tool</td>
</tr>
<tr>
<td><strong>OUTCOMES - PROGRESS</strong></td>
<td>Improved community participation i health accountability</td>
<td>• Triangulating qualitative feedback</td>
</tr>
<tr>
<td></td>
<td>Improved women’s knowledge/participation</td>
<td>• Health system strengthening case study (role of community and govt. actors)</td>
</tr>
<tr>
<td></td>
<td>Improved interest and action from relevant govt. ministries</td>
<td>• Household decision making tool</td>
</tr>
<tr>
<td></td>
<td>EAMNCH partnerships and services</td>
<td>• Triangulating qualitative feedback</td>
</tr>
<tr>
<td><strong>INPUTS</strong></td>
<td>Desk review of project reports, monitoring records, learning events, case studies</td>
<td></td>
</tr>
</tbody>
</table>
• Household survey: Statistical evidence sought through closed-question household surveys on a range of childcare, dietary, health-seeking and sanitation/hygiene practices. This included using power calculation to get the required sample size for the study. The sampling frame process of the survey was based on each country’s population and housing census projection. In the sampling frame, villages were randomly selected; all selected villages were visited and none was replaced. Selection of households was also random so long as they included a mother of a child under five.

• Health and nutrition indicators: Additional data on anthropomorphic indicators for children was collected through trained enumerators based in the community or through existing growth monitoring records at health centres. Also, basic statistics on sub-district levels of maternal and child mortality were sourced from government records.

• Statistical comparison: Using STATA12, the data collected was then compared against baseline and MTR figures for the same or similar indicators to generate evidence of change at different levels of the project: district and also for the four countries overall.

• Key informant interviews/in-depth interviews: Interviews took place with a number of individuals purposefully chosen for their knowledge of the project and the target communities. These included government officials, health workers and World Vision staff. The information was used to validate the likelihood that EAMNCH had contributed to statistical change identified through survey and data analysis. Based on feedback around program quality and stakeholder satisfaction, the information also formed key evidence for organisational recommendations.

• Focus group discussions: In the four countries, consultants brought together groups of between 8 and 12 people who had participated in activities generated or supported by the project including community health workers, Citizen Voice and Action (CVA) committees, nutrition group members, pregnant or breastfeeding mothers, and PWD. The results of these discussions were used similarly to data from key informant interviews, with a particular emphasis on exploring satisfaction, relevance and positive change for beneficiaries and target groups.

Standard tools and guidance for data collection were used by the consultants in-country, with some contextualisation of sample size and informant selection. Table 1 compares the data sources, sampling methods, tools and sample sizes for the country-level evaluation.
### TABLE 1. DATA SOURCES, SAMPLING METHODS, TOOLS AND SAMPLE SIZES FOR THE COUNTRY-LEVEL EVALUATION

<table>
<thead>
<tr>
<th></th>
<th>Kenya</th>
<th>Rwanda</th>
<th>Tanzania</th>
<th>Uganda</th>
</tr>
</thead>
<tbody>
<tr>
<td># Villages / locations</td>
<td>46</td>
<td>20</td>
<td>7</td>
<td>Not stated</td>
</tr>
<tr>
<td># households per village / location</td>
<td>14</td>
<td>32</td>
<td>Varied</td>
<td></td>
</tr>
<tr>
<td>Total # households</td>
<td>623</td>
<td>660</td>
<td>682</td>
<td>615</td>
</tr>
<tr>
<td>Criteria for inclusion</td>
<td>Households with mothers / caregivers of children under 5</td>
<td>Households with mothers / caregivers of children under 5</td>
<td>Households with mothers / caregivers of children under 5</td>
<td>Households with mothers / caregivers of children under 5</td>
</tr>
<tr>
<td>Confidence interval</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
<td>95%</td>
</tr>
<tr>
<td>Primary data collection on stunting, wasting and underweight</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Standardised tools for household questionnaire</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>FGD/KII with</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community Health Workers (CHWs)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Citizen Voice and Action (CVA) team</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Education representatives</td>
<td></td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government leaders (local)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Village committees / nutrition committees</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>PWD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health centre managers / MNCH coordinators</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implementing partners</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>Project staff</td>
<td>Y</td>
<td>Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Faith groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>US Mothers groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husbands or male partners</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vocational groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth groups</td>
<td>Y</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The samples were stratified by sectors, with consideration of several variables around gender, age, family size and education levels. Though efforts were made to adjust levels for a fair representation of each variable, some further weighting remained necessary to create proportional change measures at analysis.

Data analysis was performed using the ‘SVY’ commands of Stata version 13.1 (Stata Corp, College Station, TX, USA), which allowed for adjustments for sampling weights and stratified cluster sampling design. Data sets were extracted for each country and meta-evaluation analyses were conducted summarising the prevalence of the 13 key Maternal Newborn and Child Health (MNCH) indicators. All studies were stratified by district within each country using the metaprop command with random-effects model in Stata. Graphs were presented using EXCEL to compare differences in baseline, mid-term and final evaluation.

The data was collected in a variety of ways including tablet, written forms, tape recorder, session notes and transcripts. Survey data was posted daily to a central online database, while data from key informant interviews and focus groups was collated and where necessary translated over time. This data is now stored in electronic form securely with each WV office. Participants were given informed consent to sign before taking part in the survey, including assurance of anonymity and a description of how the data would be used. For illiterate participants, informed consent information was read aloud and signed.