## *CAC South Asia*

## *Questionnaire for Independent Project Completion Assessment*

**Key Project Data**

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| ***Title of Project*** | Combating Corruption through Citizen Participation |
| ***Project Location:*** *Bidur* Municipality and *Betini* & *Khanigaun* VDCs of *Nuwakot* district |
| ***Corruption problems being addressed*:** 1. Absence of the health service personnel in their duty stations.
2. Lack of transparency in distribution of medicines allocated for free distribution and lack of availability of the medicine/instruments in time.
3. Referring by the health personnel to use medicines from the private clinic rather than to provide free medicines from the health institutions.
4. Lack of transparency in distribution of delivery allowance and free maternal health services.
5. Lack of proper maintenance of medical equipment such as X-Ray machine, Ultrasound etc. indirectly tempting the service seekers to use expensive private facilities.
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|  | ***Planned*** | ***Actual*** |
| ***Implementation period*** | January 2010-December 2010 | March 2010-February 2011 |
| ***Total Budget*** | US$ 24,474.00\* | US$ 23,982.00\* |
| ***PTF Contribution***  | US$ 18,841.00 | US$ 18,348.26 |
| ***Project Objectives*** |
| ***As described at Project Approval*** | ***Status of Achievement at Completion[[1]](#footnote-1) (****in view of the Evaluator)* |
| 1. Increased citizen participation to identify the forms and scope of corruption and to contribute in promoting good governance in district level government health services.
 | **Rating 2** (Citizen score card survey was carried out for mapping of the right holders’ perception on the available health services and support was provided to update citizen charter, maintain information desk and suggestion boxes at the health service delivery points in the project area. Monitoring for ensuring public accountability of these agencies is yet to be regularized.) |
| 1. Reduced corruption in the district hospital and health post/sub health post in the project area.
 | **Rating 2** (Right To Information (RTI) related IEC materials were developed and disseminated and four events of RTI orientation programs organized to raise the community’s awareness level on the subject. As a consequence, 10 cases of malpractices in the government health services were uncovered and the attention of the concerned authorities was drawn. Despite this first progress, it seems that awareness on RTI is still needed.) |
| 1. Existing government health policies and regulation are implemented effectively.
 | **Rating 2** (Four central level meetings primarily with the National Vigilance Centre, the Commission for Investigation of Abuse of Authority and the Department of Public Health were organized to inform them about the contemporary issues in public health service delivery. Policy research, national level workshop, media advocacy etc. are yet to be carried out.)  |
| 1. Formed/strengthened corruption monitoring committees at district level
 | **Rating 3** (Corruption Monitoring Committees (CMCs) have been formed both at the district and VDC levels. These entities are functional and they have been provided training on the citizen score card tool. Some support was also extended in setting up their contact offices. These committees are still in juvenile stage and their institutionalization is still a question.) |
| ***Top Three Results (actual).*** *In view of the Evaluator)*  | 1. Establishment and operation of CMCs at the district and VDC level.2. Development and dissemination of RTI related IEC materials.3. Increased awareness level of the right holders regarding available facilities at health service delivery outlets i.e. district hospital and health posts. |
| ***Overall Achievement Rating*[[2]](#footnote-2)***in Evaluators view. Use numeric rating as well as narrative. See footnote 2.*  | **Rating 2 Achievements satisfactory**(The project has been effective and professional in initiating anti-corruption activities in health service deliveries by the government entities. The project coordinated several of the government counterparts in the implementation of project activities. While encouraging progress has been made in this short duration, much work has remained to be done to achieve the goal of reducing corruption in the health service delivery at local level.) |

**Completion Assessment[[3]](#footnote-3)**

1. ***Quality of the Project Design***

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|  | Topic | Rating |
| a. | Elaboration of the corruption problems to be addressed.  | **2** |
| b. | Clarity and relevance of the objectives to the corruption problem being addressed.  | **2** |
| c. | Proposed community empowerment activities | **3** |
| d. | Coherence of results framework (Log-frame)  | **2** |
| e. | Constructive engagement plan | **2** |

***Comments:*** *(to support/explain rating and overall assessment).*

Instead of the project title “Combating Corruption through Citizen Participation”, the literal translation of the Nepali title of the project is “Citizen’s Initiatives for Good Governance Promotion” which gives a positive, connector and appreciative connotation. As the intervention was focused on health service delivery in the district hospital and VDC level health posts, it is beyond the scope of the project to minimize wide-spread corruption in the district. Yet, as adequate consultations with local level stakeholders were carried out to assess the situation of health delivery facilities, the corruption problems had been properly elaborated and the objectives have been relevant in greater extent in responding to the problems to be addressed. The project intervention included the involvement with/of demand side (right holders) and supply side (duty bearers) of public accountability of the public service delivery agencies. Likewise, working with media was given very much importance. But, resource tapping from the local bodies (as they are receiving huge fiscal transfers as block grants from the Center nowadays) for promotion of good governance has not been considered. Moreover, it seems that there were limited activities for community empowerment initiatives except for a few formal gatherings. Furthermore, there is room for improvement to ensure coherence in the project’s logframe. Outcomes, outputs and activities appear to be mismatched sometimes with few outputs more appropriate for outcome level, objective no. 2 more matching to goal level and objective no. 4 more appropriate for output level. The choice of indicators should be reviewed in order to ensure proper monitoring. Reportedly, there was no engagement of the stakeholders at the time of project design. Three scattered geographical locations - urban, semi-urban and rural ones - were chosen for the project implementation. If the locations would have been clustered, it could be more cost-effective and impacting. The project was intended for two years (the project planning matrix is also developed for two years) while the log-frame as well as the fund commitment by PTF is for one year only. This resulted in many unfinished tasks.

1. ***The Implementation Performance***

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|  | Topic | Rating |
| a. | Extent to which the planned project activities completed.  | **1** |
| b. | Extent to which the planned outputs completed.  | **2** |
| c. | Community empowerment initiatives implemented  | **3** |
| d. | Constructive engagement during implementation  | **1** |
| e. | Focus on sustainability  | **3** |

***Comments:***
Bar few exceptions, almost all activities intended for the first year have been completed. As the project duration has initially been intended for two years and outputs have also been worked out accordingly, some outputs are yet to be achieved or partially achieved. As mentioned earlier, community empowerment initiatives were limited to a few formal gatherings and meetings. How the local facilitators were mobilized at the grassroots level is not clear. A large number of national and local level stakeholders including the National Vigilance Centre (NVC) and the Commission for Investigation of Abuse of Authority (CIAA) were frequently consulted and strategic guidance thereof was received to steer the project in the right direction. Some effort, albeit inadequate, was seen to involve the largely influential All Party Mechanism at district and local levels. The collaboration with local media is highly appreciated. But, no formal and significant measures were taken to take the All Party Mechanism into confidence. Enough efforts were exerted to ensure sustainability of the project’s achievements. The project has tried to ensure sustainability through establishment and operationalization of the Corruption Monitoring Committee (here again the literal translation of its Nepali name is “Good Governance Monitoring Committee”) at local level. The formation of CMC is a unique development in the monitoring of corruption. But, without any substantial capacity development and institutionalization measures, the committee is not going to be sustainable in the long term.

1. ***The Results*:**

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|  | Topic | Rating |
| a. | Accomplishments of the results specified in the logframe  | **1** |
| b. | Responsiveness of authorities to constructive engagement. | **2** |
| c. | Effectiveness of community empowerment initiatives | **2** |
| d. | Value added of peer learning activities and events | **2** |
| e. | Project contribution to CSO partner capacity to carry out anti-corruption work.  | **1** |
| f. | Prospects for sustainability of project activities  | **3** |

***Comments:*** *(Please briefly explain the ratings and any noteworthy aspects)*

Results planned for the year one have been accomplished and the responsiveness of the authorities such as NVC, CIAA, District Administration Office, District Development Committee (DDC), District Public Health Office (DPHO) including the district hospital, media etc. is reportedly found quite encouraging. Thus, the approach was found comprehensive in engaging government counterparts, civil society actors and media. Although there was limited number of activities for community empowerment, whatever had been planned and implemented in this sphere has been found effective. Instead of peer learning, an exposure visit to the sub-health posts in other district was carried out with the consent of PTF and the visiting team members reportedly benefitted by learning good governance practices in the management of sub-health posts and the role of Village Development Committees (VDCs) to allocate its budget for health posts. The CSP partner, Samuhik Abhiyan feels privileged to implement the project in question as the project has augmented its exposure, confidence and capacity to carry out anti-corruption works. Its efforts are producing results such as increased citizen demand for transparency; increased civil society influence on governance of public service delivery agencies; awareness and capacity of CMCs in budget analysis; and better governance practices. Although the CMC at local level is an innovative intervention, these entities are yet at very initial stage requiring and urging adequate backstopping support. Without strong CMC, the prospects for sustainability of the project activities are uncertain.

  **4. Impact[[4]](#footnote-4) Assessment:**  Based on your assessment of the project activities and accomplishments please choose one of the following ratings and provide a brief explanation to support the rating.

*Rating*  *Guideline*

1. No discernible impact
2. Low impact with little prospect of sustainability
3. Moderate impact with some prospect of sustainability or High ST impact but little prospect of sustainability
4. Moderate impact with good prospect of sustainability or Major Impact ST relative to resources but may well not be sustainable.
5. Major impact which is likely to be sustainable

In this scale, a rating of 1 would be unsatisfactory, 2 would be partially satisfactory, 3 would be "fully satisfactory", 4 would be highly satisfactory, and 5 would be "exceptional".

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| **Rating 4:** Moderate impact with good prospect of sustainability |

 (Having completed the first year of project implementation by the project, it is too early to assess its impact. Yet, although there are many due activities intended for the second year, the project is likely to produce some moderate impact with good prospect of sustainability. The impacts generated by the project will be sustainably continued and further developed if and only if there would be some repercussions at micro as well as meso/macro level as a result of this. Without the policy level interventions, the achievements generated at local level will be hardly sustained. However, most of the activities intended for policy level influence and advocacy are supposed to be implemented in the second year. The proposal for this is still under negotiation between PTF and Samuhik Abhiyan. Therefore, reduction in corruption in health service delivery by the selected service delivery agencies in terms of some measurable indicators is yet to be ascertained. But, some positive signs are already visible. The CMC at district and local levels have been formed and the health service outlets are running in comparatively more transparent and accountable manner. Furthermore, the right holders are more conscious about their rights and the available facilities to be received from the health service delivery agencies. The CMCs have started demanding transparency and accountability from the government in all spheres-in schools, district administration office, traffic police office, land revenue office etc. The better part of the project is that it has been able to receive the media coverage from district to national level and such effort needs to be strengthened in days ahead. The weaker part of the project is that it has overlooked the All Party Mechanism which has formal and informal influence in determining the district level policies, principles and procedures enabling an environment for or against corruption.)

**5. PAC-PTF Advice (Please consult CSO Partner)**

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| a. | Value added of PTF technical advice | **2** |

***Comments:*** *(In your comments please include Strong and weakest points of PTF-PAC interventions and suggestions for improvement*)

As reported, technical advice and guidance from PAC-PTF was found helpful to improve the project’s effectiveness. However, there were reportedly only limited and timely responses. The strong point of PAC-PTF intervention is the encouragement and resilient morale support to the implementers to fight against widespread corruption. To enhance the confidence and ability of CSOs to hold the public service delivery agencies accountable and to make them responsive to the citizens’ needs is a challenging and risky mission demanding courage, conviction and commitment. In this regard, Samuhik Abhiyan was proud of having a partnership with PTF. The weak point is the delays in getting the responses and feedbacks from PAC-PTF. Feedbacks on the technical and financial reports were received very late, making it sometimes very difficult to take corrective measures. It is therefore suggested to communicate feedback, suggestions and comments to the CSO partners in timely manner.

**6. Summary of Assessment:**

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| **a.** | **Overall Achievement Rating** | **2** Satisfactory |

***Guidance:*** *The degree to which the project achieved, or seems likely to achieve, all or most of its objectives and results.* (In line with the rating scale for completion assessment)

1. **Commentary to Support Overall Assessment.**

***Guidance:*** *Please provide a narrative to accompany your overall achievement rating taking into account your overall assessment (in a maximum of 20 lines) of taking into account of quality or project design, implementation performance and results achieved. Reasons for rating of 4 or more may please be explained here.*

Despite the rhetoric to fight corruption, the level of corruption in Nepal has been increasing and it has mainly led to reduced cost effectiveness and efficiency of the service delivery and development programs. Nepal is still in a prolonged transition state and there still exists large space for corruption and impunity. As a results support for anti-corruption activities, still a challenge in Nepal, is still needed. “Combating Corruption through Citizen Participation” was an innovative initiative to promote transparency and accountability in the public health service delivery system through civil society pressures. The overall project design was found good and the clarity and relevance of the corruption problems to be addressed and the objectives set thereby have also been found good. However, there is still room for improvements for ensuring coherence in the result frameworks and a right balance needs to be maintained between the supply side and demand side of anti-corruption works. The constructive engagement plan was found encouraging. The project staff established excellent working relationships with the major like-minded organizations.

The project was professional and effective in its approach to implementing the project activities and deliveries with collaboration with both demand side and supply side of public accountability of public service delivery agencies. The project was successful in engaging several of the government counterparts in implementing the project activities. For the relatively low expenditure, the project provided high level of activity and the engagement of key anti-corruption agencies. Public awareness on RTI particularly health service related information and other anti-corruption measures were greatly increased at local level. While much progress at local level had been made over the past year, much work at meso and macro level remains to be done. Few planned activities were not completed as originally envisioned.

Adoption of some changes in the health service delivery system has been seen because of upward pressure from citizens including CMC and realization by the duty bearers. But, the scale of intervention needs to be sufficient enough in terms of duration and investment as the corruption is a multi-dimensional problem. The project outreach for anti-corruption works needs to be expanded. One of the major achievements of the project is the establishment and operationalization of CMCs at district and local level. If properly capacitated and facilitated, these committees will be a sort of potential citizens’ coalition against corruption. The challenge will be to keep such committees out of objectionable influence of party politics. It is therefore suggested to work more closely with local bodies i.e. Village Development Committee (VDC) at village level, District Development Committee (DDC) at district level and/or All Party Mechanism at local level.

1. \*As reported by Samuhik Abhiyan, but not reflected in any official document.

 Please use the following ratings scale and provide brief narrative. 1 = fully achieved, very few or no shortcomings; 2 = largely achieved, despite a few short-coming; 3 = only partially achieved, benefits and shortcomings finely balanced; 4 = very limited achievement, extensive shortcomings; 5 = not achieved. [↑](#footnote-ref-1)
2. The degree to which the project achieved, or seems likely to achieve, all or most of its objectives and produced the outcomes projected in the logframe attached to the Project Proposal. The rating is based on, and consistent with, the detailed ratings in the Completion Assessment section. [↑](#footnote-ref-2)
3. Ratings Scale: **1 = Highly Satisfactory or Likely; 2 = Satisfactory/Likely ; 3 = Moderately Satisfactory/Likely; 4 = Moderately unsatisfactory/Unlikely; 5 = Unsatisfactory/Unlikely; 6 = Highly Unsatisfactory/Unlikely; NA = Not Applicable.** [↑](#footnote-ref-3)
4. For this purpose, "impact" is defined as (1) reduction in corruption in terms of some measurable indicator (e.g. fewer bribes paid or corruption reduced through better monitoring); or (2) enactment and implementation of a law or code related to strengthening the integrity system, making corruption less likely; or (3) identification, design and adoption of some change in the administrative system that makes corruption less likely. For a phased project, concrete and effective steps towards achieving (2) or (3) above with good prospects for follow up complete the process initiated would be recognized as "impact". [↑](#footnote-ref-4)