

Expanding human capacity for response to HIV and AIDS - the local community as change agent

An Integrated Evaluation Report

on the work of the

Upper Myanmar HIV/AIDS Programme (PD1930)

Philippines Cross Cultural HIV/AIDS, Health and
Development Project (PD2078)

Asia-Pacific Regional Programme Facilitation Team
(PD1897)



Dr David M.A. Evans
david.m.a.evans@btinternet.com

Contents

1. Executive Summary	3
2. Methodology	8
3. Organisational Contexts	11
i Overall context	11
ii Specific contexts	12
Asia Pacific Regional Facilitation Team	12
Philippines programme	13
Myanmar programme	15
4. Findings	17
Output a	17
Output b	20
Output c	21
Output d	22
Output e	25
Output f	26
5. Conclusions and Recommendations	27
Appendix 1 Key Informants	32
Appendix 2 Philippines evaluation visit Schedule	35
Appendix 3 Terms of reference for evaluation	36

1. Executive Summary

This evaluation report was commissioned by the Salvation Army, Asia Pacific Regional Facilitation Team on behalf of Bistandsnemnda (BN) and the Norwegian Government (NORAD). The Terms of Reference for the evaluation are attached in Appendix 3.

The evaluation looked at the work of the Philippines Cross-Cultural, HIV/AIDS Health and Development project (PD2078) and the Upper Myanmar HIV/AIDS Programme (PD1930) in particular relation to the projects' interaction with the Asia Pacific Regional Facilitation Team (RFT). The evaluation took place during the second half of October 2006.

The core vision and purpose of the RFT in relation to these two projects is to support an approach to HIV related work which facilitates local community responses to local challenges of poor health and wellbeing generally and HIV/AIDS specifically. The emphasis of the RFT's work is to accompany project implementers at Territorial, Divisional and local levels to enable learning and reflection between and within projects and other expressions of practical involvement.

The project in the Philippines has been running for several years and has expanded considerably to some 39 of the 74 Corps in the country. In Myanmar the work is focused in the Upper Sagaing Division adjacent to the Indian border where there are some 29 Corps active in the programme out of the total of some 40 Corps nationally.

There is evidence in both countries that the programmes are having an impact on the attitudes and behaviour of local people towards people with HIV/AIDS. The role of the RFT in championing and supporting the embedding of a facilitative approach is appreciated by personnel in both countries, but there is need to strengthen and institutionalise the approach. The main ways that it needs to be strengthened are (i) ensure that the RFT operates in a less *ad hoc* way than at present, (ii) by making the concepts and processes better understood by colleagues and local project implementers, (iii) by making the process of facilitation from the RFT down to the grass roots more intentional and systematic and better resourced (iv) by ensuring that key facilitation skills are present and being continuously supported at all levels right down to the grass roots.

There is evidence that at the grass roots, a facilitative approach is starting to be embraced by local volunteers and activists, however the approach needs further unpacking and explanation, especially in terms of how local community members themselves can be animated to find and resource their own solutions to local problems. One key area of skill that is most important and appears to be rather

weak at present is the skill to facilitate an exploration and understanding of the root causes to local problems. There is a need to ensure that local responses address these rather than only address the effects of the problems – in other words to truly integrate care (addressing effects) and prevention (addressing underlying causes and vulnerabilities).

There is a need to better document and describe the impact of the facilitative approach. With truly facilitative approaches it is difficult to prescribe outcomes other than in general terms. Outcomes that do emerge as a result of local responses to problems tend to be of huge significance and benefit to communities both in terms of specific issues such as changes in attitudes to people with HIV/AIDS, but also in more general terms such as resilience and confidence to meet other challenges. Furthermore, impact is often difficult to quantify because of its qualitative nature. There is a realisation in both the Philippines and Myanmar that techniques to help assess overall impacts are required and there is a commitment within the RFT to undertake and develop the ability of local people to support and play an active role in Participative Action Research.

The report raises the wider issue for the Salvation Army as a Movement, that by equipping local communities to respond to local problems in an “integrated mission” paradigm will have tangible and far reaching implications for the organisation’s culture and structure. The dynamics within the current hierarchy as well as the long standing vertical departmental structures of the movement will change. These implications are worthy of much more thought than has been possible here. The point is that as responses at the grass roots become more integrated¹ so the vertical departmental structures of a great Movement such as the Salvation Army, with its heritage of welfare and service provision will inevitably be challenged.

Furthermore, if the Regional Facilitation Teams are a hub for emerging good practice arising from reflection and learning from Territorial and wider Zonal experience, there is a strong case for Project Officers in Support territories to connect with RFTs and the learning they have access to and responsibility to share.

The recommendations are integrated with the conclusions at the end of the report. They cover two main areas: (1) those that relate specifically to the operation and effectiveness of the Asia Pacific RFT and its place and role in the wider institution, (2) those that relate to the local level in the Philippines and Myanmar.

¹ The boundaries which never have been firm in reality on the ground between health, education, gender, livelihood and food security, HIV and many other issues become far more porous and inter-linked as communities explore and discover that the root causes of problems are themselves multilayered and truly inter-linked,

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Recommendations:

Regional Facilitation Team operation and its place in the wider institution

1.i Agree how the accompaniment/facilitation process initiated by the RFT will cascade down from international levels to local levels through an open and clear design process which includes key Salvation Army leaders at the Territorial level and below.

1.ii Formalise the role and mandate of the RFT within this overall process.

1.iii Ensure that capacity of the RFT is sufficient to fulfil its purpose by deploying enough of the right people (skills, aptitude and leadership style) in appropriate positions at each level.

2.i Whilst there is evidently some understanding of the RFT's role and *modus operandi* within Territorial, Division, Cluster and Corps personnel, it needs to deepen through dialogue with members of the International Facilitation Team and the RFT. In doing this, it is important that senior leadership in Territorial and Divisional commands are able to reflect on structural and cultural aspects of the movement in relation to the integrated mission paradigm. Discussions about the role and *modus operandi* of the RFT should be supported by exposure of more senior leaders to programme areas where communities are starting to respond effectively to local needs. In the course of this dialogue and exposure the following features will be illustrated:

- What an accompaniment-approach which acts as a means of learning and development, requires in terms of resources
- How local community responses to local needs emerge as a result of facilitating community discussion and counselling
- The implications of local communities setting the integrated mission agenda for the Salvation Army to respond to and support
- What Participative Action Research is and how it is a key tool for capturing evidence of the impact of donor-funded development work.

The expected outcome of this dialogue and exposure will be that the principles of human capacity development and the facilitative approach are turned into practice faster and more consistently.

3.i Mainstream the RFT's place in the movement and its role at the Zonal and Territorial levels by:

- Designing a process for further explanation and envisioning of HQ staff at all levels in the advantages and benefits of an integrated mission approach and the

role of facilitation generally and the RFT specifically, in promulgating good practice.

- Secure the resources (people and money) at International and Territorial levels and below to dedicate to the process of embedding the integrated mission approach and human capacity development.

4.i Organisational cultural and structural issues. Experience from elsewhere indicates that where reflection on the implications of a 'bottom-up' integrated mission approach takes place with the necessary rigour, the following issues require attention:

- Leadership development. In the context of the Salvation Army leadership training, assess potential leaders in terms of their leadership styles and ability to think and make decisions collaboratively, giving space and opportunity to others (and especially those in the local community who are not members of the Salvation Army Corps) to share their experience and skills. Assess existing leaders for their need of support and training to change their approach to leadership.

In regard to their preparation for deployment, ensure leaders at all levels but particularly local Corps leadership receive training in the concepts of development generally and integrated mission specifically. In addition, train leaders in basic facilitation skills. The theological implications of these approaches are significant and worthy of thorough exploration. Experience from elsewhere would suggest that theological reflection on the issue of power, how leaders use the considerable power they have invested in their positions and the power dynamics that operate when communities are facilitated to respond to their own local issues are especially important.

- Leadership deployment. Ensure that experienced and skilled leaders in the area of integrated mission are moved on to new postings only after thorough consideration of the possible impact on the sustainability of programmes.
- Consider other implications of effective integrated mission programmes at the grass roots on the way the movement operates at all levels. For example the allocation of resources, assessment of mission impact, relationships with donors, the organisation of and interaction between vertical departments/units. As necessary institute an organisational change process to design and implement the appropriate changes.

4.ii Create stronger links between RFTs and those people in Salvation Army Support Territories who liaise with institutional and other donors.

At the local level.

5.i The process of accompaniment at the grass roots level needs to become clearer and more intentional with the capacity of local facilitation teams matching their role (see also Recommendation 1.i). Ensure that the processes and resources agreed at Territorial and other levels down to the

local level for the effective facilitation (accompaniment) of community volunteers and local leaders are implemented and monitored.

6.i Ensure that the basic concept of facilitation is understood by volunteers at the grass roots level and provide practical training in active listening, asking open questions, exploring the root causes of problems (e.g. how to use the 'problem tree' tool), how to facilitate the process of prioritising options and decision making.

6.ii Conduct regular and tiered training needs analyses with all volunteers which take into account their experience and existing skills and design on going training programmes accordingly.

6.iii Develop training for increasing awareness of the importance of and skills in measuring mission impact at the local level which effectively captures both quantitative and qualitative evidence (Participative Action Research) .

7.1 The project facilitators at Territorial and Divisional levels to assess the impact and effectiveness (depth) of the community responses being stimulated/animated in Corps areas wishing to expand their work and conduct a rigorous assessment of readiness, training needs and physical capacity to support and sustain work in new communities.

8.i Establish basic and easy to use means of collecting baseline information on local people's awareness and knowledge of HIV/AIDS and attitudes towards people affected by HIV and train volunteers to collect data as they seek to expand the work into new areas.

9.i Local facilitators need to include explanations and reflection upon gathering evidence of changes in their accompaniment of local volunteers and Corps staff.

9.ii Training in how to gather and document evidence of change to be provided to local volunteers on a regular basis. The training to include the study of evidence collected both within the local area and from other project areas.

9.iii People who cannot read or write should never be hindered from becoming volunteers if they have the aptitude and availability to serve.

2. Methodology

The evaluation was conducted over a two and a half week period (October 14th – 31st 2006).

The order that the work was undertaken in was as follows:

October 16th-21st field visit to Philippines

October 22nd-28th field visit to Myanmar

October 30th-31st Synthesis workshop with RFT and co-workers in Singapore (Territorial HQ for Singapore, Malaysia and Myanmar)

Outline timetable for Philippines field visit (full details in Appendix 1)

17th Oct. Initial briefing and visit to Tondo Corps, Manila

18th Oct. Visit to Lapu Lapu, Cebu

19th Oct. Visit to Legaspi and Tabaco (including Mareroc, San Roque)

20th Oct. Visit local AIDS NGO and National Council of Churches in the Philippines

21st Oct debriefing with Territorial leaders

Outline timetable for Myanmar visit

22nd Oct Initial briefing in Yangon

23rd Travel to Kalamya (Tahan) and meeting with local Corps leaders and other staff

24th Oct Visits to Cicao, Sadaw and meet with groups in Tahan

25th Oct DE returns to Yangon, meeting with Yangon Corps leaders

Claire Campbell (CC) arrives in Tahan to continue evaluation process.

Visit to livelihood projects

Community discussion with approx 60 community members

26th Oct DE Visit to Bago Division

CC visit to Tamu to meet with Community Blood donors, Village Co-ordinators, Home visitors and a child led household

27th Oct Meetings in Tahan with Village Co-ordinator forum, Corps Officer forum and a network meeting with other NGOs

Outline of workshop at Territorial HQ, Singapore

(Participants: Col. Gillian Downer, David Evans, Jerry Mua, Ian Campbell, Alison Campbell, Capt Joy Genabe, Alma Acub, Claire Campbell, Airene Lozada)

30th Oct A.M. Sharing stories of evidence of impact and learning

P.M. Exploring basic assumptions and capacity issues

31st Oct A.M. Action Planning

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

The first encounter with the external evaluator involved exploring the understanding and perceptions of evaluation with the local teams involved in the evaluations of the Philippines and Myanmar programmes. This proved important since there were strong perceptions in both locations that evaluation is about checking up by outside groups to make sure the work was being done. The emphasis re-enforced in all locations was that evaluation is principally about learning and sharing experiences to strengthen the positive nature and impact of the work.

Translation was necessary in all the situations where the evaluation team met with local people and volunteers. In some instances, the discussion between the in-country Salvation staff flowed freely and summary translation was given to the external evaluator. These instances were limited to ensure that nuances could be captured and checked to ensure accurate understanding.

The principle methodologies used to encourage people to share their experiences and views were semi-structured interviews, informal discussions with small groups (up to approx six people), when larger groups of participants attended (these included groups of up to 60 people) the evaluators facilitated the creation of smaller groups and asked questions on specific topics to be discussed in the groups with plenary feedback and discussion at regular intervals. Games were sometimes used to energise groups and to develop a rapport between the visiting evaluators and groups.

Typical questions asked to elicit reflection and response:

- For volunteers and Corps staff involved in HIV work:
 - What has been the project's impact on you as volunteers?
 - What skills have you developed as a volunteer in your community?
 - What is the most important lesson have you learned about the community?
 - What are the positive aspects in your community?
 - Your motivation as a volunteer?
 - What is the best thing about your work and what is the most challenging thing about your HIV/AIDS work?
- For young people engaged on livelihood training:
 - What is your motivation for undertaking livelihood training?
 - What makes a good community?
 - What is your vision of a good community (picture drawing)?

One of the challenges of the field work was that it was very difficult to predict how many people would attend specific meetings for which notice had been given. This required a flexible approach by the evaluators.

Each day of the evaluation ended with a debriefing session during which members of the team shared their perceptions and things that they had learned.

The core evaluation team in Philippines was (see Appendix 1):

David Evans

Jerry Mua (Asia Pacific RFT Co-ordinator)

Airene Margarette Lozada

Alma Acub

Capt. Jocelyn Genabe

The core team in Myanmar was

David Evans

Kevin Meredith

Claire Campbell

Various members of the 'Working Team' in Tahan (See Appendix 1)

The field visit to Tahan in northern Myanmar was complicated by internal flight connections, last minute changes to the timetable and flight connections to Singapore. The result of this was that David Evans undertook the first half of the visit and handed over to Claire Campbell for the second half.

3. Organisational contexts

In approaching this assignment it was critical to have understood the stories of the events and influences of the past.

i. The overall context

Internal conceptual changes within the Salvation Army which are based on the paradigm shift from 'community service-provision' to 'integrated mission' is a critical overall theme in the Salvation Army's on going development and growth.

Essentially the Salvation Army appears to be embracing a more developmental and transformational approach which is coming through human capacity building, with its implicit faith in the fact that people can respond and change. Taken to its logical conclusion, this will result in dramatic shift in the working paradigm of the Movement. The agenda will indeed be formed more and more at the grass roots and need to be supported and facilitated by the hierarchy.

This change has been recognised by the leadership as indeed helping the Salvation Army to 'rediscover its roots'. The implications are complex and will require organisational and attitudinal changes throughout the different levels of the Movement.

The acceptance of new paradigms within any organisation depends on many aspects of organisational culture and structure. In a Movement as large and complex as the salvation Army with its established modes of operation and accountabilities, shifting paradigms can be a difficult and pains taking undertaking

Some of the specific drivers at the grass roots level which are encouraging the movement in the direction of this paradigm shift over recent years have been:

- Working inter-denominationally and collaboratively at the local and Territorial levels
- Inclusion of more lay people (i.e. non-officers) in responsible roles in making integrated mission a reality at the grass roots
- Local Corps becoming more outward looking towards wider communities and their ability to respond to local challenges
- Accompanying this has been the fact that agendas are becoming set by local communities more often
- The role of the local Corps in normalising formerly contentious/difficult issues, for example, bringing sexual health issues and HIV out into the open at the local level

Three impacts (emergent and probable) of the process on the Salvation Army:

- The recognition of a wider cadre of leaders among non-officers and especially among young people.
- A greater level of integration in working outside the vertical constraints of departmental boundaries.

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

- The work is starting to give living and readily understandable meaning to 'integrated mission' and also giving credence to the idea that an integrated mission approach is helping the Salvation Army to 'get back to its roots'.

Progress could be easily over-stated, but nonetheless, early signs are evident. However better facilitation, training and accompaniment plus intentional and pro-active learning across Territorial, Regional and Divisional boundaries is vital for the paradigm to shift.

One of the main implications is in the area of leadership styles, skills, capacity requirements and arguably, most critical of all, organisational culture.

ii. Specific Contexts examined in the evaluation

A. The Asia Pacific Regional Facilitation Team (RFT)

The purpose of the RFT is to accompany and support the implementation of a facilitative approach to integrated mission. The basis of the facilitative approach is that local communities are stimulated (animated) to respond to their own situations, finding solutions which mobilise their own resources. This is very different and has dramatic implications compared with a 'service provision' approach which is characterised by welfare and handouts to local communities. The need for welfare/relief continues to be as strong as ever as natural disasters and conflict impose destitution and great suffering on many in the Region at regular intervals. One of the challenges for a team such as the RFT is indeed to retain focus and capacity to continue to accompany integrated mission and HIV agendas at the same time as give support to relief as demanded by the wider Movement.

At a regional level (Asia Pacific) the RFT seeks to co-ordinate work, stimulate learning and exert influence within the Movement as well as on other organisations and agencies both globally and locally. It also seeks to ensure that appropriate training is provided to actors in the processes on the ground.

The RFT seeks to cascade support to Territorial level actors as they in turn support those at Divisional, Cluster and Corps levels. In so doing they seek to ensure that work within existing project areas develops and grows as well as expands to new areas, based on the learning from elsewhere.

The RFT is supported from International HQ by a small International Facilitation Team who also retain oversight of other Regional Facilitation Teams.

If the RFT is, in effect, a custodian, guardian and champion of good practice and of how that good practice is promulgated as widely as possible, through learning opportunities, it needs powerful allies within the overall Movement's structures. Such allies can ensure that advice, support and learning which is facilitated by the RFT is acted upon within all the Territories in line with institutional goals and values. Whilst the Asia Pacific RFT is part of the Programme Resource structure of the Salvation Army, they also interact with the International Secretaries who are responsible for Zonal desks who have direct lines of accountability down to the Territorial level. In other words, the Zonal International

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Secretaries can endorse and indicate their support for RFT-derived advice and support to Territorial HQs with an expectation that they will follow and act upon it. The ability of the International Secretaries to insist on compliance from territorial HQs is limited by the strong sense of Territorial autonomy.

Within the Asia Pacific Region the arrangements and organisational 'fit' of the RFT has not matched that of the Zones, consequently, the flow of accountabilities and therefore learning has not been smooth. The Asia Pacific RFT has straddled three Zones, (South Asia, the Americas and Caribbean and the Asia Pacific Zones). This situation is due to be addressed in the next few months. The Asia Pacific RFT has divested itself of some regional responsibilities so that it can focus more effectively on specific areas and also fit within the Zonal structure, thus ensuring better communication, focus and effective working. Having said this, the good relationships established by the RFT outside the Asia Pacific 'Zone' (e.g. India, Sri Lanka, the Marshall Islands) are likely to continue collaborative activities but in a less formal way.

Aside from these structural considerations, the RFT has undergone a change in leadership, as has the Philippines Territory which appears to be more consultative and open. This bodes well for the future.

In addition to the developments noted above, the December 2004 tsunami has had a clear impact on resources. Members of the RFT have been drawn into the needs imposed by the disaster which has had a direct impact on the team's ability to service the needs of the wider integrated mission and specifically HIV/AIDS agendas. On the other hand, lessons learned for example in trauma counselling do have the advantage of being expressed within the HIV sphere.

The intended pattern for the RFT's operation is that it supports local 'implementing' facilitation teams at country and Territorial levels. The capacity and indeed definition of these implementing facilitation teams has been less clear over the duration of the programme.

B. The Philippines Programme experience and learning

There are 77 local Corps in the Philippines. Of these just under half (39) are involved in the cross-cultural, HIV, health and development programme. Of these more than 14 are in the Central Philippines Division.

The Salvation Army's Philippines' Territory and the RFT have been through a difficult time in their relationship with one another over the last few years. The relationship has however improved in the last year as new leadership has resulted in greater interaction on terms that are more clearly shared and understood by both sides.

The interaction with the RFT has, as already stated above, been limited over recent times. The concept of accompaniment within the Territory has also been only marginally implemented. In the past, there were Divisional facilitation teams (known as Divisional Taskforces), however these have not functioned effectively. In fact, their existence was only discussed at the end of the evaluation visit to the Territory. The reasons for the

break down of the groups that drive the 'process' aspects of the programme could be explained by two probable reasons.

First, staff changes. The point is alluded to elsewhere, that organisational culture of the Salvation Army is generally that of activism, service delivery and one which seeks to 'get the job done'. Whilst this is good in many ways, it mitigates against the embedding of reflection and learning. Those who build up considerable experience are either moved on to other postings before the real impact and therefore obvious benefits can be recognised and promulgated around the Movement, or, if they are non-officers, they can be attracted away by other opportunities within the NGO world, which often pay higher salaries.

The second reason, is that the capacity of the Community Services team at Territorial HQ is very small. The combination of a young and relatively inexperienced Community Services Co-ordinator and a new Secretary for Programme Administration (whose role is very broad, spanning the oversight of seven core areas) as well as the problems of the lack of contact with the RFT, has probably contributed to the erosion of the infrastructure necessary to nurture a process of accompaniment.

Having stated these issues within the Philippines' experience, at the local level real progress does seem to have been made and there is evidence that the work of the Corps in the area of HIV awareness and care is having some impact and has expanded into many new areas.

The following timeline describes major interactions with the RFT and also the expansion of the work in the Philippines (the work commenced in the early 1990s in Tondo, the timeline outlines events since 2001):

Timeline

2001. Tondo work expands to Legaspi, Cebu and General Santos (Mindanao). Volunteers from Tondo and Divisional team members act as facilitators of other groups for example in Bulalacao and Caloocan. New groups in turn support the initiation of work in other areas, for example General Santos expands to Wali, Lake Sebu and Pandanan, Wali expands into Lebe. Divisional meetings are held in North Luzon, Mindanao and Visayas and central Philippines Districts.

2002. 2 co-ordinators' meetings were held in early 2002 bringing together people from across the Territory, looking at process analysis. Divisional support visits made. Further expansion for example Dagupan, San Jose and Nasucob. The Northern Luzon District expanded from Dagupan into Santiago, Bellaluz, and Villaro.

2003. Various personnel are attached to the Asia Pacific RFT (e.g. Capt Aida Selma to Malaysia, Capts Noel Lapena and Lorna Osorio to Indonesia. Members of the Philippines team visit Myanmar on a project to project visit). Cluster formation and strengthening took place in 2003, thus enabling greater cohesion and support to exist between Corps.

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

2004. Various inputs from the Territorial and District facilitation teams in specific areas (e.g. budgeting and proposal writing) as well as more general support and contact.

2005. Further expansion to new areas such as Panal and Mareroc in Legaspi. Local implementing teams of facilitators were formed.

A participatory evaluation took place in 2005 with people from NORAD and the Asia Pacific RFT. In established project areas such as Tondo male and youth volunteers were included for the first time.

Support visits between project sites took place for example to Legaspi, Cebu and Leyte.

2006. Project areas arranged more clearly into clusters in Northern Luzon Division, Central Philippines and Visayas Islands and Mindanao Island Divisions. Support Visits and exploratory visits were conducted in San Jose, Mindoro, Iigan and Ozamis, Negros and Cebu, as well as Davao Cluster and Ilocos Cluster. Re-orientation on the project is also done among Corps Officers and Volunteers. Strengthened networking and partnership with partner organizations by supporting each others' activities.

C. The Myanmar Programme experience and learning

The Salvation Army in Myanmar is made up of 49 Corps and 13 'Outposts'. The main concentration of Corps is in the north of the country in Upper Sagaing Division with 29 Corps in Tahan and Tamu. The remainder are in central Myanmar in Yangon, Mandalay and Bago Divisions.

In 2005 a three year 'New Corps Plan' began which seeks to establish new Corps in Mandalay Division and Shan State.

Like the Philippines Territory, meaningful contact with the RFT has been limited, but for a different combination of reasons. Whereas the relationships between the Philippines Territory and the RFT were difficult until relatively recently, the relationship with the RFT's former leader and the Myanmar Region were excellent, but the political situation has prevented ready access to the country. The same issue of RFT 'over-stretch' has also imposed itself on the situation. Therefore, the extent of effective accompaniment of programme staff and processes has been largely unimplemented in Myanmar.

As in the Philippines Territory, progress and impact has been taking place.

The exchange of experience at Corps level between Upper Sagaing Division and Yangon and other areas has been limited, despite the fact that there has been some excellent progress and real impact in the Tahan and Tamu Districts. The reasons for this are outlined below.

The progress in the Upper Sagaing Division is indeed impressive with many signs of impact and responses being made both within the Salvation Army as well as the wider Christian and non-Christian communities (see Section). Yet in common with experience

from elsewhere² it is leadership style and accompaniment by objective, trusted and external facilitators that makes the kind of progress seen in Upper Sagaing possible. By an large this has come through the Projects Consultant based in the Regional HQ in Yangon, Kevin Meredith who has provided the stimulus and support for change to take place. By convening meetings where new roles and ways of doing things can be raised and explored local leaders have started to appreciate that directive leadership styles are not always the best way to make progress towards goals. By opening up the decision making processes to a wider representative selection of people, ownership, responsibility and commitment has been increased. Whilst the role of the RFT in the Upper Sagaing experience has been limited, the timeline describes the significant interactions.

Timeline

1991 South Asia International Secretary invited to Myanmar
1991 South Pacific East Asia International Secretary also visits
1991 Int'l HQ Facilitation Team formed and speaks at Leysin AIDS Conference in Switzerland
1992 Philippines Territorial HIV programme design work
1994 Integrated Mission workshop in Indonesia
1994 Yangon assessment visit to Tahan
1995 Yangon based programme designed
1995 Asia Pacific Regional Facilitation Team starts and conducts a joint visit to Myanmar
1996 Yangon programme proposal developed
1996 A further joint team visit to Myanmar
1997 Joint visit of Asia Pacific Facilitation Team (RFT) together with UNICEF and UNDP
2001 Programme design visit to Myanmar facilitated by Asia Pacific RFT
2001 Yangon team home visits begin
2002 Myanmar team visit Singapore, Myanmar and Malaysia HQ for a regional meeting and programme to programme visit to Philippines
2003 Asia Pacific Regional Consultation and funding for Upper Myanmar programme by NORAD
2003 Bangladesh programme to programme visit to Myanmar facilitated by RFT
2003 Kevin Meredith joins Myanmar team
2004 Cross border work undertaken between the Upper Myanmar team and a team in Mizoram, NE India supported by RFT
2005 Upper Myanmar programme presents a Poster at Kobe International conference in Japan supported by RFT

² The consultant has direct experience of observing similar processes in the UK, East Africa (Uganda, Tanzania, Kenya and Ethiopia)

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

4. Findings

These findings are arranged in line with the specific Terms of Reference agreed with the Salvation Army. Some of the comments that follow are further explored and developed in subsequent sections of this report.

Output (a): Effective responses to HIV/AIDS and health related community development issues.

1. What measurable impact has there been in the target areas as a direct result of the work (HIV/AIDS and related health areas)?

Both in the Philippines and Myanmar there has been significant local impact of the project on people's lives. These include better acceptance and less stigmatising behaviour towards people living with HIV and AIDS (PLWHA) and greater awareness of the risks associated with HIV infection. The projects appear to have elicited community responses in fighting the spread of HIV. Numerous accounts were heard where local people had changed their behaviour and attitudes towards people living with HIV and AIDS. When they observed Salvation Army volunteers visiting and caring for PLWHA, they modified their behaviour by welcoming them back into the community.

The extent to which the impact is measurable is made difficult since little or no baseline data was collected regarding attitudes towards HIV and AIDS and those who have virus already or who are particularly at risk of being infected. Documentation coming from the grass roots Corps level in the Philippines is generally weak. Volunteers are often very poor and have weak writing skills. Furthermore, oral/narrative story telling is culturally the norm, mitigating against the regular production of reports containing reliable data. This is always a tension in the kind of development work which seeks to stimulate responses from grass roots communities. A facilitated approach is always likely to require greater support for generating meaningful reports than a directly implemented project. The project in Upper Sagaing Division in Myanmar is making good head way in inculcating the importance of good report writing. The danger is that the explanation of why reports are necessary in the first place is never properly explored with those expected to document their activities, and most importantly, their learning.

The struggle to articulate and capture the true scale and nature of the impact of the programme is due in large part to the qualitative nature of the experience. The RFT has on going, if limited capacity in terms of the number of people with experience and skill in using participative action research (PAR) to capture such qualitative evidence. The RFT has prioritised PAR as a key emphasis in training for the future. This commitment must be followed through.

2. To what extent are the measurable impacts attributable to a facilitative approach?

If it is understood that by a 'facilitated approach' we mean one which seeks to enable ordinary members of the community (distinct from project 'staff' and volunteers) to respond to local issues positively and constructively, then, to some extent, it can be said

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

that the impacts being observed in the Philippines and Myanmar are attributable to such an approach. There were many instances when local communities have accepted a PLWHA and his/her family and changed their attitudes and behaviour. The case of the HIV+ve wife who had been made to live in the barn with the chickens by her husband until he saw the way that Salvation Army volunteers care for her is a typical example. The husband accepted her back into the main home and started to care for her. In this way, his response was directly attributable to the approach. In another instance a group of PLWHA in Tahan District in Sagaing Division of Myanmar who were initially supported directly by Salvation Army volunteers and staff through home care, came together and have begun to carry out their own home care visits. This is a very good example of a facilitated approach.

One of the extremely encouraging signals coming from volunteers in both Philippines and Myanmar was the desire to 'go deeper'. By this was meant, there is a recognition of the need to facilitate the community to explore their challenges and issues more deeply and thereby elicit more effective and profound responses which are owned and initiated by members of the local community themselves. Connected with this desire for greater depth and effectiveness was the often stated need for volunteers to engage with people living high risk lifestyles and also youth. The problem of alcohol and drug abuse amongst the young was referred to often by local volunteers. The challenge which the volunteers readily acknowledged was how to get alongside such people and build a rapport and open dialogue, suggesting the need for greater support and training in communication and facilitation skills. The fact that the group of Village Co-ordinators and Corps Officers are meeting to reflect and share experiences together means that they will probably find ways of addressing this particular challenge themselves.

3. To what extent do the activities undertaken address underlying causes and what evidence is there that there has been a process of reflection (mediated through facilitation/community counselling approaches) on underlying causes leading to particular activities facilitated by the local team?

The confidence of the project staff and volunteers in both the Philippines and Myanmar is growing. Their understanding of what facilitation actually means in terms of the skills and practices required is weaker. This is a key area for the RFT to support. Without these skills (active listening, asking open questions, enabling the members of local communities to expose the root causes of their own problems and having the confidence to avoid didactic teaching methods) it is very difficult for root causes to be truly grasped and unearthed. When the local staff in Myanmar were asked 'why do children get sick with diarrhoea?' the responses suggested that connections between bad water and sanitation and sickness were not in place, nor that it was especially important to know what the connection is in the first place. An understanding of the way that the process of facilitating community discussion about the effects and root causes (e.g. using the 'problem tree' tool) of any stated problem energises and animates communities to respond using local resources also seemed to come as new information to some. This is a key area to address and is raised in the recommendations of this report.

4. What if any other impacts have there been which were unexpected/not directly related to HIV/AIDS and related health areas and which are attributable to some extent to the approach adopted?

Unexpected impacts were in evidence in the Philippines. The respect and credibility of the Salvation Army as a movement in the eyes of local civic leaders was not expected in any formal documented sense. The appreciation of the Salvation Army by local people helped either directly or indirectly was not expected on these terms either. In Lapu Lapu (Philippines) a local Barangay Captain noted the level of respect and trust for the Salvation Army who had played an important role in caring for local people living with HIV. The Salvation Army Divisional leaders had facilitated a consultation of local NGOs on the issue of HIV/AIDS designed to encourage collaboration in areas such as appropriate referral mechanisms. The Barangay Captain had also encouraged local people to attend meetings organised by the Salvation Army Corps to discuss health and HIV. There have been a number of follow up meetings.

The degree to which the Salvation Army in the Philippines has given a lead among the churches was indicated in discussion with the National Council of Churches in the Philippines (NCCP). The respect with which they are held as a result, and the extent to which they are perceived as influential in increasing the scope of work undertaken by the wider church in the country was clearly attested by the lead person within NCCP.

The situation in Myanmar is much more difficult since local activities and profile gained resulting from unexpected outcomes that could be interpreted by local officials and their military masters as 'political' or extending outside their 'religious' raison d'etre would cause the Salvation Army serious problems. However, there are important unexpected outcomes becoming manifest within the life of the local Corps. In Tahan and Tamu the local Corps Officers have established a new role of Village Co-ordinator (volunteers) to provide extra capacity for the project. The VCs have proved their value by being able to monitor the needs of local orphans more closely and in a way that COs could not manage with their other responsibilities. The creation of the VC role has extended the local reach of the project. Furthermore, decision making has become team based with the creation of the 'Working Team' which is made up of representative COs, VCs. These are excellent examples of unexpected and positive outcomes at the organisational level.

The fact that the members of the PLWHA 'Gospel Team' started to undertake their own homecare visits to their peers came to the project leaders as a potentially worrying development raises two issues: 1. The need for further exploration and understanding of the way that a facilitatory approaches animate a community response such as this one. 2. The need for the RFT to support, validate and communicate such learning as widely as possible.

5. To what extent does the approach of the programme represent an efficient use of resources? What evidence is there of local resource mobilisation?

Being based on a facilitative approach means that the budgets for the work on the ground in the Philippines and Myanmar are lower than for work relying to a greater extent on paid staff. Furthermore, because the project is orientated towards activities which demand little in the way of expensive technical interventions, the costs are correspondingly low.

On the basis of information provided by both the Philippines and the Myanmar projects it is possible to give indicative costs per home visit.

The total budget of the Myanmar project is approximately \$35,000. On the basis of the project making or eliciting some 5000 home visits per year, each visit costs approximately \$7. On a different basis, if home visits account for say 33% of the effort and therefore funding, this number reduces to a corresponding figure of just over \$2 per visit.

In the Philippines, the local project team knows that there is a serious under reporting of home visits. The recorded figure is 4,340. On the basis that the real figure is nearer 8,000, with an annual budget of \$76,000, each visit costs just over \$9 or \$3 if a third of total budget can be attributed to supporting home visits.

The cost effectiveness of the RFT operation is more difficult to establish. The question is whether the effectiveness of the work on the ground is positively influenced and shaped by the work of the RFT. This is not straightforward to establish without proper comparison being available.

When discussing the role and the nature of the support provided by the RFT with staff at the Philippines Territorial Community Services Project Co-ordinator it was clear that they had a high regard for them and appreciated the support they receive.

The role of the RFT as an advocate for the approach of facilitating community responses is however critical and must continue. The challenge is to ensure that the concepts being advocated can be properly earthed and resourced by the Salvation Army in the future.

Output b: A stronger RFT with more effective facilitation of local groups (more people with a deeper understanding and skills and enhanced levels of application of their understanding and skills)

1. To what extent, in what ways and with what effect have the local team been supported by RFT/International Team and others from outside the communities over the duration of the Myanmar and Philippines programme?

The Timelines included in Section 1 above describe the main inputs of the RFT over the period. They include inclusion in conferences and programme to programme visits. Support provided through email and phone contact has also been appreciated although communication with Myanmar has been more problematic for political and security reasons. A key observation is that the RFT has operated in a rather *ad hoc* basis and does not appear to follow a clearly planned and documented process.

The theory of the support and accompaniment by the RFT has by and large not been implemented with the level of coverage and consistency originally envisaged. The concept of a RFT supporting Territorial, Divisional, Cluster and local Corps actors in the facilitation and learning process has not always been implemented sufficiently robustly enough to weather staff changes and relationship challenges. These issues are addressed in the conclusions and recommendations.

The main concerns about the RFT revolve around issues of capacity, mandate and relationships with the Philippines Territory and Myanmar Region.

The capacity of the RFT does not match either the demands (existing and potential) made upon it. A roving team of people who come together on an *ad hoc* basis is not fully implementing the role it needs to play to achieve its goals and add real value.

There are issues around organisational culture that come into play which are explored elsewhere.

The mandate of the RFT does not appear to be concisely or clearly enough expressed. Moves to harmonise the area the Asia Pacific RFT with that of the Zonal Desk is encouraging in that these moves will provide greater focus.

There have been problems of access to the two areas. The problems in each area have however been different. The relationship between the Philippines Territory and the former RFT Co-ordinator were difficult which resulted in a lack of meaningful contact for some years. This has been noted in a previous evaluation report. With a change in personnel (TC and RFT Co-ordinator), the situation has improved. However the level of support in order to fulfil its stated mandate is insufficient. In Myanmar, the main problem has been one of access, which taken together with aspects of organisational culture and capacity has resulted in minimal contact. The relationships between the former RFT Co-ordinator and the Myanmar Community Services Co-ordinator were very positive and the felt benefits of the support provided were appreciated, but even then, the perception was that there were always other priorities on time to visit northern Myanmar with its problems of remoteness and political sensitivities demanding laborious liaison with local officials.

Output c: Lessons learned and stories shared between different situations, some of which may be more and less advanced.

1. What part have lessons and stories from elsewhere played in shaping the practice and thinking of the local team?

On a practical day to day basis lessons and stories from outside the Territory or Region do not appear to penetrate to the grass roots Corps level. If they do, they happen at conferences elsewhere. There is evidence that within the Philippines Territory, stories are shared. The main hindrance to giving priority to sharing lessons and stories is that of busy-ness and activism.

There is a sense that each Corps is a self-contained entity and certainly, among the Corps Officers in the Yangon Division, the idea of stopping work as usual to listen to stories from elsewhere is not given priority. There is the added issue of ethnic differences that discount the level of respect between northern Mizo people and peoples indigenous to central/southern Myanmar. Within the Upper Sagaing Division there has been a striking change in attitude at the local Corps level. COs are working closely together across the Tahan and Tamu districts. "Working Team" meetings ensure that experience gained across the districts is shared and decisions to further improve and develop are made in light of them on a regular basis.

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

2. What opportunities have the local team had to share their learning and experiences elsewhere as a result of the programme?

In both locations (Philippines and Myanmar) Officers were able to talk about occasional visits out of the country to participate in conferences and other visits (see Timelines in Section 1 for Philippines and Myanmar experiences). The practice appears to have been more common in the 1990s before the current projects were under way. What appears to be lacking is evidence of intentional, planned exposure and accompaniment. One telling comment that was made during the visit to the Philippines was that the Officers from within the Territory who have made visits and gained from the lessons and experience from elsewhere have now been transferred to other areas, taking the lessons with them.

3. To what extent have the particular context of Myanmar's/Philippines' political and social context affected the effectiveness of the programme?

The pervading openness to Christianity in the Philippines has helped the Salvation Army staff and volunteers raise faith-related issues with ease. The offer to pray with local people in need is both 'normal' and generally accepted readily.

In Myanmar, the fact that the Salvation Army is registered as a church rather than as an NGO helps considerably to reduce unwelcome scrutiny and the unwanted restrictions on movement and activities in general.

Output d: Changed mindsets in both country HQs, local corps and local community members away from welfare/hand out mentality to include real empowerment

1. What is the local team's understanding of the concepts and the practical implications of the facilitative approach?

The local Community Services team's understanding of the concepts in the Philippines Territory is good. The understanding of the implications in terms of skills required at the individual Corps level is not so clearly understood. The growth of the project and the fact that local people are volunteering and making local responses is giving rise to changes that the Corps are accepting. For example the League of Mercy (a name stemming from a rich tradition of welfare provision) has extended its membership to volunteers in the project.

The Barangay Captain in Lapu Lapu in Cebu stated that he felt that the local Corps and the volunteers shared the burdens and problems he faced, providing evidence of the positive and supportive way that the project is reaching out to work collaboratively with others, in this case in the local authority structures.

Further evidence of this was seen in Mareroc, an area near Legaspi at the southern end of Luzon in the Philippines, the Corps has engaged the energy and commitment of the local Barangay Captain and her group of Health Volunteers in raising awareness of HIV/AIDS in the local area. The potential of such synergy is beginning to be grasped, but

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

there is further progress to make. For example, the Mareroc group of Barangay Volunteers reported that the main reaction of local people to their message of HIV was one of fear. The basis of the fear has yet to be fully understood and explored through facilitation of a dialogue with the local people. The basis of the fear was apparently simply towards that of catching the virus, however, by digging down further by asking questions, it is likely that the dimensions of the concerns might extend to the basis of trust within relationships. By further facilitation, constructive responses which seek to address core issues governing social mores could be developed.

In Myanmar the team in Upper Sagaing Division are effectively learning on their feet and some very significant developments have taken place as a result, for example the move to more consensus leadership, shared responsibility for decision making and the creation of volunteer roles and giving support for the self-governing PLWHA Gospel Group by the Corps. The Working Team will be discussing how to offer practical support in their next meeting (meetings currently take place about four times a year; they are to be increased to every other month).

It was clear in both the Philippines and Myanmar programme experience that the Community Services Co-ordinator (Philippines) and Project Consultant (Myanmar) perceived their roles differently as a result of their experiences. They both started out with clear expectations that their roles were principally administrative, but quickly learned that they themselves are key players in the facilitation process, needing and developing the skills required to do this. This caused a certain amount of stress and adjustment.

2. What evidence is there that their understanding of a facilitative approach has been outworked and that skills have been transferred?

The understanding of the facilitative approach is growing but it has some way to go. The main area for further development is around the nature and skills required to facilitate community discussions. The idea that by asking questions of local people regarding their experience and knowledge of local problems and facilitating an understanding of the root causes of those problems and in turn, facilitating the identification of solutions that address underlying causes has yet to be explained and put into practice.

Local problems in communities are identified, but often by the project staff and explained to the local people. Root causes do not appear to be explored. The concept that by facilitating community meetings in the way described here, local people are animated and begin to own solutions and resource them themselves has not been explored as yet.³

3. What impact has the experience of the local team over the last three years had on their attitudes to integrated mission and it's out working?

Those responses that have been elicited within communities have been of great encouragement to the local team.

³ The consultant has direct experience of observing similar processes in the UK, East Africa (Uganda, Tanzania, Kenya and Ethiopia)

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Generally the impact has been very positive with Corps staff and established Corps members who are volunteers welcoming the participation and membership of the groups by volunteers who are either existing local volunteers (for example the Barangay Health Volunteers in Legaspi and elsewhere in the Philippines) or local people with no formal church affiliation who have been engaged by local Salvation Army activities in the fields of HIV and health.

In Tondo, Manila, Philippines, there are volunteers who have been serving for up to 14 years. Their enthusiasm and commitment is very clear. In both Tondo and in Upper Sagaing Division, Myanmar there appeared to be a critical mass of volunteers which is able to weather the impact of changes in Corps leadership. In Lapu Lapu, Cebu (Philippines) the motivation of the volunteers to continue included a strong desire to support the hard working Corps leader.

Pressure points are emerging which further development and support need to address. In both the Philippines and Myanmar the front line visitors and other volunteers feel the need to provide more and more direct aid to needy people and households. This is especially the case in the area of orphan care where a contribution is made to school fees. The concept that communities themselves can move beyond a welfare mindset so that they can offer support to one another and mobilise resources has not yet become embedded in local volunteers' thinking. This is an indicator that facilitation and training at this most local level is still needed and that at present the capacity does not exist on a consistent and regular basis.

At the same time, some of the longer standing volunteers in the Upper Sagaing Division, Myanmar programme were feeling that the training they did occasionally receive was repetitive and were therefore not inclined to attend further sessions.

It was striking to observe that when a group of some ten carers with a similar number of their orphaned children gathered during the evaluation exercise, the adult participants said at the end of the time together how good it had been to meet up together and how it would be good to do so again. This in itself is a positive response by this hard pressed group of people who discovered strength in meeting together and seeing the children playing together. During this 'meeting' a game was played which energised the group and produced great laughter and joy. This represents an important learning point for the volunteers and staff in the Tahan Corps which they will hopefully reflect on further and enable to take place regularly. Such gatherings can provide the opportunities for facilitation of discussions about further responses to the needs of this group *which can be met by the members of the group itself*.

The discussion in Tahan (Upper Sagaing Division, Myanmar) amongst the local CBOs and health facilities which took place during the evaluation visit highlighted the value of networking and the desire to extend the linkages in terms of sharing experience and learning as well as strengthening referral systems.

4. What impact has the experience of the local team over the last three years had on HQ attitudes to integrated mission and its out working?

Without exception HQ attitudes to the progress made over the last three years is positive. The leadership at Territorial and Regional levels was enthusiastic about the work. However it is absolutely essential that these leaders are supported and accompanied in thinking through the possible organisational issues which a truly bottom up facilitation approach will create. There is a great need to increase the capacity of Community Services staff in both Philippines and Myanmar both in terms of people and skills. The current situation in both the Philippines and Myanmar is that the Community Services Co-ordinators who were both recruited on the basis that the post was principally an administrative one, are in fact acting as facilitator, administrator and co-ordinator of learning (organising visits for people from inside and outside, acting as key liaison people between project sites and the visitors).

5. What has been the impact of the programme on leadership styles and attitudes to power and authority in HQ, local corps and in the wider local communities

It is difficult to attribute any impact on leadership styles and attitudes to power as a direct result of the programme at HQ level.

At the local level in Myanmar in the Upper Sagaing Division there does appear to be a real change with team decision making taking place with COs listening and contributing to a wider body of opinion. This does appear to be directly attributable to the programme's impact.

In the Philippines, it appeared that some individual COs are changing their styles and attitudes. There was no opportunity during the visit to assess the collective views of COs on this matter.

Output e: Policy direction changed / influenced within countries' government departments and other agencies (e.g. UNDP, UNAIDS etc)

1. What impact has the programme had on the policy direction adopted within Myanmar/Philippines by other agencies/government departments with regard to (i) a facilitative approach to development; (2) a person/family/community centred response to HIV and other issues

The RFT and specifically the International Facilitation Team has played an important role in advocating the Human Capacity Development approach which underlies the work the team is promoting.

UNAIDS partnered with the United Nations Institute for Training and Research (UNITAR), British Petroleum (BP), the Salvation Army, the World Bank Institute and a number of nongovernmental organizations and Local Authorities to launch the initial phase of the AIDS Competence Programme between February 2003 and June 2004. Partners joining later included the Aga Khan Development Network. Some of the people from the initial phase formed the 'Constellation for AIDS Competence' which is a loose ensemble of organisations committed to on going learning. Some members of the International Facilitation Team and the Asia Pacific RFT have on going involvement in 'Constellation' gatherings.

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

At a national scale in the Philippines, the Positive Action Foundation (PAFPI) recognised the need for support for care and counselling activities and appreciates the fact that the Salvation Army with its established and well recognised structure and presence nationally is of great help. There is also a recognition by PAFPI that their work goes beyond specific HIV related issues to broader issues of daily life, families and relationships. The fact that the Salvation Army is part of the Country Co-ordination Mechanism which facilitates Global Fund resources and is the only faith group on it is recognised by PAFPI as highly significant. By addressing the HIV issue in the way it does in the Philippines, the Salvation Army is contributing positively to the normalising of HIV and AIDS particularly when municipal authorities are reluctant to acknowledge the importance of raising the issues of HIV/AIDS.

The National Council of Churches in the Philippines acknowledges the valuable role of the Salvation Army in pioneering faith based responses to HIV and AIDS and its role in stimulating other church denominations to get involved.

These international and national influences represent a significant role for the Salvation Army and has ensured that the Christian faith influence has been prominent in cutting edge reflection and practice on the global stage.⁴

Output f: Personnel in other sectors of activity adopt the same approaches or demonstrate support for a facilitative approach.

1. What impact has the programme had on the approaches adopted by development personnel in other sectors and organisations/government departments with regard to a facilitative approach to development?

Within the constraints of the evaluation timetable this output was difficult to assess.

⁴ Evaluation of the UNAIDS/UNITAR AIDS Competence Programme. A Community Competence Building Process Jointly Designed And Implemented By British Petroleum, The Salvation Army, The World Bank Institute, Other Donors, Local Authorities, Civil Society And Communities Worldwide.

Conclusions and Recommendations

There are many positive aspects to the work of the RFT and the way that the programme in Myanmar and the Philippines has been developing. The conclusions and recommendations below focus on how the work can be further improved.

Regional Facilitation Team operation and its place in the wider institution

Conclusion 1:

There is a need to earth concepts of integrated mission talked about at the Regional and International levels into local settings more intentionally and with greater clarity.

Recommendations:

- 1.i Agree how the accompaniment/facilitation process initiated by the RFT will cascade down from international levels to local levels through an open and clear design process which includes key Salvation Army leaders at the Territorial level and below.
- 1.ii Formalise the role and mandate of the RFT within this overall process.
- 1.iii Ensure that capacity of the RFT is sufficient for the task by deploying enough of the right people (skills, aptitude and leadership style) in appropriate positions at each level.

Conclusion 2:

There is a need to intentionally develop the institutional understanding of the role and *modus operandi* of the RFT.

Recommendations:

2.i Whilst there is evidently some understanding within Territorial, Division, Cluster and Corps personnel, it needs to deepen through dialogue with members of the International Facilitation Team and the RFT. In doing this, it is important that senior leadership in Territorial and Divisional commands are able to reflect on structural and cultural aspects of the movement in relation to the integrated mission paradigm. Discussions about the role and *modus operandi* of the RFT should be supported by exposure of more senior leaders to programme areas where communities are starting to respond effectively to local needs. In the course of this dialogue and exposure the following features will be illustrated:

- What an accompaniment-approach which acts as a means of learning and development, requires in terms of resources
- How local community responses to local needs emerge as a result of facilitating community discussion and counselling

- The implications of local communities setting the integrated mission agenda for the Salvation Army to respond to and support
- What Participative Action Research is and how it is a key tool for capturing evidence of the impact of donor-funded development work.

The expected outcome of this dialogue and exposure will be that the principles of human capacity development and the facilitative approach are turned into practice faster and more consistently.

Conclusion 3.

There is a need to build the capacity of the RFT so that it is less *ad hoc* in its make up and operation. Team members are currently assigned to work as part of the RFT on an *ad hoc* basis. There is a sense in which the RFT are somehow unconnected with the mainstream movement at Zonal and Territorial levels. With greater 'buy in' (understanding of concepts and exposure to realities) from other senior leadership of the movement at Territorial level, the physical capacity to support and train facilitators at local levels should become available.

Recommendations:

3.i Mainstream the RFT's place in the movement and its role at the Zonal and Territorial levels by:

- Designing a process for further explanation and envisioning of HQ staff at all levels in the advantages and benefits of an integrated mission approach and the role of facilitation generally and the RFT specifically, in promulgating good practice.
- Secure the resources (people and money) at International and Territorial levels and below to dedicate to the process of embedding the integrated mission approach and human capacity development.

Conclusion 4

There is a need, for the Salvation Army at all levels (Zonal, Territorial levels and below) to reflect on how the organisational culture and structure of the Salvation Army needs to adjust to the new paradigm of integrated mission. For example, history and experience is reflected in the naming of the unit at the Territorial level currently responsible for community based projects (Community Services). Whilst Community Services is a title which can be interpreted in many ways, the organisational mindset suggests a firmly 'service provision' orientation. With the Territories' ability to operate autonomously it is important for each one to reflect on how the 'integral mission' and 'human capacity development' approaches create a need to modify the way the organisation views the nature of its purpose and the structures that support that purpose.

Recommendations:

4.i Experience from elsewhere indicates that where reflection on the implications of a 'bottom-up' integrated mission approach takes place with the necessary rigour, the following issues require attention:

- Leadership development. In the context of the Salvation Army leadership training, assess potential leaders in terms of their leadership styles and ability to think and make decisions collaboratively, giving space and opportunity to others (and especially those in the local community who are not members of the Salvation Army Corps) to share their experience and skills. Assess existing leaders for their need of support and training to change their approach to leadership.

In regard to their preparation for deployment, ensure leaders at all levels but particularly local Corps leadership receive training in the concepts of development generally and integrated mission specifically. In addition, train leaders in basic facilitation skills. The theological implications of these approaches are significant and worthy of thorough exploration. Experience from elsewhere would suggest that theological reflection on the issue of power, how leaders use the considerable power they have invested in their positions and the power dynamics that operate when communities are facilitated to respond to their own local issues are especially important.

- Leadership deployment. Ensure that experienced and skilled leaders in the area of integrated mission are moved on to new postings only after thorough consideration of the possible impact on the sustainability of programmes.
- Consider other implications of effective integrated mission programmes at the grass roots on the way the movement operates at all levels. For example the allocation of resources, assessment of mission impact, relationships with donors, the organisation of and interaction between vertical departments/units. As necessary institute an organisational change process to design and implement the appropriate changes.

4.ii Create stronger links between RFTs and those people in Salvation Army Support Territories who liaise with institutional and other donors so that the developing understanding of good practice in facilitative approaches to integral mission is institutionalised and reflected in funding applications..

At the local level.

Conclusion 5

The process of accompaniment at the grass roots level needs to become clearer and more intentional with the capacity of local facilitation teams matching their role (see also Recommendation 1.i).

5.i Ensure that the processes and resources agreed at Territorial and other levels down to the grass roots level for the support of effective facilitation (accompaniment) of community volunteers and local leaders are implemented and monitored.

Conclusion 6.

There is a need to further develop the understanding by local leadership (Divisional, Cluster and Corps) and volunteers of the skills required to facilitate community responses and to undertake Participative Action Research (PAR)

Recommendations:

6.i Ensure that the basic concept of facilitation is understood by volunteers at the grass roots level and provide practical training in active listening, asking open questions, exploring the root causes of problems (e.g. how to use the 'problem tree' tool), how to facilitate the process of prioritising options and decision making.

6.ii Conduct regular and tiered training needs analyses with all volunteers which take into account the experience and existing skills and design on going training programmes accordingly.

6.iii Develop training for increasing awareness of the importance of and skills in measuring mission impact at the local level which effectively captures both quantitative and qualitative evidence (Participative Action Research)

Conclusion 7.

The work, especially in the Philippines has expanded rapidly over recent years. Whilst this is a very positive development, there is a need for closer assessment of the approaches being replicated into the new areas.

Recommendations:

7.1 The project facilitators at Territorial and Divisional levels to assess the impact and effectiveness (depth) of the community responses being stimulated/animated in Corps areas wishing to expand their work and conduct a rigorous assessment of readiness, training needs and physical capacity to support and sustain work in new communities.

Conclusion 8

When the work expands to new areas, there is a need to establish baseline information regarding awareness and knowledge of HIV/AIDS and attitudes towards people affected by HIV. Currently this is not being undertaken in some areas.

Recommendations:

8.i Establish basic and easy to use means of collecting baseline information on local people's awareness and knowledge of HIV/AIDS and attitudes towards people affected by HIV and train volunteers to collect data as they seek to expand the work into new areas.

Conclusion 9.

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

The need to document stories and other evidence of changes in the quality of people's lives is an important aspect of understanding and communicating the impact of the work being carried out locally within communities. There is a need to recognise that skills and opportunities are required to tell these stories and document them. Many volunteers at the local level cannot read or write. It is essential that these people are not barred from contributing as volunteers and from sharing their experiences of what happens as a result of their ministries.

Recommendations:

- 9.i Local facilitators need to include explanations and reflection upon gathering evidence of changes in their accompaniment of local volunteers and Corps staff.
- 9.ii Training in how to gather and document evidence of change to be provided to local volunteers on a regular basis. The training to include the study of evidence collected both within the local area and from other project areas.
- 9.iii People who cannot read or write should never be hindered from becoming volunteers if they have the aptitude and availability to serve.

Appendix 1 Key Informants

Key Informants Philippines

Territorial and Divisional staff

Territorial Commander – Col. Malcolm Induruwage

Chief Secretary – Lt Col. Graham Durston

Territorial Secretary for Women's Ministries – Lt Col. Irene Durston

Secretary for Programme Administration – Major Leopoldo Posadas

Projects Secretary, Capt Jocelyn Genabe

Community Services Co-ordinator, Ariene Margarette B. Lozada

Former Community Services Secretary, Alma Acub

Central Philippines Divisional Secretary for Programme Administration, Major June Urbien (responsibility covers Central Philippines Division)

Visayas Islands Acting Divisional Commander, Col. Wesley Curameng

Visayas Islands Divisional Secretary for Programme Administration, Major Theresita Banlasan

Assistant Divisional Secretary for Program Administration, Capt Elemia de Vera

Tondo Corps

Corps officers, Majors Eutiquiano and Nida Pasac

Approx 25 local volunteers

Lapu Lapu Corps (Cebu)

Capts Ernie and Lorna Osorio

Barangay Captain Hon. Jose P. Dungon RN.

5 local Corps volunteers

approx 50 young people who are involved in the livelihood training provided by the Salvation Army

Legaspi Corps

Corps Officer, Major Emma Obugan

Tabacvo City Mayor Alex A. Burce

Tabaco City Health Officer Dr Audwin Azada

Mareroc Barangay Captain, Miss Marlyn Borcelis

A group of approx 15 Barangay Health Volunteers

Other people.

Jesus Ramirez, Director Positive Action Foundation, Philippines (PAFPI)

4 other staff/volunteers of PAFPI

Lesley Capus, Nat'l Council of Churches in the Philippines (NCCP) Youth Desk Co-ordinator.

Liza Blamis, Women's Desk, NCCP

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Key Informants Myanmar

Tahan and Tamu Districts

Name	Gender	Role	Member of Working Team
Major Lalthanga	M	Tahan District Officer (DO)	Yes
Major Thanghrima	M	Tahan Assistant DO (ADO)	Yes
Tahan Parmawii	F	District Director Women's Ministries (DDMW)	Yes
Mr John Lalruatlana	M	Translator	Yes
Mr Biakchungnungo	M	Tahan HIV Counsellor	
Ms Bialthnguii	F	Tahan HIV Counsellor	
Pu C Thlana	M	Livelihood Co-ordinator	Yes
Pu Chkana	M	Book keeper	
No Neih Kim	F	Tahan Community Health Worker	
Mr Valalkhuma	M	Tahan Office Assistant	
Pu Lalnungila	M	Tahan Community Health Worker	
Capt Myo Htun	M	Tamu DO	Yes
Capt Lalroengi	F	Tamu DDMW	Yes
Tan Awi	F	Tamu Community Health Worker	
Taung Pe	M	Tamu HIV Counsellor	
Mr Lalawma	M	Tamu Office Assistant	
Capt Lalrinzual	M	Tahan CO Rep	Yes
Capt Lalchhandama	M	Tamu CO Rep	Yes
Pu Lianchungnunga	M	Tahan Village Coordinator (VC) Rep	Yes
Pu Tanleikapa	M	Tahan VC Rep	Yes

Cicao Home Visitors

Name	Gender	Churchattended	Approx No. of home visits per month	Position
Taung Tuan	M	SA Cica	15	CS and VC
Lo lento Kunag	M	SA Cicao	15	CT
Tiang Lian Thang	M	SA Sadaw	7	CS
Pho Nang Pyang	M	SA Cicao	not a visitor	CSM
No Tuan	M	SA Myong Sone	10	CS and VC
Thuang Tin	M	Nazarene	7	Secretary and VC
Thang				
Za Khul	M	SA Sentaw	7	CSM

PLWHA in Sadaw

Thaim Kip Thlnai Lattlepar

Hrng Ciu Man

Both are mothers of small children who are also widows

VC Forum held in Tahan Corps Quarters

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Name and gender	Community	Church and Position
Val Lal Zama (M)	Myohla	SA CSM
Lian Chung Nunga (M)	Tahan	SA CT
Thuang Tin Than (M)	Sadaw	Nazarene Elder
Lian Vung	Sekan	SA CSM
Duh Neih Thanga	Vutbuak	Mawsi
Thang Hlei Kapa	Htan Ta Pin	SA CSM
Lal Ro Puia	Satawm	SA Visiting Sergeant

Regional and Corps Leaders in Yangon and Bago Divisions

Capt Tint Tac, Central Corps Officer, Yangon
Major Khin Thet Mu, Tarmway Corps Officer, Yangon
Major Rosie John, Telugu Corp Officer, Yangon
Capt Sugunama, Dallah Corps Officer, Yangon

Major Samuela, Programme Officer, Myanmar Region
Major James Aaron, Regional Officer, Myanmar

Capt Suihnemi, Bago Corps Officer, Bago
Win Mg Oo and Thant Kyaw, married couple who are in training to become Corps Officers

Appendix 2. Philippines Evaluation Schedule

SCHEDULE OF ACTIVITIES		SCHEDULE OF ACTIVITIES	
<p>COURTESY CALL, WELCOME MEETING AND VISIT AT MANILA TONDO CORPS</p> <p><u>October 17, 2006</u></p> <p>8:30AM Travel of Evaluation Team to THQ</p> <p>9:00AM Briefing and Meeting with Territorial leaders</p> <p>12:00NN Lunchtime with Territorial leaders</p> <p>1:00PM Travel to Manila Tondo Corps</p> <p>2:00PM Meeting with Tondo Volunteers</p> <p>4:00PM Visitors Travel back to the Hotel or to THQ</p>		<p>VISIT TO POSITIVE ACTION FOUNDATION OF THE PHILIPPINES INC. (PAFPI) AND NATIONAL COUNCIL OF CHURCHES IN THE PHILIPPINES (NCCP)</p> <p><u>October 20, 2006</u></p> <p>8:35AM From Legaspi Travel back to Manila</p> <p>9:30AM From airport to Hotel</p> <p>10:00AM From Hotel Travel to PAFPI Office</p> <p>10:30AM Meeting with PAFPI staff and with PHAS</p> <p>12:00NN Lunch before going to NCCP</p> <p>1:00PM Travel to NCCP</p> <p>2:00PM Meeting with NCCP Staff</p> <p>4:30PM Travel back to Hotel</p>	
<p>VISIT TO LAPU-LAPU CORPS</p> <p><u>October 18, 2006</u></p> <p>5:00AM Travel to airport</p> <p>7:30AM Travel to Cebu (through plane)</p> <p>9:00AM Travel to Lapu-lapu Corps</p> <p>10:00AM Meeting with Lapu-lapu Volunteers</p> <p>12:00NN Lunch</p> <p>2:00PM Meeting with Brgy. Officials in Gun-ob, Lapu-lapu</p> <p>5:00PM Early dinner</p> <p>7:30PM Travel back to Manila</p>		<p>DEBRIEFING MEETING AT THQ</p> <p><u>October 21, 2006</u></p> <p>9:00AM Meeting with Accompanying persons/ Territorial leaders</p> <p>12:00NN Lunch</p> <p>1:00PM Continuation of Meeting</p> <p>4:00PM Travel back to Hotel/Rest time</p>	
<p>VISIT TO LEGASPI CORPS</p> <p><u>October 19, 2006</u></p> <p>5:30AM Travel to Airport</p> <p>7:55AM Travel to Legaspi (through plane)</p> <p>9:00AM Travel to Tabaco</p> <p>10:30AM Meeting with Tabaco Mayor and DOH</p> <p>12:00NN Lunch</p> <p>1:00PM Meeting at Brgy. Morenoc</p> <p>3:00PM Travel Back to Legaspi</p> <p>4:30PM Meeting with San Roque and Legaspi Volunteers</p>		<p>TRAVEL OF EVALUATORS TO SINGAPORE</p> <p><u>October 22, 2006</u></p> <p>5:00AM Travel of Evaluator to Airport</p> <p>8:20AM Flight of Evaluator to Singapore</p>	

Expanding human capacity for response to HIV and AIDS - the local community as change agent
 An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Appendix 3.

Terms of Reference for the Salvation Army's Myanmar and Philippines HIV/AIDS programme.

The Terms of Reference for the Myanmar and Philippines evaluation are closely related to those of the Asia-Pacific Regional Programme Facilitation Team (also known as the Regional Facilitation Team or RFT).

Critical cross cutting questions relating to the overall approach and direction of the programme:

1. To what extent has a facilitative (Human Capacity Development) approach to integrated mission/development been demonstrated to be an effective approach to HIV/AIDS and other health related work?
2. How do community responses of change, hope and care form a foundation for and bring about behaviour change at the local level and how is this being scaled up?
3. How does an approach which fosters the creation of genuine bottom-up (community led) agendas for change impact the role and policies of the Salvation Army at different organisational levels?
4. How effective is the support and mentoring for facilitators provided by RFT? Are the numbers of people with appropriate understanding and skills and the levels of confidence and competence increasing at Regional, Territorial, National and local levels?
5. What impact is the outworking of the approach having on relations and partnerships between the Salvation Army and other agencies, government departments within the region as a whole and down to individual country levels?

The intended Outputs (deliverables) of the overall programme are:

- a). Effective responses to HIV/AIDS and health related community development issues
- b). A stronger APRPFT with more effective facilitation of local groups (more people with a deeper understanding and skills and enhanced levels of application of their understanding and skills)
- c). Lessons learned and stories shared between different situations, some of which may be more and less advanced.
- d). Changed mindsets in both country HQs, local corps and local community members away from welfare/hand out mentality to include real empowerment
- e). Policy direction changed / influenced within countries' government departments and other agencies (e.g. UNDP, UNAIDS etc)
- f). Personnel in other sectors of activity adopt the same approaches or demonstrate support for a facilitative approach.

The activities which deliver the outputs are:

- Development of facilitation skills (skills transfer)
- The practice of accompaniment
- Convening community discussion opportunities to explore possibility for change, and for the organisation to learn from the community
- The creation of necessary team structures and processes to ensure delivery of training, mentoring through accompaniment and skills transfer in facilitation
- Reflections on experiences gained (stories and lessons learned)

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

Myanmar/Philippines-specific ToR

Each item is related to one of the Outputs stated above

Output (a)

- What measurable impact has there been in the target areas as a direct result of the work (HIV/AIDS and related health areas)?
- To what extent are the measurable impacts attributable to a facilitative approach?
- To what extent do the activities undertaken address underlying causes and what evidence is there that there has been a process of reflection (mediated through facilitation/community counselling approaches) on underlying causes leading to particular activities facilitated by the local team?
- What if any other impacts have there been which were unexpected/not directly related to HIV/AIDS and related health areas and which are attributable to some extent to the approach adopted?
- To what extent does the approach of the programme represent an efficient use of resources? What evidence is there of local resource mobilisation?

(Output b)

- To what extent, in what ways and with what effect have the local team been supported by RFT/International Team and others from outside the communities over the duration of the Myanmar and Philippines programme?

Output (c)

- What part have lessons and stories from elsewhere played in shaping the practice and thinking of the local team?
- What opportunities have the local team had to share their learning and experiences elsewhere as a result of the programme?
- To what extent have the particular context of Myanmar's/Philippines' political and social context affected the effectiveness of the programme?

Output (d)

- What is the local team's understanding of the concepts and the practical implications of the facilitative approach?
- What evidence is there that their understanding of a facilitative approach has been outworked and that skills have been transferred?
- What impact has the experience of the local team over the last three years had on their attitudes to integrated mission and its out working?
- What impact has the experience of the local team over the last three years had on HQ attitudes to integrated mission and its out working?
- What has been the impact of the programme on leadership styles and attitudes to power and authority in HQ, local corps and in the wider local communities

Output (e)

- What impact has the programme had on the policy direction adopted within Myanmar/Philippines by other agencies/government departments with regard to: - a facilitative approach to development

Expanding human capacity for response to HIV and AIDS - the local community as change agent
An Integrated Evaluation Report on the Philippines and Myanmar programmes and the role of the Asia Pacific Regional Facilitation Team. Oct 2006. Dr David Evans

- a person/family/community centred response to HIV and other issues

Output (f)

- What impact has the programme had on the approaches adopted by development personnel in other sectors and organisations/government departments with regard to a facilitative approach to development?