

# Mid-Term Review (MTR) Report for the Family Strengthening Programme (FSP) SOS Zambia

DAP ASSOCIATES LIMITED

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# Final Draft Report

## Mid-Term Review of the Family Strengthening Programme



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## Executive Summary

This Report presents the findings and recommendations of the MTR of FSP that was commissioned by SOS Zambia and conducted between August and September 2022. The objectives of the MTR were: i) to assess the achievements of the programme against the outlined four expected outcomes; ii) Analyse the status of the goals and indicators set out in the five-year Results Framework in Zambia; and iii) to assess the progress made on the recommendations of the 2021 FSP Review.

The MTR was conducted in three (3) SOS Zambia operational regions and in eight districts: Masaiti and Ndola districts in Kitwe Region; Choma, Kazungula and Livingstone districts in Livingstone Region, and Chibombo, Chongwe and Mumbwa districts in Lusaka Region. Of the total sample, 914 were children who accounted for 67.6% of the respondents while 200 care givers or 17% of the total sample participated in the field phase. Young people totalled 208 of the sample or 15.4% of the total beneficiaries sampled.

Mixed methods were deployed to collect qualitative and quantitative data. During engagements with children and their caregivers and parents, the Consultant team made sure that they were familiar with issues related to consent, privacy and confidentiality. Appropriate techniques were used for collecting data directly from children with the focus group the main method used. Participatory methods such as focus group discussions (FDGs) were used to collect data from community members, young adults and youth and women groups. Key informant interviews (KIIs) were mainly used for caregivers and parents, FSP partners -Community Based Organizations (CBOs) and SOS management staff.

## Main findings

### *Program's relevance*

FSP remains relevant to the needs and rights of vulnerable children, their parents, guardians and caregivers in FSP target areas. FSP is, within available resources, addressing the problems of low household incomes, high prevalence of child marriages, high teenage pregnancies, high prevalence of child rights violations, harmful traditional practices, high levels of youth unemployment, gender inequalities, poor living conditions, poor access to clean water and sanitation and weak local social support systems. FSP programme work is contributing not only to the national legal and policy frameworks for childcare and protection but also to the Sustainable Development Goals (SDGs), Agenda 2030, United Nations Convention on the Rights of Children (UNCRC) and the UN Guidelines on Alternative Care.

### *Monitoring Evaluation and Learning Systems*

FSP has an adequate internal monitoring and evaluation (M&E) system that is functional and is contributing to achievement of the expected outcomes and outputs as per joint Results Framework (RF). The RF is clear and has well-defined overall (impact) and specific objectives (outcomes), indicators and targets values. Data quality is likely to be affected at lower (location) levels of FSP implementation due to the observed weak M&E capacity. The national level M&E have much work to do to clean up data from locations to bring it up to the standard required for input into the Programme Database (PDB). The absence of dedicated M&E staff at the location level has an effect on overall quality of FSP monitoring data. The PDB is used in all FSP programming, monitoring and evaluation work but it is observed that the PDB and Results Framework are not fully aligned yet, especially with regard to Outcome indicators 3 and 4, which are reportedly not fully captured in the PDB.

### *Program's effectiveness*

Overall, FSP has been effective as reflected in the good quality of its outputs and outcomes. Under outcome one family empowerment has led to caregivers being able to respond to the needs of the children by providing the basic needs. A number of trainings conducted in parenting, nutrition and hygiene have contributed towards improving quality of life. Interventions implemented in partner schools such as construction of ablution blocks,

drilling of borehole, and provision of reading materials have improved the pupil retention and pass rates in the supported schools. Engagement with the Department of National Registration, Passports and Citizenship (DNRPC) has led to exceeding the target for birth registration. The advocacy efforts have seen a number of program beneficiaries being able to access the support of agricultural inputs through the government's Farming Input Support Program (FISP). Working with a number of partners, FSP has contributed to sector wide impact especially in the development of the Child Code Act which draws together disparate child protection related policies and strategies implemented by several actors. The major challenge though has been the lack of continuity in implementation of project activities due to the effects of COVID-19 and the funding freeze which have affected achievement of results.

### ***Program's efficiency***

FSP has clearly defined implementation arrangements and mechanisms and funding modalities. FSP governance is closely aligned to the SOS Zambia Board, hierarchy and reporting requirements. FSP Manager Reports directly to the Head of Programmes for all matters related to FSP implementation. At regional levels the FSP Manager supports the Regional Programme Managers and FSP coordinators. The role of the Regional Programme Managers (RPMs) and FSP coordinators in FSP implementation needs to be harmonised to ensure smooth implementation. The funding modalities are clear to enable the program achieve efficiency in implementation. The funders have made prefinancing disbursements on time especially during the first year. However, due to a breach in the SOS Zambia internal financial management system, the funder has imposed a funding freeze that has resulted in more than 12 months delay in implementation.

### ***Program's inclusion***

FSP has demonstrated commitment to and is adequately addressing the issues of gender equality and inclusion. FSP programme work is ensuring that existing gender imbalances are resolved to ensure more equitable distribution of programme benefits especially among the children. The programme further endeavoured to promote the empowerment through parents, families and carers of every child with disabilities with regardless of their sex or status in society. In practice and during project implementation, this was difficult to achieve due to the social and cultural norms and values which entrenched negative attitudes, perceptions and stereotypes about gender equality. However, through the concerted efforts of the project, these structural barriers and constraints were slowly but not completely broken down.

### ***Program's sustainability***

FSP has demonstrated that it has put in place the right building blocks for ensuring long term sustainability of the programme benefits. For example, at the formative (design) phase, two major actions were undertaken that ensures the likelihood that the programme benefits will be retained with the communities beyond the funding cycle. Giving responsibility to the Ministry of Community Development (MoCD) to own and assist in the identification, selection, on boarding and orientation of community-based organisations (CBOs) and implementation partners at the local level is one way of ensuring of MoCD ownership of FSP. The use of existing CBO and community-based structures such the Community Welfare Assistance Committees (CWAC) as key implementing partners at location level will ensure that the benefits of FSP will be retained in the community.

### ***Validity of the program's design***

The FS programme design is clearly of good quality as, in its formative assessment stage, it was based on evidence the contextual situations from the baseline and needs assessment studies. The Results Framework and overall intervention logic remains valid and appropriate for achievement the outcomes and outputs. The Results Framework and intervention logic, and Theory of Change, are based on solid evidence from a number of primary studies including gender analysis and disaggregation, problem analysis and identification of key target groups, end beneficiaries and stakeholders and analysis of the institutional, legal and policy framework. The design of FSP also took into account previous experiences and lessons learnt from the first FSP Framework



(2016-2019) funded by SOS Norway and good practices in Childcare and Child Protection from other SOS Children's Villages interventions and other sector wide experiences.

SOS Zambia has two (2) main programmes: the Alternative Care (Children's Villages) and Family Strengthening (FS) programmes both under the overall oversight of the National Director who is deputized by the Head of Programmes (HOP). The Alternative Care Programme or SOS Children's Villages are mainly under the remit of the Regional Programme Managers (RPMs) for Lusaka, Kitwe and Livingstone. The Alternative Care Programme has adequate and qualified human resources including specially trained SOS Mothers, Social Workers and Counsellors all under the overall leadership of FSP.

## Key lessons learnt

A key lesson learnt is from the shift in approach, drawn from the recommendations of the Evaluation of the 2019 FSP Evaluation Study, to using existing and established CBOs working in the target communities instead of starting implementation with new entities who require significant capacity building. The potential for sustainability of FSP is also enhanced by using existing structures. Since implementation started the partner CBOs have demonstrated commitment and already have some capacity, influence and a client-base to implement FS activities. A second lesson is that devolving the responsibility for identification of partners on to Government institutions e.g. the MoCD, is helping to build buy-in and ownership. The third important lesson of experience, drawn from the recommendations of the Evaluation Study, has been the facilitation of Cash-based IGAs which reportedly has generated more beneficiary satisfaction (recipients of cash for IGAs) particularly in business planning and entrepreneurship skills. As a result of the Cash Based IGAs, there are fewer delays in procurement of goods and services by caregivers. The downside of the Cash Based IGAs has been direct beneficiaries unilaterally, without the knowledge of FSP, changing their businesses during implementation.

## Conclusions

COVID-19 and the funding freeze have significantly slowed down FSP implementation in the last 12 months. Thus the programme scope and timeframe are likely to be affected and may require adjustments to the programme Work Plan for remaining period of implementation. The programme database (PDB) and the results Framework (RF) are not fully aligned. Indicators for Outcome 3 – SRHR, and Outcome 4 UN Guidelines on Alternative Care and SRHR, UN Guidelines on Alternative Care and Child Protection have been omitted in the PDB. Data collection at location and community level is less than optimal since a single data collector (usually the Social Worker) has to deal with 60-80 families in a single data collection cycle. There are data quality issues and information gaps related to family planning activities especially when the beneficiaries are supposed to be weaned from the programme.

Capacity Building and Engagement of CBOs and Partners has taken place but only the Kitwe CBOs and partners have received adequate training to enable them respond to the needs of children deprived of parental care in their communities. Capacity building for other CBOs has been suspended since 2021 due to a funding freeze. The suspension of programme activities has resulted in weakened the partnerships with FSP. Education stakeholders in the locations appreciate the learning materials particularly textbooks which often are given to schools on FSP support. The study kits were given to individual Children on the programme during the school closure due to COVID – 19.

Unlike other interventions such as empowerment which result in self-sufficiency of beneficiaries, social-cultural factors related to early marriages and teenage pregnancies require a long-drawn out strategy and interventions to shift the mind-sets, attitudes, perceptions, negative stereotypes and behaviours of community members, families and traditional authorities to eliminate these harmful practices to children.

Since the declaration of COVID-19 as officially over, FSP should seize the opportunity to leverage current government political will to empower Zambians with various funding resources such as the CDF, SME funding and Climate funds.

The Review observes that the Regional Programme Managers (RPMs), who are at middle management levels and are in charge of the Regions and locations, do not have full responsibility over FSP implementation in their regions and locations. The FS Coordinators seem to take precedence in decision making and operations of the FS programme at the location level a source of tensions among the staff. This is historical from the time the locations operated without a location lead, but with facility heads (FSP Coordinator, Alternative Care Coordinator, etc). Management is in the process of streamlining the roles and responsibilities of all the staff in the locations. Within SOS Zambia, communications and programme visibility has not been fully prioritized and does not sufficiently take centre stage to drive the SOS Zambia Country Strategy and other key policy actions.

FSP, working with other key players, has played a major role in advocacy and networking activities, an example of the development of **Child Code Act (CCA)** which provides for major reforms in childcare and protection and consolidates all the laws and policies relating to children care and protection. The CCA also provides for parental responsibility, custody, maintenance, guardianship, foster care, adoption, care and protection of children.

## Recommendations

The following are the recommendations of the MTR:

- a) Following the impact of COVID-19 and the year-long funding freeze, review FSP Work Plan and adjust FSP activities
- b) Align Results Framework with the PDB and consider incorporating Outcome 3 on SRHR and 4 on Guidelines for Alternative Care
- c) devise measures to re-engage with partners and CBOs to rebuild and restore the confidence and trust and to assure them of restoration of programme activities
- d) Strengthen support to learners in Grant-aided schools now on Free Education.
- e) Consider follow-up advocacy measures or actions to assist Government to put into practice the Child Code Act to ensure the new legislation is implemented for the benefit of children in FSP target areas.
- f) Probe the full effects of the year-long funding gap on SOS Zambia staff, partners, beneficiaries, and key stakeholders' motivation, morale, confidence and trust and devise a mitigation plan
- g) Expedite the process of sealing the loopholes in the financial system in order to meet the funder's requirements for financial due diligence and take practical measures;
- h) Expedite the financial due diligence process to enable SOS to raise funding for programme work from its and other Federation of SOS Children's Villages affiliated Associations.
- i) Assist communities to apply for CDF and to interpret CDF Guidelines and write bankable project proposals
- j) consider increasing the funding thresholds for procurement from the current ZMW10,000 to ZMW30,000 for Regional Offices
- k) Establish the position of M&E officer at the regional level to improve data collection, processing and storage in the PDB;
- l) Harmonise the relationship between the FS Coordinators and Regional Programme Managers and resolve current differences and misunderstandings between the two roles on FSP.
- m) Prioritise communications in driving the SOS advocacy and policy actions and other SOS programmes, including FSP that are child-centred and community-focused.
- n) In relation to the Child Code Act, FSP should during the remaining implementation window help government to mobilize actors to actualize the CCA by selecting start up activities to the implementation process of the CCA;

## List of Abbreviations

CBOs:	Community-Based Organisations
CEDAW:	Convention on the Elimination of All Forms of Discrimination against Women
COVID-19	Corona Virus Disease 2019
CSD:	Community Services Directorate
CWAC:	Community Welfare Assistance Committee
DAC:	Development Assistance Committee
DEBS:	District Education Board Secretary
FBO:	Faith-based Organisation
FSP:	Family Strengthening Programme
GRZ:	Government of the Republic of Zambia
HIV/AIDS:	Human Immuno Virus / Acquired Immuno-Deficiency Syndrome
HRC:	Human Rights Commission
IEC:	Information Education Communication
IGA:	Income Generation Activity
MCDSS:	Ministry of Community Development and Social Services
MDAs:	Ministries, Departments and Spending Agencies
MOU:	Memorandum of Understanding
NGOs:	Non-Governmental Organisations
NSAs:	Non-State Actors
OECD:	Organisation for Economic Cooperation and Development
PPE:	Personal Protective Equipment
PwD:	Persons with Disabilities
SCT:	Social Cash Transfer
SDGs:	Sustainable Development Goals
SGBV:	Sexual Gender-based Violence
SMART:	Simple, Measurable, Achievable, Realistic, and Time bound
7NDP:	Seventh National Development Plan
SOS:	Social Society
SRH:	Sexual Reproductive Health
TOR:	Terms of Reference
UNCRC:	United Nations Convention on the Rights of the Child
UNICEF:	United Nations International Children's Emergency Fund
UNZA:	The University of Zambia
VIPs:	Ventilation Improved Pit latrines
WASH:	Water, Sanitation and Hygiene
WW II:	Second World War
ZANACO:	Zambia National Commercial Bank
ZAPD:	Zambia Agency of Persons with Disabilities
ZDHS:	Zambia Demographic Health Survey
ZPS:	Zambia Police Service

# 1. Introduction

## 1.1 Background

SOS Children's Villages Trust Zambia was established in 1996 as a member of SOS Children's Villages International. SOS Zambia is guided in its programme work by its vision which is to ensure that every orphan and vulnerable child is provided with a home within which essential child care elements consisting of love, respect, and security are provided. The vision is realised through SOS Zambia's mission which is stated as '*We build families for children in need, we help them shape their own futures and we share in the development of their communities*'.

The Family Strengthening Programme (FSP) was first introduced in Zambia in 2004 using the Family Strengthening and Community development model. FSP broadly aims to strengthen the capacity of vulnerable families to effectively protect and care for their children and prevent family separation.

FSP is funded through a global partnership agreement between SOS Norway, the General Secretariat of SOS Children's Villages International (GSC) and SOS Children's Villages in Malawi and Zambia as a continuation of support for FSP which has been in operation since 2009. A Framework Agreement was signed in 2020 between SOS Norway and the Norwegian Agency for Development Cooperation (NORAD) to provide annual funding (budget) of 19,450,000 NOK which is split between SOS Malawi and SOS Zambia. FSP implementation window is from January 2020 to December 2024 implying that the current NORAD Framework is midway in implementation.

## 1.2 Programme Context Analysis

### 1.2.1 Problem Context Analysis

Children in Zambia are highly vulnerable and face the harsh realities of abject poverty, and inadequate access to basic needs education, health and food. Without the basic rights, children are caught up in a vicious cycle of poverty way into adulthood. A denial of child rights also constitutes an infringement of the UN Convention on the Rights of the Child (UNCRC)<sup>1</sup> particularly Article 13.<sup>2</sup>

Box 1 below provides a full description of the problems identified by FSP for the current NORAD Framework (2020-2024). The MTR has consistently used the problem context analysis as a benchmark and reference for analysing and aligning its findings and drawing appropriate conclusions and recommendations.

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<sup>1</sup>UNCRC is a legally-binding international agreement setting out the civil, political, economic, social and cultural rights of every child, regardless of their race, religion or abilities

<sup>2</sup>UNCRC Article 13 states: Parties shall respect the right of the child who is separated from one or both parents to maintain personal relations and direct contact with both parents on a regular basis, except if it is contrary to the child's best interests.

### Box 1: Problem context and identification at FSP Design Phase<sup>3</sup>

- a) **Low access to and poor quality of education provision**- The transition rates from primary to secondary school continue to remain low at 67.5% (MOGE, 2018)<sup>4</sup> owing to inadequate school places to accommodate all primary school graduates. The transition rate from lower secondary to upper secondary school was estimated at 48% (MOGE, 2018).
- b) **Low household income** - Poverty pervades all aspects of life for many families in the target communities so that most families are unable to adequately provide basic needs for their children such as education, health, clothing, nutritious food, and good shelter among others.
- c) **High rate of youth unemployment** - The rate of youth unemployment in Zambia is estimated at 17.6% for young people aged between 15 years to 35 years.<sup>5</sup> For the targeted provinces, the rates are: Southern 13.5%, Copperbelt 20% and Lusaka 17.7%. One major cause of the high rate of youth unemployment is limited opportunities for vocational skills training.
- d) **High rates of child marriages and teenage pregnancies** - Zambia has one of the highest rates of child marriages in the world with 31% of women aged 20 to 24 years married before the age of 18yrs.<sup>6</sup> Impacts of child marriages include higher maternal deaths, fistula complications, higher levels of gender-based violence and dropping out of school compromises future socio-economic wellbeing for the affected girls
- e) **Low Access to Sexual and Reproductive Health services** - Inadequate information, lack of privacy, cultural and traditional barriers, and a general youth unfriendly environment in health facilities hinder youth from accessing reproductive health services. This has contributed significantly to the unacceptable levels of teenage pregnancies, child marriages, school dropouts, and new HIV infections.
- f) **Low access to water and sanitation** - Adequate access to safe and sustainable water and hygiene is essential for the child's health and wellbeing and improves education quality and learning outcomes. Poor access to Water, Sanitation and Hygiene (WASH) continues to be the leading cause of infections like cholera and diarrhoea, and death among children under the age of five in Zambia.
- g) **Poor implementation of the United Nations Guidelines on the Alternative Care of Children** - The implementation of the United Nations Guidelines for the Alternative Care of Children, which have been domesticated into the National Alternative Care and Reintegration Guidelines (2017) has been limited in that social support programmes for the primary prevention of family separation are few due to low budgetary allocations to the Ministry of Community Development and Social Services (MCDSS). This leaves children at risk without support to access essential services, and community-based care options such as formal kinship care and foster care. These alternative care options for children at risk are not fully fledged despite being encompassed in the National Guidelines.
- h) **Weak Local Support systems** -In the identified new target communities, families, Community - Based Organisations and faith-based organisations are the main support structures that provide social safety nets to vulnerable children. However, the capacity of these structures is often limited due to challenges such as lack of skills for policy engagement with government, inadequate financial resources, general organisational management skills and absence of linkages with other stakeholders concerned with children's issues.

The current status is that an estimated 1.4 million children in Zambia have lost one or both parents or are at risk of losing a parent. This national situation is compounded by a significant breakdown in extended family systems which provided a Social Safety Net (SSN) and coping mechanism for the majority single or double orphans. Children living without proper parental care are either neglected by the families, subjected to emotional and physical abuse and forced labour by their carers or guardians. Violations of children's rights remain the biggest challenge yet existing national policies and legislative framework for protection and safeguarding of their welfare remain significantly unresponsive to children's needs for special protection.

<sup>3</sup> SOS Zambia NORAD Application 2020-2024 17.09.2019

<sup>4</sup> Ministry of General Education (2018) Educational Statistical Bulletin, 2017. Lusaka.

<sup>5</sup> Central Statistical Office (2018) Zambia in Figures. Lusaka.

<sup>6</sup> UNFPA (2017) Child Marriage in Zambia

### 1.2.2 Family Strengthening Programme Objectives and Scope

FSP is a response to the needs and rights of children, and the problems and factors in the living environment that expose children to extreme vulnerability, poverty, living with single parents or large families or parents with severe illness and disability.<sup>7</sup> The programme's strategy is to *strengthen families to ensure that children without parental care and at risk of losing parental care grow within a caring family environment*<sup>8</sup> while the overall objective (at impact level) is to ensure that *"children deprived of parental care have an equal chance to succeed in life"*.

FSP has four specific objectives (SO) or Outcomes (Key Result Areas (KRAs) against which FSP achievement of results was measured during the review period are made. These are:

- a) Outcome 1 (SO 1): Families provide quality care and protection for vulnerable children;
- b) Outcome 2 (SO 2): Children and young people have improved learning outcomes;
- c) Outcome 3 (SO3): Young people have access to Sexual Reproductive Health and Rights (SRHR); and
- d) Outcome 4 (SO4): Government prioritises the enforcement of the UN Guidelines for the Alternative Care of Children.

### 1.2.3 Geographical Scope and Coverage of FSP

FSP is implemented in 17 communities in three Provinces of Zambia or SOS Zambia operational areas - Lusaka, Kitwe and Livingstone Regions. Following the 2019 Evaluation of FSP, 13 new communities were selected to participate in FSP. Only 4 communities consisting of 135 families, and 571 children (308 girls, 263 boys) were carried over from the first FSP Framework in Livingstone Region. In Kitwe region, the programme is implemented in Ndola and Masaiti districts. In Lusaka region, the districts covered by FSP include Mumbwa, Chongwe, and Chibombo while in Livingstone Region, Livingstone, Choma and Kazungula are covered by FSP in the Southern Province. The distances between the main SOS villages and the target communities are quite long and this affects the contact time with the target beneficiaries.

## 1.3 Legal, Policy and Institutional Context

FSP intervention is adapted and aligned to the existing national laws, policies and institutional frameworks relevant to childcare, protection and development.

### 1.3.1 Legal and Policy Framework

FSP has significant influence on key national legislation and policies related to or with an effect on childcare and protection in Zambia. These include, but are not limited to:

- a) **Child Code Act (CCA)** -FSP, working with other key players, has played a major role in the development of this Act which provides for major reforms in childcare and protection and consolidates all the laws and policies relating to children care and protection. The CCA also provides for parental responsibility, custody, maintenance, guardianship, foster care, adoption, care and protection of children. It will be important in the remaining FSP implementation window to help government actualize the CCA by selecting activities to kick start the implementation process of the CCA;

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<sup>7</sup> Briefing Paper on program direction strategy 2030: focus in family strengthening

<sup>8</sup>The family is at the heart of society and is the natural environment for the healthy development and well-being of children (FSP Principles Manual Working paper 2007)



- b) **National Child Policy, 2015** which provided guidance and the institutional framework through which all child related programmes in the country were implemented. The minimum standards for childcare facilities ensured that children who were not in a family environment were protected and cared for in accordance with international standards. Government has enhanced alternative measures such as foster care, adoption and integration;
- c) **Persons with Disabilities Act (2012)** which domesticated the UN Convention on the Rights of Persons with Disabilities (UNCRPD) and its Optional Protocol, and criminalised the failure by parents to take children with disabilities to school. It is backed by the National Policy on Disability which sets out the GRZ's vision, objectives, strategies and programmes for Persons with Disabilities;
- d) The **Education Act of 2011**, which enforced the right to education at early childhood, basic and high school levels, and which provided the right to free and compulsory basic education. The Act also made it an offence to marry off school-going children and prohibited discrimination;
- e) The **National Policy on Education, 1996** recognises the right to education for each individual, regardless of personal circumstances or capacity. The Ministry of Education (MOE) has the overall responsibility for education including special education for persons with disabilities;
- f) The **National Youth Policy** aims to include youths in mainstream youth empowerment programmes and projects targeting them;
- g) The **National Gender Policy (2014)**, which is aligned to regional and international protocols and commits to the attainment of gender equity and equality in development by addressing existing gender imbalances and tackling Gender Based Violence (GBV). It also promotes empowerment of every person regardless of their sex or status in society;
- h) The **Gender Equity and Equality Act No. 22 of 2015** which is aligned to the Convention on the Elimination of All forms of Discrimination against Women (CEDAW).
- i) The **National Disabilities Policy and Persons with Disabilities Act (2012)**
- j) The **Anti-Gender Based Violence Act No.1 of 2011** provides for the protection of victims of Gender Based Violence and commits to inquire into and deal with any act of violence in accordance with the Criminal Procedure Code, Penal Code and any other written law. The Act also provided for the establishment of shelters for victims of such violence, including children;
- k) The **National Strategy on Ending Child Marriage in Zambia 2016 – 2021** aimed at accelerating national efforts to end child marriage by 2030 by providing an operational framework that reflects the current national and global trends and efforts. Child marriages are a multifaceted social cultural and endemic human rights violation that adversely impacts the physical, psychological, emotional, and intellectual development of girls and boys (UNCRC). Zambia has one of the highest child marriage rates in the world with 31% of women aged 20-24 years married by the age of 18 (ZDHS, 2018).
- l) **Adolescent Health Strategy 2017 – 2021**, which stipulates that adolescent-friendly spaces (such as infrastructure in form of a room or space) be set aside as a platform to deliver services that are responsive to the needs of adolescents in health facilities.

Based on its mandate, FSP has been contributing to high level national policy dialogues (HPD) on childcare and protection, as well as being an active participant in major stakeholder engagements on child policy and legislative reforms. FSP also actively participates in international and regional conventions and Communities of Practice (COP) on child care, child rights and protection such as United Nations Convention on the Rights of Children (UNCRC) and the Sustainable Development Goals (SDGs) (Also See Section 1.3.3 for details)

FSP programme work in Zambia is aligned to and draws guidance from the current SOS Village Trust International (SCVI) international and regional policies and strategic frameworks including the SOS Children's Villages International Strategy 2030, the SOS "Care for Children is Care for Development" Policy, SOS Children's Villages Child Protection Policy - Child Safety is business and UN Guidelines for the Alternative Care of Children amongst others.

### 1.3.2 Institutional Framework, Coordination, Complementarities and Synergies

From the desk analysis and in-depth interviews with key institutional stakeholders, the Review found that FSP directly cooperates and collaborates with a diverse range of public (state actors) and non-state actors (e.g. CSOs), private sector entities, and donor agencies. By so doing FSP has ensuring a coordinated approach to childcare and protection, as well ensuring complementarities and synergies with like-minded institutions, and this avoiding duplication and wastage of scarce development resources. Key institutions FSP works with include:

- i. The **Ministry of Community Development and Social Services (MCDSS)** - formulates policies, strategies and programmes on social protection and for Persons with Disabilities. This Ministry is also responsible for the Social Cash Transfer (SCT) Programme from which poor and vulnerable families draw social welfare benefits;
- ii. The **Zambia Agency for Persons with Disabilities (ZAPD)** which is responsible for coordinating the implementation of the Persons with Disabilities Act and the National Disability Policy and acts as an advisory body to the MCDSS. ZAPD has provincial offices but no District Offices in the target districts;
- iii. The **Zambia Police Victim Support Unit** – one of the units under the Community Services Directorate (CSD) of the Zambia Police Service (ZPS) mandated to investigate, arrest and prosecute all cases involving and committed against spouses, women, children, persons with disabilities, and the aged. The Unit also provides counselling to both victims and perpetrators of Sexual and Gender Based Violence (SGBV) and other crimes;
- iv. The **Ministry of Gender** (now Department under the Office of the President) – which is committed to protecting and promoting women’s rights, curbing Gender Based Violence and reducing gender inequalities by making progressive reviews to legislation to strengthen the protective environment;
- v. The **National Assembly (Parliament)** which is responsible for debating and enacting laws particularly its Standing Committee on Social Protection and Welfare played a key role in reviewing
- vi. The **Ministry of Justice (MOJ)** - provides technical support in preparation and drafting of national Bills and legislation;
- vii. The **Human Rights Commission (HRC)** - a key government agency safeguarding the human and universal rights of the citizens, the HRC played a key role especially in relation to the enactment of the Gender Equity and Equality Act, the Education Act, and the National Disability Act;
- viii. The **Ministry of Health** – which has the mandate to provide access to Sexual and Reproductive Health (SRH) services to young beneficiaries; and
- ix. The **Ministry of Home Affairs (Department of National Registrations, Passport and Citizenship)** – which has the authority mandated to carry out civil registration

### 1.3.3 Alignment with SDGs, UN Guidelines on Alternative Care and other protocols

FSP is contributing to Sustainable Development Goals (SDGs)<sup>9</sup> by appropriately applying policy actions and strategies such as the “Care for Children is Care for Development” policy to integrate the SDGs in all its interventions. FSP is addressing not less than 10 of the 17 SDGs,<sup>10</sup> most notably SDGs 1,3,4,5,8,10,16 and 17, making it a truly multidimensional programme FSP is implemented

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<sup>9</sup> SDGs, which were adopted by the United Nations General Assembly in September 2015, are a universal call to action to end poverty, protect the planet and ensure that by 2030 all people enjoy peace and prosperity and no is left behind, especially those furthest. All SDGs are linked and integrated with outcomes in one area affecting outcomes in other areas to ensure a balance between social, economic and environmentally sustainability.

<sup>10</sup> FSP is specifically addressing SDGs 1,2,3,4,5,6,10,11,13 and 17

under the NORAD framework (2020-2024) and its contribution to the SDGs is clearly articulated through its four programme outcome areas as summarised in Table 1 below.

**Table 1: Alignment of FSP Outcomes to the SDGs**

Outcome	Outcome description	SDG Goals aligned to	Specific contributions
1	Families provide quality care and protection for vulnerable children	1,2,3,8	Programme interventions addressing outcome 1
2	Children and young people have improved learning outcomes	4,6,10	Education support interventions are of direct relevance these goals
3	Young people have access to Sexual Reproductive Health and Rights (SRHR)	3,5	Programme activities for young people's SRHR refer
4	Government prioritises the enforcement of the UN Guidelines for the Alternative Care of Children	16,17	Stakeholder collaboration and support to government mandate holders prove relevance to the mentioned goals.

## 2. Objectives and Scope of the MTR

### 2.1 Objectives of the MTR

In accordance with the TORs, the specific objectives of the MTR are to:

- a) Assess the achievements of the programme so far, registered from 2020 to date against the outlined four expected outcomes;*
- b) Analyse the current status of the goals and indicators set out in the five-year results framework in Zambia, that is, examining the extent to which these goals and indicators are being addressed and ascertain the probability of accomplishing the targets by the completion date; and*
- c) Assess the progress made on the recommendations of the 2021 FSP Review.*

### 2.2 Scope of the MTR

The MTR focused on the assessment of implementation progress against the four (4) expected outcomes as reflected in the Results Framework and achievement of results covering the period from 2020 to mid-2022 (See TORs). Gender and inclusion and human rights issues were fully taken into account in the MTR process. The geographical scope of the MTR included three (3) regions<sup>11</sup> and eight districts: Masaiti and Ndola districts in Kitwe Region. Choma, Kazungula and Livingstone districts in the Livingstone Region and Chibombo, Chongwe and Mumbwa districts in the Lusaka Region.

### 2.3 Approach and Methodology

#### 2.3.1 Description of the Overall Approach to the MTR

The Review adopted a “mixed methods” approach that enabled the collection of both qualitative and quantitative data, while providing the opportunity for methodological and data triangulation. The research team deployed a method of triangulation to ensure credibility and validity of the findings. Deliberate efforts were made to ensure that data from one or more sources e.g., data collected through secondary sources was compared and checked for accuracy and reliability against data from fieldwork. These data were then checked against the information from key informant interviews.

Participatory methods were largely used in field data collection using tools such as focus group discussions (FDGs) for qualitative data, Key informant interviews (KIIs) and online interviews. Participatory approaches involved providing an enabling environment for various stakeholders to share their perspectives on all critical programme aspects in view of the DAC criteria.

Other methods used included direct observations through transect walks in community settings and non-participant observation for triangulating respondent narratives and project documents with real time ground truthing were also widely applied (Also see Section 2.5 below for detailed description of data collection methods and tools). The chosen approach enabled better

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<sup>11</sup> As defined by SOS Zambia for administrative and programme work

understanding of respondent categories thereby allowing the capturing a range of perspectives in view of the agreed criteria for measurement of results.

### 2.3.2 Design of the MTR and Review Criteria

The design elements and key dimensions of the MTR was based on the SOS Children's Villages International Theory of Change (TOC), which has been adapted by SOS Zambia and is consistently applied FSP programme work. From analysis of FSP design the TOC can be as : *"If structural barriers and constraints that prevent children from succeeding in life such as low household incomes, high rate of youth unemployment, child marriages, teenage pregnancies and weak local support systems are removed or eliminated, then children deprived of parental care will have an equal chance to succeed in life".*

Measurement of FSP Zambia results was based on the overall Results Framework (2020-2024) for Malawi and Zambia. The Results Framework has a clearly defined Results Chain, indicators, and target values, means of verification (MOVs) and key assumptions that enable measurement of results and achievement of results. Both the vertical and horizontal intervention logics of the Results Framework enable measurements of results.

In addition to the field survey of children, caregivers and young adults in FSP locations, the Review assessed achievement of results based on the OECD / DAC criteria that seek to account for the relevance, implementation efficiency, effectiveness, impact and sustainability of a programme intervention. This criteria provides widened scope for generating lessons for improved future programming and implementation. The six-thronged criteria were also outlined in the Inception Report as:

- a) *Relevance – is the intervention doing the right things as earlier planned?*
- b) *Coherence – how well does the intervention fit?*
- c) *Efficiency – how well are the resources being used to obtain the desired results?*
- d) *Effectiveness – is the intervention achieving its objectives?*
- e) *Impact – what differences or changes does the intervention make?*
- f) *Sustainability – will the benefits last?*

## 2.4 Sampling Procedure and Sample Selection

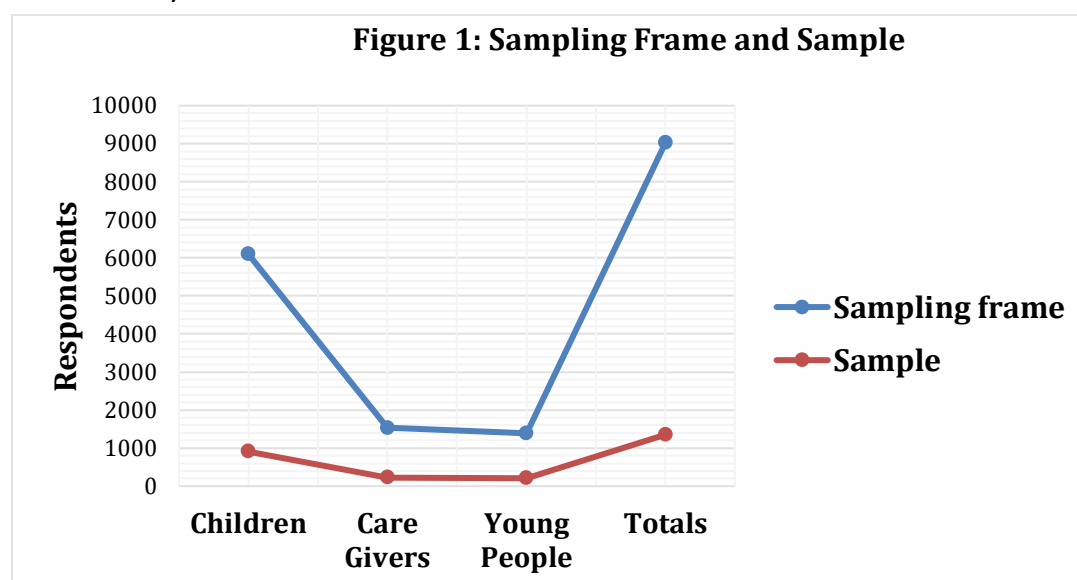
Owing to the nature of the review that targeted already identifiable groups, non-probability sampling techniques were found ideal especially that cross-cutting issues such as inclusion were prioritised. Presented hereunder are descriptive narratives of how sampling was conducted.

### 2.4.1 Sample Population and Sampling Frame

Sampling was stratified according to respondent categories which comprised children, care givers, and young people as the main target groups for the study. In addition, collaborative stakeholders were purposively identified and these included government, community leaders CBOs and implementing partners.

The total sampling frame (that is, all participants and respondents eligible to participate in the survey) in FSP operational area was 9,020 of whom 6,095 were children, 1,536 were care givers, and 1,389 were young adults ([Data from Programme Database](#)). This number excludes the key

stakeholders, SOS and government staff who were interviewed separately. The sampling frame was drawn from existing data from the programme database. Figure 1 depicts the sampling frame of the survey



After assessing several scenarios based mainly on available time and manpower for conducting the field data collection, the Consultant arrived at a sample of 1,352 or 15% of all children, young adults and caregivers in the sampling frame.

### Number of Children Sampled

Table 2 below shows that a total of 719 children (361 male and 358 female) took part in the survey. The interviews and discussions took part in the presence of either their parents or guardians.

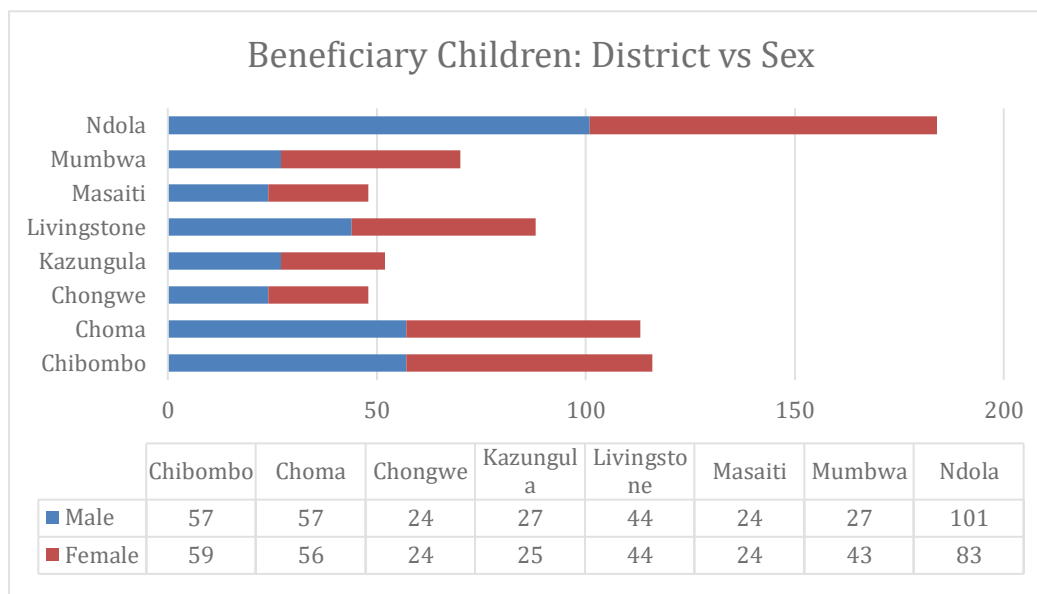
**Table 2: Total number of Children Sampled in all Districts disaggregated by sex**

Name of District	Male	Female	Total
Chibombo	57	59	116
Choma	57	56	113
Chongwe	24	24	48
Kazungula	27	25	52
Livingstone	44	44	88
Masaiti	24	24	48
Mumbwa	27	43	70
Ndola	101	83	184
<b>Grand Totals</b>	<b>361</b>	<b>358</b>	<b>719</b>



Figure 2 below graphically depicts the actual number of children who took part in the survey in all the 8 target areas and districts of the FSP.

**Figure 2: Beneficiary Children Participants in the Survey disaggregated by sex**



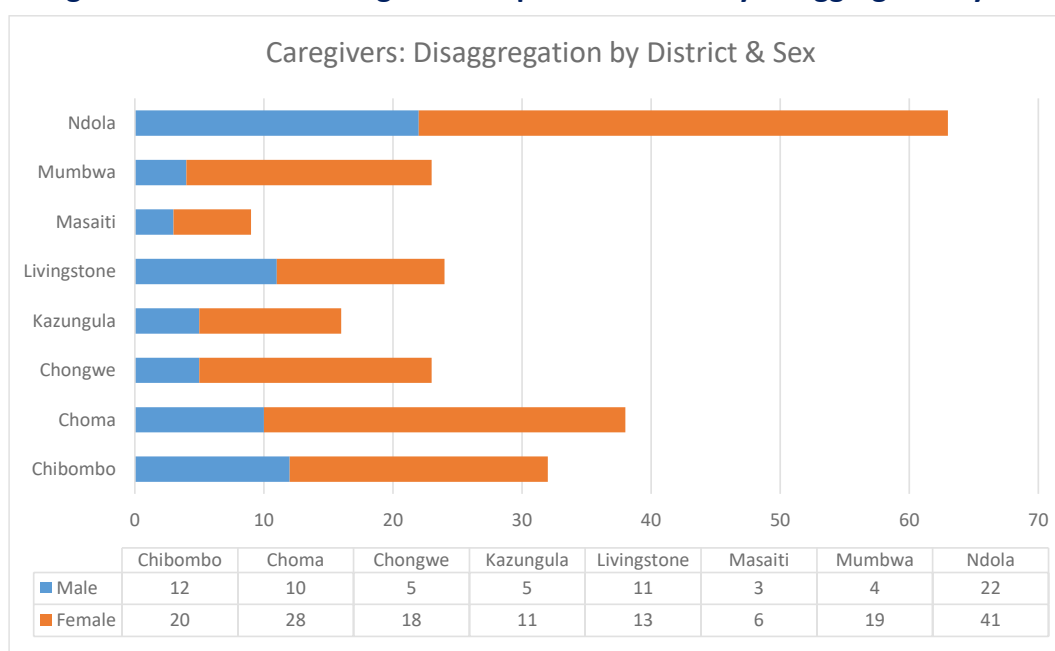
### Number of Caregivers Sampled

Care givers were a key respondent category. A total of 228 caregiver givers (77 male and 156 women) participated in the survey. Table 3 below depicts the total number of Caregivers who were sample in all 8 districts disaggregated by sex.

**Table 3: Total number of Caregivers Sampled in all Districts disaggregated by sex**

Name of District	Male	Female	Total
Chibombo	12	20	32
Choma	10	28	38
Chongwe	5	18	23
Kazungula	5	11	16
Livingstone	11	13	24
Masaiti	3	6	9
Mumbwa	4	19	23
Ndola	22	41	63
<b>Ghrand Totals</b>	<b>72</b>	<b>156</b>	<b>228</b>

Figure 3 below graphically depicts the actual number of caregivers who took part in the survey in all the 8 target areas and districts of the FSP.

**Figure 3: Number of Caregivers sampled in the survey disaggregated by sex**

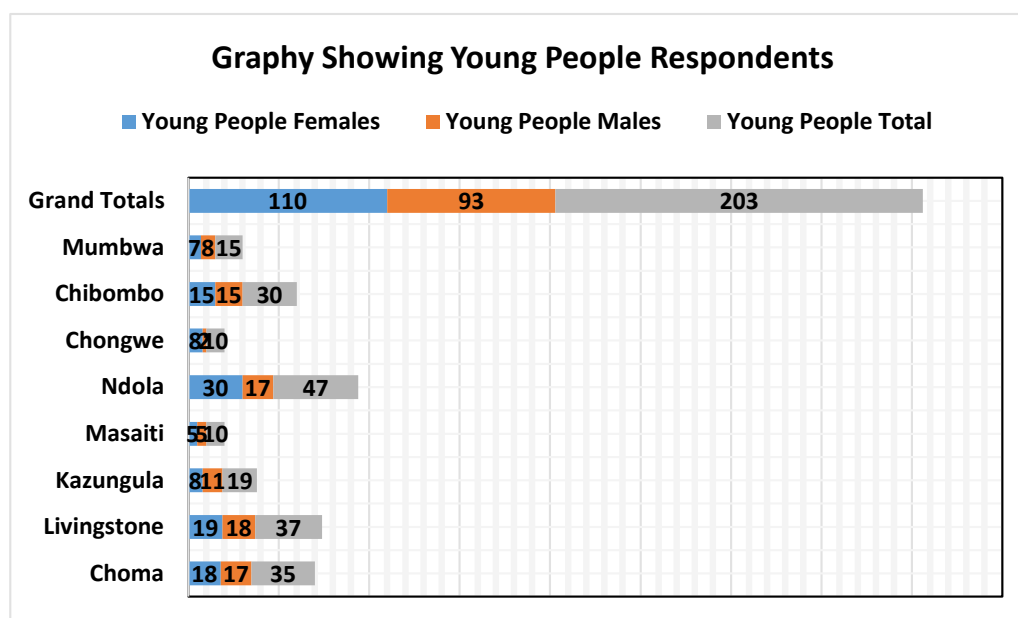
### Number of Young People Sampled

Young people were a key respondent category. A total of 203 young people (110 male and 93 women) participated in the survey. Table 4 below depicts the total number of young people who were sampled in all 8 districts disaggregated by sex.

**Table 4: Number of young people sampled in the survey disaggregated by sex**

Young People			
Name of District	Females	Males	Total
Choma	18	17	35
Livingstone	19	18	37
Kazungula	8	11	19
Masaiti	5	5	10
Ndola	30	17	47
Chongwe	8	2	10
Chibombo	15	15	30
Mumbwa	7	8	15
<b>Grand Totals</b>	<b>110</b>	<b>93</b>	<b>203</b>

Figure 4 below depicts the number of young people who participated in the survey disaggregated by sex

**Figure 4: Number of young people sampled in the survey disaggregated by sex**

### Number of SOS and Government Staff Sampled

Implementing partners, key stakeholders and institutions were the target of the MTR survey. A total of 59 SOS, Government and Partner Respondents took part in the survey

**Table 5: Number of SOS, Government and Partner Respondents sampled in all districts**

District	SOS Staff	Government Staff	Partners	Totals
Lusaka	19			
Choma	1	3	1	
Livingstone	2	2	2	
Kazungula	1	2	2	
Masaiti	0	1	2	
Ndola	1	5	2	
Chongwe	1	1	1	
Chibombo	2	1	2	
Mumbwa	1	2	2	
<b>Grand Total</b>	<b>9</b>	<b>17</b>	<b>14</b>	
				<b>59</b>

### 2.4.2 Sample Inclusion and Exclusion Criteria

In FSP survey, inclusion criteria applied mainly to age (focus on children and young adults), gender (inclusion of both male and female children, and young male and female adults and male and female caregivers) Persons with disability were also a primary focus for inclusion. Criteria such as levels of vulnerability of the participants and respondents were considered during the design of the Survey. Previous history of engagements with target groups and beneficiaries of FSP Framework 1 in the MTR target areas was considered. Households not participating on the FSP were excluded from the survey.

### **2.4.3 Choice and Justification of Sampling Methods**

As alluded to above, non-probability sampling techniques, particularly purposive and availability were applied. This was because the beneficiaries were already determined that they constituted the target group for field data collection. Probability sampling techniques were found not ideal as there was the possibility of including, by chance factor, those outside the coverage scope of the programme.

### **2.4.4 Final Sample Selection**

During the period under review, FSP supported 7054 children and young people (3543 females and 3511 males), cumulatively from 2020 (6,476) to December 2021, who are deprived of parental care to have an equal chance to succeed in life.

The review adopted a 15% representation extracted from the given sampling frame to align with the available timeframe and manpower available for undertaking the data collection. This was arrived at using appreciative inquiry contextualised within field work logistics.

## **2.5 Data Collection Tools and Instruments**

### **2.5.1 Choice and Justification of Data Collection Tools**

The mixed methods approach adopted by Review called for methodological triangulation that necessitated the use of a diversity of techniques. Table 3 below provides a summary of the techniques used and the justification.

Personal Interviews were conducted using open-ended questionnaires with children in the presence of either their parents, guardians or caregivers. Translation was required as some could not express themselves in English. All ethical consideration related to interviews with children were followed. Focus groups were used to collect data from young adults participating on FSP.

Key informant (in-depth) interviews (KIIs) were conducted with FSP partners and SOS staff. Purposive sampling method, in which the observer has certain or specific knowledge of the respondent, was used to select the partners. Government staff and SOS management staff. At least 19 SOS staff were interviewed in their offices or through virtual interviews while at least 3 partners per region were targeted for interviews. The team targeted at least 3 staff from the Ministry of Community Development and Social Welfare staff in each of the 3 regions.

Selected data collection tools were employed, namely interview guides, questionnaires, focus group discussions, and non-participant observation. The chosen designs determined research tools appropriate for gathering the nature of data. Thus, both qualitative and quantitative designs were used and so were the tools.

**Table 6: Choice and Justification of Data Collection Tools**

Respondent Category	Data Collection Tool	Justification
Children	One on One Interview	Children usually feel shy expressing themselves in the presence of their peers and other people, as such, the team decided to use One on One interview with open ended questionnaires for this category of respondents, this why, the children were able to answer the questions, freely narrate and give details of their responses
Young people	Focus Group Discussion	Appropriate for qualitative data. This tool helped to create a safe environment where young people were able to freely give their views about the project. Being in the presence of their peers gives young people the courage to speak out and provided the consulting team a way to get information from a good number of young people in short space of time, which is what was needed seeing as the team didn't have much time for data collection as only 8 days were allocated.
Caregivers	One on One interviews	There was need to get both quantitative and qualitative data from the caregivers, as such, the consulting team decided to use one on one quantitative interviews with open-ended questions, thereby enabling the Consulting team to get the much-needed statistics and data supporting the statistics
Partners	Key Informant Interview	The partners are the people that have been collaborating with SOS on this project and gate keepers of the areas where the project is being implemented, as such, there was need to get their in-depth views about the project, with would help the Consulting team to triangulate the information received from the beneficiaries, the SOS team and the partners, which would help to give a true reflection of the project.
SOS Staff	Key Informant Interview	Appropriate for quantitative data collection. The team need to get a deeper understanding of the project, what it was about, who was involved, how far the project was from meeting its objectives, challenges the SOOS team faced and recommendation on what they thought needed to change, and the best way to get all this information and others was by having one on one qualitative interviews with the people in the frontline of the project
All categories	Non-Participant Observation	Helpful in triangulating respondent narratives and project documents with real time ground trothing
All categories	Kobo Collect	<b>Kobo Collect is an open-source Android based App for collecting survey data.</b> Kobo is a simple powerful and robust data collection tool that allows collection of field data in real time. It is linked to a web-based database which helps to process the data as and when it is being collected

### 2.5.2 Identification, Recruitment and Training of Data Enumerators

The Consultant with his core-team recruited experienced and tested research assistants. Notwithstanding their antecedent knowledge they still underwent intensive training which included use of mobile data collection applications such as Kobo Collect. The training tackled both qualitative and quantitative methodologies after taking the participants through the FSP's core focus areas and outcome areas. A relevant programme context was created for their easy relation to the subject assignment.

### 2.5.3 Piloting of Data Collection Tools

The last part of the training exposed researchers to field level simulation. This was in addition to the desk simulation that was conducted at the end of training through role plays. Field piloting was meant to authenticate the tools after testing them in an environment and context that were similar to target study areas. This exercise was conducted in Chongwe District.

### 2.5.4 Data Collection Methods

As explained in 2.2.3 above, the adopted methods were premised on contextualised considerations in view of the nature of the information sought. These are reiterated below for clarity, in addition to introductory insights shared above in section 2.2.6 and table 3 respectively.

- a) **Quantitative Data Collection Tools** - Quantitative data collection tools are attached herewith as annexure '2' below. Questionnaires were developed and later tested during piloting prior to using them in the review.
- b) **Focus Group Discussions** - Young people were another target group, though with least representation from among those covered in this programme. Focus group discussions targeted this category of beneficiaries.
- c) **Key Informant Interviews** -These were conducted for Key Informants including SOS Project staff, FSP Partner organisations, National and Provincial level stakeholders, District Heads of Departments (e.g., Gender, Social Welfare and Community Development), traditional leaders (Village Headmen and Chiefs), where appropriate and change agents in communities, representatives of Associations, other NGOs and private sector actors linked to FSP
- d) **Online interviews** were conducted mainly with SOS staff, government staff and partners who could not be reached directly. Regarding the Caregivers, the questionnaire for caregivers was uploaded on the Mobile App while verbal interviews were conducted and responses uploaded and received in real time at our central database

#### 2.5.4.1 Significant Life Changing Stories

In addition to the FDGs, KIIs, and observations, the Review adopted a data collection strategy that involves collection of human-interest significant life changing stories (SLCS) mainly from direct engagements and interactions with the final beneficiaries of all categories. In the SLCS method the participant were made to narrate the significant life transforming events and actual changes in their physical environment, as well as to relate them (for older participants in the SLCS) to the social, political and economic aspects of community life which are directly attributed to FSP intervention.

#### 2.5.4.2 Desk Review

A number of key documents from various sources were reviewed to collect secondary data. These included the NORAD Framework Evaluation Report, Needs Assessment Reports, Narrative and Progress, and Annual Reports, FSP approved Budget and latest Expenditure Report. A number of SOS Children's Village International Policy and Strategy documents were carefully studied and references made to them. Documents from international organisations such as the UN system were reviewed. FSP fact sheets and website content were analysed. Secondary data was used



not only to complement the primary data collected through FGDs, KIIs and direct observations but also to triangulate with primary data from the field and other external data sources.

### **2.5.5 Data Processing and Verification**

After collection, field data was cleaned, collated (organised) and coded for analysis using a central database that had received real time data through the Kobo Collect Application. A *method of triangulation* was applied to verify the accuracy, consistency and reliability of data from various primary and secondary sources. After the training, a full day was allocated to piloting the reliability and validity of the tools. The pilot was conducted in Palabana small community in Chongwe district. A few gaps were identified and corrective measures taken before the data collection started.

### **2.5.6 Data Analysis**

A mixed methods approach was used to analyse the qualitative and quantitative data collected from various sources as follows: Quantitative Data Quantitative Data was collected through questionnaires on tablets synchronised with an online embedded database on Kobo Collect. The data was then extracted and cleaned for descriptive and inferential analysis in the Statistical Package for Social Sciences (IBM SPSS version 20). During the Mid Term Review, data collection, an interactive online dashboard was consecutively running to provide the supervisors and technical team a real time opportunity to visualise the data collected.

Qualitative data from Key Informant Interviews (KII) and FDGs for children with parents or caregivers, young adults and household members was collected through Interview Guides and transcribed. To fully appreciate the impressions, contextual background and for triangulation with quantitative data, a non-numerical Social Science Software was used; NVIVO 12 as follows: The data (transcripts) was imported into NVIVO 12 and categorised into folders based on the classification of the respondent; SOS staff, Community Leaders, Partners that is, Non-Governmental Organisations (NGOs), Community Based Organisations (CBOs) and Government Partners; Ministry of Community Development: Department of Social Welfare, Ministry of Health, Ministry of Education among others.

A coding table was then created in NVIVO 12 with the attributes (codes) which are ideally tags or labels for the identified themes or topics from the transcripts. Coding was subsequently done which involved the desegregation of textual data into segments, examining the data similarities and differences and grouping conceptually similar data in the respective themes. Qualitative data analysis on key thematic areas among others; challenges, recommendations, impressions, impact, sustainability, relevance, efficiency and effectiveness, was then conducted comparing similarities and differences in data by region and category of respondent.

### **2.5.7 Report Writing and Validation of Findings**

On the basis of responses from the FGDs, In-Depth Interviews, secondary data and outputs, a Draft MTR Report was prepared and presented to SOS Zambia, SOS International and Regional Offices for review. The First Draft Report was presented in a Stakeholder Workshop in Malawi at

the end of September 2022. A Final MTR Report with key recommendations was presented in November 2022.

### 2.5.8 Ethical Considerations

Ethical considerations and issues were observed such as informed consent and confidentiality, respondents signing or thumb printing the consent forms prior to participation. Respondents were also assured of their right of withdrawal from participation at any point in the course of the interviews. Considerations were made to respect children's rights during the interviews including confidentiality and conducting interviews with children in the presence of their guardians or parents. See Annex for a sample of the Consent Form.

### 2.5.9 Limitations and Challenges encountered during Data Collection

The following were the most notable challenges encountered during field execution.

- a) **Respondent availability** - There are few cases where earmarked respondents could not be available. This cost the field teams time as they had to reschedule the appointments;
- b) **Readiness of client's regional/field teams** – Some incidences of miss communication between SOS regional programme staff and the consultancy were evidenced particularly in Southern Province Livingstone location. The consultant team lost a complete day as they awaited the client's regional team to organise itself;
- c) **Coincidental Clashing of Programmes** – a few unfortunate incidences happened in target communities that curtailed the actualisation of the field teams' planned engagements. For instance, the Kitwe location team's planned engagements in McKenzie and Chipulukusu communities of Ndola and the Livingstone location team's programme for Kazungula District's Nyawa community coincided with funerals in the said communities. For Ndola the funeral happened to be a care giver, reportedly the fourth care giver to die. The respective teams had rescheduled the appointments. Other than the funerals, the targeted Government respondents in Masaiti District under the Kitwe location could not be accessed on the planned day as the District Education Board Secretary (DEBS) and the Head Teacher of a beneficiary school were both at a week-long workshop in the nearby town of Luanshya. The field team, however, managed with the assistance of FSP Coordinator to make appointments for virtual engagements.

### 3. Main Findings and Analysis

The presentation of the main findings follows the logic of demographic and bio-data first to illustrate the profile of respondents before presentation of main achievements using the Results Framework indicators under i) overall objective (impact level), specific objectives (SO) (at outcomes level) and outputs. Analysis and discussion of the findings follow immediately after the presentation of key findings.

#### 3.1 Demographics and Bio-data

The Review used a 15% sample representation drawn from an agreed sampling frame with FSP. Of the total sample of 1352, 914 were children accounting for 67.6% of the respondents while 200 were care givers who accounted for 17% of the total sample. Young people totalled 208 and constituted 15.4% of the total beneficiaries sampled. Ndola, Chibombo, and Choma districts accounted for over half (57.43%) of the beneficiary child respondents whereas the rest of the five districts shared the 42.57% with Livingstone and Mumbwa districts leading this group. The bio-data generated shows girls at 50.2% representation, and marginally leading boys who were at 49.8% representation.

Disaggregation by age shows that 41% were in the 5-9 years age-group, while 37% of the respondents were in the 10–14-year age group. The two groups collectively account for 78% of the beneficiary children sampled for the survey. The least represented are the under-five (U-5) children aged 0-4 years whose proportion is 8%, much lower even than the 15-19 years which, when combined with young people above this age range accounted for 15.4%. Of the total 228 caregivers 68.4% were females while 31.6% were males. Figure 5 below shows the demographic details

**Figure 5: Children's' Dashboard -Distribution and Characteristics of Respondents**

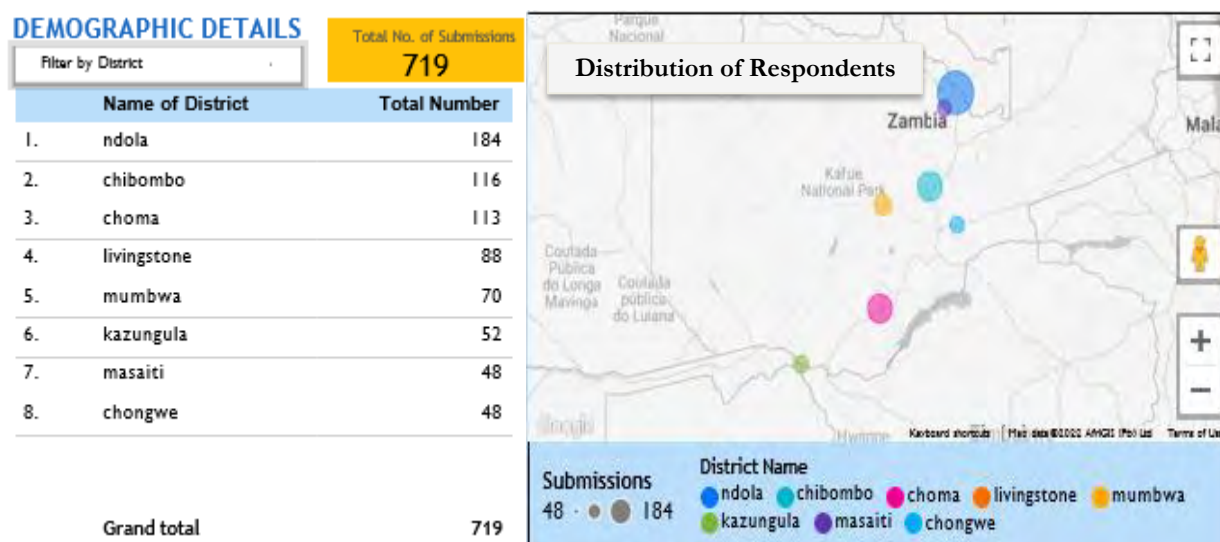
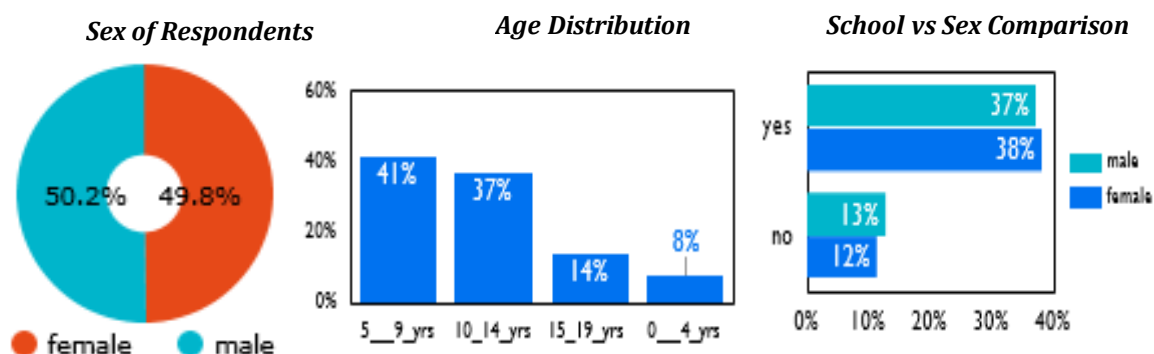


Figure 6 below shows age and sex of respondents. There were more female participants than males in the child beneficiary respondents. Further, the adjacent bar graph highlights the age

ranges of the beneficiaries and it clearly shows the majority of the children are in the age group 5 – 9 years accounting for 41% of the beneficiaries with the under-five being the least represented at 8%.

**Figure 6: Sex and Age of Respondents**



### 3.2 Assessment of Achievement of the Overall Objective (Impact level)

Achievement of results at overall objective (impact) level is assessed against two Results Framework (RF) indicators at impact level: i) National Primary school completion rates; and ii) National Secondary school completion rates. The other parameters like housing, water and sanitation, SRHR, Alternative Care are covered under the four programme outcomes. From the interviews with school authorities it was found that there were marked improvements in learning outcomes in both primary and secondary school completion rates for children supported by FSP in Kitwe, Livingstone and Choma. The school authorities did not avail the statistical evidence to be conclusive on this outcome. The achievements are a combination of many factors which are assessed under Programme Outcomes below.

The contribution of FSP to achievement of the overall objective (impact) has been significantly affected by two factors: i) the outbreak of the COVID-19 pandemic in early 2020 resulted in government lockdowns and restrictions on travel and gatherings, which also led to prolonged school closures; and ii) the “funding freeze” at the end of 2021 which resulted in significant slow-down in programme implementation. The review observes, however, that FSP has been resilient and managed, within its available resources, to continue implementation in various project sites. Going forward achievement of the overall objective and long-term impact will only occur under the following conditions:

- if the existing major constraint of the funding freeze is removed and funding flow resume to allow for continuity in implementation;
- if appropriate adjustments are made to the Programme Work Plan taking into account the more than 12 months lost time; and
- if the funder of FSP consider an extension to the approved programme implementation window
- A full review of the effects of COVID-19 and funding freeze on programme implementation is conducted and the results assessed for possible solutions.

### 3.3 Assessment of Achievement of Results based on Outcomes in the Results Framework

#### 3.3.1 Bio-data of Child Respondents

Field data reveal the respondent child's bio-data encompassing age, sex, and parental status (whether orphaned or not), and civil status with respect to possession of legal identities. The findings reveal that more than half (55% of the respondents) of the children live with both their biological parents while 35% of the respondents are single orphans living only with one parent (the mother). About 4.5% are single orphans living with their fathers. The proportion of double orphans was found to be 5.5%.

#### 3.3.2 Outcome 1 (SO 1): Families provide quality care and protection for vulnerable children.

*Assessment of Outcome 1 (Key Result Area KRA-1) was made against the RF indicators at SO1: i) the number of targeted families phased out upon achieved self-reliance; and ii) number of targeted families who are less vulnerable (compared to baseline / programme entry level).* Overall assessment of results was made against the joint Results Framework which depicts the agreed targets for the respective years of implementation. The first target for 2020 was 128 families whereas the second target was 467 families by 2021 and further targets of 700 and 933 by 2024.

According to the NORAD 2021 Annual Report, FSP reached out to 380 families under Outcome 1 against the terminal milestone of 467 families. This represents a progression rate of 81.4% towards achieving the benchmark. It should be noted however that from September 2021 there were no more enrolments as the target number of 7000 children on the programme was achieved.

#### **Output 1.1: 934 Families have income generating activities**

##### **Cash-Based IGAs**

The findings revealed that 10% of the respondents had received some form of empowerment in form of Income Generating Activities (IGAs) of whom 6% said they had received skills training mainly in IGAs. As a result of economic empowerment with Cash based IGAs, 219 out of an estimated 700 have become self-reliant and have voluntarily been phased out upon providing room for other community members. The number of targeted families who are less vulnerable compared to the baseline values (i.e., at entry level) now stands at 467 out of the total of 933 families. FSP has also achieved results in skills building in positive parenting skills and child rights for caregivers. The FSP has also achieved results in skills building in positive parenting and child rights for caregivers.

The Cash based IGA has eliminated the bureaucracy in procurement and has given more direct responsibility to the beneficiaries on financial decision making. As a result of establishing IGA Clubs there has been a noticeable increase in household incomes to meet basic the needs of children such food, health and school fees. One challenge observed was that some of the Cash

Based beneficiaries were diverting from the agreed plan to start businesses which were not agreed upon.

### ***Financial and Literacy Skills Development***

One area FSP has achieved significant results is in entrepreneurship and financial literacy skills development. A total of 247 members of Village Savings and Loans Associations (VLSAs) (2020) have been empowered with appropriate skills and are able to access capital funds for IGAs and businesses. The VLSA members have also been linked to financial institutions such as ZANACO for them to learn and see the value of saving money with banks. FSP has succeeded in introducing and supporting Village Banks and Rotating and Savings Associations (ROSCAs) especially among the women beneficiaries. More significantly for FSP imparting knowledge and skills in Cash-based IGAs which is a departure from the previous approach where FSP procured the materials and products on behalf of the beneficiaries.

### ***Assessment of General Support received from FSP***

The study revealed that 54% of the respondents received support from FSP whereas those that did not receive any support despite being on the ground accounted for 46% of caregivers. Females were the majority among those that received support, that is, 38% against the 30% males while the latter was leading among those that did not receive support at 16% against females at 15% respectively. On general impact of FSP interventions regarding household income, the majority (55.3%) attested to positive improvement attributed to the programme while 44.7% could not associate any fortunes to FSP. Box 2 below highlights a number of positive life changing stories of how people's lives have been positively changed because of FSP.

FSP should encourage the beneficiaries to form community-based structures (such as group cooperatives) for empowerment activities. FSP should also strengthen its engagement with the private sector to mobilise in kind support from corporate entities in Zambia.

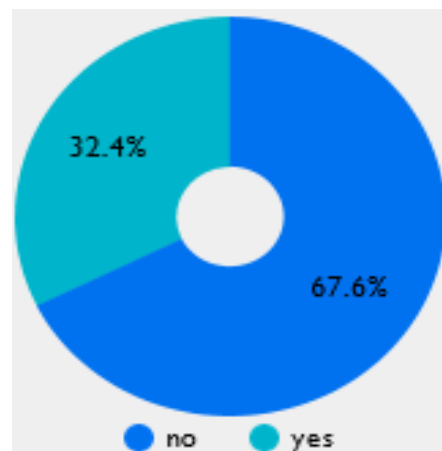
### ***Children receiving support from FSP***

Children respondents were asked if they were aware of or had received support from the FSP. About 6% of the children sampled said they not aware of the FSP while 32% said they had received support from FSP. At the time of the study, about 67% of indicated that they had had not received support in form from FSP. Figure 3 below shows the proportion of child respondents who said they had received or not received support from FSP.

The significant number (32%) of child respondents who say they did not receive support from FSP suggests the need to look at other funding options as not all people in the target areas can be assisted. The Review observes that FSP should take advantage of and leverage the Constituency Development Fund (CDF) which has been increased from ZMW1.7million to ZMW25.6million per Constituency. The CDF and other government empowerment schemes are in essence "low hanging fruits" which FSP leverage for the benefit of its target communities.



**Figure 7: Children receiving Support from FSP**



### **CBO Management**

Capacity building has mainly focused on strengthening the CBOs' management practices, project management, sustainability approaches, and resource mobilisation and utilisation. Skills training is one dimension that was categorically cited by one Community Leader who participated in a key informant interview. He was elated to share with the review field team that: *"with SOS (FSP) we even sent some youths to Mushili training centre to go and do carpentry tailoring and metal fabrication to improve their lives"*.

Only the Kitwe CBOs and partners have received adequate training to enable them respond to the needs of children deprived of parental care in their communities. Capacity building and training activities for other CBOs and partners have been suspended since 2021 due to a funding freeze. The suspension of programme activities has weakened the partnership with CBOs and partners to the extent that some are opting out of FSP with reputation ramifications for SOS Zambia.

One of the planned outputs of FSP is that families have improved nutrition and shelter that is not hazardous to human health. For instance, the village headman of Mungule under Lusaka Location had this to say:

'Before our children were getting wasted in the community but now they have improved for the better. Another thing is that we were taught about how to talk to children who are in need of our help. We also learnt that orphans go through a lot after they lose their parents and need some things for them to develop and grow up. Orphans need to be embraced because they get affected. I even learnt that widows go through a lot in raising their children and as headman I have opened up my door to them so that they can come to me for any help that they need'

*Headman – Mungule, Lusaka Location*

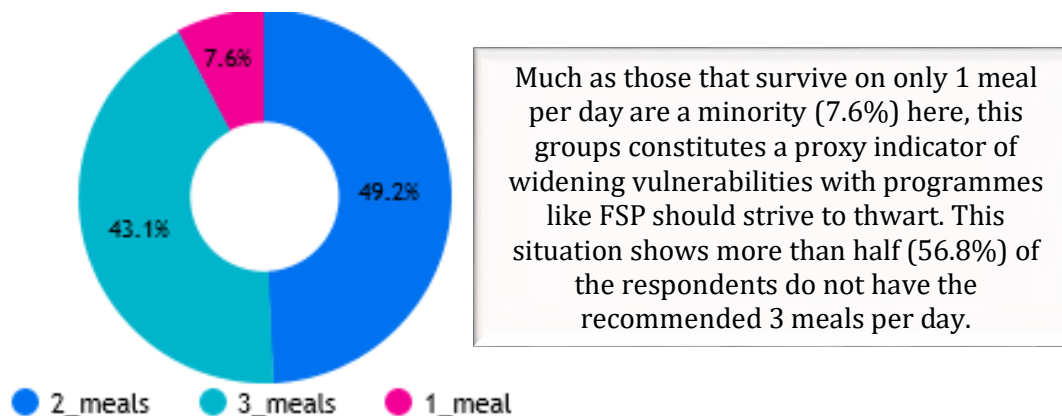
The Review found that due to the funding freeze results under Outcome 1 have been affected. For example, family exits from FSP support have been delayed while the RF targets under this activity are unlikely to be met with some families expected to be pushed into the 2023 funding cycle. The second effect of the funding freeze is that communities have reported low presence of FSP in their communities while many activities have stalled for long periods of time of the order of 12 months. Families supported by the FSP are likely to exit the FSP but for the wrong reasons e.g., lack of continuity in FSP support. Construction works and other activities under Outcome 1 which have been placed on hold due to lack of funding.

The Review observed that the FSP has been operating under very challenging conditions of COVID-19 and a funding freeze since September 2021. The FSP identified and selected nine (9) CBOs and partners using a vulnerability linked eligibility selection criteria which has ensured that the most vulnerable people and children in the target areas were incorporated on the programme. Capacity building has mainly focused on strengthening the CBOs' management practices, project management, sustainability approaches, and resource mobilisation and utilisation. Skills training is one dimension that was categorically cited by one Community Leader who participated in a key informant interview.

### **Output 1.2: number of children with at least 2 nutritious meals per day.**

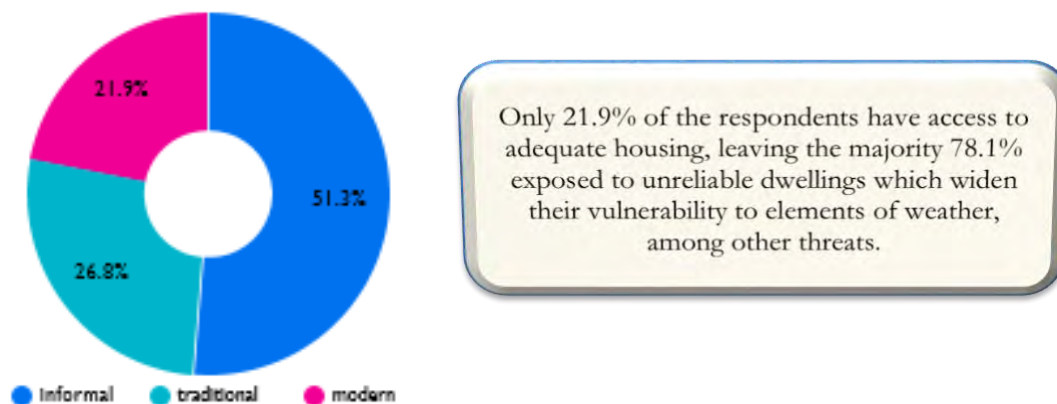
*Assessment of results under Outcome 1* Output 1.2 is against the RF indicator-number of families with income to meet basic needs for their children and young people. Basic needs in this case means shelter, water and sanitation. One of the planned outputs of the FSP is that families have improved nutrition and shelter that is not hazardous to human health. The findings reveal that at least 16% of the total number of children sampled in FSP locations have benefitted through nutrition support. In responding to Output 1.2 of Outcome 1, children were asked how many meals they had per day. The majority (about 49.2%) of the respondents had 2 meals per day while 43.1% had 3 meals per day. About 7.6% reported having only one meal per day. In terms of overall family support, 51% of the respondents reported receiving care from their families while 48% received care from FSP. Only 1% of the respondents reported receiving family support from the government. Figure 8 below visualises the findings.

**Figure 8: Number of Meals per day**



**Output 1.2 of Outcome 1 adequate housing, water and sanitation**

The findings reveal that more than half (51.3%) of the respondent caregivers live in informal housing with a considerable 26.8% in traditional houses. Only 21.9% live in modern housing type. This is the proportion that can be said to have access to adequate housing with less exposure to risks arising from several climate-induced hazards, among others. With increasing urban climate impacts, coupled with negligible or no mainstream public / municipal efforts to climate-proof the built environment, the probability of witnessing increased losses especially among those with informal and traditional housing is high more so that their prospects for attaining adequate resilience is proportionately thwarted by other competing recurrent demands of meeting daily needs.

**Figure 9: Type of Housing in FSP target areas**

There seem to be high potential for structural transformation of dwellings as deduced from some stories of change pointing in this direction. The case of one woman from Mwachisompola appears more appropriate to illustrate this assertion. Sharing her joyous lived experience she explained that: *I did not even have a decent place to live in. I was living in a ramshackle. But with the grant I received from FSP, I secured a plot that had a shop already built on it. I started a small business and used the proceeds to support the construction of a house.* **Lady Mwachisompola – Lusaka Location**

**Output 1.5 of outcome 1 focused on capturing inclusive considerations, particularly on disability.**

The results of the survey showed that of the respondents there were more males with disabilities at 3% than females at 1%. This shows a collective low proportion of people living with disabilities among the beneficiaries. It should be noted that this insignificant representation of people living with disabilities is not reflective of their demographic proportion. It is worth noting the number of boys not in school is marginally higher than that of girls while the latter is consequently marginally highly represented among those in school. Generally, 75% of beneficiary children are in school of which girls account for 38% against boys' 37%.

The assessment further revealed that the project was inclusive as persons with disabilities fully participated in its activities. For instance, in the Kitwe location, 27 caregivers with disabilities (7 males and 20 females) caring for 133 children (66 boys and 67 girls) were identified and enrolled on the programme to be supported in line with their needs assessments. Out of the 2,500 children enrolled in the programme, 14 children had disabilities

Disability inclusion has been a key strategy of the FSP. As established during the key informant interviews with the Zambia Agency for People living with Disabilities (ZAPD) in Ndola, there was still regrettable widespread stigmatisation in communities that has been held accountable for families hiding their disabled children thereby depriving them of opportunities to get assistance. This scenario negates the prioritised interventions as reflected in output 2.1 of outcome 2. The assessment results indicated that community awareness on disability inclusion in the programme areas in the Lusaka location was done during stakeholders' meetings. This resulted in non-discrimination of caregivers and children with disabilities during the family identification process in the communities which led to the recruitment of 20 (9 males and 11 females) beneficiaries, and 20 (12 males and 8 females) children with disabilities on the programme.

It was observed that in the Kitwe location, the programme conducted awareness raising meetings on the rights of persons with disabilities as provided in National Disability Act of 2012, targeting members of the Disability People's Organisations so as to enable them to claim their rights and be the drivers of community advocacy. It was also revealed that the programme also identified and enrolled 27 beneficiaries with disabilities and 14 children with disabilities on the programme for them to start receiving adequate support in terms of assistive devices, capacity building, and other relief support whenever necessary.

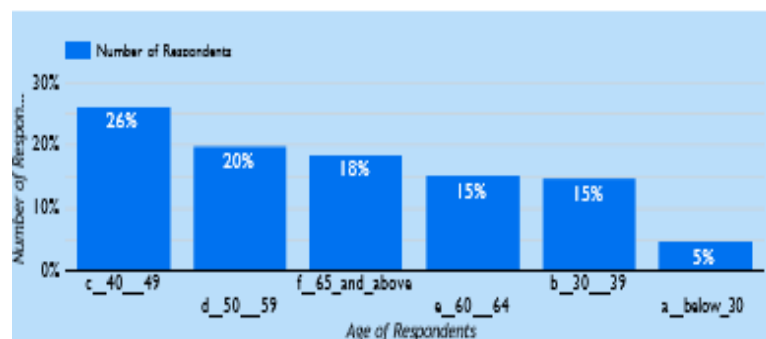
Further, in the Livingstone location, beneficiaries and children with disabilities were allowed to participate in planning meetings and activities such as self-evaluation to identify the gaps and challenges. Beneficiaries participated in workshops and in the provision of resources for family development. Further, the programme identified 30 children that required support and would be enrolled in various special schools.

### ***Output 1.3: 1050 Caregivers' capacities strengthened in positive parenting and children's rights***

The assessment was made against two RF indicators including: *i) number of children who are included or at least consulted in decision-making affecting their own lives; ii) number of families who are affected by domestic violence (incl. against children)*. A total of 228 caregivers participated in the survey of whom 68.4% were females while 31.6% were males.

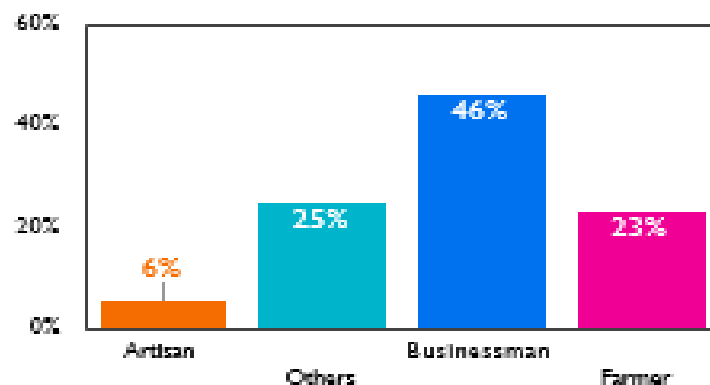
The majority of the caregivers had a family size range of 6 to 10. This constituted 57% of the respondents, second by those with family size of between 1 and 5 at 27% while 17% had family sizes ranging from 10-15. Those having above 15 household members accounted for only 1%. This shows the majority (75%) of the caregivers have above national average family sizes of 5. This is symptomatic of a high dependency ratio that has the potential and actualised capacity of undermining families' coping mechanisms as they strive to provide the needed home support environment that safeguards the child's best interest.

Although 61% of the caregivers reported to be in the economically active age group of up to 64 years, with the majority (26%) in the 20-49 age group, there is a considerable 18% of them outside the economically active age cohort of 65 years and above. This raises fears of declining capacity to generate and sustain wealth amidst increasing family support burdens for the generally large family sizes. This threatens the prospects of addressing the interests of outcome 1, particularly output 1.1.

**Figure 10: Age of Respondent Caregivers**

The majority (81%) of the caregivers are in the economically active age cohort (15-64 years) and only 18 are outside this category. This shows positive opportunities for addressing the dependency ratio if necessary capacity and support is provided to the 81%.

However, the majority (46%) of the caregivers reported to be engaged in various business activities as source of livelihood. Farming is relied upon by 23% of the caregivers as a source of livelihood with 6% surviving on artisanal skilled based ventures. There are 25% of them who earn a living from other sources such as domestic work and other daily paid jobs. *Small business ventures appeared to be the common livelihood option for the majority (46%) of caregivers. This entails the existence of a conducive environment for empowerment interventions if they are to be intensified. FSP could exploit this local ingenuity to expedite the transition from vulnerability to resilience.* Figure 11 below illustrated the common occupations of the Caregivers

**Figure 11: Occupational Status of Caregivers**

During the fieldwork the Review team noticed the high death statistics among the caregivers in Ndola. It was reported that at least four care givers had died within a short space of time. This is an area FSP has to look into in order to sustain the services provided the caregivers.

### 3.3.3 Outcome 2 (SO 2): Children and young people have improved learning outcomes

This assessment of Outcome 2 was made against the RF indicators: *i) percentage of students in supported educational institutions who complete primary education (Norad 1.1); percentage of students in supported educational institutions who complete lower secondary education (Norad 1.1).* FSP has achieved significant results under Outcome 2 *children and young people have improved learning outcomes.* FSP has been providing educational support mainly in form of direct



school sponsorships and textbooks to vulnerable children in its target communities. Educational support has been affected negatively by the funding freeze within SOS Zambia which resulted in suspension of education support in some communities.

With respect to Outcome 2 on improved learning outcomes, the review observed a good representation of FSP supported learners in school. The majority of the (child) respondents (about 75% of those sampled in FSP project areas) said they were attending school. Girls outnumbered the boys at 38% and 37% attending school respectively. Further, under Outcome 2 Output 2.1 the majority (67.6%) of the children reported not receiving any educational support whereas those they acknowledged benefiting from educational support accounted for only 32.4% of those talked to. And for those that did not receive any support males are dominating at 38% while females stood at 30%.

For those that received educational support, males are the minority at 11% whereas females had a higher representation at 21%. With regard to the type of educational support received school fees and other education support was the highest accounting for 78% of interviewed beneficiaries. The second prominent form of support was food at 10% while financial empowerment was low at 6% with other non-food items such as blankets at 5%. About 62% of the children alluded to FSP support for their return to school. Reference is made to figure 3 above.

The Review finds that Outcome 2 Children and young people have improved learning outcomes is likely to be sustainable especially in light of recent policy changes in form of the introduction of free education by the government which is likely to help sustain the textbooks and other support to vulnerable children. Grant-aided institutions, however, are not benefitting from the Free Education Policy and therefore are likely to face challenges of sponsorship of children after the end of FSP funding support.

The recent shifts in government policy to introduce Free Education for All (FEA) will help FSP channel its available resources to the neediest vulnerable children mainly support for learning materials such as textbooks). With the introduction of FEA, some of FSP beneficiaries in public schools are no longer paying school fees while those in Grant-Aided schools continue to rely on FSP for a whole range of educational support.

The findings reveal that in Livingstone children were involve in the preparation of the family development plan and in self-evaluation exercises where their concerns were used as inputs to the 2021 planning cycle. Further, the children were also free to choose their own vocational training programmes. In Lusaka, FSP conducted awareness raising on COVID-19 and distributed hand washing facilities, Personal Protective equipment (PPE) and Information, Education and Communication (IEC) materials in schools in the programme areas, during which the children and young people participated actively in sharing information about COVID -19 prevention. In Kitwe Location mobilization meetings were conducted with children and young people to get their input for the 2021 planning and budgeting, especially in the areas of education, vocational skills training, and Sexual and Reproductive Health and Rights. Children were also encouraged to participate in the Family Development Planning process to enhance their participation in decision-making.

## Outcome 2 Output 2.3 household level sources of water and types of sanitation facilities

The review team extended the interests of Outcome 2 Output 2.3 to also cover the household level regarding sources of water and types of sanitation facilities. In terms of water sources, borehole equipped with a hand pump emerged the most common source reported by 33% of the respondents whereas 27% of them use piped water, 14% use protected wells. There are others that rely on unprotected wells and streams though they are a minority at 4% each while the other 4% get water from other sources. The programme provided a solar propelled water point to cushion the pressure on water demand in one area of Ndola. Shown below in Figure 6 is that said water point.

Under Outcome 2 FSP has achieved results in community awareness raising of community members in the areas of Water Sanitation and Hygiene (WASH), COVID-19 and Girls' Education. Achievements have been made in Ndola, for example, in construction of VIPs and rehabilitation of schools. This was attested to by the Head teacher at Chipulukusu School who praised SOS for coming to the aid of the school in the area of water and sanitation. In his own words, the head teacher emphatically stressed that:

*"Our work with SOS has been good in terms of sanitation and infrastructure development, they sank a borehole for us and this also helps the community around who come to draw some water from it on top of that they built an ablution block for us and this has led to the improvement in school attendance by learners not only they have also provided our learners with text books which has improved their performance in class" Head Teacher – Chipulukusu School, Ndola, Kitwe Location*

In terms of water sources, borehole equipped with a hand pump emerged the most common source reported by 33% of the respondents whereas 27% of them use piped water, 14% use protected wells. Figure 12 below illustrates an elevated water tank supported by FSP.

**Figure 12: Elevated Water Tank constructed with FSP support Ndola**





There are others that rely on unprotected wells and streams though they are a minority at 4% each while the other 4% get water from other sources. The programme provided a solar propelled water point to cushion the pressure on water demand in one area of Ndola. Shown below in figure 5 is that said water point. The team further endeavoured to ascertain the effort in terms of time taken to source water, especially that the burden of fetching water at household, which is a key household hygiene component, rests on the shoulders of women and girls. The majority of the respondents, about 83%) have access to water within 10 minutes walking distance while 4% walk for at least half an hour.

In terms of sanitation, the scenario is reflective of increasing open defecation free (ODF) communities' courtesy of effective campaigns mounted in the past. The findings reveal that about 91% of the households have toilets and only 9% reported not having any form of sanitation. For those that have toilets the majority (58.94%) use traditional pit latrines without a slab while 34.78% have pit latrines with a slab. Only 5.8% of the respondents have water borne (flush) toilets while 0.48% use ventilation improved pit latrines (VIPs). FSP also contributed to improved sanitation by constructing a 20 drop holes capacity ablution block that eased the pressure on public conveniences. Presented below is the information plate for the said ablution block. The team further endeavoured to ascertain the effort in terms of time taken to source water, especially that the burden of fetching water at household, which is a key household hygiene component, rests on the shoulders of women and girls. The majority of the respondents, about 83%) have access to water within 10 minutes walking distance while 4% walk for at least half an hour.

### **3.3.4 Outcome 3 (SO3): Young people have access to Sexual Reproductive Health and Rights (SRHR);**

The assessment of Outcome 3 was made against three (3) RF indicators including: *i) percentage of young people accessing safe and affordable contraceptives; ii) % of young people testing for HIV and other STIs; and iii) % of pregnancies amongst learners in supported primary and secondary schools.* **Achievement of results under Outcome 3** have mainly depended on the partnership with the Ministry of Health (MoH) and District Health Teams (DHT). The key assumption that the MoH/DHT would support and be available to participate in FSP activities has not fully held since their participation depended on FSP funding which has not been forthcoming due to the funding freeze. In addition, government policy restrictions on who directly handles health data and specifically data related to SRHR have influenced the results under Outcome 3 as FSP does not have full access to monitoring data.

The Review found that 6% of the respondents (young girls and boys) had received enhanced knowledge on hygiene and HIV/AIDS. This outcome area also received prime attention as it addresses those aspects that are structurally alienated by the dominant socio-cultural perceptions. Breaking the common cultural barriers entailed sustained advocacy and engagement of young people. Because the outcome area touches on culturally sensitive dimension of reality, FSP navigated this issue through collaboration with government mandate holder ministries and local level partners. Among the notable ministries in this regard are Community Development and Social Services, and Ministry of Health based on their technical capacity. This criterion was pinpointed by FSP programme staff that:

***Ministry of Health at district level has been assisting greatly with the sexual reproductive health activities in various Communities due to technical capacity***

Alongside Ministry of Health which has been providing primary and secondary health care services, local partners have been handy in supporting this outcome area. For instance, the Kitwe location cited Tweshe in Masaiti and the Samaritan Strategy in Ndola as having been actively involved. Similar scenario of strengthened local partnerships was also witnessed under the Livingstone location, particularly in Choma's Mwapona area where as demonstrated by the below testimony confirming that:

We work together to help vulnerable communities in Mwapona by providing families with trainings on financial literacy, educate young children on SRH rights and also in provision of finances to some vulnerable families to kick start their way to financial freedom such that they are able to feed, clothe and take care of their children.

*SWAZ. Mwapona - Choma*

Further, the partners themselves expressed satisfaction with the capacity built in them in facilitating essential youth engagement processes in aspects to do with SRH and GBV. The key informant under SWAZ in Choma made specific reference to how FSP helped them in areas such as.....:

*'...understanding how to conduct awareness and trainings on health, SRH, child protection and generally how to keep our children in the right way'.*

*Families' livelihoods have improved especially after the financial assistance. Increased awareness on SRH, financial literacy and child protection. More children in schools, less absenteeism. Notable*

There are also other interventions that are not SRH specific but whose multiplier effects add value to SRH efforts. Some of these can only be deduced from some reported success stories.

Under Outcome 3 FSP activities are mainly driven by the MoH and District Health Management Teams (DHMTs) a factor which to a great extent affects achievement of results due reliance of on the Ministry of Health (MoH) to provide access to Sexual and Reproductive Health (SRH) information in FSP target areas. It is difficult by FSP to access to MoH's monitoring data and generalizing this data for FSP monitoring purposes. Good progress has been made however as

reflected in the 2021 FSP Annual Report which revealed that a total of 2193 (1207 females and 923 males) young people were supported with SRHR, against the target of 1,540. In Kitwe, mobilization meetings were held with 510 young people from the 5 target communities and got their input in relation to SRHR and life skills, which was considered in the 2021 programme plan.

FSP has ensured that young people in its target areas have increased knowledge on Sexual and Reproductive Health and Rights (SRHR) and that they were protected from harmful traditional practices, including child marriages. This has been done through awareness raising by collaborating with the Ministry of Health (MOH) who provide access to SRH services to young beneficiaries. Young people are more aware of the dangers of teenage pregnancies and have the knowledge of health, social and economic effects of teenage pregnancies and the value of contraceptive methods. They are now able to make informed decisions about their sexual behaviour.

FSP has also focused on identification of partners who provide SRH services to adolescents and getting input from key stakeholders. In this regard, FSP achieved its objective as it supported quarterly meetings for the District Technical Working Groups on SRHR led by the MOH. SRH referral systems have been strengthened and young people are being referred to DHMT centres. SRH services are accessible to young people and are provided at no cost.

In the area of child marriages FSP is collaborating with the Ministry of Chiefs and Traditional Affairs (MOCTA), now a Department under the Ministry of Local Government and Rural Development (MLGRD), to engage the Chiefs on the need to work towards ending child marriages in their chiefdoms. FSP has made good progress in the area of child marriages by engaging with 3 chiefs on the issue of harmful practices that affect children, especially girls and finding solutions. The 2020 NORAD Annual Progress Report highlight how FSP has engaged the Ministry of Chiefs and Traditional Affairs and Chiefs on the need to work towards ending child marriages in their chiefdoms. For instance, in Livingstone, the programme worked to strengthened community structures to protect children from harmful traditional practices, child marriages and early Pregnancies.

The overall FSP strategy is working with traditional leaders to significantly reduce the number of child marriages in FSP target areas. Traditional leaders are supported to set informal rules and impose penalties and sanctions perpetrators of the harmful practices. The main challenge FSP is facing regarding child marriages are the negative dominant social norms about gender and power relations that shape attitudes of girls and boys, traditional leaders, parents and community members.

### **3.3.5 Outcome 4 (SO4): Government prioritises the enforcement of the UN Guidelines for the Alternative Care of Children**

Assessment of Outcome 4 was made against RF indicator *percentage increase in resource allocation to social protection of vulnerable families at national and local level*. Average national budget contribution since the start of FSP has been 1.4%. Resource allocation to social protection by the government has increased, however. For example, in the 2022 budget, social protection has received an allocation of K6.3 billion, representing 3.6% of the National Budget.

Below are the specific findings of the Review based on Outcome 4 and its outputs which should not only be looked at with the lens of the UN Guidelines on Alternative Care for Children but also the UN Convention on the Rights of the Child (UNCRC).<sup>12</sup>

The review found that FSP is generally adhering to and mainstreaming the UNCRC in all its programme work. FSP applies and is a strong advocate of Article 13 of the UNCRC which states that: *Parties shall respect the right of the child who is separated from one or both parents to maintain personal relations and direct contact with both parents on a regular basis, except if it is contrary to the child's best interests.* The analysis of findings below takes into account the provisions of both the UN Guidelines for the Alternative Care of Children and the UNCRC.

***Output 4.1: Government to strengthen parents' ability to care for their children in line with the UN resolution on children without parental care***

During the period under review, the programme contributed to SDG number 1, which calls for an end to poverty in all forms. The programme supported families and communities in building their capacity and resilience to help break the cycle of poverty and exclusion and to prevent family breakdown and separation. In collaboration with partners, the programme strengthened and empowered families through a range of activities, including skills building and income generation, access to healthcare (Sexual and Reproductive Health services). The programme also focused on SDG 2, which calls for an end to hunger, achieve food security, improved nutrition and promotion of sustainable agriculture, by sensitising caregivers in the target communities on nutrition and proper food preparation.

***Output 4.2: Local community structures advocate for the implementation of UN resolution on children without parental care by government***

FSP aligns well with the United Nations Convention on the Rights of the Child (UNCRC) and encourages governments and partners to implement its principles and works to ensure that every child is granted the right to grow up in a supportive, positive and loving environment. Others are the Protocol to the African Charter on Human and People's Rights on the Rights of Persons with Disabilities in Africa; the Protocol to the African Charter on Human and Rights of women in Africa; and the SADC Protocol on Gender and Development.

***Output 4.3: SOS advocates for the right of 4200 (1500 Kitwe) children and young people to be legally registered (birth certificate or equivalent).***

Registration of Birth and facilitation for children to obtain Birth Certificates is one of FSP's main programme activities and planned output. Good quality results have achieved in terms of registration of births and possession of legal identification cards. The majority of the respondents (60.4%) reported to have national identities such as birth records, birth certificates and green

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<sup>12</sup> UNCRC is legally-binding international agreement setting out the civil, political, economic, social and cultural rights of every child, regardless of their race, religion or abilities.

national registration cards. This good record is also attributed to FSP collaboration with the department of National Registration in the Ministry of Home Affairs and Internal Security.

The findings reveal that about 31.6% of the boys (respondents in the survey) and 28.8% of the girls had national identities. Further, 23.6% of the interviewed (sampled) children claimed not to know anything about legal identities with girls being the majority. About 15.3% of those without national identities (IDs) had an idea about what the IDs were all about. The line graph in figure 5 below indicates the scenario.

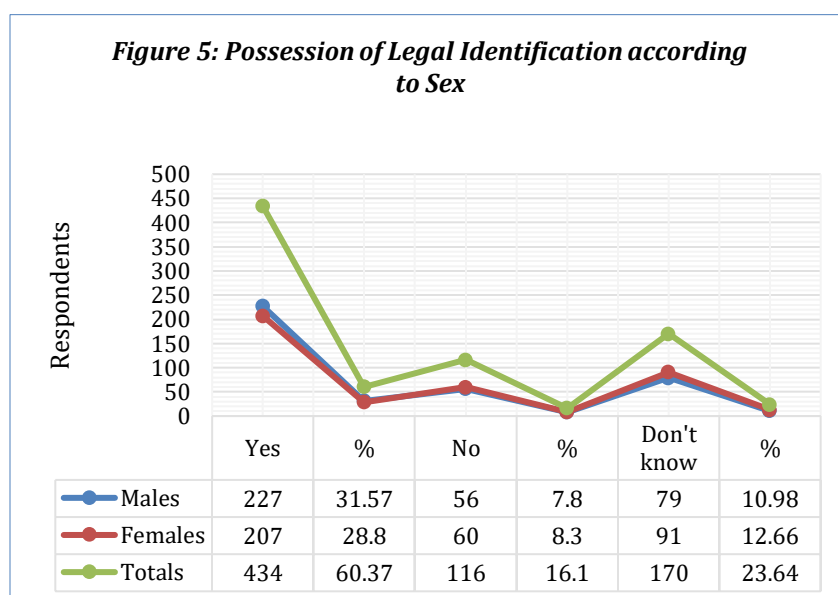
The Review finds that FSP is collaborating with the National Registration Passport and Citizens Office (NRPCO) to support beneficiary children in the target communities to acquire legal birth registration, and therefore, contributing to SDG target 16.9 which focuses on the provision of identity for all, including birth registration by 2030.

***Output 4.4: SOS Zambia actively promotes the implementation of UN guidelines for the Alternative Care of Children.***

FSP has been effective as reflected in the good quality outputs and outcomes and as reflected in its policy influencing actions which has resulted in the Child Code Act. Implementation started off to a good start with Year 1 recording many successes.

The impact under Outcome 4: Government prioritises the enforcement of the UN Guidelines for the Alternative Care of Children is reflected in FSP's successes in reducing Alternative Care (the number of children kept in the SOS Children's Villages). In Lusaka Region it was reported that 100 families participating in FSP have reached self-sufficiency and reliance to be weaned from FSP which would give room to other families to join the programme.

**Figure 13: Possession of Legal Identification**



The graph shows females have less access to legal identity documentation than males. They further have less access to information about the legal identification.

However, a good proportion (60.37%) of the respondents had legal identification

The programme worked with Government to strengthen parents' ability to care for their children in line with the UN resolution on children without parental care and ensured that children and



young people are legally registered. The assessment revealed that the programme supported Community Based Partners (CBPs) to develop Advocacy Plans. For instance, a total number of 60 members, which included CBO leaders, traditional leaders, and other stakeholders, had increased knowledge on how to prepare Advocacy Plans. Further, 12 local community structures against a target of 9, which included Child Protection Committees (CPCs), Area Development Committees (ADCs) based at community level and supported by the CBPs developed Advocacy Plans.

As a result of these interventions, implementation of Advocacy Plans has contributed to community structures' involvement in influencing government to fulfil its obligation in the implementation of the UN Guidelines on Alternative Care for Children. The project worked with Ministry of Home Affairs (MOHA) through the Department of National Registration and Passports and Citizenship (DNRPC), and supported 964 (488 males and 476 females) to get Birth Registration Certificates in 2020. The children now have permanent legal identities and assured of easy access to social protection services. As a legal identity the Birth Certificate has the added advantage that FSP beneficiaries are able to access government services such as the Social Cash Transfers (SCTs).

Good quality results have been achieved under *Outcome 4: advocating governments to implement the UN Guidelines for Alternative Care*. The FSP working jointly with others such as the Joining Forces Alliance (JFA) and other FSP partners such as Save the Children, Plan International and Child Fund. Collaborative work facilitated the domestication of UN Guidelines on Alternative Care in Zambia and other major conventions and protocols on childcare and protection.

At location and community levels significant achievements have been made in translating the UN Guidelines on Childcare and Protection in local languages. Community teams have been adequately capacitated with knowledge on the UN Guidelines which has enabled them to disseminate widely in their localities. They have been involved in awareness raising of the tenets of the Guidelines and have established child protection community structures.

As with other Outcomes, achievement of Outcome 4 has been negatively affected by the funding freeze. For example, plans to establish fully functioning *community hubs for strengthening social support systems*, have been affected by the funding stoppage. Community hubs largely depend on prevalence of strong social support systems and partnerships as well as a strong capacity building programme for care givers, duty bearers such as Chiefs and other Traditional Leaders, change agents, CBOs and FBOs.

### **3.3.6 Significant Life Changing Stories**

The field study used the significant life changing stories (SLCS) technique to obtain human interest testimonials of how FSP had transformed the lives of final beneficiaries. The results under Outcome 1 are demonstrated in life changing stories related to empowerment that were narrated during the primary data collection phase. A woman respondent in Chombela community Chibombo District in Lusaka Region narrated how FSP intervention had transformed her life and that of her household. In her own narrative she emphatically eulogised the programme like:

*'Before I was put FSP I could barely afford to pay for my children's school requirements nor afford three meals a day. However, after I was given a grant by FSP I invested in poultry farming and also managed to build myself a decent house where we live in.'* Woman Respondent -Chombela

This testimony attributed to FSP demonstrates how these interventions are changing lives. It shows the direct implications of programme interventions on building local economic resilience and helping those assisted to gradually graduate from acute vulnerability. It is evident that this woman is on the road to sustainability through her chosen microeconomic venture of poultry which help grow her investment to cater more of her family needs.

This woman's story is not an isolated incidence since similar stories were gathered in other communities and districts where FSP has a presence. For instance, a very touching story was obtained from a woman in Masaiti Ndola District who, before FSP intervention, relied on risky behaviour for survival. The woman codenamed here as Lady Masaiti used to operate as prostitute, a highly stigmatised negative coping mechanism that she used to support her children. As her life transformed those close to her could not help but marvel at how fortunes were unfolding in her life right before their eyes. The testimony of Lady Masaiti is both moving and relieving for those close to her case as concisely narrated by the area CBO represented who said:

*"This situation used to sadden her because men would come to get her from her home in full view of her children, one of whom is a female child. She used to get worried that her child would end up getting into the same business. She is very now happy because the project enabled her to buy a refrigerator which has enabled her to start a sausage selling business because she now has a storage facility which helps her keep her stock fresh. She is now able to buy sausages in bulk and store them in the fridge. Most of the people in her community buy the sausages from her. She has since stopped that dehumanising lifestyle and has regained her dignity"* Lady Masaiti

### **Box 2: Significant Life Changing Stories**

In Chombela, a woman highlighted on how her household could barely make it through the day before FSP. She explained how difficult it was for her to even afford to pay for her children's school requirements later on have three meals in a day. After she received financial support, she invested in poultry farming and also managed to build herself a descent house to live in.

Another widow in Mwachisompola narrated that she didn't even have a decent place to live in, she was living in a ramshackle. **FSP** grant she was given enabled her to secure a plot that had a shop already built on it. She decided to use the rest of the money from the grant to build a house and she was able to start a small business.

A CBO leader in Nangoma mentioned that before FSP intervention, their Area Women's Association that comprises of women who are mostly taking care of orphaned children and those at risk of separation, was lacking in terms of training in coming up with income generating activities, but after the intervention, their group has received training in different empowerment areas such as savings group training and the association has also ventured in to a vegetable gardening project whose produce is being sold to the community members.

A women's life in Masaiti changed for the better because of FSP. Hers is a very touching story, she used to be a prostitute because she had no other means of getting an income to enable her take care of her children. This situation used to sadden her because men would come to get her from her home in full view of her children, one of whom is a female child. She used to get worried that her child would end up getting into the same business. She is very now happy because the project enabled her to buy a refrigerator which has enabled her to start a sausage selling business because she now has a storage facility which helps her keep her stock fresh. She is now able to buy sausages in bulk, store them in the fridge and supply to the whole community.



### **3.4 Analysis of Main Findings based on DAC<sup>13</sup> Criteria**

#### **3.4.1 Relevance**

The review found that FSP remains highly relevant to the needs and rights of children, their parents and carers in its target areas. Through its programme work, FSP is responding to the problems identified at the design phase such as low household incomes, high prevalence of child marriages, high teenage pregnancies, high prevalence of child rights violations, harmful traditional practices, high levels of youth unemployment, gender inequalities, poor living conditions, poor access to clean water and sanitation, and weak local social support systems. Due to the effects of Covid-19 the problems identified at FSP's design stage may have been aggravated and changed in dimensions and effect on the target groups and beneficiaries, which required further assessment by FSP.

Prior to the start of FSP, a number of studies such as FSP Framework-I Evaluation Study, Stakeholder Analysis and Capacity Needs Assessment were also conducted which not only revealed the required key areas of focus of FSP but also revealed the existing capacity gaps and needs for FSP implementation. The recommendations of the studies, particularly the 2019 Evaluation Study, and other studies guided the selection of eventual FSP implementing partners affiliates and associates.

Most notable actions from FSP's Evaluation recommendations were the designation of the Ministry of Community Development (MoCD) and its devolved structures. Further a key action based on FSP's Evaluation study recommendations was the adoption of existing or established CBOs who already had influence and a strong presence in FSP's target areas, and the adoption of duty bears like traditional leaders as key partners to drive FSP implementation process (e.g. in Outcome 3). FSP has signed MOUs with nine (9) CBO who met the eligibility criteria for inclusion on the programme intervention.

In the initial phases, FSP partners demonstrated commitment to the programme's aims and objectives. The prolonged funding freeze has, however, from September 2021 affected commitment and morale as implementation and funding of community activities have stalled in some project areas. The Review observed that no CBO partner had fallen off or opted out of their Agreements (MOUs) with FSP due to the funding problems. The expectations of community-based partners and final beneficiaries have been affected due to a stall in implementation of FSP. Some partners and beneficiaries without information on the suspension of activities may likely fall off completely or join other organisations in FSP target areas.

#### **3.4.2 Monitoring, Evaluation, Adaptation and Learning**

As currently designed FSP has an adequate internal monitoring system to enable the collection, processing and analysis of data and information for management and programme work. A web-based programme database (PDB) has been developed and is used in all FSP monitoring and

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<sup>13</sup> OECD Development Assistance Committee (DAC) has developed standardized evaluation criteria for use for impact assessment in the development sector

evaluation work. The PDB draws its data from the programme Results Framework (RF) although the review observes that the PDB and RF are not fully aligned yet.

For example, of the 4 Outcomes outlined in the RF, only two are covered in the PDB: Outcome 1 and 2, while the results chain and indicators for Outcome 3 – SRHR, and Outcome 4 UN Guidelines on Alternative Care are entirely omitted in the PDB. Hence FSP has developed separate tools to collect data for Outcome 3 – SRHR and Outcome 4: UN Guidelines on Alternative Care. Data for Outcome 3 is mainly derived from the Ministry of Health and the District Health Management Teams and is stored, processed and analysed separately. Monitoring data on implementation of the UN Guidelines on Alternative Care and Child Protection are also collected, processed and analysed outside of the PDB.

FSP has a functioning Monitoring and Evaluation (M&E) system that is anchored on an agreed Results Framework (RF) and that is used in programme work. The vertical intervention logic is clearly defined with clear linkages and consistency in the hierarchy of planned outputs, outcomes and impact. The horizontal intervention logic is also clear with a discernible results chain with clearly defined overall objective (impact), specific objectives (outcome) and planned outputs indicators, baseline and target values and means of verification. The RF indicators and targets broadly meet the SMART criteria (i.e., they are Specific, Measurable, Achievable, Realistic and Time-bound). The key measurement indicators are gender disaggregated and inclusive.

Monitoring visits are regularly conducted by FS Manager, Regional Programme Managers (RPMs) (also the location supervisors) and FS Coordinators. Major studies such as baseline surveys, feasibility studies and Needs Assessments are conducted jointly by the National Office, the RPMs and FS Coordinators. Finance and Accounts, Gender and Advocacy and Child Protection Officers also conduct monitoring visits to ensure accountability and good financial management as well as adherence to the Gender, Advocacy and Child Protection Policies of SOS Zambia. The M&E adviser for SOS Zambia supports all M&E activities of FSP and plays important facilitatory and coordination roles in the internal monitoring system.

The frequency of data collection is appropriate and is done at 2 levels: first, data on FS activities is collected by social workers and community mobilisers on a daily basis at location level. The SOS staff and partners have been trained in digital and mobile data collection to enable real time data entry in the Central Database – the Programme Database (PDB). Data collected at location level is mainly related to households, caregivers and child beneficiaries; secondly at national level monitoring data is collected, captured and updated bi-annually. Data on other programmes are collected and updated on a monthly basis. Once collected and captured consolidated monitoring reports are prepared by the M&E Adviser who passes them on to the Head of Programmes (HOP) for quality assurance before final submission to the National Director and onward to the Board of SOS Zambia.

The review has noted a number of challenges related to reporting and data quality. In terms of reporting, field visits have largely been affected by the funding stoppage as staff are unable to reach certain remote locations to collect data and information on FSP progress. Major delays in FSP implementation are thus expected in some target areas. In terms of data quality, data collection, processing and capture has transitioned from manual paper-based entries to data

entry (using Excel Sheets) to the current Programme Database (PDB) - a web-based database designed to operate in real time.

Overall, the data quality does not adequately meet the SMART Criteria (Simple, Measurable, Accurate, Reliable and Timeliness). Datasets collected for example on education indicators tend to be inconsistent and patchy from location to location which affects quality and reliability of data on the PDB. Good quality data is needed to prepare good quality reports that ultimately end up with the International/Regional Office, the Programme Supporting Association (PSA) and the funder-NORAD. Another challenge faced at National Office is the amount of time spent on cleaning up the data and making follow ups with staff at the location levels. The major issues and challenges related to the internal monitoring system observed are:

- a) the absence of dedicated M&E staff a location level. The Social Worker and/or Community Mobiliser act as the de factor M&E focal persons even without proper M&E qualifications. Data collection and entry using Social Workers and community mobilisers is time consuming. For example, a single data collector has to deal with 60-80 families in data collection cycle and this is in addition to their other functions on the FS;
- b) There are information gaps related to family development planning activities especially when the beneficiaries are supposed to be weaned from the programme. The quality of incoming data often forces the national level staff to conduct data cleaning every quarter;
- c) Owing to the foregoing, data availability appeared problematic at all levels as urgently needed programme field level information could not be availed timely as each level initially made reference to another believed to be in custody of such information. This is not good for effective evidence-based decision making and proactive programming. The National Office, notwithstanding, has what it takes to rectify this data management gap by harnessing its vertical and lateral structures to effectively bridged the noted gaps.

The above issue was also corroborated by government key informants who observed serious information gaps that left them in limbo. The department of Social Welfare in Ndola vividly put it this way: *Inadequate feedback, once they are done with the report, they do not share the findings. Develop a well-tailored reporting system to bring out key issues. Build capacity of community and district structures that give feedback.*

### **3.4.3 Efficiency of Implementation**

The funding modality of FSP is aligned to the traditional funding model used by SOS Children's Village International (SCVI) for its member associations. The latter are affiliated to the Federation of SOS International which has delegated the responsibility of fund raising to the Promoting Support Associations (PSAs). Located in different countries, the PSAs are geographically and strategically poised to raise funds for programme work with the National Associations. In the case of SOS Zambia and FSP, the PSAs are SOS Norway and SOS UK who raise funds from NORAD and the Foreign Commonwealth and Development Office (FCDO-formerly DFID) respectively. The funding has to go through the International Office (IO) and Regional office for East and Southern Africa (ESAF) located in Addis Ababa. The IOR sub-grants, monthly, to the National Association based on their programme needs. Overall, this funding modality upholds the principle of subsidiarity in which the IOR and National Associations are given much leeway to manage the resources from the PSAs.

Programme funding is made available to SOS Zambia and FSP through a five-year partnership agreement signed in 2020 between SOS Norway (the PSA for SOS Zambia) and the Norwegian Agency for Development Cooperation (NORAD). Programme funding is through a two-country partnership between Malawi and Zambia with an Annual Budget of 19,450,000 NOK. The programme implementation window is from January 2020 to December 2024. The funding agreement as a part of a global partnership agreement between SOS Norway, the General Secretariat of SOS Children's Villages International (GSC) and SOS Children's Villages in Malawi and Zambia a continuation of support for the SOS Family Strengthening Programmes (FSP) since 2009.

Efficiencies have been achieved through FSP's choice of implementing partners and appropriate implementing mechanisms in form of partnerships with pre-existing CBOs, Faith Based Organisations (FBOs) and change agents as the main community based entry mechanisms; the partnerships with Government institutions such as the Ministry of Community Development on improving Quality of Life (QoL) and building capacity for community, family and household self-reliance; the partnership with the Ministry of Health and District Health Teams on Sexual Reproductive Health and Rights including interventions in early childhood marriages, teenage pregnancies, family planning, and Water Sanitation and Hygiene (WASH) , and the partnerships with a number of Civil Society Organisations on domestication of the UN Guidelines on Alternative Care.

The downside of the implementing partnerships is that FSP committed in some cases through various Agreements and MOUs to fund a number of activities under each partnership but which has not been done for almost one year due to funding constraints. The effect on the partners of the suspension of agreed activities due to the funding gap may in the short term not be directly discernible to FSP but in the long term such as in future partnership building initiatives may be enormous as they may affect the organisational reputation and standing of SOS Zambia.

Since its start in January 2020, FSP has operated under very challenging circumstances of the outbreak of COVID-19 and later in the third quarter of 2021 a funding freeze of NORAD funds. Both events have had significant effect on both efficiency of programme implementation. The current NORAD Framework has been a "burdened framework" in the sense that it has been implemented in a period of major challenges some external to SOS Zambia's operational capabilities.

During the entire period under review (Jan 2020 to June 2022) FSP has experienced multiple delays caused by the debilitating effects of the COVID-19 global pandemic which resulted in the Government lockdown which placed restrictions on travel, large meetings and gathering and other stringent public health measures such as hand washing, social distancing and the wearing of face masks at all times. The FS responded well to the COVID-19 effect first and most important by reallocating 12% or K2, 539,945.92 of the 2020 Country Budget to the COVID-19 response. Some measures taken included provision of emergency social assistance to vulnerable families in the programme locations; procurement of personal protective equipment (PPEs) for programme participants and schools and awareness raising on the effects of COVID-19 to improve the beneficiary's knowledge of the pandemic.

A second major challenge of FSP implementation has been the funding freeze by the PSAs which started in September 2021 and remained in force up to December 2022 since the freeze is earmarked to be lifted for the year 2023. This has translated in stoppage of a number of FSP activities. At programme level, staff morale for those directly working on FSP particularly in FSP locations, has been severely affected by the lack of funding to implement activities. At location and community levels, the effects of the funding freeze are enormous with demotivated partners some of who have moved on or plan to join other organisations. The direct beneficiaries' expectations of joining FSP have been dashed with a significant period of lack of support from FSP.

The desk review found out that regular monitoring of programme activities was conducted at location level to mitigate the possibility of fraud and detecting corruption at programme level. Further, regular follow-ups on the implementation of activities against budget utilization was done to avoid under and over expenditures. In addition, financial management systems were strengthened by adhering to internal control systems. The provision of funds for cash IGAs to the beneficiaries was done directly through bank transfer into the beneficiaries' bank accounts. As a result of these measures, the risk of fraud and corruption was mitigated.

FSP has faced challenges in Livingstone location, which has resulted changes and budgetary variations. For example, the programme intervention was faced with the COVID-19 breakout and as such, budgetary variations were made to planned funds that were meant for sub grant Community Based Partners. Funds were used to purchase food relief for 245 families who were most affected and they could not undertake viable income related activities. The evaluation further revealed that the programme also varied funds meant for payment of school fees to purchase reading aids for affected children.

#### **3.4.4 Effectiveness**

Overall, FSP has been effective as reflected in the good quality outputs and outcomes and as reflected in its policy influencing actions which has resulted in the Child Code Act. Implementation started off to a good start with Year 1 recording many successes. A total of 1388 families were enrolled on FSP in 2020 alone.

Implementation was soon affected by the outbreak of the COVID-19 pandemic and from September 2021 the funding freeze which has resulted in a drastic scaling down of FSP activities except for those affecting young people on Vocational training for which spending has been approved during the funding freeze. The latter has had significant effect on FSP activities in the localities. First the morale of SOS Zambia staff and FSP community mobilisers in particular who are on part time has been negatively affected due to the suspension of FSP activities.

Community based organisations partnering with FSP have also felt the effects of the funding freeze due to suspension of the agreed activities including capacity building and training and funding for activities. Some of the CBOs and partners are planning to or have moved on to greener pastures. The break in funding has also affected the expectations of end users and final beneficiaries of FSP activities and as with the partners and CBOs some beneficiaries are abandoning FSP joining other NGOs in the target areas.

The introduction of new Government policy measures of provision universal free primary education has had a positive effect of ensuring that all vulnerable children in FSP's target areas have access to free education. This has been pivotal in ensuring that learning outcomes are sustained for a long time to come in public schools. Beneficiary learners in Grant-aided schools have continued to rely on FSP support and therefore have been directly affected by the stoppage in funding and may eventually drop out of school.

### **3.4.5 Impact**

At this stage of FSP implementation only potential impact can be derived from achievement of results across the four (4) outcome areas. There is good potential that by the end of the programme (Framework) in 2024, FSP will have significant and measurable impact in improving the quality of life (QoL) of the 1130 target beneficiaries. Achievements made so far in the areas of institutional building (capacity building of CBOs, partners and volunteers, entrepreneurship and financial literacy skills and facilitation of linkages to financial institutions and promoting cash based IGAs which have worked very well will ensure that the benefits of increased household incomes will be passed on vulnerable children). It is gratifying to note that the funding freeze will come to end by December 2022 and come 2023 financial flows will normalise, paving way for rekindled implementation of stalled programme activities.

FSP has adjusted well to the new Free Education for All (FEA) government policy and is ensuring greater impact is achieved in the long term by continuing to support the children but focusing more on provision of learning materials, rehabilitation of school infrastructure and construction of water and sanitation facilities which benefit a wide range of children and not only FSP supported children. The learning materials particularly textbooks are donated to the schools as a whole for use by other pupils who are disadvantaged and do not have access to the learning resources.

### **3.4.6 Sustainability**

The review notes the following key programme areas of success and achievements that will likely result in FSP benefits and services lasting for a long time to come. At the formative (design) phase of FSP, full responsibility was given to the Ministry of Community Development (MoCD) to assist in the identification, selection, on boarding and orientation of community-based organisations (CBOs) and implementation partners at the local level.

Unlike other interventions such as empowerment which result in self-sufficiency of beneficiaries, social-cultural factors related to early marriages and teenage pregnancies require a long-drawn out strategy and interventions to shift the mind-sets, attitudes, perceptions, negative stereotypes and behaviours of community members, families and traditional authorities to eliminate these harmful practices to children

The government has passed the Child Code Act but to avoid the Act to end up as one of those policy and legislative documents that are gathering dust on decision makers shelves, follow up advocacy actions are required to ensure the new legislation is implemented for the benefit of children. Appropriate measures should be taken to restore the funding flows to the CBOs and



partners to boost their confidence in and buy in of FSP interventions and to continue with capacity building and implementation as agreed in the MOUs and ensure sustainability of programme benefits and services.

Using its community-based structures such the Community Welfare Assistance Committees (CWAC) the MoCD has also been involved in monitoring of CBO activities. The involvement of the MoCD in this way is promoting ownership and hence increasing the likelihood that FSP benefits and services will be sustained for a long time to come since a Government institution has been involved from commencement of FSP.

Activities is likely to increase the chances of that FSP benefits and services will last beyond the programme's life (end of 2024); A key assumption was made, however, that FSP would build or further develop capacity of the CBOs and implementing partners. This has not happened for a number of partners due to a halt in funding from September 2021. This has serious consequences for continuity of programme activities, keeping the trust of partners as well as contractual (MOUs/Agreements) obligations of FSP to the CBOs and partners and may lead to some CBOs and partners moving to seek greener pastures.

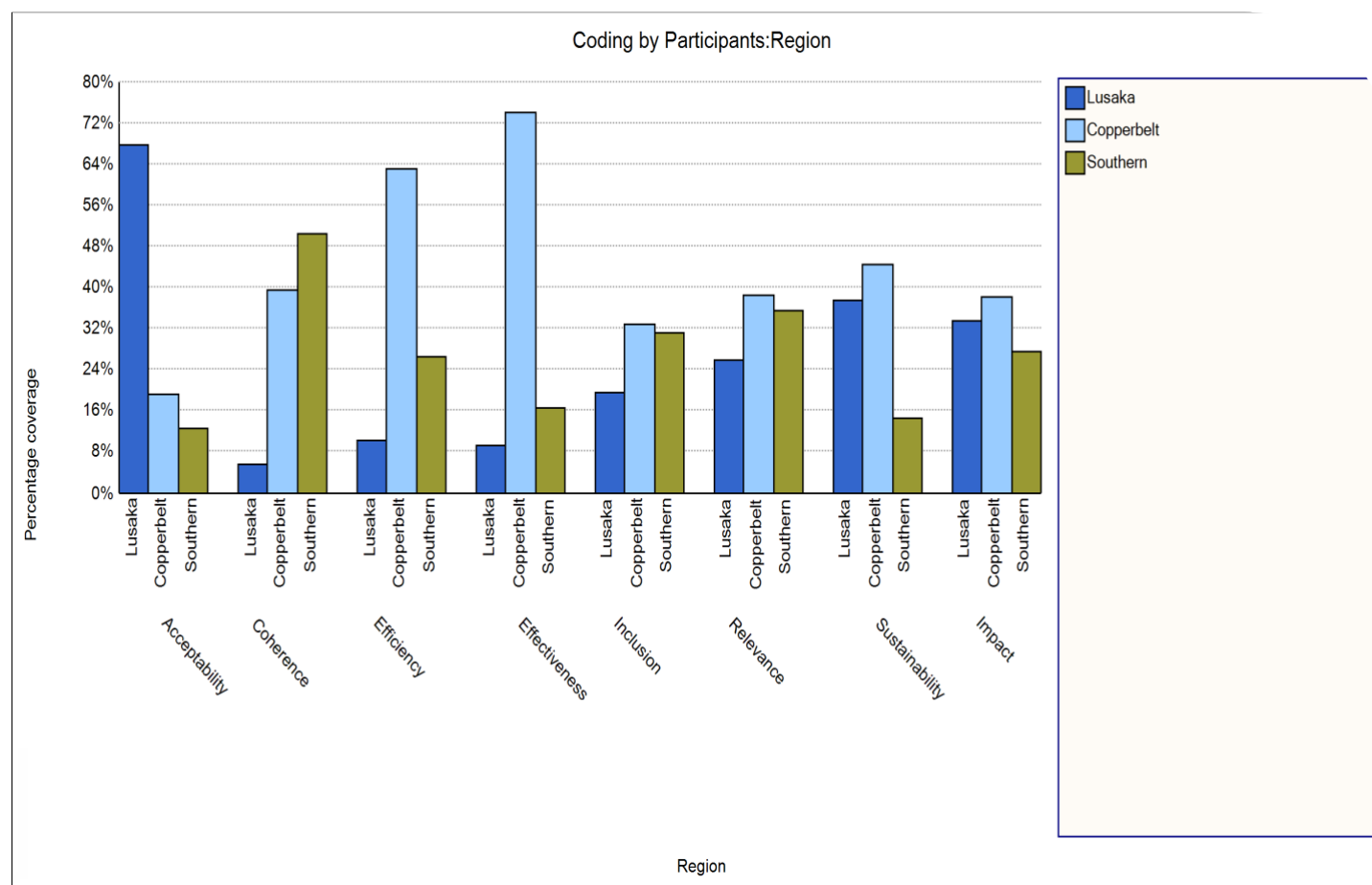
Outcome 2 Children and young people have improved learning outcomes is also likely to be sustainable especially in light of recent policy changes in form of the introduction of free education by the government which is likely to help sustain the textbooks and other support to vulnerable children. Grant-aided institutions, however, are not benefitting from the Free Education Policy and therefore are likely to face challenges of sponsorship of children after the end of FSP funding support.

The decision to work closely with Ministry of Health (MoH) and the District Health Teams under Outcome 3: young people have access to Sexual Reproductive Health and Rights (SRHR) is likely to promote ownership and hence sustainability the programmes' benefits and services beyond. Programme interventions under Outcome 3 related to ending early marriages and teenage pregnancies, and high school drop rate are unlikely to yield sustainable results due to the inhibiting social-cultural and behavioural factors attached to these issues

Sustainability is assured under Outcome 4 Governments prioritise the enforcement of the UN Guidelines for the Alternative Care of Children, given the political will that has gone into the preparation of the Child Code Bill and its enactment into an Act of Parliament and most importantly the recent Presidential Assent of the Bill and the wide media coverage that the Child Code Act has received. There has been a noticeable break in funding raising from external sources due mainly to the impact of COVID-19 with many donors and corporates having withdrawn their in-kind assistance and sponsorships during the last 3 years of the COVID-19 pandemic.

Generally, the essential attributes of the DAC criteria were extensively explored by the review team to ascertain the extent to which each of them perceived by both the actors in this programme as well as regionally. A spatial analysis of the DAC criteria vis-à-vis FSP general impressions appear to be positively tilted towards Copperbelt (Kitwe) and Southern (Livingstone) locations. Figure 14 below highlights the observed impressions about different criteria by region.



**Figure 14: Spatial analysis of the DAC Criteria**

The above graph shows that programme is more appreciated on the Copperbelt province districts (Kitwe location) as the region is topping the relevance criterion score at 38% ahead of its closest rival, the Livingstone location region at 35%. Lusaka location scored the lowest appreciation score of 27% with respect to the relevance of the programme. The apparent marginal relevance of the programme in Lusaka denotes possible mismatch between programme priorities and local aspirations and the higher score for the Kitwe region could be credited to the highly participatory processes embraced from the outset where government and local partner organisations spearheaded beneficiary selection which better the individuals and households whose members could identify with the issues the programme was meant to address.

Comparatively, the Kitwe location is the best performing out of the three regions covered in the review. This region is leading in 75% of the eight-fold DAC criteria. The Kitwe leading is leading in the following criteria by %:

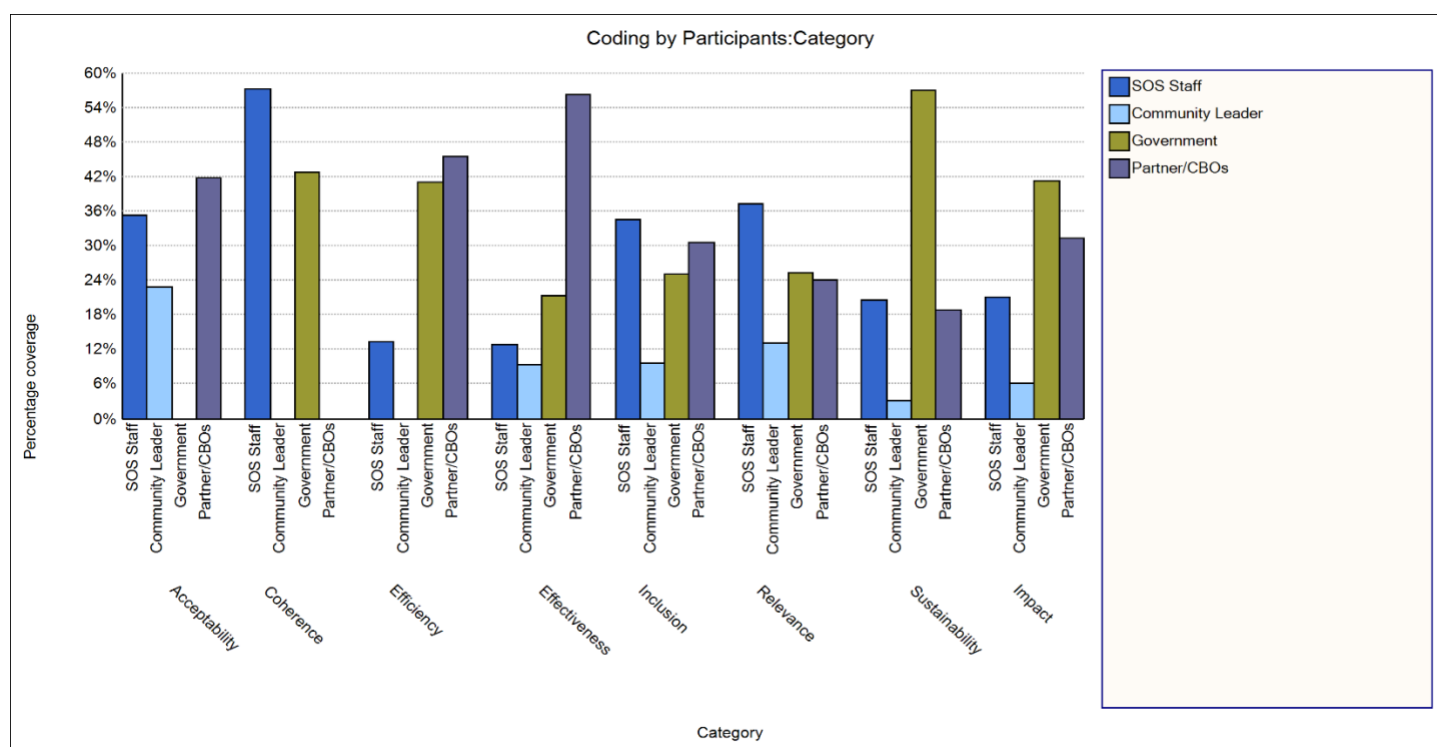
- Effectiveness 74%
- Efficiency 63%
- Sustainability 50%
- Relevance 38%
- Impact 38%, and

○ Inclusion 34%

Southern region is the second-best performing location leading in coherence and came second in 50% of the criteria. Lusaka, on the other hand is leading in the acceptability criterion and is second in sustainability and impact at 38% and 33% respectively but is the poorest performer on the rest of the criteria. Lusaka has also displayed grand contradiction by posting highest acceptability and second highest sustainability but with lowest coherency, effectiveness, efficiency and inclusion.

With regard to programme actors' perspectives, the most prevalent views were those expressed by four categories of respondents, namely government, community leaders, partners/CBOs, and SOS Staff. For details about this are displayed in the bar graph presented in figure 15 below:

**Figure 15: Respondent Impressions on Programme Performance Using DAC Criteria**



According to the above graph, partners/CBOs almost unanimously claimed that the programme enjoys impressive acceptability in the respective locations. SOS Staff came second after the partners in attesting to the acceptability of the programme. Ironically, the community leaders who are believed to represent the interests of the beneficiaries in areas under their jurisdiction appear to have a contrary view as they lag behind the two. The disparity in perspectives between CBOs and community leadership when these two are known to live in the physical and social same space calls for further interrogation in subsequent reviews.

In terms of coherence, SOS staff strongly believe there is coherence and most instantly supported by government in this regard as government came second on this. Furthermore, of interest to gladly note is the popularity of efficiency among CBOs and government. Partners/CBOs are

largely of the view that here has been efficiency in the running of this programme. The government stakeholders came second in holding similar views on efficiency. Whereas partners and government are praising the programme on efficiency, SOS staff strangely expressed misgivings on this as they came out third after CBOs and government. This could be on account of their knowledge of funding gap which the others may not have been privy to.

In terms of effectiveness, CBOs still strongly believed there was effectiveness seconded by government in this perspective. SOS staff, on the other hand, exercise some scepticism over such generalisations. CBOs respondents were also leading in attesting to inclusion and relevance while government led in sustainability and impact.

### **3.4.7 Validity of Programme Design**

FSP design is of good quality as, in its formative assessment stage, it was based on evidence the contextual situations from the baseline and feasibility study, and needs assessment. Gender analysis and disaggregation was conducted as part of the problem analysis and identification of key target groups, end beneficiaries and stakeholders (stakeholder analysis) and institutional, legal and policy framework analysis was accomplished. The design of FSP also took into account previous experiences and lessons learnt from the first FSP Framework (2016-2019) funded by SOS Norway and good practices in Childcare and Child Protection from other SOS Children's Villages interventions and other sector wide experiences.

The programme scope was clearly defined and remains valid to achieve the intended results. The programme design is aligned to the available (and allowable) funding under the current NORAD Framework and is feasible within the approved implementation window or timeframe. The review notes however that both the programme scope and timeframe are likely to be affected by the funding freeze to FSP which translates into one year of lost time. The programme design therefore needs to be modified for the remaining period of implementation to mitigate the effects of the funding freeze.

The programme's identification phase adequately identified the key assumptions and risks to be associated with implementation. The assumption that steady funding flow would be received for programme implementation does not stand and is no longer valid as in September 2021, NORAD and SOS Children's Village International imposed a funding freeze that has resulted in the suspension of a number of programme activities thus affecting the validity of the entire FSP intervention

The programme design is valid in that it remains logically sound in its design, and it is legally binding and acceptable to all parties – funders, sponsors, implementing partners, key stakeholders, target groups and final beneficiaries. At the half way mark the programme has achieved an estimated 40 percent completion rate of the number of activities implemented in FSP Work Plan.

The validity of FSP is also reflected in the credibility and appropriateness of the programme implementation mechanism and methods which have been working well for all stakeholders. The FS programme is subjected to SOS Zambia internal reviews and there is no indication that it required major adjustments in approach and methods. Key assumptions have been made in the choice of programme methods that are holding out well during implementation. For example, the assumption that and choice of using existing partners will strengthen implementation has proved to be valid.

### **3.4.8 Management and Coordination**

This section highlights the management and coordination mechanisms of the FS programme. Management should be understood from its (FSP's) position in the SOS Children's Village International governance structure. SOS Zambia is a national association member of the Federation of SOS Children's Villages International. SOS Zambia is directly accountable for all its programme work to the Africa Regional Office while for its funding SOS Zambia has been assigned to two (2) programme support associations (PSAs) SOS Norway and SOS UK whose role within the Federation is to mobilise funding and other resources for the benefit of their affiliated National Associations. The PSAs are well coordinated in their funding raising and are also poised to and have previously provided technical assistance to the National Associations.

It is in this context that the FSP funding has been mobilised by SOS Norway from NORAD and other back donors like Grieg Foundation. The funding flow from the SOS Norway to SOS Zambia has been consistent over the years until the uncovering of a breach in the SOS Zambia financial management system which has resulted in suspension of funding to FSP which has lasted for the last 12 months. The funding freeze has potential to affect the ability of SOS Zambia to mobilise funding from Federation affiliated National Associations including SOS UK.

FSP's overall design, and its aims and objectives, is aligned with and drawn from the SOS Children's Village International global strategy, policy actions and program work. The existing cooperation arrangements between SOS Zambia, International Office (Africa Regional Office), SOS Norway, and NORAD allows for a coordinated and harmonized approach, effectiveness of the SOS Children's Village International policy tools and implementation mechanisms, all working towards one common goal of promoting childcare, child rights and child protection.

At the national association level, the FS programme management structure is well aligned with the SOS Zambia's governance and management structure. The review found that FSP management structures and coordination mechanisms are clearly defined and sufficiently functional to facilitate programme Implementation. A full time FS Manager is in place to oversee all matters related to FSP. The FS Manager is directly accountable to the SOS Zambia Head of Programmes (HOP) and the National Director (ND). The FS Manager is further assisted by the M&E Adviser (with time share of 30-40% on FSP), a full time Child Protection Officer and Gender and Advocacy officer recruited under the Gneimer funding envelop. A number of officers including the Public Relations and Branding Officer, Finance and Administration, Procurement Officer and Human Resources play various roles in FSP implementation.

At location and community levels, FS Coordinators directly reports to the FS Manager and the SOS Regional Programmes Manager (RPM). This arrangement creates a challenge of

coordination, communication, accountability and responsibility at the Regional and location levels. The RPMs, who are at middle management levels and are in charge of the Regions and locations (districts and communities), do not have full responsibility over RP implementation in their regions and locations. The FS Coordinators seem to take precedence in decision making and operations of the FS programme at the location level a source of tensions among the staff.

The arrangement of using the SOS Zambia Social Workers and the part time community mobilisers is working well for implementation of FS programme activities monitoring activities. In fact, the Social Workers are the de factor monitoring officers at the local level. The Social Workers and community mobilisers work directly with the CBOs and partners and monitors the partners activities. The suspension of funding for programme activities has severely affected the community mobilisers who cannot be remunerated, and the CBOs and partners who have not been funded for FSP activities for close to 12 months now. The Social Workers are recruited on a permanent basis and therefore have not been seriously affected by the funding freeze.

FSP is using the established SOS Zambia financial management system to manage its budget and expenditures. The overall SOS Zambia budget oversight, of which FSP is a part, lies with the National Director who reports to the Board for all matters and directly to the International Office for all matters related to budget utilisation. At the National Office, a full time Accountant (and Accounts Assistant) manages the accounts of all SOS programmes including FSP budget. The financial management system is generally functioning well and is by and large efficient and does not cause any delays in the financial flows from the National Office to the Regions and Locations (programme operational sites).

SOS Zambia has a procurement officer that manages all matters of contract management, procurement of goods and services. Procurement assistants have been recruited and are in place at all the 3 Regional Offices in Zambia. There is a threshold of ZMW10,000 and below which the Regional Offices and hence regional procurement officers are allowed to procure goods and services. This seem to be low in comparison to the amounts of goods and services the Regional Offices have to procure. All amounts above ZMW10,000 are handled by the National Office a system which seem to be partly responsible for the reported delays in the procurement of goods and services. There is a considerable amount of time spent on back-and-forth verification processes which result in significant delays much to the frustration of service providers and contractors.

The review notes that despite the well-established financial management system, SOS Zambia has experienced an accounting breach which has resulted in the funders suspending all funding allocations for nearly 12 months. SOS Zambia has been requested to review its financial system and particularly its accounting and procurement system to ensure that all necessary conditions and requirements of the funders are met before the disbursements will recommence. The issue of the funding freeze has had a significant impact on FSP programme implementation with several activities at community levels entirely suspended.

The review observes that FSP follows the approved work plans, implementation schedules and budget in their programme work. The overall budget utilization (and hence absorptive capacity of FSP) has been proportional to the actual execution of programme activities on the ground. SOS Norway, the Programme Support Association (PSA) for SOS Zambia, uses the annual funding cycle

to allocate funds to the FS programme. This implies that any funds that are not utilised by FSP in that particular funding cycle are returned to the International Office for re-allocation. The budget is in line with the planned expenditures under each budget line. There are no major variances to flag for further scrutiny.

SOS Norway has approved a programme budget of US\$8million for the current Framework. Budget execution is consistent and proportional with the duration of programme implementation to date. The overall budget has not been altered to date but may require some minor adjustments to reflect the changes in works contracts and procurement of goods and services to accommodate inflationary and foreign exchange variations.

### **3.4.9 Coordination, Complementarities and Synergies**

The FS programme design took into account the lessons learnt from previous implementation of similar programmes notably FSP Framework (2016-2019) and good practices. SOS Zambia in FSP in particular does not work in isolation. It works with a number of partners some of who it has MOUs or Partnership Agreements for programme implementation. Among the most notable of the partners are the Ministry of Community Development which have played a pivotal role in identification, selection and monitoring of CBOs and partners under Outcome 1 of the RF.

Other implementing stakeholders include the Joining Forces Alliance (JFA) which also has played a major role in advocating for and lobbying government to approve the Child Code Bill under Outcome 4 of the RF. SOS Zambia is part of a coalition of partners on Alternative Care and has been involved in the Tracking Progress Initiative (TPI) a joint initiative of several NGOs including Plan International, Save the Children, World Vision International and Child Fund. SOS Zambia has also synergised efforts with academic institutions. For example, the University of Zambia (UNZA) has been involved in research related to the Alternative Care programme. FSP is a member of the Child Rights and Early Childhood network.

### **3.4.10 Communication and Programme Visibility**

SOS Zambia has a well-developed child-focused Communications Strategy which is also aligned to the SOS Children's Villages International communication strategy. FSP also meets the basic conditions and requirements for programme visibility. A full time Public Relations and Branding Officer is backstopping FSP in its communications requirements including development content for the SOS Zambia website, branding including providing content for and quality control of FSP billboards, brochures, Leaflets, banners, and production of Information, Education and Communication (IEC) materials for distribution widely in the target communities.

The Public Relations department of SOS Zambia also played a significant role of community sensitization and awareness creation during the outbreak of the COVID-19 pandemic. FSP is also featured on Social Media, Radio and TV programmes. Within SOS Zambia, communications have not been fully prioritized and does not sufficiently take centre stage to drive the SOS Zambia Country Strategy and other key policy actions.



### **3.4.11 Human Resources**

SOS Zambia has two (2) main programmes: the Alternative Care (Children's Villages) and Family Strengthening (FS) programmes both under the overall oversight of the National Director who is deputized by the Head of Programmes (HOP). The Alternative Care Programme or SOS Children's Villages are mainly under the remit of the Regional Programme Managers (RPMs) for Lusaka, Kitwe and Livingstone. The Alternative Care Programme has adequate and qualified human resources including specially trained SOS Mothers, Social Workers and Counsellors all under the overall leadership of the RPMs.

The FS programme's human resources, however, require a review to ensure that all the necessary positions are established and the right staff recruited. The FS programme has a full time Manager, who is directly answerable for all matters related to the FS programme implementation to the HOP and the National Director. The desk review observed that the programme was supported by the Head of Programmes who provided the overall leadership to the programme and the National Director who provided guidance and strategic direction for the programme. The programme had a Finance team and procurement played a critical role in overall financial management and reporting. The FS Manager is further assisted by the M&E Adviser (with time share of 30-40% on FSP), a full time Child Protection Officer and Gender and Advocacy officer recruited under the Gneimer funding envelop. A number of officers including the Public Relations and Branding Officer, Finance and Administration, Procurement Officer and Human Resources play various roles in FSP implementation.

The desk review revealed that in the Lusaka location, the programme was managed by the Coordinator who reported to the Regional Programme Manager, with an establishment of ten (10) staff including the Coordinator, seven (7) Social Workers, an Accountant, Driver and General Worker. All FS members of staff were on three years contracts. The assessment further revealed that the Programmes experienced challenges in the implementation of activities due to staff shortfall as the programme had a vacancy of one Social Worker which would be filled at a later stage. The absence of a National Gender and Advocacy Officer also affected the implementation of activities under outcome 4 due to lack of technical support but was filled up in November, 2020. The vacancy of the FS Accountant was filled up in April, 2020.

The assessment revealed that by the end of the year 2020, the programme in the Kitwe location had all the required 12 staff representing 100% staff establishment. The programme staff were offered contractual employment for the 2020-2024 NORAD Framework implementation period. The assessment revealed that contractual employment enabled the staff to put in all their efforts in the implementation of activities. In January 2020, the FS shifted its operations from Kitwe to Ndola and Masaiti in the 2020-2024 NORAD Framework. The 2020 Annual Report revealed that staff were a bit apprehensive when the change happened, but they settled down in the new routine. The desk review found out that the movement of FS offices to Ndola made it possible to have closer and consistent contact with the community and community partners leading to better programme implementation. This resulted in the budget burn rate of 98%.

The evaluation results indicated that the project supported Programme staff re-training in PDB2 in order to get familiar with the new features that include the new IDP/FDP form, Statistical Key Figures and the link to Compass Reports. It revealed that the training was very beneficial for FS



that had just completed the recruitment of new beneficiaries and was beginning the client registration process. As a result of this training, the programme was able to register 100% of the new 2,500 children and 498 caregivers.

The human resources deployed at the location and community levels are mainly the FS Coordinators who directly reports to the FS Manager, the Social Worker for each location and the community mobilisers who mostly are volunteers living within the target communities. The review notes that it is at this level and in some but not all locations that the relationship between the FS Coordinator, who reports directly to the FS Manager, and the SOS Regional Programmes Manager (RPM) has become tainted. The lines of accountability and reporting between the FS Coordinator and RPMs are not very clear either and often there is communication breakdown, tensions and misunderstandings between the two roles.

Next in the hierarchy of FSP are the full time Social Workers and part time community mobilisers who are the “boots on the ground” for FSP. Social workers and community mobilisers work directly with CBOs and partners and monitor their work in the communities. Social Workers are also the de facto monitoring officers responsible for the frequent collecting and processing data for the Programme Database. The challenges experienced at National Office level of frequently updating the PDB and following up on missing data or data that is not correctly reported, are associated with inadequate M&E capacity at the location and community levels. Social Workers have found themselves playing multiple roles which affects their overall performance. There is need to relieve or at least to reduce the M&E role of Social Workers so that they focus on tasks or activities that they are competent in.

At programme formulation stage capacity needs assessments of CBOs, partners and volunteers mainly the part time community mobilisers were conducted which revealed the priority areas of capacity building. The FS has supported the CBOs, partners and volunteers by conducting capacity building and training to strengthen them in project management, monitoring and evaluation and financial management and other areas such as entrepreneurship. The suspension of funding for programme activities has severely affected the community mobilisers who cannot be remunerated, and the CBOs and partners who have not been funded for FSP activities for close to 12 months now.

### **3.4.12 Crosscutting issues**

#### **Gender Inclusion and Women's rights**

However, the FS Programme intervention is well informed by a comprehensive gender and disability analysis and strong SOS Zambia policies on gender and disability. As a result, gender and disability have adequately been mainstreamed in economic and social empowerment initiatives such as institutional building, entrepreneurship skills and financial literacy development, linkages with micro-finance institutions and vocational skills aimed at increasing income, assets, choices, household expenditures and decision-making capacities. Skills building in positive parenting skills for caregivers have been imparted.

The assessment on gender mainstreaming in relation to capacity building of beneficiaries of FSP and awareness raising activities took into account the provisions of the *National Gender Policy (2014)*, the *Gender Equity and Equality Act No. 22 of 2015* and the *Anti-Gender Based Violence*

*Act No. 1 of 2011* and to what extent the project was aligned to and ascribed to these provisions as well as to the regional and international conventions on gender equality. The assessment observed that in its design, the project interventions committed to adequately address the issues of gender equity and equality and the existing gender imbalances. The programme further endeavoured to promote the empowerment through parents, families and carers of every child with disabilities with regardless of their sex or status in society. In practice and during project implementation, this was difficult to achieve due to the social and cultural norms and values which entrenched negative attitudes, perceptions and stereotypes about gender equality. However, through the concerted efforts of the project, these structural barriers and constraints were slowly but not completely broken down.

The assessment revealed that the project addressed gender equality by promoting the participation of women in various activities on the programme. As a result, more women participated in the programmes and some of them held positions of decision making in various groups such as the Village Savings and Loans Associations (VSLAs), entrepreneurship, and positive parenting. Further, the assessment found that the project conducted the *“Keep Girls in School Campaign”* which was aimed at raising awareness on the importance of girl child education and ending child marriages including other harmful practices which affect girls and women. For instance, dialogue meetings around ending child marriages were conducted with traditional leaders in Livingstone who included Chief Mukuni, Chief Nyawa and Chief Choma. The chiefs challenged the attitudes and traditional beliefs that drive and fuel child marriages, and pledged to ensure that children were not married off until they attained the age of maturity and that those who perpetrated child marriages were punished.

The project also participated in the commemoration national events such as the International Women’s Day (IWD) which falls on the 8<sup>th</sup> of March annually. During these commemorations, the programme held community engagement meetings to appreciate and acknowledge the important role women play in development. For instance, the 2021 IWD commemoration was held under the theme *“Women in Leadership: Achieving an Equal Future in a COVID-19 world”*. The meetings drew participation of women from all walks of life such as women in leadership positions, women in business, and entrepreneurs and female traditional leaders from surrounding villages, Community Development Officers, Head Teachers, Community Based Organisations’ leaders, and SOS staff.

The meetings provided fora for community members to discuss issues affecting them and proactive measures that could be taken to address their own needs. Discussions were centred on recognizing and appreciating the important role that women place in the development of families and communities. Talks on women empowerment and the importance of girls’ education were provided by government officers and SOS staff. The meetings were very interactive, and participants had increase knowledge on women empowerment programmes under the Ministry of Community Development and Social Services (MCDSS) such as small grants for women groups, Social Cash Transfer (SCT) and Village Banking.

### **Rights Based Approaches (RBAs)**

FSP applies the RBA approaches in all its interventions. SOS Zambia consistently promotes the human rights of disadvantaged children and young people who cannot count on a caring family environment and has been making sure that children's voices are heard in society.

### **Mitigation of the Impact of COVID-19**

The assessment conducted revealed that despite having met the targets, the Family Strengthening Programme operated under difficult circumstances COVID-19 outbreak which affected its implementation. However, a number of COVID-19 response interventions were implemented which aimed at improving knowledge about COVID-19. The programme provided emergency social assistance and Personal Protective Equipment (PPEs) to participants and schools. The assessment further revealed that a 12% (translating to K2, 539, 945.92) allocation from the 2020 country budget was reprogrammed to cater for the COVID -19 response. During the entire period under review (Jan 2020 to June 2022) FSP has experienced multiple delays caused by the debilitating effects of the COVID-19 global pandemic which resulted in the Government lockdown which placed restrictions on travel, large meetings and gathering and other stringent public health measures such as hand washing, social distancing and the wearing of face masks at all times.

The FS programme has responded well to the shocks and stresses caused by the COVID-19 pandemic. For example, a decision was made to reallocating 12% or K2, 539,945.92 of the 2020 Country Budget to the COVID-19 response. Some measures taken included provision of emergency social assistance to vulnerable families in the programme locations; procurement of personal protective equipment (PPEs) for programme participants and schools and awareness raising on the effects of COVID-19 to improve the beneficiary's knowledge of the pandemic.

### **Environment and climate change**

The FS programme has put in place appropriate measures to ensure the protection of the environment and to mitigate the Climate Change effects. This is being implemented in Lusaka and in Chief Nyawa's customary areas of Kazungula District, where FSP beneficiaries of empowerment schemes are discouraged to engage in businesses such as charcoal burning and poor agricultural practices of cut and burn that often result in deforestation and consequently would negatively impact on the environment and led to climate change. The beneficiaries have instead been trained in SMART Agricultural practices.

The results indicated that the programme contributed to preventing unwanted environmental and climate effects by discouraging participating caregivers and the community from undertaking economic activities that would 'do harm' to the environment such as cutting trees for charcoal burning. It also revealed that the programme promoted environmentally friendly methods of farming such as conservation farming and climate resilient agriculture during community meetings. Tree planting was also encouraged among the beneficiaries to enhance the resilience of the environment to the effects of climate change.

### **Ascertaining Project Inclusiveness (Inclusion)**

It is worth noting that child rights and disability issues were part of the broad interventions delivered to beneficiaries. The Review revealed that the type of assistance which was being

provided to families with persons with disabilities included school enrolment for children, assistive devices, psychosocial support, parenting training, and Income Generating Activities (IGAs). Disability Inclusion is one of the universal rights of the children.

It should be noted that the programme faced some challenges during implementation including communication breakdown between the staff and the hearing impaired as staff did not have the skills in sign language. However, this challenge was addressed, the project would support key staff in basic sign language training. Another challenge was accessibility to premises by persons with disabilities. Limited accessibility to the premises created barriers for persons with disabilities. Therefore, modifications were to be done to accommodate every person with a disability and staff are undergoing sign language training.

## 4 Lessons Learned

Several lessons and good practices for possible replication and improvement of programme work can be drawn from the findings.

- a) Prior to 2020, and in the first FSP framework and in old communities, FSP took the lead in developing and forming the partner CBOs. However, so much capacity was created that an estimated 60-65% of the beneficiaries were able to become self-reliant and exited the programme;
- b) In the current NORAD Framework, FSP has shifted its approach to using only existing and established CBOs working in the target communities. This approach has been effective since the partner CBOs already had some capacity, influence and a client-base to implement FS activities.
- c) In the first Framework funded by SOS Norway, FSP directly supported in-kind Income Generating Activities (IGAs) but have in the current NORAD Framework opted to provide Cash-based IGAs. The advantages of the Cash-based IGAs are that the beneficiaries gain the relevant business planning and entrepreneurship skills.
- d) Previous delays in procurement of goods and services have also reduced since it is the care givers who are directly involved in procurement. The downside of the Cash Based IGAs has been products not been sold, beneficiaries unilaterally changing their businesses e.g., from selling fish to selling beans.
- e) The Ministry of Community Development (MoCD) has often been used to guide and monitor financial activities of the partners.
- f) Devolution of responsibility the responsibility of identification of local CBOs. The MoCD spearheaded vulnerability assessments, wealth ranking and CBO capacity assessments. Although this measure has helped to build some form of ownership of FSP activities, the MOCD's contributed is limited to government support programmes such as the Social Cash Transfers which only target the most vulnerable.

## 5 Conclusions

The following are the conclusions of the MTR:

**C-1 Relevance** - Due the effects of Covid-19 the problems identified at FSP's design stage may have been aggravated and changed in dimensions and effect on the target groups and beneficiaries, which required further assessment by FSP. The Review observed that no CBO partner had fallen off or opted out of their Agreements (MOUs) with FSP due to the funding problems. The expectations of community-based partners and final beneficiaries have been affected due to a stall in implementation of FSP. Some partners and beneficiaries without information on the suspension of activities may likely fall off completely or join other organisations in FSP target areas.

**C-2 Programme Design and Mismatch between the PDB and Results Framework** - The review notes however that both the programme scope and timeframe are likely to be affected by the funding freeze to FSP which translates into one year of lost time. The programme design therefore needs to be modified for the remaining period of implementation to mitigate the effects of the funding freeze. Major changes have occurred during the last one year related to programme funding which have affected programme delivery and the programme intervention strategy as a whole.

The PDB draws its data from the programme Results Framework (RF) although the review observes that the PDB and RF are not fully aligned yet. For example, of the 4 Outcomes outlined in the RF, only two are covered in the PDB: Outcome 1 and 2, while the results chain and indicators for Outcome 3 – SRHR, and Outcome 4 UN Guidelines on Alternative Care are entirely omitted in the PDB. The omission of monitoring data in general, performance indicator, baselines and target values related SRHR, UN Guidelines on Alternative Care and Child Protection in the PDB, is an omission and inadequacy that should be resolved to ensure an integrated PDB.

**C-3 Data collection at Location and Community level** - A single data collector has to deal with 60-80 families in data collection cycle and this is in addition to their other functions on the FS. There are information gaps related to family planning activities especially when the beneficiaries are supposed to be weaned from the programme. The quality of incoming data often forces the national level staff to conduct data cleaning every quarter.

**C-4 Capacity Building and Engagement of CBOs and Partners** - Only the Kitwe CBOs and partners have received adequate training to enable them respond to the needs of children deprived of parental care in their communities. Capacity building and training activities for other CBOs and partners have been suspended since 2021 due to a funding freeze. The suspension of programme activities has weakened the partnership with CBOs and partners to the extent that some are opting out of FSP with reputation ramifications for SOS Zambia.

**C-5 Learning Outcomes** - One concern the stakeholders in the locations have raised is the issue of learning materials particularly textbooks which often are given to individual children on FSP support. The suggestion is that the textbooks should be donated to the schools as a whole for use by other pupils who are disadvantaged and do not have access to the learning resources. While public schools have benefited from the novel Government policy of Free Education for All, grant-aided educational institutions are not benefitting from the Free Education Policy and therefore are likely to face challenges of sponsorship of children after the end of FSP funding support.

**C-6 Sustainability** - Unlike other interventions such as empowerment which result in self-sufficiency of beneficiaries, social-cultural factors related to early marriages and teenage pregnancies require a long-drawn out strategy and interventions to shift the mind-sets, attitudes, perceptions, negative stereotypes and behaviours of community members, families and traditional authorities to eliminate these harmful practices to children. Appropriate measures should be taken to restore the funding flows to the CBOs and partners to boost their confidence in and buy in of FSP interventions and to continue with capacity building and implementation as agreed in the MOUs and ensure sustainability of programme benefits and services. The government has passed the Child Code Act but to avoid the Act to end up as one of those policy and legislative

documents that are gathering dust on decision makers shelves, follow up advocacy actions are required to ensure the new legislation is implemented for the benefit of children.

**C-7 Empowerment and Cash-based IGAs** - Cash-based IGAs have worked very well for empowerment of beneficiaries. There have been isolated cases of abuse of the Cash Based funding facility which reported misappropriation and misapplication of funds by members of CBOs and partners. The matter has however been identified and adequately dealt with by the FSP management.

#### **C-8 Programme Funding Situation and Procurement**

The assumption that steady funding flow would be received for programme implementation does not stand and is no longer valid as in September 2021 NORAD and SOS Children's Village International imposed a funding freeze that has resulted in the suspension of a number of programme activities thus affecting the validity of the entire FSP intervention. The suspension of funding to the NORAD framework (in Zambia) has affected SOS Zambia's ability to mobilise funding for programme work from the Federation of SOS Children's Villages affiliated National Associations. All amounts above ZMW10,000 are handled by the National Office a system which seem to be partly responsible for the reported delays in the procurement of goods and services. There is a considerable amount of time spent on back-and-forth verification processes which result in significant delays much to the frustration of service providers and contractors.

#### **C-9 Management and Coordination**

The RPMs, who are at middle management levels and are in charge of the Regions and locations (districts and communities), do not have full responsibility over RP implementation in their regions and locations. The FS Coordinators seem to take precedence in decision making and operations of the FS programme at the location level a source of tensions among the staff. This arrangement creates a challenge of coordination, communication, accountability and responsibility at the Regional and location levels.

**C-10 Human Resources, Communications and Programme Visibility**-Social Workers have found themselves playing multiple roles which affects their overall performance. There is need to relieve or at least to reduce the M&E role of Social Workers so that they focus on tasks or activities that they are competent in. Within SOS Zambia, communications and programme visibility has not been fully prioritized and does not sufficiently take centre stage to drive the SOS Zambia Country Strategy and other key policy actions.

**C-11 Design and Selection of Communities** - Overall the current geographical scope and coverage of FSP is adequate and is aligned to the available funding resources. However, compared to the observed need, consideration should be made to further scale up to other underserved but needy areas



## 6 Recommendations

The following are the key recommendations of the MTR

C-Ref	General Recommendation	By Who	Priority level	When
C-1	a) Conduct a full assessment of the effects of the COVID-19 and funding freeze on implementing partners and beneficiaries.	With support of National Office, FSP team should conduct the in-house impact assessment	High	Short term
C-2	a) In light of the year-long funding freeze, review FSP programme scope and Work Plan with the aim of aligning the project implementation to the remaining duration of the Framework b) Consider a No Cost Extension (NCE) considering the time lost due to COVID-19 and funding freeze to ensure activities that have not been implemented are completed	FSP team in consultation with the Regional/International Office  NORAD/SOS Norway/International Office	High	Short term
C-2	a) Consider aligning the PDB with RF to incorporate Outcome 3 and 4 in the PDB; b) Consider incorporating indicators for Outcome 3 SRHR and Outcome 4 advocacy on UN Guidelines for Alternative Care in the PDB to ensure integration of the Programme Outcomes unlike having a separate monitoring database for Outcome 3 and 4; c) Develop a well-tailored reporting system to bring out key FSP Programme issues and build capacity of community and district structures that give feedback.	M&E Adviser in collaboration with FSP team  As Above  As Above	Medium	Medium term
C-3	a) Strengthen Monitoring Data collection at Location and Community level by recruiting dedicated M&E officers	FSP in collaboration with the National Office/International Officer (Recruitments)	Medium	Medium to long term
C-4	a) Devise measures to re-engage with partners and CBOs to rebuild and restore the confidence and trust and to assure them of restoration of programme activities; b) Introduce stringent conditions, sanctions and other measures to prevent misappropriation and misapplication of empowerment and IGAs funds by CBOs and partners.			
C-5	a) Strengthen and continue support to learners in Grant-aided schools who are not benefitting from the Government programme of Free Education	FSP Manager	Low	Long term
C-6	Strengthen advocacy on UN Guidelines on Alternative Care particularly consider follow-up advocacy measures or actions to assist Government to put into practice the Child Code Act to ensure the new legislation is implemented for the benefit of children in FSP target areas.	FSP Manager with support of Head of Programmes	High	Long term

C-7	Ensure greater accountability of Empowerment and Cash-based IGAs funds	FSP Manager	High	Medium term
C-8	<p>a) beneficiaries, and key stakeholders' motivation, morale, confidence and trust and devise a plan, counter-measures and strategies to mitigate against the effects of the funding stoppage including loss of gains made in the beneficiary communities and potential reputational damage to SOS Zambia.</p> <p>b) Expedite the process of sealing the loopholes in the financial system in order to meet the funder's requirements for financial due diligence and take practical measures as recommended by the funders to ensure the funding pipeline is opened before the next funding cycle to FSP before further erosion of trust and confidence, and to partners, CBOs, beneficiary communities and stakeholder institutions.</p> <p>c) Expedite the financial due diligence process to enable SOS to raise funding for programme work from its and other Federation of SOS Children's Villages affiliated Associations. As it is, SOS Zambia is missing out on good funding opportunities from Programme Support Associations (SOS Norway and SOS UK) and other SOS Children's Villages International affiliated Programme support Associations.</p> <p>d) Devise actions to effectively leverage current Government political will and provision of several empowerment funds. The following actions are recommended: i) Strengthen or create new structures (cooperatives) in FSP target areas that can then apply for CDF and other empowerment funds; ii) assist communities to interpret CDF Guidelines which are currently deemed "too technical"; iii) assist communities to write bankable project proposals for submission to the CDF and other similar committees; and</p> <p>e) Review and consider increasing the funding thresholds for procurement from the current ZMW10,000 to ZMW30,000 to enable Regional Offices to procure goods and services faster and avoid delays due to consultations between National and Regional Offices.</p> <p>f) Now that the COVID-19 has been declared officially over, SOS Zambia should start re-engaging the has the opportunity of leveraging current government political will to empower Zambians with various funding</p>	FSP Manager in collaboration with National Office, International and Regional Office	Medium	Short to medium term

	instruments. SOS Zambia can for example potentially tap into Government funding resources such as the CDF, SME funding and Climate funds.			
C-9	Address of the role of RPMs in FSP implementation and align and harmonize with the role of FSP Coordinators	National Office	Medium	Medium to Long term
C-10	<p>a) Establish the position of M&amp;E officer at the regional level to improve data collection</p> <p>b) Harmonise the relationship between the FS Coordinators and Regional Programme Managers and resolve current differences and misunderstandings between the two roles on FSP.</p> <p>c) Prioritise communications in driving the SOS advocacy and policy actions and other SOS programmes, including FSP that are child-centred and community-focused.</p>	FSP Manager and National Office	Medium	Medium
C-11	The need for FSP services is high especially in underserved areas. Consider scaling up FSP programme work to needy areas. This will depend on funding availability	FSP Management	Medium	Medium to Long term

# Annexure

## ANNEX 1: Key Review Criteria and Questions

Review Criteria	Review Questions (indication of specific Judgement criteria and Indicators)
<b>Relevance</b>	<ul style="list-style-type: none"> <li>- To what extent is the programme focused on our target group – i.e., the children most at risk of losing the care of their family?</li> <li>- To what extent is the beneficiary recruitment participatory and transparent (involvement of community-based partners, CSOs and government institutions, etc.)?               <ul style="list-style-type: none"> <li>- To what extent has FSP-Zambia conformed to SOS Norway’s development cooperation strategy for Zambia, national development priorities of Zambia, and to the priorities and needs of the target beneficiaries/communities?</li> </ul> </li> </ul>
<b>Efficiency</b>	<ul style="list-style-type: none"> <li>a. To what extent is the programme efficient? Specifically, the delivery of outputs and activities in terms of quality, quantity, timeliness, and cost efficiency?</li> <li>b. How was the programme’s collaboration with national and district level government authorities, traditional leaders, CBO partners, other development partners?</li> <li>c. To what extent has the programme partnered with other CSOs/NGOs to leverage programme resources and expertise in service delivery?</li> </ul>
<b>Effectiveness</b>	<ul style="list-style-type: none"> <li>a. To what extent are the programme’s results, indicators and targets being achieved/likely to be achieved?</li> <li>b. To what extent have families achieved/likely to achieve self-reliance and exited the programme?</li> <li>c. To what extent has the quality of care and parental skills improved for families in the programme?</li> <li>d. Determine if there are any specific revisions required for the remaining period</li> <li>e. Examine if, how, and why the strategies contribute to the achievement of expected programme results.</li> <li>f. What were the major challenges which have impeded the progress of programme implementation in this programme period?</li> <li>g. What are the major barriers to expect in reaching our 2024 goals, and how can we prepare to overcome these?</li> <li>h. What good practices and lessons learned were identified? How can we build on them to achieve the 2024 goals?</li> <li>i. What (if any) significant unexpected results of the programme (whether beneficial or detrimental) have been identified?</li> </ul>
<b>Inclusion</b>	<ul style="list-style-type: none"> <li>a. To what extent has the programme mainstreamed gender and disability in its interventions?</li> <li>b. To what extent has the programme budget been invested in gender and disability interventions, respectively?</li> </ul>
<b>Sustainability</b>	<ul style="list-style-type: none"> <li>a. To what extent are the benefits of the programme likely to continue after donor funding has been withdrawn?</li> <li>b. To what extent has the capacity of partner CBOs been built/strengthened to independently manage and implement activities, and to prepare for sustainability at project closing?</li> <li>c. To what extent have the programme interventions been driven by the CBO partners and government duty bearers?</li> <li>d. To what extent has the programme contributed to increasing government accountability and resources to fulfil their obligations towards the UN Guidelines on Alternative Care?</li> <li>e. Has the programme prepared for an exit plan to ensure a proper hand-over to the local government and/or CBOs after the programme ends? If not, what needs to be done/capacities built in the remaining project period.</li> <li>f. How effective have the programme exit plans for families and communities been?</li> <li>g. Are the programme objectives, outcomes, indicators, and targets clear, practical, and feasible within the remaining programme time frame?</li> </ul>

<b>Validity of design</b>	<ul style="list-style-type: none"> <li>a. Is FSP-Zambia programme design valid and appropriate?</li> <li>b. Are the programme activities complementary and integrated?</li> <li>c. Does the programme design have exit and sustainability plans in place?</li> <li>d. To what extent were relevant gender issues integrated in the programme design? Does the design need to be modified for the remaining period of implementation? If so, recommend areas for improvement in programme design.</li> </ul>
<b>Management &amp; Coordination</b>	<ul style="list-style-type: none"> <li>a. How has the role of the programme management ensured quality implementation and budget utilization?</li> <li>b. To what extent did the programme have appropriate management and coordination structures?</li> <li>c. To what extent is the programme supported by an appropriate monitoring and Review system, financial management system, and communication strategy?</li> <li>d. To what extent did the programme adhere to work plans and budgets?</li> <li>e. Which other local implementing partners were involved in the process of management and coordination and how did this affect the quality of implementation?</li> </ul>
<b>Human Resources:</b>	<ul style="list-style-type: none"> <li>a. To what extent did the programme have adequate human resources in programme?</li> <li>b. Did programme staff competences align with programme's interventions? If not, where/how where the challenges and how can it be improved in future programming?</li> <li>c. How is the relationship between staff and CBO partners (including volunteers)?</li> <li>d. To what extent did the programme provide capacity building of staff, CBO partner staff, and volunteers? Are there any remaining training needs?</li> <li>e. To what extent was there a clear division of roles and responsibilities between the staff and its CBO partners?</li> </ul>
<b>Utility, Coordination, Equity, Acceptability</b>	<ul style="list-style-type: none"> <li>1. To what extent do the changes/effects of the intervention satisfy (or not) stakeholders' needs?</li> <li>2. How much does the degree of satisfaction differ according to the different stakeholder groups?</li> <li>3. To what extent is the intervention organised to maximise joint effects, e.g., by mobilising resources combined with harmonising measures?</li> <li>4. how fairly are the different effects distributed across the different stakeholders / region? / Gender groups? / Social groups?</li> <li>5. To what extent can we observe changes in the perception of the intervention (positive or negative) by the targeted stakeholders and/or by the general public?</li> </ul>



## Annex 2: Data Collection Tools

### A. QUESTIONNAIRE FOR BENEFICIARY CHILDREN

#### PART 1: PERSONAL DETAILS OF THE CHILD

1. What is the child's age range?
  - a) 0-9 ( )
  - b) 10-14 ( )
  - c) 15-19 ( )
  - d) 20 and above ( )
2. What is the child's sex? Male ( ) Female ( )
3. Is the child an orphan? Yes ( ) No ( )
4. Is yes, is the child a double orphan? Yes ( ) No ( )
5. What is the current guardian / care giver's relationship to child? .....
6. Does the child have any legal identify document? e.g. birth record, birth certificate? Yes ( )  
No ( )
7. If yes, what document does the child have? Please specify .....
8. If no, what could be the reasons why the child does not have? .....

#### PART 2: THE CHILD'S COGNITIVE DEVELOPMENT PROSPECTS

1. What is the child's current care giver or parents' occupation?
2. Is the child in school? Yes ( ) No ( )
3. If yes, what grade is the child doing? .....
4. Does the child receive any educational support? Yes ( ) No ( )
5. If yes, who supports the child's education? .....
6. Has the child completed (primary, secondary etc). If yes, please specify the level of education. ....
7. If yes, what chronic illness is this? .....

8. Does the child have any physical disability or special needs ? Yes ( ) No ( )
9. If yes, please specify .....
10. Does the child have any other challenges other than what is mentioned above? Yes ( ) No ( ).
11. If yes, please specify .....
12. Does the child receive any support in view of the mention disability? Yes ( ) No ( )
13. If yes, what type of support does the child receive? Please specify.....

### **PART 3: HOME ENVIRONMENT AND CHILD CARE SITUATION**

1. How many meals does the child and family have per day?
  - a) 1 meal? Yes ( ) No ( )
  - b) 2 meals? Yes ( ) No ( )
  - c) 3 meals? Yes ( ) No ( )
2. How many children get consulted or participate in home decision-making processes?
  - a) Do you get consulted? Yes ( ) No ( )
3. If yes, on what matters do you get consulted? Any examples? .....
4. Has the child witnessed any violence at home? Yes ( ) No ( )

### **B. INTERVIEW GUIDE FOR YOUNG PEOPLE'S FOCUS GROUP DISCUSSIONS**

#### **Introduction**

This is a guide for the Focus Group Discussions (FGDs) for Young People who are part of FSP interventions.

#### **PART 1: GROUP CHARACTERISTICS**

1. How many members of the group in total? .....
  - a) Males ( )
  - b) Females ( )
2. What is the age range of the members? .....
  - a) 15 – 19 years ( )
  - b) 20 – 24 years ( )
  - c) 25 and above ( )
3. How many here have any legal identify documents? If yes, specify the document (*examples include Birth Record, Birth Certificate, NRC*)
  - a) How many males have? ( )

- b) How many females have? ( )
4. How many are in formal learning institutions?
- a) Secondary schools? ( )
  - b) Trades Schools? ( )
  - c) Colleges? ( )
  - d) University? ( )
5. For those who are in school, how many are receiving or have received educational support?  
.....
- a) Received support? Yes ( ) No ( )
  - b) Not received support Yes ( ) No ( )
  - c) If supported, who provides the support? .....
  - d) If supported, what type of support is provided? .....
  - e) If not support, how do you manage? .....
6. How many are knowledgeable about Sexual and Reproductive Health and Rights?
- a) How many males? ( )
  - b) How many females? ( )
7. How many are not knowledgeable about Sexual Reproductive Health and Rights?
- a) How many are males? ( )
  - b) How many are females? ( )
8. How many know where to access safe and affordable contraceptives from? .....
9. How many have accessed and used safe contraceptives? .....
10. How did they acquire this knowledge about safe contraceptives and where to access them from?  
.....
11. How many have tested for STIs and HIV before?
- a) Males ( )
  - b) Females( )
12. How common are pregnancies among those still in school? .....
13. Are there any harmful traditional practices which the group is aware of? If yes, what are those?  
.....
14. How many are aware of the prevention of sexual harassment and violence? Any examples of such?

### C. QUESTIONNAIRE FOR CARE GIVERS

This group consists of care givers. These are the people that provide care to the beneficiary children in their homes.

#### PART 1: RESPONDENTS' DETAILS

1. What is the Care Giver's age range?

- a) Below 30 ( )
  - b) 30 – 39 ( )
  - c) 40 – 49 ( )
  - d) 50 – 59 ( )
  - e) 60 – 64 ( )
  - f) 65 and above ( )
- 
- 2. What is the Care Giver's age sex? Male ( ) Female ( )
  - 3. What is the Care Giver's main preoccupation (source of livelihood)? .....
  - 4. Is this what the Caregiver was relying on for survival even before FSP? Yes ( ) No ( )
  - 5. If No to question 4 above, what was the main source of livelihood before? .....
  - 6. Has there been any difference about your household level income between now and before FSP?  
Yes ( ) No ( )
  - 7. If yes, what is it that you are able to do now that you could not afford before FSP? .....
  - 8. What is the Care Giver's family size? ..... Boys ( ) Girls ( )
  - 9. Does the Care Giver has any orphans? Yes ( ) No ( )
    - a. If yes, how many are double orphans? Boys ( ) Girls ( )
    - b. How many are single orphans? Boys ( ) Girls ( )
  - 10. Does the Care Giver has any vulnerable children other than orphans?
    - a. If yes, how many are they? Boys ( ) Girls ( )
    - b. How many have physical disabilities? Boys ( ) Girls ( )
  - 11. How many of the children under the Care Giver's care are in school? Boys ( ) Girls ( )
  - 12. Does the Care Giver receive any help towards the support of the children under his/her care? Yes ( ) No ( )
    - a. If yes, what kind of support? .....
    - b. Who provides this support? .....

## PART 2: HOUSING SITUATION AND OTHER SUPPORT ISSUES

- 13. What type of a house does the Care Giver has?
  - a. Town house (permanent structure)? Yes ( ) No ( )
  - b. Semi-permanent? Yes ( ) No ( )
  - c. Built of temporary (traditional) materials? Yes ( ) No ( )
- 14. How many bed rooms does the house have? .....

15. What is the source of energy (e.g. for lighting and cooking)? .....
16. Is there a separate cooking space (kitchen) or it is within the house?
  - a. Separate cooking space? Yes ( ) No ( )
  - b. Kitchen is within the house? Yes ( ) No ( )
17. Where do you get water from (source)? .....
18. How far away from home is the water source? (*in walking time, or approximate geographical distance*).....
19. How often is water available?
  - a. 24 hours supply? Yes ( ) No ( )
  - b. Less than 24 hours but above 6 hours supply? Yes ( ) No ( )
  - c. Below 6 hours supply? Yes ( ) No ( )
  - d. If supply is intermittent, what time of the day/night does water come? .....
20. Is there a toilet that the household uses? Yes ( ) No ( )
  - a. If No, how do members of the household help themselves? .....
  - b. If yes, is it a shared toilet (communal)? .....
  - c. If it is shared, how many households or people share this toilet? .....
21. Does this household receive any support from Government? Yes ( ) No ( )
  - a. If yes, what kind of support? .....
  - b. If yes, is that support adequate? Yes ( ) No ( )

#### **D. INTERVIEW GUIDE FOR SOS FSP STAFF**

This interview is targeted at SOS FSP Staff.

##### **PART 1: PERSONAL PROFESSIONAL DETAILS**

1. Sex of Respondent Male ( ) Female ( )
2. Position.....
3. Respondent's duration of Service with SOS Villages Zambia.....
4. Respondent's duration of Service in the current position.....
5. What is the respondent's role in FSP? .....

##### **PART 2: STRENGTHENING FAMILY PROGRAMME INFORMATION**

6. What is FSP all about? That is, its main goal and who it is targeting?

7. Who are SOS Zambia's main partners in this programme and what is each partner's role in the programme?
8. What would you consider to be the major changes (improvements) attributed to FSP from the time the programme started to date?.....
9. What major challenges have been observed in the course of implementing FSP?
10. What has been done to address the identified challenges?
11. What key lessons has SOS Villages Zambia learnt from the ongoing implementation of FSP?
12. What government policy or policies or strategies is FSP interventions addressing?
13. Are there any policy advocacy strides that can be attributed to the implementation of this programme? Please, specify.
14. In your view are there any indications to suggest that the programme interventions will continue even after the closure of the programme? If so, please specify the indicators.

#### **E. INTERVIEW GUIDE FOR PARTNERS**

This interview guide is aimed at soliciting some responses from programme partners.

##### **PART 1: PARTNER'S DETAILS AND PROGRAMME IMPRESSIONS**

1. What is the name of the partner?.....
2. Is the partner a local (national) or international entity?
3. In which areas is the partner collaborating with SOS Village Zambia?
4. When did the partner get involved in this programme? (for how long now)?
5. What is the partner's main role(s) in FSP?
6. What is the partner's main impressions about the implementation of the programme in view of the programme objectives/targets and the status quo?
7. Are there challenges, if any, the partner has observed in programme implementation?
8. If yes, what challenges are those?
9. If yes, what recommendations does the partner have in response to the identified challenges?
10. Are there any lessons the partner has extracted from programme implementation? If so, please specify.
11. What motivated the partner to collaborate in this programme?
12. How would you describe the chosen implementation modalities under this programme in terms of:
  - a. Efficiency?
  - b. Effectiveness?



- c. Sustainability?
- d.

## **F. INTERVIEW GUIDE FOR GOVERNMENT PARTNERS**

All interventions by various humanitarian and development partners are aimed at supplementing government efforts whose mandate it is to ensure the issues being addressed by these partners receive due attention. This guide is targeted at government authorities.

### **PART 1: GOVERNMENT AGENCY DETAILS**

1. What the name of the ministry under which this agency falls?
2. What is the name of the department represented here?
3. What is the position of the respondent?
4. Sex of the Respondent? Male ( ) Female ( )
5. For how has the respondent been in this position?
6. What is the mandate of the respondent's department or ministry with reference to the Family Strengthening Programme objectives?
7. What has been the role of the respondent's department/ministry in the implementation of the programme?

### **PART 2: GOVERNMENT IMPRESSIONS ABOUT THE PROGRAMME**

8. How would you describe the performance of the programme from inception to date in terms of changes, if any, that may have occurred as a result of this programme?
9. Are there any negative impacts you may attribute to this programme? If so, specify;
10. Have you observed any challenges encountered in the course of programme implementation? If yes, please specify;
11. If yes, how do you recommend these challenges should be addressed and by who?
12. Are there any other ways do you think the objectives of the programme could have been addressed other than the current modalities? If so, please specify;
13. What do you think about the prospects of sustainability of programme interventions beyond the current funding or project life cycle?

## Annex 3: Interview Guide Questions for Orientation and Training Sessions

### Instructions to the Interviewer:

This is an Interview Guide only but can also serve as a questionnaire for respondents. The Interviewer should ensure the following steps are undertaken and made known to the respondent:

1. The interviewer introduces themselves and the purpose of the interview (i.e., review of the Family Strengthening Programme).
2. The interviewer asks the respondent to introduce themselves, their role and provide contact details (phone, e-mail only).
3. The interviewer informs the respondent of confidentiality and non-disclosure rules (that the respondent's identity will not be revealed and all information will be kept confidential)

### Introduction instructions

**Total participants required:** 10 (max 12)

**Total focus group time:** 2 hours

**Break:** 10 minutes

### Equipment Needed:

- ☒ *Paper and Pens for Everyone*
- ☒ *Markers*
- ☒ *Cards for Names Participants Want to Use*
- ☒ *Recording Equipment*

### INTRODUCTION [5 min]:

Good morning. My name is \_\_\_\_\_, and I am the facilitator for this discussion on the achievements of the Family Strengthening. First, I want to thank you all for taking the time to be with us today.

We will be discussing your thoughts and ideas about the achievements of FSP. Our discussion will provide guidance needed for us to prepare a Review Paper. Before we begin, I'd like to explain what a focus group is and then give you some information about this specific focus group. As some of you probably already know, a focus group is like a discussion group. In a focus group, people are asked to discuss their thoughts and ideas about a subject.

I'll introduce a subject by asking the group a question. There are no right or wrong answers to the questions. What I am looking for is an informal discussion about how people think or feel. I encourage you to just jump into the conversation with how you feel about the subject I bring up or about other people's responses. Just like there is no right or wrong response, there is also no single opinion for any subject. I am interested in hearing what each of you think and feel about each topic. The more points of view, the better for our future plans for the district. In order for this group to be as engaging as possible for everyone, there are a few "ground rules" I am hoping we can all agree to before getting starting. {Review ground rules}

- (1) Please consider turning off your cell phones during the discussion or at least put them on silent.

- (2) Please try to protect each other's confidentiality (feel free to share what you heard here but don't link it back to someone outside this group). Some of you may know each other. Even if you do, please respect each other's privacy and confidentiality by not mentioning each other's presence in the group to other people. It is important that people respect each other's decisions to share or keep this information private from others.
- (3) Please respect each other and each other's opinions. There are no incorrect ways to feel or think here and we want to encourage everyone to have the opportunity to share.
- (4) Finally, please try to speak one at a time, so we can listen to what other colleagues have to say. This will also make it easier to transcribe our discussions accurately.

Are there any questions or concerns about these ground-rules? Can we please go around the room and each person please let me know if these rules are something that you can commit to following {Take the time for each participant to confirm that they agree to these group rules}

All of the information from our group will be kept confidential and will be only reviewed by professionals on the team, and any presentation of results based on these groups would never identify anyone here today by name or anything else that would give someone's identity.

Does anyone have any questions?

Before we start, let's begin by getting to know a little about each other, can we please go around the room and introduce our selves.

## Annex 4: Interview Guide – Key Questions for Focus Groups and Key Informant Interviews

The following are generic questions that should be carefully studied by all Research Assistants and Supervisors.

### A. Impact

1. Have the project interventions had unintended negative and/or positive impacts on the beneficiaries?
2. What changes in the quality, quantity and types of activities, especially capacity building and awareness raising, can lead to an increased positive impact on the lives of the targeted beneficiaries?
3. To what extent was gender mainstreaming included in project activities related to capacity building and awareness raising activities?

### B. Sustainability

1. Has the project promoted a culture of ownership of project activities as evidenced by contributions by various stakeholders?
2. To what extent has the intervention helped to ensure access to education, health and social protection in such a way that it lasts after the end of the project support?
3. What could be done in order to ensure that the positive effects of the project can be continued after the project has concluded?
4. What were the major factors which influenced the achievement or non-achievement of sustainability of the project?
5. How likely are the effects to last after the intervention ends?

### C. Relevance

1. To what extent is the intervention still relevant?
2. To what extent have the (original) objectives proven to have been appropriate for the intervention in question?
3. How well do the (original) objectives of the intervention (still) correspond to the needs?
4. How well adapted is the intervention to subsequent technological or scientific advances? (N.B. Could include issues related to the specify policy e.g., social, environmental or to implementation, reporting and compliance)

### D. Effectiveness

6. What have been the (quantitative and qualitative) effects of the intervention?
7. To what extent do the observed effects link to the intervention?
8. To what extent can these changes/effects be credited to the intervention?
9. To what extent can factors influencing the observed achievements be linked to FSP intervention?

### E. Efficiency

1. To what extent has the intervention been cost effective?
2. To what extent are the costs of the intervention justified, given the changes/effects it has achieved?
3. To what extent are the costs associated with the intervention proportionate to the benefits it has generated?
4. What factors are influencing any particular discrepancies? How do these factors link to the intervention?
5. To what extent do factors linked to the intervention influence the efficiency with which the observed achievements were attained?
6. What other factors influence the costs and benefits?

7. How proportionate were the costs of the intervention borne by different stakeholder groups, taking into account the distribution of associated benefits?
8. If there are significant differences in costs (or benefits), what is causing them? How do these differences link to the intervention?
9. How timely and efficient is the intervention's process for reporting and monitoring?

**F. Utility, Coordination, Equity and Acceptability of FSP Intervention**

1. To what extent do the changes/effects of the intervention satisfy (or not) stakeholders' needs?
2. How much does the degree of satisfaction differ according to the different stakeholder groups?
3. To what extent is the intervention organised to maximise joint effects, e.g., by mobilising resources combined with harmonising measures?
4. how fairly are the different effects distributed across the different stakeholders / region? / Gender groups? / Social groups?
5. To what extent can we observe changes in the perception of the intervention (positive or negative) by the targeted stakeholders and/or by the general public?

**Annex 5: List of SOS Zambia Participants**

S/N	Name/Position	Institution
1	Adrien Nkhandela/ National Director	SOS Zambia
2	Peter Mutale/Fund Development Manager	SOS Zambia
3	Dongo Ndhlovu / Head of Programmes	SOS Zambia
4	Petronella Chindumba/ Brand and Public Relations Officer	SOS Zambia
5	Rabeca Ngulube / Child Protection Officer	SOS Zambia
6	Muule M Monga/National Gender and Advocacy Officer	SOS Zambia
7	Fista Nkhoma/ National Office Accountant	SOS Zambia
8	Patricia Chilanga/ Head Family Strengthening Programme	SOS Zambia
9	Pamela Mwila /M&E Adviser	SOS Zambia
10	Gift Nalumba/ Procurement Officer	SOS Zambia
11	Chriss Muntanga / Regional Programmes Manager	SOS Zambia/ Southern Region
12	Ireen Phiri/Regional Programmes Manager-	SOS Zambia /Lusaka Region
13	Elaston Lungu/Procurement	SOS Zambia
14	Paul Katati/Regional Programmes Manager	SOS Zambia/Copperbelt Region
15	Haimbe/Community Mobilizer	SOS Zambia Southern Region
16	Kashika Community Mobilizer	SOS Zambia Lusaka Region
17	Nawa Mwala/ Social Worker Palabana Community	SOS Zambia Lusaka Region
18	Osward Mutapa/ FSP Coordinator	SOS Zambia Southern Region
19	Lameck Hakanomba/Human Resources and Administration	SOS Zambia

## Annex 6: Key References

- FSP Evaluation Study Report, 2019
- The Annual Plan & Budget
- Multiyear plan & FSP Joint Results Framework
- Quarterly Financial Reports
- Bi-Annual progress report
- Monitoring plan
- Any relevant reviews/ evaluations / self-evaluations
- SOS Zambia NORAD Application 2020-2024 17.09.2019
- Ministry of General Education (2018) Educational Statistical Bulletin, 2017. Lusaka.
- Central Statistical Office (2018) Zambia in Figures. Lusaka.
- UNFPA (2017) Child Marriage in Zambia
- Briefing Paper on program direction strategy 2030: focus in family strengthening
- FSP Principles Manual Working paper 2007)
- United Nations Sustainable Development Goals (SDGs)
- SOS Children's Villages International "Care for Children is Care for Development" policy
- SOS Children's Villages International Strategy 2030