

**Independent
Catholic Relief Services
One-Year Post-Tsunami Impact Assessment**

**Country Report
India**

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TABLE OF CONTENTS

Acknowledgments	i
TABLE OF CONTENTS	ii
Acronyms	iv
Executive Summary	1
Main Findings	1
Recommendations	5
PART I: BACKGROUND	7
1. Introduction	7
1.1 Objective of the Assessment	7
1.3 CRS Operations and plans	7
1.4 County context	8
PART II METHODS	8
2. Assessment Methodology	8
2.1 India Assessment	8
2.2 Assessment Process	9
2.3 Methodological Concerns	10
2.4 Data Analysis	10
3.1 Engagement	11
3.2 Factors Contributing to a Successful Response	11
3.2.1 Co-ordination and Planning	12
3.2.2 Management	12
3.2.3 Sustainability	12
3.2.4 Existing Networks and Partnerships	13
3.2.5 Minimum Standards	13
3.2.6 Initial Assessment	13
3.2.7 Targeting of Aid	13
3.3 Challenges	14
3.3.1 Human Resources	14
3.3.2 Technical Support	14
3.3.3 Coordination and planning	14
3.4 Recommendations for Improvement of Emergency Response	14
3.4.1 Country Level	14
3.4.2 CRS level	15
PART III: SECTORAL OUTCOMES	15
3.5 Overview	15
3.6 Shelter and Infrastructure Reconstruction (SO1)	15
3.7 Water and Sanitation	17
3.8 Livelihoods	20
3.9 Disaster Preparedness (SO3)	22
3.10 Women and Children (SO 2)	23
3.11 Crosscutting Programs	24
3.11.1 Mental Health Expected Results	24
3.12 Do No Harm	26
3.13 Community Cohesion	26
3.14 Community Building	27
3.15 Management, Coordination and Financial Findings	27
3.16 Effectiveness	27

3.17 Relevance and Appropriateness	27
3.18 Coordination and Collaboration	30
3.19 Sustainability.....	30
PART IV CONCLUSIONS, LESSONS LEARNT, RECOMMENDATIONS.....	31
Recommendations:.....	32

Acronyms

ASSS	Alleppey Social Service Society
CFW	Cash for Work
CI/ India	Caritas India
CI	Caritas Internationalise
CR	Country Representative
CRS	Catholic Relief Services
DSSS	District Social Services Societies
HBC	Home Based Care
ESSS	Ernakulam Social Service Societies
ESPERo	CRS's Tsunami Strategy Document
FGD	Focus Group Discussions
ICT	Information Communication Technology
IR	Intermediate result
KSSS	Kottar Social Services Society (Tamil Nadu)
KSSS	Kollam Social Service Society (Kerala)
M&E	Monitoring and Evaluation
MIS	Management Information System
MOU	memorandum of understanding
MSSS	Madras Diocesan Social Service Society
NGO	Non Governmental Organisation
PMSS	Pondicherry Multi Purpose Social Services Society
PSO	Partner Support Officers
SAMSSS	South Arcot Multipurpose Social Service Society
SHG	Self Help Group
SOA	Special Operations Appeal
SO	Strategic Objective
TDY	Temporary Duty
TMSS	Tanyarvur Multi Purpose Social Services
TSSS	Trivandrum Social Service Societies
VDSS	Vishakapatnam Diocesan Social Service Society

Executive Summary

The devastation of the December 2004 tsunami cost India an estimated USD 2.2 billion in economic losses, with concomitant social impact. Fishing represented 60 percent of the livelihoods disrupted, followed by trading, farming, and informal labor. Along coastal areas 12,000 hectares of land were lost, salt farming was devastated, and many villagers lost most of their assets. In this context Catholic Relief Services (CRS) designed its *Enabling Strategies for Protection, Empowerment and Resilience (ESPERo)* strategy to rebuild tsunami-affected communities over an initial 5-year period. Moving from immediate relief into a transitional and development phase, CRS/India provided support on seven of the eleven original Special Operation Appeal (SOA) diocesan social service society partners, in Kerala Quilon, Tamil Nadu, Andhra Pradesh and the Andaman and Nicobar Islands.

CRS India completed the immediate relief phase in April 2005. Immediate livelihood inputs were largely distributed, but shelter reconstruction remained a priority. The Bhavishya Children's Program, implemented in the early part of 2006, was the building block for future work to counter women and young girl trafficking and child labor. By the end of 2005 CRS was introducing the concept of "resilient communities" to the partners through a number of initial training courses. Disaster preparedness activities were to follow this training.

In January and February 2006 CRS conducted a formative impact assessment of its tsunami interventions in India to provide staff with feedback on program delivery, including the impact of the initial response on beneficiaries, set the stage for the current program response, and identify issues for future program direction in India, in addition to informing CRS response to emergency situations overall. The assessment considered the current stage of the efforts rather than the goals or strategies.

Main Findings

Overall, the individual experience reported by the beneficiaries of CRS tsunami programs in areas of India visited during the assessment was positive. Villagers across the affected communities reported being on the road to recovery and coming together after the disaster with a new sense of unity. The formation of village development committees and increased exposure to government officials has led to a sense of empowerment. With the support of the partners, the villages have begun to discuss how to address development issues as a community. Table 1 below outlines some of the main findings of the assessment that should be addressed in the immediate future.

Table 1 Main findings of 1-year impact assessment of CRS tsunami response in India

Issue	Main finding	
	Results	Opportunities and challenges
Initial response	<p>CRS management took a decentralized approach during the initial emergency period, giving budget authority to the CRS State Offices. This enabled the field staff to start planning at an early stage. CRS was recognized and respected by government bodies because staff were able to act quickly and speak with authority. The initial response team deployed had worked in previous disasters, and partners had existing networks. These factors contributed to a</p>	<p>Cases of weak planning among partners resulted in less than efficient use of resources, and sometimes implementation took place through trial and error.</p> <p>More technical support could have been provided to the field staff.</p>

	successful initial intervention.	
Shelter	<p>Construction of permanent housing is at the early stages of implementation, with 9% of units completed. The interim target for housing construction was 850 by December 2005. As of February 2006, 232 houses, or 27%, of this target had been completed.</p> <p>CRS has taken the initiative to improve existing transitional shelters. Beneficiaries reported the following progress:</p> <ul style="list-style-type: none"> • Cooking facilities in the community kitchens have improved greatly, although access seemed to depend on the location of beneficiaries in transitional shelter complexes. • Community gardens, improved flooring, and supply of fans have improved the living arrangements. • Families living in the transitional shelters have become more aware of their rights. 	<p>In the Andaman and Nicobar Islands, housing construction was slowed primarily by government delays. Delays in land allocation by the government were a significant factor in Andhra Pradesh, Kerala, and Tamil Nadu; even after land was allocated, problems arose with leveling, water access, and quality. Some families could be living in transitional shelters for an additional 1–2 years because of the slower- than-expected resettlement of families in permanent housing.</p> <p>The degree of beneficiary participation in housing reconstruction varied in the sites assessed, from being told about plans to active involvement and delegation of decision-making power.</p>
Water and sanitation	<p>Where permanent housing has been constructed, water and sanitation facilities have been installed.</p> <p>By February 2006 the Andaman and Nicobar islands had reached over 94% of their targets for water tanks. Andhra Pradesh did not have a target for water installation. Kerala had only achieved 33% (66) of its overall target of 584 tanks but had cleaned and rehabilitated 100% of its water targets. Tamil Nadu had exceeded its target (200 tanks) by 18% (235 tanks).</p> <p>Focus group discussion participants reported that awareness raising activities had resulted in the following positive behavior changes in sanitation and health practices in a number of communities:</p> <ul style="list-style-type: none"> • A shift from open defecation to the use of sanitation facilities • Realization of the need to boil water • Hand washing before eating • Keeping houses and surroundings clean • Placing lids on water tanks to avoid contamination. 	<p>Maintenance of water and sanitation infrastructure and adequate water supply remain challenging. Where access to water and sanitation was limited, focus group respondents cited the following causes:</p> <ul style="list-style-type: none"> • Lack of maintenance of facilities provided • Inadequate drainage • Lack of water to maintain and clean the facilities • Delivery of water tanks at inappropriate times <p>Main issues for sanitation design include inappropriate design of toilets and lack of privacy.</p>
Women and children	The Bhavishya initiatives had a positive impact on children and the wider community, helping to normalize the	Women have started to move out of the home and form groups that have given them a sense of empowerment. However,

	<p>situation and increase children's confidence. The children's groups also involved children from the surrounding community who were not directly affected by the tsunami.</p> <p>Women in self-help groups consistently reported that they had gained greater awareness, a sense of unity, and confidence since joining the groups. Women's social standing had also increased in the community. The men, who benefited from their wives being part of the self-help groups, recognized this status. After joining groups women reported that they were able to save money and were less dependent on their husbands. When asked what they spent the money on, respondents commonly mentioned children's education, medicine, or savings.</p>	<p>there is little evidence at this stage of their involvement in wider decision-making processes. The focus of the partner in the coming year is to animate the self-help groups, facilitating and supporting women taking decision-making roles in the village.</p>
<p>Livelihoods</p>	<p>The vast majority of livelihood inputs, such as the distribution of boats, engines and nets have now been completed. The distribution and increased ownership of new fiberglass boats and nets has enabled fishermen to restore and even improve their livelihoods.</p> <p>Another partner carried out a market survey of local businesses to identify their needs. Training was then provided to local youth, who were placed in those businesses. The project increased the skills of the beneficiaries through training but also gave them vital work experience, placing them in a good position to enter the job market. Some were subsequently employed in paid work.</p> <p>Individual examples were evident across some of the partners of alternative livelihoods. Some partners were also involved in setting up programs to help fishermen organize into cooperatives so that they can earn more money by bypassing middlemen and selling their fish directly in the market. This study was unable to evaluate the success of these marketing initiatives.</p> <p>CRS has exceeded its targets for setting up self-help groups. All members experienced an increase in income that gave the respondents a sense of great pride, although all were still earning less than the minimum wage of 80 rupees a day. Members of the groups consistently reported becoming more aware, confident, and unified. Many said they were able to save approximately Rs.100</p>	<p>Because self-help groups were formed as part of the livelihood intervention, the initial focus was finance. Consequently in Tamil Nadu and to a lesser degree in other sites the reasons given for initially joining the groups was financial. In Kerala and Tamil Nadu, respondents were asked about other plans they had in the groups. Most mentioned thrift activities and were not forthcoming on community development issues. Although the operational context differs across the states, the challenge for the partner is shifting the present thrift groups to becoming platforms for the community resilience initiative. Ongoing partner inputs and animation are required to help the groups move to the next phase of self-reliance to act as change agents in the community. The challenge faced by the partners is the desire of the government and NGOs to channel funds through self-help groups when the partners' goal is to promote the groups as vibrant village-level institutions, which will not have an immediate financial benefit.</p> <p>The issue now in the communities, reflected in the responses of most interviewees, with district collectors and other government officials and number of FG respondents is the desire for alternative livelihoods and improving the fishermen's ability to market and sell their catches.</p> <p>Various partners have provided skills training in areas such as tailoring. Beneficiaries reported that they were not consulted about the type of training they would receive. Although the training helped</p>

	per month..	the attendees gain confidence, they did not see any possibility of earning additional income from these skills. Where the beneficiaries were able to gain some employment, it was often below the minimum wage, although the beneficiaries had a sense of pride and achievement in earning as it was an increase.
Disaster preparedness	Partners have begun training for community-based disaster preparedness (CBDP). The courses are linked in the overall CRS strategy of building community resilience community. To date, the various programs are operating independently.	
Mental health	Beneficiaries recognized and appreciated the support and counseling they received from partner staff. Partners also reported new levels of awareness of mental health issues in the community. Partner field staff say this has reduced the stigma traditionally associated with mental health problems.	Partners focused on psychosocial support to varying degrees. The community risk mapping adopted by CRS was new to some of the partners, which held different views of its value. The Saarthak final evaluation report states that it was difficult to convince the partner organizations to focus on the broader concept of psychosocial interventions.
Management and coordination	<p>Effectiveness The CRS partner support officer (PSO) structure, put in place in the first couple of weeks after the tsunami, received positive feedback from the partners. In the initial response period, each partner had support officers in the diocese to support them. Other donors did not offer this type and level of support.</p> <p>Relevance and appropriateness Most of the partners and respondents in the focus group discussions felt that families on the lists deserved aid, but that the names of other deserving families had not been included.</p> <p>Coordination and collaboration The partners were involved in continuous coordination with the government, particularly in the Andaman and Nicobar Islands. The government was often cited as contacting the partners to ask them to work on certain issues.</p>	<p>MIS project tracking sheet The current project tracking sheet is not consistent with what is monitored (IRs, outcomes, activities, and goals for the initial response set out in the strategy document). Information provided by partners is in most cases at the level of activity or output monitoring.</p> <p>MIS verification of existing numbers CRS monitoring staff feel they are unable to verify the accuracy, source, and reliability of information from the partners in the monthly reports.</p> <p>MIS/partner M&E systems The existing partner MIS cannot adequately evaluate either the IRs or program impact.</p> <p>Sustainability Apathy, dependency, and high expectations of aid were found in the assessment of CRS/India tsunami relief operations. Beneficiaries depend on NGOs, the government, and self-help groups for banking services (although they also go to money lenders). Villagers ask NGOs for help rather than seeking local longer-term solutions. Dependency varied across states but was particularly evident in Tamil Nadu.</p>

Recommendations

1. Initial Response

- **Ensure that the Emergency Core Team has a full range of technical and management skills** such as in logistics procurement support and water and sanitation.
- **Train partner staff in systemic planning.** Analyze staff skills to determine competency to meet emergency needs and identify staff best equipped to do the job.
- **Strengthen communication systems at the community level** to better disseminate information on CRS activities through established structures. CRS can be instrumental in creating links between communities and local government to ensure that communities know their rights and are able to demand them from their government.
- **Develop off-the-shelf rapid assessment tools.** Have standard assessment tools in place before an emergency to ensure that all technical issues are covered and assessments are more efficient.
- **Provide adequate technical support to field staff.** Adequate technical support is needed to ensure that field staff decisions are based on access to and use of correct information.

2. Shelter

- **Increase beneficiary participation in shelter planning and construction.** Partners should advocate with the district collector to let beneficiaries know from the beginning which houses will be allocated to them. This knowledge motivates families to be involved in planning and construction and enables partners to forge better links between builders and individual families and transfer decision-making to the beneficiaries.

3. Water and Sanitation

- **Ensure maintenance of infrastructure.** Partners should revisit the committees set up to manage and maintain sanitation facilities to determine whether they are operating and, if not, why not. Where there are no committees to manage these facilities, partners should look into setting them up, where possible building on existing self-help groups.

4. Women and Children

- **Implement child labor/child protection policy beyond awareness raising.** Investigate the root causes and provide relevant input to children and their families

5. Livelihoods

- **Develop needs-based skills training linked with local business needs.** Partners should deliver tailored, needs-based, demand-driven training to beneficiaries by 1) creating formal links with local training institutions or 2) providing grants or other support for people to enroll in longer-term courses. Partners should provide follow-up support and career guidance to individuals and groups attending training courses.

6. Mental Health

- **Build the resilient community concept.** Increased emphasis needs to be placed on psychosocial issues with the partners to form the building blocks for the CRS resilient community strategy. The support provided by Saarthak needs to be expanded and extended to other partners. CRS should provide ongoing, extensive input to ensure that the approach is internalized. Challenges and issues brought up in the Saarthak final evaluation should be addressed in future training programs and rolled out to the remaining partners in the coming 6 months.

7. Management Information System

- **Provide M&E training** for CRS staff responsible for data collection and analysis.
- **Verify existing data provided by partners.** Data verification should be part of wider M&E capacity building for CRS and partners and linked to the capacity building program.
- **Build partner capacity in monitoring and evaluation.** A brief needs assessment of immediate partner needs and skills gaps should form the basis for M&E training. The training program should be linked with the development of partners' own M&E systems.
- **Conduct a baseline assessment.** The baseline can be used to evaluate program progress. To minimise work, data from the existing village-level assessment completed as part of proposal development should be collated and analyzed. Gaps can then be identified and filled from other data sources or further field data collection. For longer-term development objectives, such as child protection and community resilience, end-of-project reports such as the CRS/ASSIST Bhavishya report can be used as data sources. Where no such reports exist, data need to be collected.

8. Sustainability

- **Manage expectations and dependency issues.** Ensure that the Bhavishya Program and community resilience strategy documents, which focus on community building, include clear and concrete plans to deal with the high expectations and dependency in the communities. These plans should include a checklist to measure the independence and resourcefulness of community task forces in the coming year.

9. MIS System

- **Provide ongoing technical support** from within the country program or from the CRS regional office or headquarters to the Partner Support Officers in each state office to develop a more comprehensive MIS that can verify existing numbers, establish a system to measure progress towards IRs and program outcomes, and compile a baseline assessment.
- **Build partner capacity** to set up equivalent mechanisms at the local level.

10. Resilient Community/Community-Based Disaster Preparedness (CBDP)

- As part of the development of the CBDP plan, CRS and its partners should include a phase-out plan and consider the indicators that should be in place in the community to measure the independence and resourcefulness of the task forces from the outset of the program. These indicators would enable partners to monitor the levels of expectation and dependency in the villages in the coming year.

11. Alternative Livelihoods: Market Analysis

- As set out in the Caritas Internationalis joint evaluation report, feedback from the Caritas Internationalis Desk Officer's evaluation trip (Feb 2006), interviews, and FGD market analysis, alternative livelihoods needs ongoing support and development. Best practices and lessons learned could be drawn from the SAMSSS market survey

to ensure that training sessions are directly linked to future employment opportunities.

12. Facilitating Market Linkages for Fishermen

- Market analysis has been undertaken by some of the partners. Some partners are working with small groups of fishermen to improve their linkages to the market and increase their income. CRS should expand this focus by providing technical support to the partners to ensure that initiatives are coordinated.

13. Participation in the Housing Program

- The level of participation of beneficiaries varies across housing programs. CRS should work with partners to develop a checklist to ensure an agreed minimum level of involvement in each shelter program and provide goalpost frameworks for each partner.

PART I: BACKGROUND

1. Introduction

Throughout this report, program success and challenges come from the beneficiaries' perspective and are then contextualized with interviews with partners, CRS staff, and other community and government stakeholders.

1.1 Objective of the Assessment

The objective of the formative impact assessment of CRS' tsunami interventions in India was to provide CRS staff with feedback on program delivery, including impact on beneficiaries and the initial response, set the stage for the current program response, and identify issues to consider for future program direction in India, in addition to informing CRS response to emergency situations overall. The assessment considered the current stage of the efforts rather than the goal or strategies. This assessment mainly concentrates on activities relating to Strategic Objective One as these have been the prominent focus of CRS's work over the last year. This assessment does not cover activities that relate to HIV/AIDS and home based care¹ (HBC). The locations where these interventions are taking place are not affected by the tsunami and therefore are not included as part of this assessment

1.3 CRS Operations and plans

The CRS operation is part of a Special Operation Appeal (SOA). The Special Operations appeal (SOA) outlines the joint response by Caritas Internationalis to the tsunami. CRS interventions² form part of this overall effort. Where CRS operates as part of the SOA other Caritas Internationalis interventions are also present³.

CRS India has finished phase one of the immediate relief. Livelihood inputs have been largely distributed as part of the relief phase, but the reconstruction of shelters remains an ongoing focus. The Bhavishya Children's Program⁴, implemented in the early part of 2006, was the building block based on which future work on trafficking and child labor⁵ will take

¹ IR 2.3 Community-based care and support systems are in place for PLWHAs and CAAs in 1,000 communities.

² ESPERo strategy

³ This evaluation examine CRS interventions as part of the wider Caritas Internationalis response to the Tsunami (SOA). This being said, CRS interventions take place in conjunction and along side other input from other members of the Caritas Internationalis network.

⁴The Bhavishya Children's Program. involved setting up children's support groups during the first 6 months of the tsunami response. Children partook in numerous activities and provided with school kits, uniforms, and attended awareness programs.

⁵ IR 2.1: Trafficking and unsafe migration is reduced in 800 communities, IR 2.2; Child labour is reduced in 490 communities.

place. At present, the concept of 'Resilient Community' is being introduced to the partners through a number of initial trainings; from which disaster preparedness activities are then intended to stem.

The goal and strategic objectives (SO's) of the current 5-year CRS strategy are shown below.

Goal: Provide vulnerable communities in the tsunami-affected states of Tamil Nadu, Kerala, Andaman/Nicobar, and Andhra Pradesh with safe, dignified lives.

Strategic Objective 1: *42,500 tsunami-affected families (212,500 persons) have their homes, livelihoods and mental health restored.*

Strategic Objective 2: *1,000 communities (300,000 people) are protecting their women, children and other vulnerable members from trafficking, unsafe migration, child labor, and HIV/AIDS*

Strategic Objective 3: *800 disaster-prone communities (280,000 persons) are prepared to respond to natural hazards*

This assessment attempts to measure the progress towards the intermediate results set out under each of the SO's and impact of activities on the beneficiaries.

1.4 County context

The ability of CRS to respond quickly to the tsunami in India lies, in major part, in its long presence in India (60 years) and its many partners on the ground. In addition to local partners, Caritas partner agencies responded worldwide to the tsunami disaster and a special joint operations appeal (SOA) was established. Caritas Germany was initially the lead external Caritas working with Caritas India, and other Caritas partners contributing and drawing from the SOA.

Other factors acting in favour of a rapid and robust response were the trained staff that could be drawn from other areas in the country where CRS works, including the fact that some may have had experience in responding to recent disasters such as the Gujarat Earthquake, and the Orissa floods. Additionally, CRS could draw upon its experience with livelihood programs, HIV/AIDS, trafficking and child labour programs, among other activities that could complement the relief response and contribute quickly to the recovery phase.

PART II METHODS

2. Assessment Methodology

Field visits were undertaken in India from January 23 to February 13 and in Indonesia from January 31 to February 17, 2006.⁶ Preparations included collecting key documents and a desk study of each country, interviews with CRS staff involved in the initial response phase, design of field questionnaires, assessment methodologies, and training, and circulation of these documents in the field for comment. In-country team members prepared documents, logistics, interviews and field visits.

2.1 India Assessment

The CRS assessment of its internal operations in India built on an earlier Caritas Internationalis evaluation undertaken approximately 9 months after the tsunami. In keeping with evaluation criteria used in other tsunami assessments and the Caritas Internationalis evaluation, CRS took into account the Organization for Economic Co-operation and

⁶ A third country, Sri Lanka, was also included in the assessment and carried out the FGD aspect of the assessment during February.

Development (OECD)/Development Co-operation Directorate (DAC) criteria for evaluating humanitarian aid (effectiveness, efficiency, impact, sustainability, and relevance). The assessment also measured the coverage of programs, policy coherence, and coordination.

The assessment methodology was both qualitative and quantitative. Outputs and outcomes were documented across sectors, and impact on the communities as a whole was measured. The following assessment methods were employed:

- Pre-assessment desk study of available reports, documents, and evaluations and interviews with CRS headquarters staff
- Pre-planning with country evaluation point persons
- Review of in-country documents and field reports
- 48 Focus group discussions (FGD) with beneficiaries, covering all sectors where CRS operates. As well as community recovery and sense of hope, topics included cross-cutting issues such as gender, security and protection, peace building, and civil society and capacity building. FGD were conducted with groups of men, women, and children in sites prioritized according to importance, financial investment, range of program activities, and non-overlap with previous evaluations⁷.
- 2 post debriefing and feedback sessions with focus groups teams
- Collection of 10 success and learning stories from direct beneficiaries (e.g., individuals, cooperatives, NGOs, and village development committees)
- 72 In-country interviews with government officials, CI/ India partners, international NGOs, associations and networks with which CRS works, and so on⁸.
- Site visits by consultants and for interviews and FDG; villages were selected in areas not covered in the earlier Caritas Internationalis evaluation and based on the range of programs they represented.

The assessment was as participatory as possible. CRS staff accompanied the consultants for each part of the evaluation, took part in daily debriefing sessions, were trained to conduct the FGD, translated interviews and the results of FGD, conducted success and learning story interviews, and participated in the FGD feedback sessions and final debriefing.

2.2 Assessment Process

Planning. While most information was obtained during the allotted field time, more time was needed to prepare the tools for the assessment from the country perspective. A larger group of evaluation team members may have been preferable from the start to give the sub-offices more time for preparation and input. From the consultant perspective, 1–3 more days would have made it possible to reach all the beneficiaries targeted for the assessment, allowed a less compressed interview schedule, and given more time to better target questions and reflect on the process.

Interview coverage. More interviews with external agencies, especially international NGOs, and more face-to-face time with local partners and temporary/transitional shelter staff, as well as longer interviews with government officials, would have expanded the amount of information exchanged.

⁷ CRS trained 5 teams of data collectors who carried out 36 FGDs. The FGDs were coded and analysed using NVivo software. The consultant facilitated the remaining 12 FGDs during the field visit. For a list of FGDs see annex 3 and 4.

⁸ As CRS staff was present during the interviews, it is possible that the range and depth of information presented may have been affected.

Capacity building. The entire team in each country, particularly the field staff who conducted the FGD, found the evaluation training positive and the evaluation timely. They felt NVivo training and software useful for this assessment and recommend it for future evaluations.

Control group. The evaluation did not include non-beneficiaries, as coverage of the tsunami-affected beneficiaries was already a large undertaking and cost and time restraints did not allow a more extensive review. In future assessments, however, it would be beneficial to cover non-beneficiaries for a clearer idea of project impact. Some FDG raised the question of conflict with villages that did not receive assistance.

2.3 Methodological Concerns

During the field portion of the assessment, certain issues arose around the conduct of the FGD. It became clear that hiring a firm or asking CRS staff to conduct the surveys without training and supervision would have yielded less than desirable results. Observation and feedback were crucial to the success of the process. The consultant trained all 36 FGD surveyors however, was able to observe four.

Issues that arose included miscommunication between CRS project staff and community leaders and groups about whom to include in each focus group. Because the decision was based on random selection rather than controlled random selection, not all groups were representative of their villages.

The participation of male CRS staff, observers, and facilitators in the women's FGD may have limited the information contributed by the women or biased the results. In many of the FGD the availability of only village communal spaces for the discussions resulted in decreased privacy and required managing additional respondents. In some cases, the consultant needed to cross check the accuracy of information from the FGD. Although communicated to the participants prior to the commencement of the FGD that their response would not affect the assistance that they received; the presence of CRS staff during the FGD was likely to have affected to some degree the honesty of responses and depth and scope of issues discussed. Having a mixed FG team from other CRS state offices present during each of the FGD and/or facilitate the discussion mitigated this risk. One other area where bias may have entered in was in the summarizing the FGD. Ideally, direct transcripts of participants would have been desired for coding.

On an encouraging note, the facilitators applied a creative approach to interviewing children, using games and drawing to reveal their feelings and understanding of certain issues. The resulting information was then discussed with the children, with the facilitators asking questions.

2.4 Data Analysis

As noted, the assessment collected information from a variety of sources in a variety of ways. The analysis summarizes and triangulates the information to ascertain the impact of CRS programs on the beneficiaries and their communities. Information from progress reports, country documents, external evaluations, and other documents was compared with the results of FGD analysis, interviews, and field visits. (Annex 4 lists people consulted.) The consultants then crosschecked gross discrepancies or gaps in information.

Focus group discussions were used for the assessment rather than household surveys to save time and human resources that were already stretched, and reduce the burden on beneficiaries who had undergone multiple surveys. The assessment team used the NVivo software program for a more robust analysis of the FGD results and to facilitate examination across the two countries surveyed. A coder who had trained in Indonesia and coded the Indonesia files coded the India documents as well. CRS/India was happy with the NVivo

process and plans to use this software for semi-annual FGD. Training in the use of NVivo added value to the CRS/India assessment by enabling staff to do the following:

- Track issues covered in FGD year by year
- Develop assay tables to assess partners with positive responses to questions, sustainability, and dependency
- A level of consistency, systematized information, especially that of large scale focus group discussions
- Identify common themes and topics
- Incorporate narrative reports and analyze results month by month

Further develop M&E capacity in the region (CRS took the lead on M&E systems from the post joint evaluation workshop)PART III INITIAL RESPONSE

Beneficiaries received assistance on the second and third day after the tsunami and expressed a high level of satisfaction with the timing, level, and type of assistance they received.⁹ Many of the beneficiaries were unsure about the source of assistance; however the Catholic Church was mentioned as one of the first organisations that came to the assistance of the tsunami victims.

3.1 Engagement

CRS was not working with many partners in Kerala and Tamil Nadu before the tsunami. In the Andaman and Nicobar islands, CRS had no previous relationship with the local Diocese. In Tamil Nadu and Kerala during the initial response period, resources were channelled through partners with which CRS already had memorandums of understanding (MOUs). CRS built relationships with these new partners and later developed separate MOUs. In the Andaman Islands, CRS contacted the local diocese on December 26 to inform them that CRS would support their relief activities.

A draft budget for US\$400,000 was sent from Tamil Nadu on December 27 and immediately approved by CRS headquarters. After the initial assessment, CRS realized more resources were needed and developed a new budget. Initially, CRS operated out of the CI/India office, but at the Bishops' Conference in January 2005, CRS requested to open a new office in Chennai, the capital of Tamil Nadu, where the organization's original office had closed in 1997. Within 8 weeks after the Bishops' Conference in March 2005, CRS then had established its own office.

3.2 Factors Contributing to a Successful Response

A variety of factors contributed to the initial success of emergency operations, including an experienced team that had worked in previous disasters in India (sourced from pre existing informal emergency corps), and strong and experienced leadership in the CRS country program. A clear strength in the initial weeks was the deployment of disaster-experienced staff to work with the partners in Tamil Nadu (worst affected) and the Andaman and Nicobar Islands. Staff were deployed internally from within India from the CRS country and states office. Some of the staff were part of the informal emergency corps of 18–20 people with experience from past disasters, including the Orissa cyclone of 1999 and floods in 2001 and 2003, and had attended Emergency Response team training in Bangkok in December 2002, this informal emergency corps was formalized after the tsunami.

⁹ Affected families also expressed a high level of satisfaction with the timeliness of the response in the first 60 days. (VALID)

In the Andaman and Nicobar Islands, CRS and its partners (ACANI) recruited and trained new staff in the first 3 months following the tsunami. Two CRS staff, one working in education and the other working in tsunami-related livelihood recovery, remained in the diocesan office after 2004. ACANI has become one of the lead agencies on the island, recognized by the Andaman and Nicobar local government.

3.2.1 Co-ordination and Planning

The first action by CRS and CI/India was to hold a meeting with the eight partners and all stakeholders to earmark relief areas, request assistance from the government, and share the initial work (especially in Kerala and Tamil Nadu). This forum lent an important impetus to activities from the beginning. The planning reduced duplication of effort and led to monthly coordination meetings with all the partners and a positive rapport with the local government. During this period CRS/India held a half-day strategic review/planning meeting to reflect the various experiences the first month of the tsunami response. These workshops were then convened every quarter to ensure that staff was able to share and reflect on the best practices and experiences from across the four response areas.

The district collector (local government official) now approaches the partners to discuss planning, something that did not happen before. CRS' collaboration with Caritas Internationalis helped the latter develop a standard system for reporting to all Caritas partners. This helped systematize information and set a minimum reporting standard.

External coordination systems were also put in place. Their success varied, depending in part on the skills of the local government officials. CRS often took the initiative in setting up or improving coordination systems. One example of a successful system was in Nagapattinam, where the dynamic government minister deployed officers in the villages. From the outset of relief activities, this local government was engaged in planning with the NGOs every evening in a meeting at the district administration offices. Later sector-specific groups were set up for mapping responsibilities for different areas.

Prior to the tsunami, many of the CRS partners had not had emergency experience. CRS staff therefore accompanied the partners to meetings. In some cases this was the first time the partners interacted with the government. They were able to formalize and strengthen their relationship with the government through the meetings, particularly in the Andaman and Nicobar Islands. This transformative relationship between partners and the government was noted across the interviews.

3.2.2 Management

Generally, CRS management took a decentralized approach during the initial emergency period, giving budget authority to the CRS State Offices. This enabled the field to start planning at an early stage. CRS was recognized and respected by government bodies because they were able to act quickly and speak with authority.

Generally, reporting lines within CRS were clear. A reporting structure was established so that field staff knew whom to report to and when.

3.2.3 Sustainability

In the initial stages the field staff implemented activities for both emergency relief and longer-term rehabilitation simultaneously. For example, self-help groups were used or established to distribute emergency assistance in the first 3 months and will also be used in the rehabilitation phase as a platform for introducing the concepts of community resilience and disaster preparedness.

Another example was that a CRS Project Support Officer in the field¹⁰ realized from the beginning of the response that the community had to be involved from the onset to encourage their ownership of the program a better practice to ensure longer-term program sustainability. When community members were reluctant to collect debris and refuse because they thought they would receive more assistance if they remained at home, CRS staff tried to motivate them by example picking up the debris themselves and singing songs with the local children.

3.2.4 Existing Networks and Partnerships

The strong widespread response of CRS was due in large part to an existing CRS India office and to the credibility of local partners already embedded in the community. Their ability to speak with authority and an approved budget by CRS gained them a reputation with the government as competent and qualified organizations with which to work.

3.2.5 Minimum Standards

CRS staff who received previous training and experience with Sphere and humanitarian principles reported to have brought to its partners an awareness of these minimum standards and principles impacting the choice of target groups as well other minimum standards. Field staff reported that awareness was not as visible in earlier operations.

3.2.6 Initial Assessment

Initial assessments took place in the first week after the tsunami to identify immediate needs in Tamil Nadu and the Andaman and Nicobar Island. In Tamil Nadu and Kerala, partners already had programs and networks in the affected communities, a fact that aided the initial assessments. In the Andaman and Nicobar Islands, the Diocese had no programs running on the ground, although they did have a presence in the community through the existing church structures. By January 1, CRS had completed the initial assessment in the Andaman and Nicobar Islands. Another more detailed and extensive assessment took place in the second week, covering more of the islands. In Tamil Nadu the initial assessment took place during the first week post tsunami. Linked with these assessments was the development of a strategic framework early in the process that gave further guidance to the overall operation. These factors allowed CRS to be one of the first agencies to respond with substantial, needs-based assistance.

3.2.7 Targeting of Aid

In both the initial response and the recovery period, aid was well targeted to individuals and families affected by the tsunami. In the recovery phase, CRS' partners crosschecked shelter¹¹ and livelihood beneficiaries identified and recommended by the government. Partners and beneficiaries reported that most people on the lists deserved aid, although some needy families were omitted.

The definition of 'tsunami affected' differs across the states. This is most notable in Andhra Pradesh, where the criterion for 'tsunami affected' is related to a village rather than individuals as in Tamil Nadu, Kerala and the Andaman and Nicobar islands. As a result, beneficiaries of housing assistance in Andhra Pradesh may not have had their house destroyed by the tsunami but were still deemed as in need by the local government.

¹⁰ This case was from Tamil Nadu. It is also worth noting that these staff had had previous emergency experience that they brought to the tsunami.

¹¹ Three definitions of shelter are used in emergency operations – temporary shelter (usually tents) for short-term shelter; transitional shelter, meant to last 2-3 years or longer (usually more substantial than tents such as barracks or wooden houses), and permanent shelter – for long-term provision of housing needs. This report focuses on the later two forms of shelter.

3.3 Challenges

3.3.1 Human Resources

The initial team of eight people was sent for TDY of two to three weeks. In hindsight, CRS management felt a higher level of support should have been provided to the partners in Tamil Nadu. They felt they should have brought in a team of 15, sending one or two CRS staff to each of the partners. To move operations faster, TDYers should have been there longer and more staff assigned to partners for longer periods of time.

3.3.2 Technical Support

Although the field staff who had been involved in other disasters pointed out that more technical support was provided after the tsunami than in previous disasters, management felt that it could have provided more.

3.3.3 Coordination and planning

Getting aid to the Andaman and Nicobar Islands posed its own set of challenges¹². These included the limited number of ships with small space allocation, the need for coordination with other agencies who were also pressed to provide high levels of relief, and short deadlines for aid response set by the government.

In the initial response phase CI/India covered Kerala where CRS sent staff one week after the tsunami since the amount of destruction was less compared to other locations. In Andhra Pradesh, the tsunami's impact was also not as profound as other sites in India and there was already an existing CRS Hyderabad state office set up and running which covered the additional demand.

The main challenge in Tamil Nadu was operating in an environment with so many other humanitarian actors and ensuring there was no duplication of effort. CRS took the initiative to set up coordination systems, but some of these systems were weak at either the district or state level and did not coordinate well to mitigate the duplication of resources.

Partner staff did not devote enough time to planning -an issue raised by both field staff and management in CRS and by the partners, particularly in Tamil Nadu. Although partner staff were commended as being committed and motivated, weak planning resulted in less than efficient use of resources. Planning with the government earlier would have enabled CRS to better focus its time and resources. Ideally, CRS' planning process should have taken place at the same time as the government's planning.

Partners began the cash-for-work (CFW) program after approximately 20 days. Some field staff felt that an earlier start, say after one week (and hence an earlier termination of CFW), might have reduced the level of dependency in the communities.

3.4 Recommendations for Improvement of Emergency Response

3.4.1 Country Level

1. **Ensure that the Emergency Core Team has the full range of technical and management skills required in most emergencies;** such as in logistics procurement support and water and sanitation.

¹² The coordination for Andaman and Nicobar rested in the hands of the Central Government but there are many departments involved which was resulting in confusion about final decisions despite the indications of positive government response to NGO assistance in the area (Source: sit reps)

2. **Conduct capacities, risks and needs mapping exercise training** with partners to enable them to identify community capacities, risks and needs.
3. **Conduct more specific resource planning exercises** with experienced logistical staff. The high cost of resources and transportation, and delays in delivery were due to staff inexperienced in logistics.
4. **Train partner staff in systems planning** starting with an analysis of staff skills to identify competences and training needs.
5. **Improve CRS and partner collaboration with the private sector suppliers**, understanding minimum standards, quality control, price control, and accountability mechanisms.
6. **Stockpile emergency response resources** in communities or in the region in preparation for future disasters.
7. **Local purchasing and packaging of Food and NFI.** Where possible, food should be purchased locally to boost the economy, speed response and provide culturally acceptable foods. Obtain NFIs as close to distribution point as possible.
8. **Develop village-level disaster mitigation plans** before an emergency. Establish village disaster management committees to manage disaster mitigation.
9. **Strengthen communication systems at the community level** to better disseminate information on CRS activities through established structures. CRS can be instrumental in creating links between communities and local government to ensure that communities know their rights and are able to demand them from their government.

3.4.2 CRS level

1. **Develop off-the-shelf rapid assessment tools** before an emergency.. Standard tools covering all sectors can make assessments more efficient.
2. **Develop an R&R plan** so that emergency response staff has adequate breaks to avoid burnout.
3. **Provide technical support to field staff** to ensure that field staff's decisions are based on access to and use of correct information.
4. **Carry out a joint interim/baseline assessment** to enhance collaboration and an effective use of material and human resources.

PART III: SECTORAL OUTCOMES

3.5 Overview

It is important to note that the majority of villagers in affected communities report being on the road to recovery and generally offer positive assessments of the CRS tsunami programs. These positive outcomes should, however, be balanced with a number of remaining challenges, such raising unrealistic expectations due to poor donor coordination and questions concerning the relevance of certain forms of assistance. These aspects are examined in greater detail in the specific sectoral analysis.

3.6 Shelter and Infrastructure Reconstruction (SO1)

Strategic Objective 1: 42,500 tsunami-affected families (212,500 people) have their homes, livelihoods, and mental health restored

3.6.1 Expected Results

**IR 1.1: 2,300 displaced families resettled into permanent shelter with access to potable water and sanitation.
Target for December 2005: 850 permanent shelters to be constructed.**

3.6.2 Progress towards primary program objectives

Permanent housing is at the early stages of development, with 9% of units completed.¹³ Additional indicators according to project implementation areas include:

- In the Andaman and Nicobar Islands, construction has not yet started¹⁴.
- In Kerala, of the targeted 124 houses to be constructed, 107 have been completed and 535 individuals were living in the new units by the end of February 2006¹⁵.
- In Andhra Pradesh the construction of housing has started, but by February 2006, no houses had been completed, so no beneficiaries were living in new units¹⁶.
- In Tamil Nadu, 125 houses have been constructed.¹⁷

The interim target for housing construction was 850 by December 2005. As of February 2006, 232 houses have been fully completed (27%). The current monitoring system does not indicate the incremental progress towards housing completion on a monthly basis.

In certain cases¹⁸ house designs allowed for possible future expansion by beneficiaries.

3.6.3 Opportunities and Obstacles

- *Government Delays* - In the Andaman and Nicobar Islands, housing construction delays are primarily due to working with the government. For example, official guidelines for permanent housing were not issued until February 2006. Similar delays have occurred in Tamil Nadu, Kerala and Andhra Pradesh. Government officials reported a lack of 'good' available land and this resulted in delays in land acquisition.
- Delays in land allocation by the government has also been a significant factor in Tamil Nadu, Kerala and Andhra Pradesh. Furthermore, even after land was allocated, problems arose around levelling, water access and quality.

Originally it was expected that families would not be in transitional shelters for more than a year. However, due to delays, including the allocation and clearing of government land, some families could be living in transitional shelters for an additional one to two years. Because resettlement in permanent housing has been delayed, CRS has taken the initiative to improve existing transitional shelters.¹⁹ These improvements have taken the form of building community kitchens, providing fans, concreting shelter floors, developing outside kitchen gardens, and thatching shelter roofs.

CRS shelter program inputs in many cases exceed the government guidelines for both transitional and permanent shelters,²⁰ for example, new floors, fans, and roofs.

¹³ ESPERo Monthly report Feb 2006

¹⁴ ESPERo Monthly consolidated reports Feb 2006

¹⁵ Ibid.

¹⁶ Ibid

¹⁷ ESPERo Tamil Nadu Feb 2006 Monthly Report

¹⁸ Where houses had some space around them, which was more common outside 'urban' boundaries as plots of land tended to be small due to the higher square meter cost.

¹⁹ USAID funded activities, cost shared with ESPERo

²⁰ The Coastal Zoning regulation states that no new houses can be constructed within 500 meters of the sea.

Beneficiary Participation in Housing Reconstruction - Participation ranged from being told about plans to active involvement and delegation of decision-making power.

- *Effect of Community Participation* - Success of the shelter program rests in part on the community approach to planning. Where the levels of involvement were highest, there was evidence the beneficiaries had greater knowledge of construction guidelines and quality control issues than beneficiaries from shelter programs whose involvement was limited²¹.
- *Registration or Ownership of Housing* - In Andhra Pradesh, government regulations state that house ownership should be registered in the name of the wife. This does not seem to be the case in Tamil Nadu and Kerala. If single ownership is not possible in these areas, joint registration of new homes should be encouraged.
- *Lack of Privacy in Transitional Shelters* - The main concern of beneficiaries in transitional shelters was lack of privacy. They noted that family members must all sleep together and poor soundproofing make it difficult for children to complete their studies. Beneficiaries did state, however, that living conditions had improved in the transitional shelters with the recent improvements mentioned above.
- *Social Cohesion* – In the Andaman and Nicobar Islands, the government is allocating houses through a lottery system. The traditional bonds that existed between old neighbours will not necessarily exist in the new communities. This can affect the ability of the community to lobby the government for local improvements and also the formation of new SHGs and the performance of existing groups.

3.6.4 Shelter Sector Recommendations

A. Increase Beneficiary Participation in Shelter Planning and Construction

- Partners need to advocate with the district collector for houses to be built where the beneficiaries know for certain that the house will be allocated to them. Knowing this, families will be more inclined to work on their own house. For partners, this enables them to create better links between builders and individual families from the beginning and so transfer decision-making to the beneficiaries.

B. Facilitate Social Cohesion

- Partners should provide ongoing support to build cohesion in new communities. New social structures are required to support livelihoods and represent community interests to local governments. Ensuring a smoother transition can be in the form of organising community events, such as the launch of the Bhavishya Children's Program, to assist both beneficiaries and receiving communities.

C. Registration of Houses to Women

- Promote registering homes in the wife's name or joint registration of new homes in Tamil Nadu, Kerala and the Andaman and Nicobar Islands

D. Increase Communication

- Partners should ensure ongoing communication with beneficiaries as to housing developments. This can be done through notice boards and/or regular community meetings.

3.7 Water and Sanitation

3.7.1 Expected Results

²¹ Vavardad FGD, and interview with Shelter coordinator and Diocesan director (VSSS)

IR 1.1 2,300 displaced families are resettled into permanent shelter with access to potable water and sanitation

Interim Target	Activities	Target as of Dec 2005	Achieved as of Feb 2006
Increased access to potable water.	# of water tanks installed at temporary settlements	1,502	87%
	# of water points cleaned and rehabilitated	800	225%
	# of affected persons accessing potable water from new/rehabilitated water points	35,000	389%
	# of rain water harvesting structures installed	785	104%
Increased access to sanitation facilities.	# of latrines constructed at transitional shelter sites	1,500	109%
	# of affected persons using latrines	31,500	144%
	# of affected persons who attended hygiene training	52,000	49%
	# of communities effectively disposing their waste	20	55%

3.7.2 Progress towards Primary Program Objectives

Where permanent housing has been constructed, water and sanitation facilities are installed. ²² There are, however, some delays in the houses being connected to water and sanitation services, which is the government's responsibility.

Positive beneficiary feedback on water programs came from approximately 40% ²³ of FGDs, centering on awareness raising activities, which resulted in the following reported positive behavioral changes in sanitation and health practices in a number of communities:

- A shift from open defecation to the use of sanitation facilities
- Realization of the need to boil water
- Cleaning of hands before eating
- Keeping the house and its surroundings clean
- Placing lids on water tanks to avoid contamination.

This shift can be seen as a progression, at least in Tamil Nadu, from the lack of hygiene awareness previously highlighted in the CRS Water and Sanitation report²⁴.

3.7.3 Obstacles and Opportunities

Challenges raised by FGDs around water and sanitation programs came from a minority of FGDs, around 10%²⁵. The key opportunities and obstacles include:

- *Adequacy of Water* - Lack of access to water was not raised as a problem in FGD. In one community, the water supplied could not meet all their needs and was used only for drinking, while ponds and wells were used for washing and other purposes.

²² Refer to progress to primary objectives in regard to shelter above.

²³ The 40% reflects the number of FGDs that highlighted these issues. A minority, approximately 10%, raised challenges (depth and frequency of challenges were not defined)

²⁴ CRS Environmental Impact Assessment of the Water and Sanitation Conditions in the Temporary Settlements of Tamil Nadu 6 Months After the Tsunami. June 2005.

²⁵ The 10% reflects the number of FGD, which highlighted these issues. It does not however illuminate the depth or frequency of the response among the FGD participants. For more information refer to method/constraints section.

- *Maintenance of Infrastructure* - Challenges exist around the maintenance of water and sanitation infrastructure as well as the adequate supply of water²⁶. Where access to water/sanitation facilities were limited, FGD respondents cited the following causes:
 - A. Lack of maintenance of the facilities provided
 - B. Inadequate drainage
 - C. Lack of water to maintain and clean the facilities²⁷
 - D. Water tanks being delivered at inappropriate times

Maintenance of facilities and access to adequate water supply was highlighted in the CRS Water and Sanitation report of June 2005²⁸, ²⁹and although reported by only a small percentage of FGD respondents, remains an issue.

The Caritas Internationalis Desk officer evaluation field trip also reported inappropriately designed sanitation facilities³⁰. This feedback also corresponds with the findings reported by the Tsunami Co-ordination center from research carried out in Tamil Nadu as part of the Total Sanitation Campaign to gather best practice case studies³¹.

Sanitation Design - Main issues for sanitation design include:

- A. Inappropriate design of toilets
- B. Lack of privacy (*"Two or three toilets don't have doors at all now."*)

Only sheep and goats, reportedly, used toilets designed for children. One girl stated, *"There is no water facility available. It is open and you don't have privacy."* Other children said they found it difficult to use the toilets, especially at night or when rain or noise made them afraid to leave the shelter.

²⁶These findings correlate with CRS Environmental Impact Assessment of the Water and Sanitation Conditions in the Temporary Settlements of Tamil Nadu 6 Months after the Tsunami in June 2005 and the Multi Agency (CARE, Oxfam, World Vision) Evaluation of the Tsunami Response in India and Sri Lanka, July 2005.

²⁷ See Aztecan' Kerala FGD

²⁸CRS Environmental Impact Assessment of the Water and Sanitation Conditions in the Temporary Settlements of Tamil Nadu 6 Months After the Tsunami June 2005, "Open defecation has been the routine behaviour- *something people do regularly without a conscious decision*- of fishing people living along the coast of South India, ever since pre-Tsunami days. The men going right on the beach while the women resort to the young casuarinas plantations, has almost been a norm for rich and poor alike. Some households did have an attached ablution space and even the Government is seen to have constructed a number of public toilet facilities. However, lack of hygiene awareness, complete disregard of the utilisation of toilets and absence of initiative and mechanism for the operation and maintenance of community (toilet) infrastructure has led to a continuation of such abysmal practices. Moreover, lack of an adequate water supply at an accessible distance from the toilets is also seen as an impediment to using toilets by those for whom they are meant. Inadequacy of water further leads to open defecation, resulting in groundwater contamination, as is seen in the coastal area. Also, building without understanding the soil's permeability conditions leads to failure of the facilities".

²⁹ It is worth noting following the Water and Sanitation report in June CRS in conjunction with Caritas took corrective actions to address the issues raised and advocated with USAID to issue a new RFA to address wat/san issues specifically. CRS- KSSS were the first to install a fiber reinforced extended septic tank for high water table areas

³⁰ CI Desk Officer Field trip Debriefing Meeting, Breeze Hotel 4th Feb 2006, comments came from Andhra Pradesh team.

³¹ Feedback given at Shelter Co-ordination meeting in the Tsunami Co-ordination Centre 25th January 2006.

3.7.4 Water and Sanitation Sector Recommendations

A. Maintenance of Infrastructure

- Partners need to revisit the committees to manage and maintain sanitation facilities to determine whether they are operating, and where not, determine the reason why. Where there are no committees, look into setting up committees to manage these facilities, where possible building on existing SHGs for this purpose.

B. Delivery of Water

- Engage beneficiaries of temporary shelters in determining the most appropriate time for the delivery of water tanks

3.8 Livelihoods

3.8.1 Expected Results

IR 1.2 12,000 affected families diversify their livelihoods
IR 1.3 30,000 affected families resume their fishing livelihoods

Interim Target	Activities	Target as of Dec 2005	Achievements December 2005
Household livelihoods rehabilitated.	# of fishing boats distributed	1,130	71%
	# of boat engines distributed	940	62%
	# of fishing boats repaired	1,508	108%
	# of fishing nets distributed	1,242	74%
	# of affected families benefiting directly from boat/engine/net distributions and repair	29,600	93%
Household livelihoods diversified.	# of Acres Land reclamation	250	171%
	# of Families benefited from Farm related Activities	480	651%
	# of Families benefited from Other Small Business	108	172%
	# of new women self-help groups (SHG) formed	793	100%
	# of affected persons trained and/or equipped in new vocational skills	4,980	140%

3.8.2 Progress towards Primary Program Objectives

Fishing

Livelihood inputs in the first year centered around the distribution of fishing boats, engines and nets. About 47% of FGDs gave positive feedback on the livelihood inputs they received. The distribution and increased ownership of new fiberglass boats and nets has enabled fishermen to restore and even improve their livelihoods³².

Market Linkages for Fishermen

Individual examples exist of partners working with small groups of fisherman to improve their linkages to the market and increase their incomes. Partners have helped organize fishermen into co-operatives, which enables them to bypass the middlemen and get higher prices.

Insurance for boats

³² Approximately 47% of FGD participants gave positive feedback on the livelihood inputs they received.

The boats distributed as part of the livelihood program also had an insurance scheme covering the boats for 3 years. This has given the fisherman a guarantee and enables them to get back to the manufacturer when faults appear.

Alternative Livelihoods

The issue now in the communities is the desire for alternative livelihoods and improving the fishermen's ability to market and sell their catches. Some partners were involved in setting up programs to help the fishermen organize themselves into cooperatives so that they can earn more money by bypassing the middle man and selling their fish directly in the market. This assessment was unable to evaluate the success of these marketing initiatives.

Another partner carried out a market survey of local business to identify their needs. Training was then provided to local young people, who were given placements in those businesses. The project increased the skills of the beneficiaries through providing training but also gave them vital work experience, placing them in a good position to enter the job market, and some were subsequently employed in paid work.

Some young women reported that they had begun to earn an income after receiving tailoring training. Other alternative livelihoods emerged such as selling compost through developing a wormery, growing algae for food for local livestock and growing mushrooms to sell in the local markets.

Cash for Work

Feedback from focus groups indicated that CFW activities were an opportunity for work when no other options were available, meeting its aim to restart economies. The activities provided income and cleaned up the communities. The average wage was Rs.70–80 per day³³. The activities have shifted over the past year from moving debris to an environmental focus, such as cleaning wells. Where cash for work was mentioned, it was seen positively within the communities. For some women, it was an opportunity to earn an income and be less dependent on their husbands.

Self-Help Groups

CRS aimed to reform and re-establish self-help groups (SHG) through capacity building and restarting economic activities. This activity has been a success. Many SHG began new income-generating activities such as drying fish, making coir ropes, and selling cloth. Some had joined a tailoring business and a bakery group. All experienced an increase in income that gave them great pride, although all were still earning less than the minimum wage of 80 rupees a day³⁴. Members of SHG consistently reported becoming more aware, confident, and unified as a result. Many of the groups said they were able to save approximately Rs.100 per month³⁵. This was the first time that they had been able to save.

SHG are planned to be a platform to introduce the concept of community resilience in the villages as a basis for disaster preparedness activities.

3.8.3 Obstacles and Opportunities

Only a minority of case provided negative feedback. In some cases, the feedback was directly questioning the type and range of inputs they had received; other feedback was more focused on expressing concerns and expectations of the partners in the future. The key opportunities and obstacles include:

³³ Nagapattinam Mottandi Thoppu women FG, Nagapattinam Mottandi women, Colachel men's FGD

³⁴ Reference interviews with women SHG members, See Annex 4 for a detailed list of those interviewed

³⁵ See examples of transcripts from Kottilpadu women's group, Men's marine fishermen group Thiruma,

- *Self Help Groups-*
SHGs were formed as part of the livelihood intervention. Although the operational context differs across the states, the challenge for the partner is shifting the present thrift groups to becoming platforms for community resilience initiatives. Partners' ongoing high levels of input are required for progression towards the next phase of SHGs becoming self-reliant agents of change within their communities. Additionally, when government and other NGO's want to continue to channel funds through SHGs -- the partners focus will be to promote SHG as a vibrant village level institution however these inputs will not have an immediate financial benefit for SHG recipients.
- *Skills training-*
Various partners have provided skills training in areas such as tailoring. However, beneficiaries reported that they were not consulted about the type of training they would receive. Although the training helped the attendees gain confidence, they did not see any possibility of earning additional income from these skills. Where the beneficiaries were able to gain some employment, it was often paid at below the minimum wage. Regardless, the beneficiaries had a sense of pride and achievement in earning as it was an increase from earning nothing before³⁶.
- *Reduction in income-*
Perceptions of income levels varied in Tamil Nadu and Kerala. Fishermen reported a reduction in income since the tsunami which they attributed to a reduction in the catch rather than lack of access to equipment.³⁷
- *Security-*
Fishermen had increased concerns over the security of their boats when they were no longer living next to the beach and able to watch them.
- *Selling of catch-*
Where there was an increased catch, fishermen also felt that they were unable to fully utilize the excess catch due to lack of access to storage facilities.
- *Types of nets-*
There was also feedback that although the numbers of nets distributed were sufficient, the types of nets limited the kind of fish they could catch.

3.8.4 Livelihood Sector Recommendations

A. Design Demand-driven and Targeted Skills Training

Partners deliver more tailor-made, needs-based demand-driven training-courses for the beneficiaries. This could be done through:

- a) partners creating formal links with local training institutions to meet the training needs, or
- b) provision of grants or other types of support for individuals to enrol in longer-term training courses, and/or
- c) follow-up support/career guidance provided by the partners to individuals and groups attending training courses.

3.9 Disaster Preparedness (SO3)

Strategic Objective 3: 800 disaster-prone communities (280,000 persons) are prepared to respond to natural hazards.

³⁶ Sourced from interviews within community members and FGD transcripts

³⁷ Sourced from FGD by consultant, interviews with community members.

3.9.1 Expected Results

IR 3.1 Disaster preparedness systems are in place in 800 communities

IR 3.2 400 communities have accessed government resources to support their disaster preparedness action plans

3.9.2 Progress towards Primary Program Objectives

Training around community based disaster preparedness (CBDP) was just starting with the partners. These training courses are linked into the overall strategy of CRS on building a resilient community. To date, the different programs are operating independently.

In communities in Andhra Pradesh where the partners had already implemented a disaster preparedness program (not part of the SOA funding), there were no deaths reported. Partners reported that communities need at least 3 years for disaster preparedness to take effect: the first 6 months were necessary for the partners to come to grips with the concept and start to work with the communities, the second 6 months for the villages to understand the concept, the second year to roll out the program to the different communities, while the third year's activities focus on ensuring the sustainability of the program. CRS should take this lesson from Andhra Pradesh and when developing its disaster preparedness program.

The ICT centre in Cuddalore provides a number of different services: computer skills training, child education activities, learning over the internet (e-learning), accessing agricultural information for farmers (e-agriculture) and supplying topographical information on possible location of fish shoals. In addition to this, it played a role in developing good governance in the community. One example is enabling the registration of children's births over the internet.

3.9.2 Obstacles and Opportunities

The issue of the sustainability of the Information Communication Technology (ICT) center needs to be addressed. At present, the centre relies on the partner to cover maintenance and other capital costs. There is a possibility that the centre could be funded in future by the local government as part of a wider information technology initiative. As yet, however, nothing has been confirmed.

3.10 Women and Children (SO 2)

Strategic Objective 2: 1,000 communities (300,000 persons) are protecting their women, children and other vulnerable members from trafficking, unsafe migration, child labor, and HIV/AIDS.

3.10.1 Expected Results

IR 2.1 Trafficking and unsafe migration has reduced in 800 communities

IR 2.2 Child labor has reduced in 490 communities

3.10.2 Progress towards Primary Program Objectives

Activities to address trafficking and child labor are taking place in Tamil Nadu and Andhra Pradesh with a focus around raising awareness. They are based on the earlier Bhavishya Children's Program. Children's support groups were initiated by CRS during the first 6

months of the tsunami response. Children were involved in numerous activities and provided with school kits, uniforms, and attended awareness programs.

These initiatives had a positive impact on the children and the wider community, helping to normalize the situation and increase the children's confidence. The children's groups also involved children from the surrounding community, not directly affected by the tsunami.

All of the communities involved in the focus group discussions indicated that there had been increased awareness of the importance of education, including for girls. Communities felt that more children were now going to school and the children were generally better behaved and more aware of their personal hygiene.

One partner has begun to address child trafficking through anti-trafficking events and rallies, and others are identifying vulnerable children within their communities through a risk mapping process. These are the initial steps of dealing with trafficking, child labour and child protection issues.

Women in SHG consistently expressed how they had gained greater awareness, a sense of unity, and confidence since joining the groups including increased physical mobility. They reported increased social status in the community recognized by the men, who benefited from their wives being part of the self-help groups. Other examples of changes in women's status were where a discussant mentioned that women were starting to fish, an activity that was once the sole domain of men, and after joining groups, women were able to save money and were less dependent on their husbands. Although this was not uniform across the program, a range of women across the three states said they had experienced a new-found ability to earn. This gave them spending power within the household and so increased their say in household affairs. When asked what they were spending the money on, respondents commonly mentioned children's education, medicine, or savings.

3.10.3 Obstacles and Opportunities

Trafficking Eradication/child protection Plans-

No clear plans were reported from the partner on how to deal with trafficking and child labour over and above awareness raising. This finding was also substantiated in the Saarthak Final report, March 2006.

Women's Empowerment

Women have started to form groups that have given them a sense of empowerment. However, there is little evidence at this stage of their involvement in wider decision-making processes. The focus of the partner in the coming year is to animate the SHG to facilitate and support women in decision-making roles in the village.

3.10.4 Recommendations for Women and Children

A. Develop a Child Labour/ Child Protection policy

Put in place activities to address child labour expanding beyond awareness-raising, look at the root causes and provide the relevant input to the children and their families.

3.11 Crosscutting Programs

3.11.1 Mental Health Expected Results

IR 1.4: All partner staff are able to understand and respond to the mental health needs of their project participants
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3.11.2 Progress towards Primary Program Objectives

CRS adopted a social model approach over a purely medical model to deal with communities affected by a disaster; the approach looks at social as well as asset risks. The most extensive project was a capacity building project by Saarthak- “Facilitating Resilience”, implemented in tsunami-impacted districts of Tamil Nadu and Pondicherry³⁸. CRS brought in Saarthak, a Delhi-based organisation focusing on the mental health needs of the community, to provide training to the partner on trauma and other psycho-social support issues. Part of the training provided by Saarthak partners in conjunction with village community groups was risk-mapping exercises in the community which enabled the partners to prioritise the most needy. This risk analysis will form the basis for the disaster preparedness activities.

No negative feedback came from the beneficiaries about the psychosocial support they had received. Beneficiaries recognized and appreciated the support and counselling received from partner staff. There was evidence of partner staff identifying needs and risks in the community and linking them to available resources.

Partners also reported new levels of awareness of mental health issues in the community. Partner field staff say this awareness has reduced the stigma traditionally associated with mental health problems.

3.11.3 Obstacles and Opportunities

This section examines evidence from FGD and key stakeholder interviews. The key opportunities and obstacles identified include:

Focus on Psychosocial Support-

The degree of focus given to psychosocial support varied among the partners. The wider social model adopted by CRS was new to some of the partners and consequently, there were different views of its value, which reflects the views in the Saarthak final evaluation report³⁹ stating that it was difficult to convince the partner organizations to focus on the broader concept of psychosocial interventions. They also stated that the rights-based approach and gender equity were difficult concepts to convey and operationalise given that the partner organizations have strong roots in a welfare-based way of working, which is patriarchal.

Integrating programming-

Partners’ programs are structured as stand-alone processes, i.e. shelter, livelihood, in contrast to the integrated approach needed to build community resilience, the CRS community resilience strategy and the actual implementation process.

³⁸ The project was supported by CRS and CARITAS India, and coordinated by TASOSS. Partners for the Capacity building process were:

- PMSSS (Pondicherry Multipurpose Social Service Society)
- SAMSSS (South Arcot Multipurpose Social Service Society)
- TMSSS (Thanjavur Multipurpose Social Service Society)
- KSSS (Kottar Social Service Society)

³⁹“Facilitating Resilience: A Report on Capacity Building for Psychosocial Interventions in Tsunami-Affected Communities. Technical Assistance, Saarthak Coordination-Tasoss, March–November 2005,” supported by CRS and Caritas partner social services societies in Kottar, Pondicherry, South Arcot, and Trivandrum.

3.11.4 Mental Health Recommendations

A. Building the Resilient Community Concept

- Increased emphasis needs to be placed on “psychosocial” activities within the partners programming to form the building blocks for CRS’s resilient community strategy. The support provide by Saarthak needs to be expanded and extended to other partners. CRS needs to continue concerted inputs to ensure the ‘community resilient’ way of thinking becomes internalised.
- Incorporate challenges and issues into future training programs that were brought up in the Saarthak final evaluation. Roll out to the remaining partners in the coming 6 months.

3.12 Do No Harm

The following examples illustrate how CRS minimized potential harm to beneficiaries during program implementation:

- When relief aid was delivered to the temporary camps, staff ensured that they had sufficient quantities for all before distributing the items to prevent conflict.
- The children groups formed as part of the tsunami response brought in children from the surrounding communities who were not directly affected.

One respondent in Nicobar mentioned an example of potential harm. *“After the tsunami the local Nicobari language is not being taught in the schools. There is no availability of textbooks and instructional materials in the Nicobari language. Supplies of only English and Hindi language books have been received so far.”*

3.13 Community Cohesion

The majority of FGD participants expressed a feeling of coming together after the disaster and a new sense of unity. The forming of the Village Development Committees and the increased exposure to government officials has led to a sense of empowerment. Villages, with the support of the partners, have started to discuss development issues and how to address them as a community.

On the other hand, some focus group discussants reported an increase in alcohol consumption, and there were a few reports from women’s focus groups of increases in domestic violence. Where decreased consumption was noted it was attributed to lack of money rather than awareness of health consequences. CRS and partner staff reported that increased alcohol consumption was a result of men’s increased access to cash since the tsunami⁴⁰. This recognition of perceived risk was one of the main objectives of the community reliance program, which focuses on how people perceive and acknowledge this risk in their community. The acknowledgment of alcoholism as a risk is seen within the community resilient strategy as a block for building a resilient community.

A FG discussant in Andhra Pradesh reported a reduction in alcohol consumption because the men were busier and had less time to drink. Perhaps as a result of the health awareness programs, women in certain communities advocated against alcohol.

⁴⁰ FGD debriefing session Chennai 1st Feb and Hyderabad 9th Feb

3.14 Community Building

The tsunami has brought about changes in the social structure of many communities; coolies and laborers became boat owners, women entered into the public arena, and new communities were established in group housing projects.

3.15 Management, Coordination and Financial Findings

This section aims to complement the Caritas Internationalis Joint evaluation, which provides detailed management and co-ordination issues. This assessment focused mainly on the CRS MIS system, which CRS took responsibility for during the post joint evaluation workshop.

3.16 Effectiveness

The CRS partner support officer (PSO) structure put in place in the first couple of weeks after the tsunami, received positive feedback from the partners. In the initial response period, each partner had support officers in the diocese. Other donors did not offer this type and level of support. At present, the PSO operates from the CRS office. CI/ India adopted the PSO model; however they place staff directly in the diocese.

3.17 Relevance and Appropriateness

Most of the partners and respondents in the focus group discussions felt that families on the lists deserved aid, but that the names of other deserving families had not been included. Some respondents felt that there was inequality in the current program implementation. This perception may have resulted from unclear communication between the partners and the beneficiaries.

Each of the partners has designated contact people with whom CRS M&E officers in the Chennai and Hyra offices can have discussions. There is also a contact person in CI/India, although this person's role appears to be to compile reports. The link between the CRS M&E officer and CI/ India on management information systems (MIS) is more administrative than strategic. For example, if a monthly report is late, CRS would first check with the relevant staff in CI/India to see if it had been sent there. Strategic and policy issues within CRS are sent to the CRS manager to handle.

CRS is now "freezing" the output indicators for Strategic Objective (SO) 1, verifying numbers, and creating intermediate IRs. SO 2 and the related IRs are being broken down further to better capture and document activities, mainly shelter reconstruction. For SO 3, more relevant indicators are being developed to collect quantitative information, mainly on non-fishing livelihood indicators. Partners will be oriented in these developments to ensure a common understanding.

- **CRS MIS System:** There is a recognised lack of expertise within CRS ESPERo program staff on how to set up an MIS system. Technical staff responsible for M&E, although highly competent, are new to M&E and are unclear about what information needs to be collected.
- **USAID Project Intervention:** USAID-funded projects relating to transitional shelter and child protection form part of the CRS overall tsunami response and are cost-shared within the ESPERo grant. These activities, however, do not have a related IR within the strategy document.
- **Project Monitoring Table:** There is a lack of consistency on what is being monitored. The project-tracking sheet is reporting IR's, outcomes, activities and goals set out within the initial response period text in the strategy document. The information provided by the partners, in most cases, is at the level of activity or output monitoring.

- **Intermediate Results:** Emergency activities over the last year are not accounted for in the existing intermediate results. The immediate relief activities, although addressed within the narrative text do not relate directly to any IR set out in the strategy document.
- **Verification of existing numbers:** CRS monitoring staff feel that they are unable to verify the accuracy, source and reliability of information currently coming from the partners in the monthly reports. This also correlates with previous CRS audit findings⁴¹, which state that there is no auditable trail-back linking expenditure and the related outputs. Part of the existing monitoring plan in the coming months is for staff to make field trips to partners to track the source of statistics reported and the collection tools used.
- **Partners' M & E systems:** Partners do not have comprehensive MIS systems. The existing partner MIS only allows monitors activities that have taken place and does not allow for evaluation of either the IR or impact of the program.
- **Process quality gap:** The existing indicators set out against activities and IR under SO2 and SO3 cannot adequately measure process-based activities. The data currently collected is output oriented. This is particularly pertinent now, when material has been distributed for livelihood and emergency relief and the program is moving into softer inputs.
- **Baseline assessment:** There is no baseline data for the program. Assessments were carried out during the first couple of months of operation and as part of proposal development from May to July 2005. Individually, partners have collected village-level data, but these are not correlated to form a program-wide baseline against which to evaluate progress.
- **Reporting format:** The existing joint monthly reporting format tends to be too general for Caritas Internationalis and CRS' needs.
- **Attribution:** Because of the nature of the joint interventions, most activities are collective efforts, and it is difficult to attribute the results or distinguish impacts from CRS inputs from those relating to inputs from other donors. CRS is developing an Excel sheet that links budget allocation to partner activities.
- **Use of data collected:** Data collected remains internal to CRS. Once better evaluation systems are established, CRS should look at using the information they collect to advocate with the government, co-ordinate with other stakeholders working in the community, and feed findings back into the community and village development committees.
- **Develop Evaluation Systems. Presently the MIS collects data mainly at the activity level:** Information and learning is weak within the Agency.
- **Information flow:** CRS receives information on a monthly basis from partners in the form of an excel and corresponding narrative sheet often containing inadequate background information to contextualise and qualify the numbers within the excel sheets.
- **Understanding of reporting requirements:** There are no uniform reporting requirements among the partners, which results in different ways of measuring, comparing and reporting on the indicators.

⁴¹ 2005 Audit

3.17.1 Recommendations to improve MIS:

1. **Train CRS staff on M & E** who are responsible for data collection and analysis.
2. **Link CRS M & E Staff with existing M & E networks.** Greater links should be formed between CRS M & E staff. Provide them with opportunities to meet quarterly to discuss challenges and future plans. These links should be extended to the M&E staff to link with other M&E networks within CRS, India and globally.
3. **Create new IR's under SO1 for the temporary shelter and SO2 for child protection activities** for the USAID Project Intervention. These IR's can be based on the output statements set out in the existing project tracking sheet.
4. **Edit the project tracking sheet** to refer directly to the ESPERo strategy IRs.
5. **Create a new IR under SO1** that relates to the activities that have taken place as part of the immediate relief phase. Although all of these activities have already taken place, this will ensure greater consistency of reporting and, as part of the final evaluation, take them into consideration when assessing the impact under SO1.
6. **Verify sources of the existing numbers with the partner.** This should be part of the wider capacity building for CRS and the partners in monitoring and evaluation. If initiated as a stand-alone activity, it is likely to face resistance from the partners and needs to be linked in with capacity building program.
7. **Initiate capacity building of partner monitoring and evaluation skills.** In the first instance, a brief assessment of partners' immediate needs and skills gap should take place to form the basis on which to develop a training program. It is recommended that the training program should link in with the development of Partners' own M & E systems.
8. **M & E point person in the partners.** Each partner should have an M & E point person who is part of the program team and will work with CRS on the development of the M & E system
9. **M & E working group.** CRS should set up an M & E working group, define a TOR and appoint a point partner staff. This group should focus on setting set up a data collection system to periodically evaluate and review findings, provide technical support and share experiences.
10. **Develop a Proframe for the ESPERo program.** Developing a CRS Proframe will set out the means of verification and source of data against the activities.
11. **Conduct a baseline assessment.** The baseline can be used to evaluate program progress. The baseline should not look at program that has already been completed but should take place sector by sector, including water/sanitation, livelihoods, shelter, disaster preparedness and child protection. The baseline needs to examine output and impact indicators. Data from the existing village-level assessment should be collated and analyzed. Gaps can then be identified and filled from other data sources or further field data collection. For the more development objectives, such as child protection and community resilience the programs are setting up over the coming months and building upon previous projects. In these cases where end of project reports exists can be used as a source of data. Where these reports do not exist, data needs to be collected.
12. **Share learning.** Possibilities exist for shared learning within CRS and partners, between the M & E contact persons in the Chennai and Hyderabad offices. This could happen on a number of levels. Currently, information and learning remains with individual partners and is channelled vertically up to CRS. To increase the sharing of learning between partners, monthly reports could be distributed horizontally. This would enable each partner to receive information, good practice and learn from each other.

3.18 Coordination and Collaboration

The partners were involved in continuous coordination with the government. The government was often cited as contacting the partners for assistance with certain issues. Partner/government relationships were described as better at district level than at state level.

Once the houses are completed, the partners give them to the government to hand over to the beneficiaries. The government is responsible for electricity and water connection. Often, there are delays in connecting these services, and beneficiaries must move into the houses without them.⁴² This raises the question of whether CRS should ensure water and sanitation independently to meet the needs of the beneficiaries more quickly, although this action would obviate the longer-term capacity building and responsibilities of the government.

3.19 Sustainability

Numerous examples of apathy, dependency and high expectations of aid were found in the assessment of CRS/India tsunami relief operations. Villagers ask NGOs for help rather than looking for longer-term solutions in their own communities. Dependency varied across the states but was mostly evident in Tamil Nadu.

The sustainability of latrine maintenance was raised by a number of respondents, who questioned who would clean and repair them and noted that a number of latrines were broken. Children's latrines were not maintained well and were therefore not used. These maintenance issues are linked to the level of dependency evident in some communities.

There are also questions about skills training for sustainability. In Andhra Pradesh, beneficiaries developed new skills during the construction of their houses, ranging from negotiating with contractors and quality control to learning basic construction. The new skills place the beneficiaries in a good position - once the house has been completed - to deal with ongoing maintenance issues themselves rather than refer back to the partners for help. This is in contrast to Kerala and Tamil Nadu, where beneficiaries have a much lower level of involvement in the construction of their houses and the transfer of skills to enable them to maintain their houses once the reconstruction is completed is not evident.

In the coming months the situation will stabilize after boat/net distribution, and the scale-up of the community resilience program and the challenge of high expectation and dependency can be addressed within this framework. It needs to be communicated that in the relief phase, there was a lot of outside assistance coming into the community, but in the development phase, the community needs to use their own resources.

3.19.1 Sustainability Recommendation:

Ensure that the Bavishya Program and the Community Resilience strategy documents, in which community building is a key focus, has a clear and concrete plan to deal with the high levels of expectation and dependency in the communities. This plan should incorporate a checklist of indicators that should be in place in the community to signify the community task forces are independent and resourceful. These indicators would enable partners to monitor the levels of expectation and dependency evident in the villages over the coming year.

⁴² Valid International noted similar findings in October 2005.

PART IV CONCLUSIONS, LESSONS LEARNT, RECOMMENDATIONS

4. Conclusions

4.1 Good Practices and Lessons Learnt

Hand over periods between TDYer's during the emergency response period

Where possible, CRS tried to organize handover periods during which one TDYer finished and another took over. This ensured smooth transitions between staff arriving and leaving.

Clear reporting Lines

Generally, CRS reporting lines were clear. A reporting structure was established so that staff knew to whom and when to report encouraging effective and efficient use of resources.

Market Linkages for Fishermen

Partners have helped organize fishermen into cooperatives, which enables them to bypass the middlemen and get higher prices.

Risk Mapping

Linked to the training provided by Saarthak, partners in conjunction with village community groups, carried out risk-mapping exercises in the community to indicate the different levels of support necessary and enable the partners to prioritise support for those most at risk.

Community Kitchens in Transitional Shelters

Improvements in the transitional shelters with the provision of communal kitchens provided additional living space for the families and was received positively.

Bhavishya Children's Program- the approach

The approach used in Bhavishya had both intended and unintended positive results in the community. On one level, it brought the children together, involving them in educational activities and games. This started to address the immediate trauma issues in the children, raise awareness of health and other issues and allowed them to express their feelings about the tsunami through games and drawings, and placed the children in a safe environment. Furthermore, it started to normalise the situation within the community. It also brought the children together regardless of caste or ethnicity. It gave women an opportunity to be involved in organising a community event, often for the first time, bringing them out of their homes and building their confidence.

Do No Harm

As part of the Bhavishya program, a number of partners geared the program to children affected by the tsunami. This practise can be seen as having reduced possible tensions between families defined as affected, those who received assistance and those who did not.

Another example was the backwater fishing community in Pullicat. This community was excluded by many agencies although supported by CRS, where the program impact was visible. Part of the intervention was the facilitation management of conflict around fishing rights between the backwater and sea based fishing community.

Participation of Beneficiaries in Andhra Pradesh Housing Program

Shelter programs in AP had a high level of community involvement and transfer of skills in the community. Beneficiaries were involved in a number of ways, from identifying local vendors, authorising payment for work with partners, to participating in unskilled labour work and supervising construction in collaboration with partner staff. This provides evidence of skills transfer, increased confidence and negotiation skills in the beneficiaries.

ICT Centre

The ICT center in Cuddalore enabled community members to access information to improve their livelihood including early warning information and developing good governance in the community. One example is enabling the registration of children's births over the internet.

Work Placements Scheme

Partners carried out a market survey of local business to identify their needs. Training was then provided to local young people, who were given placements in those businesses. The project increased the skills of the beneficiaries through providing training but also gave them vital work experience, placing them in a good position to enter the job market. Some were subsequently employed in paid work.

Cash For Work

The projects have put cash into the hands of people and very often served as the basis for restarting livelihoods, even before the agencies began to address this issue.

Campbell Bay Andaman and Nicobar Islands: Livelihood Assessment Tool

The high-quality assessment tool developed is now able to provide the partners with a better understanding of changes that have taken place since the tsunami.

Housing Design

Houses were designed with the flexibility of beneficiaries to extend their house in the future.

Insurance for Boats

The boats distributed as part of the livelihood program also had an insurance scheme covering the boats for 3 years, allowing fisherman a guarantee and greater security with the manufacturer should defects appear. One case was reported of a partner supporting a fisherman in his negotiations with the supplier to change a part that was faulty.

Recommendations:

Initial Response

CRS Country Level

Ensure that the Emergency Core Team has a range of technical and management skills such as in logistics procurement support and water and sanitation. This team is a crucial resource for the country program to tap into in an emergency.

Conduct a mapping exercise with partners to enable them to identify the most effective areas to work in and the most important needs in those areas.

Conduct more specific resource planning and have experienced logistical staff on board. The high cost of resources and transportation and delays in delivery were due to staff inexperienced in logistics.

Train partner staff in systemic planning. Analyze staff skills to see what competences they have in place to meet emergency needs and identify staff who are best equipped to do each job.

Improve CRS and partner collaboration with the private sector, orienting them on minimum standards, quality control, price controls, and accountability mechanisms, so that the private sector can support logistics.

Develop village-level disaster mitigation plans. Create village resource and vulnerability mapping to identify gaps and needs before an emergency and establish village disaster management committees for planning and implementing disaster mitigation.

Strengthen communication systems at the community level to better disseminate information on CRS activities through established structures. CRS can be instrumental in creating links between

communities and local government to ensure that communities know their rights and are able to demand them from their government.

Stockpile emergency response resources in communities or in the region in preparation for the frequent disasters encountered.

Purchase and package Food and NFI locally, wherever possible.

Within CRS

Develop off-the-shelf rapid assessment tools. Have standard assessment tools in place before an emergency rather than developing them on the ground during the emergency. Standard tools can ensure that all technical issues are covered and make assessments more efficient.

Develop an adequate R&R plan so that emergency response staff have adequate breaks to avoid burnout. These breaks should be commensurate with those in other emergency settings.

Provide adequate technical support for field staff. The authority given to CRS staff in the field during the initial response phase in India, coupled with the partners' networks on the ground and knowledge of the beneficiary communities, enabled the partners to respond quickly over a wide area. Adequate technical support is needed to ensure that field staff's decisions are based on access to and use of the correct information.

Carry out a joint interim/ Baseline assessment: In emergency environments with multiple actors CRS should work in collaboration with other agencies with a strong presence to carry out joint baseline assessment. This inter-agency initiative would foster collaborative working and be an effective use of material and human resources.

Shelter

Increase Beneficiary Participation in Shelter Planning and Construction

Have partners advocate with the district collector for houses to be built so the beneficiaries know from the beginning which house will be allocated to them. Enable a greater level of involvement of the families; by having them work on their own house. Have partners create more links between builders and individual families from the beginning to transfer some decision-making to the beneficiaries.

Promote Social Cohesion

Partners should provide ongoing support to build cohesion in new communities. New social structures are required to support livelihoods and represent community interests to local governments. Ensuring a smoother transition can be in the form of organising community events, such the launch of the Bhavishya Children's Program, which should assist both direct beneficiaries and receiving communities.

Registration of Houses for Women

Possibilities of registering homes in the wife's name or joint registration of new homes should be investigated and encouraged in Tamil Nadu, Kerala and the Andaman and Nicobar Islands

Increased Community Communication

Partners should ensure ongoing communication to beneficiaries about housing development and their discussion with partner.

Water and Sanitation

Improve Maintenance of Infrastructure

Partners need to revisit the committees set up to manage and maintain sanitation facilities to determine whether they are operating, and where not, determine the reason why. Where there are no committees, set up committees ensuring buy-in from the communities from the start, to manage these facilities, where possible building on existing SHG's for this purpose.

Standardize Timing of Water Delivery

Engage beneficiaries of transitional shelters to determine the most appropriate time for the delivery of water tanks.

Women and Children

Expand Child Labour/ Child Protection policy

Activities put in place to address child labour need to expand in future beyond awareness-raising, to look at the root causes and provide the relevant inputs to the children and their families.

Livelihoods

Develop Demand-driven Targeted Skills Training

Partners to deliver more tailor-made, needs-based, demand-driven training-courses for the beneficiaries. This could be done through:

- a) partners creating formal links with local training institutions to meet the training needs,
- b) or through the provision of grants or other types of support for individuals to enrol in longer-term training courses.
- c) follow-up support/ career guidance needs to be provided by the partners to individuals and groups attending training courses.
- d) carry out a quick assessment identifying people want to do and tap local economic interests

Mental Health

Build the Resilient Community Concept

- Increased emphasis needs to be placed on “psychosocial” needs by the partners, to form the building blocks for CRS’s resilient community strategy. Expand and extend to other partners support provided by Saarthak. CRS provide ongoing input to ensure the ‘community resilient’ way of thinking becomes internalised.
- Incorporate into future training programs the challenges and issues brought up in the Saarthak final evaluation. Roll out to the remaining partners in the coming 6 months.

MIS

Train on M & E for staff within CRS responsible for data collection and analysis.

Linking CRS M & E Staff with existing M & E networks. Greater links should be formed between CRS M & E staff. They should be provided with opportunities to meet up on a quarterly base to discuss challenges and future plans. These links should be extended to the M & E staff to link with other M & E networks within CRS, India and globally.

New IR’s need to be created under SO1 for the transitional shelter and SO2 for child protection activities for the USAID Project Intervention. These IR’s can be based on the output statements set out in the existing project tracking sheet.

Edit the project tracking sheet so that it refers directly to each of the IR’s set out in the ESPERo strategy document.

Create a new IR under SO1 that relates to the activities that have taken place as part of the immediate relief phase. Although all of these activities have already taken place, this recommendation will ensure a greater consistency of reporting and, as part of the final evaluation, take them into consideration when assessing the impact under SO1.

Verify sources of the existing data with the partner. This should be part of the wider capacity building for CRS and the partners in monitoring and evaluation. If initiated as a stand-alone activity, it is likely to face resistance from the partners and needs to be linked in with a capacity building program.

Build capacity of partners’ monitoring and evaluation skills. In the first instance, a brief needs assessment of partners’ immediate needs and skills gap should take place to form the basis on which to develop a training program. It is recommended that the training program should link in with the development of partners’ own M and E systems.

Appoint M & E partner point persons. Each partner should have an M & E point person who is part of the program team and will work with CRS on the development of the M & E system.

Establish a M & E working group. CRS should set up an M & E working group, with a TOR and the point partner staff. This group should focus on setting set up a data collection system to periodically evaluate and review findings, provide technical support and share experiences.

Develop a Proframe for the ESPERo program. Developing a Proframe will set out the means of verification and source of data against the activities.

Conduct a baseline assessment. The baseline can be used to evaluate program progress. To minimise work, data from the existing village-level assessment completed as part of proposal development should be collated and analyzed. Gaps can then be identified and filled from other data sources or further field data collection. For the more development objectives, such as child protection and community resilience the programs are setting up over the coming months and building upon previous projects. In these cases where end of project reports exists (CRS/ASSIST end of project Bhavishya. report) can be used as a source of data. Where these reports do not exist, data needs to be collected.

Share learning. Possibilities exist for shared learning within CRS and partners, between the M and E contact persons in the Chennai and Hyderabad offices. This could happen on a number of levels. Currently, information and learning remains with individual partners and is channelled vertically up to CRS. To increase the sharing of learning between partners, monthly reports could be distributed horizontally. This would enable each partner to receive information, good practice and learn from each other.

Sustainability

Ensure that the Bavishya Program and the Community Resilience strategy documents which takes community building as a key focus of their strategy have a clear and concrete plan to deal with the high levels of expectation and dependency in the communities. These plans should incorporate a checklist of indicators that should be in place in the community to signify the community task forces are independent and resourceful. These indicators would enable partners to monitor the levels of expectation and dependency evident in the villages in the coming year.