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EVALUATION

Performance Evaluation of the Project for Local Empowerment (PLE) on the Thai-Burma Border

January 2015

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Photo caption: Students in a primary school supported by PLE, Kayah State (photo credit: Aung Myo Hein)

PERFORMANCE EVALUATION OF THE PROJECT FOR LOCAL EMPOWERMENT (PLE)

January 2015

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DISCLAIMER

The authors' views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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ACRONYMS

ASEAN	Association of Southeast Asian Nations
BMA	Burma Medical Association
BPHWT	Back Pack Health Worker Team
CAP-Malaria	Control and Prevention of Malaria
CBO	Community-based organization
CHDN	Civil Health and Development Network
CIDKP	Committee for Internally Displaced Karen People
CPI	Community Partners International
CSO	Civil Society Organization
DP	Displaced person
ESP	Ethnic service providers
FY	Fiscal Year
GBV	Gender-based violence
GoB	Government of Burma
HA	Humanitarian assistance
HURFOM	Human Rights Foundation of Monland
IDP	Internally-displaced person
INGO	International non-governmental organization
IP	Implementing partner
IRC	International Rescue Committee
KDHW	Karen Department of Health and Welfare
KED	Karen Education Department
KESAN	Karen Environment and Social Action Network
KHRG	Karen Human Rights Group
II	Informant interview
KNGY	Kayan New Generation Youth
KnHD	Karenni Health Department
KnMHC	Karenni Mobile Health Committee
KNWO	Karenni National Women's Organization
KORD	Karen Office of Relief and Development
KRCEE	Karen Refugee Committee Education Entity

KSWDC	Karenni Social Welfare and Development Center
KTWG	Karen Teacher Working Group
KWEG	Karen Women Empowerment Group
KWO	Karen Women's Organization
MAP	Migrant Assistance Program
MECC	Migrant Education Coordination Center
MINE	Myanmar Indigenous Network for Education
MNEC	Mon National Education Committee
MNHC	Mon National Health Committee
MoE	Ministry of Education
MoH	Ministry of Health (of Burma)
MoPH	Ministry of Public Health (of Thailand)
MOU	Memorandum of Understanding
MRDC	Mon Relief and Development Committee
MTC	Mae Tao Clinic
NGO	Non-governmental organization
PLE	Project for Local Empowerment
PLE BB	PLE Beneficiaries living in Burma
PLE BT	PLE Beneficiaries living in Thailand
RDMA	Regional Development Mission for Asia (of USAID)
RTG	Royal Thai Government
SAW	Social Action for Women
SE	Social Enterprise
SE Burma	South East Burma
SEC	Shan Education Committee
SHC	Shan Health Committee
SHIELD	Support to Health, Institution Building, Education, and Leadership in Policy Dialogue
SNF	Suwannimit Foundation
SOW	Statement of Work
SRDC	Shan Relief & Development Committee
SSDF	Shan State Development Foundation
TBC	The Border Consortium
TTC	Tin Tad Clinic

USG	United States Government
USAID	United States Agency for International Development
VAW	Violence against women
WCC	World Council of Churches
WE	World Education
YC	Youth Connect

EXECUTIVE SUMMARY

EVALUATION PURPOSE AND EVALUATION QUESTIONS

The overall purpose of this evaluation is to provide the United States Agency for International Development (USAID) Regional Development Mission for Asia (USAID/RDMA) and USAID/Burma with strategic information for future programmatic decision making. It is also expected to provide important feedback to Project for Local Empowerment (PLE) partners and stakeholders in preparation for a smooth wrap-up of PLE during its final implementation year. The three key evaluation questions that the Evaluation Team was tasked to address are as follows:

1. Is the convergence strategy relevant, considering the changing situation in Burma?
2. Does the need to provide humanitarian assistance (HA) to displaced persons (DPs) and internally displaced persons (IDPs) still remain?
3. To what extent have the capacity of PLE's sub-grantees been strengthened to support PLE's strategy for sustainability?

PROJECT BACKGROUND

More than 25 years of instability, conflict, and governance fragility have resulted in extensive internal displacement, displacement across international boundaries, and other outward migration by populations from South East Burma (SE Burma). USAID has a long history of providing HA along the Thai-Burma border for two distinct but related groups of people: DPs from Burma who have crossed the border into Thailand and for IDPs who have fled their homes of origin to other locations within their home country.

USAID's support to these two target populations comes in the form of HA that provides healthcare, education, food, and other aid (otherwise referred to as "protection services"). PLE also operates within a strategic paradigm reflected in the idea of **convergence**. The Statement of Work (SOW) regards convergence as the need to "adapt to new opportunities to promote linkages and convergence between PLE and USAID/Burma's existing strategies and program activities; between PLE's ethnic social service providers (border-based) and the Government of Burma (GoB) and community based organizations (CBOs) network inside Burma." The SOW has been included as Annex I.

The operational environment within Burma has shifted unexpectedly, rapidly, and substantially since the PLE's original design back in 2010-2011. Political, economic, and administrative reforms have been initiated by an elected GoB – the first in almost 50 years. New ceasefire agreements have been concluded and seem to be holding with most of the ethnic states' armed groups. In response to positive changes within Burma, the United States Government (USG) has restored full diplomatic relations including the re-establishment of the USAID/Burma Mission (April 2012) and appointment of a US Ambassador (June 2012). Despite recent events in Burma, fundamental challenges remain: low investment in basic services such as health and education, and limited government access to areas affected by internal conflict. The need for humanitarian assistance to DPs and IDPs concentrated along

both sides of the Thai-Burma border still remains, but the design, approach, service delivery methods, and resources to provide such services, may differ according to the changing context in Burma.

PLE is implemented by the International Rescue Committee (IRC), in partnership with three other consortium members: Mae Tao Clinic (MTC), The Border Consortium (TBC), and World Education (WE). The four consortium members work to build the technical, management, and leadership capacities of CBO sub-grantees and Thai government offices to deliver efficient, effective and equitable services for conflict-affected populations living in six regions in Southeast Burma including four ethnic states and two divisions, as well as for DPs in nine temporary shelters and migrants from Burma in selected communities in six border provinces in Thailand.

EVALUATION DESIGN, METHODS AND LIMITATIONS

The Team employed a mixed-methods evaluation design that combined qualitative and quantitative methods of data collection including desk review, 102 qualitative interviews with key stakeholders and beneficiaries in target communities, and a quantitative survey with 500 beneficiaries and 34 sub-grantees. This design approach was deemed appropriate to answer the three key evaluation questions given the time and budget available and in consideration of other limitations. Since the key questions are related to wider key stakeholders of PLE including the key partners, sub-grantees and beneficiaries on both sides of the border, no single method of data collection would be sufficient to cover all relevant target groups. Approaching the complex environments of the PLE catchment area with multiple methods ensured the Team was able to mitigate most limitations. Reliable results were achieved through triangulation of multiple data sources to construct findings, conclusions, and recommendations.

Given the post-coup political situation in Thailand, security around the DP camps has been tightened and a survey among DPs in Thailand was not feasible as originally planned. Whilst informant interviews (not quantitative surveys) were carried out with DPs in Umphium Mai and Baan Mai Nai Soi Camps, the data collected is limited and not representative. It was also not possible to conduct a survey with IDPs inside Burma due to prevailing political considerations. This meant the Evaluation Team could only collect primary data through informant interviews conducted in SE Burma. To glean some quantitative insights from beneficiaries in communities in SE Burma, a survey with 200 PLE beneficiaries who had crossed the border was conducted in Thailand. However, this sample should not be construed as representative of all IDPs nor PLE beneficiaries in SE Burma.

FINDINGS AND CONCLUSIONS

The **convergence strategy** is considered to be relevant to the changing situation in Burma. Reduced conflict due to ceasefire opens 'windows of opportunity' for the ethnic service providers (ESPs) to gain better access inside Burma due to improved physical safety and increased mobility. As a result, they are able to interact with other Civil Society Organizations (CSOs) and GoB service agencies that are stretched and have limited resources to serve their constituents. Shan State, with ongoing conflict, experience noticeably lower levels of convergence.

PLE has been successfully responding to new opportunities to promote linkages and collaboration between ESPs and the GoB agencies as well as the CBO networks in Burma, particularly in Kayin and Kayah States. These states represent good opportunity for further convergence support given the many convergence activities that have taken place already under PLE including across all PLE sectors.

PLE has played a significant role in facilitating convergence. The Team learned of many cases of

cooperation and linkages between ESPs and GoB agencies that have already occurred in health and education, and a few cases in food security and protection. The fact that this is a product of the current stage of evolution of the ceasefire/political dialogue should be acknowledged. At this stage, convergence within the PLE program sometimes takes form within activities due in no small part to personal relationships. This informal basis for convergence, although not uncommon when considering the time required to build trust across interest groups, represents a challenge for sustainability of the convergence approach, ultimately realizing formal institutional convergence in the long-run.

Although convergence in itself does not serve as a pull factor for return and reintegration, it can contribute to improvement of conditions for voluntary return in dignity and within the context of durable solutions particularly for DPs in Thailand. Essential conditions for return including confidence in the peace process, increased access to basic needs, livelihoods and improved economic/job opportunities, as well as better protection, can be enhanced through convergence.

Convergence is a means to achieve the desired goals or outcomes that displaced people and USAID are expecting, for instance peace building, conflict mitigation, and conflict prevention, as well as good quality and adequate services delivered to beneficiaries. Notably, understanding of a defined concept of convergence remains fluid depending on individuals' perspective, affiliation, and circumstance. It does not have a commonly held definition and has also been subject to negative interpretation such as Burmanization.


In relation to HA the Team can conclude that PLE's key approaches remain valid, however, the current PLE design should continue to be adapted on an ongoing basis by exploring evolving and emerging needs in protection, livelihoods, rehabilitation, and community development which are increasingly arising due to changing operating environments within SE Burma and inside Thailand. Though the reduction of the overall number of IDPs remains uncertain, and return and resettlement remains small and tentative, recent ceasefire agreements and progress in the peace process have reduced armed conflicts and additional displacement significantly inside SE Burma. For those in Thailand, the majority of PLE beneficiaries outside of camps are now able to gain access to basic services provided by the Royal Thai Government (RTG) and non-government organizations (NGOs)/CBOs including healthcare and education whereas HA needs for DPs inside the camps in Thailand remain. Basic services for many PLE beneficiaries in SE Burma seem to remain inadequate in many areas.

PLE activities do not serve as pull factor to Thailand for those who are not victims of conflict. The majority of Burmese, including many PLE beneficiaries, came to Thailand to seek better job opportunities and living conditions. Other independent surveys have confirmed this.

To present HA prioritizations, the Team developed a logic framework through which priority filters can be applied (Figure 12 in the text body). This framework identified three likely trajectories with respect to the operating environment in Burma. The **"Above the Line HA Convergence Strategy"** refers to contextual scenario A (see Figure below) located above the dashed line in the schematic which assumes stability will persist, incidence of conflict and generalized violence will reduce or remain low, and efforts at national reconciliation will accelerate. In this scenario, emphasis of convergence across all HA sectors outweighs other considerations, including PLE CBO network strength within Burma's ethnic states. In this operating environment, there will be an increasing need for and opportunity to undertake a comprehensive needs assessment. **"Below the Line HA Strategies"** refers to contextual scenarios B and C located below the dashed line in the schematic which assume increasingly protracted fragility, deterioration, and breakdown as the operating environment falls from scenario B to C. In both these scenarios, less space in the operating environment allows for comprehensive needs assessment. At the same time, with movement from B to C, more emphasis will need to be placed on

working in areas with PLE CBO networks and access as the deciding factor. This logic framework, together with data sets presented in the findings, is used for HA prioritizations presented in the recommendations.

Contextual Scenario		Weighted Priorities
A	Stability and National Reconciliation	Convergence and HA needs weigh higher
B	Protracted Fragility	PLE CBO networks / access weighs higher
C	Deterioration / Breakdown	



Although improvement in Thailand due to PLE may serve as contributing factor for migrants’ decision to remain in Thailand, because they feel better off than inside Burma, there is very little evidence that PLE interventions to improve access and quality of basic services serve as pull factors to Thailand. PLE beneficiaries in Thailand indicate that they would return to SE Burma if political stability, peace, and the economic situation continue to improve resulting in better personal safety and job opportunities.

In sum, the findings show that, for HA in Thailand, the needs to provide HA for people outside the camps has decreased significantly, partly due to the efforts and success of several government and non-government service providers, both through PLE and beyond. However, HA needs still remain for DPs inside camps but is not a key role of PLE.

Looking at **Capacity Building**, PLE’s sub-grantees reported relatively strong levels of capacity. With PLE support, half of sub-grantees viewed that their capacities have improved significantly in the past two years in both technical and organizational aspects. Although a certain percentage of sub-grantees reported that they are able to obtain funding from different donors, and some have income-generating activities other than donor funding, they still indicate the need for continued support on capacity building. Attention was pointed to some areas of organizational capacity development including human resources management. Abilities to build relationship and collaborate with government agencies, international policy bodies, and academic bodies are also highlighted. This area of improvement can contribute to convergence, advocacy, and resource mobilization.

The Team cannot conclude at this stage if the Tiering approach is the most effective framework for facilitating capacity building. The lack of a comprehensive quantitative measurement to assess baseline performance of each sub-grantee with subsequent interval assessments prevents PLE from being able to accurately measure and assess established indicators of improvement (or backsliding) over time and against a holistic view of optimal capacitation across a list of capacity domains.

RECOMMENDATIONS

Regarding Convergence:

1. Define convergence in coordination with USAID strategy: Internally, all USAID stakeholders should have a commonly held and agreed definition of convergence so that it can be more easily integrated into program objectives and progress measured against the defined concept.

2. Provide support to promote joint efforts in a more integrative manner: For PLE, implementing partners (IPs) should continue to promote linkages and cooperation between ESPs and GoB agencies, as well as collaboration among ESPs, as evolving circumstances permit by making joint

effort a specific and clear aspiration for new activities – particularly in Kayin and Kayah States where sub-grantees involved in convergence is relatively high.

3. Continue to promote closer working relations between individuals and institutions in convergence: PLE should take the momentum of successful cases of convergence already sees at the activity level and continue to support the establishment of good working relationships between individuals and institutions inside SE Burma.

4. Prioritize Health and Education as entry points for convergence: In general, health service is a good entry point since it is an immediate, sympathizing, tangible, relatively less political basic need for people in SE Burma. While education may be more politically contentious and can raise debates over sensitive issues related to identity, history, and geography, sub-grantees have already demonstrated acumen in implementing education programs within the framework of convergence.

5. Provide support to and collaborate with GoB agencies if and when appropriate and possible: Decentralized levels of the GoB should be engaged and encouraged by PLE to interface and work together with sub-grantees toward improving services in SE Burma.

6. Protection needs to be expanded: Expanding protection activities and partnerships in Burma has much potential and relevance. This includes expansion of current activities addressing gender-based violence (GBV) prevention and response services, e.g., linking existing community awareness approaches with health sector programming. Also, expanding and strengthening partnerships with a network of women’s organizations who are already actively engaged in health, education and/or social protection services and advocacy.

7. Strengthen women’s leadership and women oriented CBO networks as a defined implementation strategy: Advancing networks of women-oriented CBOs in SE Burma can potentially further convergence and women’s participation in the peace process. Clearly define the role of women leaders and women oriented CBOs in the current PLE implementation. Identify additional women-oriented CBOs that can be brought on as new sub-grantees and/or define partnership with other USAID programming partners.

8. Emphasize donor coordination: Increased coordination among donors’ programs in SE Burma can help map disparate efforts and identify potential collaboration opportunities between the GoB and ESPs as well as avoid overlapping support.

9. Efforts in convergence should focus on Kayin and Kayah States while maintaining awareness of windows of opportunity in Mon State: Greater windows of opportunity and/or nascent levels of trust between the GoB and CBOs seem to underpin greater opportunities for convergence in Kayin and Kayah States while conditions of stability may eventually create additional windows of opportunity in Mon State.

Regarding HA:

1. Consider PLE extension: The needs landscape may change significantly after the elections in November 2015 with the possibility of ongoing instability. It would be in the best interest of USAID to ensure there is no gap in service coverage. This could come in the form of a PLE extension for 12 months or another stop-gap measure developed in its stead.

2. In Thailand, continue support to DPs in camps: USG support to camp populations in Thailand should be continued due to sustained levels of need. While resources to support camps should be

discussed with other camp donors prior to committing resources, it is crucial that support is sustained, including the relatively small amount provided by PLE. This will ensure not to create unnecessary push factors that would risk pushing people to make rash decisions and further divide families, ultimately harming the search for durable solutions.

3. In Thailand, continue to support beneficiaries from Burma who cross the border to seek services (but do not live in Thailand) and those who live in Thailand outside of camps who may share a similar profile to those living inside the camps and fled persecution: PLE's sustainability strategies for interventions outside of camps (e.g. transition of health posts to provincial health offices) are on track to be completed according to plan. HA Assistance provided to people from Burma living in Thailand purley as economic migrants should become less of a priority over time. Support to CBOs in Thailand working to build capacity within Burma should also continue.

4. Comprehensive assessment of HA and livelihood needs in SE Burma: Since HA needs in SE Burma still seem to be critical and should be considered alongside other emerging needs in protection, livelihoods, rehabilitation, and community development, undertaking a comprehensive HA assessment of needs and opportunities in SE Burma will be critical, especially in the implementation of an Above the Line HA Convergence Strategy.

5. Meaningfully improve access and quality of basic services in Kayin and Mon States: There is a need to meaningfully improve access to and the quality of basic services in Kayin and Mon States. This aligns with an Above the Line HA Convergence Strategy.

6. Explore opportunities to support sustainable livelihood beyond HA in SE Burma as a theme for future support: Livelihood support should be offered to PLE beneficiates who are no longer facing sustained conflict and instability but in need of sustainable livelihoods to support themselves and their families. This aligns with an Above the Line HA Convergence Strategy.

7. Define strategic protection focus areas: PLE can benefit from a clearly defined protection service portfolio that is most appropriate for the needs in SE Burma, and the role of PLE as part of the USAID portfolio.

8. Explore the possibility to develop a community-based program platform: PLE can consider exploring the feasibility of community development based on a platform of more coordinated services at the village level.

Capacity Building

1. Promote cross-learning between GoB and CBOs: PLE or USAID/Burma should support activities that can be perceived as non-political networking activities such as dialogue, joint training, observation trips, peer learning, sharing of success stories, and staff exchange program.

2. Prioritize more support for capacity building activities inside SE Burma: Activities inside Burma, rather than in Thailand, would better facilitate the participation of CBO staff and respond to the needs of PLE's sub-grantees working in Burma.

3. Continue the Tiering approach of capacity building: No evidence was found to suggest that the Tiering approach does not work well with CBO sub-grantees. However, PLE should place more emphasis on organizational development that leads to sustainability of CBO sub-grantees in maintaining the services to beneficiaries in the long-run.

4. Consider including a comprehensive quantitative measurement tool for future capacity building programs: For USAID, qualitative approaches to capacity building can be greatly complemented by the use of a comprehensive quantitative measurement tool which allows for setting baseline scores, prioritizing critical areas of performance commensurate with available human and financial resources, weighting short and long term priorities, measuring progress in achieving them, and accounting for improvement (or backsliding) over time.

5. Prioritize capacity support for sub-grantees involved with food security to advance technical capacity for sustainable livelihoods: The rationale of this recommendation comes from the changing HA needs landscape inside Burma that shows emerging needs in protection, livelihoods, rehabilitation, and community development.

6. Increase capacities of sub-grantees operating inside Burma: It is clear that HA activities should be more focused in SE Burma. Increased capacity support for sub-grantees operating inside Burma would improve basic services and sustainability.

7. Continue to provide capacity development assistance, including both organizational and technical capacity development: It is clear from the result of the on-line survey and interviews with sub-grantees that continued assistance in both capacity areas is an ongoing need. Specific attention could be paid to topics like monitoring and evaluation, strategic planning, proposal writing, fundraising, and human resources.

8. Provide specific support on retention of human resources and knowledge management: In response to the critical problem of personnel turnover, provision of more support is needed to improve personnel retention and organizational knowledge.

9. Capacity support for a decentralized level of GoB and local communities should be explored: Capacity building can be also utilized to advance convergence when support provided to GoB and other local authorities would open an opportunity for collaboration between PLE and the GoB.

10. Develop a comprehensive integrated PLE Gender equality framework. Advancing gender equality and female empowerment is a key policy priority for the USG. PLE should have a more clearly defined gender strategy that maps onto the broader PLE results framework to comprehensively articulate priority gender equality programming areas, strategic activity implementation approaches, indicators and measurement frameworks.

I. EVALUATION PURPOSE & EVALUATION QUESTIONS

I. EVALUATION PURPOSE

The overall purpose of this evaluation is to provide the United States Agency for International Development (USAID) Regional Development Mission for Asia (USAID/RDMA) and USAID/Burma with strategic information for future programmatic decision making. It is also expected to provide important feedback to PLE partners and stakeholders in preparation for a smooth wrap-up of PLE during its final implementation year. With the rapidly evolving situation inside Burma in recent years and the RTG enforcement of policies with regards to DPs and migrants from Burma, it becomes ever more necessary for USAID to obtain up-to-date insights that will guide strategic decision-making on future programming.

This Evaluation addressed the performance of PLE on three specific areas and not the overall impact of the program. The SOW required the Evaluation Team to focus their evaluation on the extent to which the underlying project design assumptions remain valid given the changing political situation within Burma itself and the deteriorating policy environment within Thailand, both areas where PLE operates. The SOW expressly limited inquiry to three specific aspects of PLE's underlying design approaches as related to convergence, HA, and capacity building for local community-based organizations (CBOs).

Therefore, this evaluation is best understood as not assessing or evaluating the performance of the PLE per se but rather focusing on the relevance of the current PLE design according to the changing humanitarian and socio-political contexts and any adjustment of the program that might be necessary.

2. EVALUATION QUESTIONS

The United States Government (USG), through USAID, has long supported displaced populations from Burma living in temporary camps in Thailand, living within communities inside Thailand, as well as IDPs displaced but remaining within Burma, either in temporary IDP camps or temporarily settled within communities other than their original abodes. PLE represents USAID's latest phase of assistance to these target populations. USAID designed PLE prior to the recent political transition within Burma and prior to political instability in Thailand, both of which have exerted an influence on the operational environment in which PLE conducts activities. Two of the key questions required by the SOW linked back specifically to the PLE design's relevance vis-à-vis the operational context in relation to convergence and humanitarian assistance strategies. The third key question addresses the relevance of PLE's CBO capacity building efforts as part of the program's sustainability strategy. The direct implication of the three focused questions necessarily limited the Team's performance evaluation of PLE to those specific areas of approach and strategy in terms of relevance to the evolving situations in Burma and Thailand.

As presented in the SOW, the three key evaluation questions and sub-questions that the Evaluation Team was tasked to address are as follows:

1. Is the convergence strategy relevant, considering the changing situation in Burma?

- 1.1 The extent that the convergence interventions can realistically be linked and/or transferred to available systems and/or interventions in Burma. Particular attention should be paid to the convergence of the migrant health workforce trained in Thailand with the health service delivery system, education reform, and social protection approaches (i.e. GBV prevention and response programming and multi-sectoral female leadership) in Burma.
- 1.2 Key factors that support or obstruct the convergence as mentioned in 1.1 above, e.g. whether the supporting factors are stable or in need of strengthening, and how to overcome any obstacles to convergence.
- 1.3 Additional support that might be needed to ensure the success of the convergence, if any, and how to gain such support.
- 1.4 The extent to which the PLE's convergence strategy and interventions can serve as a "pull factor" for return and reintegration of the DPs and IDPs as well as those who are not affected by the conflict. In particular, focus should be on any comparative advantages of the convergence strategy as comparing to the conventional push and pull factors for return and reintegration, and to what extent they can help inform and facilitate the development of future plans for return and reintegration.
- 1.5 Perceptions of beneficiaries in Burma, particularly those in the conflict zones in the remote areas towards the convergence. Are there any trust issues that affect the willingness of beneficiaries to seek out and/or receive services from the border-based service providers who become mainstreamed central government service providers?
- 1.6 Whether and to what extent the convergence strategy affects male and female beneficiaries differently.
- 1.7 Geographic areas and/or targeted groups (PLE's local partners and beneficiaries) that should be prioritized in order to ensure convergence in Burma?
- 1.8 Geographic areas and targeted groups in Thailand (PLE's local partners and beneficiaries) that should be prioritized if they remain in Thailand after PLE's completion in 2015 and the rationale for such prioritization.

2. Does the need to provide humanitarian assistance to the DPs and IDPs still remain?

- 2.1 Have the assumptions behind this objective (i.e. a large number of IDPs along the border who were displaced and lost the livelihood and have no or limited access to basic social services such as health and education due to political conflicts) changed?
- 2.2 If this humanitarian assistance is still in need, which geographic areas and/or targeted beneficiary groups covered by the PLE should be prioritized?
- 2.3 Are the PLE's key approaches (local capacity development and convergence) and key interventions (provision of basic requirements such as foods and cash, primary health services, primary education, and social protection) still relevant to effectively respond to the humanitarian needs for IDPs in Burma considering the changing situation and environment? If not, what should be modified and how?
- 2.4 Given the changing environment, to what degree are PLE activities serving as a pull factor to Thailand for those who are not victims of conflict?

3. To what extent have the capacity of PLE's sub-grantees been strengthened to support PLE's strategy for sustainability?

- 3.1 Level of capacity of border-based CBOs and NGOs and local governments who engage in health, education, and social protection services (i.e. GBV prevention and response services and female leadership) on both sides of the Thai-Burma border as measured by PLE's organizational capacity assessment tool and other metrics, and whether their current levels of

capacity are adequate for maintaining the services to the targeted communities after the PLE's life;

3.2 Potential modifications to the capacity strengthening strategy and the interventions in the event that a similar program is developed in the future; and

3.3 Other recommended models or approaches and strengths and limitations in applying them in Burma and Thailand.

II. PROJECT BACKGROUND

For more than 25 years instability, conflict, and governance fragility have resulted in extensive internal displacement, displacement across international boundaries, and other outward migration by populations from Southeast Burma (SE Burma). The scale of displacement combined with extreme levels of poverty and subsequent lack of critical services has required a substantial, protracted international response. USAID has a long history of providing humanitarian assistance along the Thai-Burma border, for two distinct but related groups of people: DPs from Burma who have crossed the border into Thailand and for IDPs who have fled their homes of origin to other locations within their home country. In both countries, IDPs and DPs either live in camp situations or live amongst local communities with widely varying socio-economic conditions.

DPs in Thailand. Ordinarily under international law, people who flee their country of origin and cross an internationally recognized border are considered refugees. These populations flee for reasons related to armed conflict, generalized violence, and human rights violations. However, as the country housing hundreds of thousands of displaced people from Burma within their country, Thailand is not a signatory of the 1951 Geneva Convention Related to the Status of Refugees or its 1967 Protocol which define who is a refugee, their rights, and the legal obligations of states party to the Convention. However, as it is widely accepted that the 1951 Geneva Convention's principle of *non-refoulement* (that is to say, forcibly expelling or returning a refugee in any manner whatsoever to the frontiers of territories where his or her life or freedom would be threatened on account of race, religion, nationality, membership of a particular social or political opinion) is part of customary international law, Thailand continues to host hundreds of thousands of vulnerable persons referred to as "displaced persons" rather than as refugees, a term applied to populations under direct protection of the 1951 convention and subsequently the United Nations High Commissioner for Refugees (UNHCR).

IDPs in Burma. Unlike refugees, IDPs have not crossed an international border to find sanctuary from armed conflict, generalized violence or human rights abuses but have remained inside their home countries. Even if they have fled for similar reasons as refugees, IDPs legally remain under the protection of their own government – even though that government or conditions within that country might be the cause of their flight. As citizens, they retain all of their rights and protection under both human rights and international humanitarian law.

USAID's support to these two target populations comes in the form of **humanitarian assistance** that provides healthcare, education, food, and other aid (otherwise referred to as "protection services"). USAID has managed this assistance to both IDPs and DPs from Burma along the Thai-Burma border since the 1990s. Built upon the success of the \$49.6 million "*Support to Health, Institution Building, Education, and Leadership in Policy Dialogue (SHIELD) Project*," PLE has continued this support since December 2011. Around 4 years and a \$40 million initiative, PLE was designed in the context of protracted conflict in SE Burma and continued displacement within Burma and into border provinces of Thailand. It provides humanitarian assistance/protection services in ways that strengthen local capacities of CBOs to deliver essential services, promote collaboration and coordination across organizations, empower innate capabilities of communities, and strengthen local decision-making.

PLE also operates within a strategic paradigm reflected in the idea of **convergence**. The SOW regards convergence as the need to “adapt to new opportunities to promote linkages and convergence between PLE and USAID/Burma’s existing strategies and program activities; between PLE’s ethnic social service providers (border-based) and the Government of Myanmar and CBO network inside Burma.”¹ This interpretation of convergence is also reflected in PLE’s Result 2 (“promoting convergence with agencies and interventions from within Burma”) as part of Result 2.1 (“Improved coordination and convergence between humanitarian assistance organizations in Thailand and Burma for greater efficiencies in sector service delivery to the most underserved in Southeast Burma”). However, the Evaluation Team discovered that the idea of convergence is largely seen as a process that is largely agreed upon by implementation stakeholders, whereas the overall strategic purpose of convergence remains contested with multiple implementation stakeholders regarding it as ultimately supporting national reconciliation, more effective service delivery, or greater integration of HA investments provided on both sides of the border. The Evaluation Team treats convergence as defined in the SOW.

The operational environment within Burma has shifted unexpectedly, rapidly, and substantially since the PLE’s original design back in 2010-2011. Political, economic, and administrative reforms have been initiated by an elected GoB – the first in almost 50 years. New ceasefire agreements have been concluded and seem to be holding with most of the ethnic states’ armed groups. These evolutions have created cautious advancements in security and stability for conflict-affected communities in Southeast Burma. Some, including The Border Consortium (TBC), estimate that displacement rates and camp populations have continued to drop since 2010. In Thailand, a new military-dominated government installed after a May 2014 coup d’état following protracted political instability may have contributed to a deterioration of the policy environment with respect to DPs from Burma that has further constricted the space.

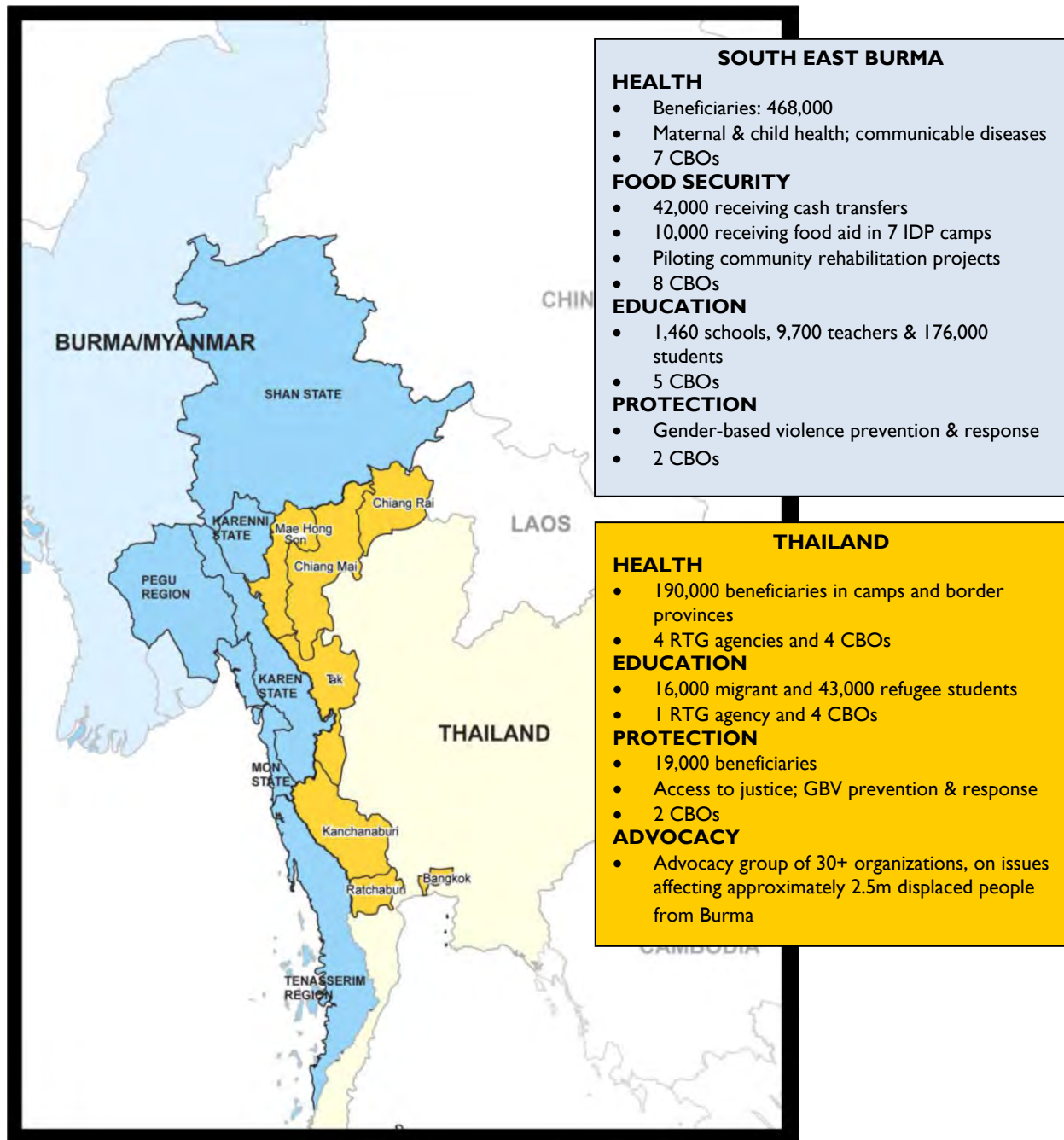
In response to positive changes within Burma, the USG has restored full diplomatic relations including the re-establishment of the USAID/Burma Mission (April 2012) and the appointment of a US Ambassador (June 2012). In Burma, USAID focuses on democracy, human rights, rule of law, and transparent governance; peace and reconciliation; health; economic opportunity; and food security. Since the opening of USAID/Burma, the management of almost all USAID-funded Burma programs has been transferred from USAID/RDMA to the Mission in Rangoon with the exception of PLE, while USAID/Burma provides strategic oversight and direction.

Despite recent events in Burma, fundamental challenges remain: low investment in basic services such as health and education, and limited government access to areas affected by internal conflict. The need for humanitarian assistance to DPs and IDPs concentrated along both sides of the Thai-Burma border still remains, but the design, approach, service delivery methods, and resources to provide such services, may differ according to the changing context in Burma.

PLE is implemented by the International Rescue Committee (IRC), in partnership with three other consortium members: Mae Tao Clinic (MTC), The Border Consortium (TBC), and World Education (WE). The four consortium members work to build the technical, management, and leadership capacities of CBO sub-grantees and Thai government offices to deliver efficient, effective, and equitable services for conflict-affected populations living in six regions in Southeast Burma including four ethnic states and two divisions, as well as for DPs in nine temporary shelters and migrants from Burma in selected communities in six border provinces in Thailand (Figure 1).

¹ See Statement of Work in Annex I

Figure I: PLE Overview Map²



Source: USAID Scope of Work

PLE aims to achieve three key results as summarized below.

² It should be noted that PLE does not operate across all regions in the States and Provinces shown in the map. Detailed maps of PLE operating areas are include as Annex IX.

Result 1: Improved access to quality healthcare, education services, and skills development to DPs from Burma (both in the temporary shelters and local communities) focuses on providing quality sustainable health and education services in Thailand through increasing access of DPs in Thailand to public health and education services provided by Ministry of Public Health (MoPH) and Ministry of Education (MoE); as well as through increasing technical, institutional, and leadership capacities of CBOs to provide complementary services that are integrated into host country systems³.

Result 2: Improved delivery of food, healthcare, education, and other humanitarian assistance to IDPs in Southeast Burma focuses on enhancing the technical, institutional, and leadership capacity of partners implementing health, education, food security, and protection programming in Southeast Burma; strengthening monitoring and evaluation; increasing coordination; promoting convergence with agencies and interventions from within Burma; and enhancing critical social service provision in Southeast Burma in ways that build on local capacities and promote reconciliation and peace building.

Result 3: Improved humanitarian protection and policy environment for DPs from Burma works to improve the policy environment in Thailand by promoting evidence-based advocacy through coordinated engagement with the RTG, and supporting CBO capacity and access to influence policy dialogue and implementation. This result also encompasses access to justice and GBV prevention and response interventions, as well as promotion of protection, gender equality, and humanitarian principles with partners.

PLE works across both sides of the Thai-Burma border in the following select areas⁴:

In Thailand

- Chiang Rai Province – DPs in local communities
- Chiang Mai Province – DPs in local communities
- Mae Hong Son Province – DPs in four temporary shelters and local communities
- Tak Province – DPs in three temporary shelters and local communities
- Kanchanaburi Province – DPs in one temporary shelter and local communities
- Ratchaburi Province – No direct service to DPs (only capacity building and support for operation cost to a CBO working on the other side of the border in Burma)
- Bangkok Metropolitan Region – for cross-cutting interventions, i.e. advocacy and partnerships

In Burma

- Shan State – IDPs and local communities affected by conflict
- Kayah/Karenni State – IDPs and local communities affected by conflict
- Kayin/Karen State – IDPs and local communities affected by conflict
- Mon State – IDPs and local communities affected by conflict
- Tenasserim/Tanintharyi Division – IDPs and local communities affected by conflict
- Pegu/Bago Division – IDPs and local communities affected by conflict

³ This is implemented through a “Transition Strategy” toward integration with RTG.

⁴ Different services are provided to different population (ethnic) groups according to their needs. A matrix that displays the list of PLE’s implementing partners (IPs), their roles, and focused service and geographic areas is provided in Annex I Evaluation SOW.

III. EVALUATION DESIGN, METHODS & LIMITATIONS

I. EVALUATION DESIGN

The methodology outlined in the SOW required use of a hybrid team approach which included staff and experts from Rapid Asia supplemented by two USAID technical staff. The contract outlined roles for a USAID Cross-Border Health Program Development Specialist and a USAID Gender Equality and Female Empowerment Specialist who also collected data conducted through primary informant interviews and provided additional insights.⁵ Rapid Asia exercised management, administrative, and quality control solely over Rapid Asia staff and consultants as well as the professional survey firm sub-contracted for survey data collection.⁶ The data collection firm has previous experience conducting surveys with migrant populations.

The Evaluation Team (Annex II) comprised technical and evaluation experts with diverse experience in Thailand, Burma, regionally, and globally. From the technical side, team members represent expertise in health, gender equality and female empowerment, local capacity development, humanitarian assistance, internal displacement and refugees, Burma political economy, conflict mitigation and Do No Harm, and migrant population issues. Team members also possess experience in conducting research and program evaluations by a mixture of both qualitative and quantitative informed methods. They also possess programmatic experience with donors and implementers.

The Team employed a mixed-methods evaluation design that combined qualitative and quantitative methods of data collection including desk review, qualitative interviews with key stakeholders and beneficiaries in target communities, as well as a quantitative survey with beneficiaries and an on-line survey among sub-grantees.⁷ Moderator guides and questionnaires were developed for each target group, covering specific PLE-related topics including access to health, education, and protection services; future aspirations; perception towards the changes taking place in Burma; likelihood of returning to Burma, and issues related to capacity development. These methods were determined to be most relevant to the established timeframes, contextual limitations, and budget allocation. Insights were identified through triangulation of multiple data sources to construct findings, conclusions, and recommendations. This evaluation covered the project up to September 2014.

⁵ “The two staff members from USAID ... will serve as members of the evaluation team. They will work under the leadership of the Evaluation Team Lead, not vice versa. Due to other commitments, their direct participation to the evaluation may be limited during certain stage(s) of the evaluation. However, they are committed to work with the contractor as a team to implement the evaluation from start to finish including the evaluation and tools design, field data collection, and providing inputs to the evaluation report.” Contract SOW, p. 16.

⁶ “As part of the Agency’s strategy to strengthen staff capacity, USAID encourages participation of USAID staff on the Evaluation Team, in full or in parts, when his/her participation is considered beneficial for skill development or for ensuring the use of evaluation results, and does not present a conflict of interest or a threat to validity of the evaluation. ... It is anticipated that two USAID/Burma staff will accompany the Evaluation Team to the field visits to learn not only about the border situation and PLE interventions but also the evaluation process and technique. However, they will not be part of the Evaluation Team but rather be observers.” Contract SOW, p. 16.

⁷ For purposes of this report, PLE CBO sub-grant partners and government agencies receiving PLE sub-grants are collectively referred to as ‘sub-grantees’ unless otherwise indicated.

2. DATA COLLECTION METHODS

Based on initial document review and internal consultations with USAID/RDMA, the Evaluation Team identified four target groups, for which interview guides and survey questionnaire were developed: (1) donors and stakeholders including USG agencies /donors/international non-government organizations (INGOs)/government agencies, (2) PLE Consortium Partners, (3) beneficiaries in targeted communities, and (4) PLE's sub-grantees. Full analysis was conducted for each of the three types of aforementioned data collection through triangulation (see Section 3.4).

2.1 Document Review

The Evaluation Team conducted a document review to better understand the PLE itself and the current operating environment of the program. An initial document review was done in early August followed by subsequent reviews to explore specific program areas. Document reviews helped the Team in understanding the PLE convergence strategies; developing the methodology for the surveys; clarifying the program's beneficiaries; gaining understanding of the local capacity building approach and tools being used in the program; and better comprehending the changing socio-political landscape in Burma that affects needs for basic services of program beneficiaries. Annex V presents a list of documents reviewed which the Team obtained from USAID/RDMA, PLE, donors, and other relevant sources.

2.2 Workshop

In preparation for data collection, Evaluation Team members convened a workshop in consultation with USAID/RDMA staff and PLE key persons who are familiar with both PLE and SHIELD (the predecessor project to the PLE) to clarify the underlying assumptions of the key evaluation questions. This workshop provided an opportunity for key stakeholders to provide input for consideration in the development of the evaluation tools. As a result of this workshop, the Evaluation Team gained insights into the current context of PLE, identified the intended primary users and audiences of the evaluation report, and gained input into the design of data collection tools.

2.3 Informant Interviews

A total of 102 informant interviews (IIs) were conducted with key groups in both Thailand⁸ and SE Burma⁹ between 20 August and 14 September 2014. Based upon requirements of the SOW with respect to sub-questions associated with each of the three key evaluation questions, and in consultation with USAID, the selection of informant groups was reduced to four pools, specifically:

- (1) USG Agencies/Donors/INGOs/Government Agencies,
- (2) PLE Consortium Partners,
- (3) Beneficiaries in target communities, and
- (4) Sub-grantees.

⁸ In Thailand, the Team conducted IIs in Bangkok, Tak Province (Mae Sot District and Umphium Mai Camp), Mae Hong Son province (Mae Sariang district and Baan Mai Nai Soi Camp), Chiang Mai Province (Muang district), Chiang Rai Province (Muang district and Mae Sai district).

⁹ In Burma, the Team visited communities and CBOs in Kayah State (Loikaw and Demoso Townships), Kayin State (Hpa-an, Kawkareik and Myawaddy Townships) and Mon State (Mawlamyine Township). The Team also interviewed some camps residents as well as informants in Rangoon.

The composition of the first, second, and fourth groups were naturally determined by (a) direct affiliation with PLE (either as funders or other international stakeholders, government agency collaborators, Consortium Partners, or sub-grantees) and (b) the management staff available from those organizations. Meanwhile identification of the third group took into account the variety of services that PLE delivers as well as geographic representation and practicality in reaching them given limitations on budget and time required to reach less easily accessible areas, particularly within SE Burma.

Table I presents a breakdown of informants interviewed into the four groups as identified above. Annex V shows the complete list of individual informants the Team met for interviews. Apart from USAID/RDMA and USAID/Burma, several donors and INGOs were interviewed based on being involved with PLE or supporting similar programs in Burma and/or Thailand. The four PLE Consortium Partners were all interviewed at least twice, the second interview being more focused on capacity development. Ongoing email communication was also undertaken with the USAID, PLE Consortium Partners and other stakeholders. To ensure as broad as possible geographic spread and inclusion of different ethnic groups, interviews with beneficiaries in target communities were carried out in Mon, Kayin, and Kayah States¹⁰ in Burma and Tak, Mae Hong Son, and Chiang Rai Provinces in Thailand. Special effort was made to ensure equitable representation of both male and female respondents. Some interviews were done in the form of group interviews to include more informants and to adjust to prevailing preferences among beneficiaries and the logistic providers from the PLE consortium within Burma. To ensure commensurate levels of contribution from female respondents, individual face-to-face interviews were also conducted to supplement the group interviews. Twenty-three of the 35 sub-grantees were interviewed in SE Burma and Thailand with representation from all PLE service sectors. To supplement some of the information from the face-to-face interviews, the Evaluation Team contacted the remaining 12 sub-grantees by phone and was able to interview 10 of them and obtain detailed responses. Separate interview guides were developed to explore each evaluation question and as appropriate for the different target informants. Apart from two donor representatives who were travelling and interviewed over Skype, all interviews with donors were conducted face-to-face. Local interpreters accompanied the Evaluation Team in the field to ensure interviews could be carried out in the preferred local language of informants.

Table I: Number of Informants Interviewed by Predefined Groups

Target Groups	Number of informants	
	Thailand	Burma
USG Agencies/Donors/INGOs/Government agencies	28	13
PLE Consortium Partners	4	0
Beneficiaries in target communities	12	22
Sub-grantees	13	10
TOTAL	57	45

2.4 Structured-interview Survey of PLE Beneficiaries

Since it was not feasible to conduct a quantitative survey among IDPs in SE Burma and domestic policy circumstances in Thailand prevented a similar survey of DPs inside camps in Thailand, the evaluation Team could only conduct a survey among beneficiaries in local communities in Thailand. As the surveyed

¹⁰ Kayin and Kayah States are also known as Karen and Karenni among ethnic populations.

areas in Thailand host migrants/DPs outside of the camps and people who have temporarily crossed the border into Thailand, the survey could capture beneficiaries from both sides of the border. Therefore, the survey respondents were defined as PLE beneficiaries living in Thailand (PLE BT) and PLE beneficiaries living in SE Burma who temporarily crossed the border to receive PLE services in Thailand (PLE BB). It is important to note that the latter group is neither a representative of IDPs nor all PLE beneficiaries in Burma. However, with concurrence from USAID, it was decided to include PLE BB as it was the only viable option to capture opinions from beneficiaries who live in SE Burma.

A face-to-face survey was conducted with 200 PLE BB who crossed the border to receive PLE services in Thailand and 300 PLE BT residing in Thailand. The geographical distribution of the sample was based on the operational coverage of PLE in Thailand. With respect to respondent profile, sex and age quotas were used to ensure the PLE BT and PLE BB sample groups would have a similar profile for better comparability. Since the profile of these two beneficiary groups is largely unknown, sex, and age quotas used were based on a recent IOM and ARCM survey with migrants from Burma in Thailand.¹¹ This was a comprehensive study and one of the more recent and best proxies available for setting profile quotas and the following criteria were used to select survey respondents:

- Quotas were used to ensure a 50/50 distribution between males and females; and
- The target age group was 14 years or older with the following quotas: 14-24 (30%), 25-34 (40%), and 35+ (30%).

Burmese, Kayin (Karen), and Kayah (Karenni) speaking translators/interviewers were employed to assist the Evaluation Team in the field. A professional data collection company carried out face-to-face quantitative data collection with trained interviewers.

Data collection for both PLE BT and PLE BB was carried out in 8 districts in Chiang Rai, Mae Hong Son, and Tak Provinces in Thailand. The districts were selected from a sample frame provided by USAID/RDMA containing a total of 16 districts in which PLE interventions take place. Target respondents were selected via intercept. Not knowing how difficult it would be to find PLE BB, half the sample (n=100) was selected from MTC where it was known that around half the patients come from across the border and the other (n=100) were selected across the 8 intervention districts. To ensure a good geographic spread of the sample, respondents were intercepted at different locations in each district. Locations included health posts, ports, bank branches that cater to people from Burma in the vicinity of DP Camps, border villages, schools and street intercept. Table 2 presents the sample size distribution as described above.

¹¹IOM and ARCM (2013). Assessing potential changes in the migration patterns of Myanmar migrants and their impacts on Thailand. Bangkok: International Organization for Migration, Country Mission in Thailand.

Table 2: Sample Size by Target Area

Provinces	District	PLE Services Available in the Surveyed Areas	Beneficiaries Living in Thailand	Beneficiaries Living in SE Burma
Chiang Rai	Mae Sai	Health	29	100
	Mai Fah Luang	Health	21	
Mae Hong Son	Moung	Health	24	
	Khun Youm	Health	26	
Tak	Mae Sot	Education & Protection & Health	50	
	Mae Ra Mad		50	
	Tha Song Yang		50	
	Phop Pra		50	
	Mae Tao Clinic	Health	-	
Total			300	

The survey was conducted from 6 to 19 September 2014. Table 3 shows the sex and age profiles achieved with a fair distribution of respondents from both sides of the border in terms of sex and age.

Table 3: Sample Size by Target Area

Sex	Beneficiaries Living in Thailand (n=300)	Beneficiaries Living in SE Burma (n=200)
Male	49	50
Female	51	50
Age Group		
14-24 years	29	30
25-34 years	40	40
35 year or older	31	30

2.5 On-line Survey and Telephone Interviews with Sub-grantees

Whereas the Team conducted face-to-face interviews with approximately two-thirds of the PLE sub-grantees (23 of 35), the evaluation question on local capacity building and sustainability required additional information on capacity development to comprehensively assess overall levels of organizational capacitation. This was necessary as PLE's established approach included less emphasis on quantitative measurable indicators across a comprehensive range of capacity aspects and more emphasis on an individualized, qualitative, and tailored approach measuring progress in achieving targets set out in individualized capacity plans. Therefore, to holistically determine capacity building performance and perceived improvement across sub-grantees in different service sectors, the Evaluation Team developed and deployed a self-assessment online survey tool. Using an online survey methodology, it was possible to target all 35 sub-grantees and conduct a census. A contact list with 72 management and operation staff was compiled in cooperation with IRC. The survey was translated into Burmese and Thai and was executed on FluidSurveys, a professional survey platform, with the ability to offer the survey in multiple languages, track responses, and send automatic follow ups to non-

respondents. The survey was carried out between 4 and 23 September 2014 and up to three follow-ups were sent to non-respondents. To boost the response rate further, follow-up telephone interviews were conducted. In total, 34 of the 35 sub-grantees participated in the survey based on responses from 66 out of the 72 staff contacted, representing a response rate of 92%. Since some sub-grantees had more responses than others, the data was weighted so that each sub-grantee had an equal weight in the analysis. Given the high response rate and that all but one sub-grantee participated in the survey, results are highly representative of the sub-grantees. The margin of sampling error, based on the finite population correction factor, is around 2%.

The survey provided for a self-assessment of organizational and technical capacity. The on-line survey tool developed was based on USAID's Organizational Capacity Assessment (OCA) Tool, covering multiple capacity domains, and supplemented by questions relating to technical capacities to deliver quality and sustainable services.

Capacity Development Domains
Governance & Legal Structure
Administration
Human Resources
Financial Management
Organizational Management
Program Management
Project Performance Management
Technical Capacity

The tool guided the Evaluation Team in better evaluating the self-assessed level of capacity residing within sub-grantees. This survey should not be confused with a full assessment of organizational and technical capacity which requires comprehensive baseline and interval assessments of organizational and technical capacity. However, this survey allowed the Team to compare sub-grantee segments based on location, service sectors, and capacity domains; as well as gain an insight into perceptions of the sub-grantees on their levels of current capacity as compared to when PLE started and remaining needs for future capacity building support.

3. DATA ANALYSIS

3.1 Document Review

All findings from reviewed documents were included in the evaluation workplan and analyzed along with findings from other methods.

3.2 Informant Interviews and Telephone Interviews

For each interview conducted, the Evaluation Team summarized responses provided by the informants into an analysis template; categorizing key themes, issues, and recommendations raised by the informants, as well as any key findings identified by the interviewers. Each interviewer was responsible to provide data for the analysis template, referring back to notes and voice recordings to ensure key points were captured. Key findings were linked back to each evaluation question. Since several target groups were interviewed there is no consistent sample base to which the Evaluation Team can refer when highlighting qualitative findings in this report. Instead, findings have been classified into the following three categories, using the terms 'few', 'some' and 'most' as indicators of magnitude and can be explained as noted below.

Figure 2: Definitions of magnitude used throughout analysis

Definitions of Magnitude	
"few"	Mentioned by one or two informants
"some"	Mentioned by three or more informants but less than a majority
"most"	Mentioned by a majority

3.3 Surveys among PLE targeted Beneficiaries

An established survey company (the Survey Team) was contracted to conduct face-to-face surveys with PLE beneficiaries. The Survey Team was responsible for data entry while the Evaluation Team conducted data monitoring to ensure quality. The Evaluation Team was fully responsible for data obtained from the online survey. The quantitative data was analyzed using SPSS (Statistical Package for the Social Sciences) statistical software. Findings were linked back to the evaluation questions identified in the SOW.

3.4 Data Analysis and Triangulation

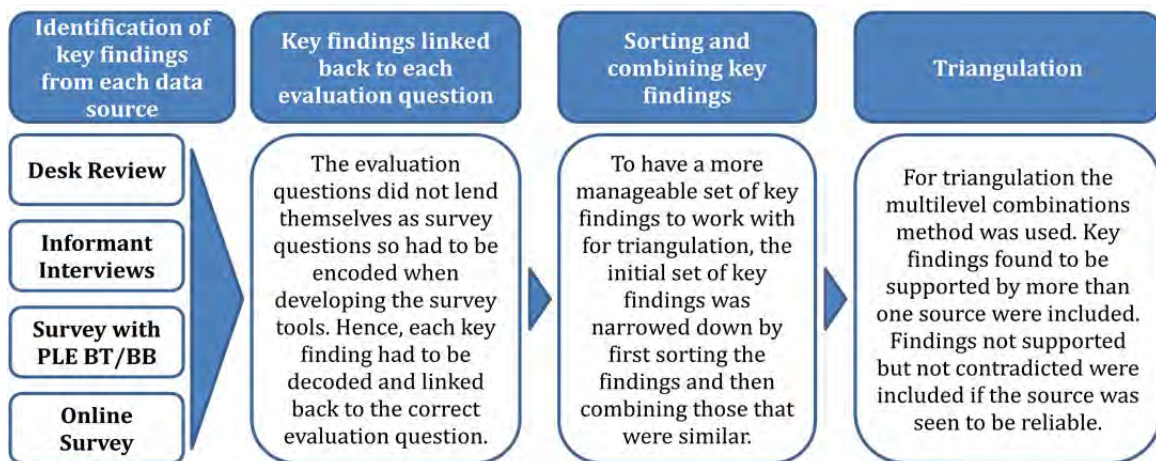
The Team used the multilevel combinations approach to ensure proper triangulation of the data.¹² First, data from the desk review, informant interviews, and surveys were analyzed separately and key findings were identified and agreed within the Team. Secondly, all key findings were linked back to the individual evaluation questions. Finally, triangulation was accomplished by examining the key findings across the different information sources. When reconciling the data and selecting the most important findings, the Team applied the following logic (Figure 3):

Figure 3: Triangulation logic used throughout analysis

Triangulation Logic	
Findings found to be supported by one or more data sources	➔ Prioritized and included
Findings not supported by other data sources but not contradicted	➔ Included if the source was deemed reliable
Findings found to be contradicted by other data sources	➔ Not included

The triangulation process is illustrated in the schematic in Figure 4.

Figure 4: Data triangulation process



¹² USAID, "Conducting Mixed-Method Evaluations," Technical Note, June 2013.

4. LIMITATIONS AND RISKS

Due to domestic policy circumstances in Thailand, a survey among DPs in camps in Thailand was not feasible as planned. Whilst informant interviews (not quantitative surveys) were carried out with DPs in Umphium Mai and Baan Mai Nai Soi Camps, the data collected is limited and not representative.

USAID/Burma determined that it was not possible to conduct a survey with IDPs inside Burma due to prevailing political considerations and therefore did not allow the Evaluation Team to conduct a quantitative survey. This meant the Evaluation Team could only collect primary data through informant interviews conducted in SE Burma. To glean some quantitative insights from beneficiaries in communities in SE Burma, a survey via intercept (n=200) with PLE beneficiaries who had crossed the border was conducted at MTC (n=100) and other intercept points (n=100) in Thailand. As such, this sample should not be construed as representative of all IDPs nor PLE beneficiaries in SE Burma. Attempts were also made to carefully triangulate data collected for this evaluation as well as from other sources to ensure validity and reliability.

Shan State was not included as a target site for this evaluation due to challenging access. However, the Team was able to interview some beneficiaries from Shan State but the information obtained may not be representative of all Shan beneficiaries.

Activities relating to food security and cash assistance are only implemented in SE Burma, including inside IDP camps. However, since the survey in Burma was not allowed, beneficiaries inside Burma were not surveyed and first-hand quantitative data in relation to food and cash assistance could not be obtained. Instead, informant interviews were carried out with beneficiaries in Kayah, Mon, Kayin States.

Another potential limitation relates to response bias that may occur if respondents think that providing certain responses or information to the Evaluation Team may lead to additional funding or continued program activities after PLE. This limitation was seen as critical as USAID staff were part of the data collection Team for IIs. The Team minimized this limitation by ensuring interview guides and survey questions were designed to be neutral and non-threatening. It was further explained to informants that nobody on the Evaluation Team had direct involvement with PLE. Consequent data source triangulation found that interviews conducted by USAID staff were not substantively different in the type of information obtained from other interviewers.

Informants may not have made clear distinctions between past assistance provided by the SHIELD and PLE Projects. Furthermore, individuals who may have participated in training offered by other agencies (since some CBOs do not solely receive support from PLE) may not recognize them as separate activities implemented and supported by separate entities. To minimize this potential bias a two-year time frame was added to relevant questions.

As interpreters were used, some information may have been lost in translation. This limitation was difficult to avoid but was limited due to the experience level of the interviewers who had the ability to probe and clarify when needed.

Since the target group for the survey was defined as PLE beneficiaries either resident in Thailand or having crossed the border into Thailand temporarily, they had to be selected from districts in which PLE is operating in Thailand. As education and protection services are mainly provided in Tak Province and health services are provided across all provinces including Tak, there was potential bias for health services to be more prominent. To mitigate this bias, only n=100 PLE BB were intercepted at MTC. The remaining n=100 PLE BB and were selected in and around the selected districts in areas known to be

frequented by people from Burma. In addition, a larger sample was taken in Tak and quality checking of the data was carried out to determine any apparent inconsistencies. None were found.

Since survey respondents were selected via intercept using quotas, there is no scientific basis for calculating sample size and the sample selected was not a pure probability sample. Because the beneficiary population profile is largely unknown there is no reliable way of estimating the variance and hence, what the ideal sample size should be. Instead, sample allocation was based on having a large enough sample base to cover the selected target groups so that a reasonable comparison of results could be made between them. Past surveys with similar populations were also examined so that appropriate quotas could be applied.

Given these limitations, some caution in interpreting the data should be taken, in particular the data collected from PLE BB cannot be regarded as representative of IDPs nor of all PLE beneficiaries living in Burma who have not, cannot, or do not cross the border. The recommendations made have taken these limitations into account, especially the recommendation to undertake a proper needs assessment with PLE beneficiaries in Burma with respect to humanitarian assistance.

IV. FINDINGS, CONCLUSIONS & RECOMMENDATIONS

Since the overall purpose of this evaluation is to provide USAID/RDMA and USAID/Burma with strategic information for future programmatic decision-making – in part related to geographic, sectoral, and target populations – this report focuses at the strategic level rather than focusing on the detailed performance of program elements. In the following sections the key findings are presented with related conclusions and recommendations made for each key evaluation question separately.

I. CONVERGENCE STRATEGY

PLE has adapted its strategy and activities to the changing situation and responded to new opportunities to promote linkages and convergence between PLE’s border-based ESPs and the GoB and amongst sub-grantees themselves. The convergence objective under PLE aims to contribute to a more integrated local capacity platform in SE Burma that enhances service provision and access to rights. PLE also strives for this platform to be recognized and appropriately integrated with the GoB, connected with civil society, and supported by the international community. PLE has approached convergence with respect to the GoB within the parameters set by USG policy.

I.1 FINDINGS

I.1.1 Understanding of “convergence” is fluid

The Team found that different people understand convergence differently depending on their relationship to the program. The data suggest that convergence is not a ‘goal’ or ‘objective’, but rather refers to a ‘process’ or the ‘means’ through which to achieve the aim of greater integration of border activities within community-based and GoB systems inside Burma¹³. These may have a positive impact on addressing lingering conflict-related social issues such as mitigating social conflict, developing trust with government entities, and creating conditions where DPs and IDPs may be inclined to return home voluntarily with dignity and security.

Qualitative data suggest that some Burma-based and Thailand-based donor stakeholders hold different views of convergence. Some in Bangkok emphasized the idea of convergence as greater integration of ESPs (on both sides of the border) with the GoB and CBO networks within Burma. Some in Rangoon referred to it primarily in the context of national reconciliation. Few ESPs interviewed said convergence meant working collaboratively or working toward a similar goal. Another source of information¹⁴ reports that some beneficiaries in the camps along the border mentioned that they understood convergence outcomes as global access to education, i.e. a child's schooling in the camps being

¹³ For the purposes of this report, community based and GoB systems refer to activities and actors inclusive of ethnic armed groups, ethnic service providers, CBOs, and national and sub-national levels of government (including administrative functions of government that may be controlled by ethnic states). This inclusive definition is sensitive to evolving conflict and peace building dynamics on the ground.

¹⁴ Larlee, Portia (2014) Border aid organisations face funding uncertainty, July 10, 2014, Mizzima Business Weekly.

recognized in Burma and enabling them to attend schools if they return to their homeland. Similarly, ethnic teachers whom the Team interviewed in the border provinces of Thailand expected their teaching qualifications to be recognized should they return to Burma, facilitating access to employment. For some beneficiaries in SE Burma, convergence refers to the integration and/or recognition of education systems used in ethnic minority areas into a national system, not necessarily as part of GoB system but a national education system. Most interviewed donors and international agencies view convergence as an effort to build the capacity of ESPs to be able to provide services and integrate with GoB services. Some international agencies find the concept of convergence as very similar to what they have been doing in creating dialogue and fostering collaboration amongst stakeholder groups.

The data show that while people's specific understanding of how to define convergence varies based on where the individual lives (i.e. in Burma or Thailand) and his or her affiliation with PLE (i.e. Bangkok-based or Rangoon-based donor staff, ESP/CBO) there is a common appreciation for the potential for both positive and negative outcomes that can result from a convergence approach, regardless of one's specific understanding of the concept. Specifically, qualitative data indicate a variety of reactions to convergence, including: fear that it can lead to domination by the GoB or result in Burmanization, can be either positive or negative, must be devoid of any political agenda, and can be seen as positive if the GoB agrees to desired concessions in the ethnic areas. Furthermore, data also show that some respondents have not heard of convergence but suspect it makes sense while others understand the concept of convergence but call it something else (i.e. "tripartite").

1.1.2 Convergence happens at all levels

Convergence occurs at different levels of governance including the national, regional, and local levels as well as policy and institutional levels (Table 5). At the national level, convergence occurs between the central government with different ethnic states, ethnic groups, and ethnic organizations. With respect to policy-level convergence, the Team found it largely related to joint advocacy and complementary missions, policies, and strategies among ethnic organizations or between GoB entities and ethnic organizations. Institutional convergence is manifest through alliances and collaborations that go beyond ad hoc joint activities or personal relationships but rather are maintained due to more resilient institutions. Institutional convergence can be documented by Memorandums of Understanding, joint programs, and formalized collaborations at the organizational level. Lastly, there are other manifestations of convergence at the local level, such as when two organisations collaborate based largely on personal relationships. There are several cases showing preliminary linkages.

In some incidents, cooperation between ESPs and GoB agencies has already taken place, mostly at the local and activity level. Convergence seems not to be dependent on national policy dialogue or a regional implementation model. A number of cases of convergence in various service sectors the Team witnessed in the field are presented below. Ultimately, convergence is not dependent on top-down guidance, but often importantly begins organically at the grassroots level as much as at the higher national and strategic levels.

The Team verified through qualitative and quantitative measures that convergence takes place regularly on the Thai side, particularly between sub-grantees and the RTG. Of the 13 sub-grantees assessed through the online survey and that work exclusively in Thailand, nearly all (12) indicated they have a relationship with the government. This was also confirmed in IIs where the topic was raised and documented. As such, both qualitative and quantitative findings indicate that most sub-grantees operating in Thailand across all sectors have indicated some level of convergence with the RTG. Given the increased emphasis on the operating environment within Burma and the emphasis within the

convergence approach on aspects relative to working inside Burma, the following sectoral analysis describes findings related to convergence across sectors solely within Burma.

1.1.3 Convergence performance by sector

Data the Team analyzed cross-referenced sub-grantee responses from the online survey (to the question about collaboration with government agencies) together with information gleaned from PLE Monthly Burma Update Reports.¹⁵ Qualitative data extracted from the PLE Monthly Burma Updates categorized an activity as contributing to convergence if there was an overt relationship between a sub-grantee and the GoB, a relationship between a Thailand-based sub-grantee and another sub-grantee based inside Burma, between two or more Burma-based sub-grantees, or collaboration with another donor inside Burma. This information suggests that the sectors where convergence occur the most frequently include health and education. Identifying these trends assist in targeting where convergence may be working the most. The case study examples below provide evidence regarding how sub-grantee activities may have different relative intensities, coverage areas, and even different stakeholder groups.

Table 4: Sectoral Convergence Analysis of PLE Monthly Update Reports (Aug 2013 – Sept 2014)

Activities Identified in PLE Monthly Update	Sectoral Convergence Analysis						
	Mon #	Kayin #	Kayah #	Shan #	Sub-national #	National #	Overall #
Health	-	5	3 ¹⁶	-	4	7	19
Education	3	5	2	-	1	2	13
Food Security	1	2	-	-	1	1	5
Protection	-	2	1	-	1	-	4
Overall	4	14	6	-	7	10	41

Convergence in Health

The analysis suggests that the health sector performs very well in terms of convergence as compared to other PLE sectors inside Burma (Table 4). Sectorally, some examples can be seen in regard to malaria treatment and growing relations among agencies working inside Burma and those working in the southeast (Box 1). In Kayah, ethnic health workers from a PLE sub-grantee are being trained by the Ministry of Health (MoH) in Burma with the anticipation from ethnic groups that the GoB would recognize them in the future as counterparts of health service delivery in ethnic areas (Box 2). The Team was told by some health sub-grantees that, while their ethnic health organizations are keen to improve their own services and increase working relations with GoB entities, others wait for

¹⁵ The Monthly Burma Update Report was selected for the convergence analysis in preference to other USAID reporting sources because: a. PLE advised that this report “prioritizes updates on convergence”, b. because the report targets USG stakeholders in Burma who prioritize convergence, it is reasonable that these reports would capture activities and successes with a fair representation of PLE’s work inside SE Burma on convergence.

¹⁶ The health convergence activities in Kayah State were carried out by the Civil Health and Development Network (CHDN), an umbrella alliance of 6 ethnic health organizations co-led by PLE sub-grantee Karenni Mobile Health Committee.

convergence between government and ESPs to follow peace talks and political agreements. Data do not show a uniform preference across geographies or sectors. Decisions to engage or not to engage are taken by organisations after weighing perceived pros and cons. In other words, some indicated that while they are keen to collaborate now, some take a more wait-and-see approach. Based on documents reviewed, some other examples of convergence or key processes towards convergence in health supported by PLE can be acknowledged. They include:

- PLE has facilitated dialogue between ethnic health CBOs and the Burma MoH at the national and state levels.
- PLE has supported the establishment of Health Convergence Core Group to support ethnic CBOs to explore and develop linkages with GoB, as well as international and local actors in Burma;
- PLE has supported ethnic CBOs to access new funding streams, resulting in a number of health, education, and protection sub-grantees securing funding through Burma mechanisms. This is not purely health-related. Note, however, some education sub-grantees were also successful in winning grants from inside Burma.
- PLE has brokered engagement between ethnic health CBOs in government-to-government (G2G) dialogues and collaboration between Thai MoPH and Burma MoH.
- PLE has established certificate training programs that have been carried out by MTC and Thammasat University with clear support from University of Community Health, Magway (UCH) and Burma MoH. This will provide recognised accreditation for hundreds of ethnic health workers.

Box 1: Convergence in Malaria Treatment

International agencies and ethnic health organizations working on the border and in SE Burma have been using the “Burmese Border Guidelines version 2007”¹⁷ as the guide for medical training and treatment protocols up until now. With more communication taking place between PLE partners and government health entities inside Burma, in 2012 PLE revised the training for community health workers with updated malaria treatment protocols following Burma national treatment guidelines. Though PLE has provided training to ESPs in health, pharmaceuticals have been a constraint. At the meeting with Deputy Minister of Health facilitated by PLE in September 2013, ESPs requested the Burma MoH to provide medicines for malaria treatment. The MoH was confident to provide some malaria medicines to PLE partners. Subsequently, through USAID and PLE facilitation, in 2014, two (2) PLE health sub-grantees also received malaria commodities and training from the Control and Prevention of Malaria (CAP-Malaria) Project, a USAID supported project inside Burma. The support from CAP-Malaria project to the ESPs will continue.

Box 2: State Health Department Training in Kayah with Participants from ESPs

Enabling ethnic health staff to receive certified GoB training is a key step toward their government’s recognition of their roles and skills as well as an inclusive approach to health services. In June 2014, PLE supported the Kayah (Karenni) State Health Department to open the Public Health Supervisor, Level II (PHS-II) training program for the first time. Previously, key components of this course were the sole responsibility of the University of Community Health in Magway. As a part of the decentralization of the

¹⁷ These guidelines were developed by Aide Medicale Internationale in collaboration with local community-based organisations drawing on global best practice on health.

health system in Burma, and in light of capacity constraints at the University of Community Health, the State Health Departments were recently authorized to offer the full PHS-II courses in an effort to address critical human resource shortages in hard-to-reach areas of Burma. Following PLE advocacy and dialogue with the State Health Department and a PLE-supported ethnic health sub-grantee, Civil Health and Development Network (CHDN), the State Health Department agreed to accept ten staff of this PLE sub-grantee into the first course, in addition to forty participants recruited by the State Health Director. PLE also provide staff to serve as lecturers for specific course components, as well as limited financial support. This is the first time that ethnic health organization staffs have gained access to formal MoH training.

The PHS-II course will run through to December 2014. Graduates will then receive formal government certificates, and CHDN graduates will work in ethnic areas with skill sets recognized as equivalent to their government counterparts. During the evaluation field visit, the Kayah State Health Department expressed the expectation that the CHDN graduates would go back to work in their respective areas and that there would be more sharing of health information between the ethnic areas and the government. In effect, this training has served to bring the government health workers and ethnic health workers closer and increased communication with each other.

Convergence in Education

The education sector also performs relatively well in terms of convergence (Table 4). This is consistent with opportunities identified by UNICEF (through an II and provided documentation) at both the national and sub-national levels where education reform combined with improving conditions on the ground has made convergence increasingly possible within the education sector. While UNICEF is not funded by USAID or PLE, they are undertaking convergence activities within education to which PLE sub-grantees could potentially link future work. While PLE sub-grantees have taken up opportunities for convergence within education, data from IIs suggest that PLE partners continue to take a positive yet cautious approach toward collaboration with the GoB. Some indicated this is because the GoB is too controlling while others say that education reform is much needed but will take time.

There are several cases illustrating that convergence can take place at different levels of education service delivery. A case of convergence at the local level between PLE supported community teacher volunteers and a government school is shown in Box 3. Box 4 shows an example of convergence that happens at the regional level among various ethnic education organizations in SE Burma.

Box 3: Convergence in Education at Local Level

A primary school in a village in Kayah State highlighted the challenges but successes of convergence as an approach for stronger education outcomes. This school has been under government management since 1975. Although the government budget for the school has increased since the recent ceasefire, it is still not sufficient to meet all needs. Short of resources, the community was requested to provide local contributions to the school. In addition to the human capital the community can afford (e.g. cleaning of school grounds), PLE supports two volunteer teachers from the community to provide one hour of ethnic language instruction a day, and instruction of other courses in Burmese. These teachers receive a minimal stipend from PLE; however, as government teachers' salaries have risen exponentially in the last couple of years, the wage gap is increasing. This school is a good example of a successful convergence approach at the local level between the community volunteer teachers and government school but the real-time challenges to design a program and approach amidst rapid change, e.g. salaries gap, is clear.

Box 4: Convergence in Education at Regional Level

Another example is an informal working relationship between an ethnic education organization and GoB schools in Mon State who work on a mutual understanding, without an official contract. The ethnic organization has decades of experience running a school system, including curriculum development. Its representatives were involved in the process when GoB schools reviewed their curriculum. This shows how convergence can happen at the local level, even though the national level convergence with the MoE and other ethnic education service providers may be slower to occur.

Convergence in Protection

The protection sector accounted for relatively few of the identified convergence activities – only four of the 41 identified references across the PLE reports reviewed (Table 4). Even with limited resources allocated to protection work (approximately 5% of the budget inside SE Burma),¹⁸ the Team found some cases of convergence worth noting as they may contribute to leveraging convergence to support inclusive national reconciliation. PLE support for convergence in protection includes provision of networking and fundraising opportunities and promotion of the role and voice of women in the ceasefire discussions and political dialogue. This resulted in closer collaboration and joint funding applications among protection sub-grantees.

One example is a national-level women’s network, which comprises 37 women’s organizations including those in SE Burma. The network was founded after witnessing the collective efforts of women’s groups after the 2008 cyclone Nargis disaster. The main aim is for collective advocacy. The network received a short-term grant from USAID/Office of Transition Initiatives (OTI) through another project to foster women’s leadership in all sectors. The network is currently drafting the CEDAW Shadow Report with focus on the status of women in Burma in parallel to the government’s official report to the UN. The Network is also part of ASEAN’s Women’s Caucus. Although PLE is not currently supporting this network directly, it has invited select members of this network to training on Social Enterprise (SE) development as a fundraising strategy. As a result, the Network successfully applied for joint program funding with one of PLE’s protection sub-grantees.

Convergence in Food Security

Data analyzed by the Team identified some cases of convergence in food security in the field and was reported a case on a livelihood development initiative on a rehabilitation assistance project. One Kayin sub-grantee aims to improve livelihood security through land ownership and resource management. It has supported multi-stakeholder work on land rights, including facilitated workshops, providing technical support to demarcate, issue land title deeds, and register community forests. This form of engagement empowers communities to be actively involved in planning, protecting them against land grabs for development and commercial purposes, and helping improve their food security and livelihoods derived from agriculture. PLE initially supported the sub-grantee to survey, demarcate, document, and advocate for the registration and recognition of land tenure in Kayin State. Another example, a PLE sub-grantee in Mon State promotes establishment of land registration committees in each village tract and appeals directly to GoB for registration of land rights. In support of expanding greater food security, another

¹⁸ PLE Project Milestones, Dec 1 2011 – June 30 2014, p.3.

PLE sub-grantee works to build confidence between GoB and non-GoB stakeholders, resulting in expanded humanitarian access to government controlled areas.

I.1.3 Perceptions of beneficiaries in Burma towards convergence

Based on information gained from IIs with sub-grantees and beneficiaries, three points were recurrently voiced. First, the convergence approach is seen positively as an effort to improve service delivery since it pools resources and skills from GoB, sub-grantees, and communities to increase access to improved basic services. Second, beneficiaries expect that better access to services can be warranted if the GoB and ESPs can better cooperate. For beneficiaries, the concern is not about who provides services but about the access to and the quality of services they receive. In contrast sub-grantees place greater concern on issues of trust. The Team was told by some sub-grantees that many ESPs still distrust the GoB. Fear that convergence can lead to domination or “Burmatization” by the GoB, where the ESPs could be subsumed or delegitimized by GoB systems, was mentioned. Sub-grantees comment that convergence can be seen as more positive if it is devoid of the political agenda. Third, there is a broad understanding among sub-grantees that convergence may take time to realize. It is believed that an improved political situation in Burma can lead to better collaboration between GoB and the ethnic groups, thus helping support the realization of convergence.

I.1.4 Key factors to support or obstruct convergence

Information gained from interviews was aligned with key findings from the document reviews regarding key support and barriers to convergence as discussed below.

Support factors

Reduced conflict due to ceasefire: Most of the sub-grantees the Team met viewed ceasefire agreements as an enabling condition for their work inside Burma. Ceasefires reduce armed conflict thus people feel safe to travel, communicate, trade, and otherwise live increasingly productive lives. It results in increased mobility inside Burma. This allows sub-grantees to reach a wider group of beneficiaries. For example, a food security sub-grantee said they can now extend their work, reaching broader groups of people previously inaccessible prior to the ceasefires due to safety concerns. Ceasefires also give them an opportunity to communicate more with GoB agencies. For example, an ethnic education organization told the Team that they and a government school have started to turn to one another for more coordination that was unlikely to happen during an environment of no ceasefire.

Improved interactions with GoB: Some interviewed donors and INGOs view that the GoB is now more open to interact with other stakeholders including international organizations and CBOs. This provides them with more opportunities to interact with GoB service agencies and thus more opportunity for collaboration. However, some of those interviewed indicated that more systematic effort is still needed to convince government officials/staff from top-down bureaucratic cultures and perspective toward CBOs and beneficiaries to be more sensitized and engaged with people.

Personal relationships: In some cases, good relationships among CBOs or relationship between CBOs and GoB service agencies are the result of personal networks and/or personal connections that pave the way for more coordination. For example, a women-based CBO commented that a good personal relationship with other women CBOs supported the creation of a national women’s network. Some respondents in the health sector also noted this personal factor as an important starting point for convergence.

GoB service agencies are overwhelmed and look for support from CBOs: Lack of financial and human resources in government schools has pressured the GoB to seek support from ESPs. This creates an opportunity for connections and collaboration. Similar dynamics also apply to the health sector, such as where a sub-grantee indicated that when government clinics are full, government workers actively direct patients to access CBO health services.

PLE facilitation: Some sub-grantees give credit to PLE facilitation in the collaboration process such as when PLE helped educate the GoB that ESPs have skills to deliver good quality of services. This improved CBO creditability in the eyes of the GoB and helped CBOs understand the value of collaborating with GoB agencies. PLE has served as neutral, dispassionate third party in negotiating joint activities between ESPs and the GoB as illustrated in the previous case studies (Boxes 3 and 4). Such a role performed by an external entity is helpful to the convergence process.

Barriers

Past experience of failed ceasefires and difficulty in building trust: A history of broken peace deals hampers peace negotiations and makes ethnic groups move cautious. For example, some sub-grantees in the health sector told the Team that they would wait for convergence to follow peace negotiations and political agreements. Some sub-grantees indicated that low levels of transparency of the GoB and the lack of rule of law also further hinder trust building. Another reason for the low levels of trust is that few CBOs are allowed to have a role in the peace discussions and they experience limited opportunities for participation in the peace process.

Regulations on CBO registration: The GoB requires CBOs to register in order to legitimately operate inside Burma and in some cases to facilitate the formal working relationship between GoB agencies and ESPs. However, some sub-grantees the Team interviewed expressed the concern that registration would facilitate easier access to, and more opportunities for, the GoB to assert control and monitor their movement and activities. Whether or not, in fact or in practice, a substantive difference between GoB influence over a CBO that is registered or not registered exists, the data indicate a distinct perception among sub-grantees that registration would, at this point in time, not be in their organizational best interests. For example, in a situation where a ceasefire collapses and a CBO has already registered with the GoB, their legitimacy in the eyes of the community may be affected, and at worse the organisation could be viewed as a collaborator, in the negative sense of the word. At this stage, these sub-grantees have indicated a preference to work with GoB agencies who accept their non-registered status.

Stalled decentralization: In his report, Jolliffe¹⁹ pointed out that the provision of social services (for example, health, education, and social protection) has become central to ethnic group authorities' efforts to maintain patron-client relations with communities in their areas of control, and thus bolster their legitimacy. Jolliffe further stated that the ethnic authorities prefer more decentralized governance and expect their roles as service providers in the non-state areas will continue and be recognized by the GoB after a peace settlement. However, the 2008 Constitution places almost all duties related to the provision of social services and development in the hands of the Union with only minimal authority over such affairs to regional governments. A sub-grantee pointed out that this tension hampers collaboration between ESPs and GoB service agencies within the context of convergence.

¹⁹ Jolliffe, Kim (2014) Ethnic conflict and social services in Myanmar's contested regions. Yangon: Myanmar.

Uncertainty after the 2015 election: Drawing on qualitative interviews with sub-grantees and donors, the pervading tendency of CBOs and GoB agencies now is one of wait-and-see pending the results of the 2015 elections. Some level of uncertainty thus applies to the future policies of a post-2015 central government toward ethnic groups. Therefore, at this stage, many CBOs and GoB agencies are moving slowly in working together and would like to wait for a clearer policy environment beyond the elections before engaging more deeply and meaningfully.

Perception that aid is used by GoB to gain control and power: Some sub-grantees expressed their concern that development through collaboration could be used as a means for GoB to expand its influence in ethnic areas. For example, some said that there might initially be only government health workers entering their areas but that later the Tatmadaw might also follow to assert greater control within their areas.

Additional support for success of convergence

In the view of the Team's discussions with Jolliffe and other donors, suggestions indicated that international organizations are essential facilitators in the convergence process since they can be viewed as neutral in brokering collaborations between the GoB and ESPs. PLE's neutral role in facilitating dialogue between ethnic health organizations and MoH is an example. An education sub-grantee suggested that enhanced donor coordination could also help promote strategic support and avoid overlapping. In addition, international assistance that supports cooperation between the GoB and ESPs in meeting social needs of conflict-affected communities has the potential to signal meaningful progress toward peace. Some donors suggested that aid could facilitate better cooperation between the GoB and ESPs or strengthen networking among CBOs to participate in peace process and interface with the GoB by specifying joint activities as a funding condition. Some donors like 3MDG²⁰ have taken this approach in promoting collaboration between government and ESPs. Others caution that conditionality as such could be conflict insensitive.

It is noted by sub-grantees that better networking among CBOs is important to promote CBO participation and influence in peace processes and interface with the GoB. The case of Myanmar Indigenous Network for Education (MINE) was highlighted. MINE represents more than 22 ethnic groups around Burma including several PLE sub-grantees. MINE aims to promote education reform that would allow young children to learn in mother-tongue languages at government schools and indigenous groups to create their own curriculums. Another area of its work is to promote recognition and accreditation of ethnic school systems by the GoB. The Network platform allows them to have a stronger voice when interacting with GoB stakeholders.

1.1.5 Conditions for return

PLE program documents clearly illustrate that PLE has no aim to push the return of DPs. In line with UNHCR guidelines, PLE recognizes that return should be voluntary and dignified, within a context of durable solutions. For this to happen, appropriate conditions for return need to be in place. UNHCR and human rights groups have looked at and extensively addressed what those specific conditions should be. In line with this, the Team found that the process of convergence can contribute to the

²⁰ 3MDG funding to SE Burma builds on partnerships and models established by PLE with USAID support. The model that 3MDG supports as a donor, such as village committees, is also based on what IOM has been doing in Mon State. It is noted that IOM partners with IRC to implement 3MDG project in Kayah.

improvement of such conditions. Insufficient data presented itself to ascertain with any level of certainty the extent to which convergence approaches can serve as a pull factor for IDPs within Burma to return to their homes of origin. Key conditions for return of DPs in Thailand have been identified as follows:

Confidence in peace process: Based on interviews with donors and INGOs, the scale of return or resettlement remains limited at this stage. A key reason identified by this group of informants is that people still feel uncertain about the peace process. Some sub-grantees the Team interviewed suggested that although nation-wide ceasefires would signal a positive beginning for the peace process, people still wait and see if the GoB's intention for peace is genuine. Similarly in AusAID's report, the ceasefires have not been in place long enough for people to establish trust the government.²¹ This information can be interpreted that trust in the GoB is the underlying concern of people with respect to the peace process. Those interviewed indicate that convergence can therefore facilitate strengthening even arguably low levels of trust through people-to-people opportunities such as exchange, dialogue, collaboration, and cooperation between the GoB and their citizens. Building resiliency in bonds of social trust requires time. Every person-to-person or organization-to-organization opportunity that contributes to increasing this aspect of social capital incrementally increases levels of trust and resiliency for peace. Convergence activities can be seen as providing incrementally to more resilient bonds of social trust as illustrated in the aforementioned cases.

Conditions for basic means for livelihoods are viable: A migrant survey conducted by IOM and ARCM²² reports that personal reasons, especially the desire to be back in their hometowns/villages and to be reunited with families and friends, dominate migrants' primary reasons for wanting to return to Burma. However, better business and employment opportunities, as well as greater security, safety, and services in Burma were reported as the second most important reason for nearly half of those who want to return. The survey of PLE BT shows 46% of respondents indicated they are not likely to return since they are better off in Thailand. Other reasons for remaining in Thailand include the fact that they have no family, no land, nowhere to stay, no work, and no safety in Burma. This is consistent with information gained from interviews with beneficiaries and sub-grantees indicating that displaced people want to live where they can secure basic necessities of life. Interviewed informants mentioned education as a means to improve their capacity to acquire these necessities. They are more likely to return if these services are more available in Burma.

Convergence can potentially address these fundamental needs since it aims to enhance better basic services to DPs. Health, education, food, and protection services are a core part of PLE services. Putting this into the context of convergence, improved access and quality to basic services as a result of convergence can provide DPs important assurances when deciding to return.

1.1.6 Gender inequities in convergence programming

The Team found no evidence to suggest that the convergence strategy affects men and women differently. There was an issue reported by a villager that traditionally only male government health workers could work in the government health clinics but it is no longer a case today. On the other hand, the Team noted that women-based CBOs and their regional and national networks have strong

²¹ AusAID (2012) Independent Evaluation of Australia's Assistance to Refugees on the Thai-Myanmar Border. Accessed from <http://aid.dfat.gov.au/countries/eastasia/burma/Documents/thai-myanmar-border-assistance-refugees.pdf>

²² IOM and ARCM (2013). Assessing potential changes in the migration patterns of Myanmar migrants and their impacts on Thailand. Bangkok: International Organization for Migration, Country Mission in Thailand

potential to serve as instigators for convergence approaches for development outcomes across sectors. However, PLE currently does not have a comprehensive, stand-alone gender equality framework that articulates priority gender equality programming areas, indicators, and measurements.

1.1.7 Geographic focus

Ethnic states in SE Burma were found to have different levels of convergence activities under PLE. Based on the PLE monthly updates from August 2013 to September 2014, the Team identified reported convergence activities that took place in each State and triangulated results with other data points to further assessing levels of convergence across states where sub-grantees operate (Table 5). This table was drawn from the data sets presented in the Sector Convergence Analysis (Table 4). The Team identified the number of sub-grantees operating across the four states. Mon and Kayin States have the highest number of sub-grantees, followed by Kayah and Shan States. According to data from the on-line survey, Mon and Kayin states also have the highest number of sub-grantees reporting some kind of relationship with the GoB followed by Shan and Kayah States. An analysis of the PLE Monthly Burma Update reports (Table 4) demonstrates the highest number of convergence activities in Kayin State, followed by Kayah and Mon States. Relationships with the GoB were triangulated with data from the online survey for sub-grantees as well as qualitative data from IIs where the issue of relations with the GoB were documented.

Table 5: Convergence Activities²³ and Geographic Triangulation Analysis

Convergence Activity	Mon #	Kayin #	Kayah #	Shan #
No. sub-grantees operating in Burma (n=21) - online survey	14	13	8	6
No. sub-grantees with some kind of relationship with GoB (n=8) - online survey	6	5	2	3
Convergence activities identified in PLE Monthly Burma Update Report, Aug 2013 – Sep 2014	4	14	6	-
Regional convergence activities identified in PLE Monthly Burma Update Report, Aug 2013 – Sep 2014 (more than one state at sub-national level)	3	3	2	2
Sub-national convergence activities identified in PLE Monthly Burma Update Report, Aug 2013 – Sep	7			
National convergence activities identified in PLE Monthly Burma Update Report, Aug 2013 – Sep	10			
Number of sub-grantees indicating some kind of relationship with GoB				
Online Survey and PLE program documents	8			
Informant Interviews where relations w/GoB were documented	5			

Kayin State has the highest levels of convergence activities. Many PLE sub-grantees operate in Kayin State and identifiable convergence activities seem to span the breadth of PLE sectors and thus good progress has been made. Fewer sub-grantees operate in Kayah State and two indicated to have some relationship with the GoB. However, whilst the number of convergence activities is lower compared to

²³ Convergence activities are defined as activities that illustrate dialogue, interface, connection, collaboration, joint endeavor, and other person-to-person activities that bring individuals together from both GoB and CBO groups.

Kayin, the number of convergence activities per sub-grantee is higher. The opposite is true for Mon State where a relatively larger network of sub-grantees has translated into relatively few convergence activities.

Shan State seems to have the least amount of convergence activities. The conflict situation in Shan State remains the most difficult for the PLE to support a convergence approach. Commensurate with this access challenge, we see the fewest number of sub-grantees operating here. Few sub-grantees indicated a relationship with the GoB in Shan and therefore it is not surprising to see lower levels of convergence.

I.2 CONCLUSIONS

Reduced conflict due to ceasefire opens ‘windows of opportunity’ for the ESPs to gain better access inside Burma due to improved physical safety and increased mobility. This is demonstrated by the fact that more sub-grantees are able to operate in Mon and Kayin States than in Kayah (with sporadic pockets of conflict) and Shan State (with ongoing conflict in some areas). As a result, they are able to interact with other CSOs and GoB service agencies that are stretched and have limited resources to serve their constituents.

The convergence strategy is considered to be relevant to the changing situation in Burma. PLE has been successfully responding to new opportunities to promote linkages and collaboration between ESPs and GoB agencies as well as the CBO networks in Burma, particularly in Kayin State. Together with Kayah, these states represent good opportunity for further convergence support given the many convergence activities that have already taken place under PLE including across all PLE sectors.

PLE has played a significant role in facilitating convergence. The Team learned of many cases of cooperation and linkages between ESPs and GoB agencies that have already occurred in health and education, and a few cases in food security and protection. The fact that this is a product of the current stage of evolution of the ceasefire/political dialogue should be acknowledged. Convergence sometimes takes form within activities due in no small part to personal relationships. This informal basis for convergence, although not uncommon when considering the time required to build trust across interest groups, represents a challenge for sustainability of the convergence approach, ultimately realizing formal institutional convergence in the long-run. This will require careful understanding of how to galvanize increasing levels of social trust within areas that span the range of various stages of fragility/instability and peace/stability that exists in SE Burma

Although convergence in itself does not serve as a pull factor for return and reintegration, it can contribute to improvement of conditions for voluntary return in dignity and within the context of durable solutions particularly for DPs in Thailand. Essential conditions for return including confidence in the peace process, increased access for addressing basic needs, livelihoods and improved economic/job opportunities, as well as a better protection, can be enhanced through convergence. Building the resiliency of social trust remain key both for convergence activities to first take place at an initial low level (“kickstarting effect”) and also for convergence activities themselves to further contribute to strengthening trust at a larger level (“multiplier effect”).

Convergence is a means to achieve the desired goals or outcomes that IDPs and USAID are expecting, for instance peace building, conflict mitigation, and conflict prevention, as well as good quality and adequate services delivered to beneficiaries. Notably, understanding of a defined concept of convergence remains fluid depending on individuals’ perspective, affiliation, and circumstance. It does not have a commonly held definition and has also been subject to negative interpretation such as Burmanization.

I.3 RECOMMENDATIONS

1. Define convergence in coordination with USAID strategy: Internally, all USAID stakeholders should have a commonly held and agreed definition of convergence so that it can be more easily integrated into program objectives and progress measured against the defined concept. Convergence should be integrated into new project activities to advance specific objectives of USAID/Burma in alignment with the mission's vision, plan, and priorities. For a new program after PLE, USAID should consider integrating the convergence approach into the program design and make the convergence approach a key process and aspiration of program implementation. USAID should develop a strategy based on realities on the ground, coherent with the strategies of other donor agencies.

2. Provide support to promote joint efforts in a more integrative manner: For PLE, IPs should continue to promote linkages and cooperation between ESPs and GoB agencies, as well as collaboration among ESPs, as evolving circumstances permit by making joint effort a specific and clear aspiration for new activities – particularly in Kayin and Kayah States where sub-grantees involved in convergence is relatively high. Such support for joint efforts should thoughtfully take into account conflict sensitivity through “do no harm” approaches that mitigate risks and concerns of Burmanization. Joint efforts need to be designed to build mutual trust and avoid promoting dominance by one stakeholder group. Timing and design of support for each area has to be highly context-specific to different circumstances as through participatory approaches that involve local leaderships.

PLE can extend its support to both GoB and ESPs and support both sides to undertake joint programs/activities/initiatives to build trust and improve creative collaboration. However, this does not mean that PLE should only support activities that are jointly implemented by ESPs and the GoB. Current political and capacity limitations may not allow joint efforts to take place in all the cases but clear aspirations can be set. But when possible, PLE should strive to promote joint efforts between both sides, such as through jointly undertaken needs assessments.

In addition, PLE can leverage its neutral convening authority and bring GoB and CBO stakeholders together to improve health, education, and protection services in a more integrated and comprehensive manner rather than working on a silo-based sectoral basis. For example, health programming continues to present opportunities to incorporate GBV prevention and awareness messaging as well as be stand-alone activities by women's groups at the community level.

All of the above must continue to be done within the parameters set forth by USG policy and authorities.

3. Continue to promote closer working relations between individuals and institutions in convergence: PLE should take the momentum of successful cases of convergence already seen at the activity level and continue to support the establishment of good working relationships between individuals and institutions inside SE Burma through continued joint training/learning, exchange programs and joint programs/activities. These budding relationships should be nurtured and broadened, with the aim to move progressively from relying on personal relationships to greater institutional connections, where appropriate within the local context. Any new program that may be designed should also aim to support formally institutionalized collaborations between decentralized levels of GoB and ethnic-based CBOs that function to improve access and quality of basic services in SE Burma.

4. Prioritize Health and Education as entry points for convergence: In general, health service is a good entry point since it is an immediate, sympathizing, tangible, relatively less political basic need for

people in SE Burma. While education may be more politically contentious and can raise debates over sensitive issues related to identity, history, and geography, sub-grantees have already demonstrated acumen in implementing programs within the framework of convergence. Whilst it may be more difficult to move to a higher, more sustainable level of converge in the education sector, efforts like MINE have created a platform to foster conversations among different ethnic organizations and engage in joint advocacy regarding education with GoB.

5. Provide support to and collaborate with GoB agencies if and when appropriate and possible: Decentralized levels of the GoB should be engaged and encouraged by PLE to interface and work together with CBOs toward improving services in SE Burma. PLE has been emphasizing supporting CBOs as per the design of the project. However, PLE should extend its effort to bring the GoB into the equation if it would advance positive reforms and further strategic objectives. This must continue to be done within the parameters set forth by USG policy and authorities.

PLE or a future USAID program may work more directly with decentralized levels of GoB in SE Burma to improve local governance (e.g. rules of law, transparency) that build trust and enhance the chance of convergence success. Such engagement with GoB needs to be initiated or continued on a case-by-case basis after careful and thoughtful reflection of conditions on the ground and the prevailing USG policy environment. In addition, plans to support decentralized levels of the GoB must be meaningfully discussed with ethnic groups as they may view that such support legitimizes the GoB and promotes GoB dominance over ethnic governance. Modalities for joint support to both GoB service providers and ESPs to implement joint activities should be given serious consideration. This must be done within the parameters set forth by USG policy and authorities.

6. Protection needs to be expanded: Expanding protection activities and partnerships in Burma has much potential and relevance. This includes expansion of current activities addressing gender-based violence (GBV) prevention and response services, e.g., linking existing community awareness approaches with health sector programming. Also, expanding and strengthening partnerships with a network of women's organizations who are already actively engaged in health, education and/or social protection services and advocacy.

7. Strengthen women's leadership and women oriented CBO networks as a defined implementation strategy: Advancing networks of women-oriented CBOs in SE Burma can potentially further convergence and women's participation in the peace process. Clearly define the role of women leaders and women oriented CBOs in the current PLE implementation. For women's leadership, define and measure advancement of this skill set through existing CBO capacity development approaches and other opportunities. For women oriented CBOs, map existing partners and their broader networks (e.g. Rangoon-based women's group). Review this map in relation to other USAID programs that work with women's groups (e.g. USAID/OTI). Identify additional women-oriented CBOs that can be brought on as new partners and/or define partnership with other USAID programming partners. Also, identify opportunities to support existing women's networks for shared goals of service provision and advocacy. This aligns with an [Above the Line HA Convergence Strategy](#).

8. Emphasize donor coordination: Increased coordination among donors' programs in SE Burma can help map disparate efforts and look for potential collaborations between the GoB and ESPs as well as avoid overlapping support. PLE or USAID/Burma may consider taking a role in initiating the coordination process. The coordination process could also lead to more systematic and harmonized measurement of convergence results.

9. Efforts in convergence should focus on Kayin and Kayah States while maintaining awareness of windows of opportunity in Mon State: Greater windows of opportunity and/or nascent levels of trust between the GoB and CBOs seem to underpin greater opportunities for convergence in Kayin and Kayah States while conditions of stability may eventually create additional windows of opportunity in Mon State. These efforts should continue and to the extent possible enhanced by including additional aspirations for joint action a requirement for receiving funding. Care must be taken to Do No Harm, including avoidance of conditionality. Shan State should not be considered for convergence activities unless a window of opportunity presents itself. Again, care to Do No Harm must be a guiding principle.

2. HUMANITARIAN ASSISTANCE NEEDS

A series of political, economic and administrative reforms undertaken in Burma over recent years, together with ceasefire agreements with most ethnic armed groups, have posed challenges to the assumptions underlying PLE. The Team assessed whether the assumptions behind the PLE's objective in relation to HA needs remain valid.

2.1 FINDINGS

2.1.1 Assumptions behind PLE have changed

PLE was designed with the assumption that the conflict in SE Burma would continue to displace populations; depicting the need for providing HA to IDPs inside Burma and DPs who cross the border into Thailand. However, based on our findings, these assumptions are less relevant to the current changes in the needs landscape.

First, recent ceasefire agreements and progress in the peace process have reduced armed conflict and displacement. TBC reported that, since the ceasefire negotiations, there has been a sign of a slight decline in the number of displaced people. The number of IDPs has decreased by 50,000 during 2011, out of which 37,000 IDPs have attempted to return to their villages or resettle in surrounding areas.²⁴ TBC data also indicate that there were no new destroyed, relocated, or abandoned villages in SE Burma in 2011. Informants interviewed support this assessment. Most of them generally think that new cases of DPs and IDPs have reduced, although without estimating relative magnitudes.

Second, in contrast to the PLE initial assumption that ongoing conflicts create the need to provide HA to DPs and IDPs, the Team found that remaining HA needs still exists but mainly for IDPs inside Burma. For DPs who are in Thailand (especially those who are outside the temporary camps), most are now more able to access Thai public health and education services. However, there remain on-going barriers to services including most notably related to legal status and the fact that increasingly enforced policies have resulted in a more restrictive operating environment. This means that HA needs may still remain for some groups.

Third, the assumption remains applicable that a large number of IDPs along the border have lost livelihoods and have limited access to basic services such as health and education. The survey of PLE BB

²⁴ The Border Consortium (2012). Changing realities, poverty and displacement in South East Burma/Myanmar.

residing at close enough proximity to cross the border to receive services in Thailand reported that they still lack sustainable livelihoods and only gain limited access to some services.

2.1.2 HA needs in Thailand have changed

Situation inside DP camps in Thailand

Based on interviews, some donors indicate there is a shift of preference from providing HA in Thailand (including in the camps) to programs that help prepare DPs to return to their homeland. Programs that address community funds, livelihoods, teacher certification, and capacity building are examples of new activities arising due to the shift. Some donors have indicated they will maintain support in camps as needed. Whilst the position of RTG toward the temporary DP camps has not changed, stricter law and policy enforcement is being applied which means it is more difficult for DPs to travel outside of the camps than in the past. At the same time, a decrease in funding from some donors has induced an overall reduction in food and supplies as well as health care and social services. In fact, IIs indicated that as a result of the decrease in funding support to services inside DP camps – and the ongoing dependency of DPs confined to those camps on externally-provided services – gaps in meeting needs may persist in the short and medium-term that could pose risks for DPs if not filled.

Situation outside the temporary camps in Thailand

A significant number of PLE beneficiaries outside the camps in Thailand can access basic services through government service providers supported by the RTG (e.g. public hospitals, public schools). For example, based on interviews with sub-grantees, the Team found that while it is not MoE policy to support migrant schools, RTG's MoE local offices receive resources from PLE to provide some support to a number of non-registered schools serving migrants (i.e. school supplies, teacher development and program on migrant education). In interviews with teachers from migrant schools in Thailand, however, they emphasized the limited level of support they have been receiving. Depending on levels of external support, there seemed to be vast differences in regard to salaries for government and migrant education teachers and funds for other school necessities such as books and supplies.

Some migrants from Burma are eligible to register and purchase a healthcare card from the Ministry of Public Health. Information from the survey with PLE beneficiaries living in Thailand (PLE BT) also shows that DPs outside the camps have access to jobs and basic services: 90% are employed; they receive income at USD 5/day on average, which is slightly more than half of the minimum daily wage indicated in the Thai labor law; 51% received health care during the past 12 months; 21% have a health card/hospital card; 12% are registered with the Ministry of Labour of Thailand; 85% can access health service through Thai public hospitals with high satisfaction although a majority of them have not obtained legal status in Thailand.

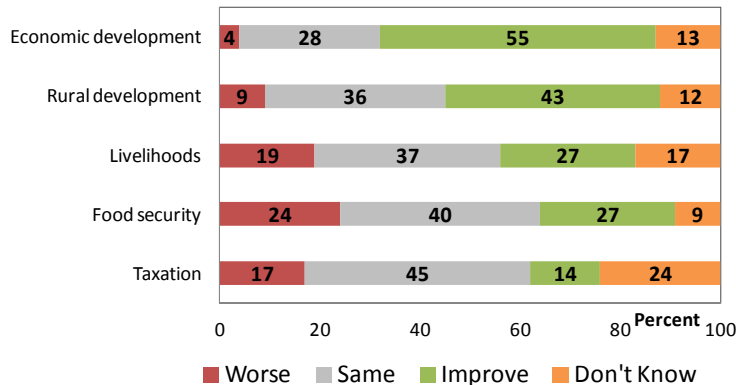
For education, 42% of PLE BT have school-aged children and of these 34% have school-aged children who are attending school; representing participation rate of 81%. Among those attending school, 61% receive education from Thai government schools, 27% are in schools in Burma, and 6% attend NGO schools in Thailand. IIs confirmed mobility among migrants from Burma in Thailand, including the fact while one or both parents may live in Thailand, the children may attend school inside Burma.

2.1.3 HA needs in SE Burma remain critical

According to TBC's interviews in 36 townships across SE Burma during 2012, a total of about 400,000 individuals are internally displaced in the rural areas of Kayin, Kayah, Shan (South & East) and Mon

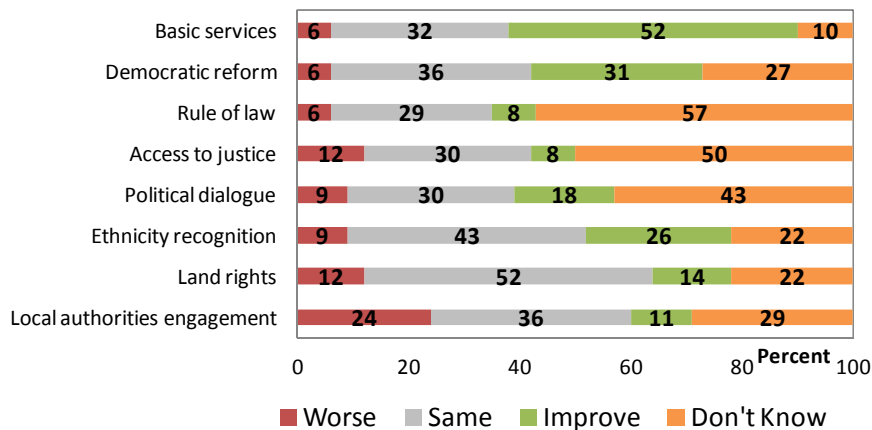
States, as well as Bago and Tanintharyi Regions.²⁵ TBC's most recent survey in 2014 concludes that reduction in the number of IDPs cannot be deduced.²⁶ The survey of PLE BB for this evaluation portrays their perceptions about the situation in Burma to some extent. Figure 5 shows how PLE BB perceive the current economic conditions inside Burma.,²⁷ For economic development and rural development there are many more beneficiaries who view it as improving than getting worse. Livelihoods and food security, on the other hand, sees 19% and 24% of PLE BB saying it is worsening.

Figure 5: Perception of PLE BB toward economic conditions in Burma (n=200)



In terms of the social situation (Figure 6), the net result²⁸ shows that basic services, democratic reforms, and ethnicity recognition are on average perceived by PLE BB to be improving. However, engaging with local authorities is to a larger extent seen to be getting worse or unchanging. With respect to rule of law and access to justice, around half said they don't know. Regarding the political dialogue many said they don't know or that it has remained the same.

Figure 6: Perception of PLE BB toward social conditions in Burma (n=200)



²⁵ The Border Consortium (2012). Changing realities, poverty and displacement in South East Burma/Myanmar.

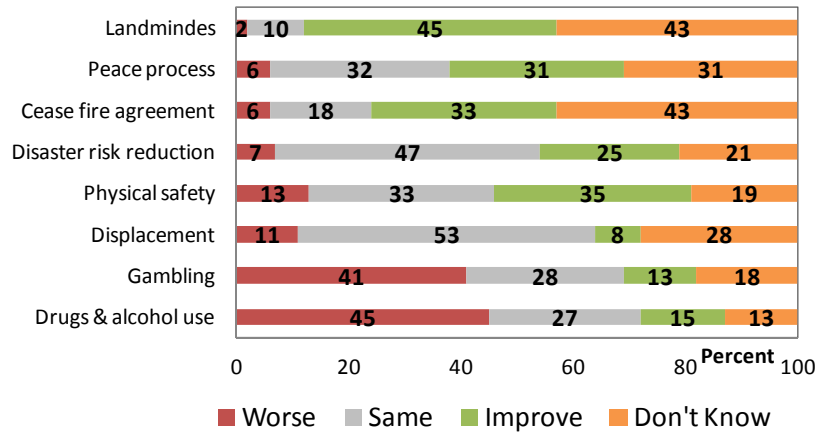
²⁶ The Border Consortium (2014). Protection and security concerns in South East Burma/Myanmar.

²⁷ Results for PLE BT can be found in annex VI

²⁸ The net result is calculated by taking the proportion of those who said 'improve' less the proportion who said 'worse'. This is done to see whether public opinion is leaning towards an improving or worsening situation.

Regarding the physical security situation in Burma (Figure 7), it is to a greater extent perceived to be improving than getting worse by PLE BB, especially with respect to land mines, the peace process, cease fire agreement, disaster risk reduction, and physical safety. It should be pointed out that there is still a fair amount of uncertainty around landmines, cease fire agreement, and the peace process as indicated by the large proportion who say don't know. Moreover, gambling, drugs and alcohol use are seen to be worsening and were confirmed to be an emerging issue by some of the health professionals interviewed. A 2014 TBC report also confirms that drugs and alcohol is a major source of fuelling of social conflict in many villages in SE Burma.²⁹

Figure 7: Perception of PLE BB toward safety conditions in Burma (n=200)



Although the situation seems to improve in many areas based on the perception of PLE BB surveyed, the Team found some issues related to HA needs from the IIs with sub-grantees and beneficiaries that are worth considering. Some issues are coincident with the survey.

First, basic services remain inadequate in many areas across all locations in different regions/states that the Team visited such as few or no permanent health centers, lack of health workers, low quality of services, varying degrees of experience of teachers in schools, limited number of schools (especially post primary), and insufficient resources for teacher's salary. TBC quantitative research in 323 villages in SE Burma provides further insights. Critical areas highlighted include low school attendance rates, debt due to food insecurity, limited cash income opportunities, and access to clean water and sanitation.³⁰ PLE beneficiaries said that the lack of basic services for many IDPs drives them to cross the border to seek services in Thailand.

Second, beneficiaries expressed lack of sustainable livelihoods. Some IDPs mentioned that they have received food rations since SHIELD until now. PLE has not moved as quickly as they desired due to USG political and/or administrative policies that delayed movement from a food distribution to community rehabilitation model of assistance. There is a high beneficiary demand for programs that yield long-term improved livelihood results such as support for sustainable and resilient agriculture and cultivation. The need therefore remains to assess the technical capacities of PLE and its sub-grantees to deliver effective livelihood programming via a community rehabilitation assistance model.

²⁹ The Border Consortium (2014). Protection and security concerns in South East Burma/Myanmar.

³⁰ The Border Consortium (2012), Changing Realities, Poverty and Displacement in South East Burma/Myanmar.

Third, the situation in Shan State may be seen as more difficult due to its ongoing conflict with the GoB. IDPs still do not feel sufficiently secure to return to their home communities and also cannot move to live in Thailand. A sub-grantee interviewed said that people feel like being trapped, mostly in IDP camps.

Fourth, based on interviews with beneficiaries and sub-grantees in various locations in Kayah, Kayin and Mon States as well as exchanges with people from Shan State (where the Team was not allowed to travel), the Team highlights some key needs emerging from the discussion in each State.

Needs in Mon State: Health services remain a serious need in rural areas. Many areas lack health centers and medicine. People have received support from mobile clinics and other local service providers with historic assistance having been provided by IOM, MSF, PSI, as well as PLE. Whilst ESPs do provide education support, primary schools are mainly available in villages provided by the government. Children in many remote areas cannot access education while government cannot cover resources that schools need. In some villages, the community has to top up teacher salaries. People indicated their needs to be more focused on livelihood in broad terms and community development including agriculture for rehabilitation.

Needs in Kayin State: The Team was reported insufficient basic services and increasing needs for suitable livelihoods. Health support in Kayin is still insufficient. Informants reported that people need to cross the river to receive medical services from a non-PLE clinic run by an INGO in Thailand as it is quite convenient with no restrictions. Moreover, it was reported that around half the patients crossing the border from Burma to receive services from one of the PLE Consortium Partners in Mae Sot come from Kayin State. The majority of rural villagers are dependent on primary health care providers at the village level, however, most of them still need to refer to a government hospital for difficult childbirth delivery or other high-risk cases. The IIs and desk review indicated persistent needs in the education sector remain. People in villages expressed their needs for a shift from food assistance/cash transfer to something more durable. One villager expressed that *“the last shock [burst of violence] in the village was 7 years ago, since then it has been stable. We make a living through slash circular farming, villagers grow rice and corn.”*

Needs in Kayah State: Kayah still needs more support for health and education services. Kayah State Health Department mentioned that they lacked health staff in government clinics. A village committee the Team interviewed said there were no government health services in the village. If there were no PLE services, people in the village would have to travel very far from the village to obtain health services. Numerous village school committees and teachers reported the lack of secondary schools in the village. Government schools still lack capacity to deliver good educational services, including insufficient staff, poor infrastructure, and limited funds for teacher salary. In a few villages GBV/VAW was reported to be associated with an increase in drug use. Village committees are not appropriately dealing with the problem, partly because a very small number of women are represented on the committees. Villagers remain seriously concerned over lack of economic opportunities other than farming. Livelihood opportunities indicated include coffee plantations.

Needs in Shan State: HA needs remain critical in Shan State. Some people reported that they have to travel long distances to access health services. Some people need to cross the border to Thailand or travel to Sebu in Kayah State for services. In education, most government schools lack the ability to fully staff teachers. In interviews with a community village council and parents, their appreciation for external support to teachers was apparent. However, they also highlighted concerns with the quality of the teachers' living quarters and the physical needs of the school. They reported having sent the local GoB education authorities a letter a few months ago offering to provide community labor for the necessary repairs if complemented by resources for building materials, but they are still waiting for a response.

PLE reported that the project provides food supply and support for health and education services to approximately 3,000 IDPs living in a camp in Shan State. There is also support for livelihood activities such as livestock farming and opportunities for vegetable growing were indicated. Some beneficiaries in the area discussed small-scale livelihood activities that IDPs can undertake on their own such as growing crops on the land near the camp. However, due to presence of government and ethnic military forces nearby, it is not safe to work there and these IDPs are currently relying mostly on assistance received with PLE funding. Their lands have been confiscated and remain occupied by other people.

Generally across all states, apart from the ongoing need for better basic services in health and education, protection and livelihoods become emerging areas of concern advised by people themselves. Beneficiaries may not be accurately described now as victims of military 'shocks' but rather victims of land confiscation and lack of livelihoods.

In response, PLE and some sub-grantees have scaled down and reoriented their programs from food assistance and cash transfer to more livelihoods, rehabilitation, and community development support. Livelihood opportunities identified in SE Burma by sub-grantees and beneficiaries the Team interviewed include community forestry, rubber plantation, organic tea, construction, as well as rice farming, and livestock husbandry in rural areas.

2.1.4 PLE is not a pull factor to Thailand

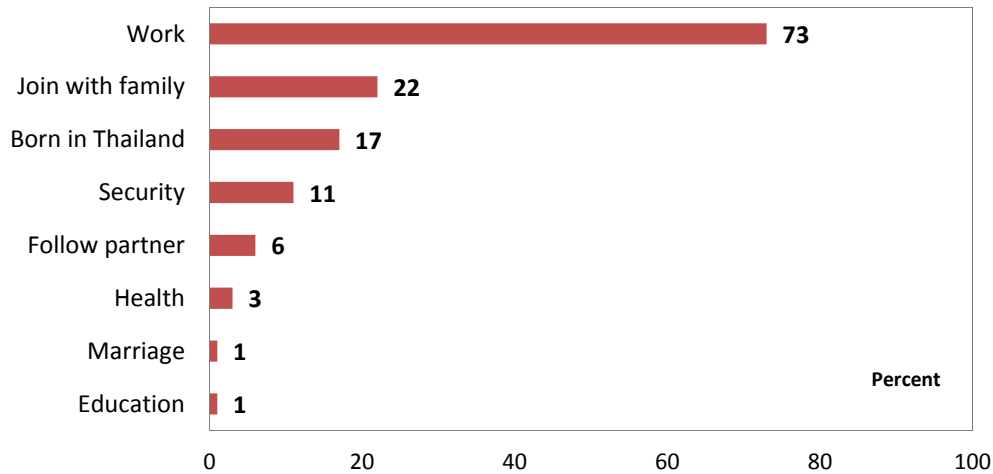
It is clear from all sources of data that there is little evidence to conclude that PLE's HA activities have served as a pull factor to Thailand for PLE BT. The PLE BT were asked what their reasons were for coming to Thailand (Figure 8). Nearly three in four (73%) included work in their choice of reasons followed by joining with family (22%), born in Thailand (17%) and security (11%). An IRC survey in 2012 showed that 67% of undocumented migrants and 72% with documents reported coming to Mae Sot in Thailand for economic reasons. Moreover, the same survey indicated that 7% of those without documents and 11% of those with documents reported coming for conflict or prosecution related reasons.³¹ This survey shows that whilst security could be one contributing factor, most PLE BT came to Thailand because of work opportunities. The PLE BT surveyed have been in Thailand on average for 15 years and 76% cross the border at least once per year or more often. Similarly, a survey by IOM and ARCM, found that 74% of surveyed migrants cited economic reasons as primary reason for them to come to Thailand.³²

One-third (34 %) of PLE BT said it is likely that they will return to Burma but four out of five (79%) in this group could not specify the timing for return. In contrast, 46% of PLE BT indicated they are not likely to return mainly because they think they are better off in Thailand. Other reasons for not returning back to Burma included no family, don't have land, nowhere to stay, few work opportunities, and safety concerns. In addition, PLE BT held a less positive view regarding some key economic and social conditions in Burma, in particular economic and rural development, basic services and democratic reform. (See also Beneficiary Survey results in Annex VI.) These opinions are independent of PLE and may contribute to PLE BT's desire to remain in Thailand.

³¹ In the same survey, if respondents reported economic reason for coming to Mae Sot, they were asked a follow up question to ascertain factors affecting their livelihood in their place of origin. The majority (72%) reiterated that it was economic reasons that brought them to Mae Sot.

³² IOM and ARCM (2013). Assessing potential changes in the migration patterns of Myanmar migrants and their impacts on Thailand. Bangkok: International Organization for Migration, Country Mission in Thailand.

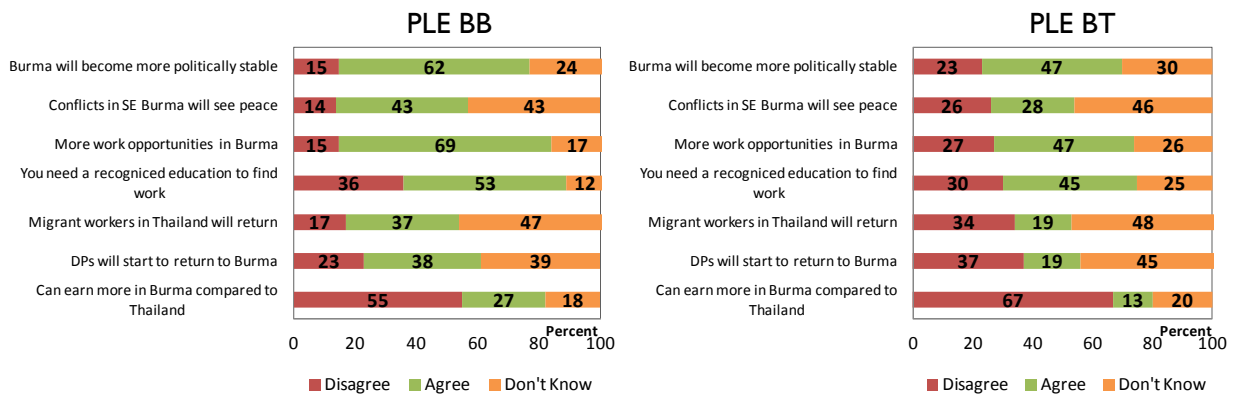
Figure 8: Reasons for PLE BT coming to Thailand



Comments from beneficiaries from the IIs also confirm that they mostly come to Thailand because of more opportunities being available. Although they see improved conditions in Burma, they believe that local services and opportunities in Burma are not ready to serve their needs compared to those available in Thailand, such as education and health services, better job opportunities, and safety. Some indicate their appreciation, even if just a perception, that healthcare and education services in Thailand are free for migrants while they have to pay for such services in Burma. One informant said: *“I do not plan to return...I want to live in Thailand and hope all my children can be living in Thailand and become Thais someday.”*

Improvements in Thailand due to PLE may, at most, serve as contributing factor for migrants’ decision to remain in Thailand. Poor conditions for return were also found to contribute to the decision to remain in Thailand. As shown in Figure 9, PLE BT seem to hold more negative perception toward the future outlook in SE Burma compared to PLE BB. In particular, two thirds (67%) disagree that one can earn more money in Burma compared to in Thailand. In addition, PLE BT disagree more strongly that migrant workers and DPs will return to Burma.

Figure 9: Perceptions of beneficiaries on future outlook in SE Burma



2.1.5 Protection Services: Gender as a dimension of service provision and implementation

The Team found some issues related to domestic violence based on IIs and the survey. In some parts of SE Burma, VAW inside of marriage is considered minor and part of life. For example, a village woman interviewed in Kayah State defined VAW as violence that happens outside of marriage. The survey looked at prevalence of domestic violence and found that 12% PLE BT and 16% PLE BB have seen or heard about domestic violence cases in their communities in the past year (Figure 10). A survey by TBC in 2014 confirms that domestic violence was one of the main sources of social conflict reported by village tracts inside SE Burma.³³ However, participation in any form of protection activities, including activities on domestic violence is only 13 percent for PLE BT and 8 percent for PLE BB (Figure 11). Hence, the prevalence of domestic violence appears greater than participation to prevent it. No significant difference was found across geographies.

Figure 10: % Exposure to domestic violence of PLE BT and PLE BB, past 12 months

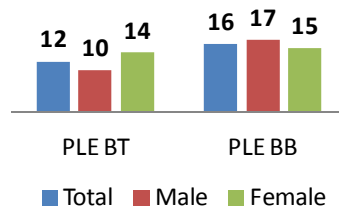


Figure 11: % Participation in protection activities of PLE BT and PLE BB, past 12 months

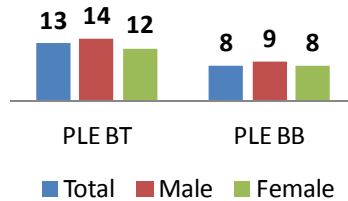


Table 6 shows that the vast majority of PLE BT (87%) and PLE BB (92%) have not participated in any PLE and/or non-PLE protection activities in the past 12 months. No significant variation across geographies was found. The activities with the highest level of participation include Health Information Sessions (5%) and Women’s Community Group (4%) among PLE BT, although the levels of exposure were relatively low. This highlights a significant gap on the Thai side of the border and potentially also in SE Burma. Many of those who participated in protection activities recognized that activities were supported by PLE sub-grantees (Table 7). It is worth noting that women CBOs and their networks have potential to serve as catalyst for convergence. A good example is a national women network that includes many ethnic women organization in SE Burma. The network is engaging in collective advocacy with the GoB on gender-related issues in many sectors.

³³ The Border Consortium (2014). Protection and security concerns in South East Burma/Myanmar.

Table 6: Participation in protection activities in the past 12 months by PLE BT and PLE BB

Protection activities	% PLE BT (n=300)	% PLE BB (n=200)
Gender-based violence	-	-
Domestic Violence	< 1	-
Gender roles or gender equality	-	< 1
Child protection	< 1	3
Access to justice	-	1
Migrant rights	1	1
Labor rights	2	-
Women's community group	4	2
Women in peace building	1	2
Assistance in National Verification	2	-
Health information session	5	< 1
None of them	87	92

Table 7: Organizer of activities that PLE BB and PLE BT joined

Protection activities Base: Those who participated	% PLE BT (n=40)	% PLE BB (n=17)
Karenni Nat Women's Org (KNWO)	8	6
Migrant Assistance Program (MAP)	23	18
Social Action for Women (SAW)	-	35
Other	13	29
Don't know	43	18

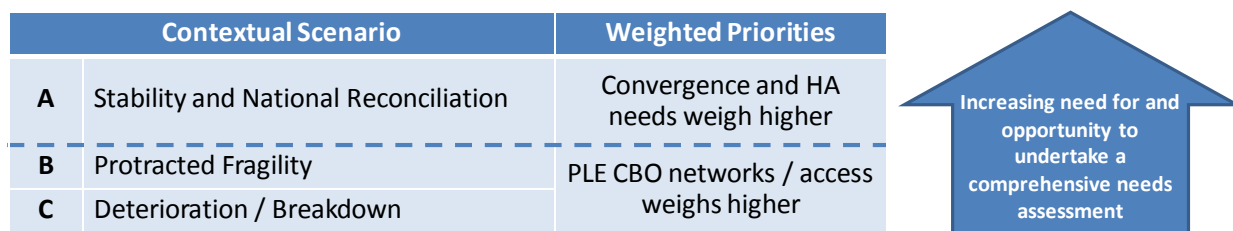
In practice there is mobility of PLE BB and PLE BT crossing the border and accessing services, which is why, for example, PLE BB have indicated participating in events organized by sub-grantees not operating inside Burma (Table 7).

2.1.5 Geographic Considerations for Humanitarian Assistance

The Evaluation Team considered the SOW sub-question 2.2. If HA is still in need, which geographic areas and/or targeted beneficiary groups covered by the PLE should be prioritized? To answer this question, the Team drew from quantitative and qualitative findings. To provide actionable recommendations, the Team took the following steps:

Firstly, the Team developed a logic framework (Figure 12) through which to view data points, including establishing assumptions, and worked through multiple scenarios and the potential impact each scenario would have on the prioritization and/or allocation of HA resources.

Figure 12: Logic Framework for HA Prioritization by Scenario



This logic framework identifies three likely trajectories with respect to the operating environment within Burma. These three scenarios could be realized equally across all four states where PLE operates, or they could be realized in various stages or intensities across all four states or within sub-regions therein.

The **“Above the Line HA Convergence Strategy”**³⁴ assumes that stability will persist, incidence of conflict and generalized violence will reduce or remain low, and efforts at national reconciliation will accelerate. In this scenario (Scenario A in Figure 12), the assumption is that emphasizing convergence across all HA sectors outweighs other considerations, including the extent to which PLE has a network of CBOs in the particular area and their levels of access. For this scenario, the operating environment will be increasingly conducive to developing new CBO partnerships that can capitalize on convergence and greater ability to prioritize HA needs based on concrete, quantitative data will be possible. This scenario also provides the most space to be able to increasingly integrate longer-term, sustainable livelihoods approaches. Under this scenario, there will be increasing policy space, need, and opportunity to undertake in-depth quantitative needs assessments. These will determine which windows of opportunity exist to strategically target resources to achieve both a humanitarian impact as well as enhancing national reconciliation.

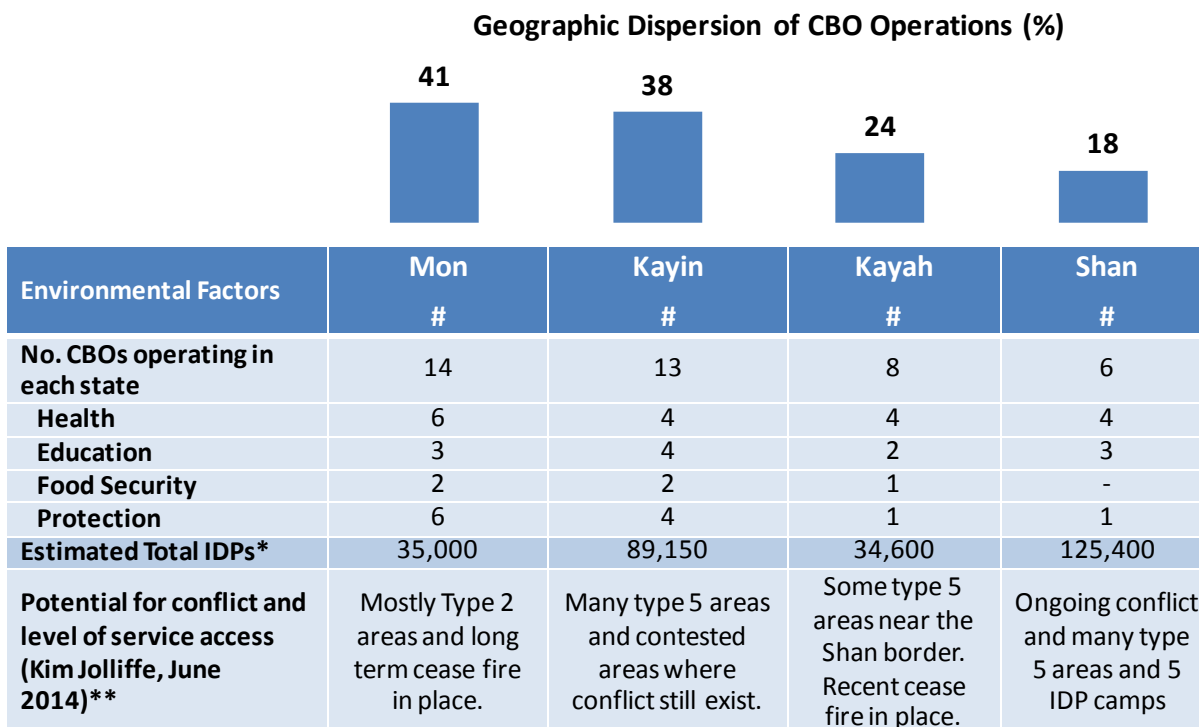
The **“Below the Line HA Strategies”** (Scenarios B and C in Figure 12), on the other hand, assume that conditions will deteriorate significantly. While widespread conflict and violence might not dominate the operational environment, protracted fragility, inability of the GoB to provide quality basic services, lack of social trust, inability of IDPs to return to their previous abodes, and other conditions that continue to place people and local communities in continued tenuous conditions will dominate. Humanitarian needs remain widespread and generalized across the population. Scenario C assumes a significant deterioration and breakdown of ceasefire agreements and security conditions on the ground. Internal displacement may increase and humanitarian needs will be pressing. Under these circumstances, urgently addressing HA needs in the short run outweighs convergence priorities. In both Scenarios B and C, an HA response must leverage existing networks of sub-grantees and consider the logistics of gaining access to key areas. Convergence between CBOs and the GoB is of less priority and may in fact contribute to doing harm. Moreover, the policy and security space to conduct detailed quantitative needs assessments is assumed to be extremely limited.

Secondly, the Team developed a framework (Table 8) through which geographical areas could be prioritized within the Above the Line and Below the Line framework described above. The Team triangulated multiple data sets that allowed for a reasonable ranking of the four states based upon the two major differentiating characteristics between operating above the line versus below the line.

³⁴ In other words, this is an HA strategy that emphasizes the opportunities for convergence within HA activities.

Specifically, the Team had to determine relative measures as they relate to “potential instability and poor access” against “PLE network strength.”

Table 8: Geography Data Points for Humanitarian Assistance Decision Matrix



* IDP estimates are from The Border Consortium Programme Report (July-December 2013), Map: IDPs by Township.

** Jolliffe's framework for mapping territories implies more instability and less access as the type classification numbers increase from 1 to 6 – with Type 1 being a special administrative area and Type 6 being an enclave dominated by armed criminal organizations.

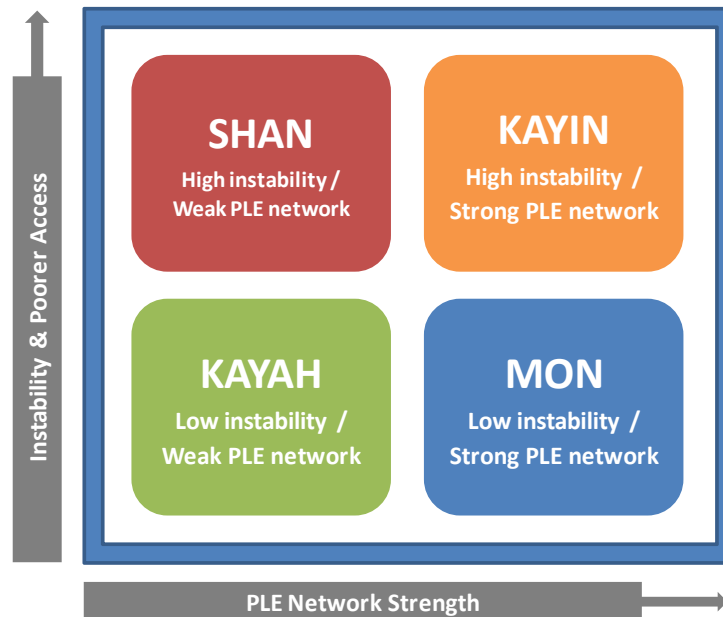
The Team triangulated data results from the quantitative survey, informant interviews, and program documents. The findings reveal that the highest number of sub-grantees operate across Mon and Kayin States, with fewer operating in Kayah and Shan States. In both Mon and Kayin States, many sub-grantees undertake activities across all PLE sectors (health, education, food security, and protection) thus providing more windows of opportunity across multiple sectors. On the other hand, Kayah and Shan states have fewer sub-grantees working across fewer PLE sectors.

The Team identified two indicators that provide an indication of where each state could be ranked based upon instability/poorer access³⁵ and PLE network strength. Both Kayin and Shan states, which have higher current levels of either generalized or pockets of violent conflict, have considerably more IDPs than Mon and Kayah States. In addition, using Jolliffe's classification system for assessing stability/instability within each State, Table 8 identifies areas where ongoing conflict and displacement persist. The higher the Type number indicated by Jolliffe equates to higher levels of instability.

³⁵ While instability and levels of access are proxy indicators of needs, they are not a substitute for comprehensive assessments of needs and conditions within states and sub-state areas.

Thirdly, based upon the data points presented in Table 8, the Team plotted each of the four evaluated states on a matrix (Figure 13) that situated each of them within the context of current instability/poor access and PLE network strength.

Figure 13: Operational Environment by State³⁶



Lastly, the matrix (Figure 13) provided the possibility to identify specific geographic priorities (Table 9) for HA for each of the scenarios presented as part of the logic framework (Figure 12).

The following narrative walks through the geographic prioritization.

Scenario A (Peace and National Reconciliation): needs outweigh the value of existing PLE network strength. In other words, USAID would have greater flexibility in meeting HA needs through a strategic approach that emphasizes opportunities for convergence and identification of new partners who can work in HA areas identified through assessment work. Kayin and Shan are identified as the top two priority areas due to their higher levels of instability and related HA requirements. Kayin would rank first (above Shan) as the ‘lowest hanging fruit’ given it ranks high in terms of instability and thus need, but at the same time provides the advantage of PLE network strength which may allow faster acceleration of USAID-funded work. Similarly, both Mon and Kayah demonstrate lower levels of instability and thus need which brings them into the third and fourth position. Using similar logic as above, Mon would rank above Kayah because Mon provides the advantage of PLE network strength which may allow faster acceleration of USAID-funded work.

Unlike the Above the Line HA Convergence Strategy (Scenario A), for Scenarios B and C PLE network strength outweighs needs.

³⁶ This matrix should be interpreted as relative rankings among the four states rather than absolute rankings. For example, levels of instability in Kayah and Mon should not be read as being the same; rather, they should be read as being relatively lower than Shan and Kayin.

Scenario B (Protracted Fragility): This Scenario represents the grayest area within the framework as it represents the fluid space between the positive trajectory of peace and national reconciliation versus deterioration and breakdown. In this Scenario, network strength generally outweighs a convergence priority and there is more restrictive space that limits the ability to undertake comprehensive needs assessments. As such, Kayin and Mon are identified as priorities given their higher levels of PLE network strength. However, unlike the worst case (Scenario C below), there may be relatively greater ability for USAID to prioritize areas of higher instability first (Kayin) rather than the relatively more stable state of Mon. The lower priorities would be Kayah and Shan (same as in Scenario C below) because without any network strength to exploit, prioritization under protracted fragility would favor greater access over greater instability.

Scenario C (Deterioration or Breakdown): PLE network strength, and their subsequent access, fundamentally outweighs prioritization solely based upon need, given the challenges and delays with identifying new partners who can provide assistance in specific sectors based upon quantitative analysis of needs. Mon and Kayin are ranked as priorities with Mon identified as the first given lower levels of instability and ostensibly easier access. Kayin ranks second because more challenges may arise here given higher levels of instability regardless of network strength. Kayah and Shan are the lower priorities given lower levels of network strength upon which to draw, with Kayah ranked third given the potential for easier access due to lower levels of instability. Shan ranks last as it may result in the most difficult access and little network strength upon which to draw.

Table 9: Priority Scenarios

Priority Geography	Above the Line HA Convergence Strategy	Below the Line HA Strategies	
	(A) Peace and National Reconciliation	(B) Protracted Fragility	(C) Deterioration or Breakdown
1	Kayin	Kayin	Mon
2	Shan	Mon	Kayin
3	Mon	Kayah	Kayah
4	Kayah	Shan	Shan

These findings suggest that any HA strategy that aims to target assistance geographically should take into account critical assumptions. Importantly, any Above the Line HA Convergence Strategy presents the need for comprehensive, quantitative assessments to better understand (a) variance in need, and (b) variance at the sub-regional/state and sub-state levels and subsequent expansion of the logic framework here to increasingly localized geographies.

2.2 CONCLUSIONS

Based on our findings, the Team can conclude that the original assumptions behind the PLE objective have changed to a certain extent. The PLE’s key approaches remain valid, however, the current PLE design should continue to be adapted on an ongoing basis by exploring evolving and emerging needs in protection, livelihoods, rehabilitation, and community development which are increasingly arising due to changing operating environments within Burma and inside Thailand. Though the reduction of overall number of IDPs has not been observed and return and resettlement remains small and tentative, recent ceasefire agreements and progress in peace process have reduced armed conflicts and additional

displacement significantly inside SE Burma. For those in Thailand, the majority of PLE beneficiaries outside of camps are now able to gain access to basic services provided by the RTG and NGOs/CBOs including healthcare and education whereas HA needs for DPs inside the camps in Thailand remain. People from Burma living in Thailand outside the DP camps have adequate access to services. Populations of Burma who cross the border temporarily to Thailand to access services still require assistance. Basic services for many PLE beneficiaries in SE Burma seem to remain inadequate in many areas. This drives some people from Burma to cross the border to seek services and jobs in Thailand. Even though protection and security concerns present comparable constraints to return to Burma, HA needs are more pronounced for IDPs than DPs, especially for those inside IDP camps.

PLE activities do not serve as pull factor to Thailand for those who are not victims of conflict. The majority of people from Burma in Thailand, including most PLE beneficiaries, came to Thailand to seek better job opportunities and living conditions. Other independent surveys have confirmed this.

Although improvement in Thailand due to PLE may serve as contributing factor for migrants' decision to remain in Thailand, because they feel better off than inside Burma, there is very little evidence that PLE interventions to improve access and quality of basic services serve as pull factors to Thailand. PLE beneficiaries in Thailand indicate that they would return to SE Burma if political stability, peace, and the economic situation continue to improve resulting in better personal safety and job opportunities.

In sum, the findings show that, for HA in Thailand, the needs to provide HA for people outside the camps has decreased significantly, partly due to the efforts and success of several government and non-government service providers, both through PLE and beyond. However, HA needs still remain for DPs inside refugee camps but this is not a key role of PLE.

Needs for HA still exists but mainly for IDPs inside Burma, although the need landscape has evolved. The main problem facing people in SE Burma is not merely a conflict-induced humanitarian crisis but more about the lack of basic services and livelihoods which is largely a result of ongoing challenges to physical and legal security. Emerging areas of common needs proposed by the beneficiaries themselves are linked to protection, livelihoods, rehabilitation, and community development.

A logic framework for prioritizing HA with sensitivity to convergence priorities, under the right conditions, is possible and can assist in geographic prioritization. In Burma, increasing stability presents opportunities to evolve HA support strategies, whereas in Thailand, increasing access to RTG services satisfies basic needs so people can focus on more sustainable livelihoods. In considering the four states where PLE operates in their entirety as considered in this evaluation, the conditions appear to lend themselves to an Above the Line HA Convergence Strategy, although some sub-regions particularly within Kayin and Shan States could be below the line. Further in-depth, quantitative studies where possible are required.

The Evaluation Team also concludes that HA geographic prioritization would provide the most utility to USAID decision-making if undertaken at the sub-state (i.e. township) level, rather than at the state level. This would require allocation of time and effort to extensively undertake quantitative needs assessments (where possible), reconcile and amalgamate quantitative data sets undertaken by various external actors (using potentially different methodologies), and then prioritizing based upon an agreed framework. To this end, the Logic Framework (Figure 12) and prioritization tools (Figure 13, Table 9) developed by the Evaluation Team can be adapted to any frame of reference and employed as the common agreed framework. This is further discussed in the Text Box that follows.

Text Box 5: Logic Framework and Prioritization Tools

In order to provide a geographic prioritization for HA as requested by USAID, the Evaluation Team developed a logical framework (Figure 12) through which recommendations could be provided to prioritize geographies. This logic framework provides three scenarios that prioritize states based upon emphasis on convergence strategies or based upon PLE network strength through which HA could be effectively delivered. This logic framework allows USAID to filter its prioritization using convergence or network strength within three different operating environments: peace and national reconciliation, protracted fragility, and deterioration/breakdown. These environmental conditions will have an impact on effectiveness of strategies and prioritizations.

An additional tool is the operating environment matrix (Figure 14) by which USAID can plot geographies on an X-Y axis defined by instability & poorer access and PLE network strength. This tool can be applied to any frame of reference. Specifically, as USAID/Burma develops more relationships with CBOs – either through USAID/Forward direct grant making or via an intermediary organization – the “PLE Network Strength” can easily be expanded to include “USAID-supported CBO Network Strength” or even “USAID-supported CBO and Government Agency Network Strength” (should USG policy provide for greater and easier more direct collaboration with GoB entities). Additionally, “instability and poorer access” can be increasingly refined as required, for example, replacing instability with “decreasing opportunities for convergence” or otherwise.

Importantly, while Figure 13 plots the four focus states of this evaluation, USAID can plot sub-state geographies including townships and village tracts. The four quadrants would then capture the geographies to be included in each of the four prioritization levels as illustrated in Table 9. This process will attain a higher level of granularity resulting in more effective targeting of efforts and resources.

2.3 RECOMMENDATIONS

1. PLE extension: Needs landscape may change significantly after the elections in November 2015 with the possibility of ongoing instability. It would be in the best interest of USAID to ensure there is no gap in services coverage and no gap in availability of a mechanism through which further support can be channeled should the need arise. This could come in the form of a PLE extension for 12 months or another stop-gap measure developed in its stead.

2. In Thailand, continue support to DPs in camps: USG support to camp populations in Thailand should be continued due to sustained levels of need. While resources to support camps should be discussed with other camp donors prior to committing resources, it is crucial that support is sustained, including the relatively small amount provided by PLE. This will ensure not to create unnecessary push factors that would risk pushing people to make rash decisions and further divide families, ultimately harming the search for durable solutions.

3. In Thailand, continue to support beneficiaries from Burma who cross the border to seek services (but do not live in Thailand) and those who live in Thailand outside of camps who may share a similar profile to those living inside the camps and fled persecution: PLE’s sustainability strategies for interventions outside of camps (e.g. transition of health posts to provincial health offices) are on track to be completed according to plan. HA Assistance provided to people from Burma living in Thailand purley as economic migrants should become less of a priority over time. Support to CBOs in Thailand working to build capacity within Burma should also continue.

4. Comprehensive assessment of HA and livelihood needs in SE Burma: Since HA needs in SE Burma still seem to be critical and should be considered alongside emerging needs in protection, livelihoods, rehabilitation, and community development, undertaking a comprehensive HA assessment of needs and opportunities in SE Burma will be critical, especially in the implementation of an Above the Line HA Convergence Strategy. In this scenario, more space presents itself to undertake a comprehensive, quantitative, comparable, and representative assessment to allow for the greatest strategic geographic targeting.

5. Meaningfully improve access and quality of basic services in Kayin and Mon States: There is need to meaningfully improve access and quality of basic services in Kayin and Mon States. These needs should be addressed by increasing institutionalized relationships, enhancing capacity, and promoting good governance at the local level. This can link to the convergence strategy with local GoB service agencies. This aligns with an Above the Line HA Convergence Strategy.

6. Explore opportunities to support sustainable livelihood beyond HA in SE Burma as a theme for future support: Livelihood support should be offered to PLE beneficiaries who are no longer facing sustained conflict and instability but in need of sustainable livelihoods to support themselves and their families. New initiatives outside of PLE, or initiatives building upon some initial existing PLE-funded projects related to livelihood development, would support a further shift toward this longer-term sustainable livelihoods approach. Livelihoods programs must be designed within the framework of existing USG policy constraints. Because sub-grantees have little experience in livelihoods programming, levels of technical expertise must be fully assessed and gaps in skills identified and strengthened. This aligns with an Above the Line HA Convergence Strategy.

7. Define strategic protection focus areas: PLE can benefit from a clearly defined protection service portfolio that is most appropriate for the needs in SE Burma and the role of PLE as part of the USAID portfolio. It must be noted that mainstreaming protection will require empowering partners in the health, education, and food security/livelihood sectors with access to funding for protection activities. Since PLE is currently supporting some protection activities in SE Burma, it should be relatively easy to provide more support in this service under PLE.

8. Explore the possibility to develop community-based program platform: PLE can consider exploring the feasibility of community development based on a platform of more coordinated services at the village level. The aim is to provide health, education and social protection services collectively. There could be some support on local community development program, agriculture, and food security.

3. CAPACITY BUILDING & SUSTAINABILITY

PLE has been implementing several interventions that are geared towards sustainability including capacity building of the PLE sub-grantees. The interventions aim to strengthening the capacity of sub-grantees in both the technical and management aspects to improve aid effectiveness and sustainability through convergence and transition. An on-line, self-assessment survey with 66 key staff members from 34 of the 35 sub-grantees was carried out. The data was weighted to have equal representation across the 34 sub-grantees. Whilst the sample is small it was taken from a finite population and the margin of sampling error is therefore around 2%.

To measure capacity amongst the sub-grantees, self-rating measures were used for overall performance, improvement over the past two years, and future support needs. In addition, a quantitative tool was

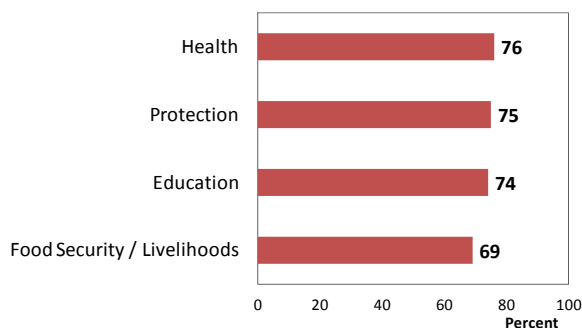
designed linked to the USAID OCA Tool to more comprehensively measure organizational and technical capacity across multiple key capacity domains as well as the extent to which capacity was seen to have improved over the past two years. A total of 52 domain specific indicators were used to measure overall capacity strength, by looking at total compliance across the 52 indicators expressed as a percentage. The higher the compliance across the indicators, the higher the capacity strength the organization has. Results were internally validated and a strong positive relationship was found between average compliance across the indicators and self-reported, overall strength of capacity; meaning, sub-grantees who rated themselves as having stronger capacity also had higher capacity strength. There was also relatively wide dispersion in overall capacity strength ranging from as low as 36 up to 94 percent, which is a good indication the 52 indicators selected helped to depict different capacity levels among sub-grantees.

3.1 FINDINGS

3.1.1 Sub-grantees capacity strength

Based on the online survey, sub-grantees were found to have relatively high levels of overall capacity strength³⁷ at 73% across all indicators. This is not that surprising given that sub-grantees operating on the border have had ongoing exposure to international programs, often with capacity development components, for many years. It was confirmed during interviews with sub-grantees that capacity support provided under PLE was considered of good quality. PLE sub-grantees are also recognized by other international organizations as a few expressed their desire to work with the PLE’s network of sub-grantees for their future programming due to their capacity proven by their ability to operate in hard-to-reach areas. When looking at capacity strength by PLE service sectors, similar levels of strength can be seen for sub-grantees in health, education, and protection that range from 74% to 76% (Figure 14). Capacity strength of sub-grantees involved with food security is on average lower at 69% compared with other sectors, and whilst significant the difference is relatively small.

Figure 14: Capacity Strength of PLE sub-grantees by service sector



Looking into details of capacity domain indicators, the Team identified 11 potential improvement areas (Table 10). The 11 improvement areas are represented by 11 indicators that scored lowest out of the 52 domain indicators in terms of capacity strength. Two out of 21 sub-grantees (10%) who operate in SE Burma are registered in Burma. This is, understandable given the nature of the political situation in Burma. Based on follow-up interviews with sub-grantees, they are concerned about being under

³⁷ Capacity strength is measured by overall compliance across a list of indicators of capacity. The online questionnaire and list of indicators is presented in Annex IV.

supervision and control of the government if they become registered. Under the administration domain, written staff travel policies and procedures were found to have lower than average capacity strength. Three indicators under human resources domain were identified as potential improvement areas including staff vacancies, identification of professional development needs, and performance reviews. One of the least strong performance areas related to having all key positions filled within the organization (achieved by only 42% of the sub-grantees). The Team learned from interviews that loss of staff to INGOs and GoB agencies, that can offer higher salaries and more promising careers, is a reason for position vacancies. Under the organizational management domain it was found that whilst over 90% of sub-grantees have managed to build relationships or have collaboration with CSOs (data not shown), many fewer sub-grantees have relationships with government agencies (60%), international policy bodies (46%), and academic bodies (51%). An important issue under program management is related to providing training on gender equality issues.³⁸ Another potential improvement area related to project performance management is about having documentation outlining standards of services they deliver to their beneficiaries. Finally, under technical capacity development, lack of a technical capacity plan that corresponds with future service needs is noted to be an issue for improvement.

Table 10: Key improvement areas of PLE sub-grantees

Domain	Capacity Improvement Areas	% Sub-grantees Achieving the Indicator
Governance and Legal Structures	Registered in Burma	10 ³⁹
Administration	Written staff travel policies in place	59
Human Resources	All key positions filled	42
	Professional development needs identified for all staff	61
	Performance reviews conducted for each staff	52
Organizational Management	Collaboration with Government partners	60 ⁴⁰
	Collaboration with international policy bodies	46
	Collaboration with academic bodies	51
Program Management	Provide training on gender equality issues	61
Project Performance Management	Documentation outlining service standards	63
Technical Capacity	Have a technical capacity plan	58

Regarding organizational sustainability, 22 out of 34 sub-grantees (65%) report that their organizations have experienced receiving funding from different donors at the same time. A couple of sub-grantees said specifically that, because of capacity building support from PLE, the organization has grown in terms

³⁸ E.g. Gender sensitivity training and GBV training.

³⁹ Base: 21 sub-grantees who operate in SE Burma.

⁴⁰ Base: 30 sub-grantees excluding Ministry of Public Health provincial health offices in Chiang Mai, Chiang Rai, Mae Hong Son and Tak.

of their capacity development and is able to access funding in Burma. Ten sub-grantees (33%)⁴¹ report that they have income-generating activities other than donor funding. This does not necessarily suggest that they are becoming less donor-independent but shows they are proactive in taking steps to generate their own income streams. Some sub-grantees have established relationships and networks within SE Burma. For example, one sub-grantee said that it has built networks inside Burma and in other countries within the Association of Southeast Asian Nations (ASEAN).

In the survey, respondents were asked to rate their current performance and improvement in the past 2 years (Table 11). Overall, 19 out of 34 sub-grantees (56%) said they consider themselves having strong organizational capacity while 22 out of 34 (65%) indicated they have strong technical capacity. 19 out of 34 (56%) sub-grantees said their technical capacity has improved in the past two years. Similarly, 19 sub-grantees also reported that their organization capacity has improved in the past two years. Nearly all sub-grantees indicated that they want some level of continued support for capacity building after PLE ends in 2015. Around half of the sub-grantees indicated they will need more support for capacity strengthening; just over one-third of sub-grantees said the same level of continued support is needed; and the remaining few sub-grantees would need less or no support. Results by sector can be found in Annex VII.

Table 11: Self-assessed overall performance, improvement, and future needs (n=34)

Overall Performance Rating	Weak	Average	Strong
	# Sub-grantees	# Sub-grantees	# Sub-grantees
Organizational Capacity	1	14	19
Technical Capacity	-	12	22

Perceived Performance Improvement	Little or no improvement	Improvement in some or most	Improvement in most areas
	# Sub-grantees	# Sub-grantees	# Sub-grantees
Organizational Capacity	3	12	19
Technical Capacity	3	12	19

Future Support Needs	More	Same	None or less
	# Sub-grantees	# Sub-grantees	# Sub-grantees
Organizational Capacity	17	13	4
Technical Capacity	18	13	3

3.1.2 Capacity strengthening strategy

During the SHIELD project, broad-based capacity development support to more than 100 CSOs working along the border areas was provided through training-based capacity building approaches. Since the onset of PLE, capacity building services were shifted to focus and more strategically target primarily PLE sub-grantees and to prioritize professional-level, certified training support to these sub-grantees. From year 3 of PLE, the Tiering Approach has been introduced as an internal tool to prioritize support among CBO sub-grantees specifically (government agencies are not included in the Tiering approach) aiming for more effective organizational and management assistance tailored to the needs of individual CBO sub-grantees. This recognizes that each sub-grantee is unique and has specific roles within their communities. Under this approach, all CBO sub-grantees are subject to annual or bi-annual qualitative

⁴¹ Base: 30 sub-grantees excluding Ministry of Public Health provincial health offices in Chiang Mai, Chiang Rai, Mae Hong Son and Tak.

capacity assessments. Results of the assessment are used in consideration with criteria for prioritizing support to each CBO sub-grantee. The criteria includes: an on-going sub-grantee relationship with the CBO; the strategic role of the organization now and in the future (reflecting geographical and service coverage, legal status, relationship to other organizations, viability, niche services); a demonstrated commitment to organizational growth and change; and a demonstrated need and request for organizational development support. PLE discusses with CBO sub-grantees to agree on support needs and priorities before placing sub-grantees into Tiers, with capacity support allocated accordingly.

Under Tier One, all partners have access to broader forms of support, for example, organization staff receive support to attend professional certificate courses in non-profit management, community development, and finance (in partnership with Payap University in Thailand). Under Tier Two, PLE offers individualized support toward organizational development priorities identified through a participatory self-reflection process. These include policy review and development in human resources and finance, financial management and systems, fundraising strategies, and proposal development. For Tier Three, enhanced support tailored to specific and complex needs are provided through support such as management consultancy to provide intensive short-term organizational development assistance. This Tiering approach is primarily used for prioritization of PLE’s organizational capacity development support rather than technical support.

Although the Tiering approach was introduced only 8 months prior to the evaluation, PLE anticipated that the impact of organizational development support to Tier 3 CBO sub-grantees would exceed that of Tier 2 CBOs which in turn would exceed that of Tier 1 CBOs. The Team analyzed perceived capacity improvement of PLE CBO sub-grantees in each tier and found that 5 out of 7 CBO sub-grantees in Tier 3 claimed significant improvement compared to around half for Tier 1. For Tier 2, significant improvement was limited to mostly technical capacity (Table 12)⁴². PLE’s strategy was to increase impact on organizational development as they move through the tiers. However, self-reported performance data from CBO sub-grantees indicate some stalling effect amongst the Tier 2 group, indicating the need for greater attention to this Tier of CBO sub-grantees, including perhaps the effectiveness of training materials, inputs, and strategies.

Table 12: Self-reflected improvement of overall performance in past 2 years by Tier (n=30)

Organizational Capacity	Little or no improvement # Sub-grantees	Improvement in some areas # Sub-grantees	Improvement in most areas # Sub-grantees
Tier 1	2	5	9
Tier 2	1	3	3
Tier 3	-	2	5

Technical Capacity	Little or no improvement # Sub-grantees	Improvement in some areas # Sub-grantees	Improvement in most areas # Sub-grantees
Tier 1	1	8	7
Tier 2	1	-	6
Tier 3	-	2	5

Information gained from interviews with sub-grantees has clarified the appropriateness of PLE support

⁴² Thirty CBO sub-grantees had tier classification for PLE capacity support. Not included are the Ministry of Public Health provincial health offices in Chiang Mai, Chiang Rai, Mae Hong Son and Tak.

for capacity building. In general, sub-grantees are positive and satisfied with the capacity building support provided by PLE, both the technical and organizational management. It appears to be a well-balanced support to both sides of organizational capacity. Sub-grantees think capacity building support received from PLE is by and large suitable to their needs. Only one sub-grantee in the food security sector and one in the health sector said they received very limited support for organizational development from PLE. Eighteen sub-grantees mentioned that, based on support from PLE, their capacities have improved in areas like fundraising, financial management, information management, proposal development, and report writing. For example, in fundraising, some sub-grantees can now get funding from other donors and INGOs, including those inside Burma, such as 3MDG, Taipei Overseas Peace Service, Save the Children, Right to Play, and the Swiss Agency for Development and Cooperation. Notably, one sub-grantee said approximately 20% of the capacity development support they received comes from PLE; the rest comes from other INGOs. One organization mentioned that it has 16 supporters/funders including PLE but few focus on capacity building like PLE. In addition, the PLE capacity building process is participatory through consultation and collaboration with sub-grantees. However, one sub-grantee in the health sector noted that they wanted PLE to consult with them more on training needs as they found some training they received did not specifically address their capacity needs.

All sub-grantees who mainly operate in Burma said the support they received is sufficient for them to work inside Burma. However, most sub-grantees, including those who are planning to extend their operation to Burma, request that more capacity development activities, like training, take place inside Burma rather than in Thailand. Reasons they gave were that it is safe for them now to travel inside Burma; and it would be more convenient for their staff who are working inside Burma to participate in activities compared to having to cross the border to attend activities in Thailand. For example, PLE's plan of offering professional certificate courses in Mawlamyine, Hpa'an, and Loikaw show initial movement in this direction. Approximately one-third of sub-grantees (3 out of 8) from the food security sector mentioned that the technical development support helped improve their capacity in community development and livelihood programming. Issues that were generally raised by sub-grantees in terms of their biggest needs for capacity support related mainly to organizational development including monitoring and evaluation, strategic planning, proposal writing, fundraising, and human resources. This feedback confirms findings from the on-line survey regarding future support needs. However, many sub-grantees pointed to a constraint on staffing resources. Lack of personnel to fill vacancies, limit their capacity in providing sufficient service to their constituencies. Staff turnover also requires the organization to pay close attention to new staff retention and knowledge management rather than to focus on building skills of staff who already have been capacitated.

Health sector: Based on interviews with health sub-grantees, PLE capacity building support was perceived as very useful and helps them perform better. Technical capacity building support is mostly highly regarded. Trainings for certified health workers are positively admired as this kind of activity has directly strengthened their technical capacity. The online survey confirms this with 11 out of 15 sub-grantees (73%) indicating significant improvement in capacity over the past two years. However, some concerns were mentioned over the issue of whether or not the credentials they received will be recognized in Burma. A sub-grantee mentioned during the interview that instead of providing the organization with more technical development, such as medical training in patient handling and Malaria prevention, PLE visited them twice for assessment and monitoring purposes. Given their limited staff, this organization is not able to follow the management requirements proposed in the organizational assessment. Office management and fundraising are areas where sub-grantees need support for capacity building. Provincial Health Offices in Thailand also acknowledged capacity building support received from PLE but they are unlikely to change or adjust their internal management regulations accordingly. Given their nature of being a government entity, they cannot revise the regulations or laws that govern their operations (such as regulations related to human resource management or financial management) by

themselves since the changes need to be made by the Ministry or the Parliament.

Education sector: Teacher training was highlighted by education sub-grantees as very useful for improving their technical capacity. However, some sub-grantees request support for organizational development capacity such as human resource management, strategic planning, fundraising, proposal writing, and organizational management. Four out of 12 sub-grantees mentioned the lack of staff is the most critical problem that limits their capacity. Two sub-grantees mentioned that without PLE's further support, in both financial and technical, they would be in a difficult situation and may not be able to continue their work effectively. They are not yet able to seek funding support from other donors. The online survey also showed that 6 out of 12 sub-grantees (50%) require more capacity support in the future.

Food security sector: All but one sub-grantee in food security think they received sufficient capacity development support from PLE. Some already started to receive training on livelihoods and rehabilitation. Community development, sustainable agriculture, and conflict resolution are recommended to be new areas of technical support. One sub-grantee mentioned that they might be able to operate without support from PLE since they were working on a voluntary basis before. But support from donors allows them to be more focused on their development work with less concern for sourcing incomes. Based on the online survey, 5 out of 9 sub-grantees rate themselves as having strong levels of capacity.

Protection sector: Sub-grantees viewed that training on GBV and female empowerment has helped them improve service delivery to beneficiaries including IDPs in the camps. Regarding organizational development, some commented that they can see positive changes in their organizational management, such as improved human resources systems, clearer policy, and better financial management procedures. Based on the online survey, 6 out of 7 sub-grantees indicated they have strong capacity, three will require more technical capacity support and two more organizational capacity support in the future.

3.1.3 Gender Considerations

Twenty-one of 34 (61%) sub-grantees provide gender equality training to their staff, demonstrating the potential need for further investments in this aspect of capacity building. Also, gender policies and strategies within sub-grantees and their activities remain weak, as confirmed in the IIs. Observations by the Team while conducting interviews with sub-grantees in camps indicated that women often performed domestic roles during these meetings such as preparing food and refreshments and taking care of children, thus limiting their active participation. The Team also observed that often women hold few senior positions within organizations that are PLE sub-grantees. This is important given that PLE partners are well positioned to address emerging GBV-related issues, particularly related to gambling, drugs, and alcoholism, and to continue insuring equitable and safe access to services, participation, and opportunities.

3.1.4 Other recommended models or approaches

No conclusive evidence could be obtained from IIs or the survey to directly address the evaluation question on alternative models for capacity development. However, a desk review of literature on alternative models and approaches was undertaken, evaluated against the Team's understanding of the operating environment on both sides of the border and the following were determined to have potential within the context of at least some of PLE's geographic areas and sub-areas. These models can complement current support received from PLE.

Social Enterprise (SE) model:^{43, 44, 45} SEs apply business practices and solutions to their operations while maintaining their ultimate mission in addressing a social cause. SEs aim to achieve sustainability by becoming self-financing through innovative means instead of relying solely on grants and donations. They run revenue-generating activities where business principles, market characteristics, and values (competition, diversification, entrepreneurship, innovation, and a focus on the bottom line) co-exist and work with traditional social values like responsiveness to community and serving the public interest. Therefore, essential to the success of a SE is an effective business model. Profits gained from operations are re-invested in the work of the organization to enhance their ability to serve their beneficiaries.

This model would benefit sub-grantees in Burma and Thailand in the ways that help strengthen their capacity for survival and sustainability. The model can help CBOs find alternative income streams apart from being solely dependent on donor support or grants. If the organization can be more self-reliant and less dependent on outside support, they can better pursue their core mission or can work on development areas of interest that may be different from donors' preferences. In terms of limitations, the model requires CBOs to integrate business practices into their operations such as profit-making activities that many CBOs regard as against their 'non-profit' nature. It takes time for some CBOs to accept the 'profit-making' notion while maintaining their status as a non-profit organization. Also, by engaging in income-generating activities, CBOs need to ensure that the services or products they propose are in line with their organizational mission and core competencies. Otherwise, this could easily lead to diverting efforts by the CBOs to provide services or sell products that generate little income and prevent them from playing their principal development roles appropriately.

Capacity Building Accounts (CBAs):⁴⁶ CBAs are small grants, generally in the range of \$2,000 - \$3,000, provided to local CBOs to obtain capacity building services from the provider of their choice. CBAs give local organizations greater control over their own organizational development, and help to foster a vibrant local capacity development marketplace. This links those needing high quality capacity services with those capable of delivering them. CBAs may be generated using a number of different models⁴⁷. In order to assist local CBOs to make informed purchases, CBAs are usually provided following an organizational capacity assessment and action planning process.

The model can offer PLE CBOs an opportunity to pursue any capacity development support that directly meets their needs. CBAs would empower these CBOs as decision-makers of their own services and they would feel increased ownership for services purchased. However, where local CBOs are given greater freedom to choose services that meet their own needs, they have greater commitment and follow-through, and are more likely to incorporate new ideas. Limitations of this model include a risk of inappropriate use of funds. CBOs may decide to invest in activities that are not directly linked to increased capacity of the organization. Also a situation where limited service providers in the operating locations of CBOs may occur which narrows the choices of services these CBOs can access.

⁴³ Venturecome (2008). *The three models of social enterprises*. London: Charities Aid Foundation.

⁴⁴ Office of the Third Sector (OTS). (2009) *Social enterprise background*. London: Cabinet Office.

⁴⁵ Dees, Gregory J. *et.al.* (eds.) (2002). *Strategic tools for social entrepreneurs: enhancing the performance of your enterprising nonprofit*. New York: John Wiley & Son.

⁴⁶ Capacity Building Services Group (2006). *Building Dynamic Local Service Provider Communities: A value chain approach*. Washington DC: PACT

⁴⁷ It is possible to use any combination of these four models: (1) Self-Paid – CBNGO participants generate CBAs from their own existing funds; (2) Donations – CBAs are provided to CBNGO participants by donor organizations; (3) Sponsorship – CBNGO participants seek sponsorship to pay for their chosen capacity services; and (4) Top Ups – CBA funds raised through sponsorship by CBNGO participants are topped-up by donors by a certain percentage (5%-10%) up to an agreed maximum.

Organizational Performance Index (OPI):⁴⁸ OPI measures not only changes in organizational systems, practices, policies, and skills but also aims to improve an organization's performance and ultimately development impact directly linked to capacity development. OPI captures the organization's performance in the following four domains: effectiveness (results & standards), efficiency (delivery of services & reach), relevance (engagement & learning), and sustainability (resources & social capital). Each of these domains includes benchmarks that describe progression of four levels of increasing performance. Partners self-identify their current level in each domain and provide tangible supporting evidence which is reviewed to verify achievements.

One of OPI advantages in the context of PLE is that it shows the linkage between capacity development efforts and results. It helps the CBOs see whether or not investment in capacity strengthening actually leads to better organizational performance and calibrate capacity building support to foster the link between improved internal systems and beneficiary impact. This model then helps build understanding of requirements, raises expectations, and motivates. OPI is also useful in guiding partner capacity-building priorities as well as assisting donors in making informed decisions on funding risk. However, when using OPI in conflict or post-conflict areas it is important to be aware that organizational performance can be heavily affected by exogenous and subsequently information to quantify development impact may not be readily accessible or in existence.

3.2 CONCLUSIONS

Based on the survey, PLE's sub-grantees have reported relatively strong levels of capacity. With PLE support, half of sub-grantees viewed that their capacities have improved significantly in the past two years in both technical and organizational aspects. Although a certain percentage of sub-grantees reported that they are able to obtain funding from different donors, and some have income-generating activities, other than donor funding, they still indicate the need for continued support on capacity building. Attention was pointed to some areas of organizational capacity development including human resources management. Abilities to build relationship and collaborate with government agencies, international policy bodies, and academic bodies are also highlighted. This area of improvement can contribute to convergence, advocacy, and resource mobilization. Emphasis also needs to be put on gender equality. Demand from sub-grantees for more capacity development activities to be held inside Burma is noted.

The Team cannot conclude at this stage if the Tiering approach is the most effective framework for facilitating capacity building. But, based on the survey, improvement in capacity for sub-grantees in Tier 3 is more significant than other tiers. The Tiering approach has potential to be effective but an impact evaluation of this strategy should be conducted later since the approach has just been utilized for less than a year. Moreover, the lack of a comprehensive quantitative measurement to assess baseline performance of each sub-grantee with subsequent interval assessments prevents PLE from being able to accurately measure and assess established quantitative indicators of improvement (or backsliding) over time and against a holistic view of optimal capacitation across a list of capacity domains.

⁴⁸ PACT (n.d.). *Developing Capacity, Improving Performance*. Washington DC: PACT. See also in http://kdid.org/sites/kdid/files/resource/files/Capacity%20Development%20Global%20Indicator_Organizational%20Performance%20Index.pdf

3.3 RECOMMENDATIONS

1. Promote cross-learning between GoB and CBOs: PLE or USAID/Burma should support activities that can be perceived as non-political networking activities such as dialogue, joint training, observation trips, peer learning, sharing of success stories, and staff exchange program. Less formal activities would greatly build personal relationship and trust (which indicated in the previous section also contributes to creating conditions for convergence). It is noted that PLE has facilitated some joint learning activities and should continue. These could be undertaken as much as possible and practicable given the current USG policy environment.

2. Prioritize more support for capacity building activities inside SE Burma: Activities inside Burma, rather than in Thailand, would better facilitate participation of CBO staff and respond to the needs of PLE sub-grantees working in Burma. Moving inside Burma would give broader learning opportunity for sub-grantees and better support the aspiration of sub-grantees in extending their services and network into SE Burma. PLE's plan of offering professional certificate courses in Mawlamyine, Hpa'an, and Loikaw are considered as good initial steps in this direction. However, during the political transition period in Burma, the border is likely to play an important role as a training hub for the foreseeable future for reasons of security, access, and responsiveness. A good balance should be found with an aspiration to conduct more inside Burma.

3. Continue the Tiering approach of capacity building: No evidence was found to suggest that the Tiering approach does not work well with CBO sub-grantees. However, PLE should place more emphasis on organizational development that leads to sustainability of CBO sub-grantees in maintaining the services to beneficiaries in the long-run. Because the Tiering Approach has been used for only a limited time, an evaluation should be undertaken at the end of project to better understand the results and any causal relationships with enhanced capacity development.

4. Consider including a comprehensive quantitative measurement tool for future capacity building programs: For USAID, qualitative approaches to capacity building can be greatly complemented by the use of a comprehensive quantitative measurement tool which allows for setting baseline scores, prioritizing critical areas of performance commensurate with available human and financial resources, weighting short and long term priorities, measuring progress in achieving them, and accounting for improvement (or backsliding) over time. Such a complementary tool when linked to comprehensive list of capacity domains, as for example in the USAID OCA Tool⁴⁹, can illustrate a cohort's overall, holistic capacity level across the full range of progressive stages of organizational capacitation. USAID could consider this in design of any future capacity building programs for CBOs working in Burma or cross-border. This is especially important with respect to USAID Forward as an important consideration.

5. Prioritize capacity support for sub-grantees involved with food security to advance technical capacity for sustainable livelihoods: The rationale of this recommendation comes from the changing HA needs landscape inside Burma that shows emerging needs in protection, livelihoods, rehabilitation, and community development. This is also in response to demand from the sub-grantees in food security themselves. Sustainable agriculture and conflict resolution are recommended by sub-grantees and PLE should explore the possibility and appropriateness to enter into these issues.

⁴⁹ <http://www.usaid.gov/sites/default/files/documents/1870/201saf.pdf>

6. Increase capacities of sub-grantees operating inside Burma: It is clear that HA activities should be more focused in SE Burma. Increased capacity support for sub-grantees operating inside Burma would improve basic services and sustainability. Therefore, more support should be targeted at sub-grantees to better operate inside Burma. This is also responding to the aspiration of some sub-grantees who plan to extend their work into SE Burma.

7. Continue to provide capacity development assistance, including both organizational and technical capacity development: It is clear from the result of the on-line survey and interviews with sub-grantees that continued assistance in both capacity areas is an ongoing need. Specific attention could be paid to topics like monitoring and evaluation, strategic planning, proposal writing, fundraising, and human resources.

8. Provide specific support on retention of human resources and knowledge management: In response to the critical problem of personnel turnover, provision of more support is needed to improve personnel retention and organizational knowledge, such as mentoring, shadowing, voluntary, organizational knowledge management, and related topics that address organizational culture issues, to ensure continuous learning, retention of organizational knowledge even after staff separate, and sustainability of service delivery in ways that develop greater retention of staff.

9. Capacity support for decentralized level of GoB and local communities should be explored: Capacity building can be also utilized to advance convergence when support provided to GoB and other local authorities would open an opportunity for collaboration between PLE and the GoB. This can be later linked to CBOs and promote convergence. These could be undertaken as much as possible and practicable given the current USG policy environment.

10. Develop a comprehensive integrated PLE Gender equality framework. Advancing gender equality and female empowerment is a key policy priority for the USG. PLE should have a more clearly defined gender strategy that maps onto the broader PLE results framework to comprehensively articulate priority gender equality programming areas, strategic activity implementation approaches, indicators and measurement frameworks.

ANNEXES

ANNEX I: EVALUATION STATEMENT OF WORK

I) BACKGROUND INFORMATION

A) Identifying Information

Activity Title	Project for Local Empowerment (PLE)
Award Number	Cooperative Agreement No. AID-486-A-12-00003
Life of Activity	December 1, 2011 to September 30, 2015
Activity Funding	US \$40,000,000
Implementing Organization(s)	International Rescue Committee (IRC) and three other Consortium Members, and 31 Government and non-government Sub-grantees.
USAID's Assistance Officer Representative (AOR) for PLE	Preeyanat Phanayanggoor, Office of Governance and Vulnerable Populations, USAID/RDMA
USAID's Evaluation Manager (COR)	Nigoon Jitthai, Program Development Office, USAID/RDMA
Evaluation Counterpart & Point of Contact at USAID/Burma	Warren Harrity, Program Office, USAID/Burma

B) Development Context

I. Problems or Opportunities Addressed by PLE

Prolonged conflict and displacement in Southeast Burma⁵⁰, and other push factors for outward migration, have created a protracted need for humanitarian assistance for displaced persons (DPs) from Burma in Thailand and internally displaced persons (IDPs) in Southeast Burma for more than 25 years. USAID has a long history of providing humanitarian assistance along the Thai-Burmese border, for both the DPs from Burma in Thailand and the IDPs in Southeast Burma. The overall objective of this humanitarian assistance is to provide healthcare, education, food, and other humanitarian assistance to these populations. This is done in ways that strengthen the technical capacities of community-based organizations (CBOs) that deliver essential services, promote collaboration and coordination across organizations, empower the innate capacities of communities, and strengthen local decision-making.

USAID's Regional Development Mission for Asia (RDMA) in Bangkok, Thailand has been providing humanitarian assistance to DPs along the Thai-Burmese border since 2000. In 2008, its efforts to expand humanitarian assistance inside Burma have scaled up in response to the devastation of Cyclone Nargis. USAID provided immediate relief items and recovery activities focused on livelihoods (agriculture and fisheries), water and sanitation, health, and shelter in the cyclone-affected area. At present, there are two large USAID-funded humanitarian assistance programs: 1) *Shae That* which provides humanitarian assistance in the Dry Zone in Central Burma, Rangoon/Yangon⁵¹ Region and the latest expansion into Karenni/Kayah Region; and 2) *PLE* which provides humanitarian assistance on both sides of the Thai-Myanmar/Burmese border.

PLE was designed in the context of protracted conflict in Southeast Burma and continued displacement within Burma and into border provinces of Thailand. It aims to provide health care, education, food, protection, and other humanitarian assistance in ways that are impactful, cost-effective, and strengthen the

⁵⁰ In the PLE's context, Southeast Burma is defined as six regions in the East and Southeast Burma including Shan State, Karenni or Kayah State, Karen or Kayin State, Mon State, Eastern Pegu or Bago Division, and Tenasserim or Tanintharyi Division. See also Figure I.

⁵¹ Both previous and current official names of the regions in Burma are used in this document to avoid confusion, except for the names that are appeared under direct quotes from existing PLE's and other documents.

resiliencies of the most vulnerable persons from Burma. It works to build the technical, management, and leadership capacities of CBO partners to deliver efficient, effective and equitable services for conflict-affected populations living in six regions in Southeast Burma including four ethnic states and two divisions, as well as for DPs in nine temporary shelters and migrants from Burma in selected communities in six border provinces in Thailand. It also directly addresses the legal and policy environment that creates roadblocks for people from Burma seeking to access their rights, through advocacy and other interventions. PLE was built on the success of the USAID-funded “*Support to Health, Institution Building, Education, and leadership in Policy Dialogue (SHIELD) Project*”, a \$49.6 million initiative that supported health, education, emergency cash and food assistance, institutional capacity building, advocacy, and protection programming. The Project served approximately one million beneficiaries in Thailand and those in Southeast Burma. An external evaluation of the six-year SHIELD Project, commissioned by USAID and conducted by Social Impact in 2010, concluded that: “...the SHIELD project constitutes an exemplary response to a complex “chronic emergency” by simultaneously addressing the needs of refugees, a large migrant population outside camps, and IDPs in tenuous circumstances along the Thailand border inside Burma. The project has assessed and appropriately addressed identified needs among these populations, and done so effectively and efficiently through strategic partnerships forged among Burmese community-based organizations, local and international non-governmental organizations, the Royal Thai Government (RTG) and international agencies.”

However, Burma has changed dramatically since the design of PLE in 2010-2011. Since PLE was launched in December 2011, a series of political, economic, and administrative reforms have been initiated by the first elected Burmese government in almost 50 years. New ceasefire agreements have been concluded with almost all ethnic armed groups across the country. As a result of democratic reforms and preliminary ceasefire agreements, greater movement of people among conflict-affected communities in Southeast Burma has been witnessed. In addition, there has been a significant decrease in armed conflict and roving military patrols.

In response to Burma’s ongoing reforms, the U.S. Government has restored full diplomatic relations, re-established a USAID mission in the country, supported assessment missions and technical assistance by international financial institutions, and eased financial and investment sanctions against Burma. The USAID Mission in Burma was opened in 2012 to focus on new and expanded collaboration in the following priority areas: democracy, human rights, rule of law and transparent governance; peace and reconciliation; health; economic opportunity; and food security. Gender equality and female empowerment is a cross-cutting area of significance that all programs must access priorities and define opportunities to address. Since the opening of the USAID Mission in Burma, the management of almost all USAID-funded Burma programs has been transferred to the Mission in Rangoon/Yangon with the exception of PLE, which is still managed from RDMA.

Despite the recent political transition, fundamental challenges remain in Burma. These include low investment in basic services such as health and education, and limited government access to areas affected by internal conflict. However, there is emerging non-governmental organizational presence in Burma that has potential to compliment governmental efforts. The need for humanitarian



Figure 1. PLE Implementation Site

assistance to DPs and IDPs concentrated along both sides of the Thai-Burmese border still remains, but the design, approach, and service delivery method, and resources to provide such services, may differ according to the changing context in Burma.

2. Targeted Areas and Population Groups

The geographical focus of PLE is along both sides of the Thai-Burmese border. This includes selected communities in the following provinces/regions and population groups:

In Thailand

- ❖ Chiang Rai Province → DPs in local communities
- ❖ Chiang Mai Province → DPs in local communities
- ❖ Mae Hong Son Province → DPs in four temporary shelters and local communities
- ❖ Tak Province → DPs in three temporary shelters and local communities
- ❖ Kanchanaburi Province → DPs in one temporary shelter and local communities
- ❖ Ratchaburi Province → No direct service to DPs (only capacity building and support for operation cost to a CBO working on the other side of the border in Burma)
- ❖ Bangkok Metropolitan → for cross-cutting interventions, i.e. advocacy and partnerships

In Myanmar/Burma

- ❖ Shan State → IDPs and local communities affected by conflict
- ❖ Karenni/Kayah State → IDPs and local communities affected by conflict
- ❖ Karen/Kayin State → IDPs and local communities affected by conflict
- ❖ Mon State → IDPs and local communities affected by conflict
- ❖ Tenasserim/Tanintharyi Division → IDPs and local communities affected by conflict
- ❖ Pegu/Bago Division → IDPs and local communities affected by conflict

It is to note that different services are provided to different population (ethnic) groups according to their needs. A matrix that displays the list of PLE's implementing partners (IPs), their roles, and focused service and geographic areas is provided in Annex I of this SOW.

C) Intended Results of PLE

I. Key Results

PLE aims to achieve three key results as summarized below.

Result 1: *Improved access to quality healthcare, education services, and skills development to DPs from Burma* (both in the temporary shelters and local communities) focuses on providing quality sustainable health and education services in Thailand through increasing access of DPs in Thailand to public health and education services provided by Ministry of Public Health (MoPH) and Ministry of Education (MoE); as well as through increasing technical, institutional, and leadership capacities of CBOs to provide complementary services that are integrated into host country systems⁵².

Result 2: *Improved delivery of food, healthcare, education, and other humanitarian assistance to IDPs in Southeast Burma* focuses on enhancing the technical, institutional, and leadership capacity of partners implementing health, education, food security, and protection programming in Southeast Burma; strengthening monitoring and evaluation; increasing coordination; promoting convergence with agencies

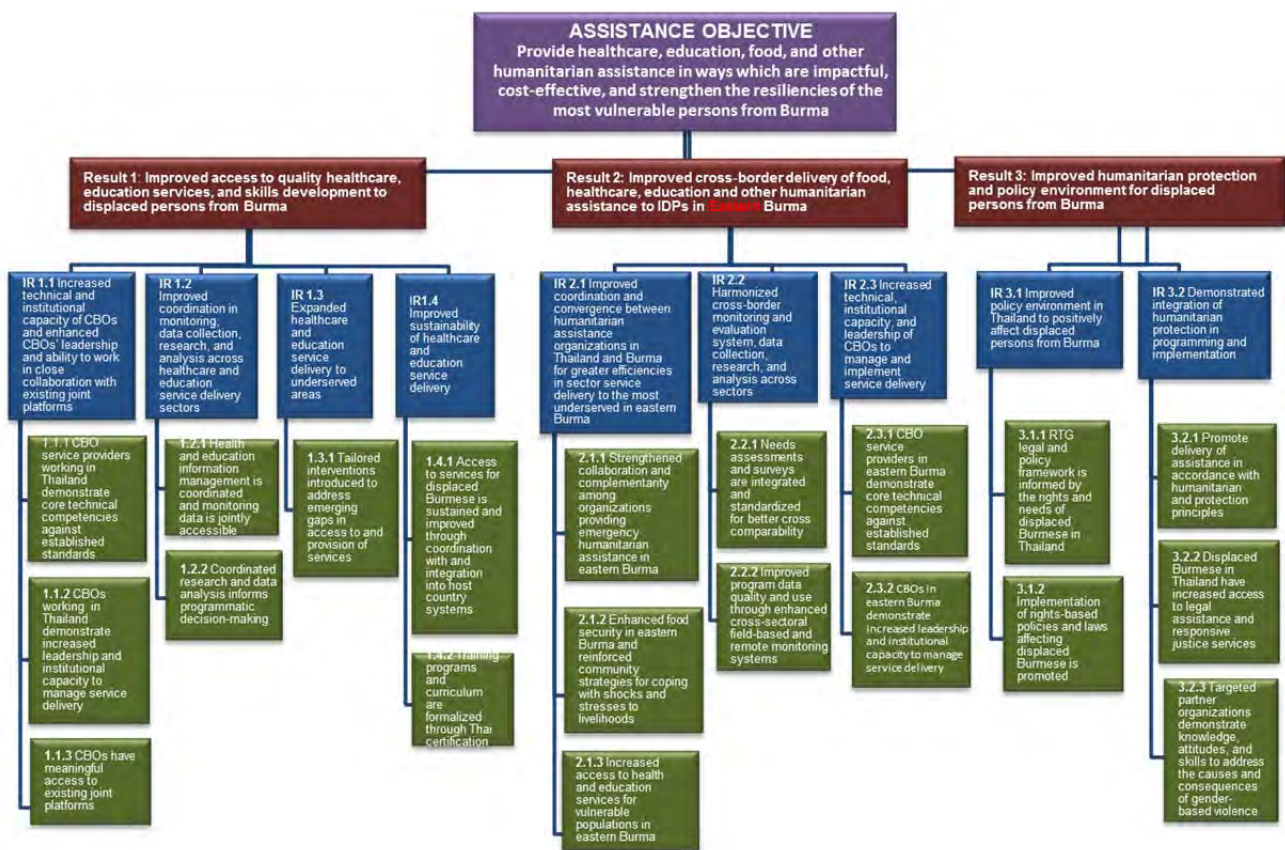
⁵² Initially the RTG but this is now including both Thai and Burmese Governments.

and interventions from within Burma; and enhancing critical social service provision in Southeast Burma in ways that build on local capacities and promote reconciliation and peace building.

Result 3: *Improved humanitarian protection and policy environment for DPs from Burma* works to improve the policy environment in Thailand by promoting evidence-based advocacy through coordinated engagement with the RTG, and supporting CBO capacity and access to influence policy dialogue and implementation. This result also encompasses access to justice and gender-based violence (GBV) prevention and response interventions, as well as promotion of protection, gender equality, and humanitarian principles with partners.

The PLE's key results are elaborated in a result framework as displayed in Figure 2 below.

Figure 2. PLE Results Framework



2. Key Indicators

Since its inception, PLE has been tracking some 270 indicators that are mostly input, process, and output indicators. Below are lists of key indicators relevant to each of the three key results summarized in the previous sections.

Result 1: Improved access to quality healthcare, education services, and skills development to DPs from Burma in Thailand

Result 1.1: Increased technical and institutional capacity of CBOs and enhanced CBOs' leadership and ability to work in close collaboration with existing joint platforms

Key Indicators for Result 1.1:

- Number of partner CBOs that demonstrate progress against self-identified indicators in their organizational capacity building plan
- Number of CBOs and/or NGOs working in Thailand that apply for and receive new non-PLE funding
- Number of joint platform meetings led or facilitated by CBOs
- Percentage of youth attending vocational training who access gainful employment within 6 months of training

Result 1.2: *Improved coordination in monitoring, data collection, research, and analysis across healthcare and education service delivery sectors*

Key Indicators for Result 1.2:

- Percentage of CBO that demonstrate data usage in programming through reports (CBOs working in Thailand)

Result 1.3: *Expanded healthcare and education service delivery to underserved areas*

Key Indicators for Result 1.3:

- Percentage of surveyed migrant learning center teachers who know at least 60% of prevention and danger signs of each individual common communicable diseases (Acute Respiratory Infection (ARI), Diarrhea, Dengue Hemorrhagic Fever (DHF), Malaria, Tuberculosis (TB), HIV/AIDS)
- Number of adult and youth participants accessing continuing education services.

Result 1.4: *Improved sustainability of healthcare and education service delivery*

Key Indicators for Result 1.4:

- Number of project border health workers employed by Thai health system with non-project resources (by end of year 3).
- Percentage of surveyed community health volunteers who know at least 60% of prevention and danger signs of each individual common communicable diseases (ARI, Diarrhea, DHF, Malaria, TB, HIV/AIDS)
- Number of DPs from Burma referred by community and/or border health workers to sub-district health promotion hospitals and other government hospitals
- Number of PLE-supported health post services transitioned to MoPH
- Number and Percentage of targeted government health facilities that have an integrated Thai and Burmese community health volunteer system
- Number of CBO health staff who received certification from Thai institutions

Result 2: *Improved cross-border delivery of food, healthcare, education and other humanitarian assistance to IDPs in Southeast Burma*

Result 2.1: *Improved coordination and convergence between humanitarian assistance organizations in Thailand and Burma for greater efficiencies in sector service delivery to the most underserved in Southeast Burma.*

Key Indicators for Result 2.1:

- Number of partner organizations contributing data to the Myanmar Information Management Unit

- Number of information sharing forums facilitated in which agencies for aid into Southeast Burma from both sides of the border participate
- Number of indicators that are standardized with those used in other areas in Burma
- Number of cross-border CBOs contributing to health information report⁵³
- Percentage of rice aid delivered and distributed on time
- Percentage of distribution trips for cash transfers that reach targeted vulnerable communities
- Percentage of villages assisted with cash transfers that can access markets in safety
- Percentage increase of students accessing basic educational services in each of the border states

Result 2.2: *Harmonized cross-border monitoring and evaluation system, data collection, research, and analysis across sectors*

Key Indicators for Result 2.2:

- Number of CBOs that participate in cross-monitoring with other organizations
- Number of CBOs working in Southeast Burma with strong monitoring systems
- Number of health, education and poverty indicators that are standardized amongst PLE's IPs
- Number of CBOs and NGOs who warehouse data about vulnerabilities into a common geographic information system (GIS) platform using standardized township boundaries
- Number of CBOs working in Southeast Burma with beneficiary feedback mechanisms

Result 2.3: *Increased technical, institutional capacity, and leadership of CBOs to manage and implement service delivery*

Key Indicators for Result 2.3:

- Percentage of consultations provided by targeted cross border CBO health workers conducted according to standard management protocols for common communicable diseases (ARI, malaria, and diarrhea only)
- Percentage of teachers who adhere to agreed quality standards
- Number of Teacher Preparatory Center (TPC)⁵⁴ graduates who are providing training in their home states using the same cross-ethnic standard teacher competencies
- Percentage of participant supervisors reporting improved management skills/performance related to academic course
- Number of CBOs who adhere to their financial management policies
- Number of CBOs and/or NGOs working in Southeast Burma that apply for and receive new non-PLE funding
- Percentage of adaptive learning interns⁵⁵ effectively utilizing their skills in CBOs working in Southeast Burma

⁵³ Number of cross-border health CBOs provides data to a joint Health Information System of cross-border organizations.

⁵⁴ TPC is a training center in Mae Sot, Tak Province, that provides a one-year residential program that trains pre-service teachers and teacher trainers (including ethnic teachers) from community-based schools both inside Burma and in DP communities in Thailand.

⁵⁵ These are students that attend PLE's five Adaptive Learning Courses which support young Burmese to become "leaders of tomorrow". The five courses are: (1) Wide Horizon – a ten-month course offered to CBOs to be able to design and manage projects (also include proposal writing, human resource management, and monitoring and evaluation); (2) Global Border Studies – a two-year online program offered in Nupo Camp in Tak Province on issues related to human rights, ethnicity, conflict, and peace; (3) English Immersion Program – a ten-month course for students from nine camps for DPs in Thailand to study in Umpiem Mai Camp, Tak province. The curriculum is similar to Wide Horizon but oriented to the refugee context. After the ten-month course, students are placed at local schools, camps and border CBOs and NGOs for one year. A small number of students are now choosing to return to Burma to complete their internships; (4) Mon National Education Committee – a two-year program offering to Mon students along the Thailand-Burma border. The curriculum focuses on school administration, language teaching skills, critical thinking, and lesson design, and includes protection issues such as psychosocial awareness and community-based education. Students study in Mon State in Burma for the first year and attend a rigorous English immersion program in the border province in Thailand in the second year; and (5) Teacher Preparatory Center Program (see Footnote No. 5 above).

Result 3: Improved humanitarian protection and policy environment for DPs from Burma

Result 3.1 *Improved policy environment in Thailand to positively affect DPs from Burma*

Key Indicators for Result 3.1:

- Number of policy and/or legislative changes implemented that are informed by PLE advocacy initiatives
- Percentage of project and migrant working group advocacy priorities driven by consultations with communities and CBO partners
- Number of targeted CBOs that systematically incorporate advocacy priorities into their work
- Number of actions taken by local authorities and private sector stakeholders that reduce obstacles to policy implementation as a result of PLE activities

Result 3.2: *Demonstrated integration of humanitarian protection in programming and implementation*

Key Indicators for Result 3.2:

- Percentage of targeted DP respondents who report that they know how to safely access justice in Thailand
- Percentage of training participants from targeted partner organizations who report increased awareness of the importance of gender sensitivity in programming
- Number of trained partner staff who can demonstrate knowledge of humanitarian protection principles
- Number of incidents/legal problems brought to the attention of the Thai authorities by DPs from Burma in targeted areas with support of PLE or partners in justice network
- Percentage of targeted DP respondents who report an ability to resolve key problems
- Number of targeted partners who demonstrate adherence to core best practice standards of care and response for survivors and at-risk women
- Number of targeted health workers participating in behaviour change communication initiatives for GBV prevention

D) Approach and Implementation

PLE is implemented by the International Rescue Committee (IRC) in partnerships with consortium members including The Border Consortium, Mae Tao Clinic, and World Education. It is governed by a Project Management Groups (PMG) that meets quarterly and is comprised of senior management representatives of each consortium partner. The PMG is responsible for reviewing PLE strategies and directions, vetting all project grants, reviewing progress against project work plans and performance management plans, and other key project governance and management functions.

In addition, the four consortium members work with 31 CBOs and Thai government offices to promote government and community ownership of programming and sustainable service delivery systems. In Year One, PLE expanded into new geographic and service areas of SHIELD Project and supported eight new partners with demonstrated experience in relevant services, identified through a competitive Request for Applications. In Year Two, PLE provided existing sub-grantees with an opportunity to access supplementary funding to try new approaches – with a particular emphasis on pilot initiatives that promote expanded social service provision, convergence, and peace building in Southeast Burma – through the Innovation Fund, resulting in nine awards to existing partners. At present (mid of Year Three; December 2013 - November 2014), PLE works with a total of 31 sub-grantees (see Annex 1) and does not anticipate offering a new funding opportunity but will provide funds for continuous interventions as well as a limited number of targeted new sub-grants to existing sub-grantees to support PLE objectives in both Thailand and Southeast Burma. It is also possible that PLE's pursuit of sustainability strategies for program components currently supported by PLE may result in a small number of other new sub-grants.

Rapid changes inside Burma since the inception of the PLE have led to substantial changes in PLE's operating context, which has resulted in two new key strategic principles: convergence and transition. On **convergence**, PLE was adapted to the evolving context and new opportunities to promote linkages and convergence between PLE and USAID/Burma's existing strategies and program activities; between PLE's ethnic social service providers (border-based) and the Government of Myanmar and CBO network inside Burma. On **sustainability** and **transition**, the strategy aimed to build leadership, institutional and technical capacities through mechanisms that will sustain beyond the life of PLE, with technical capacities initially housed within consortium members that are international non-government organizations transitioned to local partners, and CBO services integrated into Thai and Burmese governments.

E) Available Documents and Data

The Contractor will have access to supporting documents as listed in the Annex that will be useful for the Contractor for developing an evaluation proposal. In addition, the Contractor should search and review other publicly available relevant documents such as:

- Key USAID policies and strategies, e.g. USAID Gender Equality and Female Empowerment Policy (2012);
- Assessing Potential Changes in the Migration Patterns of Myanmar Migrants and their Impact on Thailand (IOM & ARCM, 2013);
- State and Region Governments in Myanmar (Myanmar Development Resource Institute and The Asia Foundation, 2013);
- Sustaining Myanmar's Transition: Ten Critical Challenges (Asia Society, 2013);
- The Contested Corners of Asia: Subnational Conflict and International Development Assistance (The Asia Foundation, 2013);
- Supporting Durable Solutions in South East Myanmar: A framework for UNHCR engagement (UNHCR, 2013);
- Desktop Review of Needs and Gaps in Conflict-Affected Parts of Myanmar (Peace Donor Support Group, 2013);
- Evaluation and Assessment Report on Border Health in Thailand (WHO, 2010);
- Diagnosis: Critical Health and Human Rights in Eastern Burma (Burma Medical Association et al, 2010); and
- Other publicly available documents and reports on health, education, protection, and rights of migrants and/or refugees produced by several government and non-government organizations in Thailand, Burma, and beyond.

Upon the contract award, the Evaluation Team will have access to the following documents and data that are currently available in order to understand the context and to carry out the evaluation:

1. The PLE Activity Approval Document,
2. The PLE Award Agreement and its modification,
3. PLE Annual Work Plans from Year One to Year Three,
4. Quarterly Reports to date,
5. Performance Management (monitoring) Plan and reported results,
6. Any fact sheets, technical and policy briefs, strategy documents, and public documents produced by PLE,
7. Internal PLE Mid-term Review Report,
8. USAID Evaluation Report Template and Guidance, and
9. USAID's How-To Note on Preparing Evaluation Draft Reports.

In addition to these documents, the Evaluation Team will have access to additional documents or data that might be available by the time of this evaluation, if any, as per the schedule indicated in Section V. B) below.

2) EVALUATION RATIONALE

A) Evaluation Purpose, Audience, and Use

The overall purpose of this evaluation is to provide USAID/RDMA and USAID/Burma with strategic information for future programmatic decision making. PLE is currently in the third year of its four-year implementation. Since the situation in Burma has been changing quite rapidly, whereas the Thai government's position towards DPs from Burma has also been changed, it is essential for USAID to obtain up-to-date insights that will guide strategic decision-making on future programming. This evaluation will be focused on the relevance of the current PLE design according to the changing sociopolitical contexts and to what extent the ultimate goal of PLE could be achieved considering the circumstances. Simultaneously, it will also look into future trends for humanitarian and development assistance needs. Specific evaluation questions are provided in the next section below.

Considering the timeline, evaluation findings and recommendations might not be timely for modification of PLE implementation since PLE is already in the middle of its third year out of the four year period. It is, however, anticipated that this evaluation will provide insights and important feedback to USAID, partners, and stakeholders and will assist them to prepare for a smooth wrap-up of PLE during its final implementation year. The findings and recommendations will also help guide USAID in deciding on the types of assistance that will be required in the future, the priority sectors for assistance, priority beneficiaries for the type of assistance recommended, and geographic focus that should be considered for future assistance. In addition, the evaluation results will be shared with broader audiences for their future use as deemed appropriate.

B) Evaluation Questions

The Evaluation Team shall design and implement this evaluation to answer the following key and sub-questions. The importance and level of effort for each key evaluation question are as reflected in the order of the key questions as well as the number of sub-questions listed below.

I. *Is the convergence strategy relevant, considering the changing situation in Burma?*

PLE has been implementing in communities and DP or IDP settlements across regions in Southeast Burma, which host a range of ethnic population groups with a diversity of social and political cultures and varying humanitarian and development assistance needs. PLE has reported adapting their strategy and activities to the changing situation and responding to new opportunities to promote linkages and convergence between PLE and USAID/Burma's strategies and activities, as well as between PLE's ethnic border-based service providers and the government and CBO networks in Burma. However, tangible results are yet to be seen as the convergence strategy is still relatively young. In answering the above evaluation question, the evaluators should reference the following:

- I.1 The extent that the convergence interventions can realistically be linked and/or transferred to available systems and/or interventions in Burma. Particular attention should be paid to the convergence of the migrant health workforce trained in Thailand with the health service delivery system, education reform, and social protection approaches (i.e. GBV prevention and response programming and multi-sectoral female leadership) in Burma.
- I.2 Key factors that support or obstruct the convergence as mentioned in I.1 above, e.g. whether the supporting factors are stable or in need of strengthening, and how to overcome any obstacles to convergence.
- I.3 Additional support that might be needed to ensure the success of the convergence, if any, and how to gain such support.
- I.4 The extent to which the PLE's convergence strategy and interventions can serve as a "pull factor" for return and reintegration of the DPs and IDPs as well as those who are not affected by the conflict. In particular, focus should be on any comparative advantages of the

convergence strategy as comparing to the conventional push and pull factors for return and reintegration, and to what extent they can help inform and facilitate the development of future plans for return and reintegration.

- I.5 Perceptions of beneficiaries in Burma, particularly those in the conflict zones in the remote areas towards the convergence. Are there any trust issues that affect the willingness of beneficiaries to seek out and/or receive services from the border-based service providers who become mainstreamed central government service providers?
- I.6 Whether and to what extent the convergence strategy affects male and female beneficiaries differently.
- I.7 Geographic areas and/or targeted groups (PLE's local partners and beneficiaries) that should be prioritized in order to ensure convergence in Burma?
- I.8 Geographic areas and targeted groups in Thailand (PLE's local partners and beneficiaries) that should be prioritized if they remain in Thailand after PLE's completion in 2015 and the rationale for such prioritization.

2. Does the need to provide humanitarian assistance to the DPs and IDPs still remain?

PLE was designed with an assumption that the conflict in Southeast Burma would continue to displace populations in the Southeast Burma; depicting the needs for providing humanitarian assistance to the DPs and IDPs inside Burma and those who cross the border into Thailand. However, a series of political, economic, and administrative reforms have been launched in Burma in the recent years, whereas ceasefire agreements have been concluded with most ethnic armed groups across the country. These suggest for a need to assess the changing situation as well as the assumption on the need for USAID to provide humanitarian assistance to victims of conflict. In particular, the Evaluation Team shall determine the following:

- 2.1 Have the assumptions behind this objective (i.e. a large number of IDPs along the border who were displaced and lost the livelihood and have no or limited access to basic social services such as health and education due to political conflicts) changed?
- 2.2 If this humanitarian assistance is still in need, which geographic areas and/or targeted beneficiary groups covered by the PLE should be prioritized?
- 2.3 Are the PLE's key approaches (local capacity development and convergence) and key interventions (provision of basic requirements such as foods and cash, primary health services, primary education, and social protection) still relevant to effectively respond to the humanitarian needs for IDPs in Burma considering the changing situation and environment? If not, what should be modified and how?
- 2.4 Given the changing environment, to what degree are PLE activities serving as a pull factor to Thailand for those who are not victims of conflict?

3. To what extent have the capacity of PLE's sub-grantees been strengthened to support PLE's strategy for sustainability?

PLE has been implementing several interventions that are geared towards sustainability, such as capacity building for health workers and volunteers and advocate for integrating them into the public health system, capacity building for local CBOs and local government counterparts, etc., and many of which were built upon the previous six-year SHIELD Project that was also funded by USAID/RDMA. In particular, this evaluation will assess:

- 3.1 Level of capacity of border-based CBOs and NGOs and local governments who engage in health, education, and social protection services (i.e. GBV prevention and response services and female leadership) on both sides of the Thai-Burmese border as measured by PLE's organizational capacity assessment tool and other metrics, and whether their current levels of capacity are adequate for maintaining the services to the targeted communities after the PLE's life;

- 3.2 Potential modifications to the capacity strengthening strategy and the interventions in the event that a similar program is developed in the future; and
- 3.3 Other recommended models or approaches and strengths and limitations in applying them in Burma and Thailand.

3) EVALUATION DESIGN AND METHODOLOGY

A) Evaluation Design

This evaluation will be an external, performance evaluation, as defined in the USAID Evaluation Policy (see Annex 2). To the most possible extent, it must be participatory with involvement of PLE's IPs and other key stakeholders throughout the processes. The Evaluation Team is expected to travel to selected sites in both Thailand and Burma to collect essential data to answer all key and sub-questions listed in the previous section.

While the evaluation is to review past performance, USAID also requires forward-looking recommendations on the trends for future needs for humanitarian and development assistance and promising strategies beyond the life of PLE. The Evaluation Team will need to examine: the PLE implementation to date; the changing situation in Burma and Thailand; to what extent and how the changing situation negatively or positively affects the key expected results of PLE; and where, to whom, and what types of services are vital. The recommendations may be built upon successes and lessons learned from PLE and/or other similar programs or projects implemented by other organizations funded by USAID and/or other donors, as well as derived from the Evaluation Team's own evidence-based innovative or other solutions.

B) Data Collection and Analysis Methods

USAID expects that internationally-recognized social-science research methods and tools will be employed to carry out this evaluation. The methods and tools will increase the validity and reliability of the data obtained as well as will help reduce the Evaluation Team's judgments on evaluation findings and ensure sound recommendations. The Evaluation Team must gather credible evidence and highlight the association between findings, conclusion, and recommendations. In circumstances where the Evaluation Team's judgments are necessary, the Evaluation Team must ensure that the basis for the judgment is clearly articulated and presented in the evaluation work plan and report.

Given the nature of the evaluation questions set forth in this SOW, as well as the complexity of the interventions, it is anticipated that a combination of mixed methods will be applied for this evaluation. It is anticipated that samples of targeted sites and population groups will be required for each evaluation question. In addition to multiple levels and types of respondents/informants, a combination of sound quantitative and qualitative research methods (e.g. a mini or on-line survey, case studies, and rapid appraisal with appropriate statistical and qualitative data analysis methods for each type of data collected) shall also be developed for each evaluation question as deemed appropriate. However, different evaluation questions may be combined in one tool for specific targeted groups as deemed appropriate. Attempts shall be made to collect data from different sources by different methods for each evaluation question and findings be triangulated to draw valid and reliable conclusions. Data shall be disaggregated by sex where possible and appropriate.

In addition to PLE's partners and beneficiaries, the Evaluation Team shall collect data from other relevant sources to obtain comprehensive information to support their findings, conclusions, and recommendations. The other relevant sources may include but not be limited to other government and non-government organizations working on similar interventions in the same geographic areas, academia specialized on the issues of concern, and relevant literature.

The Evaluation Team must include proposed sample sizes for different data collection in the evaluation work plan for review and approval by USAID (see more details below).

Table 1. A Matrix of Evaluation Questions and Plans for Data Collection and Analysis

Evaluation Questions	Types of Questions	Respondents/ Informants Sampling or Selection Criteria	Data Collection Method(s)	Data Analysis Method(s)
1. <i>Is the convergence strategy relevant considering the changing situation in Burma?</i>	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.1 The extent that the convergence interventions can realistically be linked and/or transferred to available systems and/or interventions in Burma.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.2 Key factors that support or obstruct the convergence as mentioned in 1.1.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.3 Additional support that might be needed to ensure the success of the convergence, and how to gain such support.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.4 The extent to which the PLE's convergence strategy and interventions can serve as a "pull factor" for return and reintegration.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.5 Perceptions of beneficiaries in Burma towards the convergence.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.6 Whether and to what extent the convergence strategy affects male and female beneficiaries differently.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]

Evaluation Questions	Types of Questions	Respondents/ Informants Sampling or Selection Criteria	Data Collection Method(s)	Data Analysis Method(s)
1.7 Geographic areas and/or targeted groups that should be prioritized to ensure convergence in Burma?	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
1.8 Geographic areas and targeted groups in Thailand that should be prioritized after PLE's completion and the rationale.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
2. Does the need to <u>provide humanitarian assistance to the DPs and IDPs still remain?</u>	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
2.1 Have the assumptions behind this objective changed?	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
2.2 If the humanitarian assistance is still in need, which geographic areas and/or targeted beneficiary groups should be prioritized?	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
2.3 Are the PLE's key approaches and interventions still relevant to effectively respond to the humanitarian needs for IDPs in Burma? If not, what should be modified and how?	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
2.4 To what degree are PLE activities serving as a pull factor to Thailand for those who are not victims of conflict?	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
3. To what extent have the <u>capacity of PLE's sub-grantees been strengthened</u>	Normative	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]

Evaluation Questions	Types of Questions	Respondents/ Informants Sampling or Selection Criteria	Data Collection Method(s)	Data Analysis Method(s)
<i>to support PLE's strategy for sustainability?</i>				by USAID]
3.1 Level of capacity of PLE's partners who engage in health, education, and social protection services on both sides of the Thai-Burmese border and their adequacy for maintaining the services.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
3.2 Potential modifications to the capacity strengthening strategy and interventions	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]
3.3 Other recommended models or approaches and strengths and limitations.	Descriptive	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]	[To be proposed by the Evaluation Team and approved by USAID]

C) Methodological Strengths and Limitations

There are a few key limitations to this evaluation design. Due to the limited resources and accessibility to some implementation sites, it is foreseeable that the Evaluation Team will not be able to visit all of PLE's implementation sites. In addition, the field data collection may fall in the middle of the monsoon season that may pose more limitations to the access to some remote border sites. Therefore, findings may be limited and unique to the selected sites. In addition, all the diverse cultures present at different sites among different ethnic groups may not be represented according to the sites selected. It is also difficult to identify Evaluation Team members who have both the required technical expertise and communication skills in local languages, therefore, the use of translators and/or interpreters will likely be necessary and some essential data may be lost. To address these limitations, the Evaluation Team is required to apply different mixed methods and triangulate data obtained to limit potential bias. The Evaluation Team must also recruit qualified translators or interpreters and provide to them training and/or guidance specific to this evaluation prior to deployments.

4) TEAM COMPOSITION AND ROLES AND RESPONSIBILITIES OF TEAM MEMBERS

A) Team Composition and Qualifications

It is anticipated that the Evaluation Team will consist of the following team members.

- I. **Evaluation Team Lead:** This is an individual external to USAID and the PLE's IPs. The person must have at least seven years of strong and substantial experience in performance evaluation. The

Team Lead must have experience evaluating similar projects, as well as leading an evaluation team comprised of members from diverse background and experience. Experience leading an external evaluation for USAID activities is highly preferred.

2. **Local Capacity Development Specialist:** This is also an individual external to USAID and the PLE's IPs. S/he must have at least seven years of substantive relevant experience on capacity development of local CBOs or NGOs and local governments. Knowledge and experience in the field of health, education, and/or protection services (GBV and female leadership) in conflict or semi-conflict settings are highly preferred.

The proposed individuals above (number 1 and 2) must:

- a. have exceptional capabilities to conduct quantitative and qualitative research methods, analyze and triangulate data, and write synthesized technical reports,
 - b. one or both of them has experience working in Burma and up-to-date knowledge of Burma's reform environment,
 - c. have superior level of English language proficiency (level IV) with excellent speaking and writing skills,
 - d. have excellent presentation skills,
 - e. have ability to work collaboratively as a team,
 - f. have proficiency in Burmese, Karen/Kayin, and/or Thai language, if possible, and
 - g. be committed to provide a written disclosure of any conflict of interest to include, but not limited to, personal or professional conflicts of interest.
3. **Cross-border Health Program Development Specialist:** This position will be filled by a USAID staff, who has not been directly involved in PLE's management and implementation, with extensive experience on cross-border health program/project development, including health system strengthening.
 4. **Gender Equality and Female Empowerment Specialist:** This position will be filled by a USAID staff, who has not been directly involved in PLE's management and implementation, with extensive experience on gender equality and female empowerment as well as monitoring and evaluation.

NOTES:

1. The two staff members from USAID (number 3 and 4 above) will serve as members of the evaluation team. They will work under the leadership of the Evaluation Team Lead, not vice versa. Due to other commitments, their direct participation to the evaluation may be limited during certain stage(s) of the evaluation. However, they are committed to work with the contractor as a team to implement the evaluation from start to finish including the evaluation and tools design, field data collection, and providing inputs to the evaluation report.
2. English will be an official language for correspondence between the Evaluation Team, USAID, and most of the PLE's IPs. The evaluation report must be in English. However, it is anticipated that Burmese, Karen/Kayin, and Thai languages will also be used extensively, particularly during field data collection and communications with selected CBOs. Karenni/Kayah language may also be used, especially when collecting data from beneficiaries in remote areas. In the event that the Team members do not speak or read the local languages, translators/interpreters will be required. The Translators/Interpreters must have at least three years of experience providing translation/interpretation services from English to one or more of the local languages required and vice versa. Experience translating/interpreting for health, education, and social protection sectors is highly preferred. If the same Translators/Interpreters will perform the services in both Thailand and Burma, they must have a valid official travel document that allows them to make business trips to/from both countries.

3. As part of the Agency's strategy to strengthen staff capacity, USAID encourages participation of USAID staff on the Evaluation Team, in full or in parts, when his/her participation is considered beneficial for skill development or for ensuring the use of evaluation results, and does not present a conflict of interest or a threat to validity of the evaluation. In order to fulfill the "external" evaluation requirements as per the USAID's Evaluation Policy, USAID staff participating to the evaluation must not have been involved in the management of PLE. It is anticipated that two USAID/Burma staff will accompany the Evaluation Team to the field visits to learn not only about the border situation and PLE interventions but also the evaluation process and technique. However, they will not be part of the Evaluation Team but rather be observers. In addition, the Evaluation Manager at RDMA may accompany the Evaluation Team to selected sites/tasks to observe the PLE implementation environment and the works of the Evaluation Team but s/he will not be part of the team members.

B) Roles and Responsibilities of Team Members

1. **Evaluation Team Lead:** will be responsible for coordinating inputs from other Team Members to produce deliverables. This mainly includes, but is not limited to, consolidating inputs for evaluation framework and work plan development, including detailed methodologies and tools, coordinating field data collection schedules and plans, consolidating and submitting the draft and final evaluation reports.
2. **Other Team Members:** will be responsible for contributing to all tasks/deliverables relevant to their areas of expertise.
3. **Translators/Interpreters:** will be responsible for providing translation and/or interpretation services to the Evaluation Team Members as required.

5) EVALUATION MANAGEMENT

A) Roles and Responsibilities of Involved Parties

I. Contractor and Evaluation Team

The Contractor will be responsible for:

- a. Recruiting and deploying qualified personnel as required for this evaluation;
- b. Managing the Evaluation Team including providing oversight and on-the-job training (for the Translators/Interpreters) and/or guidance to the team; and,
- c. Providing the entire range of administrative support to the Evaluation Team that also includes proper handling and maintenance of raw data and logistical arrangements for duty travel (e.g. international and domestic transportations, lodging, communications, etc.). The Contractor will be responsible for administrative support for all team members other than USAID staff but must coordinate with the USAID's Evaluation Manager on the logistics to ensure smooth operation of the whole team with involvement from USAID staff.

In addition to the roles and responsibilities of each Team Member listed above, the Evaluation Team is responsible for:

1. Producing timely and quality deliverables (see relevant section below) according to USAID standard quality for evaluation as indicated in the Agency's policy (see Annex 2); and
2. Following sound procedures and being prudent in the use of resources provided by USAID.

2. USAID/RDMA

USAID/RDMA will be responsible for:

- a. Managing this evaluation contract and ensuring constant availability of RDMA's Point of Contact throughout the contract period;
- b. Providing directions and guidance on relevant USAID policies, as well as guidance to the Evaluation Team throughout the evaluation process;
- c. Providing relevant project-related documents and data that is required for this evaluation;
- d. Liaising between the Evaluation Team, USAID/Burma, and IRC (PLE's Chief of Party and/or his/her delegate) on necessary arrangements;
- e. Assisting the Evaluation Team to obtain relevant documents and permissions (e.g. letters of invitation or support for visa applications to Thailand, and the U.S. Government's country clearances), as well as arranging and coordinating meetings with relevant Mission staff, as needed;
- f. Monitoring progress and quality of the evaluation. The Evaluation Manager at RDMA may accompany the Evaluation Team to selected sites during the field data collection to observe the PLE implementation environment and the field work of the Evaluation Team but s/he will not be part of the Evaluation Team;
- g. Reviewing and providing constructive feedback to the Evaluation Team on a timely manner on the evaluation deliverables;
- h. Approving the evaluation deliverables;
- i. Coordinating and organizing a presentation on evaluation's preliminary findings and recommendations;
- j. Submitting the final evaluation report to USAID's Development Experience Clearinghouse (DEC) according to the Evaluation Policy, and distributing the report to relevant partners/stakeholders as deemed appropriate; and
- k. Provide logistic support (i.e., travel and lodging) to USAID/RDMA staff who participate in this evaluation.

3. USAID/Burma

USAID/Burma will be responsible for:

- a. Providing available documents and/or data required for this evaluation;
- b. Assisting the Evaluation Team to obtain visas and country clearance from the Burmese government for field visits in the country;
- c. Arranging meetings with relevant staff from USAID/Burma and other U.S. government agencies as needed;
- d. Providing a staff member to accompany the Evaluation Team during the field visits outside of Yangon/Rangoon as required;
- e. Reviewing and providing timely, constructive feedback on the evaluation deliverables to RDMA to consolidate the feedback to the Evaluation Team;
- f. Distributing the final report to relevant partners/stakeholders; and
- g. Provide logistic support (i.e., travel and lodging) to USAID/Burma and RDMA staff who participate in this evaluation.

4. IRC

IRC will be responsible for:

- a. Providing available documents and/or data required for this evaluation;
- b. Assisting the Evaluation Team to schedule field visits, as needed, e.g. meetings with relevant partners and other stakeholders, providing advance notice to the targeted beneficiaries on the field visits by the Evaluation Team;
- c. Assisting the Evaluation Team to access sites that are hard to reach, as necessary. This will not only be limited to assisting the Team to obtain the camp passes to access selected temporary shelters along the border where DPs from Burma are concentrated, but also to selected communities of DPs and IDPs;
- d. Liaising between RDMA, the Evaluation Team, and PLE's sub-partners as needed;

- e. Recommending secure hotels and methods of field travel (e.g. vehicle rental companies and other means of transportation), as required; and
- f. Reviewing and providing constructive feedback on the drafted and revised evaluation report as required.

B) Tasks and Scheduling

The overall period of performance of this evaluation is estimated for approximately four months between July and November 2014, inclusive of elapsed times between different steps of the evaluation process.

To carry out this evaluation, the Evaluation Team will undertake the following four key steps. The estimated timeline for the tasks and deliverables are as summarized in Table 2 below.

1. Desk Review and Evaluation Work Plan Development (Weeks 1 – 3; tentatively from July 23 – August 8, 2014)

During the first stage, the Evaluation Team will review relevant documents and materials. This will not only be limited to those provided by USAID but also other relevant public and gray literature, such as evaluation reports of similar projects implemented by other organizations, relevant articles from peer-review journals and/or the media, and academic theses. As a result of the desk review, the Evaluation Team is to develop the first deliverable, the evaluation work plan, that includes details on methodology and rationale, data collection tools, and other information as indicated in the Section VI. A) below. It is the responsibility of the Evaluation Team to develop appropriate evaluation methodologies and tools that ensure an objective, transparent, and impartial examination of the data and determination of findings. Should the Team require additional information or clarifications regarding PLE design and implementation or the evaluation SOW in order to develop detailed evaluation work plan, a list of queries or issues that need clarification should be submitted to RDMA prior to submission of the draft work plan. RDMA will coordinate responses to the list of queries and provide further inputs/comments to the Evaluation Team to incorporate into the drafted work plan. Once submitted, RDMA will distribute the draft work plan and coordinate comments from USAID/Burma and the IPs and provide feedback to the Evaluation Team, who will revise and finalize the work plan as necessary. The work plan must be approved by the Evaluation Manager at RDMA before the Evaluation Team conducts the next stage of the evaluation.

2. Field Data Collection (Weeks 4 – 7; tentatively from August 13 – September 5, 2014)

Since many of the PLE implementation sites are located in hard-to-reach areas along the Thai-Burmese border, and most of the data will be collected through translators/interpreters, it is anticipated that the Team will need to plan for time in the field for transportation and translators/interpreters. For this step, the Evaluation Team will visit the PLE sites to meet with key partners and other stakeholders and selected targeted beneficiaries and collect data and/or additional documents that are required to answer each of the evaluation questions; in accordance with the approved work plan. Additional data collection methods may be used as the Team sees fit but the methods approved in the work plan must be accomplished at the minimum.

3. Data Analysis and Presentation of Preliminary Findings and Recommendations (Weeks 4 – 11; tentatively August 14 - September 30, 2014)

It is anticipated that some of the data, especially the qualitative data, will be reviewed and analyzed in the field, due to the reiterative nature of the qualitative research method, to ensure that sufficient data are obtained before the Team leaves the fields. The Evaluation Team shall analyze the primary and/or secondary quantitative and/or qualitative data obtained from both stages 1 (Desk Review) and 2 (Field Data Collection) using appropriate data analysis tools and methods as agreed to in the work plan. The Team must prepare and make a presentation of key findings and recommendations to the

extended audience at USAID/Burma with the telecommunication link to USAID/RDMA. The audience could potentially include relevant and interested staff at the two Missions, as well as representatives from the IPs. The Evaluation Manager at RDMA will provide the presentation guidance and template to the Team. The Team must share the draft presentation with the Evaluation Manager at RDMA at least two days prior to the presentation day to ensure that it follows the USAID policy and guidance.

4. Reporting (Weeks 9 - 17, tentatively September 15 – November 14, 2014)

The Evaluation Team shall produce the drafted evaluation report and submit to the Evaluation Manager at RDMA within the stated timeline. RDMA will coordinate comments from relevant parties and provide feedback to the Team within the agreed upon timeline. The Team will be responsible for incorporating comments in the revised report as the Team sees fit and submit the revised report to RDMA for further review and feedback and/or approval as appropriate. Where there is strong disagreement in views between the Evaluation Team, RDMA, and/or the IPs, these can be noted in a Statement of Differences Appendix of the report. The Evaluation Team shall consider all comments in preparing the final report that must be submitted to RDMA no later than the contract end date.

Table 2. Estimated Timeline for the Key Tasks and Deliverables

Tasks & Deliverables	Weeks	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Step 1. Desk Review and Work Plan Development																		
1.1 Receive relevant materials from USAID		X																
1.2 Conduct desk review		X	X															
1.3 Submit evaluation work plan and evaluation tools (by Week 2)			X															
1.4 Receive consolidated feedback from USAID and finalize the workplan and tools				X														
Step 2. Conduct Field Data Collection in Thailand and Burma					X	X	X	X										
Step 3. Data Analysis and Presentation of Findings and Recommendations																		
3.1 Conduct data analysis					X	X	X	X	X	X	X							
3.2 Present preliminary findings and recommendations at RDMA (by Week 11)												X						
Step 4. Reporting																		
4.1 Draft and submit drafted report (by Week 12)											X	X	X					
4.2 Receive feedback from USAID (within five work days)														X				

Tasks & Deliverables	Weeks	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
4.3 Revise the drafted report and resubmit to USAID (within five work days)															X			
4.4 Receive feedback from USAID (within five work days)																X		
4.5 Revise and submit final draft report to USAID (within five work days)																	X	
4.6 Receive approval from USAID and submit the final report (by Week 17)*																		X

* Based on the report quality and possibility of disagreement on findings and recommendations between the Evaluation Team, USAID and the PLE's IPs, more than one round of report revision may be required. In such case, the same principle for the review and revision timelines shall be applied, i.e. allow five work days for feedback and report revision. However, the final report must be submitted prior to the contract end date.

6) EVALUATION PRODUCTS

A) Deliverables

The Evaluation Team must provide the following deliverables:

1. **Final Evaluation Work Plan** (15 pages max.) by the end of the Week 3 of the contract and prior to the Field Data Collection. The work plan must include:
 - a. Summary of the desk review (including remaining information gaps identified, if any) and how the Team plans to use results from the desk review for this evaluation;
 - b. Evaluation methods to collect and analyze required data for each evaluation question. The Team must submit a completed matrix as shown in the Table I above. The table shall be accompanied by a narrative detailing how they plan to collect, clean, enter, manage, and analyze different types of data collected and the rationale for the methods chosen;
 - c. Drafted itinerary for the field data collection with sufficient details to allow USAID and the IPs to assist in arranging for the Team's visits and/or provide feedback to the Team for any essential adjustments. The Team shall make an attempt to consider appropriate order of the itinerary for two major reasons. One is to ensure the reiterative process for data collection as the Team shall review the data obtained and consider if further determination and/or adjustments of the tools are needed during the field visits to ensure comprehensiveness and completeness of the data. The other is to ensure the efficient use of time and resources. It is highly recommended that a matrix or a gantt chart be used to specify the proposed itinerary (i.e. specify proposed sites, respondents, and data collection methods on each day as well as the proposed timeslots of the day (i.e. morning or afternoon sessions);
 - d. Roles and responsibilities for each Evaluation Team member; and
 - e. All data collection tools required to collect data to answer all the evaluation questions. This can be in the Annex and is not counted against the 15 pages limit.
2. **Debriefing with USAID/Burma** following the field data collection in Burma and prior to return to Bangkok, unless otherwise directed by the COR.

3. **Presentation of the Preliminary Results by Week 11** of the contract. The presentation must be clear, self-explanatory, and straightforward and must not include very long text. The Evaluation Team shall submit the draft presentation using the template provided to the Evaluation Manager at RDMA at least two days prior to the presentation date.
4. **Drafted Evaluation Report by Week 12** of the contract. The Team must use USAID reporting template that includes:
 - a. Cover & title pages;
 - b. Table of contents;
 - c. List of acronyms,
 - d. Executive summary (no more than three pages),
 - e. Main contents (no more than 25 pages) including evaluation purpose and questions, project background, evaluation methods and limitations, findings, conclusions, and recommendations;
 - f. References;
 - g. Other documents reviewed (in addition to the references);
 - h. Annexes. At minimum, the Annexes must include the evaluation SOW, approved evaluation work plan, all actual data collection tools, a list of respondents/informants, disclosure of conflicts of interest by the Evaluation Team Members. The Team may include additional information and/or materials as Annexes as appropriate; and
 - i. Back cover page.
5. **Revised Drafted Evaluation Report within five business days** after receiving feedback from RDMA.
6. **Final Written Report within five business days** after receiving final feedback from RDMA. In addition to electronic format, the Contractor shall submit five hard copies of the final report to the Evaluation Manager at RDMA by the contract end date.

B) Reporting and Submission Guidelines

All deliverables that are in written format must be in plain⁵⁶, grammatically correct English language; be submitted in appropriate electronic format (i.e. Microsoft Word, Excel, Power Point Presentation, and PDF); and meet all the requirements.

The evaluation report must meet the quality standards as laid out in the Appendix I of the USAID Evaluation Policy and the How-To Note: Preparing Evaluation Draft Reports. RDMA will provide the report template to the Evaluation Team upon the contract signing. Use of the qualitative data as evidence must be specific and clear (e.g. how many informants out of how many interviewed reported finding “A,” instead of “many” or “some” of the informants said so, although it is not meant to be used against representativeness). Data shall be disaggregated by sex as appropriate to the most possible extent. Each of the recommendations needs to be supported by a specific conclusion that is drawn upon a specific set of findings. They must be action-oriented and practical, and be accompanied by recommended responsible parties.

⁵⁶ Plain language (also called Plain English) is communication that your audience can understand the first time they read or hear it. There are many writing techniques that can help you achieve this goal. Among the most common are: logical organization with the reader in mind; active voice; short sentences; no jargons; easy-to-read design features. No one technique defines plain language. Rather, plain language is defined by results — it is easy to read, understand, and use. See more details at <http://www.plainlanguage.gov/>

Per the USAID ADS 203.3.1.10 requirements, the Evaluation Team must submit raw data and records (e.g. interview transcripts, survey responses, etc.) to the Evaluation Manager at RDMA on a CD ROM, separately from the report. The data and records must be in simple electronic format such as Microsoft Word and Excel Spreadsheet, and organized and fully documented for use by those who are not involved in this evaluation so that it can be used in the future as needed. After the Evaluation Team has submitted the raw data and other records, and has received confirmation of receipt from RDMA, the Team or Contractor must permanently destroy the raw materials. Use of any data or information obtained through this Contract, in full or in part, by the Contractor or the external evaluators, for purposes other than to develop the Evaluation Report for USAID, is strictly prohibited.

ANNEX II: EVALUATION TEAM MEMBERS

Mr. DANIEL LINDGREN – Evaluation Team Leader

Daniel Lindgren has over 18 years experience in consulting, project management, and research. He is a true International consultant having lived, worked, and studied on four continents including Europe, US, Australia and Asia. During his career he has held a number of managerial positions working with economic consulting, monitoring & evaluation, political polling, public opinion and social research.

Daniel is the founder of Rapid Asia Co., Ltd., a social development consultancy specializing on monitoring and evaluation solutions. Since beginning of 2010, Rapid Asia has carried out multi-country and large scale national studies across mostly developing nations in Asia, Africa, Latin and Central America, and Eastern Europe. Work has been carried out for a number of high profile UN and other development agencies including UNICEF, ILO, UNDP, WHO, World Animal Protection, Plan International, AED, FHI360, UNODC, ITC, FREELAND Foundation and MTV EXIT Foundation to name a few. Between 2002 and 2009, Daniel was Regional Director for TNS Research International where he worked on a number of regional key accounts as well as being the Head of the Polling & Social Sector in Asia.

Daniel is an occasional speaker and has written several feature articles for various publications. He is also joint author of “The New Investor’s Handbook for Indonesia” (2004), “Public Opinion Polling in a Globalised World” (2007), “From Customer Retention to a Holistic Stakeholder Management System” (2008). He is currently an active member of several regional networks in Bangkok.

Dr. AMORNSAK KITTHANANAN – Local Capacity Development Specialist

Dr. Amornsak Kitthananan is a consultant/analyst, trainer/facilitator and performance coach based in Bangkok, Thailand. He has over 15 years of extensive professional experience in organizational development, policy research, policy formulation and advocacy, program/project design, management, monitoring and evaluation. His professional specializations include governance, public sector reform, institutional development, civil society and community empowerment, capacity building, and social policy. He recently worked with USAID on a governance program that included capacity building initiatives focusing on 15 local organizations in Thailand (women, youth, media, and advocacy groups). His most recent evaluation assignment was a program evaluation for Rockefeller Foundation’s Southeast Asia Regional Program covering areas of cross-border issues (trade, health, tourism, etc.), creativity and cultures, upland community and food security, and regional collaboration. The aim of the evaluation was to review and synthesize lessons learned from the 432 grants over 7 years of the Portfolio with a total amount of USD 47 million.

He worked for USAID Regional Development Mission for Asia (USAID/RDMA), the United Nations Economic and Social Commission for Asia and the Pacific (UN-ESCAP), Asia-Pacific Regional Centre of the United Nations Development Programme (UNDP), National Institute of Development Administration, School of Public Policy of the University of Singapore, Management Research Centre of the University of Bristol, and Institute of Future Studies for Development. He served clients in various government agencies, business organizations, and not-for-profit organisations at the local, national and international level such as the UN-ESCAP, United Nations Industrial Development Organisation (UNIDO), UNDP, Rockefeller Foundation, Oxfam GB, Professional Associations Research Network of UK, Thailand’s National Security Council, Thailand’s National Decentralization Commission, Secretariat of the Cabinet, National Economic and Social Advisory Council of Thailand and National Research Council of Thailand. Amornsak completed 38 research and consultancy assignments, published 18 book chapters and articles, and spoke at numerous seminars, trainings, and lectures. He received Doctorate in Policy Studies from the University of Bristol.

Mr. DULYAPAK PREECHARUSH – Burma Specialist

Dulyapak Preecharush has specializations on Burma's politics, security, and development, particularly in the current political reform process. He holds a Master of Arts in Southeast Asian Studies (International Program) from Chulalongkorn University, with financial support from Weaving the Mekong into Southeast Asia (WMSEA) Fellowship (funded by the Rockefeller Foundation). After graduation, Dulyapak began working as a full-time lecturer in Southeast Asian Studies at the Faculty of Liberal Arts, Thammasat University. His teaching courses are mainly focused on contemporary political and social changes in Burma and other Southeast Asian countries, especially Thailand, Lao PDR, and Cambodia. Each semester, he often takes undergraduate students to the Thai-Burma border to deliver humanitarian and financial assistance in some displaced persons camps and in marginalized and impoverished communities.

Over the past five years, Dulyapak has published several works and participated in numerous academic conferences (including inviting oral presentations and panel discussions). Most of his publications and presentations are concerned with Burma political issues. In 2009, Dulyapak published Naypyidaw: The New Capital of Burma (Bangkok: White Lotus). After that, he has continuously published a series of books and journal articles on related themes. Some of the prominent works include: 'Myanmar: the Review of Political Strategies', 'An Introduction to Myanmar - Thailand Boundary Disputes', 'Political and Governance Institutions in Current Myanmar', and 'Myanmar's Current Political Reform and Development: Progresses and Challenges' (in a printing process by Direk Jayanama Research Center, Thammasat University).

Beyond his academic career at Thammasat University, Dulyapak has held a number of special positions dealing with academic consulting, mass media, and diplomatic-security policy formulating in various organizations such as Prachatai News Agency (has analysed and commented on several issues in contemporary Southeast Asia), Ministry of Foreign Affairs (has been a guest speaker and foreign policy making advisor, mostly on Burma's politico-diplomatic reform issues and Thai-Burma border conflicts resolution), and Royal Thai Armed Forces (has been a special lecturer and defence policy making advisor, mostly on Burma's security reform issues at numerous military institutions including the Royal Thai Armed Forces Headquarters, Regional Army Commands, and National Defence College).

Most currently, Dulyapak has been working on his doctoral research project at the University of Hong Kong. His concentration of research is on the politics of federalism and decentralization reform in Burma.

Ms. DEWI RATNAWULAN – Gender Specialist

Dewi has extensive experience with gender and human rights issues, having worked with various NGOs and other human rights organizations since 1992. Special areas of interest have included community development, human rights, oral history, and gender issues including women and children development. Projects she has been involved with have ranged from the grassroots-level such as setting up a women's cooperative for handicrafts in rural villages in Java, Indonesia, to having co-founded a women's resource centre called Mitra Wacana in Yogyakarta, Indonesia.

More recently she has worked regionally to build capacities of NGOs and human rights defenders in the East Asia regions with special focus on supporting and strengthening the effectiveness of human rights regional mechanisms. Her commitment is to implement the goal of gender equality by ensuring the equal participation and full involvement of women and men in all aspects of work.

Dewi holds a Master of Human Rights and Democratization from Sydney University, having been accepted into their scholarship program in 2011. She also holds a BA Honours in History and Politics from Wollongong University, Australia, and a Diploma Certificate on Administration Development from the Faculty of Economics at Gadjah Mada University, Indonesia. Dewi is based in Bangkok and has been an international consultant with Rapid Asia since 2010.

Ms. VIPARAT PANRITDAM – Project Executive

Viparat Panritdam holds a Master of Arts in Sociology from Chulalongkorn University and has spent the initial part of her working life in the academic field. After graduation, in 2001, Viparat began working as a Co-Researcher at the Center for Social Development Studies at Chulalongkorn University. She subsequently worked for the Thai Health Promotion Foundation as a member of the Monitoring and Evaluation Team. She also conducted research at the Watanasala Center for Cultural Studies as well as doing teaching and researching at Chiang Mai University.

Viparat has also participated and done volunteer work with various organizations. In particular the focus has been on marginalised people including migrant workers, people from hill tribes, poor communities in the city, and modern youth. Preparing research papers and presenting at both national and international forums is an area of strong personal interest and in which she has gained significant experience. Some of the distinctive works include: ‘Youth Lifestyle in New Society: J-pop music fan clubs’, ‘Chiang Mai Indie Music: Local Space and Its Changing Mind’, and ‘Contestation of Shan Popular Music in Chiang Mai, Northern Thailand’. Most recently, Viparat held the position as a Thai Language Instructor at Every day Thai Language School. She is also doing volunteer work for The International Movement ATD Fourth World. At Rapid Asia Viparat hold the position as Project Executive and will be in charge of the interviewing team. She also assists with project coordination and summary report preparation.

Ms. CHOTIKA KHRUEMANEE – Qualitative Analytics Specialist

Ms. Chotika Khruemane works at the Asia Injury Prevention Foundation (AIP Foundation) as a Program and Evaluation Specialist. Prior to joining the AIP Foundation, she had over 12-year of experience with NGOs, Medical Research Institutes, and the UN in different capacities. She was employed as a Malaria Project Coordinator for Mahidol Oxford Research Unit (MORU)/Shoklo Malaria Research Unit (SMRU), a National Consultant with UN Women, Programme Associate with the United Nations Development Programme (UNDP)-Asia Pacific Regional Centre (APRC), a Senior Project Assistant working on the Trafficking and HIV/AIDS Project with UNESCO Bangkok, a Program Officer at the American Center for International Labor Solidarity (ACILS), a Protection Assistant (United Nations National Volunteers) for the United Nations High Commissioner for Refugees (UNHCR), an Assistant to the National Human Rights Commissioner (Prof. Dr. Pradith Charoen-Thai-Tawee, MD, PhD) at the National Human Rights Commission of Thailand, and an intern at the International Organization for Migration (IOM).

Mr. KOMKRIT ONSRITHONG – Project Manager

Mr. Komkrit (Joe) Onsrithong has an extensive training in laws and policies. He graduated from Chulalongkorn University with concentration in Business Law, and from Columbia Law School with specialization in Climate Change Law and Environmental Law. In addition to his experience in private practice, Komkrit interned at United Nations Office of Legal Affairs during his time in New York.

Since 2011, Komkrit has worked on various climate change and environmental research projects. As an Environmental Officer at Thailand’s Climate Change Office, he directed researches on ecosystem-based vulnerability assessments, and best practices in local climate change adaptation. As a Project Manager of Asian Environmental Compliance and Enforcement Network (AECEN), Komkrit initiated researches on Thailand’s policies to reduce short-lived climate pollutants (SLCPs) from diesel vehicles, and regulatory

and institutional frameworks for waste management in 8 Asian countries. As a Senior Program Office with USAID-funded Mekong Partnership for the Environment (MPE) Project, he substantially contributed to the initial Regional Stakeholder Engagement Assessment (RSEA) and Political Economy Analysis (PEA). He identified, and conducted consultations with, stakeholders, analyzed Environmental Impact Assessment (EIA) laws and regulations of the Mekong countries, and researched on Multilateral Development Banks' safeguards and civil society engagement policies and practices.

Komkrit has significant managerial experience leading operation of AECEN Secretariat as well as making arrangements for Thailand's Ministry of Natural Resources and Environment to co-host Bangkok Climate Change Conference in 2012.

Mr. MICHAEL L. BÄK – Senior Social Development Advisor (Asia) and Analytics

Michael Bäk is an Asia-based social development and inclusion expert and political economist with more than 16 years of experience in Asia, including 13 years with USAID, collaborating with change agents in government, civil society, and business. After a short career in controversy management and risk communications, Michael joined USAID serving in numerous leadership and strategic roles including as Director of two USAID/Indonesia technical offices and senior Asia regional advisory roles on LGBT human rights, vulnerable populations including internal displacement and migration, governance and conflict mitigation/peace building.

In the early 2000s, Michael was responsible for developing psycho-social and care/support services to survivors of three brutal terrorist attacks in Bali and Jakarta. As the first US Government official in Aceh after the 2004 tsunami, he led USAID's initial on-the-ground response and subsequently developed inclusive community-based humanitarian recovery projects. He worked for years addressing the negative impacts of violent conflict across Indonesia including designing and leading inclusive peace-building support to the Aceh Peace Process for which the USAID Administrator awarded him for his "humanitarian efforts in Indonesia and his commitment to human rights, demonstrated by his courageous efforts to bring peace to Aceh after 30 years of civil war."

In 2007, Michael joined USAID's regional platform in Bangkok to lead support to the MTV EXIT (End Exploitation and Trafficking) campaign, advancing USAID's leadership in the innovative use of social media, celebrity, live concerts, and television for purposes of social impact. Other responsibilities included major achievements in democratic governance in Thailand, addressing critical Post-Nargis needs in Myanmar, and sensitive civic participation activities in China, Vietnam, and across ASEAN.

He routinely consults for UN agencies, foundations, bilateral development agencies and businesses working in areas of civil society capacity building, advocacy, sustainability, social inclusion and democratic governance. He is a Principal Shareholder and Director/Creative & Collaboration with London-based Strategic Asia Global, is on the Board of Directors of New York-based B-Change Insights and currently consults for the B-Change Social Enterprise Group (based in Manila, Singapore, and New York). He has a BA from Kalamazoo College (Kalamazoo, USA), a Certificate from Nagoya Gakuin University (Nagoya, Japan), and a MA from the Johns Hopkins University School of Advanced International Studies (Washington, DC, USA). He is fluent in English, French, Bahasa Indonesia, and Melayu, previously fluent in Japanese and varying abilities in Thai and Spanish.

Ms. PATTY ALLEMAN – Senior Regional Gender Advisor

Patty Alleman is the United States Agency for International Development (USAID) Senior Gender Advisor for Asia, based in Thailand at the USAID/Regional Development Mission Asia (RDMA). In this position since May 2013, she supports RDMA and bilateral USAID country missions in Asia to identify, develop, monitor and report high quality and innovative strategies and programming to reduce gender

disparities in all development outcomes (e.g., economic growth, healthy lives), prevent gender-based violence, and increase voice and visibility of women and girl leaders. She also fosters regional partnerships across a wide range of stakeholders, including colleagues in host country governments, U.S. government, USAID implementers, development partners, multilaterals, and the private sector. She has been with USAID since 2009, and in prior international development positions worked in the non-governmental and academic fields. She has master's degrees in anthropology and public health, with a strong background in governance and policy, strategic partnerships, and research.

Ms. PRATIN DHARMARAK – Cross-Border Health Program Development Specialist

Pratin Dharmarak, Thai national- is a public health professional with over 20 years of experience managing complex public health and infectious disease control programs. Her current position is Project Management Specialist (Malaria) at USAID Regional Development Mission for Asia (RDMA) based in Bangkok. In this position, she provides management and technical oversight to a large regional malaria prevention and control program that covers Burma, Thailand and Cambodia. She received her Masters of Educational Studies, Bachelor of Social Work from Monash University in Australia, and a Master of Public Health from Mahidol University in Thailand. Her expertise includes health systems development and strengthening, situation analysis, program planning, and monitoring and evaluation. She has conducted many health services assessments, evaluation and project documentation and completed the Evaluation for Program Managers course at USAID. Her country experience includes Thailand, Australia, Cambodia, China, Lao PDR, DPR Korea and Burma.

ANNEX III: EVALUATION METHODS AND LIMITATIONS

Qualitative Method

For the qualitative portion of the evaluation, it was important to talk to several key groups both in Thailand and SE Burma. Specific individuals from contact lists provided by USAID/Burma and RDMA and IRC were approached to secure interviews. Selection of informants took into account variety of services under PLE, geographic representations as well as availability and practicality. Interviews were conducted face to face but in a couple of cases. Phone interviews were used in some cases when the respondents were overseas. Table IA below highlights the key groups that were interviewed. A total of 102 interviews were carried out. The itinerary for field was put together in collaboration with USAID and IPs. It took into account access and efficient use of resources. For beneficiary interviews in Thailand and SE Burma, an effort was made to ensure balance between male and female respondents.

Table IA: Target Informants for Interviews

Target	Key Role	Interviews	Location
USAID/RDMA	Aid Agency	1	Bangkok
USAID/Burma	Aid Agency	5	Rangoon
International Rescue Committee (IRC)	Implementing partner	1	Bangkok
Mae Tao Clinic (MTC)	Implementing partner	1	Bangkok
The Border Consortium (TBC)	Implementing partner	1	Bangkok
World Education (WE)	Implementing partner	1	Bangkok
Donors, INGOs	Donors, INGOs	13	Bangkok
Donors, INGOs	Donors, INGOs	5	Rangoon
IDP communities in SE Burma from different ethnic states	Beneficiaries	20	Kayah State, Kayin State & Mon State
CBOs	PLE Sub-grantees	15	Kayah State, Kayin State & Mon State
DP communities in Thailand	Beneficiaries	8	Chiang Mai, Chiang Rai, Mae Hong Son & Tak
Partners and other stakeholders in border provinces of Thailand	Partners, Stakeholders	31	Chiang Mai, Chiang Rai, Mae Hong Son & Tak
TOTAL		102	

Survey among Targeted Populations of PLE

For the quantitative method, it was not feasible to conduct a quantitative survey among beneficiaries in SE Burma, and hence, this group was excluded from the survey. Accordingly, the survey was conducted with beneficiaries from two, key target groups:

1. PLE BTs who live in communities in Thailand outside of camps; and
2. PLE BBs who live in communities in SE Burma who crossed the border to receive relevant services in Thailand (interviewed via intercept in Thailand)

The following criteria were used for selection of survey respondents:

- Quotas were used to ensure a 50/50 distribution between males and females;
- The target age group was 14 years and older and quotas were used to ensure a uniform sample across target areas. Quotas were set in line with the IOM’s migrant study, 2013 (i.e. 14-24 yrs 30%, 25-34 yrs 40%, 35+ 30%).
- Since there was a need to assess level of access to social services under PLE, data collection was carried out in villages subject to PLE interventions.

Some respondents were not able to speak Thai and hence Burmese and Karen speaking interviewers were used in the field. Data collection was carried out by a professional data collection company who used trained interviewers, supervised by qualified supervisors.

Data Collection and Sampling

All data collection was carried out through face-to-face interviewing. The sampling plan was developed with consideration of the following:

1. Permission to conduct quantitative data collection in SE Burma was rejected. Given the political situation in Thailand, security around the refugee camps had tightened. Hence, it was decided not to conduct surveys inside the camps as initially planned. All interviews were done in communities outside of the camps.
2. In contrast to health services, which are provided in several provinces in Thailand, education and protection services are mainly provided in Tak. Hence, a larger proportion of the total sample was allocated to the Tak province to capture sufficient number of respondents who had received education and protection services.

For PLE BTs who reside outside of camps, a total of eight (8) PLE intervention districts in three (3) border provinces of Thailand were selected to achieve a good spread of the sample. The sample was allocated to ensure information could be captured across each intervention sector.

Table 2A shows the sample plan. PLE BBs who had crossed the border into Thailand were also captured. For this group, safe and practical interception points were selected based on advice from USAID and Consortium members and included the Mae Tao Clinic (MTC) and several health posts in the selected provinces.

Table 2A Sample Size and Distribution

Provinces	District	PLE Service	Beneficiaries from Thailand	Beneficiaries from SE Burma
Chiang Rai	Mae Sai	Health	29	
	Mai Fah Luang	Health	21	
Mae Hong Son	Moung	Health	24	
	Khun Youm	Health	26	
Tak	Mae Sot	Education & Protection & Health	50	
	Mae Ra Mad		50	
	Tha Song Yang		50	

Provinces	District	PLE Service	Beneficiaries from Thailand	Beneficiaries from SE Burma
	Phop Pra		50	
	Mae Tao Clinic	Education & Protection & Health		100
Chiang Rai, Tak, Mae Hong Son	Areas surrounding health posts			100
Total			300	200

For the PLE BT sample, PLE intervention districts were selected from a list provided by USAID. Within each district, sub-districts were selected followed by the random walk method to select individual households. Within households, quotas were used to select individual respondents based on the target criteria.

For the PLE BT sample, selection was done via intercept at the MTC and other health posts in Chiang Rai, Mae Hong Son, and Tak. To ensure a good spread, data was collected on weekdays and weekends and sex and age quotas were used to ensure comparable samples. Other demographic data such as ethnicity, education and employment status was also collected to better understand the profile of the samples.

It should be noted that the sample size allocation was based on having a large enough sample base to cover the selected regions and PLE service areas so that a reasonable comparison of results could be done across these. Respondents were selected using quotas. Hence, there was no scientific basis for calculating sample size and the samples cannot be considered to be pure probability samples. The structure of the population surveyed was largely unknown and there was also no reliable way of estimating the variance. Given this, the maximum sample error should be assumed for any given sample size.

Survey among Local Implementing Partners Receiving Organizational Capacity Development Services from PLE

Following discussion with USAID regarding the need for data required in answering the evaluation question on organizational capacity, an online survey was offered to all CBOs under the PLE program. In total, 34 out of 35 CBOs were interviewed. The capacity survey tool developed was in part based on the Organizational Capacity Assessment (OCA) Tool and supplemented by questions relating to technical capacities to sustainably deliver quality services. The tool helped to give indications of the level of capacity that resides within each CBO partner as well as perceptions of CBO partners towards their human and organizational capacities. A CBO contact list provided by IRC had a total of 77 contact persons from management and operations. The survey was executed on a professional survey platform (not survey monkey), with the ability to track responses and do regular follow ups. The below protocol was used and helped to secure responses from 66 participants representing a response rate of 94 percent. The data was weighted to ensure that all CBOs had equal representation in the analysis.

- IRC sent out a letter to introduce Rapid Asia as the independent contractor who would do the survey and highlight the importance of the study and that it was confidential;
- The on-line survey system used could identify non-responses and send out reminders automatically. This was done according to a specific timing and helped to maximise the response;

- All emails were tested to ensure they were correct.
- The survey was of reasonable length, around **20** minutes. This ensured the respondents took time to complete the survey instead of dropping out;
- Participants had the ability to stop mid-through the survey, save it, and come back to it;
- The survey was offered in English, Thai and Burmese;
- Non-response was followed up by phone.

The online survey should not be confused with the full assessment of organizational and technical capacity which requires a team of people to visit the organization for a full day. Instead, the survey helped to achieve the following:

1. Provided a useful compliment to the qualitative interviews;
2. Ability to compare CBO groups (not individual CBOs) across PLE sectors, based on their self-evaluation of organizational and technical capacity;
3. Ability to compare the relative strengths of different capacity domains across the CBOs; and
4. Gain insight into how capacity has improved over time and needs for future support.

Table 3A shows a matrix of evaluation questions and data collection methods to address each question.

Table 3A: Matrix of Evaluation Questions and Plans for Data Collection and Target

Evaluation Questions	Data Collection Method	Target
<i>1. Is the convergence strategy relevant considering the changing situation in Burma?</i>		
I.1 the extent that the convergence interventions can realistically be linked and/or transferred to available systems and/or interventions in Burma	Qualitative Klls & Desk Review	Partners, Stakeholders, PLE BTs, and PLE BBs
I.2 Key factors that support or obstruct the convergence as mentioned in I.1	Qualitative Klls & Quantitative Survey	Partners, Stakeholders, PLE BTs, and PLE BBs
I.3 Additional support that might be needed to ensure the success of the convergence and how to gain such support	Qualitative Klls, Desk Review & Quantitative Survey	Partners, Stakeholders, PLE BTs, and PLE BBs
I.4 The extent to which the PLE's convergence strategy and interventions can serve as a "pull factor" for return and reintegration	Qualitative Klls & Quantitative Survey	Partners, Stakeholders, PLE BTs, and PLE BBs
I.5 Perception of beneficiaries in Burma toward the convergence	Qualitative Klls & Quantitative Survey	Partners, PLE BTs, and PLE BBs
I.6 Whether and to what extent the convergence	Qualitative Klls & Quantitative Survey	Partners, PLE BTs, and PLE BBs

Evaluation Questions	Data Collection Method	Target
strategy affects male and female beneficiaries differently		
1.7 Geographic areas and/or targeted groups that should be prioritized to ensure convergence in Burma	Qualitative KIs & Quantitative Survey & Desk Review	Partners, Stakeholders, PLE BTs, and PLE BBs
1.8 Geographic areas and targeted group in Thailand that should be prioritized after PLE's completion and the rationale.	Qualitative KIs & Quantitative Survey & Desk Review	Partners, Stakeholders, and PLE BTs
2. Does the <u>need to provide humanitarian assistance to the DPs and IDPs</u> still remain?		
2.1 Have the assumptions behind this objective changed?	Qualitative KIs & Quantitative Survey & Desk Review	Partners, Donors, Stakeholders, PLE BTs, and PLE BBs
2.2 If the humanitarian assistance is still in need, which geographic areas and/or targeted beneficiary groups should be prioritized?	Qualitative KIs & Quantitative Survey & Desk Review	Partners, PLE BTs, and PLE BBs
2.3 Are the PLE's key approaches and interventions still relevant to effectively respond to the humanitarian needs for IDPs in Burma? If not, what should be modified and how?	Qualitative KIs & Quantitative Survey & Desk Review	Partners, Stakeholders, and PLE BBs
2.4 To what degree are PLE activities serving as a "pull factor" to Thailand for those who are not victims of conflict?	Qualitative KIs & Quantitative Survey	Partners, Stakeholders, PLE BTs, and PLE BBs
3. To what extent have the capacity of PLE's sub-grantees been strengthened to support PLE's strategy for sustainability?		
3.1 Level of capacity of PLE's partners who engage in health, education, and social protection services on both sides of the Thai-Burma border and their adequacy for maintaining the services.	Qualitative KIs & Quantitative Survey & Capacity Survey	Partners, PLE BTs, and PLE BBs

Evaluation Questions	Data Collection Method	Target
3.2 Potential modifications to the capacity strengthening strategy and interventions	Qualitative KIIs & Capacity Survey	Partners and Stakeholders
3.3 Other recommended models or approaches and strengths and limitations	Qualitative KIIs & Desk Review	Partners and Stakeholders

Field Work Quality

Evaluation Instruments or Tools

The evaluation Team designed survey questionnaires and moderator guides as required by the relevant target groups with input from USAID and PLE partners. The questionnaires/moderator guides corresponded to all the evaluation questions set for the project.

Pilot Testing and Localization of Evaluation Tools

For quality purposes the questionnaires and moderator guides were pre-tested. Once the final evaluation tools were approved by RDMA, they were translated and pre-tested.

- Localization meant to scrutinize the questionnaire and adjust language, demographics, and technical terms to ensure it was in line with the country context as well as appropriate from a cultural perspective.
- Translations were carried out by qualified translators and the translations were also checked by a qualified third person.
- Evaluation Team and the survey agency carried out pre-test interviews to ensure questions were understood, instructions were clear and to pick up any mistakes.

After final amendments had been made, RDMA approved the final questionnaires and moderator guides based on RDMA's determination of quality.

Requirements for Qualitative Method

The following requirements were enforced with the Evaluation Team Members who implement the qualitative data collection in SE Burma and Thailand.

A central briefing was conducted in Bangkok with the participation of:

- Evaluation Team Lead, as well as project manager and executive
- Moderators

The briefing session covered the following:

- Project overview focusing on key objectives and potential challenges
- Q&A session on the moderator guides

- Field procedures, summary sheets and interviews should be recorded, if consent could be obtained.

Requirements for Quantitative Methods

These requirements were enforced with the survey agency who conducted the survey among PLE BTs and PLE BBs.

A central briefing was conducted with the participation of:

- All field supervisors from the survey agency,
- The Rapid Asia's project lead and manager, and
- PLE representative, who provided a project overview and helped answer questions. Particular attention was given to the 'do no harm' issue.

All interviewers were personally briefed and instructed by the field supervisors on the following:

- Sampling procedures,
- Question by question training on the questionnaire,
- Quality control procedures (see below), and
- Role-plays and pilot interviews to familiarize interviewers with the questionnaire.

Survey Data Quality Control and Data Entry

To ensure data quality, completed questionnaires underwent a number of checks prior to data entry:

- 20-30% of all questionnaires for each interviewer were validated. Non-verified interviews would have been discarded.
- Client monitoring of fieldwork was done in Mae Sot.
- After completion, supervisors checked the questionnaires for consistency, completeness and whether they were filled out according to instructions. This was done in field and if a major mistake was found, the interview was redone.
- All 'clean' questionnaires were then sent to the sub-contractor's head office for final checking and coding and data entry.
- The data processing department prepared a final data file for which a data map was used to ensure 'clean' data before submitting to Rapid Asia for analysis.

Statistical Accuracy of Survey Data

The statistical accuracy of survey data depends mainly on two factors:

- The sample size, and
- The outcome itself (i.e. variance within the population measured).

The variability of statistical accuracy becomes relevant when looking at sub-segments within the total sample base, for example, when examining differences in behaviour between different target groups. Hence, not knowing the results beforehand the following table can be used as a guide to gauge possible outcomes – at the 95% confidence level.

Sub-sample Size	Maximum Error ±	Sub-sample Size	Maximum Error ±
1000	3.1%	300	5.7%
800	3.5%	200	6.9%
600	4.0%	100	9.8%
400	4.9%		

ANNEX IV: DATA COLLECTION INSTRUMENTS

This part presents the data collection instruments including one quantitative questionnaire, a capacity survey questionnaire, and three (3) moderator guides.

Moderator Guide BENEFICIARIES

(Aug, 2014]

FINAL

<i>Respondent first name:</i>					
<i>Organization, Location:</i>					
<i>Sex:</i>		<i>Age:</i>			
<i>Date of Interview:</i>	<u> </u> / <u> </u> / 2014	<i>Time begin</i>		<i>Time ended</i>	
<i>Name of Moderator(s):</i>					
ESOMAR DECLARATION					
<p>I declare that the respondent, whose name and address appear above, was unknown to me until the interview. I confirm that, before returning this questionnaire, I have checked that it meets and was carried out in accordance with the MRS Code of Conduct and instructions supplied to me for this study. I understand that the information given to me during the interview must be kept confidential.</p>					
Signed by Interviewer:					

INTRODUCTION (NOTE: TARGET PLE RECEIPIENTS ONLY)

Thank you for spending the time talking with me today. I'd like to introduce myself – I am **(NAME)** from **(ORGANISATION)**

We really do appreciate you giving us your time today. We are currently undertaking an assessment on health, education and other services you may have received.

Your contribution is very valuable and there are no right or wrong answers, just give your honest opinion. I am only interested in your opinions and your thoughts and not those of other people.

I will record our discussion so I can concentrate on what you are saying. The recording will be erased within 60 days and will only be used for internal processing purposes. Your record will not be shared with anybody except the neutral independent expert who will produce the report that compiles almost 100 interviews that we are doing including this interview. May I record our conversation? [Yes / No]

Please be assured that anything you say is confidential and your participation is completely voluntary. If you feel uncomfortable during the interview, you may choose not to answer certain questions or stop the interview any time. These will not affect your future works or services you will receive from PLE or other supporters.

CONFIRM UNDERSTANDING (Yes, I understand and hereby give my consent to be interviewed for the study [with / without] tape recording)

1. BACKGROUND

Note: [B] ask for Burma, [T] ask for Thailand

First, please tell me a bit about yourself and your family? Are you married? Have children? Your ethnicity?

How do you support yourself and your family?

2. HEALTH SERVICES

What kind of health services have you and/or your family received? What else? When was that?

How important are these services to you and your family? Why do you say that?

Where do you / your family usually seek health care? How would you describe your experience?

Have you ever receive health services in Burma/Thailand?

How does the health services you/your family receive compare to Burma/Thailand? Which is better? Why do you say that?

Have you ever received treatment in Thailand and then continued treatment at another clinic in Burma [or vice versa]? Tell me about your experience?

3. EDUCATION SERVICES

Tell me about the education you and your family has received? Type of education? Up to what level? Did anyone drop out? Why?

How important is education to you and your family? Why do you say that?

Who provide education to you/your children? How would you describe your experience?

Have you / your children ever attend formal or informal schools in Burma/Thailand?

How does the education you/your children receive compare to Burma/Thailand?

[If have certain certificates/diplomats] Did / Will your school certificate/diplomat be recognized in Burma/Thailand [the other side of the border]?

How will the education help you in the future? Explain?

4. PROTECTION SERVICES

What have you seen or heard in relation to protection services such as domestic violence protection, legal assistance services, safety or security protection, and communication about migrant rights? From where did you hear about it?

What types of protection activities / services have you participated in or received?

Do you think it has been useful? Why do you say that?

Who organized the activities / services? How would you describe your experience?

How important are these activities / services to you and your family? Why do you say that?

How do these protection services compare to Burma/Thailand? Why do you say that?

What other domestic violence protection, legal assistance, safety/security or similar services would you like to have available? Why are they?

5. CASH TRANSFERS AND FOOD SECURITY (Burma and Cross-border Beneficiaries)

Have you ever received cash transfer support or food distribution support? When and how often have you received this? How sufficient is it for you and your family?

Who organized the distribution of cash/food? How would you describe your experience?

To what extent is it delivered in a timely manner? Explain?

Any other organizations providing these supports to you / your family? How would you describe your experience?

How important are these support to you and your family? Why do you say that?

If these supports are no longer available for any reasons, what would you do?

What are other alternatives to these supports? How would you get them?

6. BURMA SITUATION

I would like to talk a little about the political and economic situation in Burma. How would you describe the economic situation in Burma today? How has things changed compared to a few years ago? Why do you say that?

Thinking about the economic situation in Burma, would you say Burma is generally going in the right direction or in the wrong direction? Why do you say that?

How about political situation in Burma today? How has things changed compared to a few years ago? Why do you say that?

Thinking about the political situation in Burma, would you say Burma is generally going in the right direction or in the wrong direction? Why do you say that?

What are your thoughts on the current cease fire agreement? Why do you say that?

What are your thoughts on the progress of the peace process? Why do you say that?

What do you think about the future work / livelihood opportunities in Burma?

Who stand to benefit from that? In what way could it benefit you? Explain?

7. IMPACT ON DPs AND IDPs

[B] Have you or someone in your family ever migrated or crossed the border into Thailand?

How many times? What was/were the reasons for going to Thailand?

If never been to Thailand, have you ever thought about going to Thailand? Why/why not? For what purpose?
(Probe on: health, education and protection services)

[B] What has been your experience with these services? Would you go back again? Have you encouraged others to go? Do they actually go?

[Probe for each service]

[B] Thinking about how Burma is developing now, do you think it is more or less attractive to go to Thailand to find work or other better opportunities? Why do you say that?

[T] How long have you been in Thailand? What was the reason for you to come to Thailand?
(Probe on: health, education and protection)

[T] What has been your experience with this service? Would you come back for more?
Have you encouraged others to go? Do they actually go?

[T] What do you think about the notion that economic development in Burma will attract refugees back into Burma? When would this happen? Under what circumstances?

[T] How about other people from Burma in Thailand who are not refugees? Do you think that economic development in Burma will attract them back into Burma? When would this happen? Under what circumstances?

Based on your experience, what do you wish for in the future? What are you hoping for? Why do you say that?

Thank you so much for your time it is much appreciated

Moderator Guide Other Stakeholders/Donors

(Aug, 2014]

FINAL

<i>Respondent first name:</i>					
<i>Organization, Location:</i>					
<i>Mobile:</i>					
<i>Date of Interview:</i>	___ / ___ /2014	<i>Time begin</i>		<i>Time ended</i>	
<i>Name of Moderator(s):</i>					
ESOMAR DECLARATION					
<p>I declare that the respondent, whose name and address appear above, was unknown to me until the interview. I confirm that, before returning this questionnaire, I have checked that it meets and was carried out in accordance with the MRS Code of Conduct and instructions supplied to me for this study. I understand that the information given to me during the interview must be kept confidential.</p>					
Signed by Interviewer:					

INTRODUCTION

Thank you for spending the time talking with me today. I'd like to introduce myself – I am **(NAME)** from **(ORGANISATION)**

We really do appreciate you giving us your time today. We are currently undertaking an assessment on the USAID sponsored PLE Program. Your inputs and opinions are very valuable to us especially in terms of the current and future needs for development and humanitarian assistance in Southeast Burma.

In this interview we will talk about Displaced Persons and Internally Displaced Persons. I may simply refer to them as DPs and IDPs, but I understand you may already be familiar with those terms.

I will record our discussion so I can concentrate on what you are saying. The recording will be erased within 60 days and will only be used for internal processing purposes.

Please be assured that anything you say is confidential and your participation is completely voluntary.

CONFIRM UNDERSTANDING

START TAPE RECORDER (Yes, I understand and hereby give my consent to be interviewed for the study)

I. BACKGROUND – GENERAL ABOUT PROGRAM

First, I would like to understand a bit about the work you do and the organization you work for.

In terms of border assistance programs in SE Burma / along the border in Thailand / between Burma and Thailand, what is [name of organization] role and involvement?

What kind of programs are you supporting / implementing? For which populations?

In which geographical areas? How long have they been implementing? How long will they last?

What are your future plans for these programs? What will be the focus on humanitarian assistance/health/education/protection services?

NOTE: ASK THOSE WHO DIRECTLY IMPLEMENT SIMILAR ACTIVITIES IN SE BURMA

I would like to understand a bit about relationship between your programs in SE Burma/Thailand with USAID-funded border program called Project for Local Empowerment or PLE. How familiar are you with this program?

(IF NOT HEARD ABOUT PLE, GO TO NEXT SECTION)

Please tell me about your level of involvement with PLE? Anything else?

How would you describe your experience with the program? Why do you say that?

What are some of the key benefits of the program that you've seen? Why do you say that?

In your view, any gaps on development/humanitarian assistance that PLE is well or better placed than others to fill the gaps? Why do you say that?

Any synergies or collaborations with PLE so far? How about future plan?

What about synergies or collaborations between your and other programs or donors/stakeholders?

2. BURMA SITUATION

How would you describe the political and economic situations in Burma today comparing to 2-3 years ago?
How has things changed? Which states are most impacted?

Have your programs in SE Burma changed because of these changes? What have changed? How and for what reasons? If no changes while the situations changed, why not?

What are your thought about the current cease fire agreement? Why do you say that?

And about the progress of the peace process? Why do you say that?

What do you think about the economic development opportunities in Burma? Who stand to benefit from that?
Short term, long term?

What do you think about the notion that political and economic development in Burma will attract DPs or migrants back into Burma? When would this happen? Under what circumstances?

How about those who are not displaced but more regular or irregular migrants? Under what circumstances would they return? When would this happen?

3. IMPACT ON DPs AND IDPs

I would like to talk a bit about displaced persons or the refugees in the camps in Thailand and the IDPs in Burma. Based on your experience, what do majority of DPs/IDPs wish for in the future. What are their aspirations? Where did you hear this from?

Do you believe humanitarian assistance should be scaled up or down at this point in time? What types of HA should be scaled up / down? Why? [Probe for food & cash assistance]

What are other, similar humanitarian assistance programs doing? What is the reason for this?

How will the changes in Burma affect this type of programs in the future? What does it depend on?

In what way has the political situation in Thailand affected DPs or other migrants residing in Thailand? Why?

What about the social and economic situation? Why do you say that?

How do you think humanitarian assistance program should evolve to adjust to the changes in Thailand and Burma? Have you seen similar changes in other programs?

What are the remaining gaps in relation to [health / education / protection / humanitarian assistance services] for people in SE Burma. [Probe for IDPs, affected communities, and in general]

4. CONVERGENCE (USE SHOW CARD ON LAST PAGE)

What does convergence mean to you? Explain?

Please look at this show card. I'm going to read out the Convergence Objective of PLE and they ask about your reaction to this:

READ OUT CONVERGENCE OBJECTIVE OF PLE

PLE aims to contribute to a platform for local capacities in South East Myanmar becoming central to enhanced service provision and access to rights, recognized and appropriately integrated with government services, connected with civil society and supported by the international community.

What is your reaction to this? Why do you say that? Does it make sense to you? Why or why not?

An effort under PLE's convergence is to enhance capacity of local organizations, both government and CBOs and to bridge working relationship between government and non-government services providers, what is your view on such efforts?

How will such collaborations develop over time? Who can facilitate the process? What are potential obstacles?

Any differences between PLE and other similar programs, if any exist [or that of the interviewed organization if they have similar convergence program]? What's your view on that?

These efforts also include those in armed group control areas. What is your view on such efforts?

How will such collaborations between the control areas and the government develop over time? Who can facilitate the process? What are potential obstacles?

Any differences between PLE and other similar programs, if any exist [or that of the interviewed organization if they have similar convergence program]? What's your view on that?

In Thailand, PLE also provides capacity building to local organizations who provide social and legal services to DPs and migrants in Thailand and tries to link them with the systems in Burma e.g. acknowledgement of border health worker certification from a Thai academic institution by the health system in Burma, and similar for education where an effort is being made to have non-formal and Thai education recognized in Burma. What is your view on such efforts?

How will such harmonization develop over time? Who can facilitate the process? What are potential obstacles?

Are there other similar programs that you are aware of? How are they different to PLE? What's your view on that?

5. CAPACITY

What types of organizational capacity development strategies or approaches does your organization use? Could you tell us the good practices you've been using? How about the challenges and lessons learned?

What is your view on local organizational capacity development support? What are the future plans for organizational capacity development support? What should they be focused on?

How would you describe level of readiness of CBOs in Burma/Thailand [or PLE's CBOs if the interviewees have been working with them] to work independently beyond capacity development support? To what extent can they provide quality services to community people by themselves? [Probe on different types of services PLE is providing]

What's the potential for the local organizations to be sustained without support from INGOs? [Probe on PLE's CBO if the interviewees have been working with them]

Thank you so much for your time it is much appreciated

Observation:

SHOW CARD

PLE's Convergence Objective:

PLE aims to contribute to a platform for local capacities in South East Myanmar becoming central to enhanced service provision and access to rights, recognized and appropriately integrated with government services, connected with civil society and supported by the international community.

Moderator Guide PLE PARTNERS

(Aug, 2014]

FINAL

<i>Respondent first name:</i>					
<i>Organization, Location:</i>					
<i>Sex:</i>		<i>Age:</i>			
<i>Date of Interview:</i>	____ / ____ /2014	<i>Time begin</i>		<i>Time ended</i>	
<i>Name of Moderator(s):</i>					
ESOMAR DECLARATION					
<p>I declare that the respondent, whose name and address appear above, was unknown to me until the interview. I confirm that, before returning this questionnaire, I have checked that it meets and was carried out in accordance with the MRS Code of Conduct and instructions supplied to me for this study. I understand that the information given to me during the interview must be kept confidential.</p>					
Signed by Interviewer:					

INTRODUCTION

Thank you for spending the time talking with me today. I'd like to introduce myself – I am **(NAME)** from **(ORGANISATION)**

We really do appreciate you giving us your time today. We are currently undertaking an assessment on the PLE Program.

Your inputs and opinions are very valuable as they will help inform USAID and other stakeholders on how they can provide better supports to you so that you can provide better services to the people in your targeted communities.

This is not an audit so there are no right or wrong answers. I am only interested in your opinions and your thoughts and not those of other people.

I will record our discussion so I can concentrate on what you are saying. The recording will be erased within 60 days and will only be used for internal processing purposes. Your record will not be shared with anybody except the neutral independent expert who will produce the report that compiles almost 100 interviews that we are doing including this interview. May I record our conversation? [Yes / No]

Please be assured that anything you say is confidential and your participation is completely voluntary. If you feel uncomfortable during the interview, you may choose not to answer certain questions or stop the interview any time. These will not affect your future works or services you will receive from PLE or other supporters.

CONFIRM UNDERSTANDING

Yes, I understand and hereby give my consent to be interviewed for the study [with / without] tape recording.

I. BACKGROUND – GENERAL ABOUT PROGRAM

First, I would like to understand a bit about your background and get you to tell me about your work and what you do.

Please tell me about your organization's – mission or objective, activities, people it serves, etc.?

Are all the activities / services your organization provides to community people same as PLE's services? In other words, does your organization implement any programs/services that are not supported by PLE? What are they? Do they also provide capacity building for you / your organization?

Please also tell me a bit about your current role and how long you have been working on this role? Has your role changed in the past 2 years? How did it change? Was it a result of capacity building you receive from PLE? How?

What can you tell me about the beneficiaries you serve? How do they differ in terms of age and sex?

What would you say are your best achievements to date (the things you are most proud of) with regards to the activities you are doing with support from PLE? Why do you say that?

2. BURMA SITUATION

How would you describe the political and economic situation today in Burma? How have things changed in the past 2 years?

What about those in geographical areas where you work? How have things changed in the past 2 years?

What are positive changes you witnessed in Burma in the past 2 years? What concerns do you still have? What do you anticipate for the future?

How has your work been affected (positively or negatively) by the current cease fire agreement? Why do you say that?

How has your work been affected (positively or negatively) by the progress of the peace process? Why do you say that?

To what extent do the economic opportunities in Burma lead to better access to quality services or poverty alleviation? Do they offer more opportunities for your organization to engage constructively with the government?

What do you think about the notion that economic development in Burma will attract DPs back into Burma? When would this happen? Under what circumstances?

What about other Burmese migrants in Thailand who are not DPs? Under what circumstances they'll return? When would this happen?

3. IMPACT ON DPs AND IDPs

Why are DPs going to Thailand? Do you think their reasons for going are the same or different to before 2011? Why is that?

What about other migrants from Burma who are not DPs? Why are they going to Thailand? Do you think their reasons for going are the same or different to the DPs? Why?

Are DPs coming to Thailand specifically for health/education/protection services?

What about Burmese migrants outside of the camps in Thailand? Do they come to Thailand specifically for health/education/protection [choose one(s) that relevant to the informant] services? Are there more male or female accessing these services? Why is that?

Probe factors that make male / female clients have different level of access to each service.

Tell me about the development of health/education/protection services in Burma? How are these services meeting the priorities of women and men in the communities? Do these encourage people to stay in Burma? Why do you say that?

If there is no PLE of health/education/protection services, what will people do? Any alternatives to PLE service?

Based on your experience, what do majority of DPs/IDPs wish for in the future? What are their aspirations? Any difference between males and females? What about age?

Do you believe PLE services to the people should be scaled up or down at this point in time? Why do you say that?

What criteria should be used by PLE to prioritize support for services? Why do you say that?

Which population groups from Burma in which locations should be prioritized? Probe for those inside Burma and in Thailand separately.

4. IMPACT ON PLE SERVICES

How has the changes in Burma changed your organization's direction or programming work as a whole? Why do you say that?

How about your program under PLE? How has the changes in Burma changed your program under PLE? Why do you say that?

How have the changes in political situation in Thailand affected your organization's direction or programming work as a whole? Why do you say that?

How about your program under PLE? How has the changes in the political situation in Thailand affected your program under PLE? Why do you say that?

How has PLE evolved to adjust to these changes both in Burma and Thailand? Explain?

5. PLE PERFORMANCE

What would you say are strengths of your organization and programming work as a whole? To what extent has PLE contributed to these strengths in the past 2 years? Why do you say that?

How would you describe your performance in terms of improving access and delivery of health/education/protection services in Burma/Thailand? Have you observed any positive trends in coverage, access, quality etc. in the past 2 years? How and what is the evidence of this?

To what extent do IDPs, DPs in host communities, and DPs in camps have access to health/education/protection services [choose one(s) that relevant to the informant]? How has these changed in the past 2 years? **Probe on both government and CBOs/NGOs services.**

What are the current gaps, or unmet needs in access to quality of services? Are these more relevant for children, males or female clients?

What are some key obstacles for bridging the gaps or filling the unmet needs? From where have you seen evidence of this? Explain?

Have your services been strengthened to fill these gaps? To what extent were these due to PLE's support?

What can you tell me about coordination with other CBOs/NGOs? What about other donors?

What about governments? How do you see these develop over time?

What are the key barriers/challenges for your program under PLE at this time? Anything else? How can these be overcome?

6. CONVERGENCE

What does convergence mean to you? Explain?

Please look at this show card. I'm going to read out the Convergence Objective of PLE and they ask about your reaction to this:

READ OUT CONVERGENCE OBJECTIVE OF PLE

PLE aims to contribute to a platform for local capacities in South East Myanmar becoming central to enhanced service provision and access to rights, recognized and appropriately integrated with government services, connected with civil society and supported by the international community.

What is your reaction to this? Why do you say that? Does it make sense to you? Why or why not?

An effort under PLE's convergence is to enhance capacity of local organizations, both government and CBOs and to bridge working relationship between government and non-government services providers, what is your view on such efforts?

Do you think this will continue in the future? Who can facilitate the process? What are potential obstacles?

NOTE: Ask the following questions ONLY if this organization implements this convergence strategy. Without PLE support, can your organization continue doing this by yourselves?

What support would your organization need to ensure the success of the convergence? Any other types of support?

7. CAPACITY

When we talk about capacity we mean technical capacity such as knowledge and skills and organizational capacity such as systems and resources and staff. How would you describe your organization's level of capacity (both technical and organizational) 2-3 years ago. Why do you say that?

How would you describe your organization's level of capacity (both technical and organizational) at the moment comparing to 2-3 years ago? Why do you say that?

To what extent has PLE improved your job performance? What are the key improvements?

What types of capacity building services [training / short course / mentoring / shadowing, etc.] have you received from PLE? How often/ how many times have you received them so far?

How well were PLE capacity building services [training / short course / mentoring / shadowing, etc.] delivered? Were they sufficient to help you to do a better job? How have you used what you learned in your works? Examples?

How appropriate are current PLE capacity strengthening strategies (both technical and organizational)? How can these be improved?

How would you like PLE capacity building services [training / short course / mentoring / shadowing, etc.] be done differently or more so that they can be more useful? Improvement suggestions for specific capacity building activities?

Have you /your organization also received capacity building opportunities from sources other than PLE?

If so, what are some of the benefits of the non-PLE capacity building support that PLE doesn't provide?

To what extent these non-PLE services help improve your job performance? How about to achieve your organizational goal and objective?

Do you have plans to expand activities or find additional partners? If so, what are they and/or who they are? If not, why?

What are some additional/new knowledge/skills that you may need in order to do your job better? How will these improve your performance? How will they help achieve your organizational objective?

How would you describe your level of readiness to engage in new partnership with other partners beyond consortium members (IRC, TBC, WE, or MTC)?

What are the key factors for you to develop new partnership?

How would you describe your level of readiness to work independently without technical and/or financial support from any INGO? Why do you say that?

Thank you so much for your time it is much appreciated

Observation:

SHOW CARD

PLE's Convergence Objective:

PLE aims to contribute to a platform for local capacities in South East Myanmar becoming central to enhanced service provision and access to rights, recognized and appropriately integrated with government services, connected with civil society and supported by the international community.

Quantitative survey of PLE beneficiaries

INFORMED CONSENT

Thank you for spending the time talking with me today. I'd like to introduce myself – I am (NAME) from (ORGANISATION)

We really do appreciate you giving us your time today. We are currently undertaking an assessment on basic services you may have received your opinion on what is happening in Burma and your future aspirations. The survey may take up to one hour.

If needed, I will be using an interpreter who will translate the questions and answers to ensure we understand your opinion correctly. Your contribution is very valuable and there are no right or wrong answers, just give your honest opinion. I am only interested in your opinions and your thoughts and not those of other people.

The information we collect will be included in a report and we will not ask for name, address or any other information by which you could be identified. The report will also not include any information by which you can be identified.

You do not have to participate in this research. You can choose not to participate. If you decide to participate you can withdraw any time. You can also choose not to answer specific questions.

There will be no problem if you choose not to participate or if you withdraw from the survey. If you choose not to participate, you will still be able to access services including free healthcare services at Mae Tao Clinic.

Do you have any questions about this survey?

Do you agree to participate in this survey?

CONFIRM UNDERSTANDING (Yes, I understand and hereby give my consent to be interviewed for the study)

Questionnaire Number					
Name of Respondent					
Village					
Township					
District					
Province					
State/Division					
Country					
Date of Interview	__/__/2014	Time begin		Time ended	
Name of Interviewer				Interviewer ID	
RECORD OF VALIDATION					
ESOMAR DECLARATION					
I declare that the respondent, whose name and address appear above, was unknown to me until the interview. I confirm that, before returning this questionnaire, I have checked that it meets and was carried out in accordance with the MRS Code of Conduct and instructions supplied to me for this study. I understand that the information given to me during the interview must be kept confidential.					
Signed by Interviewer:/...../.....			Signed by Supervisor:/...../.....		

QUOTA

Region	District	PLE Service	DPs in Host Community	IDPs via Intercept	Sex	%
Chiang Rai	Mae Sai	Health	n=25		Male	50
Chiang Rai	Mai Fah Luang	Health	n=25		Female	50
Mae Hong Son	Moung	Health	n=25			
Mae Hong Son	Khun Youm	Health	n=25		Age	
Tak	Mae Sot	Education & Protection & Health	n=50		14 – 24 yrs	30
Tak	Mae Ra Mad		n=50		25 – 34 yrs	40
Tak	Tha Song Yang		n=50		35 + yrs	30
Tak	Phop Pra		n=50			
Tak	Mae Tao Clinic	Education & Protection & Health		n=100		
Chiang Rai, Tak, Mae Hong Son	Other health posts			n=100		
			300	200		

NOTE: SEX AND AGE QUOTAS APPLY TO EACH LOCATION

SCREENING

S1 Do you currently work for any of the following organizations?

Civil Society/ Nongovernmental Organization (NGO)/Community Based Organization (CBO)/	1	STOP
Government office	2	
Police, security, or military	3	
None	4	CONTINUE

SHOW CARD

S2 Which of the following age groups do you fall into? **(Select one)**

Below 14 years	1	STOP CHECK QUOTA
15 - 24	2	
25 - 34	3	
35 and older	4	

S3 **RECORD SEX**

Male	1	CHECK QUOTA
Female	2	

S4 **RECORD PROVINCE**

Chiang Rai	1	CHECK QUOTA
Mae Hong Son	2	
Tak	3	

S5 **RECORD TARGET GROUP**

DPs in host community	1	GO TO HI	CHECK QUOTA
Cross-border clients in Mae Tao Clinic and other health posts	2	CONTINUE	

ASK S6 CROSS-BORDER RESPONDENTS AT MAE TAO CLINIC AND OTHER HEALTH POSTS ONLY

S6 Do you currently live in Thailand or Burma? **(Select one)**

Thailand	1	STOP
Burma	2	CONTINUE

PROGRAM ACTIVITIES - HEALTH

SHOW CARD

H1 Have you received any kind of health services in the past 12 months?

Yes	1	CONTINUE
No	2	GO TO H6

SHOW CARD

H2 What kind of health services have you received in the past 12 months? **(Select all that apply)**

General health check up	1
Treatment for disease or illness	2
Treatment for injury	3
Surgery	4
Mental care (e.g. counseling services)	5
Child Delivery	6
Pre and/or post natal care	7
Other: specify	8

SHOW CARD

H3 Who provided the health services you received in the past 12 months? **(Select all that apply)**

Through Thai health system (e.g. government hospitals in Thailand)	1
Through health system in Burma (e.g. Burmese government hospitals/clinic)	2
Back Pack Health Worker	3
Burma Medical Association (BMA)	4
Karen Department of Health and Welfare	5
Karenni Mobile Health	6
Shan Health Committee	7
Mon National Health Committee	8
Mae Tao Clinic	9
Other: Specify	10
Don't know / Not sure	11

SHOW CARD

H4 To what extent are you satisfied with the health services you have received? **(Select one)**

Very dissatisfied	1	CONTINUE
Dissatisfied	2	
Satisfied	3	GO TO H6
Very satisfied	4	

SHOW CARD

H5 Which of the following reasons describe why you were not satisfied? **(Select all that apply)**

Could not get treatment	1
Had to wait a long time	2

Could not communicate in my own language	3
Was treated unfairly or discriminatorily	4
Received poor quality treatment	5
Other: Specify	6

SHOW CARD

H6 In the past 2 years, would you say quality of health services in Burma are generally improving, staying the same or getting worse? What about Thailand? **(Select one)**

	Burma	Thailand
Improving	1	1
Same	2	2
Worse	3	3
Don't know	4	4

H7 Have you ever received health services in Thailand and later continued treatment in Burma?

Yes	1
No	2

H8 Do you currently have hospital or health care card, social security card or health insurance?

Yes	1
No	2

EDUCATION SERVICES

E1 Do you have any children in your household that are of age 6-18 yrs?

Yes	1	CONTINUE
No	2	GO TO E4

E2 How many boys and girls of age 6-18 yrs are there in your household and how many of them currently attend school? **WRITE IN NUMBER, IF NONE WRITE 0**

	TOTAL	ATTEND SCHOOL
Boys		
Girls		

SHOW CARD

E3 Who operates the schools that the children in your household are or were attending? **(Select all that apply)**

Through Thai education system (e.g. Thai government schools)	1
Schools supported by NGO/CBO in Thailand	2
Through Burmese education system in Burma	3

(e.g. Burmese government schools in South East Burma)	
Schools supported by NGO/CBO in Burma	4
Migrant Workers Education Committee	5
Karen Education Department (KED)	6
Karen Refugee Committee Education Entity	7
Karen Teacher Working Group	8
Karen Women's Organization (KWO)	9
Kayan New Generation Youth	10
Migrant Education Coordination Center	11
Mon National Education Committee	12
Youth Connect	13
Other; Specify	14
Don't know / Not sure	15

SHOW CARD

E4 What level of education have your children completed and where (i.e. in Thailand or Burma) **(Select all that apply)**

Thailand		Burma	
Not completed primary school	1	Not completed primary school	1
Primary school education	2	Primary school	2
Junior high school education	3	Secondary school	3
Senior high school education	4	High school	4
Higher education	5	Post 10 or higher	5

SHOW CARD

E5 How would you rate your level of satisfaction with each type of education *your children* have received? **ONLY ASK FOR THOSE SELECTED IN E4 (Select one per row)**

THAILAND

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied	Don't know/ Not sure
Primary school education	4	3	2	1	5
Junior high school education	4	3	2	1	5
Senior high school education	4	3	2	1	5
Higher education	4	3	2	1	5

BURMA

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied	Don't know/ Not sure
Primary school	4	3	2	1	5
Secondary school	4	3	2	1	5
High school	4	3	2	1	5

Post 10 or higher	4	3	2	1	5
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SHOW CARD

E6 Have any of your children received any of the following certifications? **(Select all that apply)**

Thai formal education certification	1
Thai non-formal education certification	2
Burma formal education certification	3
Burma non-formal education certification	4
Certification from schools supported by NGO/CBO in Thailand	5
Certification from schools supported by NGO/CBO in Burma	6
Other: specify	7
None	8

E7 Will the education your children have received be recognized by employers in Burma and/or in Thailand?

THAILAND		BURMA	
Yes	1	Yes	1
No	2	No	2
Not sure	3	Not sure	3

SHOW CARD

E8 In the past 2 years, would you say quality of education in Burma are generally improving, staying the same or getting worse? What about Thailand, improving, staying the same or getting worse? **(Select one)**

	Burma	Thailand
Improving	1	1
Same	2	2
Worse	3	3
Don't know	4	4

PROTECTION

SHOW CARD

PI Which of the following topics/issues have you seen promoted in your local community in the past 12 months? **(Select all that apply)**

Gender based violence	1
Domestic violence	2
Gender roles or gender equality	3
Child protection	4
Access to justice	5
Migrant rights	6
Labor rights	7

Women's community group	8
Women in peace building	9
National Verification	10
Health insurance/coverage	11
None of them	12

SHOW CARD

P2 In the past 12 months, which of the following activities have you participated in? **(Select all that apply)**

Activities on gender based violence	1	CONTINUE
Activities on domestic Violence	2	
Activities on gender roles or gender equality	3	
Activities on child protection	4	
Activities on access to justice	5	
Activities on migrant rights	6	
Activities on labor rights	7	
Women's community group	8	
Campaign or meeting on women in peace building	9	
Assistance in National Verification	10	
Information session about health insurance/coverage	11	
None of them	12	GO TO P5

SHOW CARD

P3 Who organized the activities that you participated in? **(Select all that apply)**

Karen Human Rights Group (KHRG)	1
Karenni National Women's Organization (KNWO)	2
Migrant Assistance Program (MAP)	3
Social Action for Women (SAW)	4
Other: Specify	5
Don't know / Not sure	6

SHOW CARD

P4 How useful were the activities you participated in to you? **(Select one)**

Very useful	1
Useful	2
Not useful	3
Not at all useful	4
Not sure	5

P5 Have you ever seen or heard of a domestic violence case in your community in the past 12 months? **(Select one)**

Yes	1	CONTINUE
No	2	
Don't know/ Not sure	3	GO TO P7

SHOW CARD

P6 Which of the following domestic violence situation did you experience in the past 12 months?
(Select all that apply)

It happened to me	1
It happened to a family member	2
It happened to someone I knew	3
I heard about it	4
I read about it	5

SHOW CARD

P7 Have you ever reported a domestic violence incident in the past 12 months, and if so to whom? (Select all that apply)

Yes, to the police	1
Yes, to an NGO	2
Yes, to Community Representative	3
No	4

FUTURE ASPIRATIONS

SHOW CARD

F1 With respect to the following issues in Burma, would you say are generally improving, staying the same or getting worse? (Select one per row)

	Improving	Same	Worse	Don't Know
Economic development	1	2	3	4
Rural development	1	2	3	4
Livelihoods	1	2	3	4
Political dialogue	1	2	3	4
Cease fire agreement	1	2	3	4
Peace process	1	2	3	4
Democratic reform	1	2	3	4
Engagement with local authorities	1	2	3	4
Recognition of ethnic nationalities	1	2	3	4
Basic services such as education and health	1	2	3	4
Food security	1	2	3	4
Land rights	1	2	3	4
Rule of law	1	2	3	4
Access to justice	1	2	3	4
Physical safety	1	2	3	4
Landmine	1	2	3	4
Disaster risk reduction	1	2	3	4
Taxation	1	2	3	4

Displacement	1	2	3	4
Drug & alcohol use	1	2	3	4
Gambling	1	2	3	4

SHOW CARD

F2 Thinking about the changes in Burma and potential future opportunities in the next 2 years (2015-2016), to what extent do you agree or disagree with the following?
(Select one per row)

		Don't agree at all	Don't really agree	Agree to some extent	Agree completely	Not sure
A	There will be more work opportunities in Burma	1	2	3	4	5
B	You need to have recognized education to find work in Burma	1	2	3	4	5
C	It will be possible to earn a higher salary in Burma compared to Thailand	1	2	3	4	5
D	Refugees will start to return to Burma	1	2	3	4	5
E	Many migrant workers in Thailand will return to Burma	1	2	3	4	5
F	Burma will become more politically stable	1	2	3	4	5
G	Conflicts in South East Burma will be resolved peacefully	1	2	3	4	5

ASK F3 - F9 DPs / BURMESE MIGRANTS IN THAILAND ONLY

F3 How many years, months, or days have you stayed in Thailand?

	Years		Months		Days
--	-------	--	--------	--	------

SHOW CARD

F4 Which of the following best describes your reason for coming to Thailand?
(Select all that apply)

Security reasons	1
Work	2
Health	3
Education	4
Follow spouse or parents	5
Reunite with family	6
Marriage	7
Born in Thailand	8
Other: specify	9

F5 Are you likely to return to live in Burma one day in the future? (Select one)

SHOW CARD

Definitely not	1	ASK F8 & F9
Probably not	2	
Yes it's likely	3	ASK F6 & F7 & F9
Yes definitely	4	
Don't know / Not sure	5	GO TO F9

SHOW CARD

F6 Which of the following represent reasons why you want to return to Burma in the future?
(Select all that apply)

I was born in Burma	1
I want to return to my home community in Burma	2
Reunite with family and friends in Burma	3
To get married in Burma	4
There are more work opportunities now in Burma	5
To study in Burma	6
I am at risks of being arrested/deported in Thailand	7
I am not able to find work in Thailand	8
I am not able to access basic services (e.g. health, education etc.) in Thailand	9
Other: specify	10

F7 When do you think you will be returning to live in Burma? In the next:

	Years		Months
Don't Know	99		

SHOW CARD

F8 Which of the following represent reasons why you don't think you will return to Burma in the future? (Select all that apply)

I'm better off here in Thailand	1
My education is not recognized in Burma	2
I don't have any family to return in Burma	3
I don't have a place to stay in Burma	4
I don't own land or property in Burma	5
I would not be able to find work in Burma	6
I would not feel safe in Burma	7
I would rather migrate to another country	8
Others; specify	9

F9 Do you have an aspiration to migrate to a country other than Burma or Thailand?

Yes	1
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No	2
Not sure	3

ASK F10-F12 CROSS-BORDER RESPONDENTS AT MAE TAO CLINIC AND OTHER HEALTH POSTS ONLY

SHOW CARD

F10 Are you likely to move elsewhere in the next 3 years, and if so where? **(Select one)**

No	1	GO TO DI
Yes, plan to move to different township or state in Burma	2	CONTINUE
Yes, plan to move to Thailand	3	
Yes, plan to move to other country	4	
Not sure	5	GO TO DI

F11 When do you think you will be moving? In the next:

	Years		Months
Don't Know	99		

SHOW CARD

F12 Which of the following represent reasons why you want to move? **(Select all that apply)**

I was not born where I live now	1
I want to return to my home community in Burma	2
Reunite with family and friends	3
To get married	4
There are more work opportunities where I will be moving to	5
To study	6
I am at risks of being prosecuted where I live now	7
I am not able to find work where I live now	8
I am not able to access basic services (e.g. health, education etc.) where I live now	9
Other: specify	10

DEMOGRAPHICS / LIVELIHOOD

SHOW CARD

D1 Which of the following best describes your marital status? **(Select one)**

Single	1
Married but no children	2
Married with children	3
Divorced	4
Widowed	5

SHOW CARD

D2 How frequently do you cross the border between Burma and Thailand? **(Select one)**

Only once	1
Once per year or less often	2
1-2 times per year	3
More than 2-3 times per year	4
More frequently	5

SHOW CARD

D5 Which of the following languages can you ... **(Select all that apply)**

	A Speak	B Read & Write
English	1	2
Thai	1	2
Burmese	1	2
Karen/Kayin	1	2
Karenni/Kayah	1	2
Mon	1	2
Shan	1	2
Other; specify	1	2
None		2

SHOW CARD

D6 Which of the following best represents your ethnicity? **(Select all that apply)**

Bamar or Burmans	1
Karen/Kayin	2
Karenni/Kayah	3
Mon	4
Shan	5
Muslim	6
Other	7

SHOW CARD

D7 What is your main activity at present time? **(Select one)**

Working or self employed, part time, seasonal or piecemeal work, subsistence farming, daily laborer	1	CONTINUE
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Studying	2	GO TO D9
Home duties	3	
Unemployed looking for work	4	
Other	5	

SHOW CARD

D8 Which of the following best describes the industry in which you work? **(Select one)**

Agriculture, forestry and fishing	1
Mining	2
Manufacturing	3
Electricity, gas and water supply	4
Construction	5
Retail and wholesale	6
Community, social, personal services, food, hotel services	7
Other; specify	8

SHOW CARD

D9 Which of the following best describes your current job position? **(Select one)**

Management level	1
Supervisor with subordinates	2
Office worker	3
Blue collar worker	4
Self employed	5

D10 What is your average wage/earning per month or per day including value of in-kind compensation? **WRITE IN AMOUNT**

Baht or Kyat / Month	Baht or Kyat / Day
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SHOW CARD

D11 Which of the following best describes the financial situation of your household? **(Select one)**

Money is sometimes not enough to buy food	1
Money is enough for food, but sometimes not enough to buy new clothes	2
Money is enough to buy food and new clothes, but not enough to buy a new home appliances, television or new tools or machinery to work with	3
Money is enough to buy home appliances, but we can't buy a new car	4
Money is enough for everything but not to buy a house or apartment	5
We could afford to buy a house or apartment if we needed	6

SHOW CARD

D12 Which of the following is applicable to you? **(Select all that apply)**

Went through National Verification process	1
Have temporary Burmese passport	2

Have permanent Burmese passport	3
Registered as a migrant worker with the Thai Ministry of Labour	4
Are a guest worker under agreement (MOU) between the Burmese and the Thai governments	5
Have color card issued for hill tribe population in Thailand	6
Other	7
None of the above	8
Refused	9

IN EACH LOCATION TAKE A PHOTO OF COMMUNITY AND SURROUNDINGS

THANK YOU FOR YOUR TIME AND COOPERATION

On-line survey

Qualification and profile questions

1. Your CBO is in: Burma/Thailand
2. Your Position is in: Operations/management
3. How many years have you worked with this organization?
4. You are: Male/Female
5. Which age group do you belong to: 18-29, 30-45, 45+
6. Which of the following services do you provide to beneficiaries:
Health/Education/Protection/Food Assistance/Cash Assistance

Governance & Legal Structure

7. Does your organization have a vision or mission statement?
Yes, Not yet, No, Not sure
8. Is there an organization diagram or similar document outlining supervisory and staff responsibilities? Yes, Not yet, No, Not sure
9. Do you have a deputy or other staff member who can fulfill the duties of the CEO/Director for short periods? Yes, Not yet, No, Not sure
10. Has your organization been legally registered? Yes in Thailand, Yes in Burma, Applied but Not Yet Approved, Not yet applied but we plan to, No, Not sure?
11. Are there regular board meetings? Yes 4 times per year or more often, Yes 2-3 times per year, Yes annually, No, Not sure, Don't have a board

Administration

12. Does your organization have written administrative procedures in place? Yes, Not yet, No, Not sure
13. Does your organization have documented travel policies and procedures in place? Yes, Not yet, No, Not sure
14. Does your organization have documented procurement policies and procedures in place? Yes, Not yet, No, Not sure
15. Does your organization have documented fixed asset policies and procedures in place? Yes, Not yet, No, Not sure

Human Resources

16. Does your organization have written job descriptions with relevant details, e.g. title, job duties/responsibilities, reporting/supervision requirements, and delegations of authority? Yes, Not yet, No, Not sure
17. Does your organization have a clear description with relevant details, e.g. title, job duties/responsibilities, reporting/supervision requirements, and delegations of authority? Yes, Not yet, No, Not sure
18. Does your organization have written recruitment guidelines in place? Yes, Not yet, No, Not sure
19. Are all key positions required in your organization filled? Yes, Not yet, No, Not sure
20. If no, is there active recruitment to fill the vacancies? Yes, Not yet, No, Not sure
21. Have the professional development needs been identified for all staff in your organization? Yes, Not yet, No, Not sure

22. Does your organization have documented personnel policies that include guidelines on work schedules, employee compensation (salary) and benefits, and leave? Yes, Not yet, No, Not sure
23. Were performance reviews conducted for each staff in your organization last year? Yes, No, Not sure
24. Does your organization keep staff resume, performance appraisals, and changes in work status on file? Yes, No, Not sure
25. Do you have a written workplan or work objectives for your current role/responsibility that is agreed between your supervisor and yourself? Yes, Not yet, No, Not sure

Financial Management

26. Are there written financial procedures? Yes, Not yet, No, Not sure
27. Are there procedures in place to safeguard financial assets (e.g. cash, checkbooks, financial documentation kept in a safe/secure location)? Yes, Not yet, No, Not sure
28. Does your organization have financial controls including standard accounting practices and segregation of duties? Yes, Not yet, No, Not sure
29. Does your organization have financial documentation for invoices, receipts and purchase orders? Yes, Not yet, No, Not sure
30. Does the organization have a master budget that includes the costs of running the organization? Yes, Not yet, No, Not sure
31. Does your organization operate with a separate budget for administration/overhead costs? Yes, Not yet, No, Not sure,
32. Are there written procedures for financial reporting? Yes, Not yet, No, Not sure
33. Was your organization audited last year by a recognized auditor, either commissioned by your organization or by donors/partners? Yes, No, Not sure
34. Does your organization have appropriate policies, procedures and practices for managing audits and closing audit findings and recommendations? Yes, Not yet, No, Not sure
35. Does your organization have experience receiving funding from different donors at the same time? Yes, No, Not sure
36. If yes, does your organization have written cost sharing procedures that are understood by relevant staff? Yes, Not yet, No, Not sure
37. Does your organization have income-generating activities other than donor funding? Yes, No, Not sure

Organizational Management

38. Does the organization have a strategic plan or business plan? Yes, Not yet, No, Not sure
39. Does the organization have an annual operational plan? Yes, Not yet, No, Not sure
40. Does your organization have its own logo? Yes, Not yet, No, Not sure
41. Does your organization have a relationship or collaboration with any of the following:
 - a. civil society organizations
 - b. government partners
 - c. international policy bodies
 - d. academic bodies
 - e. None of them
42. Does the organization have complete and up-to-date information about all stakeholders working in the same geographical and technical areas? Yes, Most, Some , No, Not sure

- 43. Are regular meetings held for ALL staff? Yes, No, Not sure
- 44. Are multiple staff members (technical, administrative, financial) involved in relevant decision-making processes? Yes, No, Not sure

Program Management

- 45. Does the organization have a copy of all donor agreements readily available? Yes, No, Not sure
- 46. Does the organization have systems for regularly reviewing and documenting progress on the work plan (program, donor or national indicators, objectives and strategies)? Yes, Not yet, No, Not sure
- 47. Does the organization involve the community in program activities? Yes, Not yet, No, Not sure
- 48. Does the organization provide training in gender equality issues? Yes, Not yet, No, Not sure

Project Performance Management

- 49. Does your organization have a document that outlines service delivery standards? Yes, Not yet, No, Not sure
- 50. Does your organization have a documented process for project monitoring or quality assurance in place? Yes, Not yet, No, Not sure
- 51. Does your organization have a documented M&E plan that includes process (output) and outcome indicators and schedule? Yes, Not yet, No, Not sure
- 52. Does your organization have a staff member or outside provider designated to manage organizational information system? Yes, Not yet, No, Not sure

Improvements and Future Supports

- 53. How would you rate your organizational capacity overall including program/project management, administration and financial management?

Very weak, weak, average, strong, very strong

- 54. To what extent have your organizational capacity including program/project management, administration and financial management improved in the past 2 years?

No change over the past 2 years

We have improved a little bit but not much

We have improved in some areas but not in others

We have improved in most areas

We have seen a substantial improvement in all areas.

- 55. To what extent do you require support for strengthening your organizational capacity after the PLE project end date in September 2015?

No more support needed at all

We will need less support than before

We will need about the same support as before

We will need more support than before

We will need a lot more support than before

Technical Capacities relating to Service Delivery

Just a few more questions on your technical capacity.

1. Have the organization conducted assessments of technical capacity for service delivery? Yes, No, Not sure
2. Have the organization conducted participatory need assessments of targeted beneficiaries? Yes, No, Not sure
3. Does your organization have a document that projects future service needs of targeted beneficiaries? Yes, Not yet, No, Not sure
4. Does your organization have a technical capacity development plan that correspond with future service needs? Yes, Not yet, No, Not sure
5. Does your organization have systems to build and improve technical capacity of staff? Yes, Not yet, No, Not sure
6. How would you rate your organization's capacity to deliver services to community people?

Very weak, weak, average, strong, very strong

7. To what extent have your organization's capacity to deliver services to community people improved in the past 2 years?

No change over the past 2 years

We have improved a little bit but not much

We have improved in some areas but not others

We have improved in most areas

We have seen a substantial improvement

8. To what extent do you require support for strengthening your organization's technical capacity to deliver services to the community people after the PLE project is ended in September 2015?

No more support needed at all

We will need less support than before

We will need about the same support as before

We will need more support than before

We will need a lot more support than before

ANNEX V: SOURCES OF INFORMATION

List of Resource Materials

(Coded and Modified from PLE Index of Introductory Program & Contextual Documents)

I. Contractual documents

PLE Co-operative Agreement AID-486-A-12-00003-00 (Dec 2011)
PLE CA AID-486-A-12-00003-00 Modification 1 (Dec 2012)
PLE CA AID-486-A-12-00003-00 Modification 2 (Sept 2013)
PLE CA AID-486-A-12-00003-00 Modification 3 (Jan 2014)
PLE Final Technical Proposal Narrative (with Annexes)

2. Project documents

PLE Overview
Enhancing Social Services and Peace Building in South East Burma
PLE Project Milestones
PLE Partner Summary
PLE Training Matrix
USAID Evaluation Information Request
SHIELD Final Narrative Report (2012)

3. PLE reports

PLE Q1&2 Narrative Report (& annexes)
PLE Q3 Narrative Report (& annexes)
PLE Q4 Narrative Report (& annexes)
PLE Q5 Narrative Report (& annexes)
PLE Q6 Narrative Report (& annexes)
PLE Q7 Narrative Report (& annexes)
PLE Q8 Narrative Report (& annexes)
PLE Q9 Narrative Report (& annexes)
PLE Q10 Narrative Report (& annexes)
PLE monthly Burma Update Reports August 2013 – September 2014

4. Annual program strategy and workplans

PLE PY1 Final Workplan Report
PLE PY2 Workplan Narrative Overview
PLE PY2 Costed Workplan
PLE PY2 Final Workplan Report
PLE PY3 Program Strategy Overview
PLE PY3 Costed Workplan

5. Monitoring and evaluation reports

PLE Performance Management Plan: PY1 Final Report
PLE Performance Management Plan: PY2 Final Report
PLE Indicator Reference Sheet
PMP & Workplan Documentation Index
PLE Results Framework
Monitoring and Evaluation Plan

PLE Mid-Term Review Report (2013)
Knowledge, Practice and Coverage Survey (2013)
TBC Burma/Myanmar Programme Report (2013)
TBC Burma/Myanmar Programme Report (2012)
Surviving or Thriving on the Thai-Burma Border: Vulnerability and Resilience in Mae Sot, Thailand: International Rescue Committee (Jan 2012)
Strengthening Monitoring in Eastern Burma: Nordic Consulting Group (June 2011)
Diagnosis: Critical - Health and Human Rights in Eastern Burma: The Burma Medical Association, National Health and Education Committee, Back Pack Health Worker Team (Oct 2010)
SHIELD Evaluation (2010)

6. Project governance

PMG TOR Final
PMG Minutes 27 January 2012
PMG Minutes 18 May 2012
PMG Minutes 8 October 2012
PMG Minutes 7 January 2013
PMG Minutes 30 April 2013
PMG Minutes 1 August 2013
PMG Minutes 22 October 2013
PMG Minutes 4 February 2014
PMG Minutes 30 May 2014 (*in draft; to be confirmed*)

7. Maps

South East Burma Health Services Map
Education in South East Burma Maps
Four Thailand Provinces Health Maps
Migrant Education Maps
Food Security Assistance Map 2012 to June 2014
Refugees' Previous Townships of Residence: The Border Consortium (February 2013)
Displaced Populations: The Border Consortium (December 2012)
3W South East Myanmar - Health
3W South East Myanmar - Education
3W South East Myanmar - Livelihoods
Myanmar States/Regions and Townships (April 2012)

8. Contextual reports

AusAID (2012) **Independent Evaluation of Australia's Assistance to Refugees on the Thai-Myanmar Border**

Clapp, Priscilla and DiMaggio, Suzanne (2013). **Sustaining Myanmar's transition: Ten critical challenges**. New York: The Asia Society

DFID (2012). **Support to Conflict Affected People and Peace Building in Burma (2012-2015)**. International Rescue Committee (2012). **Surviving or Thriving On the Thai-Burma Border: Vulnerability and Resilience in Mae Sot, Thailand**. Bangkok: Thailand

IOM and ARCM (2013). **Assessing potential changes in the migration patterns of Myanmar migrants and their impacts on Thailand**. Bangkok: International Organization for Migration, Country Mission in Thailand

Jolliffe, Kim (2014) **Ethnic conflict and social services in Myanmar's contested regions**. Yangon: Myanmar

- Jolliffe, Kim (2014b) **Ceasefires and durable solutions in Myanmar: a lessons learned review**. UNHCR Research Paper No. 271
- Larlee, Portia (2014) Border aid organisations face funding uncertainty, July 10, 2014, **Mizzima Business Weekly**
- Peace Donor Support Group (PDSG) (2013). **Desktop review of needs and gaps in conflict-affected parts of Myanmar**. Retrieved from http://www.peacedonorsupportgroup.com/uploads/1/8/1/9/18194913/stocktake_mpc_20130701_final.pdf
- The Border Consortium (2012). **Changing realities, poverty and displacement in South East Burma/Myanmar**. Bangkok: Thailand
- The Border Consortium (2013) **Poverty, displacement and local governance in South East Burma/Myanmar**. Bangkok: Thailand
- The Border Consortium (2014). **Protection and security concerns in South East Burma/Myanmar**. Bangkok: Thailand.

9. List of Interviews

Date	Informants	Segment	Location	Note
	Bangkok			
28-Jul	USAID/RDMA	Donor/GOV/INGO/Embassy (1)	Thailand (1)	
31-Jul	IRC	Implementing Partner (1)	Thailand (2)	
	WE	Implementing Partner (2)	Thailand (3)	
	TBC	Implementing Partner (3)	Thailand (4)	
	MTC	Implementing Partner (4)	Thailand (5)	
20-Aug	Health Administration office, MoPH	Donor/GOV/INGO/Embassy(2)	Thailand (6)	
	IOM Bangkok	Donor/GOV/INGO/Embassy (3)	Thailand (7)	
29-Aug	DFID Burma	Donor/GOV/INGO/Embassy (4)	Thailand (8)	
1-Sep	Office of Non formal and informal Education, MoE	Donor/GOV/INGO/Embassy (5)	Thailand (9)	
3-Sep	UNHCR Pha An	Donor/GOV/INGO/Embassy (6)	Thailand (10)	
4-Sep	UN- International Labour Organisation	Donor/GOV/INGO/Embassy (7)	Thailand (11)	
	EU	Donor/GOV/INGO/Embassy (8)	Thailand (12)	
	IOM Burma	Donor/GOV/INGO/Embassy (9)	Thailand (13)	
5-Sep	U.S. Embassy Bureau of Populations, Refugee and Migration (PRM)	Donor/GOV/INGO/Embassy (10)	Thailand (14)	
	PRM	Donor/GOV/INGO/Embassy (11)	Thailand (15)	
	Kim Jolliffe	Donor/GOV/INGO/Embassy (12)	Thailand (16)	
8-Sep	Office of Basic Education Commission , MoE	Donor/GOV/INGO/Embassy (13)	Thailand (17)	
10-Sep	DFAT	Donor/GOV/INGO/Embassy (14)	Thailand (18)	
7-Oct	IRC	Implementing Partner	Thailand	IRC

Date	Informants	Segment	Location	Note
				second time
	Mae Sot			
8-Sep	TBC	Implementing Partner	Thailand	TBC second time
	MTC	Implementing Partner	Thailand	MTC second time
9-Sep	IRC	Implementing Partner	Thailand	IRC third time
	WE	Implementing Partner	Thailand	WE second time
	Rangoon			
25-Aug	PDO, Burma Mission	Donor/GOV/INGO/Embassy (15)	Burma (1)	
	DG office, Burma Mission	Donor/GOV/INGO/Embassy (16)	Burma (2)	
	MD office, Burma Mission	Donor/GOV/INGO/Embassy (17)	Burma (3)	
	Health office, Burma Mission	Donor/GOV/INGO/Embassy (18)	Burma (4)	
	OTI office, Burma Mission	Donor/GOV/INGO/Embassy (19)	Burma (5)	
26-Aug	PACT	Donor/GOV/INGO/Embassy (20)	Burma (6)	
	WON and KWEG	Beneficiary (1,2)	Burma (7)	
	UNICEF	Donor/GOV/INGO/Embassy (21)	Burma (8)	
	3MDG	Donor/GOV/INGO/Embassy (22)	Burma (9)	
	MEC	Donor/GOV/INGO/Embassy (23)	Burma (10)	
	Kayah State			
27-Aug	State Health Office Department, Kayah State	Donor/GOV/INGO/Embassy (24)	Burma (11)	
	KnGY	Sub-grantee (1)	Burma (12)	
	K N W O	Sub-grantee (2)	Burma (13)	
	CHDN	Sub-grantee (3)	Burma (14)	
	YLFC	Beneficiary (26)	Burma (15)	
28-Aug	Village I			
	Villagers, Kye Poe Gyi (Kaylyar)	Beneficiary (3)	Burma (16)	
	Community Leader, Kye Por Gyi (Kaylyar)	Beneficiary (4)	Burma (17)	
	Womwn Village Education and Advcacy Team	Beneficiary (5)	Burma (18)	

Date	Informants	Segment	Location	Note
	Back Pack Health Worker Team (BPHWT) Volunteer	Beneficiary (6)	Burma (19)	
	Village 2			
	Daw Ta Ma Gyi Village (KnMHC)	Sub-grantee (4)	Burma (20)	
	Patients, villagers	Beneficiary (7)	Burma (21)	
29-Aug	Village 1 (Ka pu)			
	Government School teacher	Beneficiary (8)	Burma (22)	
	Village School Committee and Village Head	Beneficiary (9)	Burma (23)	
	KNGY Volunteer teacher	Beneficiary (10)	Burma (24)	
	Village 4 Saung Do (Demoso) BMA Clinic	Sub-grantee (5)	Burma (25)	
	Village 2, near Shan border			
	Government School Teachers	Beneficiary (11)	Burma (26)	
	Community Committee	Beneficiary (12)	Burma (27)	
	Village 3, near Shan border			
	Government School teachers	Beneficiary (13)	Burma (28)	
	KNGY Volunteer teacher	Beneficiary (14)	Burma (29)	
	Mon State			
31-Aug	Rahmonya Peace Foundation (RPF)	Sub-grantee (6)	Burma (30)	
	Mon National Health Committee	Sub-grantee (7)	Burma (31)	
	Mon Womens Organization	Donor/GOV/INGO/Embassy (25)	Burma (32)	
	Mon National Education Committee	Sub-grantee (8)	Burma (33)	
1-Sep	Village 1 (Naing Slain)			
	Students	Beneficiary (15)	Burma (34)	
	Community	Beneficiary (16)	Burma (35)	
	Mon School Teacher	Beneficiary (17)	Burma (36)	
	Village 2			
	Students	Beneficiary (18)	Burma (37)	
	Mon Primary school teachers	Beneficiary (19)	Burma (38)	
	Community	Beneficiary (20)	Burma (39)	
	Kayin State			
2-Sep	Naung Kaing (Kawkareik) BPHWT clinic KNU Control	Sub-grantee (9)	Burma (40)	

Date	Informants	Segment	Location	Note
	Health worker (BPHWT)			
	Saw San Wai Aung, Post high school program Pha-An	Donor/GOV/INGO/Embassy (26)	Burma (41)	
	Karen Dept of Health and Welfare (KDHW)	Sub-grantee (10)	Burma (42)	
	Education Gather Group (EGG) Local Education Foundation in Hpa An	Donor/GOV/INGO/Embassy (27)	Burma (43)	
	Mon State			
3-Sep	MNEC (second time)	Sub-grantee	Burma	MNEC second time
	Mae Sot, Tak			
5-Sep	Baan Huay Ka Lok SDHPC and Wang Kaew Friendship Corner	Donor/GOV/INGO/Embassy (28)	Thailand (19)	
	Community Beneficiary	Beneficiary (21)	Thailand (20)	
	Mae Tao Mai School	Beneficiary (22)	Thailand (21)	
	Mobile Legal Clinic	Donor/GOV/INGO/Embassy (29)	Thailand (22)	
	Community Leader	Beneficiary (23)	Thailand (23)	
6-Sep	In Mea Sot			
	Suwanmit	Sub-grantee (11)	Thailand (24)	
	CIDKP	Sub-grantee (12)	Thailand (25)	
	Ethnic Health Organizations (Health Convergence Core Group (HCCG))	Donor/GOV/INGO/Embassy (30)	Thailand (26)	
	MAP	Sub-grantee (13)	Thailand (27)	
	MAP Community Volunteer	Beneficiary (24)	Thailand (28)	
	In Myawaddy, Kayin State			
	Tha Blu Koh Kee	Beneficiary (25)	Burma (44)	
7-Sep	In Mae Sot, Tak			
	Ethnic Education Organization at TPC	Donor/GOV/INGO/Embassy (31)	Thailand (29)	
	Pre-service teacher training	Beneficiary (26)	Thailand (30)	
	Keren Teacher Working Group (KTWG)	Sub-grantee (14)	Thailand (31)	

Date	Informants	Segment	Location	Note
	Migrant Rights Promotion working Group	Beneficiary (27)	Thailand (32)	
	Gender Coordination Network	Beneficiary (28)	Thailand (33)	
	In Myawaddy, Kayin State			
	Kokko (BMA)	Beneficiary (29)	Burma (45)	
8-Sep	In Mae Sot, Tak			
	Umphium Mai Regugee Camp	Donor/GOV/INGO/Embassy (32)	Thailand (34)	
	MoE Migrant Education Coordination Center (MoE)	Sub-grantee (15)	Thailand (35)	
	Thai Gov Social Welfare	Donor/GOV/INGO/Embassy (33)	Thailand (36)	
	Mae Sot Hospital	Donor/GOV/INGO/Embassy (34)	Thailand (37)	
	One Stop Crisis Center	Donor/GOV/INGO/Embassy (35)	Thailand (38)	
	Social Action for Women-SAW	Sub-grantee (16)	Thailand (39)	
9-Sep	Mae Sariang, MHS			
	KORD	Sub-grantee (17)	Thailand (40)	
	KWO	Sub-grantee (18)	Thailand (41)	
	KTWG	Sub-grantee	Thailand	KTWG second time
10-Sep	Mae Hong Son			
	MHS Province Health Office	Sub-grantee(19)	Thailand (42)	
	Baan Huay Phoung (Health Worker Interview)	Beneficiary (30)	Thailand (43)	
	Baan Huay Phoung	Beneficiary (31)	Thailand (44)	
	Karen Social Welfare and Development Center (KSWDC)	Sub-grantee (20)	Thailand (45)	
	Karen Teacher Working Group (KTWG)	Sub-grantee	Thailand	KTWG third time
	PLE Director- Shane (IRC)	Implementing Partner	Thailand	IRC forth time
11-Sep	KNRC and Camp Committee	Donor/GOV/INGO/Embassy (36)	Thailand (46)	
	KNHD	Sub-grantee (21)	Thailand (47)	
	WCC	Donor/GOV/INGO/Embassy (37)	Thailand (48)	

Date	Informants	Segment	Location	Note
	Health Post in Long neck Village Kayan	Beneficiary (32)	Thailand (49)	
12-Sep	Chiang Mai and Chiang Rai			
	Payap University	Donor/GOV/INGO/Embassy (38)	Thailand (50)	
	Kesan	Sub-grantee (22)	Thailand (51)	
	TBC	Implementing Partner	Thailand	TBC third time
	Chiang Rai Provincial Health Office	Sub-grantee (23)	Thailand (52)	
13-Sep	Mae Sai, Chaing Rai			
	Community Health Worker	Donor/GOV/INGO/Embassy (39)	Thailand (53)	
	Loi Kaw Wan IDP Camp Committee, Health Post	Donor/GOV/INGO/Embassy (40)	Thailand (54)	
	IDP Villagers	Beneficiary (33)	Thailand (55)	
14-Sep	Community near Mae Sai Hospital, Health Post	Beneficiary (34)	Thailand (56)	
	Health Post, Baan Rong Pra Jao (DP)	Donor/GOV/INGO/Embassy (41)	Thailand (57)	

	Total Participants Interviewed	Thailand	Burma
Donor/GOV/INGO/Embassy	41	28	13
PLE Consortium Partners	4	4	0
Beneficiaries in target communities	34	12	22
Sub-grantees	23	13	10
TOTAL	102	57	45

ANNEX VI: DETAILED FINDINGS - BENEFICIARIES SURVEY

The survey was conducted in Thailand with PLE Beneficiaries in Thailand (PLE BT) and PLE Beneficiaries in Burma (PLE BB) who live in Burma but had crossed the border to Thailand temporarily.

PLE BT were interviewed in Chiang Rai, Mae Hong Son and Tak with a total sample of n=300. PLE BB were intercepted at the MTC and 8 PLE intervention districts in Chiang Rai, Mae Hong Son and Tak with a total sample of n=200.

All interviews were done face to face. Since it proved difficult to do any form of probability sampling, and the profile of the actual beneficiary population was unknown, age and sex quotas were used based on a recent study by IOM (Myanmar Migrant Survey, Dec 2013) that was carried out with a similar population.

Demographic Profile

In terms of sex, age, ethnicity and marital status the PLE BT and PLE BB samples have very similar profiles and shows data collection has been carried out according to instructions.

Within the PLE BB sample some differences were found between provinces. In terms of ethnicity, more Karen, Kerenni and Shan were found in Mae Hon Son whereas the other two provinces had significantly more Burmans. Tak also had a slightly higher proportion of people who were married.

Demographic Profile	PLE BT n=300	PLE BB n=200
Base: All participants	(%)	(%)
Sex		
Male	49	50
Female	51	50
Age		
15-24	29	30
25-34	40	40
35 or older	31	30
Ethnicity		
Bamar/Burmans	52	58
Karen/Kayin	29	29
Karenni/Kayah	7	-
Mon	3	2
Shan	9	4
Muslim and Other	1	9
Marital Status		
Single	33	27
Married	65	70
Divorced or Widowed	2	3

Economic Profile

Again, the two samples were found to have quite similar economic profiles. More men than women have employment, 95% compared to 80% for PLE BT and 95% compared to 86% for PLE BB. When looking at the three provinces, PLE BT living in Mae Hong Son were found to be worse off economically compared to PLE BT living in Chiang Rai and Tak.

Base: All participants / Those working

Economic Profile	PLE BT	PLE BB	Work Profile	PLE BT	PLE BB
Base: All participants	n=300	n=200	Base: Those working	n=271	n=176
	(%)	(%)		(%)	(%)
Employment Status			Current position		
Employed / Self employed	90	88	Management level	< 1	< 1
Studying	3	2	Supervisor	< 1	2
Home duties	4	6	Office worker	3	< 1
Unemployed	3	5	Blue collar worker	72	67
Other	< 1	-	Self employed	24	29
Socioeconomic Status			Industry of work		
E – can't always buy food	27	29	Agriculture	33	29
D – can't always buy clothes	37	38	Manufacturing	2	2
C – can't afford appliances	24	23	Construction	13	8
AB – Better off	12	11	Retail or wholesale	24	31
			Community, pers. serv.	26	22
			Other	2	8
			Income / Day (THB)		
			Average (median)	150	133
			Maximum	4000	2000
			Minimum	33	33

Mobility Profile

As expected, PLE BB cross the border more frequently compared to PLE BT, however, 76% of PLE BT cross the border at least once per year or more often. The vast majority of PLE BT can speak Thai and over half of the PLE BB can speak Thai. In terms of legal status, having a passport or some form of formal registration, one in four PLE BT and nearly one third of PLE BB don't have any form of legal status.

Amongst PLE BB, twice as many women (41%) compared to men (19%) have obtained National Verification status. Looking at the result across provinces it was found that no PLE BT in Mae Hong Son have completed National Verification and only 2 percent have a Burmese passport. Instead, most (66%) of them have a Color Card for hill tribe. PLE BT in Mae Hong Son also cross the border less frequently compared to the other two provinces.

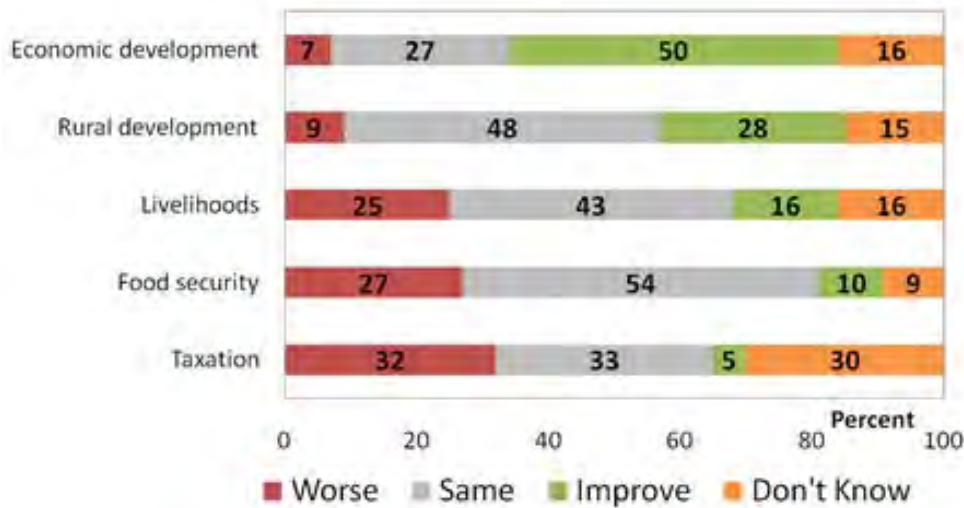
Base: All participants

Convergence Profile Base: All participants	PLE BT n=300 (%)	PLE BB n=200 (%)
Crossing the border		
Only once	24	9
Once per year or less	47	13
Every 6-11 months	14	18
Every 1-5 months	6	25
More frequently	9	36
Literacy (speaking)		
English	17	10
Thai	89	54
Burmese	85	94
Karen/Kayin	33	29
Karenni/Kayah	6	-
Mon	5	2
Shan	10	5
Other	< 1	< 1
Legal Status		
National Verification	21	30
Temporary Burmese passport	9	19
Permanent Burmese passport	2	-
Registered migrant worker TMoL	12	< 1
Guest worker (MOU)	2	2
Color Card for hill tribe	35	2
None	25	29

Situation in Burma (PLE BT) – Economic

Amongst PLE BT in Thailand, there is a greater majority who feel economic and rural development is improving in Burma, compared to getting worse. Livelihoods, food security and taxation on the other hand has a greater majority saying it is becoming worse in Burma.

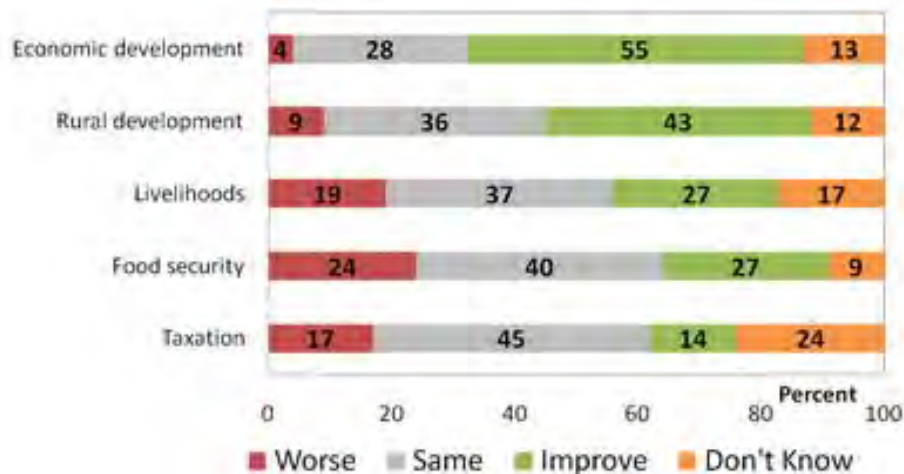
Base: All PLE BT



Situation in Burma (PLE BB) – Economic

Amongst PLE BB who have entered into Thailand feel more strongly that the situation in Burma is improving when it comes to economic development and rural development compared to PLE BT. Livelihoods and food security also had larger proportions who rated it as improving.

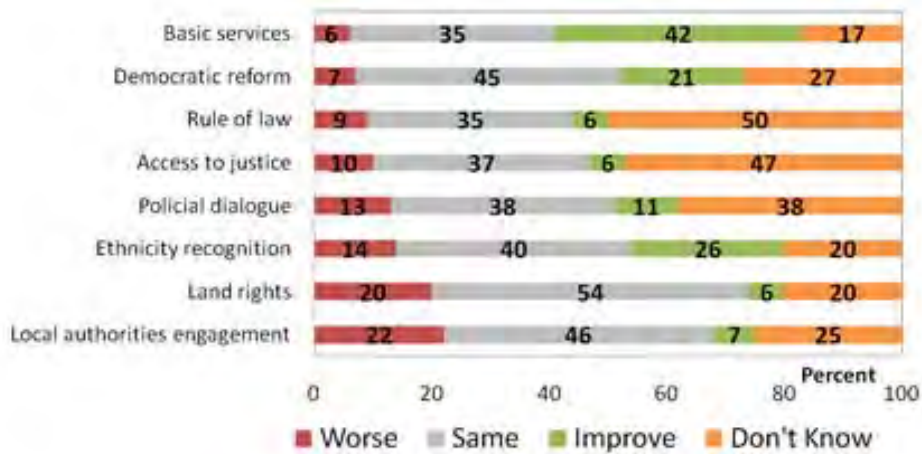
Base: All PLE BB



Situation in Burma (PLE BT) – Social

In terms of social situation, PLE BT in Thailand think basic services, democratic reform and ethnicity recognition are improving to a greater extent than becoming worse. Quite a large proportion did not comment about improvement regarding rule of law, access to justice and political dialogue.

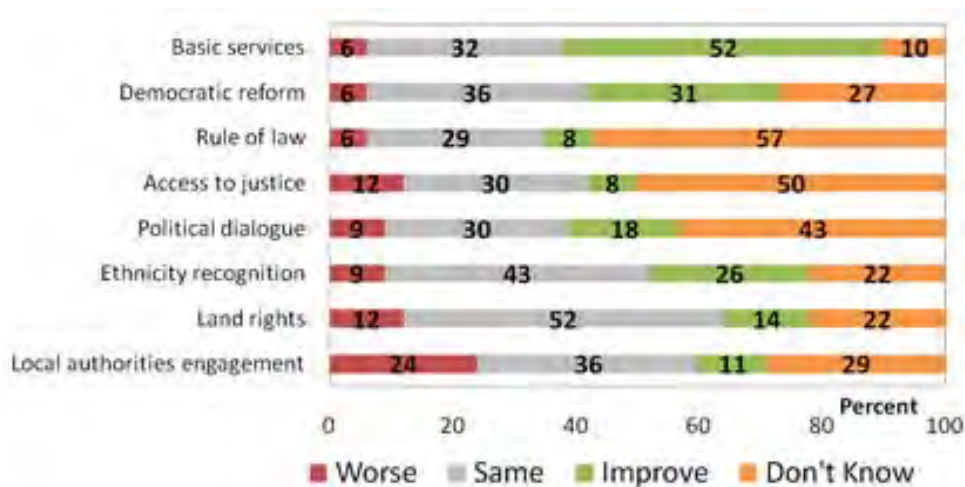
Base: All PLE BT



Situation in Burma (PLE BB) – Social

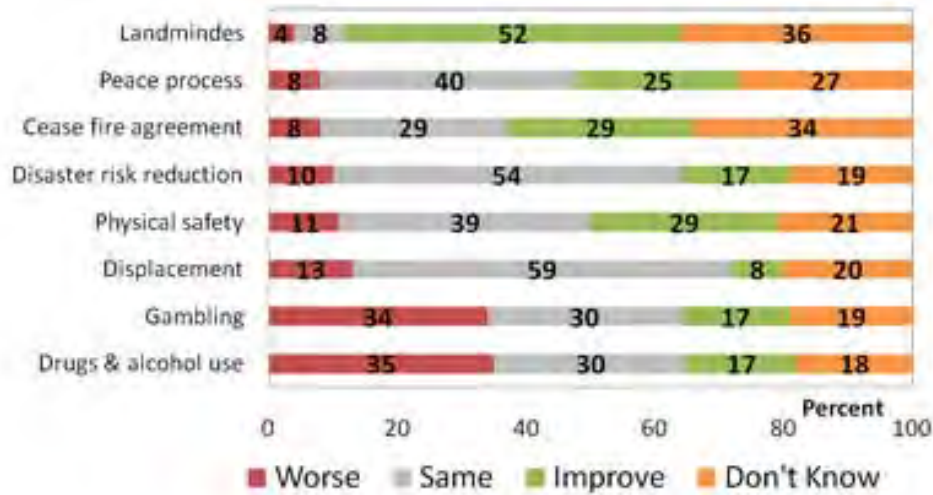
In terms of social situation, PLE BB also think basic services, democratic reform and ethnicity recognition are improving and their view is more strongly positive compared to PLE BT. Again, many could not comment on rule of law, access to justice and political dialogue, saying they did not know.

Base: All PLE BB



Situation in Burma (PLE BT) – Physical

The physical security situation in Burma is seen to be improving to a greater extent by PLE BT, especially the removal of land mines, the peace process, cease fire agreement and physical safety. Gambling together with drug and alcohol use are to a greater extent seen to be getting worse. Men said gambling has become worse to a greater extent (40%) compared to women (28%).

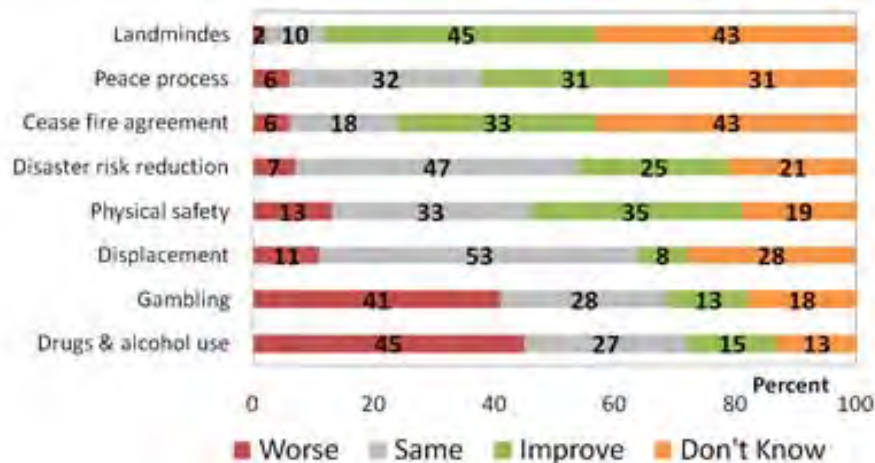


Base: All PLE BT

Situation in Burma (PLE BB) – Physical

The physical security situation in Burma is largely seen to be moving in the right direction by PLE BB, especially the removal of land mines, the peace process, cease fire agreement, disaster risk reduction and physical safety. However, gambling, drugs and alcohol are seen to be worsening. With respect to physical safety, women were found to say the situation has improved to a greater extent (41%) compared to men (28%). On the other hand, men said gambling has become worse to a greater extent (48%) compared to women (34%).

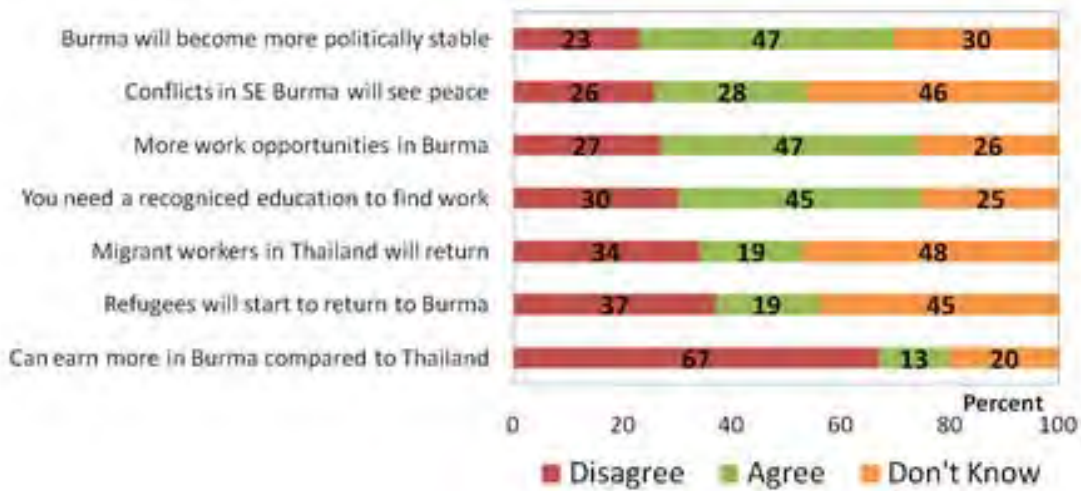
Base: All PLE BB



Future Outlook (PLE BT)

PLE BT hold a mixed view of the future outlook for Burma. Political stability and work opportunities are on average expected to improve but there is more disagreement when it comes to refugees and migrant workers returning to Burma as they can earn more money working in Thailand.

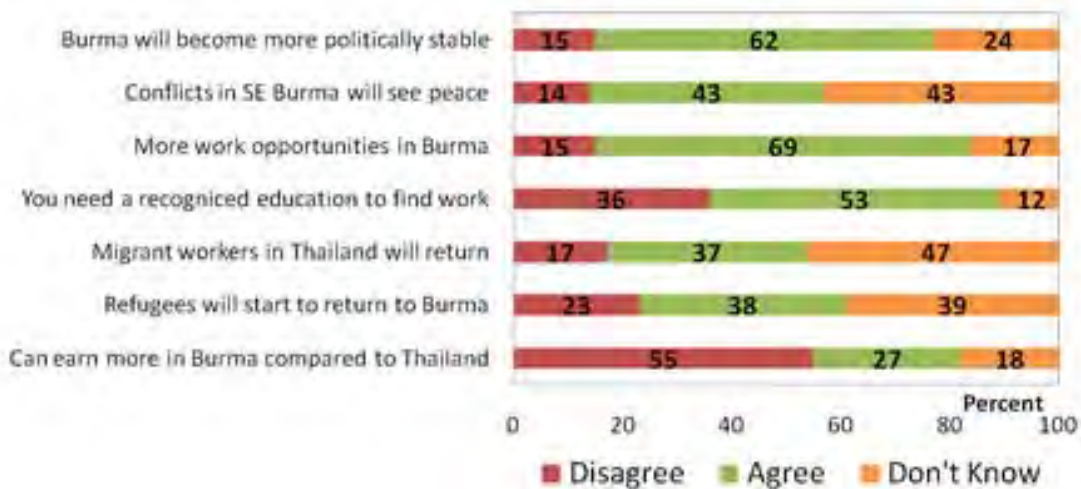
Base: All PLE BT



Future Outlook (PLE BB)

PLE BB hold a more favorable view towards the future outlook for Burma. Political stability, peace in SE Burma and work opportunities are expected to improve and a larger proportion said it could potentially attract refugees and migrant workers back to Burma. Still, a large proportion are not sure at this point as they can earn more money working in Thailand.

Base: All PLE BB

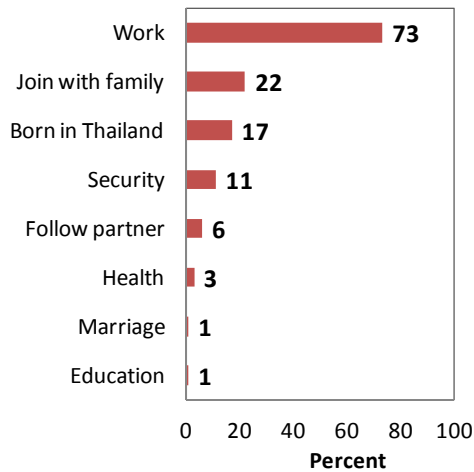


Pull and Push Factors

Reason for PLE BT to Come to Thailand

The vast majority (73%) came to Thailand to find work. One in five (22 %) came to join with family, 17% were born in Thailand and 11% come because of security. However, security was a greater reason amongst PLE BT in Mae Hong Son (28%) and 40% of them were also born in Thailand. In Mae Hong Son 36% stated they came to Thailand to find work compared to those staying in Tak (84%) and Chaing Rai (68%). PLE BT have stayed in Thailand on average for 15 years but was significantly higher in Mae Hong Son at 23 years.

Base: All PLE BT



Reason	Chiang Rai n=50 (%)	Mae Hong Son n=50 (%)	Tak n=200 (%)
Work	68	36	84
Join with family	22	22	23
Born in Thailand	16	40	12
Security	10	28	7
Follow partner	4	10	5
Health	2	-	4
Marriage	-	-	1
Education	2	2	1
Average stay in Thailand (years)	14	23	14

Reasons for PLE BT to Return to Burma

One third of PLE BT said it is likely they will return to Burma. The time for return is unknown for most and for those who do know they expect to move in 5 years time or later. Having been born in Burma and reuniting with family and friends are the most compelling reasons for wanting to return. Likelihood to return was lowest in Mae Hong Son with 10% followed by Chaing Rai with 28% and Tak with 41%.

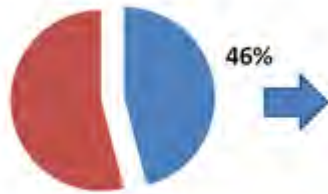
Base: All PLE BT / PLE BT who are likely to return



Reasons for PLE BT NOT to Return to Burma

Nearly half the PLE BT indicated they are not likely to return since they are better off in Thailand. One in four also have no family to return to.

Definitely / Probably NOT Return



Reason for NOT Returning to Burma

Reason	n=139 (%)
Base: Those unlikely to return	
Better off in Thailand	85
Education is not recognized in Burma	10
No family to return to	25
No place to stay in Burma	17
No land or property in Burma	14
Not able to find work in Burma	18
Not feel safe in Burma	14
Rather migrate to another country	-

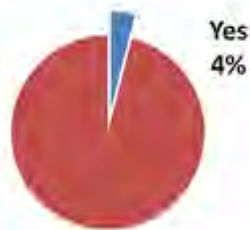
Base: All PLE BT / PLE BT unlikely to return

Aspiration to Migrate to Other Country

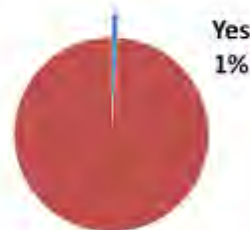
The proportion of PLE BT and PLE BB who have come across the border to Thailand who wants to migrate to a third country is very small, less than 5 percent.

Base: All respondents

PLE BT in Thailand

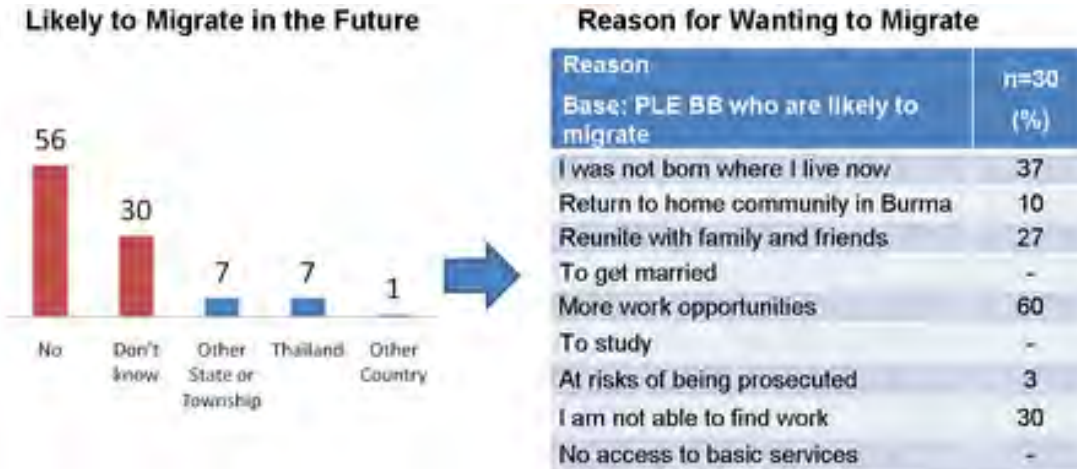


PLE BB in Burma



Likelihood & Reasons for PLE BB to Migrate

Most PLE BB who come across the border don't want to migrate to a third country. The few who want to migrate want to migrate to Thailand or interstate within Burma to find better work opportunities.



Base: All PLE BB / PLE BB who may migrate

Health

Received Health Care in Past 12 Months

Most PLE BT and PLE BB have had access to health care when they needed it. Most come for treatment for disease or illness followed by general health check up.

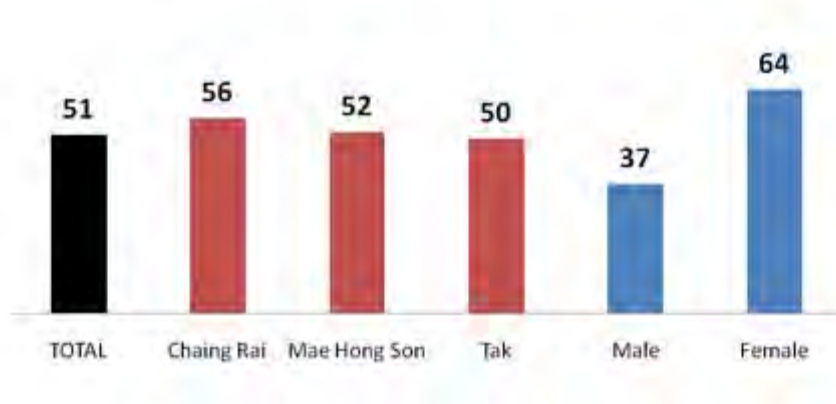


Base: All respondents / Those who received health care

Received Health Care Amongst PLE BT

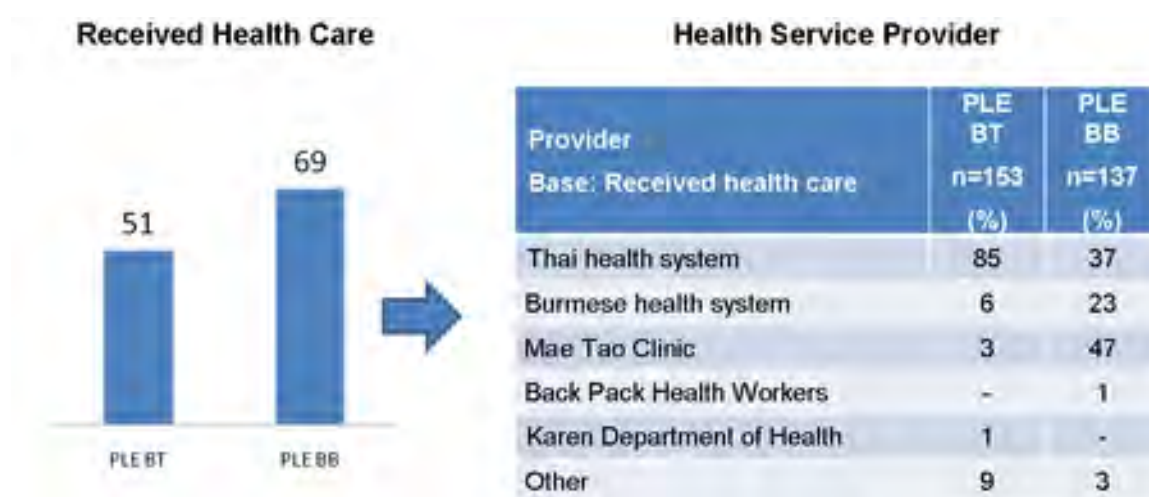
Amongst PLE BT it was found that significantly more women (64%) compared to men (37%) have received health services in the past 12 months. No evidence was found to suggest any differences in terms of access to health across provinces. For PLE BB were not analyzed this way due to the fact that half the sample was taken from MTC where most of those interviewed were patients.

Base: All PLE BT



Health Care Provider

The vast majority of PLE BT received health services through the Thai health system. Half the PLE BB were interviewed at the MTC so received health services from there but many also received service through the Thai health system and to a lesser extent from the Burmese health system.



Base: All respondents / Those who received health care

Level of Satisfaction

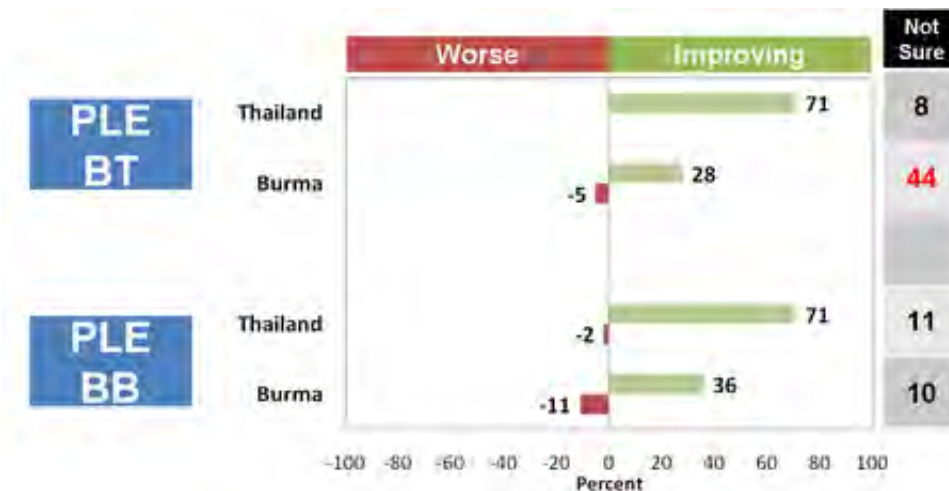
Satisfaction levels for health services are very good, both for PLE BT and PLE BB. It shows PLE has been successful in providing quality care. If patients were not satisfied the reason was either long waiting time, poor treatment or not being able to communicate in their own language. But the cases are few and far in between.



Base: All respondents / Those who received health care

Perceived Improvement in Health Care Past 2 Years

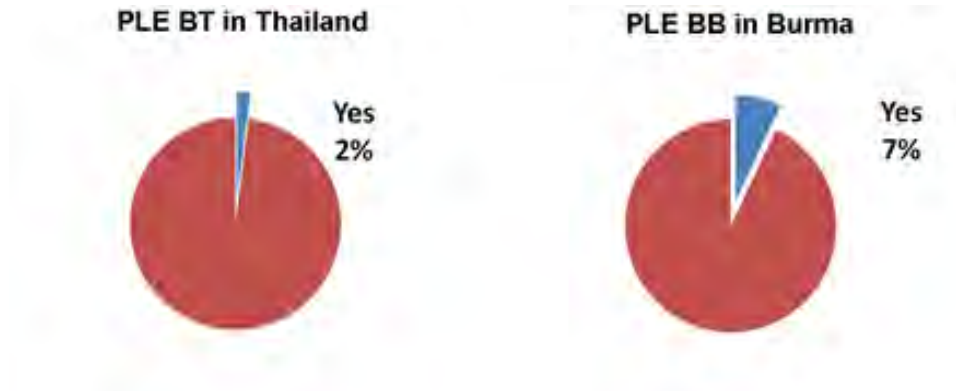
Health care services are seen to be improving both in Thailand and Burma but to a greater extent in Thailand.



Base: All respondents

Cross Border Treatment

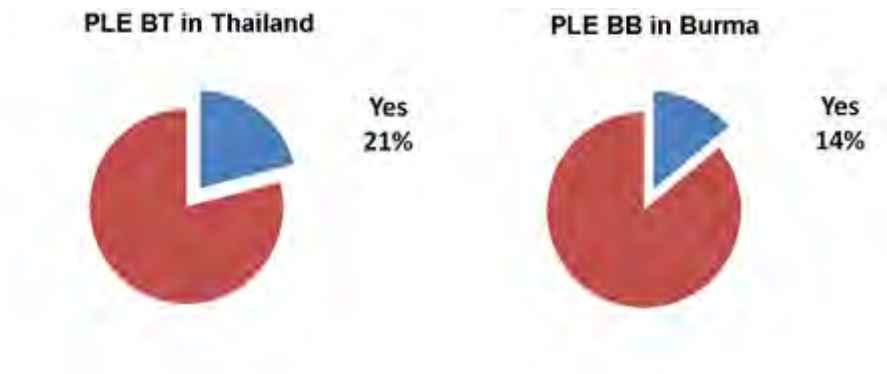
Cross border treatment, possibly through referral, is happening and in most cases patients are being referred from Burma to Thailand.



Base: All respondents

Own Hospital / Health Care Card

Around one in five PLE BT own a health care card. Fewer PLE BB own such a card.

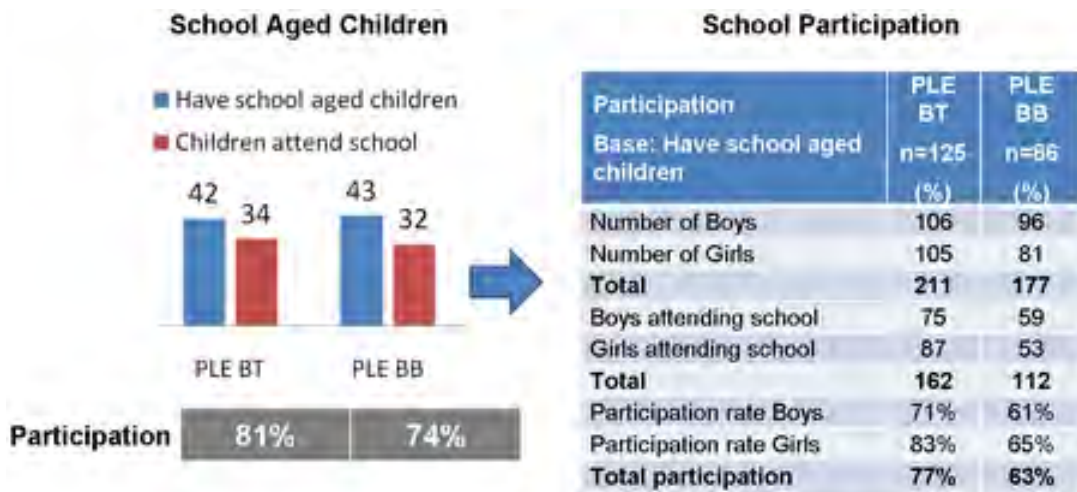


Base: All respondents

Education

School Participation

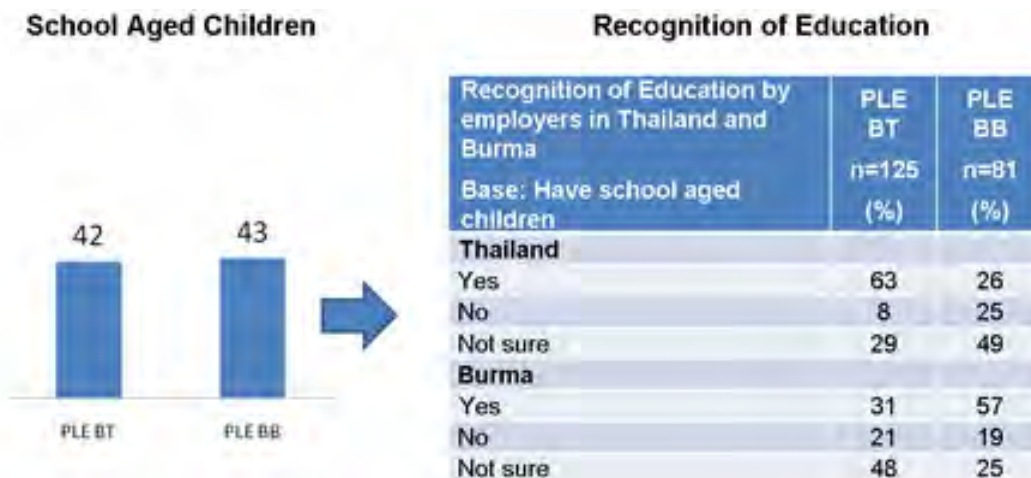
Participation rates are higher for PLE BT compared to PLE BB. Girls also have higher participation rates compared to boys.



Base: All respondents / Have school aged children

Education Recognized by Employers

There is quite a bit of uncertainty around whether the education is recognized by employers in Thailand and Burma.



Base: All respondents / Have school aged children

Education Provider

Most PLE BT received education through the Thai education system and most PLE BB through the Burmese education system.



Base: All respondents / Have children attending school

Education Completed & Satisfaction (PLE BT)

Satisfaction levels amongst PLE BT in Thailand are generally high, especially for education received in Thailand.

Education Level	Thailand n=103 (%)	Very Satisfied (%)	Burma n=103 (%)	Very Satisfied (%)
Not completed primary school	43	NA	17	NA
Primary school education	21	41	13	21
Junior high school education	15	47	13	21
Senior high school education	4	75	5	20
Higher education	2	50	1	-

Base: Have children attending school

Education Completed & Satisfaction (PLE BB)

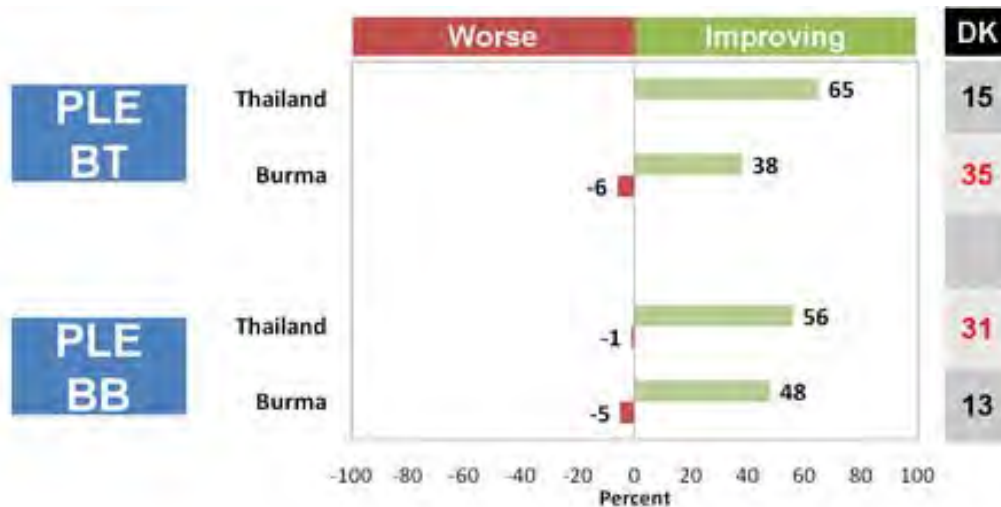
PLE BB show on average lower satisfaction levels with the Burmese education system.

Education Level	Thailand n=63 (%)	Satisfied (%)	Burma n=63 (%)	Satisfied (%)
Not completed primary school	6	NA	48	NA
Primary school	2	-	40	15
Secondary school	3	50	25	19
High school	2	100	3	-
Post 10 or higher	2	-	5	33

Base: Have children attending school

Quality Improvement in Education Past 2 Years

As with health, education is also seen to be improving both in Thailand and Burma but to a greater extent in Thailand.



Base: All respondents

Protection

Exposure to Protection Activities

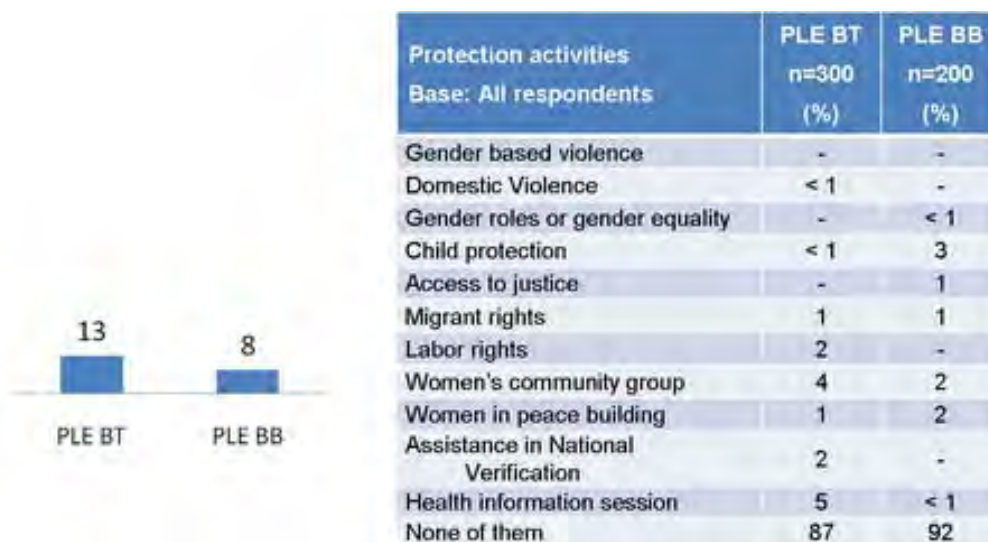
Twice as many PLE BT have had exposure to protection issues compared to PLE BB. But overall exposure levels are limited, especially when looking at individual protection issues.

Base: All respondents



Participation in Protection Activities

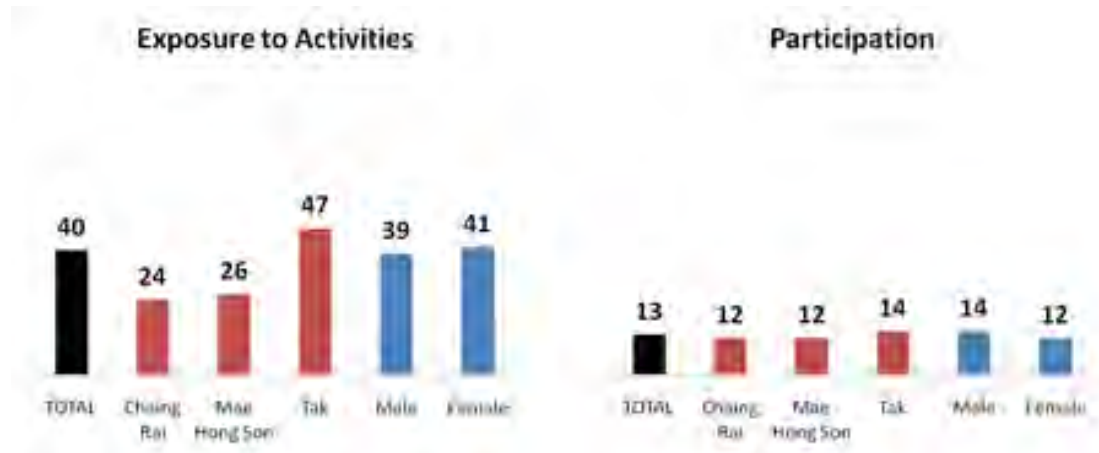
Participation is lower still, only 13 percent for PLE BT and 8 percent for PLE BB. This highlights a significant gap on both sides of the border.



Base: All respondents

Protection Activities by PLE BT

Amongst PLE BT it was found that exposure to protection activities was significantly higher in Tak with 47% compared to 26% in Chiang Rai and 26% in Mae Hong Son. However, there is no evidence to suggest exposure is different between men and women as both groups are close to the overall average around 40%. In terms of participation, no significant differences were found by region nor sex.



Base: All PLE BT

Organizer of Activities

Those who participated in protection activities were in most cases serviced by PLE partners but many PLE BT can't recall who the service provider was.



Base: All respondents/ Those who participated

Perceived Usefulness of Activities

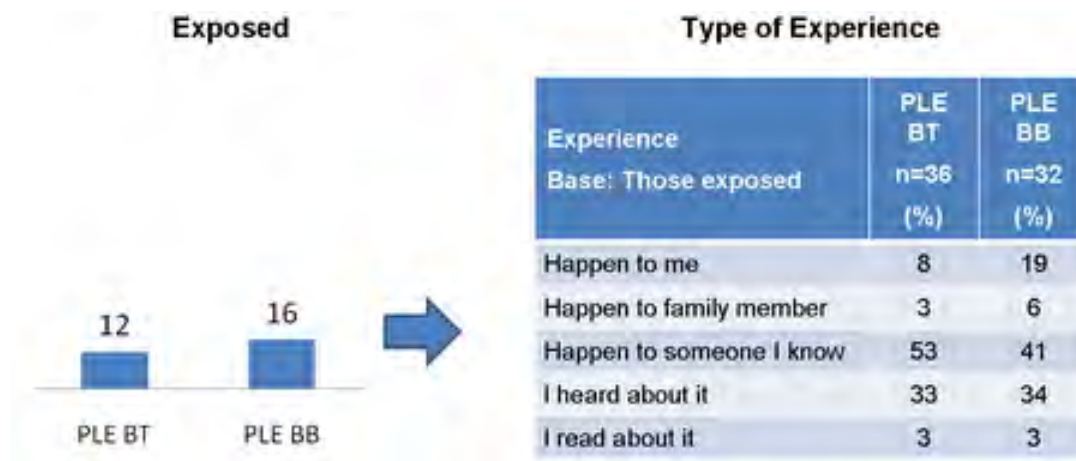
The perceived usefulness of protection activities is rather mixed and many are not sure. Whilst the sample is small there is an indication that there is room for improvement.



Base: All respondents/ Those who participated

Exposure to Domestic Violence

Domestic violence is prevalent and both PLE BT and PLE BB have been directly or indirectly exposed to domestic violence. In most cases it happens to someone they knew.



Base: All respondents/ Those exposed

Reporting a Domestic Violence Case

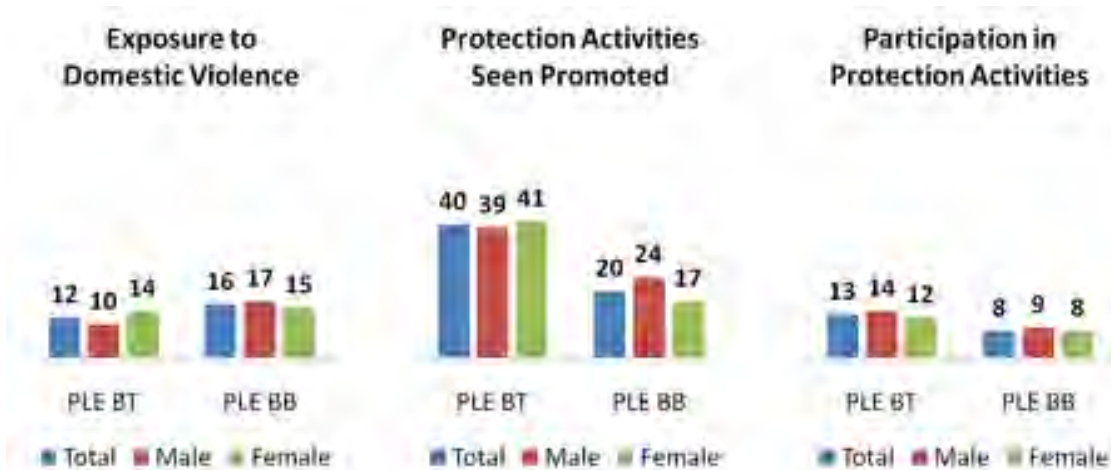
Most people don't report domestic violence cases, only around one in ten have done so.



Base: All respondents/ Those exposed

Exposure & Participation by Sex

In Burma, some 16 percent have been exposed to domestic violence but only 8 percent have participation in protection activities. This shows the potential gap that exist for protection services in Burma.



Base: All respondents

ANNEX VII: DETAILED FINDINGS - ON-LINE SUB-GRANTEES SURVEY

Online Capacity Survey

Participation: 34 out of 35 sub-grantees

Response rate: 66 from 72 (92%)

Note: Since the response from sub-grantees varies with between 1 up to 5 responses, the data was weighted to give each sub-grantee an equal weight of one. Given the high response rate and that all but one sub-grantee (from the health sector) participated in the survey, results are highly representative of the sub-grantees. The margin of sampling error, based on the finite population correction factor, is around 2 percent.

Participant and Sub-grantee Profiles

Most of the respondents from the sub-grantees surveyed were from management and half were female. They had on average worked with the organization for 6 years so were familiar with the organization. Only one sub-grantee from the health sector was not surveyed, all other sectors represent a census. Thirty sub-grantees had tier classification for PLE capacity support and 16 of them were in Tier 1. Not included were the Ministry of Public Health provincial health offices in Chiang Mai, Chiang Rai, Mae Hong Son and Tak.

Sex	Participants n=66 (%)
Male	51
Female	49
Age	
18 – 29	18
30 – 44	42
45 or older	39
Position	
Management	78
Operations	22
Experience	
Average years with sub-grantee	6 years

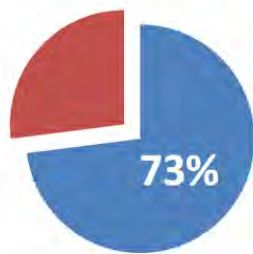
Services Provided	Sub-grantee n=34	(%)
Health	15	44
Education	12	35
Protection	7	21
Food Security / Livelihoods	9	27
PLE Support Tiers		
Tier 1	16	47
Tier 2	7	21
Tier 3	7	21
Not Classified	4	12

Capacity Strength

Overall Capacity Strength

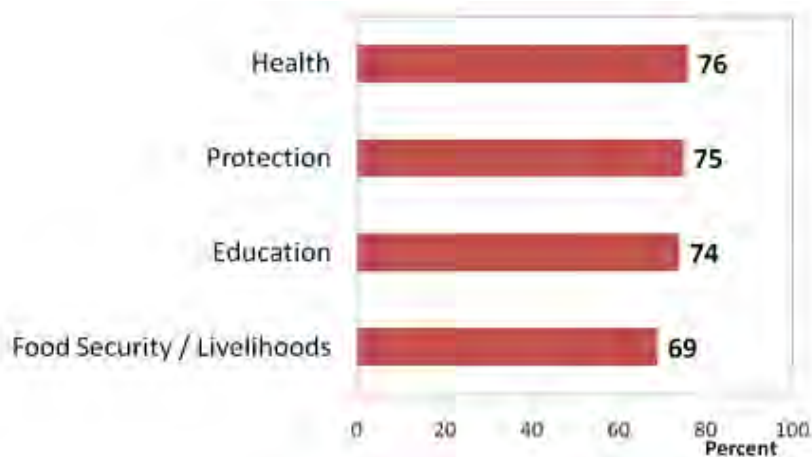
Overall capacity strength looks at the overall proportion of organizational and technical capacity elements were reported as being in place across all sub-grantees. The overall average capacity strength was 73. The best performing sub-grantee had a capacity strength of 94 and the lowest capacity strength achieved was 36.

Overall Average



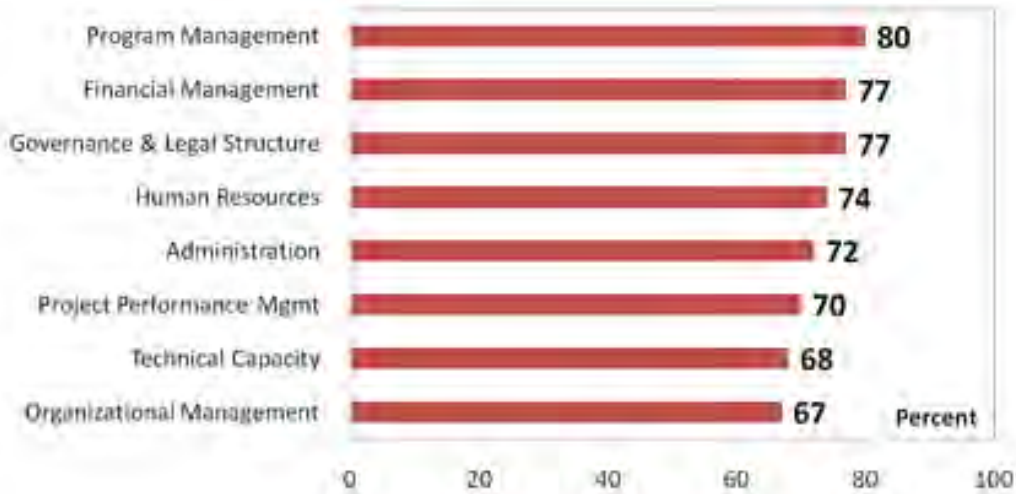
Capacity Strength by Sector

Capacity strength for sub-grantees involved with food security is on average a bit lower compared with other sectors. The result is significant but the difference is relatively small.



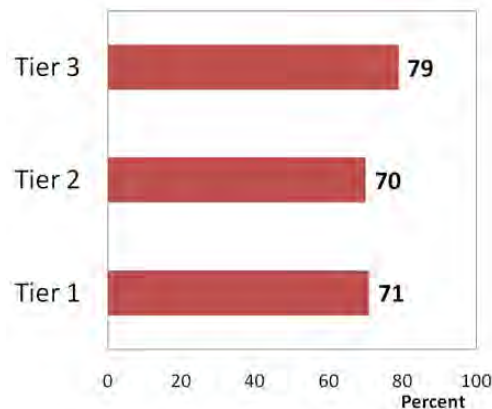
Capacity Strength by Domain

Program management is the domain with the most capacity strength and organizational management rank last. However, the difference across domains is relatively small and shows a fairly even level of capacity across key domains.



Capacity Strength by PLE Support Tiers

CBO sub-grantees are subject to annual or bi-annual capacity assessments. Based on the result of the assessment, these sub-grantees are placed in a separate Tier and capacity support is allocated accordingly. Under Tier One, all sub-grantees have access to broader forms of support. Under Tier Two, PLE offers individualized support toward organizational development priorities. For Tier Three, enhanced support tailored to specific & complex needs. Capacity strength for sub-grantees in Tier 3 is somewhat stronger.



Domain Specific Improvement Areas

Financial management performance appears strong and was also mentioned by several sub-grantees as having been provided under PLE. Losing staff to INGOs and GoB, who can offer higher salaries, is a risk to consider. Building collaboration with Gov and other bodies can be improved and will contribute to convergence.

Domain	Key Improvement Areas and Level of Capacity Strength	
Governance and Legal Structures	Registered in Burma (6%)	
Administration	Documented travel policies (59%)	
Human Resources	Not all key positions filled (58%)	
	Professional development needs identified for all staff (61%)	
	Performance reviews conducted for each staff (52%)	
Organizational Management	Collaboration with Gov partners (53%)	
	Collaboration with international policy bodies (46%)	
Program Management	Collaboration with academic bodies (51%)	
Project Performance Management	Provide training on gender equality issues (61%)	
Project Performance Management	Documentation outlining service standards (63%)	
Technical Capacity	Have a technical capacity plan (58%)	

Self Rated Performance on Capacity

Over half the sub-grantees rate themselves as having strong organizational and technical capacity and capacity was also perceived to have strengthened significantly over the past 2 years. However, at least half the sub-grantees may not yet be ready to stand on their own and still require more capacity building support.

Overall Performance Rating	Weak # Sub-grantees	Average # Sub-grantees	Strong # Sub-grantees
Organizational Capacity	1	14	19
Technical Capacity	-	12	22

Perceived Performance Improvement	Little or no improvement # Sub-grantees	Improvement in some or most # Sub-grantees	Improvement in most areas # Sub-grantees
Organizational Capacity	3	12	19
Technical Capacity	3	12	19

Future Support Needs	More # Sub-grantees	Same # Sub-grantees	None or less # Sub-grantees
Organizational Capacity	17	13	4
Technical Capacity	18	13	3

Self Rated Performance by Sector

In terms of self rated performance across sectors, protection is the sector that rate itself to have the strongest level of capacity. The health sector rate itself as having stronger organizational capacity whereas education perceives itself to have stronger technical capacity.

Organizational Capacity	Weak # Sub-grantees	Average # Sub-grantees	Strong # Sub-grantees
Health	1	5	9
Education	-	6	6
Protection	-	1	6
Food Security	-	4	5

Technical Capacity	Weak # Sub-grantees	Average # Sub-grantees	Strong # Sub-grantees
Health	-	7	8
Education	-	3	9
Protection	-	1	6
Food Security	-	4	5

Self Rated Improvement by Sector

Self rated improvement in the past two years is evident across all sectors, especially for health and education. In the protection and food security sectors around half the sub-grantees said improvements had been achieved in most areas.

Organizational Capacity	Little or no improvement # Sub-grantees	Improvement in some areas # Sub-grantees	Improvement in most areas # Sub-grantees
Health	-	4	11
Education	1	3	8
Protection	-	3	4
Food Security	1	4	4

Technical Capacity	Little or no improvement # Sub-grantees	Improvement in some areas # Sub-grantees	Improvement in most areas # Sub-grantees
Health	1	3	11
Education	1	5	6
Protection	-	3	4
Food Security	1	4	4

Future Support Needs by Sector

Consistent with its relatively high performance rating, around on third of sub-grantees in the protection sector are in need of future capacity support. Less than half the sub-grantees in the health sector said they need more support and for education and food security around half the sub-grantees need more support.

Organizational Capacity	More # Sub-grantees	Same # Sub-grantees	None or less # Sub-grantees
Health	7	5	3
Education	6	4	2
Protection	2	3	2
Food Security	4	3	2

Technical Capacity	More # Sub-grantees	Same # Sub-grantees	None or less # Sub-grantees
Health	7	5	3
Education	6	4	2
Protection	3	2	2
Food Security	4	3	2

Self Rated Improvement by PLE Tiers

Under the Tier system, PLE needs to set priorities through management judgment. Specialized support is given to sub-grantees placed in Tier 3. In Tier 3, the vast majority of sub-grantees report strong improvement in the past two years compared to around half for Tier 1. Tier 2 report stronger improvement in relation to technical capacity.

Organizational Capacity	Little or no improvement # Sub-grantees	Improvement in some areas # Sub-grantees	Improvement in most areas # Sub-grantees
Tier 1	2	5	9
Tier 2	1	3	3
Tier 3	-	2	5

Technical Capacity	Little or no improvement # Sub-grantees	Improvement in some areas # Sub-grantees	Improvement in most areas # Sub-grantees
Tier 1	1	8	7
Tier 2	1	-	6
Tier 3	-	2	5

Validation

When examining the relationship between the how sub-grantees rated their own capacity overall and the calculated Capacity Strength percentage, a positive relationship was found. This serves as a validation of the how capacity has been measured and also shows that sub-grantees have a fair idea of their own level of capacity and are able to rate themselves quite accurately.

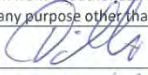


Annex VIII: Disclosure of any Conflicts of Interest

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	DANIEL LINDGREN
Title	FOUNDER
Organization	RAPID ASIA
Evaluation Position?	<input checked="" type="checkbox"/> Team Leader <input type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 486 0 1400104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE PERFORMANCE EVALUATION
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>If yes answered above, I disclose the following facts:</p> <p><i>Real or potential conflicts of interest may include, but are not limited to:</i></p> <ol style="list-style-type: none"> 1. Close family member who is an employee of the USAID operating unit managing the project(s) being evaluated or the implementing organization(s) whose project(s) are being evaluated. 2. Financial interest that is direct, or is significant though indirect, in the implementing organization(s) whose projects are being evaluated or in the outcome of the evaluation. 3. Current or previous direct or significant though indirect experience with the project(s) being evaluated, including involvement in the project design or previous iterations of the project. 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose project(s) are being evaluated. 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose project(s) are being evaluated. 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular projects and organizations being evaluated that could bias the evaluation. 	


I certify (1) that I have completed this disclosure form fully and to the best of my ability and (2) that I will update this disclosure form promptly if relevant circumstances change. If I gain access to proprietary information of other companies, then I agree to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.

Signature	
Date	16 October 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	Viparat Panvitdam
Title	Project Executive
Organization	Rapid Asia Co., Ltd.
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 486 0 1400104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE Performance Evaluation
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>If yes answered above, I disclose the following facts:</p> <p><i>Real or potential conflicts of interest may include, but are not limited to:</i></p> <ol style="list-style-type: none"> 1. Close family member who is an employee of the USAID operating unit managing the project(s) being evaluated or the implementing organization(s) whose project(s) are being evaluated. 2. Financial interest that is direct, or is significant though indirect, in the implementing organization(s) whose projects are being evaluated or in the outcome of the evaluation. 3. Current or previous direct or significant though indirect experience with the project(s) being evaluated, including involvement in the project design or previous iterations of the project. 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose project(s) are being evaluated. 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose project(s) are being evaluated. 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular projects and organizations being evaluated that could bias the evaluation. 	


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Signature	
Date	16 / 10 / 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	Mr. Komkrit Onsrithong
Title	Project Manager
Organization	Rapid Asia
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 48601400104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE Performance Evaluation
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Signature	
Date	20 October 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	Chotika Khruemane
Title	Consultant
Organization	Rapid Asia
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 48601A00104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE Performance Evaluation
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Signature	
Date	October 20, 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	Pratin Dharmarak
Title	Health Project Management Specialist
Organization	USAID, RDMA
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 486 O 1400104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE PERFORMANCE EVALUATION
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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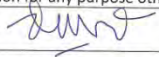
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Signature	
Date	August 20, 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	DEWI RATNAWULAN
Title	Consultant
Organization	Rapid-Asia
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 48601400104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE Performance Evaluation
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>If yes answered above, I disclose the following facts:</p> <p><i>Real or potential conflicts of interest may include, but are not limited to:</i></p> <ol style="list-style-type: none"> 1. Close family member who is an employee of the USAID operating unit managing the project(s) being evaluated or the implementing organization(s) whose project(s) are being evaluated. 2. Financial interest that is direct, or is significant though indirect, in the implementing organization(s) whose projects are being evaluated or in the outcome of the evaluation. 3. Current or previous direct or significant though indirect experience with the project(s) being evaluated, including involvement in the project design or previous iterations of the project. 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose project(s) are being evaluated. 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose project(s) are being evaluated. 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular projects and organizations being evaluated that could bias the evaluation. 	

I certify (1) that I have completed this disclosure form fully and to the best of my ability and (2) that I will update this disclosure form promptly if relevant circumstances change. If I gain access to proprietary information of other companies, then I agree to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.

Signature	
Date	October, 20 - 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	PATTY ALLEMAN
Title	SENIOR REGIONAL GENDER ADVISOR
Organization	USAID
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 48601400104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>If yes answered above, I disclose the following facts:</p> <p><i>Real or potential conflicts of interest may include, but are not limited to:</i></p> <ol style="list-style-type: none"> 1. Close family member who is an employee of the USAID operating unit managing the project(s) being evaluated or the implementing organization(s) whose project(s) are being evaluated. 2. Financial interest that is direct, or is significant though indirect, in the implementing organization(s) whose projects are being evaluated or in the outcome of the evaluation. 3. Current or previous direct or significant though indirect experience with the project(s) being evaluated, including involvement in the project design or previous iterations of the project. 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose project(s) are being evaluated. 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose project(s) are being evaluated. 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular projects and organizations being evaluated that could bias the evaluation. 	

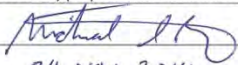
I certify (1) that I have completed this disclosure form fully and to the best of my ability and (2) that I will update this disclosure form promptly if relevant circumstances change. If I gain access to proprietary information of other companies, then I agree to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.

Signature	
Date	24 October 2014

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	Michael L. BAK
Title	Social Development Advisor, Asia.
Organization	Consultant to Rapid Asia.
Evaluation Position?	<input type="checkbox"/> Team Leader <input checked="" type="checkbox"/> Team member
Evaluation Award Number (contract or other instrument)	AID 486-0-1400104.
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	PLE Performance Evaluation
I have real or potential conflicts of interest to disclose.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<p>If yes answered above, I disclose the following facts:</p> <p><i>Real or potential conflicts of interest may include, but are not limited to:</i></p> <ol style="list-style-type: none"> 1. Close family member who is an employee of the USAID operating unit managing the project(s) being evaluated or the implementing organization(s) whose project(s) are being evaluated. 2. Financial interest that is direct, or is significant though indirect, in the implementing organization(s) whose projects are being evaluated or in the outcome of the evaluation. 3. Current or previous direct or significant though indirect experience with the project(s) being evaluated, including involvement in the project design or previous iterations of the project. 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose project(s) are being evaluated. 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose project(s) are being evaluated. 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular projects and organizations being evaluated that could bias the evaluation. 	

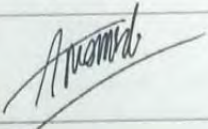
I certify (1) that I have completed this disclosure form fully and to the best of my ability and (2) that I will update this disclosure form promptly if relevant circumstances change. If I gain access to proprietary information of other companies, then I agree to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.

Signature	
Date	24 Nov. 2014.

Disclosure of Conflict of Interest for USAID Evaluation Team Members

Name	Dr Amornsak Kitthananan
Title	Local Capacity Development Specialist
Organization	Rapid Asia
Evaluation Position?	Team Member
Evaluation Award Number (contract or other instrument)	AID-486-O-14-00104
USAID Project(s) Evaluated (Include project name(s), implementer name(s) and award number(s), if applicable)	None
I have real or potential conflicts of interest to disclose.	No
<p>If yes answered above, I disclose the following facts:</p> <p><i>Real or potential conflicts of interest may include, but are not limited to:</i></p> <ol style="list-style-type: none"> 1. Close family member who is an employee of the USAID operating unit managing the project(s) being evaluated or the implementing organization(s) whose project(s) are being evaluated. 2. Financial interest that is direct, or is significant though indirect, in the implementing organization(s) whose projects are being evaluated or in the outcome of the evaluation. 3. Current or previous direct or significant though indirect experience with the project(s) being evaluated, including involvement in the project design or previous iterations of the project. 4. Current or previous work experience or seeking employment with the USAID operating unit managing the evaluation or the implementing organization(s) whose project(s) are being evaluated. 5. Current or previous work experience with an organization that may be seen as an industry competitor with the implementing organization(s) whose project(s) are being evaluated. 6. Preconceived ideas toward individuals, groups, organizations, or objectives of the particular projects and organizations being evaluated that could bias the evaluation. 	

I certify (1) that I have completed this disclosure form fully and to the best of my ability and (2) that I will update this disclosure form promptly if relevant circumstances change. If I gain access to proprietary information of other companies, then I agree to protect their information from unauthorized use or disclosure for as long as it remains proprietary and refrain from using the information for any purpose other than that for which it was furnished.

Signature	
Date	Bangkok 5 August, 2014

ANNEX IX: DETAILED PLE PROGRAM AREA MAPS

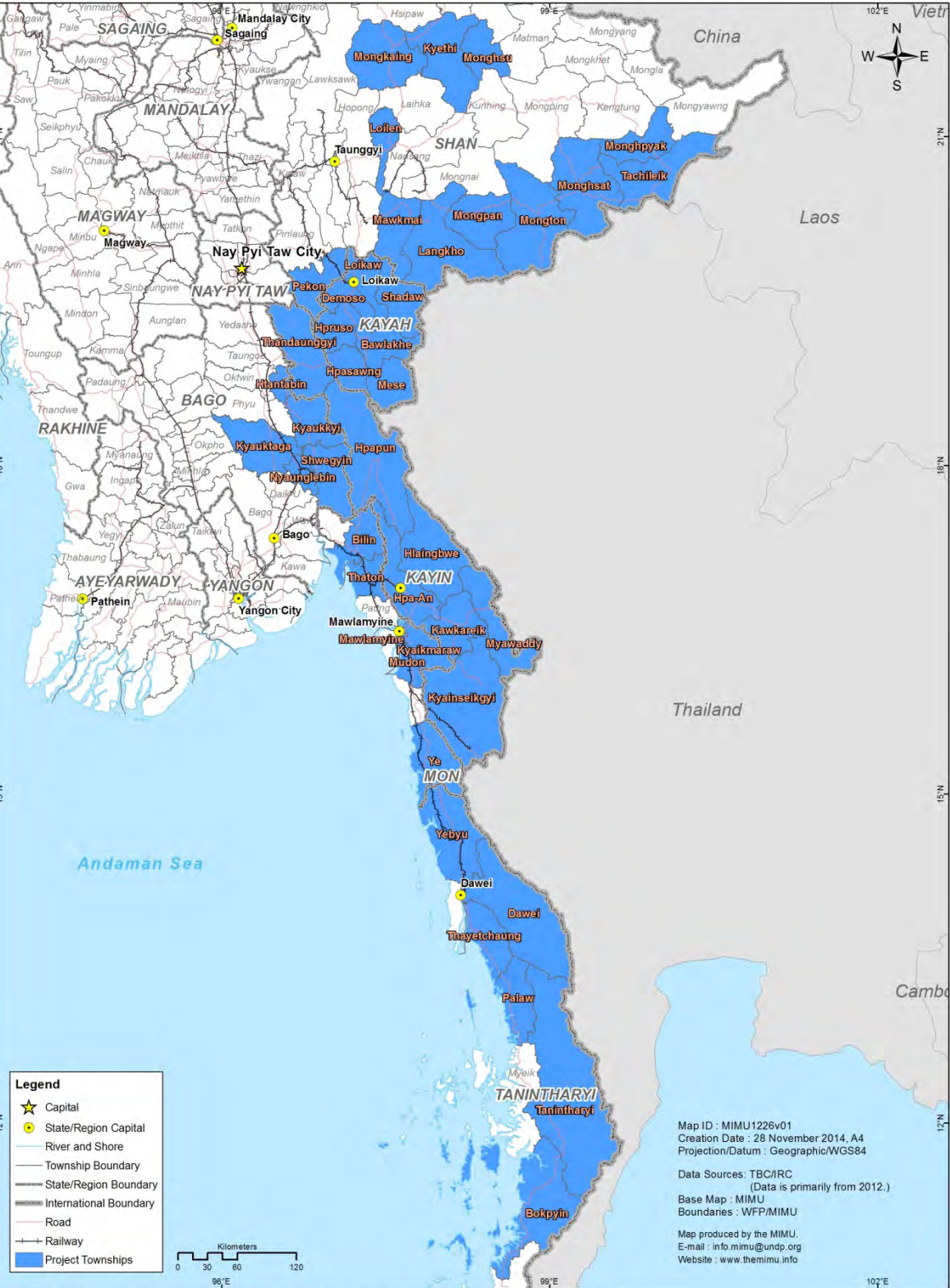


USAID
FROM THE AMERICAN PEOPLE

USAID Project for Local Empowerment, Program Locations in Thailand



USAID Project for Local Empowerment, Program Locations in South-East Burma/Myanmar



Disclaimer: The names shown and the boundaries used on this map do not imply official endorsement or acceptance by the United Nations.

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