

Final Independent Evaluation Report

Brooke India Programme

2006-2017



Picture copyright: Brooke

Lead Evaluator: Chittaranjan Mishra
Technical consultant: Dr Mamta Dhawan

Final Independent Evaluation Report

Brooke India Programme

2006- 2017

Country Programme Name	Brooke India
Partners (if applicable)	Arthik Vikas Evam Jankalyan Sansthan (AVJKS) in Lucknow New Public School Samiti (NPSS) in Unnao
Location	Uttar Pradesh, India
Intervention Budget	£182,000 (150,000 INR) per year
Intervention Start Date	Aligarh, Lucknow, Unnao in April 2007 Baghpat in April 2006
Intervention End Date	March 2017
Country Programme Language	English & Hindi
Donor and Contribution/s	Brooke UK
Responsible Brooke UK	Harriet Dodd
Evaluation Manager	José van Oosten
Evaluation Type	Independent Exit Evaluation
Evaluation Dates	February / March 2018

Disclaimer: *This report was commissioned by Brooke India. The comments contained herein reflect the opinions of the evaluators only.*

Acronyms

AHD	Animal Husbandry Department
ARC	Animal Resource Centre
AVJKS	Arthik Vikas Evam Jankalyan Sansthan
AEWG	Association of Equine Welfare Group
BI	Brooke India
CRP	Community Resource Persons
CEO	Chief Executive Officer
CQM	Clinical Quality Monitoring
CVO	Chief Veterinary Officer
CPD	Continuous Professional Development
EWG	Equine Welfare Group
FGD	Focus Group Discussion
FQM	Farrier Quality Monitoring
FCRA	Foreign Contribution Regulation Act
GVO	Government Veterinary Officers
HR	Human Resource
IDI	In-depth Interview
LEO	Livestock Extension Officers
LHP	Local Health Providers
MPR	Monthly Progress Report
NRLM	National Rural Livelihood Mission
NGO	Non-Government Organization
NPSS	New Public School Samiti
PWNA	Participatory Welfare Need Assessment
SMT	Senior Management Team
SPO	Senior Programme Officer
SVO	Senior Veterinary Officer
SHG	Self Help Groups
VACM	Veterinary Assistant cum Community Motivator
VO	Veterinary Officer

Table of Contents

Acronyms.....	2
Table of Contents.....	3
I. Executive Summary.....	4
II. Background.....	8
III. Evaluation Background.....	10
IV. Methodology.....	11
V. Evaluation Findings.....	12
Overall assessment of the intervention against the evaluation criteria.....	12
Validity of Design.....	14
Relevance/Appropriateness.....	15
Coherence.....	18
Effectiveness of management set up.....	20
Effectiveness.....	22
Efficiency.....	27
Sustainability and Likelihood of Impact.....	30
VI. Conclusions.....	32
VII. Lessons Learnt and Good Practices.....	35
Lessons Learnt.....	35
Good Practices.....	35
VIII. Recommendations.....	36
High Priority.....	36
Medium Priority.....	37
Low Priority.....	37
Budget Implications.....	38
IX. List of Annexes.....	38

I. Executive Summary

Summary of Intervention

Brooke is an international animal welfare charity dedicated to improving the lives of working horses, donkeys and mules with headquarters in London. Brooke has worked in India since 1992 and to manage the expanded activities, Brooke India (BI) was established in December 1999 as a registered company in India. India is home to around 1.2 million equids, of which most belong to underprivileged communities and are used as working animals. Non-availability of resources and poor knowledge of owners on equine health are the main causes of poor equine welfare in India. To achieve the goal of ensuring acceptable level of welfare for working equids, the programme focuses on service provision, community engagement, and advocacy. BI is funded directly by Brooke UK. BI implements the intervention through Direct Equine Welfare Units (direct units), and Partner Equine Welfare Units (partner units). BI has passed through various phases and at present is focused on strengthening local service delivery system.

Summary of Evaluation

By March 2017, the programme exited seven units after a decade of intervention. In order to understand successes and failures and learn lessons, BI commissioned an exit evaluation in 2018. The objectives of the evaluation are to evaluate various programme approaches, and to analyse the cost of intervention in relation to the results achieved in direct units compared to partner units. The evaluation was undertaken by a lead evaluator and a technical consultant. The focus was on two direct units (Aligarh and Baghpat) and two partner units (Lucknow and Unnao). The findings will primarily be used by BI, Brooke UK and BI Trustees as a learning document. The evaluation framework used an adapted version of the evaluation criteria developed by the Development Assistance Committee of the Economic Cooperation and Development. The evaluation was conducted between February and April 2018.

Methodology

The evaluation adopted a mixed method approach, a combination of qualitative and quantitative techniques. The qualitative techniques included In-depth Interviews (IDI), Focus Group Discussions (FGD), direct observation, and documentation of good practice. Quantitative techniques were used for the analysis of financial data. Questionnaires for IDIs and FGDs were developed and used to obtain information from programme stakeholders. Data was collected from both primary and secondary sources. The secondary sources included programme documents, data from Monthly Progress Reports (MPR), and financial data. The primary data was collected from various stakeholders including direct beneficiaries, service providers, community influencers, government officials, Brooke UK staff, and BI staff. Limitations in the methodology included that the selection of visited sites was done by BI, the fact that indicators were continuously changing throughout the lifetime of the project (meaning progress couldn't be accurately assessed), and the possibility of getting biased responses due to the presence of BI staff.

Summary of findings

Validity of Design: The programme complied with the exit strategy of gradual withdrawal from free treatment services and shift to paid services through local institution building and linkages to service providers. However, the timing of exit was not built into the programme design and a detailed exit strategy came much later. Exit for each unit was based on the findings of an internal exit assessment. The exit assessments showed that targets on equine welfare indicators were met across the units, barring a

few exceptions. In the absence of a log frame for the whole programme, long-term planning could not be made. The exit from units took longer as the focus and indicators for exit kept on changing. The strategic plan 2015–2020 articulated the need for strengthening local service delivery to bring sustainability after exit. To achieve this, accelerated efforts were undertaken for the capacity building of Local Health Providers (LHP), farriers, Government Veterinary Officers (GVO), Livestock Extension Officers (LEO), Ashwamitras¹ and Community Resource Persons (CRP). In the first five years, advocacy meant influencing at the district and state level and mainly focused on the Animal Husbandry Department (AHD). From FY 2013–14 onwards, policy advocacy was reflected in the log frame. When the provision of free treatment services came to an end, there was enough capacity to achieve the programme goals in less amount of time. Factors such as the availability of a detailed exit strategy and learning from previously exited units will also contribute to achieving targets quicker in future interventions.

Relevance/Appropriateness: The programme was relevant as it tried to find a happy union between the community need and BI's central focus on equine welfare. The identification of problems and possible solutions to ensure equine welfare came from the community. Participatory tools such as the Participatory Welfare Needs Assessment (PWNA) were useful to identify the problems of the equid owning community. Equid owners as well as service providers were consulted at the unit level planning meetings, and Ashwamitra conferences. The involvement of Equine Welfare Group (EWG), Association of Equine Welfare Group (AEWG) members, and Ashwamitras in various forums led to their overall empowerment. Most of the female members in older EWGs felt that they are now experienced enough to manage the EWGs. The members of a few newer groups still look for guidance of Veterinary Assistant cum Community Motivator (VACM).

Coherence: The programme was able to identify local resources through resource mapping and PWNAs. The programme built on the capacity of existing resources such as local farriers and LHPs so that their services would be better accepted by the community. BI staff was able to maintain a cordial relationship with AHD staff. The AHD invited BI to participate in the health camps organised at district and block level. However, the AHD could not be of help to equid owners as presently government vaccination drives on livestock does not include vaccinations of equids. There was widespread awareness about the National Rural Livelihood Mission (NRLM) programme² among women EWG members and uptake of benefits from the scheme was high. Awareness and uptake of the labour card and livestock insurance was low.

Effectiveness of Management set up: The previous management structure of the exited units, which existed until March 2017, was conducive for the implementation of activities. Field operations were strengthened based on learning. In clusters where the VACM was a woman, formation and nurturing of women EWG groups was better, especially in Muslim communities. With the end of free treatment services in March 2017, restructuring of staff was done at the unit level. The merged position of VO-cum-Manager now conducts both the technical and managerial functions in the unit. After the end of free treatment services, they became responsible for strengthening of local institutions, linkage with service providers, and engagement with district officials.

Until 2015 there was no advocacy staff at BI headquarters to plan and implement advocacy activities. Presently there are five staff members in the advocacy team. The Chief Executive Officer (CEO) took a

¹ Ashwamitra is an active member of the equid owning community in the village who acts as a link between the community and local service providers.

² The Mission was launched by the Ministry of Rural Development (MoRD), Government of India in June 2011 and it aims at creating efficient and effective institutional platforms of the rural poor, enabling them to increase household income through sustainable livelihood enhancements and improved access to financial services.

leadership role for policy advocacy at national and state level and the advocacy team played a supportive role. BI did not have separate advocacy staff at regional level although animal health is a state subject. Therefore, Advocacy at state level was limited to the AHD only.

Effectiveness: Adequate emphasis was given to implement activities to achieve outcomes on service provision and community engagement. The exit targets on all the key indicators were achieved in all the units with a few exceptions. Qualitative information reflected a broadly similar picture on awareness creation, local institution building and linkages. Positive changes were observed in the behaviour of equid owners and brick kiln owners. Linkages with LHPs and farriers were found both at brick kiln sites and homes. The programme used tools such as Clinical Quality Monitoring (CQM) and Farrier Quality Monitoring (FQM) to ensure good quality services of LHPs and farriers. Equid owners were satisfied with the services of trained LHPs and farriers. For most of the owners the cost of services was affordable.

Equid owners realised the effect of adoption of husbandry practices, namely decrease in diseases and improved health and productivity of the equids. Formation of EWGs at village level, and AEWGs at gram panchayat or block level provided opportunities for income generating activities. Gram panchayat is the lowest level local administration in India. A block covers several gram panchayats and is a higher level administrative unit. However, the majority of owners at brick kiln sites were concerned about new challenges which affected their livelihood. The focus on advocacy activities to create a favourable policy environment came much later. Advocacy was a success in a few areas like the Glanders compensation policy. Advocacy efforts by BI resulted in the inclusion of equids for insurance purposes. There are certain emerging areas where BI should undertake policy advocacy at the national level.

Efficiency: The initial years of partnership saw a participatory mode of working in which suggestions of partner staff were taken into account. Later on, decisions on strategies and budgets for partner units became prescriptive in nature, making partnership appear more like a contractual project. Partners had a limited role in the management of staff. Partner units were more economical as compared to direct units. A substantial proportion of the cost in direct units was on human resources, as the salary of direct staff was higher than partner staff. There was no visible difference on achievement of results between direct and partner units. The exit assessment showed that exit targets were achieved in both.

Sustainability and Likelihood of Impact: The increased knowledge of good husbandry practices is sustainable in the future, because equid owners see value in practicing them. The increased demand of services from trained LHPs due to linkage with community institutions makes them sustainable. The linkage with trained farriers is sustainable as both owners and farriers benefit from shoeing regularly as required. Female groups and associations are sustainable as the members realize the potential of these groups to address their urgent financial and social needs. The functioning of ARCs is sustainable since they act as one-stop centre for linkage with service providers. Sustainability of men EWG groups is in question as these groups were found to be less stable due to migration of members for work. The functioning of federations at the district level in Uttar Pradesh is also found to be less viable. The use of PWNAs has resulted in behaviour change of the community and the likelihood of such change could be predicted for the future. The smooth functioning of female groups is also likely to be continued in future.

Conclusions

The 10 years of programme intervention witnessed important developments, i.e. the shift from free treatment services to paid services, and a focus on policy advocacy. To meet the changing circumstances, various strategies were adopted at different stages of the programme. However, the continuation of free treatment services fostered a dependency on BI and created challenges for exit. The previous

management structure and staffing of exited units, which existed until March 2017, was adequate for effective implementation of activities. Most of the owners found the cost of quality services affordable as they realized that overall costs decreased if their equids fell ill less often. The majority of owners at brick kiln sites were concerned about the slowing down of brick kiln work which affected their livelihood. A large number of units were run through partners to reduce programme cost and to leverage local organizations for better rapport building with the community and networking with local government. Partner units were less expensive as compared to direct units. However, the nature of engagement between BI and partners has turned into a contractual relationship. From the findings it could be concluded that while most of the programme features are sustainable for equine welfare, more effort is required to enable the community to access government schemes and other livelihood options for equine owners' welfare.

Lessons learnt and good practices

Lessons learnt were: free treatment is not required as equine owning communities are willing to pay for quality services; a holistic approach which addresses equine and human welfare is needed for long-term success; a five year programme is sufficient to achieve objectives; capacity building of AHD staff did not translate to government ownership; and the limited role of partners in decision-making hindered partnerships. Good practices found are: use of WhatsApp by staff and LHPs to share events and seek guidance; participation of staff in brick kiln owners' associations meeting to promote the agenda of equine welfare; and strengthening the AEWG through convergence of group interest and individual interest.

Recommendations

1. Units should be exited within five years. The first four years should focus on site selection and implementation of activities while the last year should be devoted for transition to exit.
2. After exiting, light support should continue for 11 year, focusing on technical guidance and support.
3. New units should be run as partner units. Non-Government Organization (NGOs) working locally with experience in institution building and networking should be given more preference.
4. Experienced vets with a minimum two years' project management experience should be recruited for the posts of VO-cum-Manager in new units.
5. Policy intervention is required to mainstream LHPs and bring them under a legal framework. BI should influence and support the regulation and standardization of LHP training.
6. Every unit should recruit at least one woman VACM.
7. VO-cum-Managers and VACMs should be paid competitively as per the technical nature of their work.
8. Ashwamitras should be linked with the Panchayati Raj Institution at the ward level so that updated information on government schemes is available to community.
9. Issues for policy advocacy need to be identified and an actionable strategy should be put in place.
10. BI should focus on developing alternative livelihood strategies that support equine welfare.
11. More emphasis should be placed on formation of women EWGs.
12. District level federations should not be formed in the future in Uttar Pradesh.

II. Background

Intervention objectives

Brooke is an international animal welfare charity dedicated to improving the lives of working horses, donkeys and mules. Its headquarters are in London, United Kingdom. Brooke started as a hospital for ex-warhorses in 1934. Now Brooke's global network covers India, Pakistan, East and West Africa, as well as Egypt and Jordan. Brooke has been working in India since 1992 to improve the lives of working horses, donkeys and mules. During the initial years it provided treatment of working equids in partnership with a few NGOs at select locations in India. To manage the expanded activities effectively Brooke India was established in December 1999. BI is the operating name of Brooke Hospital for Animals (India) and a registered company in India. Although BI is an affiliate of Brooke UK, the management structure of BI is independent.

The overall goal of the programme is to ensure acceptable level of welfare for working equids. To achieve the goal, the programme has three outcomes. Outcome one is to improve the welfare of working equids through increase in uptake of quality services from local service providers. Outcome two is to ensure equid owners and equid owning communities are able to generate demand for services to address equine welfare issues and adopt improved husbandry practices. Outcome three is to facilitate policy change and to create favourable policy environment for promoting equine welfare. The acceptable level of welfare, as defined by Brooke, is the level of welfare that can realistically be achieved over a time span and, therefore, fulfilling all the criteria for exit. It is the highest level of welfare in the welfare continuum. The goal of ensuring acceptable level of welfare is mentioned in the BI Country Strategic Plan (2015–20) and was subsequently used as a goal in the annual log frames.

Context of the intervention

India is home to around 1.2 million equids, which are spread across the length and breadth of the country. Most equids belong to underprivileged communities and are used as working animals. Equids in India are primarily used as draught animals or for transport. Working equids primarily perform economic functions and among the equid owning communities there is a high dependency on equids for their livelihoods. The largest number of equids is in the state of Uttar Pradesh. An initial survey in Uttar Pradesh found that most of the equids were suffering from different conditions such as leg related problems due to overloading, low body condition, severe wounds, colic, respiratory issues, Surra, swelling of tendon, abnormal eyes, dehydration, harness wounds etc. Lack of awareness, knowledge and overloading by the owners were the main cause for above mentioned abnormalities in animals.

Most of the veterinary doctors in the districts were not trained to treat equids and therefore quality veterinary services were not available during emergencies. Most of the equid owners in the region belong to the poorest economic strata of the society. Often, they do not get adequate work and also the wage rate is very low and their family has no other source of income. Therefore, they cannot afford costly medicine, high consultancy fees of qualified veterinary doctors nor good quality feed for their equids. An important cause of poor equine welfare is the non-availability of resources like good quality feed, saddlery, clean and hygienic shelter, water at work place, trained farriers and LHPs.

Description of the intervention funding

Due to legislative restraints, all funding for Brooke India is derived from Brooke UK. Brooke India prepares the annual budget (Financial year wise) for all its interventions and sends the budget to Brooke UK for approval. Brooke India then receives the approved budget amount from Brooke UK.

Management set up for implementation

Equine Welfare Units are established based on the population norm in a district, i.e. a new unit is established if the equid population is greater than 5,000 in a district. The Country Strategic Plan 2015–20 highlighted that a Satellite Unit could be created depending upon the need of the equids and the area. As per the Strategic Plan a satellite unit is defined as a unit having an equid population of 500 to 1000 in a 100 km vicinity of existing district units. The BI programme is implemented directly through its own staff as well as through partnerships with organisations. The implementation in Equine Welfare Units through its own staff is known as direct units, and implementation in Equine Welfare Units through partner organisations is known as partner units. Based on the lessons learnt from directly run interventions, BI started implementing the projects through partnerships from FY 2007–08 onwards. However, the definition of partnership came in the Country Strategic Plan 2015–20. As mentioned in the Strategic Plan, partnership is defined as 'mutually beneficial relationships, based upon a common goal, that are an integral part of organization strategy. Partnerships are based upon mutual trust and respect, are characterized by shared responsibility and accountability, and result in shared ownership of the outcomes. This can be financial or non-financial such as a technical collaboration'.

The operational structure and staffing is similar in both the partner units and direct units. Staff in a unit consists of one District Manager, one Veterinary Officer (VO), and a number of VACMs depending on the number of clusters in the unit. In a direct unit a District Manager is responsible for the planning and implementation of activities and takes guidance from the BI Line Manager. In a partner unit the District Manager takes the guidance from the Project Director, who provides direction and oversight to the team. With the end of free treatment services, restructuring of staff took place after March 2017. In the new management set up, the VO and District Manager positions were merged to create a VO-cum-Manager. At present, Brooke India has 34 Equine Welfare Units across ten states of India.

Description of the intervention partners

Arthik Vikas Evam Jankalyan Sansthan (AVJKS) is the partner organization in Lucknow and New Public School Samiti (NPSS) is the partner for Unnao. AVJKS has previous experience in the area of agriculture, women's empowerment, and some experience on animal husbandry while working in the diversified agriculture support project. NPSS has experience in education, skills development and human development.

Overview of intervention implementation till evaluation

The BI programme has passed through four distinct phases. The first phase was characterised by provision of veterinary services to working equids and the activities were directly managed and supervised by Brooke UK. In the second phase Brooke India focused on equine welfare through provision of free veterinary and support services to working equids at fixed locations. The third phase focused on achieving long-term and sustainable improvement in equine welfare through engagement of equid

owners. The fourth and current phase is focused on a holistic approach to achieve improved equine welfare with emphasis on strengthening local service delivery system.

BI adopted both a proactive and reactive approach to achieve the overall goal of acceptable level of welfare for working equids. The proactive approach focused on multi-pronged interventions, i.e. the formation and capacity building of community institutions, provision of comprehensive equine health services, capacity building of health and ancillary service providers, and the establishment of linkages between community institutions and service providers. In addition, targeted interventions were implemented at brick kilns as these sites render livelihood opportunities to equid owners for a substantial period of the year. Under the reactive approach, emergency treatment services were provided to working equids in need of urgent medical intervention.

The Country Strategic Plan 2010–15 did not have advocacy as one of the strategic approaches. Instead it had a concept called 'influencing' which entailed working at village, district or state level and with all concerned stakeholders to build an enabling environment for working equine welfare. Eventually BI recognised the important need of advocacy as a strategic approach, and the Country Strategic Plan 2015–20 mentioned the overall process of developing an advocacy strategy. BI did not highlight an exit strategy in the Country Strategic Plan 2010–15. A detailed exit strategy is described in the Country Strategic Plan 2015–20. The goal of a phase out (exit) strategy is to ensure sustainability of an intervention's impact after the program has ended. Four approaches were framed for ensuring sustainable programme impact i.e. phase-in, phase-down, phase-over and phase-out.

III. Evaluation Background

By March 2017, Brooke India exited from seven interventions units (four direct and three partner units) that have been operational since FY 2006–07. In order to produce evidence-based learning and to understand successes and failures, BI commissioned an exit evaluation. The main purpose of the evaluation is to provide an independent analysis of the programme looking at the successes achieved and opportunities missed. The objectives of the evaluation are to evaluate the direct results of various programme approaches in achieving sustainable equine welfare, and to analyse the cost of the interventions in relation to the results achieved in direct units compared to partner units. The exit evaluation was undertaken by an evaluation team of two members, lead evaluator and veterinary consultant. The lead evaluator was assisted by the veterinary consultant on technical areas.

The evaluation focused on four of the seven units in Uttar Pradesh that were exited. These are two direct units (Aligarh and Baghpat) and two partner units (Lucknow and Unnao). The evaluation findings will primarily be used by Brooke India, Brooke UK and the Brooke India Board of Trustees as a learning document to inform future programme implementation.

The evaluation framework used an adapted version of the evaluation criteria developed by the Development Assistance Committee of the Economic Cooperation and Development. These are Validity of Design, Relevance and Appropriateness, Coherence, Effectiveness of Management set up, Effectiveness, Efficiency, Sustainability, and Likelihood of Impact. The evaluation questions linked to each evaluation criteria were identified by Brooke through consultations with key project stakeholders. Various areas of inquiry for collection of data and information were developed on the basis of these evaluation questions. An evaluation matrix was developed that included evaluation questions, and various areas of inquiry and data collection methods against each evaluation criteria. The evaluation matrix is in Annex 1 of the inception report.

The external evaluation was conducted between February and April 2018. The desk review and the development of an inception report were completed by 08 March 2018. This was followed by field visits and primary data collection between 12 and 29 March 2018. The initial findings of the evaluation were shared in the in-country stakeholder workshop on 05 April 2018 for feedback. This was followed by writing the pre-final draft report and finalization of the report.

IV. Methodology

To ensure robustness and reliability, a mixed method approach was adopted. The approach entailed a combination of qualitative and quantitative data gathering techniques. Qualitative and participatory data collection techniques were used to capture first-hand accounts from the perspectives of various stakeholders. The qualitative techniques included IDI, FGD, direct observation, and the documentation of good practice. Quantitative analysis was done for financial data and data obtained from the monitoring records. Various types of data collection instruments were developed on the basis of evaluation matrix to obtain data and information from programme stakeholders. These included questionnaires for IDI and FGDs. Different FGD questionnaires were used for male and female members. Similarly, separate sets of questionnaires were used to obtain data from each of the stakeholders. A good practice template given in the Terms of Reference was used to document one good practice. The data collection instruments used in the evaluation is in Annex VI of the report.

To make the exit evaluation broad based, data and information were collected from both primary and secondary sources. The secondary sources of data included: programme documents such as BI strategic plans, year-wise log frames and action plans, annual review and reflection reports, baseline and end-line reports, exit assessment reports; data sets such as MPRs, and annual budget of previous five years (FY 2012-13 to 2016-17); and other documents such as partnership agreements, and relevant training modules and government orders.

Primary data was collected from various programme stakeholders during the field visit to Aligarh, Baghpat, Lucknow, and Unnao. These included main programme stakeholders such as equid owners at villages and brick kiln sites; men and women EWG members; service providers, i.e. LHPs, farriers, Animal Resource Centre (ARC) members/owners, GVO, LEO; community influencers such as members of AEWGs, federations, a community resource person (CRP), and Ashwamitra; other stakeholders such as brick kiln owners, and contractors, Project Directors of partner units; and government officials at block, district and state level. To capture the perspectives of programme staff, interviews were conducted with various types of staff from BI. These included CEO, Senior Management Team (SMT) members, functional heads, Senior Programme Officer (SPO), Senior Veterinary Officer (SVO), District Manager, VO, and VACM. Interviews were also conducted with relevant Brooke UK staff, i.e. Director of Programmes, Senior Manager Community Development, and Global External Affairs Manager. The sites visited during the evaluation were chosen randomly by unit staff. It is pertinent to mention here that the evaluation findings are based from a limited sample of programme stakeholders consulted during the evaluation.

The methodology suffered from a few limitations. Firstly, the intervention log frames and indicators were being changed on a yearly basis. Whilst it is understandable that the log frame might change due to the dynamic nature of the context of intervention, the extent of change and the constant addition of indicators meant that it was difficult to understand whether the interventions achieved the results they intended to. Secondly, the duration of field visit for each site did not allow interacting with a large number of direct stakeholders, i.e. equid owners at the village as well as at the brick kiln sites. Since the field visit was

conducted during the peak season of brick kiln, in a few areas getting equid owners in the village for group discussion was difficult. Furthermore, the annual budget and data from MPRs of Lucknow unit could not be used for comparison with other units as Lucknow unit is working as composite unit and included Barabanki unit also. The final limitation lies in the fact that BI field staff helped in the mobilisation of participants for FGDs and other stakeholders for interviews. At the start of FGDs, introductions to the community were made by BI field staff. Consequently, there is a possibility of getting biased responses due to the presence of BI staff at the meetings.

In order to make the evaluation report balanced and insightful, triangulation was done from both the primary and secondary sources of data. Triangulation of information from various stakeholders was used to arrive at a judgement. Wherever possible, sex-disaggregated data and information was collected.

The lead evaluator adhered to Brooke guidance and formatting requirements to produce good quality deliverables, i.e. inception report, and evaluation report. The evaluation report adhered to the guidance given in Evaluation Report Template provided in Annex VI of the TOR, especially with regard to overall formatting of the evaluation report, formulating and presenting recommendations, and rating the intervention against the evaluation criteria by using Evaluation Criteria Rating Table. The documentation of Good Practice followed the guidance and structure of the Good Practice Template given in Annex V of the Terms of Reference document.

V. Evaluation Findings

Overall assessment of the intervention against the evaluation criteria

Regarding the validity of design, on an average the performance met the expectations. The programme complied with the exit strategy by gradual withdrawal from free treatment services and shift to paid services through local institution building and linkage to service providers. However, the timing of exit was not built into the design and a detailed exit strategy was designed much later, allowing less time for the field staff to plan for exit. The exit from the unit took longer time as the focus and indicators on exit kept on changing. BI did not focus on advocacy in the programme design. Most of the weak links in the design was observed in the initial period and these were addressed later on.

On relevance/appropriateness, the performance consistently met expectations. Various strategies were adopted at different stages of the programme to realize the goal of ensuring acceptable level of welfare for working equids. Participatory processes were adopted to identify problems for equine welfare faced by the communities in question and possible solutions came from the communities themselves. Equid owners and service providers were consulted at the unit level planning meetings, District Equine Welfare Ceremony, and the Ashwamitra conference. The involvement of owners and Ashwamitras in various forums created a sense of ownership and led to their overall empowerment. Strategies such as PWNAs, healthy equine competitions, and the ranking of units at the regional level conference were well accepted and should be replicated in future projects.

Regarding coherence, the performance met the expectations. Capacity building of existing resources such as local farriers and LHPs was done for better acceptance by the community. The BI and AHD staff maintained a cordial relationship with each other. BI provided refresher training and technical guidance to AHD on equine issues while AHD involved BI in the health camps and district level workshops, especially on Glanders. There was widespread awareness about the NRLM programme among women EWG members and uptake of benefits from the scheme was high. Awareness about the labour card and

livestock insurance was not as prevalent among equid owners as the NRLM programme. However, a few equid owners had received the benefits through the labour card and livestock insurance scheme.

Regarding effectiveness of management set up, on an average the performance met the expectations. The previous management structure of the exited units, which existed till March 2017, was conducive for implementation of activities. Field operations were strengthened based on learning. With the end of free treatment services, a restructuring of staff was done after March 2017 in each unit. Although until 2015 there was no advocacy staff at the BI headquarters to plan and implement advocacy activities, presently there are five staff members in the advocacy team. The CEO took a leadership role for policy advocacy at national and state level and the advocacy team played a supportive role. BI did not have advocacy staff at regional level although animal health is a state subject. Therefore, Advocacy at state level was limited to the AHD only.

Regarding effectiveness, the performance consistently met expectations. Adequate emphasis was given to implement activities and achieve the outcomes on service provision and community engagement components. The exit targets on all the key indicators were achieved in all the units with a few exceptions. Under the intensive approach efforts were made to reach out to equid owners, brick kiln owners and contractors at the brick kiln sites. The focus on advocacy activities to create a favourable policy environment began much later on in the interventions. Regardless, in some areas it achieved success in a short time. Local institutions and community-led initiatives played an important role for demand generation of services. Equid owners were satisfied with the services of trained LHPs and farriers. The cost of services varied from unit to unit depending on the living standard of the area. For most of the owners, the cost of services was affordable. Equid owners were able to realize the impact of adopting improved husbandry practices on the decrease in diseases in their equids. However, the majority of owners at brick kiln sites were concerned about new challenges which affected their livelihood.

Regarding efficiency, on average the performance met the expectations. The initial years of partnership saw a participatory mode of working and suggestions by partner staff were taken into account. Later on, decision on strategies and budget for partner units became prescriptive in nature making partnership appear more like contractual project. Partner organizations had a limited role in the management of staff. Partner units were less expensive in comparison to direct units. A substantial proportion of the cost in direct units was on human resources as the salary of direct unit staff was higher than partner unit staff. Additionally, there was no visible difference on achievement of results between direct and partner unit. The exit assessment result showed that exit targets for all the key indicators were achieved in both the direct and partner units.

On sustainability and likelihood of impact, the performance consistently met expectations. The acceptance of knowledge on good husbandry practices among the owners and women members is sustainable in the future as owners and caregivers understand the benefits of having changed their behaviour to equids. Linkage with trained LHPs is sustainable as there is increased demand for their services. The linkage with trained farriers is sustainable as both owners and farriers stand to benefit from shoeing regularly as per the need. Female groups and associations are sustainable as the members realized the potential and role of such groups in addressing their urgent needs. The functioning of ARCs is sustainable since they act as one-stop centre for linkage with service providers. The sustainability of men EWG groups is in question as these groups were found to be less stable due to migration for work. The functioning of federations at the district level in Uttar Pradesh is found to be less viable. The use of PWNAs has resulted in behaviour change of the community and the likelihood of such change could be predicted for the future. However, for equid owners who migrate to brick kilns such degree of behaviour

change is difficult to achieve, as in a migratory setting focus on awareness building and triggering activities could not be done with the same intensity as was done in the villages.

Validity of Design

The interventions in Baghpat unit started in the FY 2006-07 and in Aligarh, Lucknow, and Unnao began in the FY 2007-08. During the first five years of the programme there was no clear strategy for exit. The Brooke India Strategic Plan 2010-2015 only mentioned exit in intensive areas of operation through gradual withdrawal of staff and resources. A detailed exit strategy of units was made available in the Strategic Plan 2015-2020. The exit strategy detailed out four approaches for ensuring sustainable programme impact i.e. phase-in, phase-down, phase-over and phase-out. In Baghpat, Lucknow, and Unnao units, the programme exited by March 2017 and in Aligarh the programme exited in March 2016. For planning, implementation and monitoring of the activities, annual log frames were used. A review of indicators in the annual log frame shows that, overall, appropriate indicators were identified against the goal, objectives/outcomes and outputs. However, for Outcome three (Policy/Decision makers and implementers) the indicators did not have specific targets.

Adherence to exit strategy

The programme complied with the exit strategy by gradual withdrawal from free treatment services and shift to paid services through local institution building and linkage to service providers. In the phase-down stage, the type of different activities gradually reduced, while in the phase-over stage there was a reduction of manpower and frequency of activities. The exit target was different for each unit based on the geographical and socio-economic condition of the unit, prevalence of certain disease, and conditions of work. An internal exit assessment was done in each unit to see status of exit indicators. A decision on the time of exit for each unit was taken based on the findings of exit assessment. The review of the exit assessment result shows that target on equine welfare indicators was met. On the service provider related indicators, very few indicators were below the exit target. On LHPs measuring four clinical parameters, in Aligarh the achievement was 75% against the target of 80% and in Unnao the achievement was 60% against the 80% target. The project staff assumed that by the time of exit, the target would be achieved. Field staff in the exited unit felt that designing an exit strategy in FY 2015-16 did not provide enough time for the exit. The District Manager and VO mentioned that in the absence of an intervention log frame, long-term planning could not be made. The year-wise log frames were of limited use as they only provided them a yearly target for planning.

The exit from the unit took more time as the focus and indicators on exit kept on changing. The senior management staff of Brooke India felt that the coming up of a detailed exit strategy was evolving in nature and was based on learning by doing. New indicators were added to the existing set of indicators as the programme progressed. Indicators related to linkage of local institutions with service providers, i.e. number of block level AEWG formed, % of AEWG linked with A graded trained LHP and farrier, % of AEWG earned at least INR 30000 per annum, were added much later in the programme. The achievement of target for these indicators took time and led to delay of the exit in the units.

Focus on local service delivery

The first five years of the interventions in the exited units focused on offering free veterinary treatment services, awareness and knowledge creation of equid owners on equine welfare and diseases, and

formation of EWGs. The strategic plan 2015–2020 articulated the need to strengthen local service delivery for sustainability of the programme after exit. Under strategic objective one of the plan, operational approaches were identified for strengthening the local service provision support system. The unit staff mentioned that efforts were undertaken for the capacity building of LHPs, farriers, GVOs, LEOs, Ashwamitras and CRPs. The review of indicators in the yearly log frame shows that a number of indicators were used to monitor the implementation of the activities on the strengthening of local service delivery. The review of MPRs for the four exited units showed that capacity building of local service providers was most intense during FY 2013–14 to FY 2015–16. However, the unit staff opined that such activities should have started earlier as building and strengthening of skills among the service providers takes time. It seems that there was a lack of focus to sustainability in the beginning. The activities were undertaken to address the immediate needs of the equids and equid owners rather than creating a system for sustainability. As the programme progressed, strategies such as capacity building of local service providers and creating linkages with local institutions were undertaken to bring sustainability.

Focus on Advocacy

Brooke UK did not have much of a focus on advocacy in the programme design initially since the main focus was on the achievement of equine welfare through treatment support. In the first five years of the intervention, advocacy meant influencing at the district and state level and mainly focused on the AHD. Efforts were taken to engage with the district administration for addressing issues related to treatment, fodder and safe transportation etc. With the shift in thinking at Brooke UK, policy advocacy became a critical component for government ownership and sustainability and influenced the programme in India. From FY 2013–14 onwards, policy advocacy was reflected in the year-wise log frame. The strategic plan 2015–20 included a separate advocacy strategy for bringing changes and improvements of existing animal welfare policies and laws in India. The strategy provided direction to the advocacy team of BI for undertaking advocacy with decision makers and implementers at national and state level. It is pertinent to note that the absence of an advocacy strategy at the beginning might be one of the reasons for not identifying key issues to be taken up for policy advocacy at the national level. As a result, there was no focus on policy advocacy at the national level.

It is implied that most of the time and resources of the programme were invested to provide free veterinary treatment services to working equids until the shift in strategy towards gradual withdrawal from the free services. With the end of free treatment services there was scope for achieving the intervention goal in a less time. In a new unit, most of the time and resources can be used for awareness creation, strengthening of local institutions, capacity building of local service providers and building linkages with community institutions, and advocacy. If the focus had been on these activities from the beginning of the programme, the exit target in every unit could have been achieved in a shorter period of time. Other factors such as the availability of a detailed exit strategy and lessons learnt from the evaluated units will also contribute to achieve the target quicker.

Relevance/Appropriateness

To assess the relevance of the programme it is important to see to what extent the programme addressed the equine welfare issues and the needs of the equine owning community, as they are the main custodians of the equids' welfare. It is also imperative to see how the equid owners and other important stakeholders were involved in planning and implementation to make equine welfare meaningful for them.

Addressing issues of equine welfare

To realise Brooke's vision in which working equids are free from suffering, the central focus of the programme was on providing quality veterinary treatment and support services for the working equids. In order to assess sustainable improvements in the welfare of working equids, key indicators on equine welfare were identified. A Welfare Assessment tool was used to see whether the intended results on equine welfare were achieved or not. The tool was also used to provide an overview of the welfare status and for issue prioritisation. Realising that equid owners and other key stakeholders play a key role to ensure equine welfare, strategies were designed and used to improve welfare-friendly management practices. Efforts were made to access quality services from local service providers through capacity building and linking them with local institutions. All these strategies contributed to attaining the goal of acceptable level of welfare for working equids. This shows that while different strategies were undertaken at different stages of the programme, the central focus of ensuring equine welfare remained intact.

Addressing of community need

From the FGDs conducted with men and women EWG members it appeared that the equid owning community had very limited knowledge of equine diseases and their prevention before BI started the intervention. The programme on equine welfare became relevant as it tried to make a happy union between the community needs and BI's central focus on equine welfare. The identification of problems and possible solutions to ensure equine welfare was done by the communities. Participatory tools such as Resource Mapping, Root Cause Analysis, and PWNAs were useful to identify the needs of the equine owning communities such as availability, affordability and accessibility of quality farriery services and health services. Although PWNAs, as a participatory tool, were led by BI initially, community members liked this tool and later conducted PWNAs on their own. A few suggestions from the communities, such as wall painting and a healthy equine competition also helped to design effective awareness-creation strategies for improved husbandry practices. Interviews with SMT and SPO revealed that participatory exercises such as Present Situation Analysis and Problem, Cause, Existing practices to address cause and opportunity were helpful to identify the problems faced by the equine owning communities.

Stakeholder involvement in planning and implementation

Equid owners and service providers were consulted during the planning and implementation at the unit level planning meeting, held in October–November of the year. Feedback of equid owners, EWG members and Ashwamitras were taken during the District Equine Welfare Ceremony (Ashwa kalyan samaroh). The three-day Ashwamitra conference every year at regional level, in which selected leaders of EWGs, AEWGs, and Ashwamitras participated was used for cross-learning, exposure and future planning. During the interaction, SPOs mentioned that at the regional level conference (at Lucknow), units were given ranks based on the feedback of equid owners. Participants' feedback was sought to improve the Information Education Communication material.

Empowerment to take ownership

The involvement of EWG, AEWG members, and Ashwamitras in various forums such as unit level planning, and conferences created a sense of ownership and led to their overall empowerment. During the FGDs, it was shared that the active equid owners realised the importance of PWNAs and carried out the exercise in their communities independently. In almost all the FGDs the community members reported that they were doing the PWNA on their own after the exit of BI. During the group discussion, all the

women EWG reported that a monthly group meeting was being conducted and most of the women participated in it. Women EWG members recounted that the utility of group savings encouraged them to gradually increase their contribution amount. Most of the female members in older EWGs felt that they are now experienced enough to manage the EWG and are planning to receive skill development training from a Government programme to start a small business. However, such confidence to deal with multiple issues of members was lacking in newer groups, especially in Muslim dominated communities as women in the Muslim community were not encouraged to engage in such activities. To address this, female members with a keen interest on community activities could be identified. Those active members could be used to influence other passive members to actively participate in group activities. The formation of EWGs took place every year of the intervention, even towards the end. As a result of a shortened support period, there was a lack of confidence amongst members in EWGs that were formed in the last year of the intervention. As an example, the members of these groups still look for guidance from VACMs to open a group bank account or for the development of a business plan to take a loan from the bank, as they lacked confidence in dealing with bank staff. Building confidence of members to negotiate with bank officials on their own takes time, especially in new groups. To deal with this, the VACMs could accompany the interested members during the initial meeting with bank staff and this would help to boost their confidence. During the interaction with AEWG leaders it was observed that a few of them were not confident of interacting with the block level officials directly to discuss on schemes for income generation activities and skills building training. This shows that a few members of the local institution lack the leadership skill and confidence to interact with government officials on their own. Interaction with CRPs of AEWG revealed that institution building and strengthening of AEWG focused on group management, record keeping, and conflict resolution skills but not on skill sets such as building leadership and confidence to engage with block level officials. Future interventions should note this and place equal emphasis to build these important skill sets.

Replication in other areas

The group discussions with equid owners and interaction with other key stakeholders resulted in suggestions regarding what should be replicated in other units. Equid owners as well as women EWG members suggested that the PWNA should be replicated in new units as it offers them the opportunity to identify equine welfare issues and possible solutions for it. Although the PWNA as a participatory tool was led by BI initially, FGDs with men and women EWG members and interaction with equid owners revealed that community members liked this tool as they themselves were involved in the exercise. The members of the group discussion added that even after the intervention was exited they continued conducting the PWNA on their own, albeit less frequently. The participation in the PWNA made them realise the importance of adopting good husbandry practices to keep their equids healthy. The owners and EWG members felt that promotional events such as healthy equine competition among equid owners, competition on equine issues among women EWG members, and children art competition on equids should be held in other areas as these events help in appreciating the good work and make the process of learning exciting. Interaction with EWGs, AEWG members and Ashwamitras revealed that the ranking of units at the regional level conference was valuable as it gave them an opportunity to provide feedback to the BI programme. They also found the conference informative as they got to know about positive practices from other units. Such conferences should be replicated in other regions as well.

Coherence

Use of local resources

The programme was able to identify local resources through resource mapping and a PWNA. The identification of locally available farriers was easier as the equid owners were already using their services. However, LHPs that had knowledge on equine treatments was difficult to find as the LHPs only had experience treating other animals. The participatory engagement with the community helped the VACMs identify a few active members of the community to act as Ashwamitras. The programme built the capacity of existing resources such as local farriers and LHPs so that their services would be better accepted by the community. Interaction with VACMs revealed that in certain areas there was no farrier. In such cases, identifying a community member with interest to learn farriery was challenging.

Access to government schemes

Among the government schemes, there are two schemes which directly apply to the equid owning community and one scheme that applies to the women EWG members. Under the Uttar Pradesh Building and Other Construction Welfare Board, a person involved in any of the forty construction activities notified by the board is eligible to get a labour card if the person was engaged in a minimum of 90 days of construction work in the previous year. Since the work that equid owners do in Brick Kiln sites is one of the notified construction activities, equid owners are eligible for this. Interaction with the Assistant Labour Commissioner revealed that various benefits under it are updated at regular intervals and now it has 17 schemes. The activities focusing on access to the labour cards for equid owners began three years prior to the end of the intervention.. However, FGDs with equid owners brought to light that awareness about the labour card is not widespread. Those who had labour cards were not fully aware about the various benefits available. Although most of the CRPs of the AEWG are aware about it, this information did not reach the equid owners at the village level. Regardless, of the few equid owners that reported that they received the benefits under it, the most common one was getting a bicycle.

Livestock insurance under the National Livestock Mission is a centrally sponsored scheme of Government of India being implemented by state AHDs. Since last year, equids became eligible for subsidized insurance under this scheme. Among the equid owners, awareness on livestock insurance is low. Interaction with the GVO revealed that the process takes a long time as there is only one surveyor of the insurance company at the district level and the surveyor only visits when more people are willing to take the insurance. FGDs with owners showed that they are less interested in taking the livestock insurance as they did not like the big size of the tag attached to the ear of equids, as their perception is that it could lead to ear injury. Moreover, insurance is done through a Veterinary doctor at the local hospital and he has a limited quota for equids, which prevents all equids to be covered. All these factors resulted in low uptake of the insurance. It is important that BI should discuss such implementation issues with relevant state level AHD officials for a solution.

On the other hand, awareness among women EWG members on National Rural Livelihood Mission supported SHGs is high. Such awareness is higher in the NRLM intensive blocks as the focus to convert the existing groups into NRLM supported groups is more in these blocks. During the FGD with women EWGs it was found that majority of the EWGs formed under the BI programme have been converted to the NRLM supported Self Help Groups (SHG) by complying to the norms prescribed by the NRLM so that they can avail the benefits. Such groups have received INR 15,000 as a revolving fund from the NRLM. A few older groups who had better grading (higher value bank deposits) have also received INR 110,000 as a Community Investment Fund.

A women EWG member in Unnao smilingly said, "Now that our group has linked with government, we will approach the Bank to provide us loan to start some big business. It seems government has recognized the good work of our group".

Awareness on other schemes such as Rashtriya Krishi Vikas Yojna³ is very low in all exited units, except for Aligarh. Under this scheme, a subsidised loan is available for agriculture equipment such as a chaff cutter. The scheme has utility for owners having agricultural land, and during the FGDs it emerged that there are a few equid owners who have small agricultural land. From these findings it can be inferred that awareness about government schemes and the benefits associated with it among the owners and female members is crucial for getting access to the benefits of schemes. The low awareness on labour card and livestock insurance at the village level could be attributed to slow diffusion of such information from the CRPs and AEWGs and illiteracy among the equid owning community. India has a panchayati raj system of governance, in which gram panchayats are the basic units of local administration. A gram panchayat is divided into wards and each ward is represented by a ward member, who is directly elected by the villagers. Village ward members keep updated information on various schemes. There is scope for linkage between Ashwamitras and a ward member in which the former can get the information on schemes and further disseminate it among community members.

Leveraging AHD for equine welfare

The AHD is responsible for providing health services and for the implementation of government programmes on livestock in the state. Therefore, it is important to understand how the BI programme leveraged the AHD to maximise results on equine welfare. It was found that the BI staff and AHD staff maintained a very cordial relationship with each other. As part of the advocacy activities, unit staff sensitized the AHD about the activities undertaken by BI and sought their cooperation. The unit staff invited district level AHD staff (GVOs, LEOs) to attend the orientation workshop and refresher training on knowledge about correct equine treatment and a discussion on major issues and possible solutions. VOs from the unit gave special lectures on equids in LEO training centres to familiarise the LEOs on equine handling and equine diseases. The AHD invited BI to participate in the health camps organised at district and block level. During the interaction, GVOs mentioned that on the request of the BI VOs they organised health camps in equine intensive villages so that as many equid owners as possible could participate and benefit from free treatment. The district AHD staff sought the help of the BI VOs in the ongoing surveillance to detect Glanders. Regarding the vaccination of equids, AHD could not be of help as presently government vaccination drives on livestock do not include equids. On this issue, one Chief Veterinary Officer (CVO) explained that BI needed to do advocacy at the state level to change the existing policy to include equids in the government vaccination programme. Given the small number of equids compared to a large number of ruminants in the state, equids have a good chance of being included for the Tetanus vaccination drive as budget implications would not be huge. It was observed that although awareness on equine health has increased within the AHD due to sensitization efforts by BI, reliance of

³ This programme is a State Plan Scheme that seeks to provide autonomy to districts to draw up plans for increased public investment in Agriculture by incorporating information on local requirements, available natural resources/ technology and cropping patterns so as to significantly increase the productivity of Agriculture and its allied sectors and eventually maximize the returns of farmers in agriculture and its allied sectors

AHD staff on BI has also increased. As a consequence, there is absence of complete ownership among the AHD staff to deal with equine welfare issues.

It is pertinent to mention that the mandate of AHD is to provide veterinary health care to all species including equids. BI needs to build their capacities in equine health through trainings and workshops and then take a back seat allowing AHD staff to take the lead in providing veterinary healthcare to equids. At the same time equid owners also need to be sensitized by BI, so they know to demand services from AHD in the same way as they would for their other livestock.

Effectiveness of management set up

Management set up for implementation

The operational structure and staffing was similar in both the partner units and direct units. In the previous management set up (before March 2017), the unit staff consisted of one District Manager, one VO, and a number of VACMs depending on the number of clusters in the unit. In the direct units, the District Manager was responsible for the planning and implementation of activities and took guidance from a BI Line Manager. In partner units, the District Manager took guidance from the Project Director, who provided direction and oversight to the team. The previous management structure of the interventions was conducive for implementation of activities. Field operations were strengthened based on learning. For example, initially all the calls for treatment from equid owners were attended by VOs and it was challenging to attend all the calls due to the large geographical area they were responsible for. To address this problem, VACMs were allowed to take calls in their respective areas of operation. For minor problems the VACMs attended the call, while major problems were dealt with by the VOs. During the interaction with partner staff it was found that VOs used motorcycles to travel and they faced difficulty to cover large distances during the rainy season. In the direct units the provision of a four-wheeler vehicle made the travelling easier. For the site selection, the primary survey of equid owners and selection of villages took a longer time as this was being done for the first time. In the units that came later, the process took less time.

It was found that in clusters where the VACM was a woman, formation and nurturing of women EWG groups was better, especially in Muslim communities⁴. In such communities, where women members talking to a male staff is not easily accepted, involving women members in the PWNA became easier when facilitated by a woman VACM.

With the end of free treatment services, restructuring of staff was done in March 2017 as staff time and resources spent on free treatment services were no longer required. In the new management set up, the positions of VO and District Manager were merged into a VO-cum-Manager. The VO-cum-Manager conducted both the technical and managerial functions in the unit. In an interview, a VO-cum-Manager shared that he was already familiar with the technical functions and, to conduct managerial functions, he initially took the guidance of SPOs and other senior staff. The field activities were managed by VACMs and a senior VACM. After the end of free treatment services there was more emphasis on strengthening local community institutions and further linkage with service providers, and engagement with district officials for access to welfare schemes. To align with the new management set up, fresh recruitments were made for the staff in the new units and mobile partner units. Experienced VACMs who joined in the new units and mobile partner units feel that their salary is very low considering the years of experience they have

⁴ Women in this community do not interact with men who are not related to them.

working with BI and in view of the technical nature of the job. During the interaction with VACMs it was shared that before March 2017, the VACMs were getting a minimum gross salary of INR 17,500 while after March 2017 the new gross salary was INR 14,000. During the interview, the Director of the partner organisation in Lucknow clarified that the fresh recruitment and new salary structure did not take into account the previous experience of VACMs. This reduction in salary affected the motivation of VACMs. During the interaction the VACMs revealed that they had to do similar type of work in less salary despite having worked for several years in the field. The VACMs conceded that although the reduction in salary has not affected the quality of work, they wanted a hike in the present salary to deal with the increasing cost of essential commodities.

Since providing free veterinary treatment is no longer the main objective, in the new management set up, veterinarians are well poised to provide technical back stopping to staff and LHPs as well as manage the project. However, to effectively conduct managerial functions, veterinarians with previous experience in project management should be recruited. Project management training could be considered if they lack the experience of managing a programme.

Capacity to plan and implement advocacy activity

Till February 2015, there was no staff for advocacy at BI headquarters to plan and implement advocacy activities. An Advocacy Coordinator was appointed in February 2015 and the position was upgraded to Head of Advocacy in September 2016. The latest organogram of BI shows that the advocacy team at present has five staff. The team is headed by Head of Advocacy. The head is assisted by two Information and Communication Officers, one Advocacy Officer, and one Advocacy Assistant–Gender and Livelihood. The team members engaged in providing the necessary support such as background research, issue identification and preparation of draft para-vet regulation etc. This helped the CEO focus on key issues when interacting with policy makers at the national and state level. During the interaction with SMT it was shared that the CEO takes a leadership role for policy advocacy at national and state level and the staff of the advocacy team play a supportive role. The active role played by CEO in policy advocacy contributed to the success as he is well recognized in AHD at the centre and states. However, as a CEO he has to perform other important responsibilities as well. The SMT felt that a highly articulate and experienced consultant specialised in advocacy should be hired, as effective advocacy needs a highly specialised skill. Furthermore, there is no advocacy strategy policy or document that can give clarity on key issues to be taken up for advocacy.

The benefits of successful policy advocacy in the area of Glanders compensation and livestock insurance were translated into receiving of benefits at the ground level. During the FGD with men EWG members, it was reported that the affected equid owners have got the increased compensation amount of INR 25,000. It was also found that equid owners have submitted the applications to claim the money under the livestock insurance policy. It is expected that more number of affected equine owners will benefit from these schemes in the future.

BI does not have separate advocacy staff at the unit and regional level. Advocacy activities mainly focused on sensitising and familiarising the government department staff about BI activities. The head of region, SPOs and SVOs were involved in interacting with the AHD while District Managers and VO were involved in rapport building and relationship establishment with district level departments such as NRLM, Labour, and Rural Development including AHD. During the interaction with SPOs it emerged that advocating with other departments like NRLM at state level remained a challenge as BI was commonly perceived as an organisation working on equine health.

Advocacy at the state level was limited to AHD only. Although veterinary service is a state subject and each state has its own livestock policies, there was no position at the regional level to undertake policy advocacy. On key policy issues, the CEO of BI took a leadership role to advocate the issue with the AHD Director. There is scope for policy advocacy at the state level for issues specific to the state. A separate staff at state level will be helpful to engage with state officials and also provide support to the CEO in advocacy efforts.

At the unit level, District Managers were involved in sensitising the department staff about access of government schemes by equid owners. Although they succeeded in establishing relationships with the District Rural Development and Labour Department, less effort was placed in this when compared to the efforts in establishing a relationship with AHD. The previous skills, experience and networks of District Managers played an important role to establish contacts with department officials. In Aligarh, the previous work experience of the manager with the agriculture department was helpful to build cordial relationship with the same department. There was not much effort to build relationship with other key departments such as Social Welfare, and Water Supply and Sanitation. Across the unit, the VO maintained a cordial relationship with AHD at the district level. With the creation of the new VO-cum-Manager post, establishing contacts with various departments remained a challenge as they did not have prior experience in relationship building. During the interaction a VO-cum-Manager pointed out that senior staff of BI should introduce the unit staff to the nodal officers of the district.

Effectiveness

Focus on Outcomes

To achieve the goal of ensuring acceptable level of welfare for working equids, the interventions had three outcomes. Outcome one was to improve welfare of working equids through increase in uptake of quality services from local service providers. Outcome two was to ensure equid owners and equid owning communities were able to generate demand for services to address equine welfare issues and adopt improved husbandry practices. Outcome three was to facilitate policy change and to create favourable policy environment for promoting equine welfare. Outcome one focused on service provision component while the focus of outcome two was on community engagement and outcome three was on advocacy.

Under service provision, capacity building of LHPs and farriers was done across all units so that quality services were available to the equid owners and services of trained LHPs and farriers were utilized by the owners. Efforts were also made to provide refresher training to GVOs and LEOs. The review of district-wise log frames and the 2015-16 exit assessment result showed that the exit targets on all the key indicators were achieved in all the units with a few exceptions. With regard to LHPs measuring the four clinical parameters, all the units except Unnao achieved the targets. For other indicators, i.e. LHPs demonstrating welfare friendly handling and restraining of equids, using a head collar during treatment, and using a disposable syringe and needle, the target has been achieved in all the four units. Qualitative information collected during the field visit supported the above result. Interaction with LHPs revealed that after the training from BI they were aware of welfare friendly handling and restraining of equids. FGDs with equid owners found that they are now ensuring the use of disposable syringes and needles during treatment. During the interaction with VOs and VACMs it was shared that LHPs who had completed a certificate course on first-aid and artificial insemination either from AHD or accredited organisations such as BAIF Development Research Foundation or Parag Dairy were selected to be trained. However, there were some LHPs who had received formal training from BI only. Here formal training means both in-house and in-situ training provided to LHPs by BI. In Aligarh, the evaluation team met a BI trained LHP

who did not have prior certification either from the government or a government accredited organisation. It was found that the LHPs were able to diagnose Surra and the line of treatment advised was also correct. During the interview in Aligarh, the LHP narrated the successful line of treatment undertaken by him while treating equid for Surra. Later on, his story was corroborated by equid owners during FGD. Similarly, another LHP in Unnao also claimed to have been treating cases of Surra which was validated by BI vets.

CQM was used to grade LHPs and trainings were provided accordingly. Both in-house and in-situ training were given to LHPs. The LHPs shared that in a few cases of treatment they still need the oversight of a BI VACM and VO. It should be noted that LHPs are not part of the legal system as the Veterinary Council of India does not acknowledge paravets who have not undergone a two-year diploma course. Advocacy to mainstream these LHPs should be the focus of BI in future projects. The exit assessment included an indicator on the quality aspects of the services, such as % of owners satisfied with LHP and farrier services. These indicators were not present in the baseline assessment or in ensuing data collection assessments and were only introduced in 2016-17.

Efforts under community engagement included awareness creation of good husbandry practices among equid owners and women EWG members so as to adopt improved husbandry practices and be able to identify symptoms, causes of various equine diseases and conditions like colic, wound, surra and tetanus and take preventive measures to combat them. Activities undertaken to promote primary care practices included the formation of Ashwamitras at each village, capacity building of Ashwamitras, and provisions for availability and use of first-aid kits in villages and brick-kiln sites. To address the issue of sustainability of the programme, the last two years of the intervention focused on formation of local institutions such as male and female EWGs, AEWGs, and federations as well as linking them with services providers (LHPs, Farriers) to improve the uptake of quality services. The review of the log frame and the 2015-16 exit assessment result found that the exit target on almost all the key indicators was achieved across the units barring a few exceptions. The achievement on % animals receiving a complete dose of TT vaccine was slightly below target in all the units except Unnao. As per the 2015-16 exit assessment findings, the target for at least one equid owner/Ashwamitra providing primary equine treatment was not achieved in Baghpat. The analysis of baseline and endline report shows that, although the programme in Baghpat started in FY 2006-07, only 35% owners were offering regularly chopped roughage to equids until 2014. This figure rose to 81% within one year. Similarly, in 2014, 43% owners were cleaning hooves daily which rose to 100% in one-year. This merits further investigation so that lessons can be learnt and changes made in implementation so as to get results in shorter period.

Qualitative information from FGDs and interviews reflected a broadly similar picture on awareness creation, local institution building and creating of linkages. Across the units equid owners and women EWG members had awareness on good husbandry practices, avoiding wrong practices, causes and symptoms of common equine diseases/condition such as colic, Surra and tetanus. The positive changes included offering water at intervals, cleaning of eyes in the morning, grooming equids after work, offering soaked feed and salt etc. The equid owners also mentioned that after cleaning the tethering areas and horse stables, they sprinkle lime powder to disinfect the premises. During FGDs, owners as well as women reported using ethno-veterinary practices like applying neem oil/garlic paste to keep flies away.

During a discussion with women members they shared that the transfer of knowledge from male owners to their spouse did not happen most of the time. Women reported that they learnt about good practices from PWNAs and discussions in EWGs. Awareness on tetanus vaccination was found among owners in all the intervention areas. They called LHPs to administer Tetanus vaccine injections and had no problem in paying for it (the price for which was normally INR 30 per injection). There was understanding and good

awareness regarding cleaning of hooves but it was still not being practised regularly due to lack of time. On treatment-seeking behaviour it was found that in villages the owners first use the traditional remedies, ethno-veterinary practices or medicine available in the first-aid kits. If the condition did not improve, they called a LHP for further treatment and, in case the condition worsened further, they consulted with a BI VACM and VO or called the private VO for treatment. In certain areas of Lucknow and Baghpat the owners shared that they took the equids for treatment to government hospitals or dispensaries which were very close by. Here the vet or LEOs were able to provide treatment and costs were nominal. The owners and female members disclosed that incidence of diseases had reduced ever since BI began working in their area. A few equid owners during the discussion reported that saddle wounds have become rare but incidental wounds due to injury from barbed wires etc. still take place.

An equid owner in Lucknow expressed, "For me the health of my animal is important. If the equid will not be healthy and fit, from where will I earn to feed my children? Every morning I clean the eyes of equid, offer water, give fresh soaked feed mixed with salt and then do other work".

One men EWG member in Aligarh said, "I massage the horse after work and this helps in proper blood circulation".

An Ashwamitra in Aligarh conveyed, "Before BI came here, every other day the equids in the village were falling sick. Now, not only the common problems such as wounds, tetanus has reduced but even dangerous disease such as Surra is seen very less".

Under the intensive approach, efforts were made to reach out to equid owners, brick kiln owners and contractors at the brick kiln site as most of the owners work at the site for almost five to six months every year. Positive changes in behaviour of equid owners and brick kiln contractors were observed at the brick kiln sites. It was observed that the premises and dwellings of owners and equids were in hygienic condition. All the brick kilns visited had availability of clean drinking water facility from hand pumps, flat roads, trees that provided shade and shelters for owners and animals. In a few sites there was no arrangement to protect the equids from heat except their sheds which can get heated up during summers. Interviews with equid owners and brick kiln owners revealed that after sensitization by BI, overloading was discouraged by the brick kiln owners and equid owners also realised its bad effects. Equid owners stated during the interviews that awareness on good husbandry practices and common diseases has improved. First-aid kits were available in all brick kiln sites and no expired medicines were found in them. This goes to show that the kit is being used regularly and medicines used are being replaced diligently. The first-aid kit is usually kept with the contractor for initial treatment during emergency. It was also observed that contractor showed less interest to promote the use of first-aid kit and preferred to call the local LHPs to avoid more expenditure in case animal's condition became serious. Good linkages with farriers and LHPs were found at the brick kiln site. During their interview contractors mentioned that VACMs shared contact numbers of trained LHPs with them and they called up the LHPs whenever there was need. At a few brick kiln sites the brick kiln owners made arrangements for vaccinations before the start of work season as they realised the value of vaccination in reducing diseases. Similarly, contact numbers of trained farriers were shared with owners and usually once a fortnight they called up the farrier for farriery. In a few sites, equid owners visited the nearby farrier for farriery. Practice of changing two horse shoes, either front or hind hooves, was common after BI made them aware that changing one shoe can create imbalance and injure the animal. Cleaning the hooves was not practised regularly by the equid owners but they were aware of the need to do so.

Community-led initiatives

The programme endeavoured to leverage the strengths of local institutions for post-project sustainability. The participatory planning with equid owners pointed out the need of a local champion to support the equid owners to access the services of LHPs, farriers, and hair clippers. This led to the identification of an active owner among the community, known popularly as Ashwamitra, and his capacity was built to be able to provide first-aid. The group discussion with owners revealed that Ashwamitras played an important role to guide the equid owning community for emergency response and promoted the use of medicines in the first-aid kits as an immediate line of treatment. He helped the owner to contact the trained LHPs and in case further help was needed for treatment, he called up the VACMs and VOs. In addition to their present role Ashwamitras could be further leveraged for awareness creation of government schemes among the owners.

To address the community demand for availability of essential medicines efforts were undertaken to make the medicines available in local medicine stores. ARCs were created to provide information on service providers such as LHPs, and farriers as well as private VOs. During the interaction, owners of ARC centre mentioned that they provided information about medical retail shops to equid owners that kept medicines for equine treatment and also about local shops that sold concentrates and fodder. Few ARC centres established linkage with medicine retail shops that provided medicines to owners at a discounted rate. Few ARCs also acted as marketing centres in which they bought the balanced feed and salt from AEWGs and sold it at a small profit. The easy availability of medicine and quality feed to the owners contributed in equine welfare.

Service Quality

To ensure that services of LHPs and farriers were of good quality, the programme used tools such CQM and FQM. The review of the year-wise log frame revealed that to capture owner's satisfaction with LHP and farrier services, CQM and FQM based indicators were introduced and were used during 2016-17 exit assessment. FGDs with equid owners and women EWG members as well as interviews with equid owners at brick kiln sites showed that they were satisfied with the services of trained LHPs and farriers. The owners pointed out that handling of equids was done properly during the treatment and LHPs also provided important information on the prevention of diseases. Similarly, trained farriers were doing welfare-friendly handling during farriery. The practice of applying appropriate sized horse shoes, proper trimming and no dumping was followed. During interaction, the farriers informed that after the BI training they adopted the practice of changing two horse shoes at the same time to ensure proper balancing. In one area of Aligarh it was found that there were a few farriers who started the farriery profession after the exit of BI. They were charging less money compared to the trained one. This development has limited effect on the BI trained farriers as most of the owners prefer to take the service from a trained one.

Regarding the affordability of the quality service, it was found that the money charged for treatment by LHPs was not uniform across the units. The average rate (INR 300-500) per visit was found to be higher in Aligarh and Baghpat when compared to Lucknow and Unnao (INR 200-300). One of the reasons for this could be the better financial status of people in western part of Uttar Pradesh, where Aligarh and Baghpat are. Though an effort was made by the partner staff to fix a rate for LHPs at the EWG and AEWG level, it did not work due to practical issues. For treatments, LHPs charge as per the nature of the illness and their fees include consultation and the cost of medicines.

During the discussion, the owners expressed their readiness to pay for quality services provided by LHPs, farriers, and hair clippers. For them, equids are the main earners of the family and they are ready to pay

for the services. A few owners found the rate charged by LHPs costly as they did not have enough income. During the interviews, District Manager and SPOs revealed that there are owners whose main income sources are from selling vegetables in local markets and in transporting of goods. For these poor owners the rates charged by the LHPs are not affordable. However, the average rate for the farriery service was found to be uniform across the unit (INR 100-120 for four horse shoes).

An equid owner in Aligarh said, "I run my house because my animals are healthy and fit. I prefer good quality treatment from trained LHP even if he charged money for it. My animals are like my family members".

An Ashwamitra in Baghpat shared "We have the mobile number of trained LHPs and they attend the animals immediately when we call them. The owners do not hesitate to pay them. If the treatment is done at the beginning we do not have to go to big doctors and spend a lot of money later on.

Veterinary services offered by BI through LHPs, BI vets and basic treatment by Ashwamitras were accepted by the community since these were difficult to source before the BI intervention. The community also accepted the role of the Ashwamitras as they were selected from the equid owning communities and were useful to provide basic treatment response in emergency situations. The role of ARCs as a center for service provision was also recognized by the equid owners as it provided information of LHPs and farriers, and support services such as feed, saddlery etc.

Effect on livelihood

The Sustainable Livelihood Framework of DFID classifies five livelihood assets, namely Human Capital, Social Capital, Natural Capital, Physical Capital, and Financial Capital. For the purpose of this exit evaluation, Social Capital and Financial Capital were assessed. Equid owners were able to realize the benefits of adequate husbandry practices. During discussions most of them were able to see the benefits, namely the reduction of disease incidence, decrease in severity of disease, improved health and productivity of the equids. The increased realization of potential benefits of a healthy equine on income also influenced them to go for practices such as vaccination and deworming of equids. Equid owners at the brick kiln sites were more vocal in describing the positive benefits of equine welfare on animal health and subsequent impact on their own livelihoods. A few of them divulged that now they are able to undertake more trips at the site and this led to higher daily income for them. Formation of EWGs at village level, and AEWGs at gram panchayat and block level provided an opportunity to equid owners and female members for income generating activities. The linkage of women EWGs with NRLM further broadened the scope for income generation.

During the FGDs, women EWG members shared that their resilience to face adversity has increased through the support and encouragement provided by the group members. The interaction among members of the group has helped create social capital and this has led to building up of their self-esteem. Their vulnerability to moneylenders also decreased as the members easily got the loan from the EWG to meet their urgent needs. The presence of BI field staff to provide information and guidance on equine issues created a sense of security among the equine owners to deal with any situation related to equine health.

The majority of the owners at brick kiln sites were concerned about a new set of challenges which affected their livelihood. Interviews with brick kiln owners revealed that the recent decision of the National Green Tribunal on banning of unauthorised sand mines has badly affected the construction sector and slowed down the demand for bricks. This led to the closure of a number of brick kilns and also resulted in

the delayed start of brick kiln season. The average duration of work at brick kiln sites has reduced from seven months to five months. This has led to a decrease in income for equid owners. The rising costs of feed and falling income from brick kiln work posed challenges for equid owners. In addition, during discussions, a few equid owners expressed their uneasiness and revealed that the penetration of battery rickshaws in small towns has affected their earning from transportation of goods.

Advocacy efforts

The addition of advocacy as a separate outcome in the log frame reflects the increasing focus given to advocacy in the recent years. From the earlier focus on influencing efforts with government departments, advocacy has been recognized by BI as an instrument to facilitate policy change and to create a favourable policy environment to promote equine welfare. Policy advocacy on Glanders was successful, illustrated in the increase in compensation for equid owners by the Department of Animal Husbandry, Dairying and Fisheries of Government of India from INR 50 to INR 25,000 for horses and INR 16,000 for donkey and mules that contract the disease from August 2015 onwards. During the interview with BI VOs and government CVOs, it was found that district level AHD officials were seeking technical help from BI on collection of serums for surveillance and for organizing district level workshops on Glanders. Livestock insurance became operational in 2013 but equids were not included in the scheme. Advocacy efforts by BI resulted in the inclusion of equids for insurance purposes. The review of government notification shows that, under the Livestock Development, horses, donkeys and mules were included in the scheme during the FY 2017-18. Several factors contributed to the success of advocacy activities, such as Glanders compensation and the inclusion of Equids into the livestock insurance policy. The vast experience of the BI CEO as an expert in equine health (and Glanders control within it) and his continuous interaction with policy makers in the AHD at national level helped influence the policy makers. In addition, the positioning and recognition of BI as an equine welfare organization also contributed to the success.

BI in association with the National Academy of Veterinary Science, a registered NGO, prepared a Draft Para-vet regulation for India. The draft regulation has been submitted to Department of Animal Husbandry, Dairying and Fisheries, Government of India. BI also developed a draft equine policy for the states of Maharashtra and Uttar Pradesh. This draft policy has been submitted to the respective state governments for further deliberation. There are a couple emerging areas where BI should undertake policy advocacy at the national level. These are the inclusion of LHPs in the legal framework and the inclusion of equids in the government vaccination programme. The relationship building and engagement with the AHD department in Uttar Pradesh did not face major obstacles due to the positioning of BI as an equine health organisation. However, it is pertinent to mention that more effort was made to establish relationships with the AHD as it was felt that working with AHD staff would bring credibility to the work with equine owning communities. In future interventions, more effort should be made to work with other state level departments such as Rural Development, Social Welfare and Labour.

Efficiency

Evolution of Partnership Approach

As the area of operation under BI expanded through establishment of new units in different states, this led to a change in the approach in management. Various human development approaches influenced the management approach of Brooke and subsequently BI on the merits of partnership. From 2007-08 onwards, staff with a development sector background in BI also influenced the thinking for partnership approach. Subsequently, units were managed through two modes; direct and partnership. It was believed

that in the partnership approach resources would be efficiently used to achieve the result. The main purpose behind the partnership approach was to branch out the operation and cover a maximised area for equine welfare. Partner organizations have the advantage in rapport building with local communities, familiarity with local government officials and a better understanding of the local community. It was believed that the partnership approach would combine the strengths of the local organizations with BI's veterinary expertise to achieve improved equine welfare. BI met initial challenges such as a lack of specialized experience of local organizations on animal welfare and working with a scattered equine population. The strict requirement of the Foreign Contribution Regulation Act (FCRA) further limited the availability of local organizations. Initially six partners were selected through reference and after that standard processes were adopted for the selection of partners. During an interview, the senior management team mentioned that a comprehensive set of training, comprising of induction training and technical training to partner unit staff and Continuous Professional Development (CPD) were imparted as the partner organizations lacked the technical expertise on animal welfare.

Functioning of partnership approach

The exit evaluation made an attempt to assess the functioning of the partnership approach. AVJKS is the partner organization in Lucknow and NPSS is the partner for Unnao. AVJKS has previous experience in the area of agriculture, women's empowerment, and some experience on animal husbandry while working on a diversified agricultural support project. NPSS has experience in education, skills development and human development. Both the organizations showed interest in the BI programme as they realized that an animal welfare approach would lead to increasing livelihoods and development of the equine keeping community. During the interview, the Director of AVJKS held that he saw the merit of working with an international NGO as it would bring visibility to the local organization. Both Directors stated that frequent discussions were held to finalize the technical and financial proposal as it was a first-time experiment for BI working with a partner organization. In the initial years the annual budget planning was participatory in nature and suggestions of partner staff were taken into account. Later on, the budget format for partner units became prescriptive in nature. Various components of the budget, such as the salary structure of partner staff and the expenditure on medicines was decided by BI. While such steps were essential to maintain uniformity across the partner units, partner organizations felt that this limited flexibility on the budgetary component was a hindrance for planning and implementation of creative solutions. During the discussions, the partner organization directors expressed that it was a challenge for them to recruit and retain VOs and other field staff in the stipulated pay scale. Both the directors felt that their organizations had a limited role in the management of staff as compared to the senior staff of BI. During the interview, the directors expressed concern regarding the implementation issues of the new management setup such as getting right candidate for the position of VO-cum-Manager. They felt that the new setup should have been decided in consultations with the partner units.

Initially partners were selected through references, as BI was piloting an approach to work through partners. Organizations interested in working on equine welfare that had a strong local presence were approached as potential partners. Both BI and partner organizations consulted each other on the modalities of the partnership approach. Previous experience in local institution building and relationship building with district level departments was not given emphasis for the selection since the focus in the initial years was on the provision of free treatment services. However, as the interventions moved away from this, more focus was placed on institution building and networking with district level government departments. In order to align with the change in focus of the intervention, partners with experience in livestock, local institution building, and networking skill should be given more preference for selection.

Cost efficiency

In order to assess which mode of operation was more efficient it is important to undertake a comparative analysis of the economy and effectiveness of achieving results in the direct units versus the partner units. The analysis of economy would inform which mode of operation is less expensive. Analysis of previous five years of budget (FY 12-13 to 16-17) was done for direct units Aligarh and Baghpat and for the partner unit in Unnao. The budget for the Lucknow unit was not analyzed since the unit is working as a composite unit and the budgetary figure include a budget of both Lucknow and Barbanki. During the last five years the average annual expenditure for Aligarh was approximately INR 4 million and for Baghpat was INR 3 million. During the same period the average annual expenditure for the Unnao (Partner Unit) was approximately INR 2.4 million. The average annual cost of Baghpat and Aligarh was 25% and 66% higher than of Unnao. In direct units, a substantial proportion of the cost was on human resources; which accounted for 71% in Aligarh, and 72% in Baghpat. In the partner unit (Unnao), 51% of the total expenditure was spent in human resources. In direct units, the average annual expense on community empowerment (11%-13%) was slightly higher than the average spent on service provision component (9%). This reflected that more of a focus was given to community empowerment in the last five years. In the partner unit the average annual expenses on community empowerment and on service provision was almost the same (15%). The year-wise figure showed that in the direct units the annual expenditure of FY 16-17 was substantially lower than that of the previous year. This reflected substantially lower expense in the phase out stage. No such reduction of expenditure in FY 16-17 was found in the case of the partner unit (Unnao).

Analysis was done to see the comparative annual cost in terms of coverage of equids. The total number of equids covered through intensive and extensive approaches in Aligarh, and Baghpat was 8,642 and 5,839 respectively. The average yearly expenditure per equid was INR 463 for Aligarh and INR 514 for Baghpat. The total number of equids covered through intensive and extensive approaches in the Unnao partner unit was 7,414. The average yearly expense per equid was INR 324 in Unnao. Though the geographical conditions, size, and baseline status differs from one unit to another this analysis indicated the expense across different unit types per equid. The above comparison clearly concludes that partner units are more economical compared to direct units. It is important to delineate the factors behind higher cost found in direct units. The salary of direct unit staff is higher than partner unit staff as the former is considered as employees of BI. They enjoyed higher base salaries, and other provisions such as gratuity and provident funds. Direct unit staff continued to work for longer periods of time and annual increments led to them getting a higher salary. The frequent turnover of VOs and Manager in partner units led to new staff members which maintained a lower salary. This resulted in a higher manpower cost in direct units as compared to partner units.

Achievement of results

There was no visible difference in achievement of results between direct and partner units. On service provision, the exit assessment result (2015-16) showed that exit target for all the key indicators have been achieved in both the direct and partner units. With regard to community engagement the exit assessment result found that exit target on almost all the key indicators have been achieved across the different units barring a few exceptions. The qualitative information captured from the field visits reflected a similar picture. Though there were a few differences in the achievement of results, these could be attributed to the geographical conditions and contextual factors rather than to the type of unit. An in-depth look into the factors highlighted a possible explanation for the trend between the direct units and partner units. The management and staffing structure was similar for both types of units. The strategy,

action plan and set of activities were the same for both types of units as these were guided by the year-wise log frame. Similarly, a set of trainings comprised of induction training, technical training, and CPD were imparted to partner unit as well as direct unit staff. However, partner units witnessed a frequent turnover of Manager and VO which resulted in a delay in implementation as the new staff had to receive extensive training from BI.

Sustainability and Likelihood of Impact

Sustainability

The exit evaluation made an attempt to assess the sustainability of the interventions after exit. The findings on sustainability and likelihood of impact are based on a limited sample of stakeholders consulted during the evaluation. It is pertinent to mention that while soft touch activities were still continued in Baghpat, Lucknow and Unnao units, no such activities were in progress in Aligarh. The built-up knowledge over the years on good husbandry practices and equine diseases among the owners and female members was found to be sustainable as it has become embedded in their behaviour.

During the FGDs with men and women EWG members, across the sites the community reported that they were providing water to equids at regular intervals, eyes were being cleaned in the morning, equids were being groomed after work and soaked feed and salt etc. was being offered. They also realised the importance of these practices in reducing the illness in animals. Since they are practising these after one year of the exit, it alludes to the fact that behaviour change has taken place.

A women EWG member in Aligarh shared, "I find out time every day to take care of my animal, otherwise their health will be neglected. As equids are the main source of household income it is my duty to take care of them."

An equid owner in Lucknow expressed, "For me the health of my animal is important. If the equid will be not healthy and fit from where I will earn to feed my children? Every morning I clean the eyes of equid, offer water, give fresh soaked feed mixed with salt and then do other work".

According to the latest exit assessment data in four exited units, all the AEWGs have been linked with trained LHPs and farriers in Aligarh, Lucknow, Unnao while in Baghpat the achievement (83%) has exceeded the target (80%). Linkage with trained LHPs is sustainable as there is increased demand for services after the end of free treatment and government veterinary services are not available to meet the needs of the community. The increased demand for vaccination and for deworming is being met by the LHPs. The linkage of trained farriers with EWG, AEWG and BK sites is sustainable as trained farriers have benefitted due to the increased demand for their quality services. This demand is expected to continue in future as owners need quality farriery service.

A men EWG member in Lucknow stated, "After the linkage of farrier with our group I get 10% discount. The farrier is also happy as he attends 4 to 5 cases in one visit".

A farrier in Unnao said, "During the brick kiln season I remain very busy. I visit the nearby brick kilns for farriery work and attend three to four animals in one visit. The Contractor has my mobile number and he contacts me when the service is required".

Female groups and associations are sustainable as the members realized the potential of such groups for addressing their urgent requirement of cash for equine health, their own medical needs and children's education. Money required for the treatment of equids is no longer an issue as the members easily borrow from the group and get the animal treated. The group savings of EWGs and AEWGs have been used for income generation activities as well as for household expenditure like weddings, repair of house etc. Cooperation amongst women members to undertake small scale businesses selling salt packets, stuffed toy making etc. make them more sustainable. During the FGDs it was shared that the women EWG groups had average savings in the range of INR 100,000–200,000 and the AEWGs had savings in the range of INR 1,500,000–3,500,000. Most of the women EWGs have been linked with the NRLM and have received an initial grant of 15,000 Rupees. The linkage of such groups with NRLM has broadened the financial base for more income generation activities and is also a source of general wellbeing. Other factors such as good group governance, strong leadership and cohesion are expected to contribute to the sustainability of these groups in future.

The secretary of women's AEWG in Lucknow divulged, "Apart from monthly contribution from members our AEWG have multiple source of income, i.e. from annual contribution of 13 women EWGs, 5% of income from farrier and hair clipper, interest income from loan to members etc. We are planning to start a new business on toy making and bangle making to further increase the income".

One women EWG member in Unnao reported, "After the linkage with NRLM our financial base strengthened. Our group received INR 15000/ as revolving fund one year back and recently got INR 110000/ as community investment fund. We are planning to start income generation activities by using this money".

The sustainability of men EWG groups at the village level is in question as these groups are found to be less stable. Due to the fact that most of the time they are away from home, it becomes difficult to hold monthly meetings. During the FGDs with men EWG members and interview with equid owners, it emerged that several factors hindered the effective functioning of men groups. These included lack of time and interest to conduct the group meetings regularly, narrow financial base of the group and absence of strong leadership to manage the group affairs through consensus. Additionally, VACMs in Lucknow and Unnao added that alcoholism among community members and a lack of seriousness towards EWGs were other factors that also affected the success of men groups.

The functioning of federations at the district level in Uttar Pradesh was also found to be less viable as they struggled to get a steady source of income. Practical issues such as a lack of confidence of members to interact with district level officials independently and infrequent interaction among federation members are hindering the smooth functioning of the federation. During the discussion in Aligarh, the federation members shared that the larger geographical area of the district acted as a barrier for conducting regular meetings. The members reported that the last meeting of the federation was held in August 2017. Though the members were aware of the objectives of the federation, i.e. support to AEWGs with district level networking and interaction with district level government officials for access to government schemes, their implementation on the ground was weak.

The functioning of ARCs is sustainable since they act as one-stop centre for linkage with medicine stores, LHPs, farriers, and private VOs and the demand for such services is going to stay. The owners get a share of the profit from the medicine store owners and other service providers. During the FGDs with men EWGs and interviews with equid owners, LHPs, and farriers it emerged that the community members and service providers were using the services of ARCs in some form or another. However, the ARC owner needs to explore more marketing opportunities to get a steady source of income.

The ARC owner in Baghpat disclosed that, "The demand for mix-feed is increasing every month and I am planning to keep more stock to meet their demand".

The owner of the ARC in Unnao said, "I worked as an LHP and I also keep essential medicines in the centre for equid treatment. Equid owners come to my centre to buy medicines and also enquire about tetanus vaccine and deworming".

Likelihood of impact

Though it is too soon to assess the impact of the interventions at this stage the likelihood of impact could be predicted. The use of PWNAs has resulted in behaviour change of the community in regards to equine welfare and this is likely to be continued for the future as the acquisition of good behaviour would be transferred to other community members. During the FGD with men and women EWG members it was reported that the community members were using the PWNAs on their own, albeit less frequently. The good functioning of women SHGs is also likely to be continued in the future as the members have realized the benefits of such groups in their day to day life. The likelihood of impact is the same for both BI managed units as well as partner managed units. No discernible difference was noticed in the achievement of results to predict that the likelihood of impact will be more for a particular type of unit.

VI. Conclusions

The BI programme in India, started in the year 2000, was the first full-fledged programme in India with a central focus to improve equine welfare. At a time when most of the donor driven programmes in India were focusing on human development, the BI intervention brought the equine welfare agenda into the development paradigm. The programme has passed through various phases to achieve the goal of ensuring acceptable level of welfare for working equids. The interventions in Baghpat unit started in the FY 2006-07 and in other three units began in the FY 2007-08. In Aligarh unit the programme exited in March 2016 and the other three units exited in March 2017. The 10 years of programme intervention in these four units witnessed different modes of operation, end of free treatment services, focus on policy advocacy and execution of an exit strategy. The conclusions drawn from the evaluation findings are based from a limited sample of stakeholders.

The programme took a long time to exit. The time of exit was not planned at the design stage and a detailed exit strategy came much later allowing less time to the field staff. The exit from the units took longer time as the focus and indicators on exit kept on changing. It is expected that with the end of free treatment and other learnings, the interventions would have taken less time to exit.

After looking at the duration of the evaluated interventions spanning from year 2006 to year 2017, it was felt that a log frame for each intervention needs to be defined from the beginning. Additionally, it should be taken into consideration that various other livestock-related projects usually range from three to five years. A similar time frame could be used for BI projects with a caveat of undertaking a midline review to assess if the intervention needs to be extended.

BI did not provide much focus on advocacy in the programme design. Advocacy in the first five years of programme focused on relationship building with district departments. From FY 2013-14 onwards policy advocacy was reflected in the year wise log frame. Despite this, in a short period of time BI achieved

successes on advocacy in few areas while policy advocacy in other emerging issues should be taken up as a priority.

The interventions were relevant to the target community– the equid owning community, as they had very little scientific knowledge about good husbandry practices, equine diseases and its prevention before BI arrived. This was expressed by the majority of the men and women EWG members at the FGDs. They mentioned that even the simple practice of cleaning equids' eyes never occurred to them until it was brought to their notice in BI meetings. The programme established a connection between the community need and BI's central focus on equine welfare. The free treatment services provided to the equid owners helped in rapport building with the community and equid owners realized that equine diseases could be treated successfully. However, the continuation of free treatment created dependency on BI. Though the shifting of the focus from free treatment to efforts on linking the service providers with the community institutions was relevant, such realization came much later.

The involvement of EWG, AEWG members, and Ashwamitras in various forums created a sense of ownership and led to their overall empowerment. Most of the female members in older EWGs felt that they are now experienced enough to manage the EWG. However, such confidence to deal with multiple issues of members was lacking in newer groups, i.e. the groups formed in the last one year of the exit. During the interaction with AEWG leaders it was observed that a few of them were not confident of interacting with the block level officials directly. Considering the fact that empowerment of EWG and AEWG members and nurturing leadership to engage with local level officials to avail scheme benefits takes time, one potential option could be the provision of light touch support for one year after exit. The nature of this support should be in technical guidance, hand holding and support required in institution building, leadership and networking.

The previous management structure and staffing of the exited unit, which existed till March 2017, was effective for implementation of activities. The focus on equine welfare demanded that the staff had the capability to perform in the technical nature of functions associated with equine welfare. For this, intensive training of staff was undertaken by BI. Field operations were strengthened based on learning. As the advocacy function was limited to relationship building and sensitization of district level officials, the regular staff of the unit was performing the advocacy function. Female VACMs played an important role to popularize the PWNA and mobilization of female members for group formation. In the new management set up, the positions of VO and District Manager were merged into a VO-cum-Manager, who was responsible for carrying out both the technical and managerial functions of the unit. To undertake managerial functions VOs require skill and experience on project management. As such, to ensure this, one potential option could be to recruit vets with previous experience in project management.

Different approaches types of activities were implemented to achieve the outcome on the service provision and community engagement component. Focus to community engagement activities started later as a transition plan for exit. Under the intensive approach efforts were made to reach out to equid owners at the brick kiln site and it helped to sensitize more equid owners. The programme assumed that long period of free treatment service, emergency service and other extensive approach reached out to equid owners who were not covered in intensive approach. Findings from programme on marginalized community revealed that certain communities and women amongst them remain unreached due to caste dynamics, and geographical barriers. Therefore, it is important to deliberate on strategies to reach out to the excluded communities.

In the BI programme, local institutions played an important role for demand generation of services. Equid owners were satisfied with the services of trained LHPs and farriers. Most of the owners found the cost of quality services affordable as they realized that overall costs of treatment went down since animals fell ill

less often. Equid owners were able to realize the impact of adequate husbandry practices on reduction in diseases.

The majority of owners at brick kiln sites were concerned about new challenges which affected their livelihood. The average duration of work at brick kiln sites has reduced from seven months to five months and this led to decrease of the income of equid owners. The penetration of battery rickshaws in small towns has affected the earning from transportation of goods. The rising costs of feeds and reduced income from brick kiln work posed challenges for equid owners. This new development called for serious thinking on alternative livelihood options for the equid owning community.

There were units that were run through partners. The objective of running units through partnership was twofold: reduced programme cost; and leveraging local organizations for better rapport building with community and better networking with local government. The initial years of partnership saw working in a participatory mode as the programme was evolving. Later on, partner organizations had a limited role in the management of staff and decision on strategies and budget was prescriptive in nature. While partner units were less expensive as compared to direct units the nature of engagement has been shifted to a contractual relationship with BI. While partner units are preferred as the programme could be implemented in less expenditure, more autonomy should be given to partner units for decision making and implementation with regard to field operation.

Initially partners were selected through references, as BI was piloting an approach to work through partners. Of the two partners covered in this evaluation, AVJKS has previous experience in agriculture, women's empowerment, and some experience on animal husbandry while NPSS has experience in education, skills development and human development. Previous experience in local institution building and relationship building with district level departments was not given emphasis for the selection of partners. However, as the interventions moved away from offering free treatment services, more focus was placed on institution building and networking with district level government departments. In order to align with the change in focus of the intervention, partners with experience in livestock, local institution building, and networking skill should be given more preference for selection.

The success of a programme depends on how sustainable it would be in the future and what is the likelihood of impact for future. From the findings of exit evaluation, it could be concluded that most of the programme features are sustainable in future. The built-up knowledge on good husbandry among the owners and female members is sustainable as it has become a habit. Linkage with trained service providers is sustainable as there was increased demand for services. Most of the community institutions, i.e. female groups, associations, and ARCs are sustainable as the members realized the potential of such groups for addressing their urgent needs. However, sustainability of few institutions such as male groups, and federations at the district level are in question as these groups are found to be less stable. The positive behaviour change of the community and the likelihood of such change could be predicted for the future. From the findings it could be concluded that while most of programme features are sustainable for equine welfare more effort is required to enable the community access government schemes and other livelihood options for human welfare.

VII. Lessons Learnt and Good Practices

Lessons Learnt

One important lesson learnt is that free treatment services are not required as the equine community is willing to pay for quality services received from the service providers such as LHPs and farriers. During discussion with owners and interaction with field staff it was also observed that provision of free treatment services for a long time led to dependency of equid owners on BI. Such dependency created problems during the phase out period as equid owners started to question the field staff on the intention of such a move. However, when their demands for services were met through linking the service providers with local institutions (EWG, AEWG) gradually the dependency on free treatment reduced.

Another important lesson was that a holistic approach that addresses the equine welfare and human welfare is needed for the success of the programme in long term. Improvements of the economic condition of the equid owner's family play an important role to ensure equine welfare. The functioning of community institutions such as EWGs and AEWGs provided important lesson. It was learnt that activities for local institution building should be started at the beginning as longer time is required to nurture and stabilize the EWGs and AEWGs.

The engagement with AHD at district and state level included focussed initiatives to build the capacity of GVOs and LEOs to deal with equine diseases and conditions. However, it was learnt that these capacity building efforts did not translate to government ownership. The AHD staff at the district and block level still hesitates to take the responsibility of equids and needs the presence of BI.

The functioning of partner units also led to learning of lessons. The interaction with Directors of partner organizations revealed that during the initial period of programme both the BI staff and partner staff were involved in the formulation of a strategy to address the issues faced by the community. The Directors added that there was less scope for involvement of partners in decision-making on staff salary, staffing and implementation strategy. This resulted in a feeling among the partners that they are working as sub-contractors rather than as a partner. This can have bearing on partner organization's ownership of animal welfare activities post-project.

Good Practices

The interaction with various stakeholders during the field visit yielded information on few good practices. In Unnao unit, the VO-cum-Manager had created a WhatsApp group in which VACMs of the unit and LHPs having android devices were members of the group. This enabled the VACMs for sharing of photos of EWG and AEWG meetings and helped the VO-cum-Manager to keep track of the activities of field staff. LHPs used the WhatsApp feature to send the pictures of animals for seeking advice for treatment.

In Lucknow and Unnao, the unit staff participated in the meetings of Brick Kiln owners' association to convince them to provide facilities such as shelters, water facilities, rolling pits and first-aid kits at the BK site. The staff identified the BK owners' association meetings as an effective platform to promote the agenda of equine welfare. These meetings hold better influence on Brick Kiln owners as compared to one-to-one engagement with owners. This type of engagement strategy also saved time and resources of the intervention.

In Biniouli block of Baghpat unit, few members of the AEWG took active interest to pursue income generation activities based on the individual expertise and area of interest. The members of the group arrived at a common understanding to not take up same activity that was being pursued by another

member. Each member contributed to the association a proportion of the profit from the activity they were engaged in. The profits of the association were equally distributed among all members. The funds of Association grew with the increased income from income generation activities pursued by few individual members and it led to the increase in income of other members as well. The detailed illustration of this good practice has been given in Annex VII of the report.

VIII. Recommendations

High Priority

1. The BI programme in a unit should exit within five years. The first four years should be focused on site selection and implementation of various activities while the last year should be devoted for transition to exit. The Monitoring and Evaluation Manager of BI, in assistance with Performance & Evaluation (P&E) team in the UK will be responsible to design a five-year programme log frame with timeline for activities and outputs to achieve the outcomes. This should be completed within three months. The log frame should be revisited after one year to accommodate any changes required on account of implementation problems. Taking into account the programme log frame the Monitoring and Evaluation Manager of BI will design log frame for new units within three months of the decision to start a new unit.
2. After the exit from the unit light support should be continued for another one year. The focus should be on providing technical guidance and support to service providers, EWG, AEWG leaders and district level AHD department. The senior management team will be responsible for formulating the management and staffing plans to implement the light support. This plan will act as an operational guideline. The VO-cum-Manager of the unit in consultation with the Line Manager will develop a concrete one-year action plan within three months of the fifth financial year.
3. The new units should be run as partner units. As free treatment services are no longer the focus, NGOs with experience in livestock, local institution building, familiarity and networking with district level government departments should be given more preference for selection. Animal health organisations such as 'Veterinarians without Borders' can be explored. For wide circulation, the advertisement for application for partnership should be made available in the website of BI. The senior management team of BI will be responsible for developing a Terms of Reference which will detail out the eligibility criteria, scope of work, and weights for various selection parameters. After the selection, partners should be given more roles in the functioning of units.
4. In the new management set up (March 2017 onwards), experienced vet with minimum two years of project management experience should be recruited for the posts of VO-cum-Manager for the new unit and mobile partner unit. The Human Resource (HR) Manager of BI will be responsible to develop an appropriate guideline to take this forward.
5. Major advocacy efforts are required for mainstreaming of LHP to bring them under legal framework through policy intervention. Inclusion of equine health care in the syllabus of Paravets under the aegis of Agriculture Skill Council of India could be considered. The Head of Advocacy of BI will be responsible to develop an advocacy action plan on this within three months. The CEO will review the progress of activities once in six months.

Medium Priority

6. Every unit and mobile partner unit should recruit at least one woman VACM. The woman VACM should be posted in a cluster where Muslim community constitutes a sizeable population. This will result in better acceptance of the programme by the female members of the Muslim community leading to better equine welfare as they are the caretakers when animals are at home. The HR Manager of BI will be responsible to develop a guideline on this for the recruitment of a female VACM by the partner organization.
7. In the new management set up, competitive salary needs to be given to the VO-cum-Manager and VACMs in partner units given the technical nature of work undertaken by them. This will also help to address the frequent staff turnover and retention of staff in the partner units. The senior management team will be responsible to consult with the partner organizations to arrive at a competitive salary structure for the partner unit staff for ensuring equine welfare, owner welfare and implementing team welfare.
8. Ashwamitra should be linked with panchayati raj Institution member at the ward level (Ward member) so that updated information on government schemes is available to Ashwamitra. Further, Ashwamitra should disseminate this information to EWG members at the village level. The Monitoring and Evaluation Manager of BI will be responsible to develop relevant key indicators to be included in the log frame so that efforts on this could be monitored.
9. Issues for policy advocacy need to be identified and an actionable strategy to implement it should be put in place. There should be a long-term implementation plan to see that intended results are achieved. The Head of Advocacy of BI will be responsible to develop a long-term advocacy strategy for identification of issues of policy advocacy and efforts to achieve the same. One important issue to be taken up for policy advocacy is inclusion of equids into the existing government vaccination programme. The CEO will review the progress of implementation of the plan once in a year.

Low Priority

10. With the decreasing income from brick kiln work focus should be placed on developing alternative livelihood strategies that support equine welfare. The Team Leader, Research will be responsible to undertake participatory research which community members to identify alternative livelihoods for the equid owning community. He should take the guidance from Manager, Veterinary Services on this. Based on the research the SPOs and SVOs in consultation with the Head of Region will prepare region wise livelihood restoration strategies for implementation.
11. More emphasis should be placed on formation of women EWGs as they are functioning better and more sustainable. There should be a minimum of one women EWG in every intensive villages covered by the programme. The Monitoring and Evaluation Manager of BI will be responsible to develop relevant key indicators to be included in the log frame so that formation of minimum one women EWG could be monitored.
12. District level federations should not be formed in the future in Uttar Pradesh. It is found to be less viable as federation members find it difficult to achieve the purpose for which it was created.

Budget Implications

The budget implication on account of implementation of the recommendation is expected to be low. The provision of experienced vet with minimum of two years of experience for new units and mobile partner units would entail more expense due to higher salaries. The recommendation of salary hike for partner unit staff if implemented will require more expenditure to meet the salary hike. The recommendation for exit of the programme from a unit in five years, if implemented will reduce the programme cost. In such a case, the net effect in terms of budget requirement will be low.

IX. List of Annexes

Annex I: Evaluation ToR

Annex II: Intervention logical framework

Annex III: Inception report

Annex IV: List of persons interviewed

Annex V: List of documents reviewed

Annex VI: Data collection instruments

Annex VII: Good practice

Annex VIII: Evaluation Criteria Rating Table

Annex I: Evaluation ToR

TERMS OF REFERENCE

For the Independent Final Evaluation of Brooke's

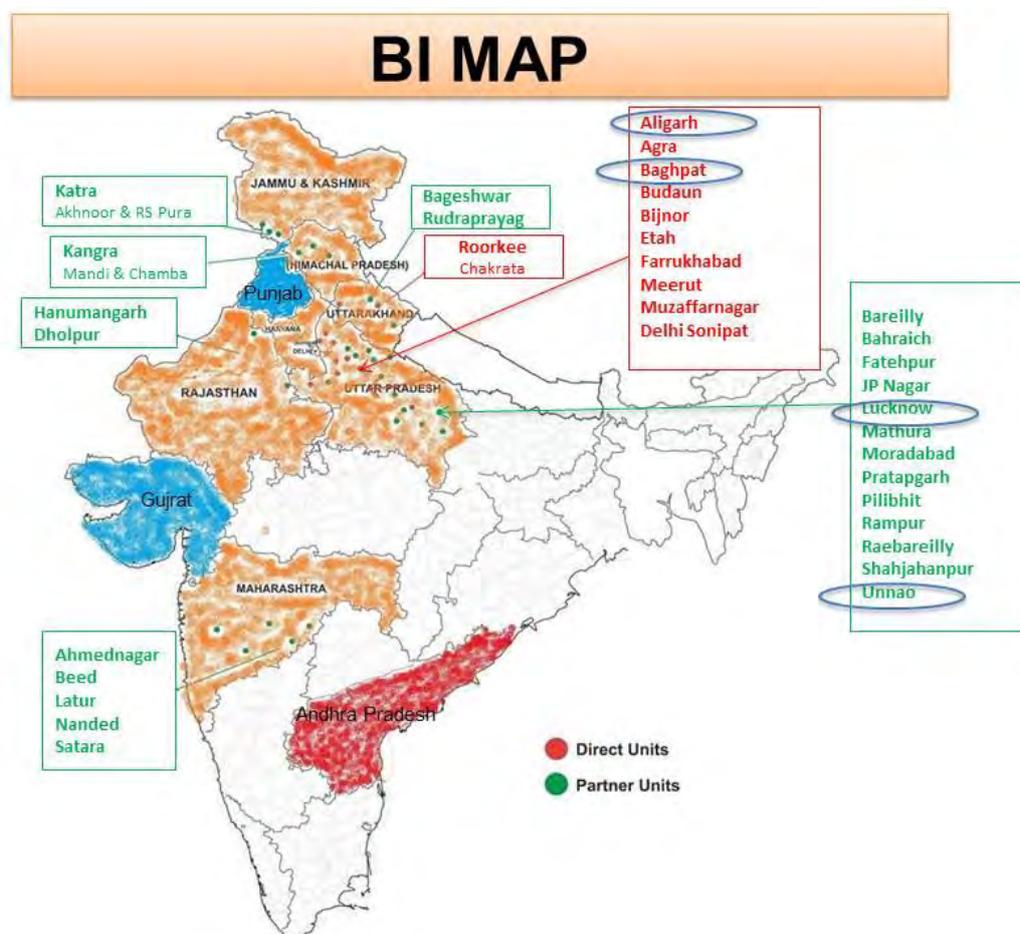
India Country Programme

Summary Table

Country Programme Name	Brooke India
Partners (if applicable)	Arthik Vikas Evam Jankalyan Sansthan (AVJKS) in Lucknow <u>New Public School Samiti (NPSS)</u> in Unnao
Location	Uttar Pradesh, India
Intervention Budget	£182,000 (150,000 INR) per year
Intervention Start Date	Aligarh, Lucknow, Unnao in April 2007 Baghpat in April 2006
Intervention End Date	March 2017
Country Programme Language	English & Hindi
Donor and Contribution/s	Brooke UK
Responsible Brooke UK	Harriet Dodd
Evaluation Manager	José van Oosten
Evaluation Type	Independent Exit Evaluation
Evaluation Dates	February / March 2018

1. INTERVENTION BACKGROUND

1.1. Map of Intervention Areas



1.2. Rationale for the Intervention

Characterised by its cultural and geographical diversity and with a population of 1.2 billion, India is the second most populated country in the world. Of these, around 5.5 million people own and depend on working equids for their livelihoods. Around 1.2 million equids are spread across the length and breadth of the country with major concentration in states of Uttar Pradesh, Jammu and Kashmir, Himachal Pradesh, Uttarakhand, Haryana, Rajasthan, Maharashtra and Gujarat with significant pockets of equine population in Punjab and Karnataka. Most equids belong to underprivileged communities and are used as working animals. They play a role in agriculture and transportation of goods and people and, as such, there is a high dependency on equines for their livelihoods.

Poverty and a lack of resources for basic survival render these communities to indebtedness marginalizing the scope for independent decision making and bargaining. Traditional equine rearing communities like pot makers and construction workers are socially neglected and deprived of the benefits of economic development and social welfare schemes. Additionally, equine issues are not adequately addressed in official policy, so they do not get benefits of services and development schemes of the traditional livestock sector.

An initial survey in Uttar Pradesh found that most of the equids in these districts were suffering from different types of leg related problems due to overload, low body conditions, severe wounds, colic, respiratory issues, Surra swelling of tendon, abnormal eyes, dehydration, wither wounds, gait and unhygienic stable were more predominant. Lack of awareness, knowledge and overloading by the owners were the main cause for above said abnormalities in animals.

Most of the veterinary doctors in the districts were not trained to treat equids and therefore quality veterinary services were not available during emergencies. Most of the equine owners in the region belong to the poorest economic strata of the society. Often they do not get adequate work and also the wage rate is very low and their family has no any other source of income. Therefore they cannot afford costly medicine, high consultancy fees of qualified veterinary doctors and good quality feed for their equids. An important cause of poor equine welfare is the non-availability of resources like good quality feed, saddle, clean and hygienic shelter, water at work place and trained farriers.

1.3. Intervention Objectives

Overall Goal:

Equines in intervention areas have sustainably improved welfare

Outcomes:

- Equine owners and users adopted and practiced sustainable equine welfare in villages of plains and hills (non-migratory brick kilns)
- Brick Kiln owners and Munshis (Operation Officers) provide a sustainable environment according to Brooke Standards for migratory equines and owners
- The policy environment for working equine welfare improved at district, state and national levels.

Brooke India was established in December 1999 to monitor and follow up activities in India that were previously solely implemented through partner organisations. As an implementing organisation, the initial focus of interventions was on animal health aspects by offering treatment at fixed locations in Delhi, Ghaziabad and Noida. This was later extended to community mobilisation and capacity building of different stakeholders.

Brooke India implements equine welfare activities through 9 Direct Equine Welfare Units (DEWUs). Based on the lessons learnt from directly run interventions, Brooke India identified NGOs concerned with welfare for working equids and extended its programme using Partner Equine Welfare Units (PEWUs) as implementing partners. Brooke India currently has 34 equine welfare units in the states of Uttar Pradesh, Uttarakhand, Delhi, Rajasthan, Andhra Pradesh, Himachal Pradesh, Haryana, Maharashtra, Karnataka and, Jammu and Kashmir.

The Brooke India programme has passed through four phases since its inception. These are highlighted below:

1. In the first phase, veterinary service provision was implemented through local NGOs in Madhubani, Gorakhpur and Delhi. These activities were directly managed and supervised by Brooke UK but were

closed after some time due to operational and management problems. This experience led to establishment of a permanent office in India to coordinate country program.

2. Immediately after its establishment, Brooke India tried to pursue improvements in equine welfare by offering free Veterinary and Support services to equids through free check-ups, treatment, medicine, and feed supplements to suffering equids at fixed locations. During this period Brooke constructed sheds and shelters, water troughs and distributed free farriery and saddlery items to poor equine owners. It eventually became evident; however, that working in this way neither reduced the prevalence of equine diseases nor improved equine welfare. Rather, this created a level of dependency on Brooke's resources and services among equine owners.
3. The third phase saw the establishment of permanent intervention units in Delhi and in nine districts of western Uttar Pradesh with the dual aim of achieving long-term and sustainable improvement in equine welfare whilst simultaneously reaching out to more vulnerable working equids. In this phase, the focus was on a holistic approach aimed at improving equine welfare, delivering emergency veterinary services and strengthening the capacity of equine owners and stakeholders to adopt preventive measures. The key element of this phase which had had been previously missing was the involvement of equine owners in the planning, implementation and monitoring of this program.
4. The current phase is an extension of the previous phase with a focus on strengthening the local service delivery system. In this phase, programme implementation is done directly but also in partnership with local NGOs that have experience of working with deprived communities.

Focus on Brick Kilns

Brick Kilns render larger livelihood opportunities to equine owners and equines are herded for over a period of 8 months along with owners during seasons. In certain Brick kilns equine owners from neighbouring villages reach BKs daily during seasons and work from morning till noon.

Working equines in brick kilns are highly vulnerable to wounds, respiratory diseases and allied diseases due to low quality saddles, dust, lack of shade shelter etc. There is an obvious need to focus on many welfare and health issues in brick kilns like over loading, working with under aged equines etc. Similarly working equines in riverbeds quarrying sand and stone are also identified to be highly vulnerable to injuries, fractures and wounds.

Brooke India felt it essential and also prudent to focus on brick kilns to render comprehensive equine welfare related services besides training and orientation to brick kiln staff and started working (from 2005) with brick kilns in the existing operational districts. Major proactive interventions are enabling shelters and water during summer; vaccinating and deworming animals periodically, providing first aid and also emergency treatment to suffering equines as and when needed. Besides this, Brooke India conducts awareness camps to staff and owners of brick kilns and also equine owners working in the kilns.

Organisational status

Brooke India is an Affiliate of Brooke UK. As such, although Brooke India has rights over the Brooke brand, the management structure is independent. As such, Brooke India is in charge of all aspects of programme implementation and the team reports to its own Board members. Currently, due to legislative restraints, all funding for Brooke India is derived from Brooke UK. Brooke UK directly provides technical and management support wherever necessary.

1.4. Intervention Current Status

The Intervention areas were officially exited in March 2017. Exit assessments demonstrated that animal welfare objectives were met at the end of the intervention. There were no significant adjustments to the objectives.

Since then, Brooke India and its two partners have carried out post-implementation visits to the intervention areas.

2. PURPOSE AND OBJECTIVES OF THE EVALUATION

2.1. Rationale for the Evaluation

As per the fourth phase of the Brooke India programme (highlighted above), Brooke India has been attempting to focus on strengthening local service delivery system in order to achieve more sustainable outcomes. In order to inform future programme implementation in this phase, it is imperative that the programme be evaluated to understand successes and failures, and how the programme can improve.

Secondly, Brooke India is interested in understanding the differences in intervention outcomes dependent on whether an intervention is directly implemented or done through a partner organisation. On the basis that interventions implemented through partner organisations have lower costs associated with them, Brooke India wants to understand whether this has an effect on the quality of programme implementation in order to justify future programmatic decisions.

In March 2018, Brooke India is exiting from seven interventions (three directly implemented, three implemented through partners) that have been operational since 2007.

The seven interventions are focused around village and Brick Kiln areas. Considering Brick Kiln season lasts from November until March, the evaluation should take place in February/March time in order to capture the extent of the brick kiln context.

2.2. Objectives of the Evaluation

The evaluation will provide an external and independent analysis of Programme looking at the successes achieved and missed opportunities following criteria (based on the OECD/DAC): a) design; b) relevance/appropriateness; c) coherence; d) efficiency; e) effectiveness of management set up; f) effectiveness; g) sustainability and likelihood of impact.

Specifically the evaluation seeks to:

1. Evaluate the direct results of various programme approaches (Community engagement, Advocacy, Service Provision) in achieving sustainable equine welfare.
2. Analyse the cost of intervention in relation to the results achieved on interventions implemented directly compared to interventions implemented by partner organisations.

2.3. Users and use of the Evaluation

Direct users

The evaluation report will primarily be used by Brooke India, Brooke UK and Brooke India Trustees as a learning document to inform future programme implementation. The report will generate evidence on the successes or failures of current processes and will provide a basis through which the team can improve

programmatic implementation in order to maximise outcomes in other areas. The team will apply the lessons learned and recommendations into the Multi-Year Plan to build upon the results achieved.

Indirect users

The evaluation report is to be used indirectly by other Branches and Affiliates and Contract Partners of Brooke. Considering the congruity of many international programmes, the lessons extracted from the evaluation may be relevant to other teams. Recommendations and good practices from the evaluation will be shared across all Country Programmes.

Sections of the evaluation report will also be shared externally. To this extent, lessons learnt, good practices and recommendations may be relevant for other NGOs working in the same areas as well as other animal welfare organisations.

3. EVALUATION SCOPE

3.1. Elements covered by the evaluation

The evaluation will focus on **four** of the seven **exited interventions** in Uttar Pradesh. Two are directly implemented by Brooke India, namely **Aligarh** and **Baghpat**; and two are implemented by partner organisations, namely **Lucknow** and **Unnao**.

a. Selected Target group:

- Brooke India staff (selected SMT, Functional heads, SPO, SVO, District Manager, Veterinary Officer, Veterinary Assistant cum Community Motivator)
- Local Health Provider
- Farrier
- Government Veterinary Officer / Livestock Extension Officer
- Members of Equine Welfare Groups (Men and women)
- Members of Association
- Members of Federation
- Ashwamitra (friend of Equine- Proactive Equine owner)
- Community Resource Person (CRPs)
- Members of Animal Resource Centre (ARC)
- Brick kiln owners
- Brick kiln contractor
- Project Director of Partner units
- Policy maker/implementers/enablers – Village Head, BDO, GVO, CVO, CDO, DM and other district officials.

4. EVALUATION APPROACH AND QUESTIONS

Brooke adheres to the Development Assistance Committee (DAC) Evaluation criteria for evaluating its interventions and Country Programmes. Specifically, Brooke uses the following adapted criteria: Validity of design, Coherence, Relevance and Appropriateness, Effectiveness, Effectiveness of management set up, Efficiency, Sustainability and Likelihood of Impact. The evaluator must complete the DAC criteria rating table (Refer to Annex IV) and include it as part of the final Evaluation Report.

Evaluation questions have been developed to help the evaluator assess the Brooke India Country Programme against these criteria (Refer to Annex I) The evaluator may adapt the evaluation criteria and

questions, but any fundamental changes should be agreed between the Evaluation Manager and the evaluator and reflected in the Inception Report.

5. EVALUATION METHODOLOGY

This section outlines the suggested methodological approach for the evaluator to collect quantitative and qualitative data. The evaluator will to the extent possible develop data gathering instruments which allow collecting sex-disaggregated data. The instruments need to make provision for the triangulation of data where possible.

5.1. Evaluation Briefing

Prior to the evaluation taking place, the evaluator is expected to attend an evaluation technical briefing with the Evaluation Manager. Briefings by telephone must be agreed in advance.

5.2. Brooke UK Interviews

As part of the evaluation, the evaluator will interview Brooke UK stakeholders listed in Annex IV to get preliminary information about Brooke India. Briefings by telephone must be agreed in advance.

5.3. Desk review

The evaluator will undertake a desk review of Brooke India Country Programme materials listed in Annex III including the programme documents and proposals, progress reports, outputs of the Country Programme (such as publications, communication materials, videos, recording etc.), results of any internal planning process and relevant materials from secondary sources.

5.4. Inception Report

At the end of the desk review period and before the field mission, the evaluator will prepare a brief Inception Report based on the format provided. The report will be written in **English** and will include the following sections:

- Key elements of the Terms of Reference (TORs) to demonstrate that the evaluator will adhere to the TORs;
- The methodological approach to the evaluation including a completed evaluation matrix in annex to specify how the evaluator will collect data to answer the evaluation questions, pointing out the limitations to the methodology if any and the choice of sites for field visits;
- A detailed evaluation work plan and;
- Statement of adherence to Brooke Evaluation Policy and outline the Evaluation Report format.

The Inception Report will be discussed and approved by the Evaluation Manager.

5.5. Field Mission

Primary data collection techniques

As part of the evaluation, the evaluator will **interview key programme stakeholders** (national programme staff, local/national representatives, local authorities, animal welfare agencies, or donor representatives) as listed in Annex III. The evaluator will use the most suitable format for these interviews as detailed in the Inception Report. The evaluator is also **expected to collect information directly from equine owner beneficiaries**. Towards enriching triangulation, **if budget and timeframe allows**, the evaluator could also conduct **Focus Group Discussions** (equine owner beneficiaries, non-beneficiaries, key informants – equine service providers) and **surveys**.

Field visits

The evaluator will visit the programme sites and the facilities provided to the equine owner beneficiaries (if any) according to the selected methods described in the Inception Report.

Secondary data collection techniques: Desk review

The evaluator will further review programme documentation and collect programme monitoring data or of any other relevant statistical data.

Debriefing and stakeholders workshop

The evaluator shall facilitate a learning workshop in-country to present preliminary findings of the evaluation to the programme and key stakeholders (including Local, National actors and implementing partners actors); gather feedback on the findings and build consensus on recommendations; develop action-oriented workshop statements on lessons learned and proposed improvements for the future.

5.6. Debriefing with the Evaluation Manager and Brooke UK stakeholders

The evaluator should provide a debriefing to the Evaluation Manager to discuss initial findings and top line recommendations from the field visit.

5.7. Stakeholders Workshop with Brooke India

The evaluator should organise a stakeholder's workshop with Brooke India to discuss initial recommendations and top line findings gained from the field visit. The workshop should include a PowerPoint document with key information. The PowerPoint presentation should be shared with the Evaluation Manager prior to the workshop.

5.8. Evaluation Report

Below is a summary of all the sections that should be included in the Evaluation Report. The report should be completed in the template provided in Annex VI and should be written in English. The evaluator is asked to submit a Pre-Final Draft Evaluation Report which will be subjected to feedback from key evaluation stakeholders. Although this is called a 'Draft', the Report must be considered as a final draft subject to Brooke feedback, and must be submitted to a quality that could be publishable. If the Pre-Final

Draft Evaluation Report is below the standards accepted by the Evaluation Manager, Brooke has the right to request that the evaluator contracts an editor to improve it before releasing the next payment.

- Cover Page;
- Summary Table as per the template provided;
- Table of Contents;
- Executive Summary must be a standalone summary of the Evaluation Report, describing the Country Programme, main findings, conclusions and recommendations. This will be no more than 2 pages in length;
- Background Information;
- Methodology describes the methods used, provides evidence of triangulation of data and presents limitations to the approach;
- Findings include an overall assessment of the programme against the evaluation criteria and responds to the evaluation questions. All findings should be backed up by evidence, cross-cutting issues are mainstreamed if relevant; and unintended and unexpected outcomes should also be discussed;
- Conclusions are formulated by synthesizing the main findings into statements of merit and worth, judgements should be fair, impartial, and consistent with the findings;
- Lessons Learnt and Good Practices presents lessons that can be applied elsewhere to improve Country Programme performance, outcome, or impact and; identify good practices: successful practices from those lessons which are worthy of replication; further develop on one specific good practice to be showcased in the template provided in Annex V;
- Recommendations should be as realistic, operational and pragmatic as possible; that is, they should take careful account of the circumstances currently prevailing in the context of the action, and of the resources available to implement it locally. They should follow logically from conclusions, lessons learned and good practices. Recommendations should be presented by order of priority and they must specify who needs to take what action and when. The report should have a maximum of 15 recommendations;
- Annexes These should be listed and numbered and must include the following: Good practice template provided in Annex V, Evaluation Criteria Rating Table provided in Annex IV, list of documents for the desk review, list of persons interviewed, data collection instrument, evaluation TORs.

The whole report should not be longer than 30 pages, 50 pages including annexes. The draft report should be submitted no later than 10 calendar days after departure from the field. The final report will be submitted no later than the end date of the consultancy contract. Annexes to the report will be accepted in the working language of the country and Country Programme subject to the evaluation.

6. KEY DELIVERABLES

The following are the evaluation outputs the evaluator will deliver to the Evaluation Manager:

Outputs	Deadlines
Inception Report	3 ^d March 2018
Stakeholders workshop	5 th April 2018
Pre-Final Draft Evaluation Report	14 th April 2018
Final Evaluation Report	3 ^d May 2018

All reports must be submitted in English and under Word Document format.

The quality of the Inception Report and the Evaluation Report will be assessed by the Evaluation Manager. **The evaluator is expected to follow the format, structure and length as defined under section 5.4 and 5.6 above.**

7. MANAGEMENT ARRANGEMENTS AND WORKPLAN

These evaluation TORs have been developed in a participatory manner, by the Evaluation Manager based on inputs from relevant stakeholders.

The evaluator will directly report to the Evaluation Manager. The evaluator will submit all the evaluation outputs directly and only to the Evaluation Manager. The Evaluation Manager will do a quality check (ensure required elements are there) and decide whether the report is ready for sharing. The Evaluation Manager will forward a copy to key stakeholders for comments on factual issues and for clarifications. The evaluation manager will consolidate the comments and send these to the evaluator by date agreed between the Evaluation Manager and the evaluator or as soon as the comments are received from stakeholders. The evaluator will consider all comments to finalize report and will submit it to the Evaluation Manager who will then officially forward to relevant stakeholders.

Once the evaluation is completed the Evaluation Manager will prepare the management response follow-up form to track implementation of the recommendations outlined in the Evaluation Report. A review of the follow-up process will be undertaken six months after the publication of the Evaluation Report.

7.1. Tentative Workplan

NOTE: Consultants are expected to work 6 days a week (either Sundays/Fridays or whatever day the field office has off will not be paid) during their consultancy contract.

Activities	Evaluator Working Days	Dates
Evaluation briefing with the Evaluation Manager	0.5	22 nd Feb
Interviews with Brooke UK	0.5	23 rd Feb
Desk review, preparation of field work and prepare <u>Inception Report</u>	4	28 th Feb – 3 rd Mar
Brooke Performance and Evaluation (P&E): Quality check by	4	5 th – 8 th Mar

the Evaluation Manager of the Inception Report (unpaid)		
In country interviews with intervention/Country Programme staff	1	9 th Mar
Field work, collection and analysis of secondary data and meeting with stakeholders	15	12 th – 29 th Mar
Evaluation debriefing with the Evaluation Manager & Brooke Technical team	0.5	3 rd Apr
Prepare stakeholders workshop in-country	1.5	3 rd – 4 th Apr
Stakeholders Workshop in country	1	5 th Apr
Pre-Final Draft Report	8	6 th Apr – 14 th Apr
Brooke-UK: Quality check and initial review by the Evaluation Manager, circulate draft report to key stakeholders, consolidate comments of stakeholders and send to evaluator (unpaid)	10	16 th Apr – 27 th Apr
Final report on the basis of stakeholders, Country Programme, and Brooke -UK comments	3	1 st – 3 rd May
Total Paid:	35	3rd May

7.2. Profile of the evaluator

The evaluation will be carried out by a qualified evaluation consultant representing the most value for money with the following profile:

- Knowledge in Indian context;
- Significant field experience in the evaluation of development projects;
- Experience in evaluating animal welfare projects;
- Relevant degree / equivalent experience related to the evaluation to be undertaken;
- Significant experience in coordination, design, implementation, monitoring and evaluation of programmes;
- Good knowledge and experience of gender equality and non-discrimination;
- Good communications skills and experience of workshop facilitation;
- Ability to write clear and useful reports (may be required to produce examples of previous work);
- Fluent in English;
- Ability to manage the available time and resources and to work to tight deadlines;
- Independence from the parties involved.

If the evaluator does not have veterinary experience or experience with animal welfare projects, Brooke reserves the right to contract a technical expert to provide support to the evaluator.

8. ANNEXES TO THE TORs

- I. Evaluation Criteria and Detailed Evaluation Questions
- II. List of Brooke India Country Programme documents for the desk review
- III. List of people to be interviewed

- IV. Evaluation Criteria Table
- V. Good Practice Template
- VI. Evaluation Report Template

Annex II: Intervention logical framework

Number	Narrative Summary	Indicators
1	<p style="text-align: center;">Goal/ Impact To ensure acceptable level of welfare for 4,34,000 working equids</p>	% of animal with Body condition score (BCS) of ≥ 2.5
		% of animal has normal eye (score 0)
		% of animal has normal mucous membrane (score 0)
		% of animal without pain during spinal contact (score 0)
		% of equids are not having faecal soiling (score-0)
		% of animals were found with proper frog health (Score 0)
		% of animal were found without interference lesion – fore (score 0)
		% of animal were found without wound– wither/ spine (score 0)
		% of animal were found without wounds on girth/belly (score 0)
		% of animal were found without wound– tail and tail base (score 0)
		% of animals have normal gait (score 0)
		% of animals with proper Hoof shape– Fore (score 0)
		% of animals without Ectoparasites (score 0)
		% of animals without swelling of tendon– fore (score 0)
Service provision		
Objective 1	<p style="text-align: center;">OUTCOME Improve welfare of 300,000 working equids in Brooke India operational areas through increase in uptake of quality services from local service</p>	% of LHP are in A+B Grade (CQM based for quality) This CQM based indicator will be assessed for 16-17 and onward
		% of owners are satisfied with LHP services (CQM based for satisfaction) This CQM based indicator will be assessed for 16-17 and onward
		% proportional increases in cases seen by LHP Vs Brooke (CQM based for dependancy) This CQM based indicator will be assessed for 16-17 and onward
		% LHP are measuring the 4 clinical parameters (Temprature, Pulse, respiration, body weight) correctly (This indicator will be assessed for 15-16)

	providers. Practice change	% LHP are doing welfare friendly Handling & Restraining of equine (This indicator will be assessed for 15-16)
		% LHP are using head collar during the treatment of the animal (This indicator will only be assessed for 15-16)
		% LHP are using disposable syringe and needle (This indicator will only be assessed for 15-16)
		% increase in number of cases delegated to trained local health service providers (This indicator will only be assessed for 15-16)
		% sites utilising service of trained LHP/LEO/GVO (Village and BK)
		% of Farriers are in A+B Grade (FQM based for quality) This FQM based indicator will be assessed for 16-17 and onward
		% of owners are satisfied with Farrier services (FQM based for satisfaction) This CQM based indicator will be assessed for 16-17 and onward
		No. of Equine shod by Farriers (FQM based for dependancy) This FQM based indicator will be assessed for 16-17 and onward
		% of farriers are doing welfare friendly handling (shade, water and unforced handling) during farriery (This indicator will only be assessed for 15-16)
		% of farriers are not practicing dumping (This indicator will only be assessed for 15-16)
		% of farriers are doing proper trimming (removing the dead portion) of the frog (This indicator will only be assessed for 15-16)
		% of farrier applying appropriate sized horse shoe (This indicator will only be assessed for 15-16)
		Basic Tools (Rasp, Hoof cutter, Pincher, Hammer & Hoof knife) available with % of ferrier (This indicator will only be assessed for 15-16)
		% sites utilising service of trained farrier (Village and BK)
Output 1.1	Brooke emergency services is available in the operational areas	% decrease in no. of treatment/advise seeking calls
		% of the owners making emergency calls (colic, fracture, major/accidental wounds, recumbent animals, and non-weight bearing lameness) will be advised / given services within a day
Output 1.2	Increase access of trained Service providers	No. of LHP trained
		No. of farrier trained
		No. of LEO/Paravet trained
Community engagment		
Obj. 2	OUTCOME 1,32,000 Equid owners and equine owning communities in Brooke intensive areas of	% owners are offering water minimum 4 times a day
		% owners are cleaning hoof daily
		% equid owners are cleaning eye daily
		% owners grooming their equids after work

*

	operation are able to generate demand for services to address equine welfare issues and adopt improved husbandry practice	% equid owner are offering oil weekly
		% owners offer clean and soaked feed
		% owners offering regularly chopped roughage to equine
		% equids with shelter (as per season)
		% equine have clean stable and manger
		% EWG show evidence of collective actions towards equine welfare
		% of EWGs maintain their records themselves
		% EWG linked wth govt schemes (NRLM etc.)
		% owners not adopting wrong practices with equids
		% equid owner are offering salt/ Khadiya daily
		% of the equine-owning communities have been utilizing & maintaining the First-aid kits
		At least ONE equid owner/Ashwamitra in % of intensive site providing primary equine treatment
		x number of district level federation are linked with government development scheme
		% of CRPs facilitated PWNA process (Identification of issues, Develop indicators, transact to animal, analysis & prepare action plan & Review) for Block level Association
		% of CRPs facilitated Institution building & strengthening process (Need assessment, formation, meeting, record keeping, bank linkage & conflict resolution) for Block level Association
		% of CRPs facilitated Business plan implementation process (Need assessment, demond generation, production & supply) for Block level Association
		% of CRPs ensure primary care training, First aid & TT vaccination for Block level Association
		% of BK have clean drinking water and plain road
		% of BK have green fodder
		% animals receiving complete dose of TT vaccine (2nd/annual)
% of equids covered under "Ashwa swasthya surksha yojana" (Mediclaim)		
		At least 1 equid owner/Ashwamitra in an intensive site are trained in first aid %
		% owners show appropriate knowledge on sign, symptoms, cause and prevention of COLIC
		% owners with appropriate knowledge on sign, symptoms, cause and prevention of TETANUS

		% owners with appropriate knowledge on sign, symptoms, cause and prevention of SURRA/local diseases
		% owners with appropriate knowledge on sign, symptoms, cause and prevention of WOUND
		% owners with appropriate knowledge on sign, symptoms, cause and prevention of HEAT STRESS
		% of AEWG have CRP developed /trained on PWNA/EWG/Linkage/Business
Output 2.2	OUTPUT Grass root institution established and linked with Service provider and Govt scheme	No. of Federation formed at District level (At least 5 AEWGs federate in District level Federation)
		No. of Animal service center (Ashwa seva Kendra) develop
		No.of block level AEWG (Association) Formed
		% of sites having at least one EWG
		% equid owners linked with CBO (EWG/AEWG etc.)
		% members have taken benefit from Govt. Schemes (Equine insurance, TT vaccination etc.)
		% of block level Association have linked with A graded trained LHP
		% of block level Association have linked with A graded trained Farrier
		% of block level Associations earned at least Thirty thousand rupee per anum
Output 2.3	OUTPUT Animal with increase accessability to FAK	% of community have access to first aid medicine

Final Inception Report

Exit Evaluation of
Brooke's India
Country Programme

8th March 2018

1. EVALUATION BACKGROUND

Brooke India Programme Intervention

The Brooke has been working in India since 1992 to improve the lives of working horses, donkeys and mules. During the initial years it provided treatment of working equids in partnership with a few NGOs at select locations in India. To manage the expanded activities effectively Brooke India was established in December 1999.

The Brooke India programme has passed through four distinct phases. The first phase was characterised by provision of veterinary service of working equids and the activities were directly managed and supervised by Brooke UK. In the second phase Brooke India focused on equine welfare through provision of free veterinary and support services to working equids at fixed locations. The third phase focused on achieving long-term and sustainable improvement in equine welfare through engagement of equid owners. The fourth and current phase is focused on a holistic approach to achieve improved equine welfare with emphasis on strengthening local service delivery system.

Brooke India adopts both proactive and reactive approach to achieve the overall goal of sustainable and improved equine welfare. The proactive approach is intensive and aimed at achieving common good. This approach focuses on multi-pronged interventions, i.e. formation and capacity building of Equine Welfare Groups (EWGs) and Community Based Organizations (CBOs), provision of comprehensive equine health services, capacity building of health and ancillary service providers, and establishment of linkages between EWGs and service providers. In addition, targeted intervention is done at Brick Kilns (BKs) as these sites render livelihood opportunities to equid owners for a substantial period of the year. Under the reactive approach, emergency treatment services are provided to working equids in need of urgent medical intervention through dedicated mobile clinics.

Brooke India implements the interventions through two modes, one is direct operation through Brooke India and the other one is operation through Partners. Brooke India direct operations are implemented through Direct Equine Welfare Units (DEWUs) and operation through Partners are done through Partner Equine Welfare Units (PEWUs). At present, Brooke India has 34 equine welfare units (EWUs) across ten states of India.

Purpose and objectives of Evaluation

In March 2018, Brooke India is exiting from seven interventions units (four directly implemented, three implemented through partners) that have been operational since 2007. In order to produce evidence based learning it is imperative to undertake an exit evaluation to understand successes and failures, and how the programme can be improved further. The exit evaluation will generate evidence on the quality and cost efficiency of programme implementations in direct operations of Brooke India vis-à-vis operations through Partners. The exit evaluation is being undertaken by an evaluation team of two members, lead evaluator and veterinary consultant. The lead evaluator is the team leader and veterinary consultant will assist the lead evaluator on technical areas. The evaluation will focus on four of the seven exited interventions in Uttar Pradesh. These are two units implemented directly by Brooke India (Aligarh and Baghpat) and two units implemented by Partners (Lucknow and Unnao). For the purposes of evaluation the selection of sites was decided by Brooke India, as commissioners of the evaluation.

The evaluation will provide an external and independent analysis of Programme looking at the successes achieved and missed opportunities.

The broad objectives of the evaluation are:

- To evaluate the results of various programme approaches (Service Provision, Community engagement, Advocacy,) in achieving sustainable equine welfare
- To analyse the cost efficiency of the results achieved for interventions implemented directly compared to interventions implemented by partner organisations.

The evaluation findings will primarily be used by Brooke India, Brooke UK and Brooke India Trustees as a learning document to inform future programme implementation.

2. ADHERENCE TO THE TERMS OF REFERENCE (TOR)

Evaluation Framework

The evaluation criteria developed by the Development Assistance Committee of the Economic Cooperation and Development (OECD/DAC) has been increasingly used for international development evaluations. In order to make the evaluation context and project specific the donor agencies as well as international non-governmental organizations are using the adapted DAC evaluation criteria.

The evaluation framework of this exit evaluation will adhere to the Brooke adapted criteria of DAC. These area Validity of design, Relevance and Appropriateness, Coherence, Efficiency, Effectiveness including effectiveness of management set up, Sustainability and Likelihood of Impact. The DAC criteria rating table given in the ToR (Annex IV) will be completed and will form part of the final Evaluation Report.

Evaluation Questions

To ensure that the independent exit evaluation is responsive to the Brooke adapted evaluation criteria, evaluation questions linked to each evaluation criteria have been identified by Brooke through consultations with key project stakeholders. These evaluation questions will form the basis to further develop the areas of inquiry for collection of data and information from various sources. The evaluation matrix mentions evaluation questions against each evaluation criteria. In order to answer the evaluation questions, various areas of inquiry and data collection methods have also been identified. The evaluation matrix is annexed to the inception report (Annex 1).

3. METHODOLOGY

Data collection methods and instruments

To ensure robustness and reliability of evaluation findings a mixed method approach will be adopted. The approach will resort to a combination of qualitative and quantitative data gathering techniques. Use of qualitative and participatory data collection techniques will enable to capture the first-hand account of the perspectives of various stakeholders and will answer the 'why' and 'how' aspect of the inquiry. The qualitative techniques to be used in this evaluation include face-to-face interview, key informants interview (KII), Focus Group Discussion (FGD), Observation during field visits, and documentation of good practice. Quantitative data will be obtained mainly through review of a large set of programme documents and monitoring records.

The face-to-face interviews and KIIs with relevant stakeholders will be conducted by using questionnaires. The interview questionnaires for various stakeholders are in annex III of the inception report. The FGDs will be conducted by using a detailed questionnaire. It will be conducted in such a way that all the participants will get equal chance to reflect individual views and opinions. To make the group discussion meaningful participation of a minimum of seven members will be required. Separate FGD

questionnaires will be used for male and female members. The FGD questionnaires are in annex III of the inception report. The exit evaluation will capture one Good Practice from the intervention sites visited. The potential Good Practice could be either in terms of processes or systems, and should be applicable to other contexts where Brooke operates.

Data sources and programme stakeholders

In order to make the exit evaluation broad based, data and information will be collected from both the primary and secondary sources.

During the ten years of implementation in selected sites, Brooke India has kept a large set of secondary data. These include: Brooke India Multi-year Plans, Year wise logframes and Action plans, Brooke India Annual Reviews, Partnership Agreements, Baseline and Endline reports, and Budget and Expenditure data. These documents will constitute an important source of data and information. Quantitative analysis of the data related to budget, and operational expenditure will be done to assess the cost efficiency of results from Brooke India direct operations compared to interventions implemented by partner organisations. Where ever possible, outcome monitoring data for the selected sites will be analysed to examine the trends and patterns emerged during the period of interventions.

Primary data will be collected during the field visit to each of the four selected sites, i.e. Aligarh, Baghpat, Lucknow, and Unnao. The primary data will be collected from all the important stakeholders of the Brooke India intervention. Working equid owners are the main stakeholders of the programme. The female members of working equine families also play an important role in sustaining the improved equine welfare practices. They also act as the member of EWGs. Focus group discussions will be held separately with the male and female members of EWG by using FGD questionnaires (see annex III). At the Brick Kiln (BK) site, face-to-face interviews will be conducted with equid owners.

Service providers play an important for providing veterinary and support services to working equids. These include Government Veterinary Officer (GVO), Para vets, Livestock Extension Officer (LEO), Local Health Provider (LHP), Brooke Veterinary Doctor, and Veterinary Assistant cum Community Motivator (VACM). The ancillary service providers consist of Farriers, and local medical shop keepers/ owners of Animal Resource Centre (ARC). At the BK site, BK owners and contractors play an important role to provide equine welfare services. Face-to-face interviews will be held with these service providers to know the present local service delivery system and to capture what is working well and what is working less well.

Community influencers are important stakeholders who influence the uptake of services through building community institution and linkage. These are members of association, and federation, community resource person (CRP), and Ashwamitra. KIIs will be conducted with these influencers to capture the sustainability perspective of these institutions and likelihood of the impact. Policy makers at the national, state and local level are key actors to bring positive changes in the policy environment for improved equine welfare. These include officials of Department of Animal Husbandry and Veterinary Services at various levels, and other local government officials. Interviews will be conducted with these officials to capture their views and opinions on the role of Brooke India advocacy efforts in bringing changes in policy environment. In addition, Brooke India staff and Partner organizations play on important role in the planning and implementation of the interventions. These include Senior Management Team (SMT) of Brooke India, Functional heads, Senior Programme Officer (SPO), Senior Veterinary Officer (SVO), Partner Director and District Manager. Interviews with these staffs will be held to delineate the implementation issues and challenges faced and the measures taken to address them.

In order to make the evaluation report balanced and insightful, triangulation will be done from both the primary and secondary sources of data. Wherever possible, sex-disaggregated data will be collected.

Areas of focus

The interventions carried out directly by Brooke India and by Partner organizations can be broadly categorized into three buckets; i.e. Service Provision, Community Engagement, and Advocacy. The interventions in each of the bucket are directed to achieve a particular outcome. The focus of the independent exit evaluation will be to evaluate the extent to which intended results has been achieved against the outcomes in each of the exited site. To examine the sustainable aspect the evaluation will capture the extent to which equid owners, service providers, and various community mechanisms were empowered to continue the actions in future for improved equine welfare.

Taking into account the broad contours of evaluation questions and to ensure that the evaluation captures the views and opinions of all the important stakeholders, various areas of focus has been identified. These areas of focus will form the basis for developing data collection instruments. The various areas of focus against each of the evaluation criteria have been mentioned in Annex I.

Limitations to Methodology

It is expected that the evaluation methodology will suffer from following limitations:

The availability of baseline data on key indicators before the start of intervention, and end line data at the end of intervention is important to assess the magnitude of change over the years. Though all the four sites selected for this evaluation have completed ten years of operation, there is no baseline data available before the start of intervention. Therefore, the analysis of the secondary data will present a limited picture on the magnitude of change.

Monitoring data is not available for all the key indicators for the entire duration of the programme. The possible reasons might be addition of additional indicators in between the programme and lack of a management information system to capture year wise data. Therefore, the use of monitoring data for analysis will be limited to few indicators.

The duration of field visit available for each site does not allow to interact with a large number of direct stakeholders, i.e. equid owners at the village as well as at the Brick Kilns. It is also assumed that primary stakeholders might find it difficult to recall the exact impact of the programme as the exit from the four sites happened one year back.

4. DETAILED WORK PLAN

Phases of Evaluation

The evaluation exercise will be executed through three interrelated phases. These are: preparatory phase; data collection phase; and report writing phase.

The preparatory phase starts with interviews of Brooke UK staff and an evaluation briefing by the Evaluation Manager, Brooke UK. This will help the evaluator understand the context of the Brooke India programme intervention and familiarization of various policies of Brooke UK. This will be followed by desk review of various programme documents and strategy documents. The careful scanning of important documents will provide a comprehensive overview of the background, phases and approaches of interventions. The desk review has helped the evaluator on development of evaluation matrix. Another important activity in this phase is planning for field visits. To make the planning effective and realistic, the evaluator will have interaction with M&E Manager of Brooke India and CEO, Brooke India. In this phase, the

evaluator has developed an inception report and has shared the report with Evaluation Manager, Brooke UK for feedback.

The data collection phase entails field visits for primary data collection, debriefing with the evaluation manager, and stakeholder's workshop. The field visits will be made according to the detailed field visit plan. The team members for the field visit will consist of the lead evaluator and a technical consultant. During the field visit the technical consultant will assist the lead evaluator to capture the technical aspects of service provision, i.e. welfare conditions of equids, and equine management practices. The M&E Manager from Brooke India will help mobilize various stakeholders for primary data collection. To ensure independence of data collection, the role of M&E Manager and other Brooke India staff will be limited to mobilization of stakeholders only. The evaluation exercise will be useful for the capacity building of M&E Manager, Brooke India. The field visit will be held between 12 March and 29 March of 2018.

After the completion of field visit, a debriefing with the Evaluation Manager, Brooke UK will be held to discuss initial findings emerged. During this phase the lead evaluator and the technical consultant will facilitate an in-country workshop to present preliminary findings of the evaluation to the programme and key stakeholders. The workshop will be utilized to gather feedback on the findings and build consensus on recommendations.

The report writing phase entails writing the Pre-final Draft Evaluation Report and finalization of the Report. The report will present key findings and recommendations agreed during the stakeholder workshop which will be suitably backed by evidences from various sources of information. The Technical Consultant will assist the lead evaluator in writing the technical aspects of the findings. The Pre-final Draft Evaluation Report will be submitted to Evaluation Manager for feedback from key evaluation stakeholders. The lead evaluator and Technical Consultant will address all the comments and feedback received from Evaluation Manager and Brooke India to finalize the report. The Final Report with all the comments addressed will be shared with the Evaluation Manager.

Key deliverables

The key deliverables and deadline against each deliverable is presented below:

Sl no.	Key deliverables	Deadlines
1	Submission of Inception Report	3 rd March 2018
2	Stakeholders Workshop	5 th April 2018
3	Submission of Pre-final Draft Evaluation Report	14 April 2018
4	Submission of Final Evaluation Report	3 rd May 2018

5. ADHERENCE TO BROOKE GUIDANCE AND FORMATTING REQUIREMENTS

The lead evaluator will adhere to Brooke guidance and formatting requirements to produce good quality deliverables, i.e. inception report, and evaluation report. The writing of inception report will adhere to the guidance given in the Inception Report Template shared by the Evaluation Manager.

The evaluation report will be written in English and will adhere to guidance given in Evaluation Report Template provided in Annex VI of the TOR, especially with regard to overall formatting of the evaluation report, formulating and presenting recommendations, and rating the intervention against the evaluation

criteria by using Evaluation Criteria Rating Table. The development of Good Practice will follow the guidance and structure of the Good Practice Template given in Annex V of the TOR document.

ANNEX 1:: EVALUATION MATRIX

Evaluation Criteria	Evaluation Questions	Areas of focus	Data Collection Methods						
			Brooke staff/partner interviews	Govt. officials	Focus group discussion/interview of equid owners	Key informants interviews	Observation during field visits	Desk review of documents	Review of monitoring data/database records
Design	<ul style="list-style-type: none"> -Was the criteria used for exit appropriate? -Was there adequate advocacy efforts in the exited areas? -To what extent focus was on strengthening local service delivery? 	<ul style="list-style-type: none"> -Adequate exit process to be followed -Transition arrangements & adequate exit strategy at place -Advocacy effort to support the ground work -Shift in focus from provision of free treatment to build and nurture local service delivery system 	<ul style="list-style-type: none"> -Interview with CEO, Brooke India -Interview with Head, Advocacy -Interview with SPO, SVO, dist. manager -Interview with Partner Director 	<ul style="list-style-type: none"> -Interview with Director, disease control -Interview with GVO/CVO 				<ul style="list-style-type: none"> -Brooke India Multiyear plan -Yearwise logframe -Brooke India Annual Reviews 	<ul style="list-style-type: none"> -Monthly progress report
Relevance/ Appropriateness	<ul style="list-style-type: none"> -Did the programme address the need of equid owners? -To what extent the programme met the equine welfare issues? -To what degree the key stakeholders involved in planning & implementation? -To what extent key stakeholders were empowered for taking ownership? -Any suggestions by key stakeholders for 	<ul style="list-style-type: none"> -Use of participatory approaches to identify equine welfare issues -Use of participatory welfare need assessment for action planning -Involvement of equid owners in identifying issues that impede equine welfare -Identifying the problems faced by equid owners in brick kilns -Empowerment of equid owners through formation of groups and associations -Capacity building of local health service providers and ancillary service providers on equine welfare issues -Identification and empowerment of local champions (Ashwamitras) to address working 	<ul style="list-style-type: none"> -Interview with Manager, Global Animal Welfare, Brooke UK -Interview with CEO, Brooke India -Interview with Head of Region, Veterinary Head -Interview with SPO, SVO, dist. Manager, VACM -Interview with Partner Director 		<ul style="list-style-type: none"> -FGD with female members -FGD with equid owners -Interview with equid owners at brick kilns - Interview with BK owners and contractors 	<ul style="list-style-type: none"> -Interview with local health service providers and ancillary service providers -Interview with member of Federation -Interview with ARC owner -Interview with Ashwamitras 		<ul style="list-style-type: none"> -Yearwise logframe -Brooke India Annual Reviews -Partnership Agreements -Baseline & Endline reports 	<ul style="list-style-type: none"> -Monthly progress report

	replication in other areas?	equine issues							
Coherence	<ul style="list-style-type: none"> -To what extent interventions built upon local resources? -To what extent equine owning communities accessed govt. schemes? -To what degree the programme leveraged govt AHD for equine welfare issues? 	<ul style="list-style-type: none"> -Availability of quality health service providers -Improving knowledge of local health service providers and ancillary service providers on equine healthcare -Advocacy at national & state level for livestock insurance benefit & other schemes -Engaging officials of govt AHD to promote equine welfare issues -Capacity building of GVO, LEO on equine health care & prevention of diseases 	<ul style="list-style-type: none"> -Interview with SPO, SVO, dist. Manager, VACM -Interview with Partner Director 	<ul style="list-style-type: none"> -Interview with Director, disease control -Interview with GVO/CVO -Interview with LEO -Interview with BDO/CDO 		<ul style="list-style-type: none"> -Interview with local health service providers and ancillary service providers -Interview with member of Federation & ARC owner 	<ul style="list-style-type: none"> -Brooke India Annual Reviews -Baseline & Endline reports -Yearwise Action Plans 	<ul style="list-style-type: none"> -Monthly progress report 	
Effectiveness of management set up	<ul style="list-style-type: none"> To what extent Brooke India was capable to plan and implement advocacy activities? -How Brooke India benefitted from participation in the global Brooke Brick Kiln Project? -How efficient was the management for intervention implemented by Brooke India and Partner organization? 	<ul style="list-style-type: none"> -Availability of adequate staffing and time for advocacy efforts of Brooke India -The ability to manage advocacy efforts at various levels -Exposure to global Brick Kiln Project strengthened learning for Brooke India -Organized and efficient management structure for implementation of interventions -Adequate staffing to implement & supervise the activities -Staff retention and commitment to achieve the goal of equine welfare 	<ul style="list-style-type: none"> -Interview with Global External Affairs Manager, Brooke UK --Interview with CEO, Brooke India -Interview with Head of Region, Advocacy Head -Interview with SPO, SVO, dist. Manager -Interview with Partner Director 				<ul style="list-style-type: none"> -Brooke India Annual Reviews -Partnership Agreements -Baseline & End line reports 	<ul style="list-style-type: none"> -Monthly progress report 	

<p>Effectiveness</p>	<p>-To what extent the programme focused on achieving outcomes? -To what extent community-led initiatives contributed to achieve sustainable equine welfare? -In the opinion of equid owners how was the quality of services received? -What was the effect on livelihood of equid owners due to improved equine welfare? -How successful was Brooke India in its advocacy efforts?</p>	<p>-Equid owners adopted sustainable equine management practices -BK owners provided sustainable environment for migratory equids and owners -Equine welfare groups, associations, and federations contributed to adoption of equine welfare practices among owners -Changes observed in husbandry practices among equid owners & caregivers -Contribution of women's welfare groups on improved equine welfare practices -Changes observed in treatment seeking behaviours of equid owners -Service provisions for equid owners are accessible, affordable, available, and acceptable -Feedback on the paid service for treatment of working equids -Improved equine welfare practices helped in strengthening the livelihood of owners -Increased knowledge on better husbandry practices helped in reduction of incidence of diseases -Contribution of advocacy efforts generate increased interest among policy makers on equine welfare issues -Changes made in national and state policies on welfare of equids & social protection of equid owners</p>	<p>-Interview with Global External Affairs Manager, Brooke UK -Interview with Senior Manager, Community Development, Brooke UK -Interview with CEO, Brooke India -Interview with Head of Region, Advocacy Head, Veterinary Head -Interview with SPO, SVO, dist. Manager, VACM -Interview with Partner Director</p>	<p>-Interview with Director, disease control</p>	<p>-FGD with female members -FGD with male members -Interview with equid owners at brick kilns - Interview with BK owners and contractors</p>		<p>-Observations at BK site on equine welfare measures</p>	<p>-Yearwise logframe -Brooke India Annual Reviews -Partnership Agreements -Baseline & End line reports -Yearwise Action Plans</p>	<p>-Monthly progress report</p>
<p>Efficiency</p>	<p>-To what extent resources (manpower &</p>	<p>-Efficient management of manpower to implement activities</p>	<p>-Brooke UK Finance Officer</p>					<p>-Brooke India Annual</p>	<p>-Monthly progress</p>

	<p>infrastructure) were efficiently used to achieve results?</p> <p>-Which mode of intervention was more efficient?</p>	<p>-Effective strategies to maximise the benefits at scale</p> <p>-Optimum utilization of operational expenses</p> <p>-Measures in place to check wastage of resources</p>	<p>-Interview with CEO, Brooks India</p> <p>-Interview with Head, Finance & Admin</p> <p>-Interview with SPO, SVO, dist. manager</p> <p>-Interview with Partner Director</p>					<p>Reviews</p> <p>-Partnership Agreements</p>	<p>report</p> <p>-Annual Budget & Expenditure</p>
<p>Sustainability and Likelihood of Impact</p>	<p>-To what extent the interventions are sustainable after the exit?</p> <p>-To what extent likelihood of impact can be attributed to Brooke India & Partner in the exited communities?</p>	<p>-Local and ancillary services providers are capable of ensuring equine welfare practices</p> <p>-Linkage and mechanism established between equid owners and service providers for future action</p> <p>-Interventions at sites implemented by Brooke India have effects on the likelihood of future impact</p> <p>-Interventions at sites implemented by Partners have effects on the likelihood of future impact</p>	<p>-Interview with CEO, Brooke India</p> <p>-Interview with Head of Region, Veterinary Head</p> <p>-Interview with Partner Director</p>	<p>-Interview with GVO/CVO</p> <p>-Interview with BDO/CDO</p>	<p>- Interview with BK owners and contractors</p>	<p>-Interview with local health service providers and ancillary service providers</p> <p>- Interview with Ashwamitras</p>	<p>-Observations at BK site on equine welfare measures</p>	<p>-Brooke Sustainable policy</p> <p>-Brooke India Annual Reviews</p> <p>-Partnership Agreements</p> <p>-Baseline & Endline reports</p>	

ANNEX II:: DETAILED EVALUATION WORK PLAN

Phases	Day	Date	Activity
Desk Review and Inception Report	Thursday	22.02.2018	Interaction with M&E Manager, Brooke India Interviews with Brooke UK
	Saturday	24.02.2018	Evaluation briefing with Evaluation Manager
	Monday	26.02.2018	Desk Research/Inception Report
	Tuesday	27.02.2018	Desk Research/Inception Report
	Wednesday	28.02.2018	Desk Research/Inception Report
	Thursday	01.03.2018	Desk Research/Inception Report
	Friday	02.03.2018	Submission of inception report to the Evaluation Manager
Field Visit and in-country Stakeholders Workshop	Saturday	10.03.2018	Interviews with Brooke India Country programme staff
	Monday	12.03.2018	Travel to intervention site (Aligarh): Interviews with SVO, District Manager, Vet Officer, VACM & executive members of Federation
	Tuesday	13.03.2018	Travel to intervention site (Aligarh): FGDs with male & female members of EWGs Interviews with LHP, Farrier, Ashwamitra
	Wednesday	14.03.2018	Travel to intervention site (Aligarh): Interviews with BK owners, contractors, equid owner Interviews with CRP/association members, ARC owner & BDO/CDO
	Thursday	15.03.2018	Travel to intervention site (Aligarh): Interviews with GVO, CVO, LEOs Interviews with district official
	Friday	16.03.2018	Travel to intervention site (Baghpat): Interviews with SPO, SVO, District Manager, Vet Officer, VACM & executive members of Federation
	Saturday	17.03.2018	Travel to intervention site (Baghpat): FGDs with male & female members of EWGs Interviews with LHP, Farrier, Ashwamitra
	Monday	19.03.2018	Travel to intervention site (Baghpat): Interviews with BK owners, contractors, equid owner Interviews with CRP/association members, ARC owner & BDO/CDO
	Tuesday	20.03.2018	Travel to intervention site (Baghpat): Interviews with GVO, CVO, LEOs Interviews with district official
	Thursday	22.03.2018	Travel to intervention site (Lucknow): Interviews with SPO, SVO, District Manager, Vet Officer, VACM

			Interview with Partner Director
	Friday	23.03.2018	Travel to intervention site (Lucknow): Interviews with GVO, CVO, LEOs Interviews with BDO/CDO & district official Interview with Director, Disease Control & Farms
	Saturday	24.03.2018	Travel to intervention site (Lucknow): FGDs with male & female members of EWGs Interviews with LHP, Farrier, Ashwamitra
	Sunday	25.03.2018	Travel to intervention site (Lucknow): Interviews with BK owners, contractors, equid owner Interviews with CRP/association members, ARC owner
	Monday	26.03.2018	Travel to intervention site (Unnao): Interviews with BK owners, contractors, equid owner FGDs with male & female members of EWGs
	Tuesday	27.03.2018	Travel to intervention site (Unnao): Interviews with District Manager, Vet Officer, VACM Interview with Partner Director Interview with BDO/CDO
	Wednesday	28.03.2018	Travel to intervention site (Unnao): Interviews with CRP/association members, ARC owner Interviews with LHP, Farrier, Ashwamitra
	Thursday	29.03.2018	Travel to intervention site (Unnao): Interviews with GVO, CVO, LEOs Interview with district official
	Tuesday	03.04.2018	Evaluation debriefing with the Evaluation Manager Preparation for stakeholders workshop in-country
	Wednesday	04.04.2018	Preparation for stakeholders workshop in-country Sharing PowerPoint presentation with Evaluation Manager
	Thursday	05.04.2018	Present preliminary findings of the evaluation in stakeholders Workshop
Pre-Final Draft Evaluation Report Writing	Friday	06.04.2018	Pre-Final Draft Evaluation report writing
	Saturday	07.04.2018	Pre-Final Draft Evaluation report writing
	Sunday	08.04.2018	Pre-Final Draft Evaluation report writing
	Monday	09.04.2018	Pre-Final Draft Evaluation report writing
	Tuesday	10.04.2018	Pre-Final Draft Evaluation report writing
	Wednesday	11.04.2018	Pre-Final Draft Evaluation report writing
	Thursday	12.04.2018	Pre-Final Draft Evaluation report writing
	Friday	13.04.2018	Pre-Final Draft Evaluation report writing

	Saturday	14.04.2018	Submission of the Pre-Final Draft Evaluation report to the Evaluation Manager
Finalization of Evaluation Report	Tuesday	01.05.2018	Final Report writing incorporating feedback
	Wednesday	02.05.2018	Final Report writing incorporating feedback
	Thursday	03.05.2018	Final Report writing incorporating feedback Submission of Final Report to the Evaluation Manager

Annex IV: List of persons interviewed

Internal		
Position and Organisation	Name	Contact
Brooke UK		
Director of Programmes	Harriet Dodd	Harriet.dodd@thebrooke.org
Senior Manager Community Development	Melissa Liszewski	Melissa.liszewski@thebrooke.org
Global External Affairs Manager	Frances Goodrum	Frances.goodrum@thebrooke.org
Brooke India		
CEO	Maj. Gen. (Retd.) M L Sharma	
SMT	Faizan Jalil	9910070470
	Suman Gupta	9911103616
Functional heads	Dr Saurabh Singh	8800439858
Advocacy Officer	A P Sinha	9891050619
SPO	Ramesh Ranjan	9868317086
	Dev Kumar Kandpal	
	Rajesh Sharma	
	Anup Kumar	
SVO	Dr Imran Firdousi Bhat	9410012359
	Dr Rajan	
	Dr Manish Rai	7905532513
District Manager	Sheel Ratan Gupta (Aligarh)	9411902784
	Ziyaaul Haque (Unnao)	
Veterinary Officer	Dr Viram Varshniya (Aligarh)	9358580511
VO-cum-Manager	Dr Arya Prakash (Baghpat)	
	Dr Vipin kumar Verma (Lucknow)	8601627777
	Dr Dinesh Maurya (Unnao)	8726452575
Veterinary Assistant cum Community Motivator	Rampal Singh, Vinay Kumar Dwivedi (Aligarh) Amar Singh, Anuj Kumar (Baghpat) Karuna Shankar Mishra, Anil Kumar Verma, Sushma Mishra (Lucknow)	9456219119 9236061746

	Sanjay Singh, Ajay Kumar Sharma (Unnao)	8726752807 9795006883
External		
Local Health Providers	Manmohan Singh (Aligarh) Sushil Kumar (Baghpat) Neeraj Shukla (Lucknow) Umesh Patel (Unnao)	
Farriers	Islam (Aligarh) Mohd, Rashid (Baghpat) Sahid Ali (Lucknow) Nanke (Unnao)	
Government Veterinary Officers	Dr Sumit Wasnik (Aligarh) Dr Ramesh Chandra Singh (Lucknow) Dr Dhanesh Kumar Gupta (Unnao)	
Livestock Extension Officer	Ravi Kumar (Aligarh), Devender Kumar (Baghpat), Shiv Narayan Yadav (Lucknow) Ajay Srivastav (Unnao)	
Members of Association	Sinu, Sunita, Neerja, Chandrabati, Poonam (Aligarh) Desh Pal, Ramesh Chandra, Tejpal Singh, Pramod Kumar (Baghpat) Salu Pal, Samprata Devi, Anisoom (Lucknow) Laxmi Sankar, Siniat, Nanke (Unnao)	
Members of Federation	Pappu Singh, Mukesh Kumar, Mahavir Singh (Aligarh) Naseem Ahmed, Sanju Ahmed, Ramesh Chandra (Baghpat)	
Ashwamitra (friend of Equine-Proactive Equid owner)	Hari Singh (Aligarh) Mintu Kumar (Baghpat) Ghanasyam (Lucknow) Laxmi Sankar (Unnao)	
Community Resource Person	Murari Lal, Kanshi Lal, Pappu Singh (Aligarh) Pramod Kumar (Baghpat) Mohd. Azgal (Lucknow)	

	Mr Siniat (Unnao)	
Owners/Members of Animal Resource Centre	Ramesh Chandra (Baghpat) Satyadev Dwivedi (Lucknow) Chandra Kumar (Unnao)	
Brick kiln owners	Padam Singh (Aligarh) Tejpal Singh (Baghpat) Anurudh Kumar (Lucknow) Ashok Ahuja (Unnao)	
Brick kiln contractors	Hari Shankar (Aligarh), Sushil Kumar (Baghpat) Waqar Ahmed (Lucknow)	
Project Directors of Partner units	Ram Ujagir Verma (Project Director, AVJKS, Lucknow) S N Pandey (Project Director, NPSS, Unnao)	9415465651 9415135471
Policy makers, implementers	Director, Disease Control & Prevention, AHD, Govt. of Uttar Pradesh	
BDO, CVO, CDO, DM and other district officials	Seema Choudhary (Dist. consultant, Swachha Bharat Mission, Aligarh) Dr KG Singh (Deputy CVO, Aligarh) Janardan Prasad Yadav (BDO, Aligarh) Dr RK Yadav (Retd. Additional Director, AHD, Aligarh) Dr Rajpal Singh (CVO, Baghpat) Harbir Singh Mallik (ADO-Isb, Baghpat Block) Rohit Kumar (ALC, Labour Dept. Baghpat) Dr Tej Singh Yadav (CVO, Lucknow) Shakti Sen Maurya (Assistant Labour Commissioner, Unnao) Neeraj Kumar (District Mission Manager, NRLM, Unnao) Dr Pramod Kumar Singh (CVO, Unnao)	

Annex V: List of Documents Reviewed

Documents
<i>Brooke India Strategic Plan 2010-2015</i>
<i>Brooke India Country Strategic Plan 2015-2020</i>
<i>Partnership Agreement Arthik Vikas Evam Jankalyan Sansthan</i>
<i>Partnership Agreement New Public School Samiti</i>
<i>Year wise Logical framework (2007-08 to 2016-17)</i>
<i>Annual Review and Reflection (2009-10 to 2014-15)</i>
<i>Baseline and endline reports (Aligarh, Lucknow, Baghpat, Unnao)</i>
<i>Action Plan and Strategic Plan (Aligarh, Lucknow, Baghpat, Unnao)</i>
<i>Monthly Progress Report (2011-12 to 2016-17)</i>
<i>Exit Assessment Reports (Aligarh, Lucknow, Baghpat, Unnao)</i>
<i>Brooke India Organogram</i>
<i>Minutes of Meeting on Control and Containment of Glanders in the country</i>
<i>Department of AHD order on administrative approval of National Livestock Mission</i>
<i>VACM Foundation Course Module</i>
<i>VO Foundation Course Module</i>
<i>District level LHP Training Module</i>
<i>Farriery Training Module</i>
<i>Annual Budget of Aligarh, Lucknow, Baghpat, Unnao (2012-13 to 2016-17)</i>

Annex VI: Data Collection Instruments

1. FGD Questionnaire: Men EWG members (Equid owners)

Part A: As Equid owners

Have you ever been involved to identify issues/needs pertaining to equine welfare? If yes, what was the process of involvement?

Knowledge on improved husbandry practices and diseases

Has your knowledge/awareness in husbandry practices increased? If yes, in which area your knowledge increased?

Which practices have you started doing post intervention? How has that helped you/equine?

What change have you made in feeding practice after Brooke training? Any impact observed thereafter?

During the illness of equids to whom you consult frequently? Are you satisfied with the treatment?

Has there any change in your treatment seeking behaviour? If yes, why this happened?

Has there any change in occurrences (frequency) of diseases? If yes, in which diseases?

What do you do when equine has heat stroke, colic etc? What steps do you take thereafter?

Do you maintain deworming, tetanus vaccination card?

What is the most common health problem in the area and how do you prevent/manage it?

Do you have the access to first aid medicine? If yes, what are the sources?

Utilization of Brooke's services

What is your opinion on the **free treatment services** offered by Brooke? To what extent these services were readily available, and acceptable? Mention any gaps you found in the service delivery?

Have you used the services of **local health providers** for treatment? If yes, how frequently? Your opinion on the quality of services provided by LHP? Who do you refer to in case of serious illness?

Have you used the services of **farriers**? If yes, for what purpose? Your opinion on the quality of services provided by farriers? How is it different from before/ what has changed?

Have you used **Brooke's emergency services** in case of urgent need? If yes, for what purpose? Did you receive the services/advice within 24 hours of emergency call? Your opinion on the quality of emergency services?

Have you approached **Ashwamitra** for primary equine treatment? If yes, for what purpose? Your opinion on the quality of services provided by Ashwamitra? Do you believe it is a useful intervention?

Capacity Building/Training

Did you receive any training on husbandry practices? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

Did you receive any awareness training on symptoms, causes and prevention of various diseases? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

Did you receive any other training? If yes, in which areas?

Do you feel the need of training in any other areas? If yes, in which areas? If no, why not?

Income and alternate livelihood

What is your main source of income? Is there any alternate source of income?

What coping mechanism you adopt when the equine is not healthy to work?

Before and after change

What problems/issues you had faced with regard to working equids before Brooke Intervention?

What problems/issues you are still facing with regard to working equids?

According to you, what are the three most important changes/benefits from Brooke Intervention for the equids and for you as the owner?

Sustainability

How confident enough are you to continue to follow the improved management practices?

After the exit of Brooke what challenges have emerged in past one year? What challenges you visualize for the future?

What support you expect from Brooke even after their exit?

What suggestion you would give to Brooke India for other sites?

Part B: As EWG member

According to you, what is the main purpose of forming this group? Is this a useful forum?

As a member of this group, what activities do you perform?

What issues are discussed in the group meeting?

Did you receive any training to improve your skills? If yes, in which areas? Was the training useful to you?

Is your group implementing any income generation activities? If yes, what are they?

Is your group linked with any govt. schemes? If yes, what are they?

As a group, did you access the benefits of schemes (Equine insurance, TT vaccination)? Have you ever interacted with local level officials? If yes, for what purpose?

According to you, what are the three most important benefits of the EWG?

According to you, what are the current issues/ problems faced by your group? How it can be addressed?

What suggestion you would give for improvement in functioning of the group for other sites?

2. FGD Questionnaire: Women EWG members

Part A: As caretakers

Have you ever been involved to identify issues/needs pertaining to equine welfare? If yes, what was the process of involvement?

Knowledge on improved husbandry practices and diseases

Has your knowledge/awareness in husbandry practices increased? If yes, in which area your knowledge increased?

Which practices have you started doing post intervention? How has that helped you/equine?

What change have you made in feeding practice after Brooke training? Any impact observed thereafter?

During the illness of equids to whom you consult frequently? Are you satisfied with the treatment?

Has there any change in your treatment seeking behaviour? If yes, why this happened?

Has there any change in occurrences (frequency) of diseases? If yes, in which diseases?

What do you do when equine has heat stroke, colic etc? What steps do you take thereafter?

Do you maintain deworming, tetanus vaccination card?

What is the most common health problem in the area and how do you prevent/manage it?

Do you have the access to first aid medicine? If yes, what are the sources?

Utilization of Brooke's services

Have you used the services of **local health providers** for treatment? If yes, how frequently? Your opinion on the quality of services provided by LHP? Who do you refer to in case of serious illness?

Have you used **Brooke's emergency services** in case of urgent need? If yes, for what purpose? Did you receive the services/advice within 24 hours of emergency call? Your opinion on the quality of emergency services?

Capacity Building/Training

Did you receive any training on husbandry practices? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

Did you receive any awareness training on symptoms, causes and prevention of various diseases? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

Did you receive any other training? If yes, in which areas?

Do you feel the need of training in any other areas? If yes, in which areas? If no, why not?

Income and alternate livelihood

What is the main source of income of your family? Is there any alternate source of income?

What coping mechanism you adopt when the equine is not healthy to work?

Before and after change

What problems/issues you had faced with regard to working equids before Brooke Intervention?

What problems/issues you are still facing with regard to working equids?

According to you, what are the three most important changes/benefits from Brooke Intervention for the equids and for you as the owner?

Sustainability

How confident enough are you to continue to follow the improved management practices?

After the exit of Brooke what challenges have emerged in past one year? What challenges you visualize for the future?

What support you expect from Brooke even after their exit?

Part B: As EWG member

According to you, what is the main purpose of forming this group? Is this a useful forum?

As a member of this group, what activities do you perform?

What issues are discussed in the group meeting?

Did you receive any training to improve your skills? If yes, in which areas? Was the training useful to you?

Is your group implementing any income generation activities? If yes, what are they?

Is your group linked with any govt. schemes? If yes, what are they?

As a group, did you access the benefits of schemes (Equine insurance, TT vaccination)? Have you ever interacted with local level officials? If yes, for what purpose?

According to you, what are the three most important benefits of the EWG?

According to you, what are the current issues/ problems faced by your group? How it can be addressed?

What suggestion you would give for improvement in functioning of the group for other sites?

3. Interview Questionnaire: Equid owners at BK site

BK site

Since how many years you are coming to this site? How many months you work here?

What is the nature of migration (Return on same day, stay at BK site, all family members or alone)?

Are you consulted to identify the problems faced by you at brick kilns? If yes, what were they?

Knowledge on improved husbandry practices and diseases

Has your knowledge/awareness in husbandry practices increased? If yes, in which area your knowledge increased?

Which practices have you started doing post intervention? How has that helped you/equine?

What change have you made in feeding practice after Brooke training? Any impact observed thereafter?

During the illness of equids to whom you consult frequently? Are you satisfied with the treatment?

Has there any change in your treatment seeking behaviour? If yes, why this happened?

Has there any change in occurrences (frequency) of diseases? If yes, in which diseases?

What do you do when equine has heat stroke, colic etc? What steps do you take thereafter?

Do you maintain deworming, tetanus vaccination card?

What is the most common health problem in your area and how do you prevent/manage it?

Do you have the access to first aid medicine? If yes, what are the sources?

Services at BK site

According to you, what welfare measures the BK owners has taken for working equids?

Are the measures/services accessible, and acceptable to you?

Is there clean drinking water facility and plain road to the BK site? Are you satisfied with the facility?

Is the BK have green fodder facilities?

According to you, what are the other areas where welfare measures are needed?

Do BK owner/contractor listen to your problems? How cooperative are they to address the problem at the site?

Capacity Building/Training

Did you receive any training on good husbandry practices? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

Did you receive any awareness training on symptoms, causes and prevention of various diseases? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

Did you receive any other training? If yes, in which areas?

Do you feel the need of training in any other areas? If yes, in which areas?

Income and alternate livelihood

What is your main source of income? Is there any alternate source of income?

What coping mechanism you adopt when you do not come here for work?

Before and after change

What problems you had faced with regard to working equids at BK site before Brooke Intervention?

What problems/issues you are still facing with regard to working equids at BK site?

According to you, what are the three most important benefits from Brooke Intervention at BK site?

Sustainability

To what extent the behaviour of BK owner/contractor has changed with regard to equine welfare issues?

What suggestion you would give to Brooke India for improvement of facilities in other BK sites?

4. Interview questionnaire with BK owner & contractor

Since how many years there is work in this site? Do you have other sites as well?

What is the nature of migration of equid owners (Return on same day, stay at BK site, all family members or alone)?

Is there clean drinking water facility and plain road at this BK site (Observation)? If not, why?

Are there green fodder facilities available? (Observation)? If not, why?

What other welfare measures have you taken for working equids?

Are the measures/services used by the equid owners? If not, why?

According to you, what are the other areas where welfare measures can be introduced?

Did you receive any training on equine welfare measures? If yes, who provided the training & the duration of training? Was the training useful? Your suggestion to make the training more useful.

To what extent equid owners are practicing equine welfare practices here? If no, why?

What are most important changes found at BK site due to Brooke Intervention?

What suggestion you would give to Brooke India for other BK sites?

5. Interview Questionnaire for CEO & Senior Management Team members of Brooke India

What were the key strategies for implementing intervention in sites managed directly by Brooke India?

What are the factors that led to adopt two modes of operation (Direct and Partners)?

Were the strategies followed in these two modes of operation different from each other? If yes, mention.

On what basis the exit criteria were developed? What were the reasons behind exiting from these sites?

Was there exit strategy? To what extent transition arrangements were at place before the actual exit?

To what extent equid owners were involved in planning and implementation of interventions?

What capacity building efforts for service providers were done for improved equine welfare in the future? Any problems encountered and how it was addressed?

What role the community institutions (Ashwamitra, EWG, AEWG/Federation) played in demand creation for equine welfare?

What measures were initiated to strengthen the local service delivery? Any problems encountered and how it was addressed?

To what extent collaboration with govt. service providers (Dept. of Animal Husbandry, GVO/CVO) were successful? Any problems encountered and how it was addressed?

To what extent targeted intervention at BK sites contributed to improved equine welfare? Any problems encountered and how it was addressed?

Which mode of operation (Direct vs Partners) worked well? What was the reasons for that?

Which mode of operation (Direct vs Partners) was cost efficient? What was the reasons for that?

What was working well and working less well in direct operations? What was the reasons for that?

What was working well and working less well in operations through Partners?

Are there programme innovations you want to highlight?

To what extent advocacy efforts brought changes at the national level, state level & local level?

Any challenges faced for effective advocacy and how it was addressed?

According to you, in the exited site how equine welfare practices will be sustained for future?

Could you mention three important learnings from this programme?

What you would recommend for improvement of programme functioning in other sites?

6. Interview questionnaire with SPO, SVO, Dist. Manager, VACM and Partner Director

What was your specific responsibilities in the implementation of programme?

What were the key strategies for implementing intervention?

On what basis the exit criteria was developed? What were the reasons behind exit?

Was there exit strategy? To what extent transition arrangements were at place before the actual exit?

To what extent equid owners were involved in planning and implementation of interventions?

What capacity building efforts for service providers were done for improved equine welfare in the future? Any problems encountered and how it was addressed?

What capacity building efforts for equid owners were undertaken for improved husbandry practices? Any problems encountered and how it was addressed?

To what extent EWGs contributed for adoption of equine welfare practices by owners & family?

What efforts were undertaken to strengthen the local service delivery? Any problems encountered and how it was addressed? Are the results of these efforts sustainable?

What efforts were undertaken to leverage the resources of govt. service providers (Dept. of Animal Husbandry, GVO/CVO/LEO)? Any problems encountered and how it was addressed? What were the results of this engagement?

What activities were undertaken for intervention at BK sites for improved equine welfare? Any problems encountered and how it was addressed? Are the results achieved sustainable?

What were the implementation problems (Availability of trained staff, retention of staff)? How it was addressed?

What steps were initiated to bring cost efficiency in implementation? What measures were taken to check wastages of resources?

What monitoring & supervision plans were implemented to track the progress? How the gaps in implementation was addressed?

To what extent advocacy efforts brought results at the ground level?

Among the approaches, what was working well and working less well? What was the reasons for that?

Are there programme innovations you want to highlight?

Could you mention three important learnings from this programme?

What you would recommend for improvement of programme functioning in other sites?

7. Interview questionnaire with GVO, CVO, LEO

How frequently equid owners seek your services for treatment of equids? Has the number of cases increased or decreased? What are the reasons for that?

Are there enough facilities in the area for treatment of equids? What emergency services are there?

What was your involvement in the Brooke India programme?

According to you, to what extent the exited site has the capacity to sustain improved equine welfare activities? If not, what could be done to achieve this?

To what extent equid owners are adopting the equine welfare practices? Is it sustainable in long term? What could be done for sustainability?

To what extent there is change in occurrences of diseases among working equids? What are the reasons?

Have you received any training from Brooke? If yes, in which year and what duration? In which areas?

To what extent the training was useful for you? Any gaps you felt in the training? Your suggestion to make the training more useful.

What steps were taken by your department in the Brooke intervention area? What results were achieved?

What is your opinion on the treatment services provided by LHPs? Are they trained enough to provide the services? What could be done to ensure quality services by them?

What is your opinion on the quality of services provided by farriers? Have you observed any changes after Brooke intervention? What are they?

Could you mention three important learnings from the BI programme?

What you would recommend for improvement of BI programme functioning in other sites?

8. Interview questionnaire with Govt. official at state and district level

How you came to know about Brooke India programme?

What was your involvement in the Brooke India programme?

What is your opinion about the Brooke India programme?

In the programme what approaches are working well and what approaches are working less well?

What is the nature of engagement of Brooke India with you?

Are there other areas in which your department can engage with Brooke India?

Is there any linkage established between Local service provider and Veterinary department for oversight by the latter?

What steps were taken by your department in the Brooke intervention area? What results were achieved?

What are the areas in which Brooke India should give more focus to achieve equine welfare?

Could you mention three important results of the BI programme?

Should the programme be replicated in other areas? What challenges you foresee for other sites?

What you would recommend for improvement of BI programme functioning in other sites?

9. Interview questionnaire with local health service providers/farriers/Ashwamitra

Local health service provider

Are you aware of welfare friendly techniques for treatment of equids?

Have you received any training from Brooke? If yes, in which year and what duration? In which areas?

To what extent the training was useful for you? Any gaps you felt in the training? Your suggestion to make the training more useful.

Any positive impact of the training? If yes, what are they?

How frequently equid owners seek your services for treatment of equids? Has the number of cases increased or decreased? What are the reasons for that?

For complicated cases, to whom you refer for treatment? What treatment facilities are available to deal with complicated cases?

What is your consultation charge? Is the cost of treatment affordable by the equid owners?

Are medicines available nearby? What are the sources?

What is your opinion on the recent introduction of paid services? How the poor equid owners will access?

According to you, what are the three most important changes/benefits from Brooke Intervention?

What suggestion you would give to Brooke India for other sites?

Farriers

Are you aware of welfare friendly handling techniques during farriery? What animal friendly practices do you follow during trimming and applying horse shoe?

Have you received any training from Brooke? If yes, in which year and what duration? In which areas?

To what extent the training was useful for you? Any gaps you felt in the training? Your suggestion to make the training more useful.

Any positive impact of the training? If yes, what are they?

How frequently equid owners seek your services? Has the number of cases increased or decreased? What are the reasons for that?

According to you, what are the three most important changes/benefits from Brooke Intervention?

What suggestion you would give to Brooke India for other sites?

Ashwamitra

Why did you choose to become Ashwamitra? What was the procedure for your selection?

Under the programme what are your responsibilities? Any problems faced to carry out your responsibilities?

To what extent you act as a linkage between community & Brooke India?

To what extent you have the skills to provide primary equine treatment?

Have you received any training? What all did it entail.

To what extent the training was useful for you? Any gaps you felt in the training? Your suggestion to make the training more useful.

To what extent equid owners are practicing improved equine welfare after the exit? Any suggestion to make the practice sustained in long term?

What is your opinion on the recent introduction of paid services? How the poor equid owners will access?

What are the three most important changes/benefits resulted from Brooke Intervention?

What suggestion you would give to Brooke India for other sites?

10. Interview with CRP, Association/Federation members

Community Resource Person

What is the procedure of election/selection of CRP? What role you play as a CRP?

To what extent you have facilitated the PWNA process for block level association? What are the difficulties you faced?

To what extent you have facilitated the institution building and strengthening of block level association? What are the difficulties you faced?

What steps you have taken to ensure training on primary care, first aid and vaccination? Any challenges faced by you?

What are the contributions AEWG on improved equine welfare? How it can be further improved?

After the exit of Brooke what are the challenges you visualize for the future?

What suggestion you would give to Brooke India for other sites?

Members of block level association (AEWG)/federation

According to you, what is the main purpose of forming this association/federation?

As a member of this association/federation, what activities do you perform?

Are there meetings conducted? What issues are discussed in the meeting?

Is your association linked with trained LHP? If yes, what are the benefits of linkage?

Is your association linked with trained farrier? If yes, what are the benefits of linkage?

Do you have a CRP in your association/federation? What role the CRP play? To what extent the CRP is useful for association/federation?

Did you receive any training to improve your skills? If yes, in which areas? Was the training useful?

Is your association/federation implementing any income generation activities? If yes, what are they?

What is the average annual earning of this association? What are the main sources of earning?

According to you, what are the three most important benefits of this association/federation?

What are the current issues/ problems faced by your association/federation? How it can be addressed?

Is this association/federation sustainable? What should be done to make it sustainable?

What suggestion you would give to association/federation for other sites?

Annex VII: Good Practice

Title of Good Practice
Convergence of Group and Individual Interest to make the AEWG sustainable
Innovative Features and Key Characteristics
Individual members of the Association pursued income generation activities based on the expertise and area of interest. Mutual understanding among the group members to not take up similar activity by other members The earning member contributes to the association a share of the profit The income of the Association is equally distributed among all members The income of Association grew with the increased income of earning member The increased income of Association contributed to the increase in income of other members
Background of Good Practice
<p>Sri Mahadev Ashwa Kalyan Samiti (AEWG) was established in 2011 in Binouli block of Baghpat. The AEWG was federated from 12 men EWGs. Initially, the income of the AEWG was mainly from monthly contribution from each EWG (INR 500) and monthly contribution of each AEWG member (INR 100). With no other income generation activities AEWG members were taking less interest. The membership reduced to 10 after few years as 2 EWGs left the AEWG.</p> <p>In 2015, the AEWG members participated in an exposure visit to Kishan Garh by BI on income generation and building linkage. The VACM motivated few active members to engage in income generation activities for growth in source of income so that the AEWG could be sustainable. One AEWG member, Desh Pal, took interest to prepare first-aid box as there was demand on first-aid box from brick kiln owners. Another member, Ramesh Chandra, with previous experience in Life Insurance, took interest in preparation of mix-feed as there was no mixed-feed shop in the town and equid owners were visiting other towns to get it. Both the members took the loan from the AEWG saving to pursue their individual interest as they knew that taking up this work in a group will not succeed. The group decided that interest amount of the loan and a certain share of the profits made from these activities will be deposited in the corpus of the samiti (AEWG). All the group members had an equal share of the group corpus which they can take any time without any interest.</p>
Further explanation of chosen Good Practice
Before starting the individual activity both of them undertook survey in the area of operation to know the actual demand from the community. After the BI intervention, there was demand from the brick kiln owners for first-aid boxes. Equid owners were buying medicines from the medicine shop without any discount. This gave an opportunity to Desh Pal to prepare the first-aid box and sell it to brick kiln owners. The selling price of each box was INR 300 with a profit of INR 100. Out of the profit he contributed INR 30 per box to the AEWG corpus. He convinced the medicine shop owners for linkage with the AEWG. After the linkage he distributed a card to the owners to get 10% discount in the medicine bought from the linked shop owners. The medicine shop owners shared a proportion of the

profit with Deshpal. He used the AEWG to create network with other EWG groups and through these groups with equid owners. This helped to expand the network.

Ramesh Chandra realized that there is huge demand for mix-feed in the area and there is no shop in the town for that. He took a loan of INR 70000 from the AEWG corpus and started the business of mix-feed preparation in January 2018. He used the AEWG and EWG platform for spreading the information of his mix-feed business. The demand for mix-feed increased rapidly. In the first month he sold 45 kilogram while in the next two months the sell was 1000 kilogram and 2400 kilogram respectively. He contributed a share of his profit to the AEWG corpus.

The equid owning community got the benefit as they did not have to travel to other towns to buy it. They also got the mix-feed at cheaper rate. The initiative also helped in creating awareness on giving mix-feeds for better health of equids.

It was unique as the platform of AEWGs and EWGs were effectively used for expansion of business. The income generation activity also benefitted the AEWG as a share of the profits belonged to the group corpus. The activities pursued were related to the equine welfare as the owners got the medicines and mix-feed at cheaper rate and was easily available.

Practical/Specific Recommendations for Roll Out

Such practise has the potential for replication in other areas. Demand for mix-feed among the owners is high and it is not easily available. Similarly, demand for essential medicines for treatment of equine diseases is also there. This practise has a good business sense as it effectively used the groups to expand the business. At the same time sharing of the profit with the group corpus helped in strengthening the income potential of the group.

How could the Good Practice be developed further?

To further develop the business the members should be given training on marketing skills so that the business could be expanded to other nearby towns.

Annex VIII: Evaluation Criteria Rating Table

Criteria	Rating (1 low, 5 high)					Rationale
	1	2	3	4	5	
Validity of design			3			The programme complied with the exit strategy by gradual withdrawal from free treatment services and accelerated efforts to strengthen the community institutions. However, the absence of exit strategy and advocacy as a component in the log frame in the first five years and frequent addition of indicators were weak links.
Coherence			3			Capacity building of existing resources such as local farriers and LHPs were done for better acceptance by the community. The BI staff and AHD staff maintained a cordial relationship and sought cooperation from each other. There was widespread awareness about NRLM scheme and uptake was high. However, low level of awareness and poor uptake of NRLM and labour card scheme pulled down the rating.
Relevance/Appropriateness				4		Various strategies adopted at different stages of the programme ensured equine welfare. Participatory processes were adopted to identify community problem Equid owners and service providers were consulted during planning and this led to their overall empowerment. Features such as PWNA, healthy equine competition, and ranking of units at regional level conference are replicable in other areas.
Effectiveness				4		Adequate emphasis was given to implement activities to achieve the outcome on the service provision and community engagement component. Equid owners were satisfied with the services of trained LHPs and farriers. For most of the owners the cost of quality services was affordable. However, advocacy activities to create a favourable policy environment were taken up much later and this affected the effectiveness.
Effectiveness of management set up			3			The management structure was conducive for implementation of activities. Field operations were strengthened based on learning. However, absence of advocacy staff at BI headquarter till 2015, small advocacy team at present and absence of separate advocacy staff at regional level limited the capacity to effectively plan and implement advocacy activities.
Efficiency			3			Partner units are less expensive as compared to direct units. There was no visible difference on achievement of results between direct and partner unit. The exit targets for all the key indicators have been achieved in both the direct and partner units. However, limited role of partner organizations

					in decisions on implementation strategies and budget, and absence of flexibility for creative solutions hampered the partnership spirit of working.
Sustainability and Likelihood of Impact			4		The built-up knowledge on good husbandry practices is sustainable in the future as it has become a habit. Linkage with trained LHPs and farriers is sustainable as there is increased demand for services. Women groups and associations are sustainable as the members realized the potential of such groups for addressing their urgent needs. Though sustainability of men EWG groups and functioning of federations are in question, the limited role of these institutions does not affect the overall sustainability.