****

**With thanks to the Kadoorie Charitable Foundation and China National Committee on Ageing**

**Results and Impacts**

**Final Evaluation Report**

**Promoting Older People’s Participation in Development in Rural China**

**Submitted by**

**Liu Lin Li Fan Guo Chaonan Yu Xu**

**College of Humanities and Development Studies (COHD)**

**China Agricultural University (CAU)**

**May, 2012**

**TABLE OF CONTENTS**

[ACKNOWLEDGEMENTS 3](#_Toc324171343)

[ACRONYMS AND ABBREVIATIONS 4](#_Toc324171344)

[EXECUTIVE SUMMARY 5](#_Toc324171345)

[**Evaluation** 5](#_Toc324171346)

[**Findings** 5](#_Toc324171347)

[**Conclusions** 7](#_Toc324171348)

[**Recommendations** 7](#_Toc324171349)

[1. BACKGROUND 8](#_Toc324171350)

[**1.1 General introduction of the project** 8](#_Toc324171351)

[**1.2 Objectives of the final evaluation** 8](#_Toc324171352)

[2. METHODOLOGY 10](#_Toc324171353)

[**2.1 The Participatory Approach** 10](#_Toc324171354)

[**2.2 Framework of the Mission** 10](#_Toc324171355)

[3. MAIN FINDINGS 11](#_Toc324171356)

[**3.1 Impact** 11](#_Toc324171357)

[**3.2 Relevance** 15](#_Toc324171358)

[**3.3 Equity** 16](#_Toc324171359)

[**3.4 Effectiveness** 19](#_Toc324171360)

[**3.5 Sustainability** 22](#_Toc324171361)

[**3.6 Accountability** 26](#_Toc324171362)

[**3.7 HelpAge International’s role** 28](#_Toc324171363)

[4. LESSONS AND RECOMMENDATIONS 30](#_Toc324171364)

[**Lessons learned** 30](#_Toc324171365)

[**Recommendations for future project implementation** 33](#_Toc324171366)

[5. CONCLUSIONS 36](#_Toc324171367)

[**5.1 Relevance of the project** 37](#_Toc324171368)

[**5.2 Efficiency of project implementation** 38](#_Toc324171369)

[**5.3 Effectiveness of achievements** 39](#_Toc324171370)

[**5.4 Impact of the project** 39](#_Toc324171371)

[**5.5 Sustainability** 40](#_Toc324171372)

[6. Appendices 42](#_Toc324171373)

[**6.1** **Terms of reference** 42](#_Toc324171374)

[**6.2** **Itinerary** 47](#_Toc324171375)

[**6.3** **List of people met** 49](#_Toc324171376)

[**6.4** **Sample of “H” tool evaluation** 54](#_Toc324171377)

[**6.5** **Case studies** 56](#_Toc324171378)

[**6.6** **Photo album** 59](#_Toc324171379)

[**6.7** **Methodology and methods** 64](#_Toc324171380)

# **ACKNOWLEDGEMENTS**

This evaluation is the result of a close cooperation among different people. Our gratitude goes to staff of the Shaanxi Provincial Committee on Ageing for their warm welcome and professional attention to the mission. The same applies to the county level Committee on Ageing of Fengxiang, Chencang and Huaxian visited by the mission. We like to acknowledge particularly Mr Deng Xueyi provincial project management office for his highly effective organization and arrangements of the field visits as well as the many important information and data of the project. A special word of thanks also goes to Ms. Li Ke from PMO on accompanying the mission during field survey and the good logistic services she provided. Finally, all the personnel from the project townships and villages as well as the OPA members are acknowledged for their active participation in the evaluation. Their assessments on the different aspects of the project form the basis of this report.

# **ACRONYMS AND ABBREVIATIONS**

|  |  |
| --- | --- |
| EU | European Union |
| KCF | Kadoorie Charitable Foundation |
| HelpAge | HelpAge International |
| CNCA | China National Committee on Aging |
| SPCA | Shaanxi Provincial Committee on Ageing |
| PMO | Project Management Office |
| County CA | County Level Committee on Ageing |
| CAU | China Agricultural University |
| COHD | College of Humanities and Development Studies |
| OPA | Old People Association |
| PRA | Participatory Rural Appraisal |
| NGO | Non-governmental organization |
| NPO | Non-profit organization |
| NPC | National People’s Congress |

# **EXECUTIVE SUMMARY**

## **Evaluation**

###### Purpose

The evaluation of the project has been carried out to assess the following matters: impact, relevance, equity, effectiveness, sustainability, accountability and the role of HelpAge International and lessons learnt for further replicability.

###### Approach

Effects and impacts of the project were assessed by analyzing the changes that the project brought to local people, local communities, and local authorities, from perception to practices on dealing with ageing issues. The entire process of the evaluation was done under the participatory approach by using tools and methods of the participatory rural appraisal.

###### Execution

1. Beijing: interviewed the International Department of CNCA;
2. Provincial level: group interviewed the SPCA (with PMO) and a validation workshop with after field work;
3. County level: organized evaluation workshop in each county / district with CA and local partners (civil affairs bureau, agricultural bureau, public health and sanitation bureau, poverty alleviation and development office). In total 36 local officials participated the workshops;
4. Township level: interviewed 5 township level officials on perceptions of the project and its sustainability;
5. Community level: visited 8 project communities[[1]](#footnote-1) in 3 counties / district by: i) interview with village leaders, ii) group discussion with OPA members, iii) interview with village doctors, iv) interview with volunteers, v) interview with individual old people. In total 159 old people (101 male and 58 female) participated the evaluation.

## **Findings**

###### Impact

The project successfully integrated some governmental resources. It provided new ideas, methods and approaches for the ageing issues in Shaanxi and China. It’s expected that the project will impact the 12th 5 Year Planning of China’s cause of Ageing. The mode of the project was presented through CNCA to other provinces. The project is innovative on setting the community based family care volunteer system the most disadvantaged ole people in less developed rural area. Capacities of county level CAs been significantly increased. Social image of CAs at different levels also promoted. The project also has broader social impact in local communities as OPA activities in project communities are attracting participation of neighbouring communities and younger people.

###### Relevance

The project mode was officially approved with its high relevance. The 112th 5 Year Planning on China’s Cause of Ageing clearly designed a scheme to establish OPAs at 85% of administrative villages in China. The designing of the projects’ logical framework was rational and practical which in general satisfied needs and requirements of old people in rural areas and the high relevance of different project components and activities also benefited the CAs at different levels.

###### Equity

Participatory approach including PRA tools were applied in project to ensure social equity on distribution of project resources at the grass root level. The delivery of the productive assets was managed with good transparency and strong equity. Due to traditional factors, there are much fewer female observed in the management of OPAs and, since there’s more female in the most disadvantaged old people who need day care, correspondingly there are more female volunteers.

###### Effectiveness

The project established implementing units at different levels including community OPA. SPCA and county CAs provided effective technical support / guidance and monitoring to the project villages. The project increased old people’s knowledge and capacity through participatory training methods. The project modified local circumstance, improved social status of old people, promoted mutual support among local people.

###### Sustainability

The project respected old peoples’ preferences on production which rely more on traditional methods, it fits for features of old people but may not fit local governments’ strategy in agriculture. The seed money has profound and long-term impacts on guaranteeing the operation of OPAs, supporting concrete needs of old people. Some OPA activities (recreational and traditional musical / entertaining ones) started to generate incomes which could partly supplement the operation of OPA.

All OPAs were not officially registered in civil affair bureaus, means they are not legally approved corporative which may affect the sustainable development of its functions in the future. The sustainability of volunteer is not very clear since the majority of volunteers are those OPA members over 60. Encouraging to visiting local authorities for resources is one of the innovations of the project and may help sustainability of the project.

###### Accountability

The project contents are systematic and fit to local circumstances and hence, make the project with high demonstrative role with strong replicability except the productive assets, seed money and free physical checkups for people aged 60-64. The operation and management mode of the productive assets of the project has been partly replicated to provincial poverty alleviation and development projects.

###### HelpAge International’s role

Brought new insights, ideas, methods and approaches for the ageing business in Shaanxi and even China and, both CNCA and SPCA suggested the project will have positive impacts on the implementation of the 12th 5 Year Planning of China’s cause of Ageing. The project organized and operated by HelpAge was rational which is practical and feasible. Through its cooperation with local CAs the project proved a feasible approach on organizing similar projects in the future. Also, the project helped greatly on the capacity of CAs at different levels, not only in organization and management of actual projects but also in development of the possibilities on dealing with ageing issues in a cross sectoral manner.

## **Conclusions**

In general, implementation of the project is successful on realizing its **objectives** on strengthening the capacity of older people-led associations and local authorities to reduce poverty and improve health care provision in 16 villages of Shaanxi Province, and enhancing partner capacity to replicate. The project was designed to strengthen community-based organisations of older people, called Older People’s Associations (OPAs), and to expand the support they receive from local authorities. The project is also successful on making a feasible and applicable model on approaching its overall goal on that “OPAs in China and throughout Asia generate mutual support among older people, reducing their isolation and vulnerability by creating a social support network”.

## **Recommendations**

For safeguard the sustainability of the project achievements, it is strongly recommended that the project should design a phase out planning for a period of next 1 or 2 years. The planning should include:

* Scheme and designed activities for keep strengthening capacity of OPA especially on seeking resources, organizing activities and training methods;
* Scheme and designed activities for promoting the capacities (including structure and functions) of volunteers in project communities;
* Scheme and designed activities for expanding the functions of OPA with more development orientation;
* More trainings for supporting forces at county and township level authorities (mainly CAs and the most close partners);

# **BACKGROUND**

## **1.1 General introduction of the project**

HelpAge International and the Shaanxi Provincial Committee on Ageing are collaborating on a three-year project (funded by the European Union and the Kadoorie Charitable Foundation) in Shaanxi Province to reduce poverty and improve health in rural China from 2009 to 2012.

The objective is to strengthen the capacity of older people-led associations and local authorities to reduce poverty and improve health care provision in 16 villages of Shaanxi Province, and enhance partner capacity to replicate. (Later, the number of villages was increased to 30.) The project strengthens community-based organisations of older people, called Older People’s Associations (OPAs), and aims to expand the support they receive from local authorities. OPAs in China and throughout Asia generate mutual support among older people, reducing their isolation and vulnerability by creating a social support network.

The project addresses the challenges of older people in several ways:

* Income constraints: Working with local authorities, the project will use the village Older People’s Associations as a channel for providing livelihoods assets, related training, and information about government programmes and services designed to boost rural incomes.
* Health care: The project will work with local doctors and health authorities to provide health check-ups for older people, increase awareness about self-care, and provide information about government health services.
* OPA capacity: The project will strengthen the operations and leadership of Older People’s Associations to make them an important actor in village development.
* Replication by local and national authorities: The project approach will be documented and implemented in one new county to demonstrate its replicability and shared with national policy makers and other provinces.

## **1.2 Objectives of the final evaluation**

As planning of the project implementation, a team from the College of Humanities and Development Studies (COHD) from China Agricultural University (CAU) was invited to conduct the final evaluation of the project. The COHD team contains 2 specialists with rich experiences on rural development project and 2 post graduate students majored in regional development.

Objectives of the evaluation provided by HelpAge International include:

1. To review the achievements of the project against its objectives and indicators
2. To assess changes and impact that the project brought to older people and their communities
3. To assess changes that the project brought to local authorities’ support for older people and their communities
4. To assess the project replication strategy and sustainability
5. To assess the effectiveness and efficiency of project implementation
6. To identify project lessons and come up with suggestions for future work

As per suggested by the project implementing agency and project owners, major issues and questions that the evaluation team will address as well as criteria for the evaluation are:

1. Impact: What has been the impact of the project at different levels;
2. Relevance of the project in addressing the identified needs;
3. Equity;
4. Effectiveness;
5. Sustainability;
6. Accountability;
7. Assessment of HelpAge International’s role;
8. Lessons Learned and recommendations for future replication.

# **METHODOLOGY**

## **2.1 The Participatory Approach**

Participatory rural appraisal (PRA) under Participatory Approach is the major method package applied for the evaluation. Participatory approach has been proved effective on social investigations, project planning, monitoring and evaluation. Major PRA tools applied for the evaluation including semi-structured group interview, key informant interview, participatory sampling, scoring and ranking, “H” tool evaluation, case study village profiling, etc.

## **2.2 Framework of the Mission**

Below is the framework and contents of the evaluation. Details of methodology and methods / tools applied is presented in annex of this report.

* Reading and review of documents
* Discussion of the expert team
* Confirmation of Checklist
* Choose PRA tools
* Random Sampling for visit villages
* Semi-structured interview
* Introduction of functions agencies & national policy
* Discussion
* Listen to Province & Project briefing
* Inspection and collection of secondary data
* Semi-structured interview
* Assessment Seminar

Discuss the TOR, objectives and outputs

* Listen to county situation & project briefing
* County Evaluation workshop with “H”tool
* Semi-structured group interview: township officer; village leaders, old farmers and village doctors
* “H” tool, important events /History changesd, etc
* Field observation
* Visit old villager family
* presentation of the results of field surveys
* Verification of relevant information and data
* The focus of discussion

**Procedures**

**Method & Tools**

Design

Interviews with Director General Mrs. Wang Xun, International department of CNCA

Interviews with Mr.Ai Baidong, Director of Shannxi Committee on Ageing & PMO staff in Xi’an

Field survey in 3 project Counties & 8 Pre-selected villages

Write and submit the study report

Preparation

Presentation and validation workshop at Xi’an

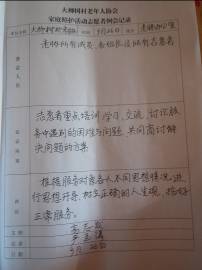
Collation of information and data to draw the conclusions

# **MAIN FINDINGS**

This chapter focus on the narrative presentation of all the important findings during the evaluation. Structure of the chapter is mostly based on the requirement given by HelpAge in the ToR for the COHD team. Further analysis of the findings will be included in next chapters.

## **3.1 Impact**

1. The project management from SPCA down to county CAs and village OPAs are standardized and high transparency that reflected strong understandings on participatory approach and appreciated by governmental authorities at different levels. The management scheme of the project may have positive impacts on governmental project management;
2. The project reflected strong integration on its operation which requires cross sectoral coordination (against the traditional department focused project management and operation system). At a certain extent, the project integrated some governmental resources together with social resources on its supporting to old people in less developed rural area. Anyway, it is not easy to really integrate resources from agricultural development and poverty alleviation departments (which considered very important in rural development) since most of their funds are under strict sectoral management and monitoring scheme;
3. The project provided new ideas, new methods and approaches for the ageing business in Shaanxi and even China. The successful operation of the project is a good proof to the establishment and sustainable development of OPAs at grass root level. Officers from both CNCA and SPCA suggested that the project will have positive impacts on the implementation of th 12th 5 Year Planning of China’s cause of Ageing;
4. The project initiated a community based and family care focused volunteer system for supporting the most disadvantaged ole people in rural. The innovation has positive impact on changing the fact that most volunteers so far are concentrated in urban and suburb areas, it provided practical approaches and experiences on developing rural volunteers;



Picture: record of one regular meeting of volunteers, Daliushu Village

1. On a meeting with 13 provincial CAs organized by CNCA, the mode of the project was presented which increased the positive impacts of the project;
2. During project implementation, provincial governor and some NPC members of Shaanxi had visited the project site in Fengxiang and approved the project mode which is expected to have positive impact on policy makings for supporting old people in rural areas;
3. Some national level mass media and the mainstream provincial level mass media of Shaanxi had made special reports on the project and increased the social impact of the project;

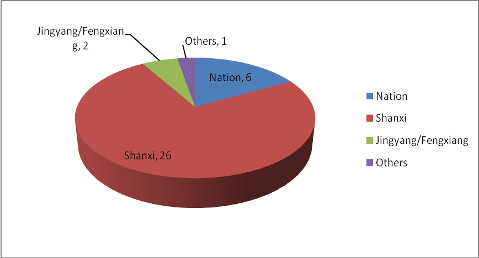


Figure 1: Number and level of mass media that reported the OPA project

Figure 2: Type of mass media that

reported the OPA project

1. The county level CA is one of the most disadvantaged departments with very few resources. From operation of the project, the capacities of county level CAs on project management and resources coordination been significantly increased. The social image of CAs at different levels also promoted at certain extent;
2. According to data provided by provincial project management office, the designed amount of direct beneficiaries and indirect beneficiaries were fulfilled as hence received positive social impact for the project;
3. In some project villages with better transportation facilities, the activities organized by OPAs are starting to attract participation of neighbouring communities as well as younger people in their own villages. The development and promotion of community based volunteers to certain extent also mobilized some younger people in the villages;
4. While considering impact of the project, the result of scoring from the “H” tool evaluation done by different groups was interesting. As showed in below, as direct beneficiary, old people gave the highest score to the project, while female a bit lower since they expected[[2]](#footnote-2) more input from the project on recreation facilities. Village doctors are most conservative on scoring mostly because they are doubt with the sustainability of the project same as county authorities on doubting that once project fund stopped, how can old people be satisfied with the already increased expectation.

**Table 1: Comparison on scoring the project by different groups**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Old People** | | **OPA Leaders** | **Village Doctors** | **Village Committees** | **County Authorities** |
| **Male** | **Female** |
| 9.529 | 9.288 | 9.25 | 8.2 | 8.86 | 8.75 |

*Source: “H” tool evaluation during the field investigation*

## **3.2 Relevance**

1. High relevance of the project made its mode more officially approved. The project received great attention from CNCA, the 112th 5 Year Planning on China’s Cause of Ageing had made clear statement on enhancing international cooperation and communication as one of the 6 key tasks of the planning. The planning also clearly designed a scheme to establish OPAs at 85% of administrative villages in China;
2. It is found from the evaluation that designing of the project logical framework was rational and practical which in general satisfied needs and requirements of old people in rural areas;
3. High relevance of different project components and activities also benefited the CAs at different levels and promoted their social images;
4. The average income of old people in project villages in last 3 years in general increased which decreased the weights on the younger and the society as well. Main reasons of the increase are: the increased marketing prices of farm products, the increased input in agricultural production (benefited from the productive assets from the project) and increased yield accordingly. On the other hand, the national old age subsidies, the promotion of old-age insurance and the low income subsidies together is also a strong supplementary factor to the income increasing;
5. The trainings and promotions on health care and ageing knowledge were highly appreciated by direct beneficiaries with good and observable results. Most of the interviewed beneficiaries reported an significant increase of knowledge on geriatrics and self service health. Village doctors reported that old people became more active and more in time on taking necessary medicines (which also increased business of the village clinic) in time. Many old people also reported that their living style also changed by project operation into more sports, less salt, meat and smoking, more vegetable, etc.;

***Case 1 – How the project change old people’s awareness on health***

*Mr. Lin Xinshan, village doctor, Xianfeng Village, Chencang*

*Because afraid of spending money, old people used to suffer small diseases by themselves and only go to doctor once getting serious. Through the trainings on health care, old people in the village has more understandings on geriatric and chronic diseases and realized the importance of dealing with “small issues” more positive. I had tried to promote some self health care including more vinegars, less salt, more vegetables, less smoking before but not appreciated by them. With the project, old people are more serious with the organization and the organized training and they listened to what I introduced to them.*

## **3.3 Equity**

1. The project applied PRA tools in each village on wealth ranking in order to define the direct beneficiaries of the project resources which guaranteed the equity on distributing resources;



Picture: record of the participatory wealth ranking for defining receivers for the first instalment of productive assets, Lisi Village

1. As one of the biggest benefit from the project, the delivery of the productive assets was managed through participatory approach with good transparency and strong equity. The assets helped on satisfy the diversified needs of old people and decreased conflicts and social risks that could possibly be created by the earmarking operation at grass-root level;

**Table 2: Number of old people received productive assets**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Village** | **Lisi** | **Xihe** | **Niuboyu** | **Dongluo** | **Shicun** |
| Total population above 60 | 204 | 1296 | 138 | 245 | 386 |
| Number of receivers for the 1st installment | 39 | 71 | 40 | 36 | 50 |
| Number of receivers for the 2nd installment | 29 | 56 | 36 | 31 | 40 |
| Number of receivers for the 3rd installment | 14 | 22 | 21 | 15 | 19 |
| Total beneficiaries | 82 | 149 | 97 | 82 | 109 |
| Proportions to the total old people of the village | 40% | 11% | 70% | 33% | 28% |

*Source: field investigation of the evaluation*

1. Most of the honour leaders of OPAs are the current village leaders and the standing leaders are the retired village leaders and school teachers. Anyway, there are much fewer female observed in the management of OPAs;
2. Since there’s more female in the most disadvantaged old people who need day care, correspondingly there are more female volunteers;

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Table 3: Situation of day care by volunteers (Fengxiang & Huaxian)** | | | | | | | |
| **Number of volunteer** | | | | **Number of old people received home care** | | | |
| **Village** | **Total** | **Male** | **Female** | **Village** | **Total** | **Male** | **Female** |
| *Fengxiang County* | | | | *Fengxiang County* | | | |
| Fanjiazhai | 15 | 4 | 11 | Fanjiazhai | 15 | 5 | 10 |
| Zhangjiadian | 15 | 6 | 9 | Zhangjiadian | 14 | 8 | 6 |
| Daliushu | 15 | 10 | 5 | Daliushu | 15 | 10 | 5 |
| Niuboyu | 15 | 0 | 15 | Niuboyu | 15 | 8 | 7 |
| Xihe | 13 | 2 | 11 | Xihe | 15 | 6 | 9 |
| Qiuchimiao | 15 | 1 | 14 | Qiuchimiao | 15 | 1 | 14 |
| Total | 88 | 23 | 65 | Total | 89 | 38 | 51 |
| *Hua County* | | | | *Hua County* | | | |
| Lipo | 15 | 8 | 7 | Lipo | 15 | 6 | 9 |
| Nansha | 16 | 7 | 9 | Nansha | 16 | 8 | 8 |
| Lisi | 12 | 5 | 7 | Lisi | 12 | 6 | 6 |
| Shicun | 12 | 1 | 11 | Shicun | 12 | 4 | 8 |
| Dongluo | 15 | 1 | 14 | Dongluo | 15 | 4 | 11 |
| Maogou | 23 | 9 | 14 | Maogou | 17 | 7 | 10 |
| Total | 93 | 31 | 62 | Total | 87 | 35 | 52 |
| **Total** | **181** | **54** | **127** | **Total** | **176** | **73** | **103** |

*Source: provided by the project management in SPCA*

1. For participants of the village meetings for the project evaluation, the proportion of female was much smaller than male which supported the existence of strong gender issues in less developed inland areas;
2. It is clear that female were more interested in health care training, recreational activities / resources and facilities for OPA;
3. On the hand, it is clear from the scores given by different sex, female in general gave lower scores than male. It has to be pointed out that while asked, most of the female said they were not unsatisfied on the project but wish the project could provide more recreational facilities and support;

**Table 4: Number of females on OPA management**

|  |  |  |
| --- | --- | --- |
| OPA | Total management members | Number of female |
| Xihe | 5 | 2 |
| Niuboyu | 7 | 2 |
| Daliushu | 10 | 2 |
| Xianfeng | 7 | 0 |
| Hulugou | 7 | 0 |
| Shicun | 7 | 0 |
| Dongluo | 5 | 3 |
| Lisi | 7 | 1 |

Source: field investigation of the evaluation

**Table 5: Number of OPA members in the “H” tool evaluation, by gender**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Male | Average score | Female | Average score | Average score of all participants |
| Xihe | 11 | 9.909 | 6 | 9.500 | 9.765 |
| Niuboyu | 18 | 9.444 | 11 | 10.000 | 9.655 |
| Daliushu | 8 | 9.625 | 9 | 9.000 | 9.294 |
| Xianfeng | 7 | 9.000 | 6 | 9.000 | 9.000 |
| Hulugou | 10 | 9.600 | 6 | 9.667 | 9.625 |
| Shicun | 13 | 10.000 | 4 | 10.000 | 10.000 |
| Dongluo | 12 | 9.500 | 9 | 9.333 | 9.429 |
| Lisi | 8 | 9.500 | 5 | 7.800 | 8.846 |
| Total / average | 87 | 9.572 | 56 | 9.288 | **9.452** |
| Average score by male | **9.529** | Average score by female | **9.288** | Total average | **9.452** |
| Proportion of male in evaluation | 60.84% | Proportion of female in evaluation | 39.16% |  |  |

Source: Field investigation of the evaluation

## **3.4 Effectiveness**

1. SPCA paid great attention on the operation of the project and provided lots of efforts and support on project organization and management. A project management office was established with SPCA with staff and logistics recruited / allocated. Administrative resources of SPCA were also mobilized on safeguard the operation of the project. Project funds were allocated in time and spent with good efficiency;
2. All project counties and the replicated counties established the county level project leading group headed by the local governor in charge of civil affairs and ageing, all related local authorities are members of the leading group;
3. SPCA and county CAs provided effective technical support and guidance as well as effective monitoring to the project villages and replicated villages. It was impressive during the field investigation that most old people are familiar with the accompanied SPCA and county CA staff;
4. In general, the education background of old people in villages visited are low, the proportion of illiteracy is relatively high which to certain extent affected the organization and results of technical support and trainings the project provided;

Figure 3: Education background of old people from villages interviewed

1. It is found from the evaluation that the project increased old people’s knowledge on health as well as their capacities on production. All people over 65 can receive free national physical checkups and all from 60 to 64 enjoyed 3 free checkups from the project. Some county (Huaxian) decided the contents of the checkups with old people and provided more items;
2. Some project counties organize county and township hospitals to provide on spot physical checkups at project villages and was highly appreciated by old people;
3. Large proportion of old people visited expressed that they now know their own health situation, their moods are good and no longer feel lonely due to the operation of the project;
4. The participatory training methods applied by the project on health care issues were good with effective visualization and focused / interested contents. All the village doctors visited also said that the participatory trainings they received were good and effective;



Picture: the participatory tools used for village doctor training, Lisi Village

***Case 2 – Interesting training methods from the project***

*Mrs. Yan Yonghong, village doctor, Daliushu Village, Fengxiang*

*I didn’t go to the training on geriatric and chronic diseases training in County, my husband went (also village doctor), he is the one responsible on cooperating with OPA. He went to several times (about 3) the training. He was happy on the training and told me once there were even foreigners as trainers for them. He always said the training organized by the project was very interesting and trainees were very active and participating. He learnt the way to organize the training and brought those to the trainings with OPA members and invited old people to lecturing their own issues, the result of the training was much better than before.*

1. Certain amount of the old people interviewed can not remember the contents of the health and agricultural production trainings that the project provided. It reflected that the designing of some trainings and technical support were not tailored to the characters of old people concerning their literacy and physical conditions.
2. Just 2 out of the 8 OPAs visited involved younger villagers to be volunteers. Anyway, all project villages have old people (up to 70 years’ old) acting as volunteers and there is also a trend in some villages that volunteers are related to those old people who received day cares;
3. The medical facilities provided by the project belongs to the related OPAs and selection of the facilities were co-decided by OPA and village doctors;



Picture: the medical facilities provided by the project

1. Operation of the project modified the circumstance of local communities, it improved the social status of old people, promoted mutual support inside family and with neighbours. The project is defined as made contributions to the harmonization of rural communities (e.g. whether taking good care of old people has became one of the standards on electing village leaders in Dongluo);
2. All project villages established OPA and created management schemes. All OPA leaders were elected through democratic procedures. Old people got their own venues in the community and necessary resources on organizing activities. From the field evaluation, the most satisfaction that the old people feel on the project was that they got more chances on communication with others and they also feel that they got their own organizations and no longer ignored inside the communities;
3. Through project operation, the social status of old people in rural areas clearly increased, some old people are elected as village representatives and members of township level NPCs;

**Table 6: Presence of old people in village committees**

|  |  |  |
| --- | --- | --- |
| Village | No. old people in village committees | No. old people among farmer representatives |
| Xihe | 0 | 10 |
| Niuboyu | 1 | 12 |
| Daliushu | 0 | 9 |
| Xianfeng | 0 | 6 |
| Hulugou | 0 | 3 |
| Shicun | 1 | 29 |
| Dongluo | 7 | 6 |
| Lisi | 3 | 3 |

Source: Field investigation of the evaluation

## **3.5 Sustainability**

1. Working with old people (features including: relatively large population, living in distances, lower education background, lack of knowledge and skills in modern livelihood, etc.) in less developed rural area faces with more challenges and difficulties. Though highlighted a lot in names, yet solving actual and concrete problems and issues for old people especially those in rural area has not been the focus of local authorities. Meanwhile, the large disparities on public services and social facilities between rural and urban in China caused many of the basic needs of rural old people and OPAs can not be satisfied;

**Table 7: Situation of OPAs’ visit to county level authorities**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **OPA** | **Local authorities visited** | **No. of visit** | **No. of response** | **% of response** |
| Niuboyu | Cultural, library, civil construction, TV station, water conservancy, public health, education | 7 | 5 | 71 |
| Daliushu | Breeding farm, cultural, TV station, court, government, library | 6 | 5 | 83 |
| Xihe | Rural credit cooperative, judicial, hospital, TV station | 5 | 4 | 80 |
| Lisi | Cultural, public entertainment, financial administration, agricultural production, civil affairs, forestry administration | 10 | 4 | 40 |
| Shicun | Rural development, agricultural production, cultural, TV station | 5 | 4 | 80 |
|  |
| Dongluo | Civil affairs, cultural, agricultural production | 4 | 4 | 100 |

*Source: provided by PMO*

1. For better sustainability, the project provided many trainings focused on leadership and management of OPAs (selection of OPA leaders, criteria for leaders, internal rules and regulations, etc), how to conducting meetings with older people, home care, self care, organizing proper activities for older persons, finding resources, etc.
2. Most of the old people visited are rely only on the traditional methods and means on agricultural production and the productive assets and seed money from the project respected the choices of old people, anyway, the project components concerning production fits for features of old people but may not fit the development orientation that local governmental promoting in rural areas;

***Case 3 – Old people with productive asset on traditional production***

*Mr. Xu Shengcai, 69, live together with wife. Ranked as poor household by OPA meeting and received 2,200 Yuan as productive assets from the project in 2009. Mr. Xu bought a mule for 3,200 Yuan. Apple tree is the major local income source and difficult to use machines for plowing in between trees. Mr. Xu used the mule to plow apple tree orchard for other villagers and made 7,000 Yuan in 2010, the end of the year, he paid 1,100 Yuan back to OPA.*

1. Establishment of the productive assets and seed money has profound and long lasting impacts on: guarantee the operation of OPAs, continuous support the concrete needs of old people in rural area and, provide references to the development of China’s cause on old people with high feasibility;
2. The distribution of the productive assets was led by a careful participatory needs assessment which safeguards the operation of the project at the grass root level. Also, conformed large amount of needs (e.g. fertilizers) of OPAs and members were directly delivered to their hand;
3. Some of the activities (mainly recreational ones and the traditional musical / entertaining ones) organized by OPAs started to generate incomes[[3]](#footnote-3) which could partly supplement the operation of particular OPA activities;
4. Some of the local project villages with relatively better collective incomes allocated certain resources to OPAs, resources including spared collective arable land and village workshops which could be one feasible and practical trial on the sustainable development of OPAs;
5. All the OPAs were not officially registered in the local civil affair bureaus due to the 30,000 RMB[[4]](#footnote-4) of annual fee for registration, instead, they just alternatively reported their names in the official records of local authorities, therefore, the OPAs are not corporative which may affect the sustainable development of OPAs in the future;
6. On organizing regular community based activities, all OPAs give more attention to health and recreation / entertainment related ones but not to production and farming related ones;
7. In names, all the project OPAs have established the mutual help groups according to unified productive patterns with support of the productive assets, anyway, it is found that those groups are not functioning;
8. Some project villages made the intentional standards on recruiting volunteers over 18 years old, it turned out that in all the villages, the majority of volunteers are those OPA members over 60 and lack the participation of the younger and other age groups from the communities;



Picture: written standards on recruiting community based volunteers

1. Encourage old people to use the name of OPA on visiting local authorities and asking for resources is one of the innovations of the project. All OPAs visited has more or less experiences (both positive and negative) on getting resources from “upper level” authorities. It helped old people on building their capabilities and potentialities which based on the realizing of their role in communities development. However, most old people and OPA leaders visited also expressed that it was difficult (most mentally and psychologically) to ask for resources and are not very sure if this will be kept when the project support stopped.

***Case 4 – OPA visiting local authorities for resources***

*Mr. Fan Baoliang, OPA leader, Fanjiazhai Village, Daliushu Township, Fengxiang. Some OPA leaders and members went to visit the chief of the county fruit tree extension station. At the beginning, the chief didn’t know OPA and refused the request to provide free service. After communication (several times) on explaining the OPA and project ideas to him, the chief became supportive and assigned technicians to deliver trainings and field guidance to OPA members.*

***Case 5 – OPA visiting local authorities for resources***

Mrs. Li Jucao, OPA leader, Dongluo Village, Huaxian. We had visited some county level authorities, each time we go 5-6 old people, the OPA provides10 Yuan for bus. If you don’t go, no support, when you go, you will get some, though not fully satisfied but some is some and we didn’t come back with bare hands. We never thought before that old people can do like this. At the beginning, we didn’t know how to talk to officers, later we found out they are willing and capable to support some. If the project stopped, we may not to go again, since we got no backstopping.

1. Location of community level OPA office Some of the project villages can not provide proper venue for OPA and its regular activities which may bring risks on security of old people. On the other hand, most of the venue in project villages seems not solely owned / controlled by the OPAs and one possible risk could be once the project closed, the OPAs will lose their places.
2. It is observed that due to various reasons, the involvement of township government in project implementation was not as active as most of other community development and / or poverty alleviation oriented projects.
3. The capacities of different OPAs on seeking for resources varied and in general remain low which may affect the sustainability. Most of the OPA leaders interviewed expressed that once the project “officially” stopped, they may lose courage to continue visiting government for extra resource.
4. Though most of visited OPAs have the rough plan to use part of the interest of the seed money on supporting operation of OPA in the future, all the OPA leaders are working as volunteers without subsidies[[5]](#footnote-5).
5. All volunteers are working with no subsidy and any other payment, while all OPAs organize regular (mostly monthly) meeting with them and some of them have more regular informal meetings. And most of the volunteers have no training experiences on communication, psychological and physical skills on working with old people;
6. Some of the project activities are costly (e.g. free physical checkups for 60 - 64) and lack of feasible sustainability for both the project counties and the replicated counties;
7. Due to administrative reasons, all the village doctors are carrying heavy governmental assignments and tasks and their motivation on participating the project activities (health training, free services, etc.) are low;

## **3.6 Accountability**

1. Designing of the project objectives was clear and definite. In general, the project contents are systematic and fit to local circumstances and hence, make the project with high demonstrative role with strong replicability. All the 3 county CAs visited during the evaluation thought that except the productive assets, seed money and free physical checkups (for people aged 60-64), all project activities are easy to be replicated;
2. The project provided new ideas, new methods and approaches for the ageing business in Shaanxi and even China. The successful operation of the project is a good proof to the establishment and sustainable development of OPAs at grass root level. Officers from both CNCA and SPCA suggested that the project will have positive impacts on the implementation of the 12th 5 Year Planning of China’s cause of Ageing;
3. The operation and management mode of the productive assets of the project been partly assessed and replicated to the operation of micro credit projects in poverty alleviation organized by the provincial poverty alleviation and development office;
4. From project villages, all old people from 60 to 64 years old received 3 free physical checkups from the project. The first 2 checkups were conducted at township hospitals and evaluated by old people as poor services and qualities, the project took into consideration of the issue and organized the 3rd year checkups at county hospitals and praised by old people;
5. From the mid-term evaluation report provided by provincial project management office, it was found that old people were not satisfied with the delayed delivery of productive assets (especially the fertilizers) from the project. However, the COHD team didn’t collect any of the similar complaints from farmers which showed good accountability of the project operation on integrate beneficiaries opinions into project management;
6. Old people’s participation in the regular and irregular activities organized by OPAs are good which reflects the high accountability of project design. The OPA activities organized under and supported by the project include: discuss needs for OPA development, learning latest policies and social development, assess issues and difficulties faced by old people, wealth ranking on defining poor households, assist on delivering productive assets and other project support, technical trainings, health care trainings and promotions, regular meeting with volunteers, trainings for volunteers, traditional entertainment and cultural affairs, visiting most disadvantaged old people, electing good mother in law and outstanding daughter in law, annual OPA meetings, etc.;

**Table 8: Situation of non project villages’ visiting to the project villages**

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Village** | **Non project village** | **Number of participants** | **Topics of the visiting** |
| Niuboyu | Hanfeng | 3 | Operation of OPA and organizing activities |
| Xihe | Miganqiao | 3 | Project situation which could be replicated |
| Zhuyuan | 3 |
| Daliushu | Huaxian | 24 | Learning OPA experiences on management and development |
| Sanlihe | 2 |
| Xigucheng | 1 |
| Xiaosha’ao | 1 |
| Lisi | Honghuali | 5 | How to mobilize old people’s participation in production and organization / management of OPA |
| Jiangcun | 3 |
| Nanhou | 3 |
| Xiaocun | 3 |
| Nanbu | 2 |
| Bubeihou | 3 |
| Zekou | 3 |
| Hanliang | 4 |
| Shicun | Honghuali | 4 | Understanding the operation and management of OPA |
| Beishi | 2 |
| Chengnan | 5 |
| Gaojiahe | 5 |
| Mengcun | 3 |
| Bubeihou | 3 |
| Dongluo | Chengnan | 5 | Understanding the operation and management of OPA for better development of services to old people |
| Gaojiahe | 5 |
| Houfang | 6 |
| Bubeihou | 5 |
| Heilongjiang PCA | 30 |
| Anhui PCA | 50 |
| Pucheng County | 9 |
| Honghuangli | 4 |
| Fengxiang | 22 |

*Source: provided by PMO*

## **3.7 HelpAge International’s role**

1. As stated in previous chapters, the project designed and conducted by HelpAge International brought new insights, ideas, methods and approaches for the ageing business in Shaanxi and even China;
2. The successful operation of the project is a good proof to the establishment and sustainable development of OPAs at grass root level. Officers from both CNCA and SPCA suggested that the project will have positive impacts on the implementation of the 12th 5 Year Planning of China’s cause of Ageing;
3. Rationality of the project designing was high and the project logical framework showed to be very practical and feasible and hence make the HelpAge ideas on similar projects high replicability;
4. Though cooperating with one of the most vulnerable department among local authorities, the project as it was designed was relatively successful on coordinating with other local authorities and lobbying necessary resources outside the project rage. Hence proved a feasible approach on organizing similar projects in China in the future;
5. On the other hand, the project helped greatly on the capacity of CAs at different levels, not only in organization and management of actual projects but also in development of the possibilities on dealing with ageing issues in a cross sectoral manner;

# **LESSONS AND RECOMMENDATIONS**

This part of the report will mainly talk about the lessons learned from the entire process of project implementation. The lessons to be described are based on information gathered during the 7 days field investigation that the COHD team conducted in 8 project villages (6 direct project villages and 2 replicated ones) and the series of workshops / meetings with CNCA, SPCA and County CAs, and some of the analysis are based on the experiences of the team.

As stated several times in the findings, implementation of the project was very successful. Many lessons can be summarized to guide similar projects in the future as well as for providing strong references to government on dealing with ageing issues. Success of the project reflected series of lessons with strong replicability which should be further enhanced in future projects and, the evaluation also summarized some lessons that presented as recommendations for being noticed in the organization and implementation of future projects.

However, it should be noticed in advance that the evaluation team heard almost no complaints from old people as direct beneficiaries on project implementation and organization. As the vulnerable group receives fewer social attentions, old people in those villages investigated are very nice, their expectations were low and the project provided great opportunities to them. Their perceptions on the project as well as on HelpAge are very positive. Old people’s awareness and willingness on participating community development related affairs were built up through the project, that’s why while asked for giving opinions of sustainability and replicability of the project, they also gave many useful recommendations which are integrated into the phrases of this part.

## **Lessons learned**

1. Provide concrete and feasible mode for the development and promotion of OPA and related issues;
2. Rely on the existing OPAs that organized by local government. OPA was not an innovation from the project. However, due to financial and methodological shortages, most of the governmental established OPAs[[6]](#footnote-6) are almost not functioning. The project provided not only funds but more importantly the systematic designing of project activities focused on old people which made clear comparison at the grass-root level and showed the potential of old people in community and social development;
3. Project components and activities have high relevance and operation of the activities are financially guaranteed;
4. Invite the current community leaders as honour leaders of each OPA and using participatory method on selecting executing leaders;
5. Fixed meeting rooms and venues[[7]](#footnote-7) for all the OPAs which enable old people to have regular activities;
6. Provide operational funds (450 RMB / month) for each OPA to support daily management and operation;
7. Specific trainings and capacity buildings for OPA on organization management, health care promotion, farming, etc.;
8. Encouraging and supporting (through training and guidance) old people to visit local authorities for gathering resources is considered one major positive lesson which can increase the social image of OPA as well as the capacity of old people;
9. Introducing participatory methods into management and operation of OPA are proved as guaranteeing the satisfaction of old people and decreasing internal conflicts and risks;
10. County level project management help on coordinating development resources from local authorities to be allocated to project villages;
11. Build the image of OPA into the way of supporting and assisting daily management of village committees but not confronting;
12. Different resources from the project guaranteed the OPA as an organization is attractive for old people in villages to participate in activities;
13. Designed the volunteer system on taking care of highly disadvantaged old people and put the system under management of OPA;
14. Involve old people on designing contents of the free physical checkups and organize the checkups at the village site;;
15. Respect old people’s choice / habits as well as indigenous knowledge on household based production with using the productive assets and seed money;
16. Pay attention to the psychological needs of old people by organizing volunteers, recreational activities, physical checkups, etc;
17. Provided chances for old people and OPAs to communicate and liaison with other communities;
18. Help old people to realize that them also have the capacity and capabilities through series of project activities from productive assets and cooperation with local authorities;
19. Recruiting capable project management staff instead of fully rely on local counterpart;
20. Project resources delivered to OPA and old people under strict monitoring and through standardized procedures;
21. Organized and encouraged OPA members on exchanging experiences / ideas with other project villages by short tours;
22. Push local authorities (down to village committees) on providing hardware and facilities and focus more on capacity building of old people;
23. Involve mass media on promoting social image of OPA and old people;
24. There are two types of ideas on defining project villages among different counties: allocate project wherever there are governmental supported community development projects (e.g. Chencang) and, try to lobby governmental supported projects wherever the project (mostly according to the project criteria) is allocated (Huaxian);
25. Designed some phasing out activities (including the seed money and the related guideline / management scheme, ) for the project achievements to be properly operated after project finished;

## **Recommendations for future project implementation**

1. For replication of the project mode, design a more active scheme on better involve those important stakeholders into project management from the very beginning;
2. It is strongly recommended to allocate extra resources to develop a tailored phase out planning for the project and try to lobby financial resources for the implementation of such a plan;
3. Promote identity establishment and ownership of OPA members[[8]](#footnote-8) with guidance and support from county CAs on regulating the standardized procedure on recruiting members including charging of membership fees. This could either support the operation of OPAs or raise the ownership of old people on OPA as well as promote their active participation in OPA activities and willingness on monitoring the operation of OPAs;

Table 8: Standards on joining OPA

|  |  |
| --- | --- |
| **Village** | **Standard** |
| Lisi | Voluntary joining for age above 60, members to have membership card |
| Xihe | Everyone above 60 |
| Daliushu | Old people who actively participate OPA activities and pay membership fee |
| Dongluo | Above 60 and with written applications |
| Shicun | Everyone who pay membership fee |

*Source: field investigation of the evaluation*

1. Promote the OPAs into better organized and more formal existence in the village through identity building, more frequent and active participation into social affairs, more concrete activities in their villages, etc. and more coordination from county CAs with township government and village committees on providing necessary conditions for the operation of OPAs;
2. Promote (by trainings) the capacities of OPAs on seeking for internal and external resources, and on preparing paper materials concerns their needs, plans, development planning and expectations.
3. The society doesn’t have clear understanding on the fact that people above 60 has became one major labour force in rural livelihood and production and therefore, future projects should try to enlarge the functions of OPAs in community development related affairs including development planning, marketing of local products and production materials as well as lift the social image of OPAs
4. Develop capacity buildings planning / scheme for OPA leadership and OPA operation. Lobby outside (including county level) resources on providing more trainings / technical support for OPAs (general leadership strengthening, finding outside resources, designing activities, preparing paper materials including plans / planning, etc.
5. Design motivation scheme for performance of OPA leaders which will require more trainings, technical support and monitoring on financial management to the OPAs from county level. On the other hand, it has to be noticed that any miss-operation of financial resource (e.g. the seed money) and related interests may have strong negative impact on existence of OPAs and hence affect sustainability of the project mode;
6. Promote OPA and its members on communication with and visiting to outside to increase their knowledge and understandings on social development[[9]](#footnote-9) not only focusing on OPA organization but also marketing, production and community development;
7. For any operation of training activities with OPAs and OPA members in the future, training contents should be simplified and designed with strong old people orientation allowing more frequent of repeating, explanations, visualization, demonstrations, the trainers should have received trainings on how to deal with adults and old people;
8. Community volunteer on providing services to the disadvantaged old people.

* Provide trainings to volunteers and mobilize local resources on establishing long term technical support (mainly in relate with social work) to volunteers at community level;
* Design flexible management and motivation scheme to activate more social groups (school students, left-behind women, etc.) on being volunteers at the villages;
* Locate resources (e.g. carefully adjust management scheme of the seed money of this project) to OPAs to allow some active motivations to volunteers including visiting to outside village, trainings in outside institutes / organizations, inviting outside social workers / organizations to provide technical support in the villages, etc.

1. Sustainability of project operation

* Train OPAs on preparing practical plans for phasing out activities;
* Prepare plans (for different levels including county, township and village) on monitoring and tracking effective use of project investments project completion;
* Consider a feasible plan on social impact assessment while developing logical framework of similar project;
* Design concrete motivation mechanism for village doctors and more practically, find local resources on training some key community based social workers on health care education;
* Expand functions of OPAs including establishing old people oriented health care school and farming school as well as exploring the possibilities of encouraging OPAs to involve in marketing activities;
* Involve more public and mass media to report OPA operations and organize more contact with outside agencies including local government as well as more publicizing of project results;
* Design scheme on promoting local authorities’ (especially those have strong linkage with old people) awareness on helping old people as well as techniques on working with / for old people.

# **CONCLUSIONS**

In general, implementation of the project is successful on realizing its **objectives** on strengthening the capacity of older people-led associations and local authorities to reduce poverty and improve health care provision in 16 villages of Shaanxi Province, and enhancing partner capacity to replicate. The project was designed to strengthen community-based organisations of older people, called Older People’s Associations (OPAs), and to expand the support they receive from local authorities. The project is also successful on making a feasible and applicable model on approaching its overall goal on that “OPAs in China and throughout Asia generate mutual support among older people, reducing their isolation and vulnerability by creating a social support network”.

Specifically, the project has addressed the challenges of older people in rural China[[10]](#footnote-10) through its implementation on the following focuses:

* Income constraints: Working with local authorities, the project will use the village Older People’s Associations as a channel for providing livelihoods assets, related training, and information about government programmes and services designed to boost rural incomes.
* Health care: The project will work with local doctors and health authorities to provide health check-ups for older people, increase awareness about self-care, and provide information about government health services.
* OPA capacity: The project will strengthen the operations and leadership of Older People’s Associations to make them an important actor in village development.
* Replication by local and national authorities: The project approach will be documented and implemented in one new county to demonstrate its replicability and shared with national policy makers and other provinces.

**Sustainability**

Efficiency

**Relevance**

Effectiveness

Impact

Output

Objective

Goal

Input

Figure 4 Logic on creating the conclusion of the evaluation

Following the general logical structure of project evaluation as shown in Figure 4, the COHD team analyzed and integrated all the findings and results described in previous chapters by applying five main evaluation criteria. The criteria and the related key questions are:

1. Relevance: Was the project relevant in addressing the identified needs?
2. Efficiency: Did the input of resources achieve the desired outputs in an efficient way?
3. Effectiveness: Did the project achieve its objectives and meet the indicators in the logframe?
4. Impact: Was there a wider outcome that to affect a larger group of targets then the direct beneficiaries as designed?
5. Sustainability: In how far is it likely that the flow of benefits to the targeted groups and their surroundings is likely to continue?

## **5.1 Relevance of the project**

In the relevance analysis regarding the original design of the project the COHD team considered the aspects including: beneficiary identification, needs / problem analysis, stakeholder involvement, conformability with governmental policies and practices and, the overall intervention design.

Through the evaluation, the COHD team would conclude that:

* Activities and components of the project are consistent for piloting the practical mode on dealing with aging issue in rural area.
* The project has successfully defined the actual constraints and difficulties that older people in less developed rural areas are facing.
* The project mobilized necessary stakeholders on involving in its implementation including county level aging committee[[11]](#footnote-11), local health authorities and village committees. However, the project not very successful on involving other powerful local resources including poverty alleviation and development office, agricultural production related authorities, local enterprises and market.
* The project design perfectly fit into the current trend on aging in China, especially in rural area, it is the issue that increasingly being noticed by the entire society as well as the central government. Yet, practical experience on solving aging issue in China is in short hand and the project provided a feasible demonstration.

## **5.2 Efficiency of project implementation**

To assess how good and efficient that project activities transformed the available resources into results in terms of quantity, quality and timeliness, the COHD team paid attention on the implementing aspects including: regular project management, general cost, local partner contribution, technical and managerial support and, any unplanned results.

Through the evaluation, the COHD team would conclude that:

* Taking into account the coverage of the project on rural livelihood and the traditional vulnerability of older people in development, and giving the fact on highly lack of resource and experience, the county level aging committees[[12]](#footnote-12) has managed the project implementation in an efficient and correct way.
* For at the village level, it was clear to the evaluation team that all the allocated project money and concrete resources was under strict and good management. So far, the direct investment[[13]](#footnote-13) in the project gave good value-for-money in term of increasing in income of the direct beneficiaries (the 1102[[14]](#footnote-14) poor older farmers). The investment into OPAs daily management was very efficient as all the investigated OPAs reported that numerous activities were able to be organized and supported the positive social image of OPAs. Other activities including free physical checkups also received good social impact.
* Local aging committees has no financial capacities to make direct investment into the project, however, all the 3 investigated county level aging committees input great person/times of staff into management and implementation. On the other hand, resources from other local authorities remain relatively limited.
* Technical and managerial support to both county level aging committees and the village OPAs (including OPA leadership and village doctors) on their involvement in project implementation functioned well and was efficient.
* The implementation of the project did not lead to unplanned outcomes as result of unplanned activities, but there were unplanned effects (e.g. decrease of abusing older people and increase of community harmonization).

## **5.3 Effectiveness of achievements**

The extent to which the project’s results were used to achieve the specific objective was analysed by focussing on whether the project achieved its objectives and meet the indicators in the logframe.

Through the evaluation, the COHD team would conclude that:

* The project was highly effective in reaching the targeted group and delivered services / supports to improve their livelihood and social / domestic status.
* The project has clearly contributed to an increase in production and profitable income generating activities conducted by older people in project communities.
* The project logframe has lacked of sufficient indicators on change of social / domestic status of older people.

## **5.4 Impact of the project**

The extent to which the delivered benefits of the project had a larger overall effect on a larger number of target groups than the direct beneficiaries has been assessed by examining the aspects including: contribution to the general objective, institutional capability buildings, community development and gender equity.

Through the evaluation, the COHD team would conclude that:

* The project had a positive impact on its wider surroundings by contributing to the older people’s participation in the socio-economic development as well as household income in the project communities.
* Through its training programme the project had a positive impact on the institutional capability of OPAs (including leadership and village doctors) and the county level aging committees.
* Improved communication between older people (in most cases as OPA) and local authorities including village committees, township government, county aging committee and other bureaus, county government. Simultaneously, the communications also enhanced the social images and appearances of OPAs.
* According to all the interviewed village leaders / party secretaries, the effective OPAs in their villages are very helpful on assisting administration and harmonization of the project villages as well as social development.
* As the project greatly improved the social status and livelihood of older people, the positive gender-related impact of the project remain limited as observed in the investigated villages.

## **5.5 Sustainability**

The extent to which the positive outcomes of the project are likely to be maintained after the project ends have been examined by focussing on aspects including: ownership of achievements, institutional capacity, socio-economic benefits, organizational innovation, and policy influence.

Through the evaluation, the COHD team would conclude that:

* The achievements are fully owned by the local partners of the project and therefore are likely to be maintained and have a potential to be replicated if financial interventions[[15]](#footnote-15) are made available.
* The increase in institutional capability through training of county aging committees and village OPAs is likely to be maintained. Further development is also possible if continuous supports on operation are designed before project closure and to be organized in afterwards.
* The positive outcome of the project interventions at beneficiary household level are likely to be maintained
* With the strong ownership that older people have on OPAs, the organizational innovation that the project helped to bring to rural older people is likely to be maintained. Anyway, with proper assistance and support in the future, the OPAs and its members can play much larger social roles in their community development.
* It is expected that implementation of the project could have positive influences on policy making on older people especially in less developed rural areas in China. However, the project is already a pioneer in western part of the country and, CNCA has already made in the 12th 5 year development plan on aging that 85% of rural communities will establish their own OPAs; hopefully the experiences and lessons learnt the project can be further applied.

# **Appendices**

## **Terms of reference**

|  |
| --- |
| **SUMMARY INFORMATION** |
| * Name of project being evaluated: Promoting Older People’s Participation in Development in Rural China * Implementing agency: HelpAge International * Partner: Shaanxi Provincial Committee on Ageing * Project funding sources: European Union, Kadoorie Charitable Foundation * HelpAge Reference: CHI015 * EU Reference: DCI-NSAPVD/2008/149-087 * Project duration: 15 February 2009 to 31 May 2012 |
| **BACKGROUND** |
| HelpAge International and the Shaanxi Provincial Committee on Ageing are collaborating on a three-year project (funded by the European Union) in Shaanxi Province to reduce poverty and improve health in rural China from 2009 to 2012.  The objective is to strengthen the capacity of older people-led associations and local authorities to reduce poverty and improve health care provision in 16 villages of Shaanxi Province, and enhance partner capacity to replicate. (Later, the number of villages was increased to 30.) The project strengthens community-based organisations of older people, called Older People’s Associations (OPAs), and aims to expand the support they receive from local authorities. OPAs in China and throughout Asia generate mutual support among older people, reducing their isolation and vulnerability by creating a social support network.  The project addresses the challenges of older people in several ways:   * Income constraints: Working with local authorities, the project will use the village Older People’s Associations as a channel for providing livelihoods assets, related training, and information about government programmes and services designed to boost rural incomes. * Health care: The project will work with local doctors and health authorities to provide health check-ups for older people, increase awareness about self-care, and provide information about government health services. * OPA capacity: The project will strengthen the operations and leadership of Older People’s Associations to make them an important actor in village development. * Replication by local and national authorities: The project approach will be documented and implemented in one new county to demonstrate its replicability and shared with national policy makers and other provinces.   The project has conducted some participatory assessments among OPAs and other stakeholders, and now intends to contract an external consultant within China to carry out a final evaluation. In the proposal, project final evaluation is described as below: “Final evaluation: At the end of year 3, a locally recruited consultant will conduct a final external impact evaluation. The consultant’s terms of reference will include visiting a representative sample of sites; discussing outcomes with older people, OPAs, and Local and National Authorities; reviewing progress against project indicators; and producing a report focusing on impact and outcomes.” |
| **OBJECTIVES OF THE EVALUATION** |
| 1. To review the achievements of the project against its objectives and indicators 2. To assess changes and impact that the project brought to older people and their communities 3. To assess changes that the project brought to local authorities’ support for older people and their communities 4. To assess the project replication strategy and sustainability 5. To assess the effectiveness and efficiency of project implementation 6. To identify project lessons and come up with suggestions for future work |

|  |
| --- |
| **SCOPE AND FOCUS** |
| **Major issues and questions the evaluation team should address / Criteria for the Evaluation**  **Impact:** What has been the impact of the project at different levels, for example:   * direct project beneficiaries * indirect beneficiaries and the broader local community * implementing and partner agencies local authorities * wider development context – any influence beyond the target area * How has the project impacted men and women differently?   **Relevance**: Was the project relevant in addressing the identified needs?  **Equity**:   * How has the project impacted men and women differently? Disaggregate date by age and sex. * Has the project been equitable in its support of the poor and disadvantaged?   **Effectiveness:**   * Did the project achieve its objectives? * Did the project meet the indicators in the logframe? * Did the input of resources achieve the desired outputs in an efficient way?   **Sustainability:**   * What plans are there for the future of the project activities after funding ceases? * How replicable are project activities? * To what extent have local authorities taken on board the project’s approach?   **Accountability:**   * To what extent did beneficiaries participate in the project? * To what extent did has their feedback been solicited and integrated?   **Assessment of HelpAge International’s role:** How effective and important was HelpAge’s role as a partner in such areas as project coordination and liaison with the partner, technical expertise, and facilitation of linkages with other organisations inside and outside the HelpAge movement?  **Lessons Learned and Recommendations:** What lessons are there for planning, implementing or evaluating the project? Capture achievements as well as challenges and gaps. Where possible, combine them with action-oriented and specific recommendations. |

|  |
| --- |
| **EVALUATION PROCESS AND METHODOLOGY** |
| The key tasks in the process are:  1. Design: to design a detailed final evaluation workplan and strategy according to this TOR in consultation with the project team.  2. Desk review: to review project materials including narrative and assessment reports to catch overall project implementation.  3. Field assessment: to conduct field activities and discussions in Shaanxi  4. Reporting: to analyze data and information collected and write up a final evaluation report according to outline agreed. The report will be bilingual and the consultant agrees to review and approve any final adjustments to the edited/translated version by HelpAge.  The consultant will propose a more detailed methodology that takes into account the following expected elements and involves beneficiaries and stakeholders in a participatory way:   * A limited sample survey of beneficiaries in the target villages * Semi-structured interviews with a sample of beneficiaries * Focus group discussions with older people * Focus group discussions and semi-structured interviews with OPA leaders * Semi-structured interviews with local government (ageing, livelihoods, and health) * Discussions with the project team and partner * Collection of secondary data   The consultant will propose number of locations, tentatively about 9 villages in 3 counties: at least half the target villages of Hua and Fengxiang Counties and a sample of villages from at least one replication county (from among Qishan, Chencang and Jingyang Counties). All 5 counties are located in the Weinan, Xianyang and Baoji city areas. Locations will be further refined after a consultant is selected. Allow about half a day for travel to each county. If the consultant is based in Beijing, he/she will be asked to visit the China National Committee Ageing, but otherwise no special trip to Beijing for that purpose should be proposed. |
| **TIMEFRAME and DELIVERABLES** |
| The consultant will produce a draft report in English no later than 21 April 2012 and a final report in both English and Chinese by 4 May 2012 (electronic copies). The main report should be 25-30 pages (Arial font 11, 2 cm margins), excluding any appendices providing additional detail. The final report may be edited in English by HelpAge and the consultant agrees to review and confirm that the final edited version is correct. The tentative structure of the final evaluation report is as follows, though the consultant may suggest changes in the evaluation proposal:  1. Executive summary (2-3 pages)  2. Background (maximum 2 pages with any details needed in appendices)  3. Summary of Methodology (maximum 1 page, with any details in appendices)  4. Main findings   * Impact * Relevance * Equity * Effectiveness * Sustainability * Accountability * HelpAge International’s role   5. Lessons Learned and Recommendations  6. Overall Conclusions (1-2 pages)  Possible list of appendices   1. Detailed tables or other data/findings 2. Case studies with photo (consultant to propose number) 3. Methodology including questionnaires/interview questions 4. Field timetable and list of individuals met (not groups) 5. Terms of reference 6. Other appendices if needed   No payments can be made after mid May 2012. A tentative schedule is as follows, but the consultant should propose a revised version keeping the time constraints in mind:   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Actions** | **Mar**  **Wk2** | **Mar Wk 3** | **Mar Wk 4** | **Mar Wk 5** | **April**  **Wk1** | **April**  **Wk2** | **April**  **Wk3** | **April Wk4** | **May Wk1** | | Closing date for proposals (11 March 2012) | **\*** |  |  |  |  |  |  |  |  | | Revise proposal and contract consultant |  | **\*** |  |  |  |  |  |  |  | | Consultant refines evaluation plan |  |  | **\*** |  |  |  |  |  |  | | Finalise all materials and tools |  |  | **\*** | **\*** |  |  |  |  |  | | Field work |  |  |  |  | **\*** | **\*** |  |  |  | | Analysis and reporting |  |  |  |  |  | **\*** | **\*** |  |  | | First draft report (21 April) |  |  |  |  |  |  | **\*** |  |  | | Comments by HelpAge |  |  |  |  |  |  |  | **\*** |  | | Final report and translation (4 May) |  |  |  |  |  |  |  |  | **\*** | |
| **QUALIFICATIONS OF CONSULTANT** |
| Essential   * University degree in a relevant field * Demonstrable experience conducting similar project evaluations * An understanding of community-based development activities * Experience facilitating focus group discussions * Interview experience and a clear, respectful style in communicating with people * Strong writing skills in English and Chinese with a clear, simple writing style * Strong quantitative and computer skills * Analytical and summarising skills   Desirable   * Experience in designing quantitative assessments * Experience working with communities and the rural poor * An understanding of ageing issues or similar vulnerable groups in China * Experience in producing Excel charts or creative presentation * Experience with international NGO projects and participatory approaches |
| **EXPRESSIONS OF INTEREST** |
| Interested consultants are invited to submit an expression of interest for carrying out this evaluation by **midnight Sunday, 11 March 2012** to [spcaproject@gmail.com](mailto:spcaproject@gmail.com). The short expression of interest (3 pages) should include (1) proposed methodology including sample of villages etc., (2) proposed workplan and (3) a brief budget summarising especially costs for travel, accommodation, food, supplies and fees. The CV of the consultant(s) and contact information for 2 professional references should be attached (not included in 3 pages).    Final negotiated fees will be specified in the consultancy contract. However, an indicative amount available is RMB 25,000 to RMB 35,000 for the contract depending on qualifications, including consultant travel costs and fees. Payment will be based on lump-sum for the entire assignment, with no additional reimbursement for any expenses not included in the proposal. Therefore, the proposal budget should include all costs for the consultant to conduct the study, including airfares, hotel/food costs, local transport, professional fees, translations, photocopies, any report writing costs, etc. except as otherwise specified. HelpAge will make meeting arrangements with villages and local authorities. HelpAge will pay for car transport for the field work. A project team member will accompany the consultant to support local arrangements but will not interfere with the consultant’s work. HelpAge will pay for accommodation/food costs of its project staff, but not pay separately for the costs of consultant, who will meet his/her own direct expenses. The consultant is expected to provide his/her own laptop and other needed equipment and supplies.  Selection of the consultant will be by a project committee and based on the experience of the consultant, the quality and relevance of the proposal, and the proposed budget. Selection will be primarily on ability to successfully complete the work rather than necessarily the lowest cost. |

|  |
| --- |
| **QUALIFICATIONS OF CONSULTANT** |
| Essential   * University degree in a relevant field * Demonstrable experience conducting similar project evaluations * An understanding of community-based development activities * Experience facilitating focus group discussions * Interview experience and a clear, respectful style in communicating with people * Strong writing skills in English and Chinese with a clear, simple writing style * Strong quantitative and computer skills * Analytical and summarising skills   Desirable   * Experience in designing quantitative assessments * Experience working with communities and the rural poor * An understanding of ageing issues or similar vulnerable groups in China * Experience in producing Excel charts or creative presentation * Experience with international NGO projects and participatory approaches |
| **EXPRESSIONS OF INTEREST** |
| Interested consultants are invited to submit an expression of interest for carrying out this evaluation by **midnight Sunday, 11 March 2012** to [spcaproject@gmail.com](mailto:spcaproject@gmail.com). The short expression of interest (3 pages) should include (1) proposed methodology including sample of villages etc., (2) proposed workplan and (3) a brief budget summarising especially costs for travel, accommodation, food, supplies and fees. The CV of the consultant(s) and contact information for 2 professional references should be attached (not included in 3 pages).    Final negotiated fees will be specified in the consultancy contract. However, an indicative amount available is RMB 25,000 to RMB 35,000 for the contract depending on qualifications, including consultant travel costs and fees. Payment will be based on lump-sum for the entire assignment, with no additional reimbursement for any expenses not included in the proposal. Therefore, the proposal budget should include all costs for the consultant to conduct the study, including airfares, hotel/food costs, local transport, professional fees, translations, photocopies, any report writing costs, etc. except as otherwise specified. HelpAge will make meeting arrangements with villages and local authorities. HelpAge will pay for car transport for the field work. A project team member will accompany the consultant to support local arrangements but will not interfere with the consultant’s work. HelpAge will pay for accommodation/food costs of its project staff, but not pay separately for the costs of consultant, who will meet his/her own direct expenses. The consultant is expected to provide his/her own laptop and other needed equipment and supplies.  Selection of the consultant will be by a project committee and based on the experience of the consultant, the quality and relevance of the proposal, and the proposed budget. Selection will be primarily on ability to successfully complete the work rather than necessarily the lowest cost. |

## **Itinerary**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Time | **Activities and Contents** | **Location** | **Remarks** |
| April 13  (Friday) |  | 1. Preparation of the evaluation: 2. reviewing existing project documents and reports 3. visiting China National Committee Ageing 4. developing questionnaire for individual interview 5. developing checklists with provincial, county, township and village levels | CAU in Beijing | Organized by consultants in Beijing |
| April 14  (Saturday) |  |
| April 15  (Sunday) |  | 1. preparing PRA tools and needed materials | Beijing-Xi’an |  |
| April 16  (Monday) | 8:10 | 1. Traveling from Beijing to Xi’an (early morning) | Xi’an |  |
| 9:10-11:30 | 1. Visiting / liaison Provincial Committee on Ageing (morning session) | Xi’an |  |
| 13:00-15:30 | 1. Traveling from Xi’an to Fengxiang in the afternoon | Xi’an-Fengxiang |  |
| 16:00-18:10 | 1. Visiting county level agencies of Fengxiang:  * Public health bureau (TBD) * Poverty alleviation and development office * County ageing committee  1. Civil affair bureau | Fengxiang county | Stay overnight in Hua county |
| April 17  (Tuesday) | 9:00-11:50 | 1. Investigation at Xihe | Fengxiang county | * For testing methods, checklist, questionnaires * Stay overnight in Fengxiang county |
|  | 14:30-16:30 | 1. Visiting township government |
|  | 15:00-18:30 | 1. Visit to Niuboyu |
| April 18  (Wednesday) | 9:00-12:30 | 1. Investigation at Daliushu | Fengxiang county |  |
| 13:30-14:20 | 1. Travel from Fengxiang to Chencang | Fengxiang-Chencang |  |
| 14:30-18:30 | 1. Visiting county level agencies of Chencang (afternoon):  * Public health bureau (TBD) * Poverty alleviation and development office * County ageing committee  1. Civil affair bureau | Chencang county | Stay overnight in Chencang |
| April 19  (Thursday) | 9:30-11:30 | 1. Investigation at Hulugou | Chencang county | Team split, each group cover 1 village |
| 9:50-12:30 | 1. Investigation at Xian Feng |
| 13:30-17:30 | 1. Travel from Chencang to Hua County | Chencang-Hua County |  |
| April 20  (Friday) | 8:30-12:10 | 1. Visiting county level agencies of Chencang (morning):  * Public health bureau (TBD) * Poverty alleviation and development office * County ageing committee  1. Civil affair bureau | Hua County | Stay overnight in Hua County |
| 13:30-18:30 | 1. Investigation at Dongluo and Shi Village | Team split, each group cover 1 village  Stay overnight in Hua County |
| April 21  (Saturday) | 9:30-12:00 | 1. Investigation at Li Si | Hua County |  |
| 13:30-16:30 | 1. Data processing and documentation |  |
| 16:30-18:20 | 1. Travel from Hua County to Xi’an | Hua County- Xi’an | Stay overnight in Xi’an |
| April 22  (Sunday) |  | 1. Data processing and documentation | Xi’an |  |
| April 23  (Monday) |  | 1. Data processing and documentation | Xi’an |  |
| 16:00-17:20 | 1. Wrap-up meeting with Provincial Committee on Ageing and the HelpAge International staff | Xi’an |  |
|  | 19:00-8:30(April 24) | 1. Travel back to Beijing (Evening) | Xi’an -Beijing |  |
| April 24-  (Tuesday- |  | 1. Start report writing | Beijing |  |

## **List of people met**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Participants of the county-level officials interviews | | | | |
| Name | Gender | Age | Identity | Meeting place |
| Wang Xun | Female |  | Officer of China National Ageing Committee | Beijing |
| Ai Baidong | Male | 60 | Officer of Shan Xi Province Ageing Committee | Xi’an |
| Shi Zhongrong | Male |  | Officer of Shan Xi Province Ageing Committee | Xi’an |
| Niu Wenhua | Male |  | Officer of Shan Xi Province Ageing Committee | Xi’an |
| Liu Wei | Male |  | Officer of Shan Xi Province Ageing Committee | Xi’an |
| Deng Xueyi | Male |  | Project Manager | Xi’an |
| Zheng Jing | Female |  | Project Finance Officer | Xi’an |
| Li Ke | Female |  | Project Assistant | Xi’an |
| Tan Rong | Female |  | Project Support Officer | Xi’an |
| Yang Yongmei | Female |  | Officer of County Ageing Committee | FX |
| Li Tianliang | Male |  | Officer of County Ageing Committee | FX |
| Li Qinfa | Male |  | Officer of County Civil affair bureau | FX |
| Jiang Jianbin | Male |  | Officer of County Agriculture Bureau | FX |
| Zhai Huiyun | Female |  | Officer of County Poverty Alleviation and Development Office | FX |
| Zhao Junqi | Male |  | Officer of County Public health bureau | FX |
| Zhang Honglian | Female | 37 | Officer of County Civil affair bureau | FX |
| Wang Chuangcheng | Male | 50 | Officer of Xian Gong Town | CC |
| Ma Zhixian | Male |  | Officer of County Agriculture Bureau | CC |
| Zhang Wei | Male |  | Officer of County Poverty Alleviation and Development Office | CC |
| Yan Fengqin | Female | 46 | Officer of County Public health bureau | CC |
| Zhang Xin | Female |  | Officer of County Ageing Committee | CC |
| Shi Naixia | Female |  | Officer of County Ageing Committee | CC |
| Ding Yun | Female | 33 | Project Copy Officials | CC |
| Wang Rongke | Male | 48 | Officer of Xian Gong Town | CC |
| Zhang Zhengping | Male |  | Officer of County CDC | HX |
| Fan Zengjun | Male |  | Officer of County Public Health Bureau | HX |
| Wang Yuqing | Female |  | Officer of County Public Health Bureau | HX |
| Wei Lin | Female |  | Officer of County Public Health Bureau | HX |
| Chen Gang | Male |  | Officer of Civil Affair Bureau | HX |
| Lei Fakui | Male |  | Officer of County Ageing Committee | HX |
| Pan Yuxian | Female |  | Officer of County Agriculture Bureau | HX |
| Guo Zhongmin | Male |  | Officer of County Agricultural Development Office | HX |
| Xue Xinghu | Male |  | Project Assistant for Health Care In HX | HX |
| Fan Zuoyi | Male |  | Project Support Officer | HX |
| Li Mixia | Female |  | Officer of County Ageing Committee | HX |
| Wang Zhongwu | Male |  | Officer of County Civil affair bureau | HX |
| Total: 36 (Female: 15,Male: 21); Seven meetings | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Participants of the village-level interviews** | | | | | |
| No. | Name | Gender | Age | Identity | Village |
| 1 | Shao Gengyan | Female | 65 | Member of OPA | FX-Xihe |
| 2 | Meng Jiuling | Female | 64 | Member of OPA | FX-Xihe |
| 3 | Liang Xuehong | Female | 52 | Member of OPA | FX-Xihe |
| 4 | Liang Caixia | Female | 68 | Member of OPA | FX-Xihe |
| 5 | Xie Sixiu | Female | 61 | Member of OPA | FX-Xihe |
| 6 | Li Airan | Male | 72 | Regular Farmers | FX-Xihe |
| 7 | Du Ruxin | Male | 74 | Member of OPA | FX-Xihe |
| 8 | Xu Shengcai | Male | 69 | Member of OPA | FX-Xihe |
| 9 | Li Du | Male | 72 | Member of OPA | FX-Xihe |
| 10 | Li Anke | Male | 75 | Member of OPA | FX-Xihe |
| 11 | Yang Cunji | Male | 70 | Member of OPA | FX-Xihe |
| 12 | Yang Feiying | Male | 75 | Member of OPA | FX-Xihe |
| 13 | Li Zhilin | Male | 73 | Member of OPA | FX-Xihe |
| 14 | Xu Yuanming | Male | 74 | Member of OPA | FX-Xihe |
| 15 | Li Zhengbing | Male | 67 | Member of OPA | FX-Xihe |
| 16 | Guo Zhili | Male | 67 | Member of OPA | FX-Xihe |
| 17 | Xu Wentang | Male | 67 | Member of OPA | FX-Xihe |
| 18 | Sun Hong | Male | 70 | Member of OPA | FX-Fanjiazhai |
| 19 | Li Yunyan | Female | 63 | Member of OPA | FX-Fanjiazhai |
| 20 | Cheng Hongli | Female | 50 | Leader of OPA | FX-Fanjiazhai |
| 21 | Fan Baoliang | Male | 58 | Leader of OPA | FX-Fanjiazhai |
| 22 | Wei Fan | Male | 37 | Deputy secretary of the Fan Jiazhai | FX-Fanjiazhai |
| 23 | Liu Yun | Female | 34 | Civil affair officer of Fan Jiazhai | FX-Fanjiazhai |
| 24 | Du Mingke | Male | 63 | Member of OPA | FX-Niuboyu |
| 25 | Wang Zhengcai | Male | 76 | Member of OPA | FX-Niuboyu |
| 26 | Xu Zhi | Male | 65 | Member of OPA | FX-Niuboyu |
| 27 | Mu Yao | Male | 82 | Member of OPA | FX-Niuboyu |
| 28 | Wang Laigui | Male | 71 | Member of OPA | FX-Niuboyu |
| 29 | Chen Changyou | Male | 65 | Member of OPA | FX-Niuboyu |
| 30 | Du Jianye | Male | 67 | Member of OPA | FX-Niuboyu |
| 31 | Du Jianyong | Male | 72 | Member of OPA | FX-Niuboyu |
| 32 | Yang Xiuling | Male | 72 | Member of OPA | FX-Niuboyu |
| 33 | Wang Xuemei | Male | 64 | Member of OPA | FX-Niuboyu |
| 34 | Du Shunyuan | Male | 63 | Member of OPA | FX-Niuboyu |
| 35 | Du Zhong | Male | 75 | Member of OPA | FX-Niuboyu |
| 36 | Tang Yangui | Male | 72 | Member of OPA | FX-Niuboyu |
| 37 | Yan Shuantang | Male | 65 | Member of OPA | FX-Niuboyu |
| 38 | Li Hua | Male | 74 | Member of OPA | FX-Niuboyu |
| 39 | Li Zhirong | Male | 75 | Member of OPA | FX-Niuboyu |
| 40 | Du Tiansheng | Male | 72 | Member of OPA | FX-Niuboyu |
| 41 | Zhang Congji | Male | 64 | Member of OPA | FX-Niuboyu |
| 42 | Wang Lingxiu | Female | 70 | Member of OPA | FX-Niuboyu |
| 43 | Du Yutang | Female | 65 | Member of OPA | FX-Niuboyu |
| 44 | Yang Xian | Female | 63 | Member of OPA | FX-Niuboyu |
| 45 | Yin Gailing | Female | 61 | Member of OPA | FX-Niuboyu |
| 46 | Li Fengmei | Female | 60 | Member of OPA | FX-Niuboyu |
| 47 | Zhang Qiuxia | Female | 67 | Member of OPA | FX-Niuboyu |
| 48 | Qiao Yuhua | Female | 78 | Member of OPA | FX-Niuboyu |
| 49 | Liu Xiuxiang | Female | 70 | Member of OPA | FX-Niuboyu |
| 50 | Li Guitang | Female | 63 | Member of OPA | FX-Niuboyu |
| 51 | Zhang Yingyi | Male | 83 | Member of OPA | FX-Daliushu |
| 52 | Bai Zhongtang | Male | 70 | Member of OPA | FX-Daliushu |
| 53 | Liu Yanbing | Male | 74 | Member of OPA | FX-Daliushu |
| 54 | Shi Zhouyi | Male | 67 | Member of OPA | FX-Daliushu |
| 55 | Li Zhong | Male | 78 | Member of OPA | FX-Daliushu |
| 56 | Shi Mingxiang | Male | 70 | Member of OPA | FX-Daliushu |
| 57 | Lou Zhigang | Male | 73 | Member of OPA | FX-Daliushu |
| 58 | Yan Yutang | Male | 68 | Member of OPA | FX-Daliushu |
| 59 | Lou Zhigong | Male | 73 | Member of OPA | FX-Daliushu |
| 60 | Yang Huifang | Male | 79 | Member of OPA | FX-Daliushu |
| 61 | Zhang Qiao | Female | 67 | Member of OPA | FX-Daliushu |
| 62 | Jia Zhilian | Female | 76 | Member of OPA | FX-Daliushu |
| 63 | Feng Xiuying | Female | 77 | Member of OPA | FX-Daliushu |
| 64 | Li Qiuying | Female | 66 | Member of OPA | FX-Daliushu |
| 65 | Jiao Linggeng | Female | 64 | Member of OPA | FX-Daliushu |
| 66 | Dong Yuzhen | Female | 77 | Member of OPA | FX-Daliushu |
| 67 | Zhao Qiufang | Female | 80 | Member of OPA | FX-Daliushu |
| 68 | He Guaiyan | Female | 69 | Member of OPA | FX-Daliushu |
| 69 | Zhang Fenglan | Female | 69 | Leader of OPA | FX-Daliushu |
| 70 | Gao Zhifa | Male | 67 | Member of OPA | FX-Daliushu |
| 71 | Lin Shike | Female | 73 | Member of OPA | CC-Xianfeng |
| 72 | Lin Shiquan | Female | 78 | Member of OPA | CC-Xianfeng |
| 73 | Dong Xiuqin | Female | 68 | Member of OPA | CC-Xianfeng |
| 74 | Zhai Range | Female | 64 | Member of OPA | CC-Xianfeng |
| 75 | Lin Yuanchang | Male | 64 | Member of OPA | CC-Xianfeng |
| 76 | Lin Gui | Male | 83 | Member of OPA | CC-Xianfeng |
| 77 | Yang Xiuqin | Female | 67 | Member of OPA | CC-Xianfeng |
| 78 | Zheng Qiaoqiao | Female | 63 | Member of OPA | CC-Xianfeng |
| 79 | Zhai Shuane | Female | 69 | Member of OPA | CC-Xianfeng |
| 80 | Kong Xiangxia | Female | 68 | Member of OPA | CC-Xianfeng |
| 81 | Lin Xinshan | Male | 56 | Member of OPA | CC-Xianfeng |
| 82 | Lin Shijie | Male | 68 | Member of OPA | CC-Xianfeng |
| 83 | Lin Yuanying | Male | 81 | Member of OPA | CC-Xianfeng |
| 84 | Lin Qi | Male | 66 | Village Secretary | CC-Xianfeng |
| 85 | Lin Pingshan | Male | 52 | Leader of OPA | CC-Xianfeng |
| 86 | Lin Shixiang | Male | 63 | Member of OPA | CC-Xianfeng |
| 87 | Tan qiue | Female | 68 | Member of OPA | CC-Hulugou |
| 88 | Wang Yuzhen | Female | 75 | Member of OPA | CC-Hulugou |
| 89 | Dong Lunjie | Female | 67 | Member of OPA | CC-Hulugou |
| 90 | Li Shikui | Male | 66 | Member of OPA | CC-Hulugou |
| 91 | Tan Lianke | Male | 60 | Member of OPA | CC-Hulugou |
| 92 | Li Yiqing | Male | 74 | Member of OPA | CC-Hulugou |
| 93 | Tan Yuanke | Male | 68 | Member of OPA | CC-Hulugou |
| 94 | Li Xiangrui | Male | 76 | Member of OPA | CC-Hulugou |
| 95 | Li Rangcai | Male | 63 | Member of OPA | CC-Hulugou |
| 96 | Guo Fa | Male | 80 | Member of OPA | CC-Hulugou |
| 97 | Zhu Xinshuan | Male | 62 | Member of OPA | CC-Hulugou |
| 98 | Guo Licheng | Male | 60 | Member of OPA | CC-Hulugou |
| 99 | Li Lianke | Female | 76 | Member of OPA | CC-Hulugou |
| 100 | Li Sugeng | Female | 62 | Member of OPA | CC-Hulugou |
| 101 | Xi Xiufang | Female | 69 | Member of OPA | CC-Hulugou |
| 102 | Li Xinquan | Male | 40 | Member of OPA | CC-Hulugou |
| 103 | Guo Jinfang | Male | 65 | Member of OPA | CC-Hulugou |
| 104 | Ji Sangang | Male | 66 | Member of OPA | HX-Dongluo |
| 105 | Li Baimai | Male | 55 | Civil affair officer of Lianhua | HX-Dongluo |
| 106 | Li Jucao | Female | 76 | Leader of OPA | HX-Dongluo |
| 107 | Ji Zhengxiao | Male | 64 | Accountant of OPA | HX-Dongluo |
| 108 | Gu Hongying | Female | 46 | Leader of OPA | HX-Dongluo |
| 109 | Gua Huachuan | Male | 57 | Village Secretary | HX-Dongluo |
| 110 | Zhang Qingshe | Male | 46 | Village Secretary | HX-Dongluo |
| 111 | Guo Xiang | Female | 33 | Commission for Discipline Inspection of Lianhua | HX-Dongluo |
| 112 | Wang Bin | Male | 45 | Party Secretary of Lianhua | HX-Dongluo |
| 113 | Shi Xiling | Female | 60 | Member of OPA | HX-Dongluo |
| 114 | Yang Chunxia | Female | 62 | Member of OPA | HX-Dongluo |
| 115 | Liu Xingguo | Male | 59 | Member of OPA | HX-Dongluo |
| 116 | Luo Liye | Male | 80 | Member of OPA | HX-Dongluo |
| 117 | Yang Chengan | Male | 65 | Member of OPA | HX-Dongluo |
| 118 | Yang Sannv | Female | 71 | Member of OPA | HX-Dongluo |
| 119 | Niu Yucao | Female | 77 | Member of OPA | HX-Dongluo |
| 120 | Wong Qiqiao | Female | 66 | Member of OPA | HX-Dongluo |
| 121 | Xie Shengzhu | Male | 70 | Member of OPA | HX-Dongluo |
| 122 | Guo Qinxiao | Female | 63 | Member of OPA | HX-Dongluo |
| 123 | Wang Chunmao | Male | 76 | Member of OPA | HX-Dongluo |
| 124 | Jia Kaiyun | Male | 68 | Member of OPA | HX-Dongluo |
| 125 | An Shuanyi | Male | 67 | Member of OPA | HX-Dongluo |
| 126 | Yang Pingwen | Male | 67 | Member of OPA | HX-Dongluo |
| 127 | Niu Binhai | Male | 69 | Member of OPA | HX-Dongluo |
| 128 | Huang Anding | Male | 69 | Member of OPA | HX-Dongluo |
| 129 | Yang Chunye | Female | 78 | Member of OPA | HX-Shicun |
| 130 | Liang Yuqiao | Female | 67 | Member of OPA | HX-Shicun |
| 131 | Yang Kerang | Male | 79 | Member of OPA | HX-Shicun |
| 132 | Yang Yinyun | Male | 71 | Member of OPA | HX-Shicun |
| 133 | Yang Changjun | Male | 71 | Member of OPA | HX-Shicun |
| 134 | Zhang Genlai | Male | 77 | Member of OPA | HX-Shicun |
| 135 | Hu Huiding | Male | 72 | Member of OPA | HX-Shicun |
| 136 | Li Jingliang | Male | 79 | Member of OPA | HX-Shicun |
| 137 | Liu Shiqing | Male | 63 | Member of OPA | HX-Shicun |
| 138 | Ma Baoshan | Male | 77 | Member of OPA | HX-Shicun |
| 139 | Xue Minling | Male | 74 | Member of OPA | HX-Shicun |
| 140 | Yang Zhiguang | Male | 71 | Member of OPA | HX-Shicun |
| 141 | Yang Xiuqi | Male | 69 | Member of OPA | HX-Shicun |
| 142 | Liu Shuxian | Female | 72 | Member of OPA | HX-Shicun |
| 143 | Yang Tianbao | Male | 74 | Member of OPA | HX-Shicun |
| 144 | Zhang Kuanxin | Male | 67 | Village Secretary | HX-Shicun |
| 145 | Hu Siliang | Male | 50 | Member of OPA | HX-Shicun |
| 146 | Li Defa | Male | 73 | Member of OPA | HX-Lisi |
| 147 | Sun Tiancai | Male | 70 | Member of OPA | HX-Lisi |
| 148 | Wang Yunde | Male | 80 | Member of OPA | HX-Lisi |
| 149 | Sun Xuelan | Female | 52 | Manager of Elderly Bookstore | HX-Lisi |
| 150 | Song Xianglan | Female | 69 | Member of OPA | HX-Lisi |
| 151 | Shi Xiuge | Female | 82 | Member of OPA | HX-Lisi |
| 152 | Wang Fen | Female | 73 | Member of OPA | HX-Lisi |
| 153 | Wang Guanglun | Male | 63 | Member of OPA | HX-Lisi |
| 154 | Han Xuyun | Female | 69 | Member of OPA | HX-Lisi |
| 155 | Li Lianying | Female | 65 | Member of OPA | HX-Lisi |
| 156 | Zhi Anmin | Male | 61 | Member of OPA | HX-Lisi |
| 157 | Wang Tianqing | Male | 76 | Member of OPA | HX-Lisi |
| 158 | Zhi Yunjie | Male | 70 | Leader of OPA | HX-Lisi |
| 159 | Sun Baike | Male | 78 | Leader of OPA | HX-Lisi |
| Total | 159 (Male:101, Female: 58); Nine meetings | | | | |

## **Sample of “H” tool evaluation**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Fengxiang county Xihe village H-type assessment maps  (Village-level interview) | | | | | | | | | | | | | | | | | | |
| Dissatisfaction | 1 | 2 | | | 3 | | 4 | | 5 | | 6 | | 7 | | 8 | 9 | 10 | Satisfaction |
| 1. Health training is not enough; 2. No sports equipment |  | |  | | |  | |  | |  | |  | |  |  | ○ | ○ | 1. Old people's mood changed into better; 2. Financial support; 3. Provision of productive assets  ; 4. Livelihoods training and health and ageingtraining; 5. Old people have their own organizations; 6. Old people have more activities. |
|  | |  | | |  | |  | |  | |  | |  |  | ○ | √ |
|  | |  | | |  | |  | |  | |  | |  |  | ○ | √ |
|  | |  | | |  | |  | |  | |  | |  |  | √ | √ |
| Suggests： | | | | |  | |  | |  | |  | |  |  |  | √ |
|  | | |  | |  | |  | |  | |  | |  |  |  | √ |
|  | | | Gender | | | | number | | SUM | | AVERAGE | | |  |  | √ |
|  | | | Female（√） | | | | 11 | | 109 | | 9.91 | |  |  |  | √ |
|  | | | Male（○） | | | | 6 | | 57 | | 9.50 | |  |  |  | √ |
| Total： | | | | |  | | 17 | | 166 | | 9.76 | |  |  |  | √ |
|  | | |  | |  | |  | |  | |  | |  |  |  | √ |
|  | | |  | |  | |  | |  | |  | |  |  |  | ○ |
|  | | |  | |  | |  | | 2012．4．17 | | | | |  |  | ○ |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Hua County Shi village H-type assessment maps  (Village Doctor) | | | | | | | | | | | | | | | | | | | |
| Dissatisfaction | 1 | 2 | | 3 | | 4 | | 5 | | 6 | | | 7 | | 8 | 9 | | 10 | Satisfaction |
| Health check-ups should do a little more detail, big propaganda |  | |  | |  | |  | |  | |  | | |  |  | | √ |  | 1. Take care of older men and women;  2.help poor older men and women develop their production;  3. Health check-ups. |
| Suggests：Add Device(Blood glucose meter、Blut Routine Untersuchung、Urine Routine） | | | | | | | | | | | | | | | | | |
|  | |  | | |  | |  |  | | |  | |  |  | |  |  |
|  | |  | | |  | |  |  | | |  | |  |  | |  |  |
|  | |  | | |  | |  | 2012.4.20 | | | | | |  | |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Chencang County Hulugou Village H-type assessment maps  (Village Secretary) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dissatisfaction | | | 1 | | | 2 | | 3 | | 4 | | 5 | | 6 | | 7 | | 8 | | | 9 | | | | 10 | Satisfaction | |
| We need to expand the venue to construct a center of activity of the elderly to enable the elderly to feel pleasant. | | |  | | |  | |  | |  | |  | |  | |  | | |  | | | √ | | |  | The project help older people develop their production and increase their income;  Older people's life has been the basic protection;  Their mental outlook has also undergone great changes. | |
|  | | |  | |  | |  | |  | |  | |  | | |  | |  | | |  | |
|  | | |  | |  | |  | |  | |  | |  | | |  | | |  | | |  |
|  | | |  | |  | |  | |  | |  | |  | | |  | | |  | | |  |
| Suggests：Null | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | |  | |  | |  | |  | |  | | |  | | | |  | |  |
|  | | |  | |  | |  | |  | |  | |  | | |  | | | |  | |  |
|  | | |  | |  | |  | |  | |  | |  | | |  | | | |  | |  |
|  | | |  | |  | |  | |  | |  | |  | | |  | | | |  | |  |
|  | | |  | |  | |  | |  | |  | |  | | |  | | | |  | |  |
|  | | |  | |  | |  | |  | |  | | 2012.4.19 | | | | | | |  | |  |
| Chencang County institutions interview H-type assessment maps  (Officer Civil Affairs Bureau) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Dissatisfaction | 1 | 2 | | 3 | 4 | | 5 | | 6 | | 7 | | 8 | | 9 | | 10 | | | Satisfaction | | | | | | |
|  |  |  | |  |  | |  | |  | |  | |  | |  | | √ | | | 1.Implementation of the project provided activity spaces and facilities for the elderly, enrich the cultural life of the elderly.  2.Health and hygiene knowledge about health care for the elderly was loved by the majority of the elderly. | | | | | | |
|  |  | |  |  | |  | |  | |  | |  | |  | |  | | |
|  |  | |  |  | |  | |  | |  | |  | |  | |  | | |
| Suggests  1. Strengthen cooperation to jointly solve the difficulties in the elderly population；  2. Finance OPA to ensure activities of OPA to carry out. | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  |  | |  |  | |  | |  | |  | |  | |  | |  | | |
|  |  | |  |  | |  | | 2012.4.18 | | | | | | | | | | |

## **Case studies**

**Xihe Village, Fengxiang**

* Mr. Xu Shengcai, 69, live together with wife. Ranked as poor household by OPA meeting and received 2,200 Yuan as productive assets from the project in 2009. Mr. Xu bought a mule for 3,200 Yuan. Apple tree is the major local income source and difficult to use machines for plowing in between trees. Mr. Xu used the mule to plow apple tree orchard for other villagers and made 7,000 Yuan in 2010, the end of the year, he paid 1,100 Yuan back to OPA.
* Mr. Xu Yun, 89, healthy and able to cook for himself. The family has four generations but always himself along. The corresponding volunteer is his nephew (over 70, also OPA member) and visit him every day to see if he opens door, if not, means he’s got situation. When got sick, the volunteer will responsible to cook, buy medicines and take to doctor.

**Fanjiazhai Village, Fanjiazhai Township, Fengxiang**

* Mr. Fan Baoliang, OPA leader, Fanjiazhai Village, Fanjiazhai Township, Fengxiang

Some OPA leaders and members went to visit the chief of the county fruit tree extension station. At the beginning, the chief didn’t know OPA and refused the request to provide free service. After communication (several times) on explaining the OPA and project ideas to him, the chief became supportive and assigned technicians to deliver trainings and field guidance to OPA members.

The OPA also got resources from the county science association, cultural bureau and the seeds company and established certain regular communication with those institutes. For instance, the OPA wanted to hold a chess play match for old people and made call to the county cultural and sport bureau. The bureau was very supportive and sent chesses, paper materials for organizing matches and assisted OPA on organizing the match.

* Mr. Wang Baolai, 66 years old with primary school education, wife is 63 with secondary school education. The son works in outside and 2 daughters already married. Mr. Wang received 2,200 Yuan worth of fertilizers and young fruit packs for about 2 mu of apple trees. From the apple trees, Mr. Wang made a income for 30,000 Yuan which was 3 time than regular since he paid much more attention and technical training organized by OPA and serious on practicing. Baoji City TV Station made a newsreel for him through county CA.
* Mrs. Xu Baohua, living along, mental handicap and not able to look after herself. Mrs. Xu receives low income subsidy and social welfare. One son only who works outside and hasn’t come back for many years. Mrs. Zhang Zhaoxia (also member of OPA) works as the family based volunteer for Mrs. Xu. Mrs. Zhang visits Mrs. Xu more than 12 times a month (the OPA asks for at least I visit a week and 2-3 hours each visit). Mrs. Zhang’s jobs include cooking, washing clothes, buying medicines and keeping money for Mrs. Xu.
* “The volunteer is more close to me than my own children” – Mrs. Ren Anhuai, 73, living along with heart disease and hypertension. The corresponding volunteer visits her every week, cooking, feeding and cleaning houses.
* **Mr. Lin Xinshan, 56, Village Doctor, Xianfeng Village, Chencang**

Old people worked hard for entire life and it is time to let them enjoy life, but many old people live along and some have to take care of their grandchildren.

The project enriched the leisure life of old people with much more positive contents. Old people in our village used to spend their time by just farming, talking to few neighbors and basking in sunshine, now they can have a place to go by playing chess, watching TV and talking with lot of more others together, they got more communications with each other and seems more active to participate in OPA activities. The OPA is more attractive now than before.

I had participated one training in August 2011 with the prevention of the 6 regular geriatric and chronic diseases and how to train old people. The training was too short and gave quite some paper materials. It was not difficult to train old people, we sit together and discuss with each other and they got the ideas and knowledge.

Because afraid of spending money, old people used to suffer small diseases by themselves and only go to doctor once getting serious. Through the trainings on health care, old people in the village has more understandings on geriatric and chronic diseases and realized the importance of dealing with “small issues” more positive. I had tried to promote some self health care including more vinegars, less salt, more vegetables, less smoking before but not appreciated by them. With the project, old people are more serious with the organization and the organized training and they listened to what I introduced to them.

About project sustainability: without continuous investment, it will be difficult to continue the free checkups for people aged 60 – 64, it will not be possible to be solely organized by the village level. And, without motivation, it will also not easy for the volunteer item to be sustained.

* **Volunteer and the corresponding old people, Lisi Village, Huaxian**

Mrs. Shi Xiuge, 82, live together with son who is divorced and always work outside.

Mrs. Song Xianglan, 69, volunteer.

Mrs. Shi and Mrs. Song are connected through arrangement of OPA. Mrs. Song visits Mrs. Shi at least each 2 days and sometimes even everyday. By each visit, Mrs. Song stay 1-2 hours for cleaning houses, cooking, buy medicines for Mrs. Shi, and sometimes just pick Mrs. Shi to eat over. The daughter in law of Mrs. Song is also affected and become the volunteer for Mrs. Shi and helped on farming and taking to hospital. Mrs. Shi is illiterate and her son always not home so Mrs. Song helps on managing the old people subsidies for her and keeping the bankbook. Mrs. Shi told her son that ‘you always not home and nobody takes care of me, buy medicine and other necessities. I’m good with the volunteers and you can leave me alone ’.

MeeBefore the project, the village committee also provided certain services to old people like Mrs. Shi but not as intensive and organized as the project does. As volunteer, Mrs. Song is required to make servicing records every time and have regular meeting each month. By the meeting, all volunteers will talk about their services to the old people and share experiences. Mrs. Song thinks the communications with other volunteers are good. In 2011, Mrs. Song was praised as the most outstanding volunteer by the OPA and received certain encouragements.

* **Mrs. Li Jucao, Head of OPA, Dongluo Village, HUaxian**

We had visited some county level authorities, each time we go 5-6 old people, the OPA provides10 Yuan for bus. We asked welfare from the civil bureau for poor old farmers. If you do go, no support, when you encouraged yourself to go, you will get some, though can not fully satisfy us with just some grain, edible oil and food, but some is some and we didn’t come back with bare hands. We never thought before that we old people can ask for resource like this. At the beginning, we didn’t know how to talk to officers, later with more times visit, we learnt and found out they can support some. If the project stopped, we may not to go again, since we got no backstopping.

## **Photo album**

|  |  |
| --- | --- |
| DSC03921  Meeting with SPCA and PMO | DSC03939  Meeting in Fengxiang |
| DSCN5624  Meeting in Huaxian | DSCN5205  Name game – Xihe Village |
| DSCN5275  Meeting with Xihe OPA | DSC04212  Household interview – Daliushu |
| DSCN5419  Interview OPA leader - Daliushu | DSCN5447  Household interview – Daliushu |
| DSC04239  H tool evalaution - Hulugou | DSCN5510  OPA activity – Xianfeng |
| DSCN5609  H tool evalaution - Xianfeng | DSCN5727  Scoring the project – Dongluo |
| DSCN5739  Meeting with Dongluo OPA | DSC04008  Household interview – Xihe |
| DSC04172  Volunteer interview - Daliushu | DSCN5843  Volunteer and old people interview Lisi |
| Old people community map - Niuboyu | Poverty ranking – Lisi |
| DSCN5310  H tool evalaution – by Fanjiazhai township civil affairs officer | Project image – Qiuchimiao OPA |
| 拾村 1  Project facilities to OPA | DSCN5423  Project facilities – Daliushu |
| HWM)E)182Y6QN7T_0}6O`TH  OPA of Dongluo | DSCN5270  Clinic facility from the project – Xihe |
| DSC04173  Clinic facility from the project - Daliushu | H tool evalaution – Hulugou |

## **Methodology and methods**

|  |
| --- |
|  |
| **“促进老年人参与农村发展”项目**  Promoting Older People’s Participation in Development in Rural China |
| **终期评估数据收集方法** |
| **（讨论稿）** |
| **中国农业大学**  **人文与发展学院** |
|  |

2012年4月

**目 录**

[1 终期评估数据收集方法 3](#_Toc321921530)

[1.1 二手资料 3](#_Toc321921531)

[1.2 机构访谈 3](#_Toc321921532)

[1.3 乡镇干部访谈 5](#_Toc321921533)

[1.4 村干部/OPAs领导人访谈 5](#_Toc321921534)

[1.5 老年人访谈和项目村社区成员小组访谈 7](#_Toc321921535)

[1.6 入户访谈案例收集 8](#_Toc321921536)

[2 PRA工具 8](#_Toc321921537)

[3 数据收集表 8](#_Toc321921538)

[3.1 省老龄办数据收集表 8](#_Toc321921539)

[3.2 县老龄办数据收集表 12](#_Toc321921540)

[3.3 县扶贫办数据收集表 15](#_Toc321921541)

[3.4 县卫生局数据收集表 17](#_Toc321921542)

[3.5 县民政局数据收集表 19](#_Toc321921543)

[3.6 村级数据收集表 21](#_Toc321921544)

[3.7 OPA数据收集表 25](#_Toc321921545)

[4 陕西省国际助老会项目评估指标体系一览表 29](#_Toc321921546)

# 终期评估数据收集方法

调查数据的收集设计为六级，即国家、省、县、乡镇、村/OPAs和老年人。

国家、省、县主要依托二手资料和机构访谈；乡镇、村/OPAs主要通过实地调查，和乡镇干部、村干部以及项目村社区成员的访谈；老年人层面主要通过小组讨论（按年龄和性别分组）、个人访谈及入户调查获得相关数据。

收集的数据用来对项目进行终期评估，并用于总结项目经验，完成项目评估报告，为项目的可持续性提供建议。

这次终期评估的各种调查活动主要依靠省、县、乡镇三级现有的数据，依托当地村干部和OPA的领导者以及老年人，由中国农业大学两名专家和两名研究生志愿者完成。

## 二手资料

1. 国家老龄委“十一五”规划的相关内容

2. 国家老龄委制定、贯彻和执行的相关政策、规定（包括领导讲话）

3. 省老龄委 “十一五”、“十二五”规划的相关内容（项目可持续性及影响）

4. 省老龄委制定、贯彻和执行的相关政策、规定（包括领导讲话）

5. 项目县和项目乡镇的基本情况：

1. 自然概况；
2. 经济状况（特别是农村老年人的收入来源、纯收入等数据）；
3. 人力资源（特别是老年人比重、农村老年人比重；以及少数民族老年人、老年残疾人、留守农村老年人比重等特殊群体）；
4. 医疗卫生状况（县级/乡镇医疗机构数量和等级、县级/乡镇医疗卫生人员数量、村医的配备情况、各级医疗卫生机构设备配置等情况）。
5. “十一五”评估报告（县级及各机构？）

## 机构访谈

**（1） 省老龄办**

1. **项目的组织结构、人员安排、各方责任等；**
2. 项目经费及管理情况；
3. 对老年人参与农村发展的理解；
4. 在项目中获得培训的基本情况：类型、次数、参培人数、培训前后意识和行动上发生的改变等；
5. 各类培训教材开发、印制、分发到OPA（情况？），培训教师队伍建设情况；
6. 项目硬件建设情况（含：社区活动中心及配套、医疗护理设备、基础设施情况）；
7. 在项目的执行过程中扮演的角色及发挥的作用，如：多少人直接参与项目、是否协助组织省级层面的培训会（类型、次数、参与人数、培训效果等）、为项目提供多方联系与资源支持等；
8. 全省OPAs的建立及运行现状，如：OPA数量和发展状况、OPA功能的发挥情况、OPA在项目县及拓展县建立及运行的异同、其他省内地区/外省是否关注并希望引进和借鉴、OPA的影响力-报刊媒体杂志上的出镜情况、是否与其他省县及NGO组织产生联系；
9. 项目扩展目标社区（复制地区）的选择确定与工作安排（数量、地区等）情况；是否有后续推广的计划及内容；
10. OPA横向交流情况；
11. 项目的完成情况，如基线调查及报告、中期评估及报告、对老年人协会的月访、对项目县的季度访问、国际助老会是否监督与访问、全国老龄委的访问情况（一年两次是否完成）等；
12. OPA模式是否纳入了CNCA培训计划；
13. 省内公共媒体对OPA项目的宣传情况；
14. 对现行项目模式及推广可能性的认知（问题与新的需求-可打分排序）、评价与建议。

**（2） 县老龄办（**建议最好开个评估研讨会，包括各县级单位**）**

**项目的组织结构、人员安排、各方责任等；**

1. 项目经费及管理情况；
2. 对老年人参与农村发展的理解；
3. 项目乡镇及社区的选择背景；
4. 在项目中获得培训的基本情况：类型、次数、参培人数、培训前后意识和行动上发生的改变等；
5. 在项目的执行过程中扮演的角色及发挥的作用，如：多少人直接参与项目、是否协助组织县级层面的培训会（类型、次数、参与人数『含：性别比例』、培训效果等）、为项目提供多方联系与资源支持等；
6. 项目硬件建设情况（含：社区活动中心及配套、医疗护理设备、基础设施情况）；
7. 与其他相关政府部门（扶贫办、卫生部门、民政局）的联系与合作情况；
8. 本县OPAs的建立及运行现状，如：OPA数量和发展状况、OPA功能的发挥情况、OPA对当地农村老年人生活状况的影响、OPA的影响力-报刊媒体杂志上的出镜情况、是否与其他省县及NGO组织产生联系；
9. 县内OPA横向交流的情况；
10. 县内公共媒体对项目的报告、宣传；
11. 对现行项目模式及推广可能性的认知（**问题**与新的**需求**-可打分排序）、评价与建议。（后续可持续发展的经费问题）

**（3） 县扶贫办**

1. 本县制定、贯彻及执行的扶贫政策、法律法规，如：在“十一五”计划期间的工作目标、完成情况及成果；（地方先期准备、提供）
2. 本县贫困线的划分、贫困标准的制定、贫困救助的内容以及贫困人口数量、年龄分布、城乡分布；（包括：项目乡镇及社区具体数据）
3. 对老年人参与农村发展的理解；
4. 参与项目的基本情况，如：参与项目培训、参与项目执行、基础设施改善（经费及政策倾斜等）、其它；
5. 由扶贫办协调的其他部门的资源（农业局、林业局、畜牧局等）；
6. 与老龄委、OPAs及其他相关部门的合作情况；
7. 对现行项目模式的认知（问题与新的需求-可打分排序）、评价与建议。

**（4） 县卫生部门**

1. 医疗卫生基本情况，如：县级/乡镇医疗机构数量和等级；县级/乡镇医疗卫生人员数量；村医的资格认证与配备情况；各级医疗卫生机构设备配置等情况；
2. 本部门在“十一五”期间本部门的工作目标、完成情况及成果；
3. 对老年人参与农村发展（部门角度：制约、问题、需求）的理解；
4. 对老年人医疗护理问题的认知和理解，特别是项目中提到的在治疗老年病人和鼓励健康老龄方面所应注意的特殊事项是否清楚；
5. 在老年人医疗护理方面所做的工作，如：向老年人提供的免费体检（1800人）及家庭护理/自我护理培训（1500人）完成情况；向老年人及其社区成员宣传老年人医疗护理知识的情况；提供老年人医疗护理培训和咨询的情况等。
6. 参与项目的基本情况（次数、内容、地点、参与人员、后续服务、尤其是老年人健康护理），如：参与项目培训、参与项目执行、村医培训及管理等。
7. 参与项目的基层卫生服务人员情况及管理（村医？乡镇卫生院？）；
8. 与老龄委、OPAs及其他相关部门的合作情况；
9. 对老年人，特别是农村老年人医疗保障政策、现状和存在问题的认知、评价和建议；
10. 对现行项目模式及推广可能性的认知（问题与新的需求-可打分排序）、评价与建议。

**（5） 县民政局**

1. 本县制定、贯彻及执行的社会救助政策、规划和标准，城乡居民最低生活保障、医疗救助、临时救助、生活无着人员救助情况，特别是涉及农村老年人的相关工作概况；
2. 本县范围内关注老年人/农村老年人的社会团体、民办非企业单位、基金会、社会慈善、社会捐赠、群众互助、志愿者队伍的基本情况；
3. 农村老年人的婚姻、殡葬基本情况（OPA作用导向）；
4. 对老年人，特别是农村老年人的社会保障政策和措施；
5. 本县老年人，特别是农村老年人享受“低保”的情况（认定程序和具体管理办法等）、人数和金额；
6. 对老年人参与农村发展的理解；
7. 参与项目的基本情况，如：参与项目培训、参与项目执行等；
8. 与老龄委、OPAs及其他相关部门的合作情况；
9. 对现行项目模式及推广可能性的认知（问题与新的需求-可打分排序）、评价与建议。

## 乡镇干部访谈

上述综合问题讨论

## 村干部/OPAs领导人访谈

**（1） 村干部访谈**

1. 人口情况：人口数量、性别分布、老年人户数比重（孩子已独立，只有老人的户数）、留守老人户数、少数民族老年人人数/户数及残疾老年人的人数/户数；仍有劳动力的老年人人数/比重；
2. 土地情况：土地总面积、耕地面积、水浇地面积、林地面积、人均耕地面积、老年人人均耕地面积；
3. 政治参与情况：村两委班子中老年人数/女性老年人人数/残疾老年人人数（是否有年龄限制）；村民代表中老年人数/女性老年人人数/残疾老年人人数；
4. 贫困户中老年人数/女性老年人人数/残疾老年人人数及比重；
5. 受教育程度：文盲、小学、初中、高中和大专及以上人数和性别，其中老年人的情况与比重；
6. 经济状况：关注项目介入的三年中，村内的主要收入来源及人均收入变化，老年人的主要收入来源及人均收入变化（也可进一步关注老年人农业产品的销售渠道和销售地点）；老年人获得信贷的情况及变化等；
7. 民政救济状况：项目介入三年来，全村“五保”和“低保”人数的变化，其中老年人的人数及变化情况；
8. 医疗卫生状况：参加合作医疗的人数，其中老年人的人数；村医的人数及性别；
9. 对老年人参与农村发展的理解；
10. 参与项目的基本情况，如：参与项目培训、参与项目执行等；（包括技术培训、推广示范）
11. 与老龄委、OPAs及其他相关部门的合作情况；（合作、来访、协调组织的次数、内容、人数等）
12. 对现行项目模式及其可持续性的认知（问题、制约与新的需求、能力-可打分排序）、评价与建议。（包括：社区在老年人工作方面的变化、行动、未来考虑）

**2. OPAs领导人访谈**

1. 通过项目获得的OPA相关培训及能力建设情况；
2. 经费及管理情况（人员、问题、建议、可持续性等）；
3. 社区老年人参加OPA的情况（参加标准、组织方式、是否有问题/矛盾及解决）；
4. 对OPA内贫困家庭的支持情况（筛选、确定、支持幅度、管理、性别比例等）
5. 人员构成情况：OPAs成员中女性数量及性别比例；OPAs领导人中女性数量及性别比例；OPAs成员/领导人中残疾人的数量及比例；参与OPAs的老年人数及其中的性别比例和残疾人比例；
6. 硬件设施情况：是否有社区活动中心、是否购置基本器材、是否获得资金支持、是否争取到项目外的其他资源、资金和设备的日常管理方式；
7. 在项目中获得培训的基本情况：类型、次数、参培人数、培训前后意识和行动上发生的改变等；
8. 对老年人参与农村发展的理解；
9. 在项目的执行过程中扮演的角色及发挥的作用，如：多少人直接参与项目、是否协助组织县级层面的培训会（类型、次数、参与人数、培训效果等）、为项目争取外部联系与资源支持情况；
10. 社区内收益转移情况；
11. 与老龄委、其他县村的OPAs及相关部门的合作情况，如：参与项目培训、参与项目执行、省县老龄委的访问和交流情况等；
12. 参与县级项目活动的情况及与其他OPA的交流情况；
13. 项目受益情况：生计方面变化情况、医疗护理方面变化情况、OPA影响力变化情况、OPA能力建设变化情况；（带开放式问题）
14. 对现行项目模式及可持续性的认知（问题与新的需求-可打分排序）、评价与建议。（包括：社区在老年人工作方面的变化、行动、未来考虑、对外部/上级政府支持的需求、看法）

## 老年人访谈和项目村社区成员小组访谈

（1） 老年人/社区成员访谈

1. 老年人/社区成员对老年人参与农村发展的理解；
2. 老年人/社区成员对村内OPA的认知与参与情况，如是否能正确理解OPA的功能和作用、是否是OPA成员（原因）以及参与OPA组织的活动的情况（参与的类型、次数、参与/不参与的原因）等；
3. **性别问题**
4. 老年人/社区成员对OPA及项目的满意/不满意情况：满意/不满意的地方及原因；
5. 老年人/社区成员认为老年人在OPA及项目中的获益情况：如是否在项目中获得相关培训（类型、次数、参培人数、培训前后意识和行动上发生的改变等）、收入是否增加、医疗护理问题是否改善（如是否能够获得家庭护理、自我护理的培训、服务和器具等）、自我发展的能力是否提高、社区的硬件设施是否改善等；（获得服务的频率、来源、效果评价等）、项目免费提供的体检情况（参与情况）；
6. 老年人/社区成员认为OPA及项目给社区及自身（包括老年人和其他社区成员）带来的变化及原因；
7. 老年人/社区成员对社区和自身发展需求及面临的问题的认知与排序；
8. 与老龄委、其他县村的OPAs及相关部门的合作情况，如：参与项目培训、参与项目执行、其他省县老龄委、OPAs的访问和交流情况等；
9. 对OPA现行项目模式及可持续性的认知（问题与新的需求-可打分排序）、评价与建议。

**（2） 乡村医生访谈（这点的必要性有待综合时间成本进行考虑）**

1. 乡村医生对老年人参与农村发展的理解；
2. 乡村医生对老年人健康护理的理解；
3. 乡村医生对OPA及项目的认知和理解（包括满意/不满意情况：满意/不满意的地方及原因）；
4. 乡村医生参与OPA及项目的基本情况，如：乡村医生参与项目培训的基本情况（类型、次数、培训前后意识和行动上发生的改变等）、组织老年人参加免费体检的情况（次数、遇到的问题等）、向老年人及其社区成员宣传老年人医疗护理知识的情况（次数、对象、问题等）、为老年人提供体检服务的乡村医生免费得到医疗设备的情况；
5. 乡村医生对社区和老年人医疗护理面临的需求与问题的认知与排序；
6. 乡村医生与老龄委、其他县村的OPAs及相关部门的合作情况，如：参与项目培训、参与项目执行等；
7. 对老年人，特别是农村老年人医疗保障政策、现状和存在问题的认知、评价和建议；
8. 对OPA现行项目模式及可持续性的认知（问题与新的需求-可打分排序，尤其针对项目的特定活动，包括：体检、医疗服务等）、评价与建议。

## 入户访谈案例收集

# PRA工具

1. 对上述机构、部门（老龄委、扶贫办、卫生局、民政局、OPAs）做出机构联系图，以评估相关职能部门和相关项目部门之间的联系程度。

2. 对上述任何相关利益群体均可进行大事记整理，以发现和分析项目的对相关利益群体的影响力。

3. 对涉及的县级各部门或群体利用H型Tool评估培训效果。

4. 可将从村干部/OPAs领导人、社区成员及老年人针对项目可持续性方面的问题/需求进行打分排序，以确定解决/满足的先后顺序。

5. 辅助工具：彩色卡片；大白纸；胶带；彩色记号笔等。

# 数据收集表

数据收集表是需要项目相关机构填报的表格。

## 省老龄办数据收集表

**一、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**二、培训教材建设情况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 教材名称 | 教材类型 | 开发时间 | 组织方 | 印制份数 | 分发对象 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |

**三、教师队伍建设情况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**四、项目硬件设施建设情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 类型 | 原有情况 | 新增/更新情况 | 组织方 |
| 1 | 社区活动中心 | 个数：（总面积与房屋间数） |  |  |
| 2 | 活动中心配套设施 | 内容： |  |  |
| 3 | 社区基础设施  （请注明单位：如台、套等） | 内容： |  |  |
| 4 | 社区基础医疗设备（请注明单位） | 内容： |  |  |

**五、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**六、全省OPAs的建立及运行现状**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 建有OPA的县/县级市 | 建立时间 | 现有人员总数 | 活动开展情况 | 是否有外省/省内其他地区的关注 | 如有，请列举相关事实 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**七、省内、外公共媒体对OPA项目的宣传情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 对OPA进行报道的省内、外公共媒体名 | 报道时间 | 报道的类型（电视新闻、报纸、杂志、网络新闻、广播等） | 报道的内容概要 | 相关链接（网络新闻请以“新闻名+网址”的方式附相关的网址的链接。） |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**八、项目扩展目标社区情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 具体地区 | 数量 | 确定时间 | 选择/确定依据 |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
| 后续推广计划内容及计划安排： | | | | |

**九、OPA之间的横向交流情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 交流主题/内容 | 交流时间 | 交流组织方 | 交流参与方 | 参与人数 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 后续交流计划内容及计划安排： | | | | | |

**十、项目完成情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 项目要求/任务 | 次数 | 截止时间 | 完成时间 | 相关说明（未完成的原因、存在的问题等） |
| 1 | 基线调查 |  |  |  |  |
| 2 | 基线调查报告 |  |  |  |  |
| 3 | 中期评估 |  |  |  |  |
| 4 | 中期评估报告 |  |  |  |  |
| 5 | 对OPA的月访 |  |  |  |  |
| 6 | 对项目县的季度访问 |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

## 县老龄办数据收集表

**一、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**二、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**三、项目硬件设施建设情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 类型 | 原有情况 | 新增/更新情况 | 组织方 |
| 1 | 社区活动中心 | 个数：（总面积与房屋间数） |  |  |
| 2 | 活动中心配套设施  （请注明单位） | 内容： |  |  |
| 3 | 社区基础设施  （请注明单位） | 内容： |  |  |
| 4 | 社区基础医疗设备  （请注明单位） | 内容： |  |  |

**四、本县OPAs的建立及运行现状**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 建有OPA的县/县级市 | 建立时间 | 现有人员总数 | 活动开展情况 | 是否有外省/省内其他地区的关注 | 如有，请列举相关事实 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**五、省内、外公共媒体对本县OPA项目的宣传情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 对OPA进行报道的省内、外公共媒体名 | 报道时间 | 报道的类型（电视新闻、报纸、杂志、网络新闻、广播等） | 报道的内容概要 | 相关链接（网络新闻请以“新闻名+网址”的方式附相关的网址的链接。） |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**六、OPA之间的横向交流情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 交流主题/内容 | 交流时间 | 交流组织方 | 交流参与方 | 参与人数 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |
| 后续交流计划内容及计划安排： | | | | | |

## 县扶贫办数据收集表

**一、本县扶贫工作相关问题**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 贫困线： | | | | | |
| 贫困标准： | | | | | |
| 贫困救助内容： | | | | | |
| 本县贫困人口数量 | 本县项目乡镇/社区贫困人口数量 | 本县贫困人口年龄分布 | 本县项目乡镇/社区贫困人口年龄分布 | 本县贫困人口城乡分布 | 本县贫困人口性别分布 |
|  |  |  |  |  |  |

**二、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**三、项目硬件设施建设情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 类型 | 原有情况 | 新增/更新情况 | 组织方 |
| 1 | 社区活动中心 | 个数：（总面积与房屋间数） |  |  |
| 2 | 活动中心配套设施  （请注明单位） | 内容： |  |  |
| 3 | 社区基础设施  （请注明单位） | 内容： |  |  |
| 4 | 社区基础医疗设备  （请注明单位） | 内容： |  |  |

**四、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

## 县卫生局数据收集表

**一、医疗卫生基本情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 县级医疗机构数量 | 乡镇级医疗机构数量 | 县级医疗机构等级 | 乡镇级医疗机构等级 | 县级医疗卫生人员数量 | 乡镇级医疗卫生人员数量 |
|  |  |  |  |  |  |
| 县级医疗卫生机构设备配置情况： | | | | | |
| 乡镇级医疗卫生机构设备配置情况： | | | | | |
| 村医的资格认证情况（获得资格认证的比例、级别等）： | | | | | |
| 村医的配备情况： | | | | | |

**二、县卫生部门在老年人医疗护理方面所做的工作**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容 | 时间 | 次数 | 参与人数 | 问题 |
| 1 | 向老年人提供免费体检 |  |  |  |  |
| 2 | 家庭护理/自我护理培训 |  |  |  |  |
| 3 | 宣传老年人医疗护理 |  |  |  |  |
| 4 | 提供老年人医疗护理咨询 |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**三、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**四、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

## 县民政局数据收集表

**一、本县民政工作概况**

|  |  |  |  |
| --- | --- | --- | --- |
| 本县制定、贯彻、执行的社会救助政策、规划及标准（请注明与农村老年人相关的具体部分）： | | | |
| 城乡居民最低生活保障、医疗救助、临时救助、生活无着人员救助概况（请注明与农村老年人相关的具体部分）： | | | |
| 资格认定程序及具体管理办法： | | | |
| 本县老人享受“低保”的人数 | 本县老人享受“低保”的金额 | 本县农村老人享受“低保”的人数 | 本县农村老人享受“低保”的金额 |
|  |  |  |  |

**二、社会团体（关注老年人/农村老年人的社会团体、民办非企业单位、基金会、社会慈善、社会捐赠、群众互助、志愿者队伍）发展现状**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 团体名称 | 团体类型 | 成立时间 | 成员数量 | 活动领域 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**三、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**四、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

## 村级数据收集表

**一、人口情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 村1: | 村2: | 村3: | 村4: |
| 总人口 |  |  |  |  |
| 少数民族人数 |  |  |  |  |
| 男性 |  |  |  |  |
| 女性 |  |  |  |  |
| 家庭总户数 |  |  |  |  |
| 老年人人数 |  |  |  |  |
| 少数民族老人人数 |  |  |  |  |
| 留守老人人数 |  |  |  |  |
| 残疾老人人数 |  |  |  |  |
| 老年人户数 |  |  |  |  |
| 有劳动力的老年人人数/比重 |  |  |  |  |

**二、土地情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 项目 | 村1: | 村2: | 村3: | 村4: |
| 总面积（亩） |  |  |  |  |
| 耕地面积（亩） |  |  |  |  |
| 水浇地面积（亩） |  |  |  |  |
| 人均耕地面积 |  |  |  |  |
| 林地面积（亩） |  |  |  |  |
| 退耕还林面积（亩） |  |  |  |  |
| 老年人人均耕地面积（亩） |  |  |  |  |

**三、政治参与情况**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 项目 | 村1: | 村2: | 村3: | 村4: |
| 两委 | 两委班子中老年人人数 |  |  |  |  |
| 两委班子中女性老年人人数 |  |  |  |  |
| 两委班子中残疾人老年人数 |  |  |  |  |
| 村民代表 | 村民代表中老年人人数 |  |  |  |  |
| 村民代表中女性老年人人数 |  |  |  |  |
| 村民代表中残疾人老年人数 |  |  |  |  |

**四、贫困状况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 年份 | 贫困线以下的人数 | 贫困线以下的老人人数 | 贫困线以下的女性老人人数 | 贫困线以下的残疾老年人人数 |
| 2009 |  |  |  |  |
| 2010 |  |  |  |  |
| 2011 |  |  |  |  |
| 2012 |  |  |  |  |

**五、受教育的程度**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 受教育程度 | 男性 | | 女性 | | 总计 | |
| 单位：人 |  | 其中：  老年人 |  | 其中：  老年人 |  | 其中：  老年人 |
| 文盲 |  |  |  |  |  |  |
| 小学 |  |  |  |  |  |  |
| 初中 |  |  |  |  |  |  |
| 高中/中专 |  |  |  |  |  |  |
| 大专及其以上 |  |  |  |  |  |  |

**六、经济状况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 年份 | 主要收入来源 | 老年人主要收入来源 | 人均收入 | 老年人人均收入 | 获得信贷的途径与数额 | 老年人获得信贷的途径与数额 |
| 2009 |  |  |  |  |  |  |
| 2010 |  |  |  |  |  |  |
| 2011 |  |  |  |  |  |  |
| 2012 |  |  |  |  |  |  |

**七、民政救济情况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 年份 | “五保”人数 | 物资.金额 | “低保”人数 | 物资/金额 | 老年人“低保人数” | 物资/金额 |
| 2009 |  |  |  |  |  |  |
| 2010 |  |  |  |  |  |  |
| 2011 |  |  |  |  |  |  |
| 2012 |  |  |  |  |  |  |

**八、医疗卫生状况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 年份 | 参加合作医疗人数 | 参加合作医疗老人人数 | 老年人参加体检人数 | 村医数量 |
| 2009 |  |  |  |  |
| 2010 |  |  |  |  |
| 2011 |  |  |  |  |
| 2012 |  |  |  |  |

**九、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**十、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**十一、与其他相关部门/机构的联系与合作情况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 部门/机构名称 | 联系/合作类型[[16]](#footnote-16) | 联系/合作时间 | 部门/机构人数 | 本村参与人数 | 联系/合作内容 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

## OPA数据收集表

**一、OPAs的建立及运行现状**

**1. OPA的人员构成情况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 年份 | OPA成员人数 | OPA成员女性人数 | OPA成员残疾人数 | OPA领导人人数 | OPA领导人女性人数 | OPA领导人残疾人数 |
| 2009 |  |  |  |  |  |  |
| 2010 |  |  |  |  |  |  |
| 2011 |  |  |  |  |  |  |
| 2012 |  |  |  |  |  |  |

**2. 经费及管理情况**

|  |
| --- |
| 经费管理人员构成及人数： |
| 经费使用及管理过程中的问题： |
| 对经费使用及管理的建议： |
| 对项目撤出后经费可持续性的建议： |

**3. 社区老年人参与OPA的情况**

|  |  |  |
| --- | --- | --- |
| 年份 | 参加OPA的标准 | 参加OPA的人数 |
| 2009 |  |  |
| 2010 |  |  |
| 2011 |  |  |
| 2012 |  |  |
| OPA活动的组织方式： | | |
| 运行过程中的问题/矛盾与解决办法： | | |

**二、社区内收益转移情况**

|  |  |  |
| --- | --- | --- |
| 年份 | 受益人数/情况 | 转移人数/情况 |
| 2009 |  |  |
| 2010 |  |  |
| 2011 |  |  |
| 2012 |  |  |

**三、项目培训的基本情况（包括培训及被培训）**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 培训主题/内容 | 培训时间 | 培训组织方 | 培训参与方 | 参培人数 | 参培女性比例 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**四、参与项目执行的内容**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 序号 | 内容/任务 | 时间 | 组织方 | 参与方 | 作用 |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**五、项目硬件设施建设情况**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 类型 | 原有情况 | 新增/更新情况 | 组织方 |
| 1 | 社区活动中心 | 个数： |  |  |
| 2 | 活动中心配套设施 | 内容： |  |  |
| 3 | 社区基础设施 | 内容： |  |  |
| 4 | 社区基础医疗设备 | 内容： |  |  |
| 5 | 其他资源 | 内容： |  |  |

**六、与其他相关部门/机构/OPAs的联系与合作情况**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 序号 | 部门/机构名称 | 联系/合作类型[[17]](#footnote-17) | 联系/合作时间 | 部门/机构人数 | 本村参与人数 | 联系/合作内容 |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |

**七、项目受益情况；**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 时间 | 老年人生计 | 老年人医疗护理 | OPA能力建设 | OPA影响力/可持续性 |
| 2009 |  |  |  |  |
| 2010 |  |  |  |  |
| 2011 |  |  |  |  |
| 2012 |  |  |  |  |

# 陕西省国际助老会项目评估指标体系一览表

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **项目目标** | **一级指标** | **二级指标** | **三级指标** | **四级指标** |
| A. 至少有36个来自2县3部门的官员能够熟练地主持与OPA发展、生计或健康相关的参与式培训。 B. 至少有12名项目培训专家进行除项目活动之外的其他培训。 | 1. 当地机构能力建设 | 1.1 培训专家的培训情况（次数/人数） | 1.1.1 培训的次数 |  |
| 1.1.2 培训的人数是否是2人 |  |
| 1.2 培训教材改编情况 | 1.2.1 老龄化和参与方法介绍 |  |
| 1.2.2 老年人协会的发展 |  |
| 1.2.3 老年人协会的生产干预 |  |
| 1.2.4 包括家庭护理在内的健康干预 |  |
| 1.3 陕西省培训专家的培训情况 | 1.3.1 对项目的认知情况 |  |
| 1.3.2 对老龄化和年龄评估的认知情况 |  |
| 1.3.3 对项目领导、培训和乡村评估的认知情况 |  |
| 1.3.4 对老年人协会在扶贫和改善医疗事业方面的作用的认知情况 |  |
| 1.4 培训人在老年人协会发展、生产和健康等方面的培训情况 | 1.4.1 老年人协会发展培训班（次数/人数） |  |
| 1.4.2 发展生产培训班（次数/人数） |  |
| 1.4.3 健康培训班（次数/人数） |  |
| 大约12个边缘化村庄，2,264个老年人，5,320个家庭成员从OPA的生计、社会或医疗护理活动中收益； 12个OPA进行村级测评活动并准备和施行村庄工作计划；  至少12个村庄的2,264个老年人参与OPA活动并至少有25%的涨幅。 | 2. OPA能力建设 | 2.1 OPA的硬件建设 | 2.1.1 是否装备或翻新社区活动中心 |  |
| 2.1.2 是否购置基本器材：（民族服饰、传统乐器、办公家具和用品（例如象棋，纸牌）、电子设备（如音响、麦克风） |  |
| 2.1.3 是否获得资金支持 |  |
| 2.1.4 是否争取到其他资源 |  |
| 2.2 OPA的软件建设 | 2.2.1 是否进行村级测评活动 |  |
| 2.2.2 是否制定年度工作计划 |  |
| 2.2.3 参与OPA老年人数量 |  |
| 2.2.4 参与OPA老年人性别比例 |  |
| 2.2.5 接受培训的次数及内容、人数 |  |
| 2.2.6 进行培训的次数及内容、人数 |  |
| 2.2.7 OPA领导的情况 |  |
| 2.2.8 资金和设备物资的日常管理 |  |
| 2.2.9 与其他OPA的交流 |  |
| 2.3 OPA的可持续性 |  |  |
| 1,080个老年人和他们的家人（2,550人）从12个OPA得到生产资料， 包括180个老人从转移收益中获益； 90% 的OPA生产资料受益者收入增加或改善食品消费； 至少目标社区2,000个老年人获得1次或更多的项目培训或信息交流会（共120次）以改善生计。 | 3. 老年人生计 | 3.1 生产资料的提供 | 3.1.1 是否制定贫困标准 |  |
| 3.1.2 确定救助对象的数量、性别比例 |  |
| 3.1.3 是否为救助对象设计商业计划 |  |
| 3.1.4 提供的生产资料及类型 |  |
| 3.1.5 收入是否增加（注意区分项目原因还是社会保障等其他原因）：与未参加老年协会的老年人对比 |  |
| 3.1.6 获益转移情况（数额及收益对象）：生产资料带来的收益将会流转，至少再让180名贫困老人从中受益 |  |
| 3.2 生产发展的培训与支持 | 3.2.1 来自项目的生产的培训次数、内容、方法、参与者 |  |
| 3.2.2 是否进行不定期的监督和每个乡村的学习交流 |  |
| 3.2.3 来自当地政府的村级继续培训与指导 | 3.2.3.1 是否进行村级实用培训，内容是什么 |
| 3.2.3.2 培训频率 |
| 3.2.3.3 培训者 |
| 3.2.3.4 培训地点 |
| 3.3 与政府的生产培训和服务的联系 | 3.3.1 OPA领导人直接拜访乡和县政府部门次数及内容 |  |
| 3.4 自助组 | 3.4.1 自助组数量及类型、人数（县级培训班） |  |
| 3.4.2 自助组的活动次数及内容 |  |
| A. 1800名老人能够获得体检，1500名老人能够获得家庭护理或者自我护理培训。 B. 通过项目对老年人家庭成员或者志愿者的培训，12个社区至少180名高危老人能够从中获得更加有效的家庭护理。 C. 通过培训，30名乡村医生能对老龄化问题更中敏感，从而能够为老年人提供更加有效的医疗护理。 | 4. 老年人医疗护理 | 4.1 针对老年人的医疗护理意识情况（老龄化问题缺乏理解和敏感性） | 4.1.1 医疗部门对老年人的医疗护理意识 | 4.1.1.1 医疗部门的健康老龄化培训 |
| 4.1.1.2 是否学到在治疗老年病人和鼓励健康老龄方面所应注意的特殊事项 |
| 4.1.1.3 是否有必要针对老年人提供医疗护理 |
| 4.1.2 乡村医生对老年人的医疗护理意识 | 4.1.2.1 乡村医生的健康和老龄化培训 |
| 4.1.2.2 是否组织和进行老年人的体检 |
| 4.1.2.3 是否向老年人宣传健康知识的简单方法 |
| 4.1.2.4 是否告知并帮助老年人获取公共医疗服务 |
| 4.1.2.5 是否有必要针对老年人提供医疗护理 |
| 4.1.3 家庭成员对老年人的医疗护理意识 | 4.1.3.1 家庭成员是否践行对老年人医疗护理 |
| 4.1.3.2 是否有必要针对老年人提供医疗护理 |
| 4.1.4 老年人自身对老年人的医疗护理意识 | 4.1.4.1 是否关注关心自己的身体健康和医疗问题 |
| 4.1.4.2 是否知道政府的相关医疗服务 |
| 4.1.4.3 老年人认为体检是否必要） |
| 4.2 老年人获得的医疗服务情况（便利） | 4.2.1 老年人的健康检查情况（体检） | 4.2.1.1 是否提供过老年人健康体检 |
| 4.2.1.2 老年人是否接受过健康体检 |
| 4.2.2 当地卫生部部门（县乡卫生部门） | 4.2.2.1 是否提供年度体检和政府医疗服务咨询 |
| 4.2.3 家庭护理和自我护理 | 4.2.3.1 老年人协会是否开展家庭护理培训/相关群体是否参与/获得相关培训 |
| 4.2.3.2 家庭护理会议（指导家庭和社区如何护理高危老年人）：是否有志愿者参与家庭护理/是否有信息分享或与家庭护理相关的分类培训/是否召开参与人的定期会议 |
| 4.2.3.3 自我护理-乡村医生是否通过老年人协会向老年人及其家属提供相关知识/老年人及其家属是否获得相关培训 |
| 4.2.4 老年人医疗设施情况 | 4.2.4.1 老年人是否能够获得家庭护理的器具 |
| 4.2.4.2 乡村医生是否免费得到购买的医疗设备（以补偿他们对老年人的体检服务） |
| 在项目第2年，至少3个当地机构合作在新的县建立4个OPA；4个边缘化村庄大约736个老年人和1,760个家庭成员从OPA的生计、社会或医疗护理活动中收益；CNCA使用 OPA 培训模块 和2个培训专家培训至少25个项目目标区域外的当地机构官员。 | 5. 项目的复制与推广 | 5.1 政府的项目复制能力 | 5.1.1 复制的区县及分布 | 此部分与2、3、4部分有重复 |
| 5.1.2 是否出台相关政策 |
| 5.1.3 从项目中的收益 |
| 5.1.4 当地机构能力建设情况 |
| 5.2 OPA的复制 | 5.2.1 新目标社区OPA的情况 |
| 5.3 生产发展培训的复制 | 5.3.1 新目标社区生产发展培训的情况 |
| 5.4 医疗护理培训的复制 | 5.4.1 新目标社区医疗护理培训的情况 |
| 5.5 培训模块纳入全国老龄工作委员会办公室培训计划 | 5.5.1 是否培训模块纳入全国老龄工作委员会办公室培训计划 |
| A. 老年协会在陕西省最好的项目方案至少在国内其他三个省的非国家行动者和当地政府中备记录并推广。 B. 项目培训内容能够独立地复制或适应至少10个非项目老年协会。 | 6. 项目的记录与宣传 | 6.1 电子和印刷材料情况 | 6.1.1 是否有项目活动报告 |  |
| 6.1.2 是否制作项目宣传介绍册 |  |
| 6.1.3 是否制作宣传简报 |  |
| 6.1.4 是否向媒体引介该项目的活动 |  |
| 6.1.5 是否在国际助老会的杂志和简报中刊出 |  |
| 6.1.6 是否被全国老龄工作委员会办公室/国际助老会网站分享 |  |
| 6.2 其他三省份学习访问项目实施地区情况 | 6.2.1 是否组织其他三省份参观陕西项目实施地 |  |
| 6.2.2 是否每省选派三名工作人员参加学习培训 |  |
| 6.3 记录其他省区的技术创新情况 | 6.3.1 是否确定和记录其他三省区地方政府支持的老年人协会的技术创新 |  |
| 6.3.2 项目组织者是否编制技术创新文件 |  |
| A. 项目活动按照工作计划高效完成； B. 项目预算支出超过95%，通过审计报告证明的有效的财务管理。 | 7. 项目的合作与执行 | 7.1 项目办公室 | 7.1.1 是否建立项目办公室 |  |
| 7.1.2 办公人员及构成 |  |
| 7.2 项目咨询委员会 | 7.2.1 会议次数及内容、参与人员 |  |
| 7.2.2 人员及构成 |  |
| 7.3 项目工作人员 | 7.3.1 项目财务官员 |  |
| 7.3.2 国际助老会的区域项目经理 |  |
| 7.3.3 两名老年人协会支持官员 |  |
| 7.4 合作方和当地机构的项目培训 | 7.3.4 培训内容、人员及构成 | 7.3.4.1 项目目标和活动简介 |
| 7.3.4.2 老年人协会的作用 |
| 7.3.4.3 责任和协调的再次确认 |
| 7.3.4.4 对欧盟的财务、行政、和其他要求的重申 |
| 7.5 基线调查 | 7.5.1 是否完成基线调查并提交报告 |  |
| 7.6 项目监督 | 7.6.1 项目工作人员是否完成对老年人协会的月访 |  |
| 7.6.2 国际助老会是否完成季度监督和工作安排访问 |  |
| 7.6.3 陕西省老龄工作委员会办公室是否完成对每县活动的季度访问 |  |
| 7.6.4 全国老龄工作委员会办公室是否完成对陕西省的一年两次访问 |  |
| 7.7 中期评估 | 7.7.1 是否完成中期评估并提交报告 |  |

1. Conducted field investigations in 8 villages, and talked with in total 10 OPAs (2 more were not listed in the plan but invited by county CA to the township place for short meeting). [↑](#footnote-ref-1)
2. While asked for scoring the project performance, it was always difficult for old people to distinct “items not satisfied” with “expectation from and recommendation to the project” which caused the result of the “H tool” evaluation. [↑](#footnote-ref-2)
3. For instance, invited to entertaining some local commercial activities with payment. [↑](#footnote-ref-3)
4. Minimum for the registration of NGO and NPO in China. [↑](#footnote-ref-4)
5. If the functions of OPAs in the future are expected to expand to more on community development, the cost of OPA leaders on communication with outside will definitely increase. [↑](#footnote-ref-5)
6. Especially in less developed areas. [↑](#footnote-ref-6)
7. Inside village committees including abandoned primary school buildings in most of the villages investigated. [↑](#footnote-ref-7)
8. From the 8 OPAs investigated, only one (Lisi of Huaxian) made a clear rule on issuing OPA membership card for members. So far, most OPAs just assume that all people above 60 are the members automatically. One OPA asks for written application which was considered as not very applicable. [↑](#footnote-ref-8)
9. Not necessarily to go far but start from neighbouring communities and within their counties. [↑](#footnote-ref-9)
10. In fact, the constraints that older people are confronting as observed in the investigated project villages are also those constraints and difficulties for most of the rural older people in less developed areas in China. [↑](#footnote-ref-10)
11. As local implementing agency of the project. [↑](#footnote-ref-11)
12. In fact, the aging committee can be defined as one of the most powerless and vulnerable organization at county level. [↑](#footnote-ref-12)
13. As designed, the project should have spent out 95% of total budget, however, according to PMO, the figure at the moment is 94% when there is still more than 1 month to the project closure. [↑](#footnote-ref-13)
14. According to project logframe, the assignment was 1080 [↑](#footnote-ref-14)
15. However, the evaluation find out that the productive assets (later the seed money) and free physical checkups are the most difficult components to be replicated in non-project areas. [↑](#footnote-ref-15)
16. 合作、交流、来访、检查等。 [↑](#footnote-ref-16)
17. 合作、交流、来访、检查等。 [↑](#footnote-ref-17)