**Final Report**

**Final Evaluation**

**Of**

**“Promoting Older People’s Participation in Development in Rural Bangladesh Project”**

**Submitted to:**

**HelpAge International, Bangladesh**

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# Acronyms

EC=European Commission

EU= European Union

EUD= European Union Delegation

LA =Local Authority

LFA= Logical Framework Analysis

LGI= Local Government Institution

MDG= Millennium Development Goal

NGO = Non-Government Organization

NSA = Non-state Actors

OP= Older people

OPA = Older People’s Association

POPA= Promoting Older People’s Association

POPP=Promoting Older People’s Participation

RIC =Resources Integration Centre

VGF=Vulnerable Group Feeding

VGD= Vulnerable Group Development

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# Executive Summary

* Promoting Older People’s Participation (POPP) in Development in Rural Bangladesh Project is a unique initiative of HelpAge International in partnership with Resource Integration Centre (RIC) and with financial supports from the European Union to address needs and priorities of older people. The ageing would be the emerging development challenge in coming future for the government of Bangladesh and development agencies as well. However, the project raised the ageing issue on forefront as a vanguard to policy planners and development actors as thought provoking matter. All actions and subsequent results made by the project are new in development discourse of Bangladesh. Whatever achievement is made by these actions are the first milestone on aging issues and footprint in respective area of development.
* The project concept-OPA formation and use them in development actions, design and strategies were unique. The setting of objectively verifiable indicators to measure changes on goal level is required additional attention. The project actions i.e., formation of OPA, capacity strengthening of LGIs and OPAs, and implementation strategies-bringing all actors in single board -were well articulated and linked with specific outputs against actions. The results level indicators could be more specific and sharpened to present achievements in addressing the goal of the project. The LFA indicator like OPA formed and functional, numbers of LGIs representatives trained, “338 strong community based organisations give older people a more participatory voice’are mostly output level indicators. The measurable indicators on improvement of quality of life and change of condition and position of beneficiaries could be more specific and effective.
* The project design was contextually, geophysical and socially relevant to address needs of beneficiaries. The location and direct stakeholders-beneficiaries- are quite appropriately defined for capacity building and enhancing access to supports and services. From the standpoint of development dynamics, intervention logic, and strategy of targeting beneficiaries and intervention process are most relevant re design and action in achieving objectives.
* The Funding strategy of EU in Bangladesh covered three focal areas (Human and social development; Governance and human rights; and Economic and Trade development) and two non-focal areas (Environment and Disaster Management and Food Security and Nutrition). NSA covered majority of first focal area Human and Social Development, partially of second focal area ‘promoting gender equity and empowering women and second area of non-focal areas on Food Security and Nutrition. The project is clearly focused to and consistent with EU Country Strategy in Bangladesh and supporting strategy to achieve millennium development goal.
* Targeting older people- the vulnerable of the vulnerable- is a unique, humanistic and rationale approach for the betterment of aged segment of society. Targeting and conducting development actions with OP is challenging due to family structure, inherent social system, traditional values and culture that restrict congenial environment for target people. All “poverty reduction programs have targeted the most vulnerable, but ageing issues have not been mainstreamed. The project has addressed this needs and priority of beneficiaries and strengthened capacity to reduce food insecurity and vulnerability.
* The overall objectives are clear, logical, correctly linked and address the identified needs of the elderly people. There were no OP organizational structures, high marginalization and low participation of OP with Local Authorities (LA), limited access to health services and high vulnerability to natural disasters were common. Training, orientation and event arrangement for capacity strengthening of OPA and LAs are very well designed and followed appropriate strategy to address issues of OP. The project actions contributed to empower 338 village-based civil society organizations led by older people to engage with LA for more effective, transparent and inclusive local services addressing their poverty and health.
* The efficiency level of the project was high which has been possible due to commitment of HAI and high level of expertise of RIC´s personnel. The long term partnership between HAI and RIC is facilitating implementation and resources are managed in a transparent and accountable manner. The human resources cost for the project was 41.48 percent (Euro 275541) of the total budget (Euro 664120) which rationale in the context of capacity building project. Generally, in capacity building project, up to 55 percent of total cost is considered as rationale cost for human resources. By taking into account of this issue, the project was cost-effective one. The total budget for the office supplies per unit at district and Union level was Euro 9.19 and 6.63 respectively. It seems very low budgeted items. From the cost effectiveness point of view, it was very efficient but sometime filed staff had to face challenges to meet the wants as per requirement. As the project worked with the most respected older people, so the provision for entertainment could be made within the project structure. The budget disbursement to partners’ against results was efficient and the process was timely, effective and efficient. HAI has provided the matching funds for the first year (29.489 €, 25% of the 1st year expenditure which is highly efficient actions. In all respect, the project was efficient and cost effective.

* The linkages with LGIs, social safety-net supports like VGF, VGD, old age allowance, widow alliance, etc., focused to mostly enhance access to support and services while NSA is development action focused project that lead to development through enhancing access to supports and services along with capacity building actions. Targeting older women undoubtedly an innovative approach and intervention logic like increase access to asset- that the women lacked due inheritance law- empowered them and made them able to generate income for livelihood security. The POPP contributed to reduction of food insecurity via increase access to supports and services, vulnerability of livelihood and at the same time awareness supplemented household income through health care cost reduction, decrease nutritional deficiency.
* Participants in orientation meeting was 5,251, of them 836 was female which is about 15.9 per cent[[1]](#footnote-1) of total participants. In public places women’s participation is found less than their male counterpart. The baseline data shows that 1.9 percent male of Gangachara and 10.8 female and only 7.5 percent male received VGD Card[[2]](#footnote-2) during the project period. Of the total 17000 beneficiaries, 5626 and 5249 of Gangachara and Maheshkhali has received OAA which is about 33 per cent in Gangachara and 31 per cent of Maheshkhali sub-districts. The baseline survey findings show that 10 percent in Gangachara and 11.5 percent in Maheshkhali received the same services. Out of 311 high vulnerable male and women, 89 were bedridden. Of them, 48 female and 41 male got the home care supports from the project. Volunteers served them daily basis. In this case more women were served against their male counterpart. However, it is to be mentioned that in case of supports and services receive female are prominent while case of participation in public places meetings and orientation, the participation of male are more vibrant than their female counterpart.
* The project impacted in many areas, i.e., in enhanced participation and empowerment of the rural poor in respective areas of Bangladesh especially OP-the direct beneficiaries. The OPAs have become an integral part of the community with higher levels of awareness and information on their needs, their common problems and their rights. The project actions have impacted on improvement of relationships with service providers re elderly issues and increased savings of OPAs. Despite, failure to maintain the saving scheme functional in significant OPAs, substantial improvement is visible in Union level OPAs. OPs are organized in groups for the first time in Bangladesh and they are in a much better position to reduce their chronic vulnerability and food insecurity.
* The OPAs has been able to increase their role in the community, improve social protection of the most vulnerable elderly people through their actions and participation. The lobby for their needs was addressed by LA and other service providers that are outcome of establishing relationship. It resulted to increase access to supports and services from the government and local government institutions. The OPAs actions have contributed to increased disaster preparedness through DRR action plans considerably. Participation, ownership and confidence of OP in all the villages have improved with considerable exception. OPA formation is definitely outstanding and effective actions to address the needs of old age people. Virtually OPAs are facilitating to this group to other private and public services. Alongside, through capacity building efforts OPAs has proved as CBO and getting registration of OPA is stepping towards sustainability of achievements and actions.
* Monitoring team at each level was formed and effectively functioned during project period. Such monitoring system helped OP to prepare list of OP, data collection on status of old age people, and monitored actions at the community level. Before phasing out of the project, there was need to prepare a guideline on operational modalities of them after completion. However, it could be done for the sustainability of action and achievements.
* Home care services for the isolated, most vulnerable and bedridden older people through trained volunteers with minimum supports is completely a new idea. It has supported a significant number of older people of 20 villages. After training the volunteers were given some basic instruments to provide services. The use of apparatus for pressure measurement, blood sugar test, etc was a bit difficult for trained volunteers due to short orientation. The skill development training on use of such apparatus could make volunteers more confidents to use them.
* Local ownership was encouraged by involving local government representatives in implementation process and by using NGO’s knowledge and experience of working with OP. However, timeframe was tight and had little room for a flexible approach to accommodate variations, identify challenges and adopt them in actions to create local ownership. Despite, the design, actions modus operation has created considerable local ownership. Making contribution to support IGA by OP, taking health services from Government hospital, doctors and private practitioners provide health services to older people with free of cost are some example of local ownership. Local government institutions also support them within their jurisdiction.

# Introduction, Background and Methodology

## 1.1 Introduction:

Promoting Older People’s Association (POPP) in development of rural Bangladesh is initiated to address the needs of older people’s through strengthening capacity of non-state actors. Among huge development issues and challenges, ageing and development is remained out of key focus and priority of government’s development plans and programs. EU funded the Non-State Actors capacity strengthening program and has been implemented by HelpAge International in partnership with Resource Integration Centre (RIC). The project is located in three sub-districts like Gangachara of Rangpur, Maheshkhali of Cox’s Bazar and Pubail Union at Gaspar Upazila. At the end of the project, it was needed a final evaluation of project’s achievements. It was inbuilt actions in project document and was due at the end of project’s life span. To measure the progress, outcomes, and achievements against expected results to comply with the set indicators on results and outcomes level in project log-frame. The evaluation process covered the issues re strengths and weaknesses, problems and challenges faced during implementation and strategies. It was also investigated the adopted strategies to overcome challenges during implementation period. Accordingly, make suggestions and recommendations for taking corrective measures on adopted strategies for effective implementation of similar actions in future. However, the evaluation has formulated lessons learnt that might be useful for further expansion of similar project after completion.

## 1.2 Project overview

Older population has been growing day by day in Bangladesh. The issue of ageing is not yet mainstreamed in development programs, so capacity building of non-state actors of project areas in ensuring access to supports and service of older people through effective actions was considered as means to address ageing challenges. The POPP project was design to address ageing problems with aim to ensure access to supports, create space for them in rural development actions, and reduce loneliness through supportive actions by identical cohort. Owing to several challenges, older people remained away from access to government and non-government organizations. The access and rights of people irrespective of age, sex and ethnicity are recognized by the constitution of the People’ Republic of Bangladesh, but their rights are properly protected and they are away from them. It is felt that the capacity enhancement and sensitization of non-state actors would open up a window for the older people and will contribute to improvement of their livelihood. The project actions were implemented in Maheshkhali Upazila of Cox’s Bazar, Gangachara Upazila of Rangpur and Pubail Union of Gazipur Upazila for the period of March 2009 to February 2013. It covered 19 Unions and supported to only older people.

Overall objective was to enhance participation and empowerment of the rural poor in Bangladesh through joint efforts of Non State Actors and Local Authorities with technical and financial assistance from EU, HelpAge and RIC. It focused on OPAs formation and strengthening their capacity to raise voice in relation to their access to and inclusion in poverty reduction actions, allowances, health services and disaster risk reduction program for rural development. It also supported to build capacity of NSAs to develop sustainable OPAs as community based organizations and to create linkages with LA for enhancing transparent and responsive service delivery to the community. However, the final evaluation focused to accumulate the success and challenges and way forward for future actions with similar objectives.

## 1.3 Expected Results of the Project

The results of this project are as follows:

a) 338 strong community based organizations give older people a more participatory voice;

b) National NSA partner increasingly capable to develop sustainable community based organizations that can advocate for older people;

c) More effective, transparent and inclusive local support to address the poverty of the most vulnerable;

d) More responsive and appropriate local health care and expanded health seeking behavior for older people; and

e) Older people in 19 Unions are better prepared for natural disaster.

The project expected that the actions for capacity building of Non State Actors to develop sustainable community based organizations. Actions also focused on participation of OPs in democratic local governance, improve linkages among Non State Actors, Local Authorities and older people to enhance effective service delivery to the community people.

## 1.4 Objectives of the Evaluation

The objectives of the final evaluation are:

i) To make an independent assessment about the past performance of the project paying particular attention of the project actions against its set objectives;

ii) To assess how effectively and efficiently project activities attain its goal;

iii) To provide evidence on project impacts on older people in rural Bangladesh;

iv) to identify key lessons and to propose practical recommendations for follow up actions.

The evaluation of the project was conducted in line with the criteria like impact, relevance, efficiency, effectiveness and sustainability of project’s achievements and actions. However, the evaluation was design by taking the evaluation objectives in prime focus of interest to respond the needs. The final evaluation (ToR) delineated some specific questions to give answers of requirements. Those questions are; to what extent the community based organizations give older people a more participatory voice? does the National NSA partner increasingly being capable to develop sustainable community based organizations that can advocate for older people? If yes, to what extent? Does the local support are more effective, transparent and inclusive to address the poverty of the most vulnerable? How and to what extent those supports are transparent and inclusive? Do the local health care supports are responsive and appropriate? Does the health seeking behavior for older people have expended? If yes, to what extend it has been expanded? And do the older people in 19 Unions are better prepared for natural disaster? If yes, to what extend? How that has been achieved? Do the local government and local authorities are responsive to the old age people? If yes, do the project actions have contribution to make them responsive? How they contributed to achieve the result? The answer to these questions leads the evaluator to make understand and put substantial and workable recommendations for the future program intervention in respective field.

## 1.5 Methodology of evaluation

The POPP project focused to strengthen older people’s organization to build them as sustainable community based organizations and make non-state actors capable to enhance access to supports and services in the form of allowance. Taking these into consideration, a qualitative method was design to conduct the evaluation. As issues and concerns of capacity enhancement actions are mostly anecdote in nature so qualitative tools and techniques have been used to capture and accommodate the evaluation requirements. The project personnel of HelpAge and staff of its partner were consulted during design the methodology. It is envisaged the review was flexible; rely upon a spirit of open inquiry. In spite of that, a three staged methodology was followed to conduct the evaluation. All five specific results are addressed through document review (PP, progress monitoring reports, specific publications on projects, etc), consultation, and participatory exercises with participants (older people), respective project personnel and stakeholder group (UP Chairman and members, Doctors of Hospital, private clinics and setline clinics, staff members of RIC, etc.) The whole process of methodology is detailed as follows.

**First phase:** Collection of documents like secondary information (reports and research reports), existing publication of project, existing data were used as sources of secondary information. At this stage, review of relevant reports/documentations including Baseline study, midterm evaluation, and quarterly reports to get a comprehensive understanding about the project was done. It helped to grasp concepts, essence, progress and strategies and identified key issues and concerns on actions and achievements. A sharing session was arranged in participation of staff of HAI and RIC. The evaluation action plan, sampling framework design and modalities were develop and finalize in this stage.

**Second Phase: Field visit:** The consultant along with the research associate visited fields and conducted preparatory exercise like FGD with OPAs of village and Union levels. FGD with ward and union monitoring team, one to one interview with trained volunteers of home care services, medical doctors, private practitioners, community clinic services providers, rural doctors, UP members and chairmen, community leaders, etc. During all FGD and interview, discussion lead to overview on progress of actions and achievements, followed strategies, relevancy, efficiency and effectiveness of actions, sustainability of achievements and actions and their recommendation for improvement of the project actions.

**Third Phase:** After completion of two field visits, one experience sharing meeting on findings was arrange in participation with evaluator and project personnel. At the meeting, evaluator shared draft findings. The evaluator visited the next field, analyzed data and prepared the report.

**Sample areas selection:** Of the19 Unions, 8 unions from the program areas namely Gajaghanta, Laxmiteri, Kholyea and Gangchara Sadar Union of Gangachara Upazila and Choto Maheshkhali, Boro Maheshkhali, Matarbari and Shaplapur of Maheshkhali Upazila were selected. In addition, Pubail Union of from the replication area also covered by the evaluation. However, in total 9 unions were visited by the evaluation team. Two FGD with beneficiaries, two KII, one in-depth interview with and stakeholders, one interview with local bodies were conducted in each Union. In addition, one meeting in each area with the staff available was conducted.

**Limitation of the Methodology**: Both baseline and midterm review were conducted in combination of quantitative and qualitative approach but the final evaluation is conducted by deploying only qualitative method. As a result, comparative analysis of quantitative data has not been possible in all cases. In making comparison, monitoring data is used wherever possible. Due to consecutive strike during field work hampered data collection process and that delayed to complete the final evaluation.

# Chapter-II: Status of Achievements and Challenges

# The ‘POPP in Development in Rural Bangladesh’ project had specific intervention logic and aim to achieve expected results. The final evaluation looked into the relevancy re project design, efficiency in terms of cost of inputs against outputs, effectiveness of performed actions lead to outputs and results, impact as consequence performed actions, sustainability of achievements and actions and visibility of actions. The findings and challenges are portrayed as per EC reporting system in the following sections.

## 2.1 Relevance of the Project:

The relevancy is measured in terms of responsiveness of actions to an inclusive demand, to the agreed strategy and real needs of beneficiaries, clearly identified range of stakeholders who are- in some way- affected by the activities and results, linked to problems and solutions identified by beneficiaries and stakeholders, etc. It is also assessed re contextual issues, approach of actions, addressing critical needs of respective section of people, location of actions, social differentiation and equitable outcomes.

“The relevance and appropriateness of design and interventions in achieving objectivesfrom the standpoint of development dynamics, intervention logic, strategy of targeting beneficiaries and intervention process are key issues. *Targeting older people- the vulnerable of the vulnerable- is a unique, humanistic and rationale approach for the betterment of older segment of society owing to government development programs rarely addressed and initiated to integrate ageing in mainstream.* Targeting and conducting development actions with older people is difficult task for traditional family structure, inherent social system, traditional values and culture that restrict congenial environment for target people. All “*poverty reduction programs have targeted the most vulnerable, but ageing issues have not yet been mainstreamed*. It is estimated that 43% of older people (OP) belong to poor households, where they often have the lowest priority in terms of food, money and health care”[[3]](#footnote-3).

The overall objectives and expected results are very clear, logical, correctly linked and address the identified needs of older people. There was no formal organizational for OP, high marginalization and low participation of them with Local Authorities (LA), very limited access to health services and high vulnerability to natural disasters are common feature. Older women face particular discrimination. The formation of OPA, actions like training, orientation and event arrangement for capacity strengthening of OPA and LAs are very well designed and it followed appropriate strategy to address OP’s issues. The project actions have contributed to empower 338 village-based civil society organizations led by older people to engage themselves with LA for more effective, transparent and inclusive local services those addressing their poverty and health needs. It leaded to achieve overall objectives like enhance the participation and empowerment of rural poor in Bangladesh through the joint efforts of NSA and LA. So, the design and strategies are found relevant to the ageing issue.

The linkages with LGIs, social safety-net supports like VGF, VGD, OAA, widow alliance, etc., focused to mostly in enhancing access to supports and services, while NSA is development action focused to project that lead to development through enhancing access to supports and services along with capacity building actions. POPP project is considerably consistent with the government social safety nets program and with the millennium development goal set by Bangladesh. In spite of that strategic goal, the participation of older people in development is key points in this regard. Targeting older women is undoubtedly an innovative approach and intervention logic like increase access to asset- that the women lacked due inheritance law- empowered them and make them able to generate income for livelihood security. Accordingly, POPP contributed to reduction of food insecurity via increase access to supports, reduce vulnerability of livelihood and awareness supplementing to household income by health care cost reduction and decrease nutritional deficiency. *The project actions are relevant and in right truck re objectives and expected outputs.* Moreover, targeting older people irrespective of age, rationale of set expected results and its achievements, target, intervention logic and strategies to reach objectives, the project design was efficient and relevant. The issue specific relevance is presented in the following sections.

*An older women of Laxmiteri union said, “I have been suffering from old age complicacy and need to visit doctor on a regular basis. Earlier, I had to pay fees for doctor and medicine separately which was unbearable for me. After getting involved with OPA committee, Mr. Salam-secretary of the committee accompanied me to a doctor and requested him to support the older people. Since then the doctor do not take any fees from me”*

* + 1. **Conceptual Relevance:** The provision of community based group formation with older people at village, ward and union levels, formation of separate monitoring team beside each committee, building capacity to increase access to supports and services and promotion of them in local level development actions are effective and relevant concept for the older people. *Creating scope and space of older people in development actions for improved and more sustainable livelihood is sound concept especially when propensity to make savings and investment of saved amount in income generating projects is encouraged. Subsequently, enhancing ideas to promote OP to make self help group in critical situation of life is sound concept.*
    2. **Contextual issues:** POP’s participation in rural development project was designed and implemented for two extremely critical areas with extreme poverty at Gangachara and high cultural diversity and wider gap between rich and poor in Maheshkhali. Poverty and cultural diversity were key factors in addressing needs of OP. The first location is at extreme north, while the rest Maheshkhali at extreme south of the country. Alongside, *cultural nuance like allowing women’s participation in public places and events, attitude and perception towards women’s role in decision making, and their position in society seems more restricted at Maheshkhali in comparison to Gangachara. The participants of FGD in Moheshkhli were less than the Gangachara.* The projectactions are addressing extreme poverty, location and culture specific traits like exclusion of older people especially women in development are quite relevant. Both social and economic dispersion within the community is higher in Maheshkhali while only economic dispersion is higher but social dispersion is low in Gangachara.
    3. **Funding strategy of EU in Bangladesh:** The EUD funding strategy to Bangladesh covered three focal areas (Human and social development; Governance and human rights; and Economic and Trade development) and two non-focal areas (Environment and Disaster Management and Food Security and Nutrition). *NSA covered majority of first focal area Human and Social Development, partially of second focal area ‘promoting gender equity and empowering women and second area of non-focal areas on Food Security and Nutrition*. The project is clearly focused to and consistent with EU Country Strategy in Bangladesh.
    4. **Relevancy and Appropriateness of Log frame and Project Actions:** Log frame –the guiding document of project- helps management to make decision and creates scope to make comparison of achievement made by project actions over the different timeframe. The log frame (approved version) was detailed in terms of expected results, objectively verifiable indicators, means of verification and assumptions. The weak point of the log frame is that OVIs are not always defined in a SMART way, especially those did not relate to the overall objectives, nor are they specifically related to the inclusion of elderly women and/or elderly poor. The most indicators are relevant to output and lacked result level indicators.
    5. **National Strategy of the Government of Bangladesh:** The older people’s concept embodies (not specific) in MDGs 1 and 3 that is
  + Eradicating extreme poverty and hunger
  + Promoting gender equity and empowering women, and

However, in the context of the expected results there is a potential for direct impacts to MDG’s 1 & 3. The project has been contributing to reach the MDG targets.

* + 1. **Relevant in addressing critical needs of older people in rural Bangladesh:** The older people’s needs are more divergence and heterogeneous which are different from usual needs of the people. The participatory evaluation tried to find out the needs of the older people and the way the project address those issues. Among challenges, disrespect by young generation, unavailability of and inaccessibility to health services as per their need, food insecurity within the family, loneliness and isolation within and from family and community and lack of integrity of OP seems great challenges. The project actions e.g., formation of OPAs to make them united, initiative to integrate *OPs in family and through united efforts of OPA members, inclusion of them in UP standing committees, self-help actions like savings for crisis management and support to income generation activities by OPA members, establishing linkages and creating preferential space for OP in getting access to health care support from caregiver are remarkable actions to address needs and priorities of OPs.* *These initiatives are relevant to the address the needs and priorities of old age people.*
    2. **Relevance of Project Design and Implementation strategies: Relevance of Project Design:** The socio-cultural characteristics of targeted sub-districts substantially different in many ways and vulnerability level vary re geographical, social, economic, factors. Whilst the concept of OPA is sound because 17000 older people are in same platform, 338 village level organizations has developed but the fact that the design did not take into account of these differences- especially vulnerability- indicates a number of limitations that has impact on outcomes irrespective of how well the projects are implemented. OPAs seemed an ambitious idea in tackling challenge of OP through enhancing participation and empowerment of them in Bangladesh through joint efforts of Non State Actors and Local Authorities in a wide range. However, 338 OPA formations and keeping functional of a significant proportion of them is not an ambition but reality now. The activities designed to bring about changes in social position and engage them in local development was a long term proposition, while within the short duration it has been possible a result of commitment and dedication of staff and management. However, project duration is considered short for addressing long term proposition re sustainability. This is true given that the project was required to respond to major challenges and to improve and enhance opportunities in extremely vulnerable and variable locations for more sustainable and improved livelihoods to results.
    3. **Problem identification/analysis:** The problems identified and defined in character as ‘lack of dignity and food security at households, alienation of OP within family and society and limited access to health care services. This describes a situation without identifying causes of these insecurity and vulnerabilities of OPs. There was a need for location specific problem identification and analysis; probably it was the missed opportunity to address gender issue within the project framework. Without such analysis, aspects of vulnerability cannot be taken into account or indeed the propensity of actions to militate against identified challenges re geographical and other variations in vulnerability. NSA did not therefore take fully into account either the location specific challenges or opportunities and as such is limited in contextual problem analysis.
    4. **Stakeholders:** In addition to selected 17,000 OPs (both male and female), 294 elected representatives of Union Parishad (Local Government Institution) were beneficiaries - primary stakeholders. Two main sets of stakeholders were Local Government, at regional and local levels and the implementing |NGO’s. Whilst the HelpAge was designated official implementing agency. The relationship and propensity of cooperation between the secondary and primary stakeholders were correctly identified by the project. The NGO was responsible for selection of beneficiaries against agreed criteria. The selection criteria were followed in selection of beneficiaries in both the project districts and criteria like 60 and above age was consistent with demographic criteria of BBS.
    5. **Institutional Capacity**: Institutional capacity building provision and relevant actions for local government and community level OPAs were entrenched within the project design. However, the term ‘institutional capacity building’ appears in reality to have been interpreted as an orientation program with regard to project design and implementation. The project is implemented at the root level in collaboration with local authorities, who had little or no scope of changing policies. *But increased knowledge and supportive mentality of secondary stakeholders has developed towards OP’s challenges as result of project actions. It is relevant to accommodate those under supports and services of local government institutions*. The secondary stakeholders have unofficially set norms to support the OP within their jurisdiction as consequence of awareness and capacity building actions.
    6. **Local ownership:** Local ownership was encouraged in respective projects by involving LGI representatives in implementation process and by using NGO’s knowledge and experience[[4]](#footnote-4) of working with communities. However, project implementation schedule was tight and had little room for a flexible approach to accommodate variations, identify challenges and adopt them in actions to create local ownership. The project design consisted substantial and relevant actions that created considerable local ownership. Integration of GO and NGOs’ experiences in project is an important and relevant action of the project.
    7. **Strategy to identify and analyze external factors and relevant stakeholders:** There is little evidence of a contextual analysis in terms of identifying challenges that would be faced or opportunities to be optimised on a location specific basis. The baseline survey and mid-term review were conducted with lots of indicators but rarely addressed key indicators re Log-frame especially OP’s organizations and their functional traits.
    8. **Strategy/key factors for improved food security and empowerment:** The concept for improved food security through enhancing access to safety net is sound approach especially for older people. However, activities list tended to be regarded as a static and definitive and most were access to social safety-net supports, health services and was definitely not appropriate in all cases. Integration of older people in household, increase access to support and services, enhancing social position of older people within the household and community seems relevant to address challenges of people.
    9. **Formation and functions of CBOs:** The formation of groups (mainly OPA) is considered highly relevant and an extremely important development for the empowerment of old aged men and women. The 338 community based organizations were formed to make the work of ‘training’ more manageable and to establish a savings group bank account into which savings were deposited. The OPAs were capacitated to give older people a more participatory voice in local level development actions. The CBOs/OPAs at the union level in most cases found vibrant while the villages level OPAs could be more active. The formation of OPAs is the most relevant project actions since such organization had created scope of showing OP as social power against the idea about OP as obsolete and burden of family and society.
    10. **Initiatives to accommodate OPA members in local development:** The initiatives to include OPA members in local government standing committees, village court, and other development program were important actions and relevant to address issues like alienation of OP from the mainstream. Such initiatives had enhanced access to formal and informal bodies at the community and local levels.
    11. Implementation Strategies
* **Training: Skill and Awareness Building and Process:** The training of primary stakeholders’- beneficiaries- provided primarily by the NGOs. However, actions in most cases consisted of short orientations but not training - on a diverse set of issues like food security, health and nutrition, rights of OP. In addition, technical issues like IGAs, self-help activities operation, etc., were conducted. The strategy of self help activities operation and generation of fund from local sources could be more focused rather than making it adhoc basis.
* **Involvement of LGIs in project implementation:** Union Parishad was the body responsible to provide support and services to people based on set criteria. Initiatives of coordination and cooperation between OPA and Union Parishad were relevant action to ensure access of OP to supports and services. *Involvement OP in beneficiaries’ selection for older people allowances and widow allowance created scope of fair selection, accountability of LGIs to the common people and creation of scope of older people participation in development actions*. It was sound idea and very relevant to address the challenges of old age people.
* **Clear and useful Log-frame matrix and resource/cost schedules**: It is unlikely that the field investigation would indicate positive results according to the log frame due to the fact that the time frame and resources available for implementing the activities as well as the activities they are not designed on a location specific basis. It has the capacity to take the causes of poverty and specific vulnerability into account. As the log frame covered objectively verifiable indicators those are mostly focused to output rather than impact so that comparison of result with the LFA was hard task. The indicators could be more specific and relevant to expected results set in project document.

**Appropriateness of locations:** The location specific characteristics, higher education, professional background of old age people’s organization members, sources to generate fund by OPA members for supporting destitute member of OPA are common. Both the project locations are very challenging so that the project seems appropriate for both locations. However, the investigation findings show the functionality of OPA depends on dedicated leadership. Where leaders are more committed and devoted to the work, OPAs are more vibrant and effectively functioning irrespective of location. It is one of the learning points that inclusion of more influential and committed people in OPA committees would help to make OPAs vibrant and functional.

**Addressing social differentiation (e.g. by gender, ethnicity, socio-economic group, disability, etc.):** The project activities addressed differentiation issue, ethnicity and disability issue through its actions. OPA member selection criterion was age (60+) which is common irrespective of sex, caste and creed. The women were also members of OPA that addressed gender issue within the project. Disable members were included in committees at all levels and had special actions (community volunteers) for bed ridden old age people. However, *social equity and equality had been ensured but participation of women remains far behind the male due to socio-cultural barrier in respective society*. *The project listed OP irrespective of sex and gave effort to ensure equitable outcome. The cultural context were less supportive to women of Muslim communities re participation. During evaluation process, the participation of women was mostly from Hindu communities that depicts culture of respective areas.*

## 2.2 EFFICIENCY

Efficiency is the measurement of how economically resources/inputs (funds, expertise, time, etc.) are converted to results. Has implementation in the form of sector-specific financial aid made it possible to obtain the same effects with lower transaction costs for the EC and the partner country is the key question of efficiency. Taking the thematic issues into consideration, efficiency is measured. According to the TOR, it was focus to evaluate whether the input of resources achieved the desired outputs and whether project provided maximum value for money. The project covered 17000 older people and 294 local authorities under its various program activities including training, orientation, capacity building inputs (technical and linkages). The annual report-2012 revealed that 2022 bi-monthly meetings organized at 388 OPAs with average 13 participants[[5]](#footnote-5). It means 26,286 persons were trained with allocated budget. The project formed and empowered 338 village-based civil society organisations led by older people in two sub-districts to engage them in local development actions for more effective, transparent, and inclusive local services specially poverty and health. The project had no scope of direct support to beneficiaries for poverty elevation but enhancing access to social safety-nets had contributed to increase resilience to food security and health. Without incurring any cost, through coordination, cooperation and linkages with services providers had attributed to increase access to food security and health care services indicates efficiency of actions.

### 2.2.1 Efficiency of Actions

* Project was efficient in terms of coverage of targeted beneficiaries and brining high profiles community actors in board (retired government officers, UP chairmen and members, rural elites, etc.,) with almost no cost is efficient actions. The efficiency is generally measured dividing output by inputs (funds, expertise, time, etc,). However, quantification of outputs of capacity building project difficult task, so it needs in-depth analysis and sometime value judgments to put in. In terms of coverage of targeted beneficiaries and stakeholders as per plan versus inputs, the project is quite efficient.
* Area and actors coverage is found efficient owing to horizontal learning mechanism development within project actions at a certain level. It has created scope of higher coverage of targets through the horizontal learning process. The replication of model like OPA formation and expedite actions in adjacent new areas like Pubail union of Gazipur shows efficiency of project to a great extent because this thing happened involving comparatively less cost. In terms of coverage of actors with limited/no budget and human resource, inputs- output ratio is positive for the project. It indicates efficiency of the project to a significant level.
* Addressing multi-staged stakeholders and actions under single framework is challenging, while the project included multi-staged stakeholders in a single platform and did integration of actions and handle all actors efficiently. Bringing stakeholders of government departments, civil society, power elite and local government representatives is always challenging task but *the project actions paved the way of doing that and achieved a great success*. *It has efficiently managed to bring local influential, local government representatives, power elite in its linkage loop with almost no-cost inputs. Using only human resources’ capacity, the project efficiently performed at considerable level.*
* The project is intended to institutionalize the non-state actors’ through capacity strengthening for building a protection mechanism of older people’s rights. The local level initiatives were made an inbuilt mechanism within the activity fold. The earth filing and road repairing, constructing bamboo bridges, Installing of tube-well for fresh water, installing sanitary latrine, constructing wooden platform, etc., were included in community action plan. These are mostly self- help initiatives of OP and waiting for implementation. The functionality of self-help process automatically contributes to government’s efforts and less contribution of LGIs would be required in this regards, when it will be performed by OPAs.

### 2.2.2 The Structure, Function and Performance:

* The OPAs are consisted of the older people but the dynamic leadership of OPA is essential for its functionality. The functions of OPA at village, Ward and Union levels were mixed because village level OPAs are comparatively less functional re arranging meeting, record keeping and continuing saving scheme. The most union level OPAs are running saving scheme but the significant number village OPAs stopped the saving. OPAs led by educated and influential people are more functional (boro Maheshkhali, Laxmiteri, Kholyea union OPA) then OPAs leading by less educated (Choto Moheshkhali) and less influential leaders. The influential and educated people’s status in society is high so that everyone respects them and can’t avoid their call for actions. In capacity building actions, educated people get more interest than uneducated people. The OPA like Boro Maheshkhali Union and Laxiteri of Gangachara are remarkable example where the leadership is in the hands of retired government officials as well as influential people. The education and social status, commitment and dedication of persons are determinant factors of functional status and performance of OPA. Those OPAs are more structured, well functional and performed actions efficiently to address the older people’s challenges.
* **Assess performance of NGOs**: The activity planning, implementation through ensuring participation of actors was done efficiently, while the phase out plan, sustainability strategy and operation modalities after phase out remained inconspicuous. Although training was provided for selected staff by NGO the fact that nearly, at least partially, that the training was inadequate. Training on social issues to enhance human capital and contribute to women empowerment was effective. Post-training follow- up was adhoc and not structured that resulted inadequate skills.
* **Efficiency and timeliness of technical and financial inputs:** The project duration was for 48 months duration but initial six months was consumed for taking -off actions. Other than the inception phase, all other actions performed within the timeframe and budget limit of the project. The partner organization could be more attentive prepare the project completion report within shorter period of time of project completion.
* **Self help development:** Self- help development actions effectively functioned during the project periods but actions have become slow-moving owing to absence of project supports after phasing out. A significant proportion of OPAs especially villages level OPAs have become dysfunctional in terms of voluntary savings scheme and implementation of community actions plan. The Union OPA’s functionality became determinant factors of self- help development actions, fully functional OPAs are continuing operation of such actions, while less functional OPAs in most cases could not maintain the pace of actions after phase out of partner.
* **Linkages:** Linkage with local government institution to ensure access to social safety-net programs is efficiently managed by the project and people are getting such supports and services. A significant number of OPs get accessed to VGF, VGD, old age allowance, etc., with preference. The lobby, interaction and advocacy campaign attributed to change the attitude and perception of LGI representatives and those actions instigated them to realize the aging issues and prevailing situation of old age people. It was challenging task due to their reluctant mentality at initial stage. In some areas, it has been institutionally decided while rest are trying to achieve it with careful efforts. Only linkages, awareness raising and capacity building has made effective results and that actions are efficient to generate result to reach the goal of the project.

*“As a people’s representative of Union Parishad, I have some responsibility to address the old age people’s challenges. A section of them are disadvantaged and the most vulnerable which was remained unrecognized earlier by anybody or institution. The project actions has open up our eyes that they are the most respected person of the society-said Md. Liakot Ali, Chairman Gojaghonot Union Parishad of GangacharUpazial. When I participated in a meeting of RIC, I became more conscious about issues of old age people. I am trying my level best to support them whatever capacity I have. I have also plan to established a room on my own land for the old age people-he added.*

* **Utilization of funding**: Total fund was spent in line with the implementation timescale and action plan. Activities related to Result1-Result5 have been very well implemented. There was plenty of scope to coordinate with other interventions at a local level regarding the real inclusion of OPs as a vulnerable group. As aging is recent issue so mainstreaming of these issues needs long way to go. The project coordinated with other projects that are complemented the activities implemented like health services, women’s affairs, etc. The quality of outputs was excellent, especially those related to OP organizations at community level with an increased participatory role for OP. linkage with government departments like health and social welfare are found excellent.
* **Budget and Cost-efficiency:** The efficiency level of the project was high which has been possible due to commitment of HAI and high level of expertise of RIC´s personnel. The long term partnership between HAI and RIC is facilitating implementation and resources are managed in a transparent and accountable manner. The human resources cost for the project was 41.48 percent (Euro 275541) of the total budget (Euro 664120) which rationale in the context of capacity building project. Generally, in capacity building project, up to 55 percent of total cost is considered as rationale cost for human resources. By taking into account of this issue, the project was cost-effective one. The total budget for the office supplies per unit at district and Union level was Euro 9.19 and 6.63 respectively. It seems very low budgeted items. From the cost effectiveness point of view, it was very efficient but sometime filed staff had to face challenges to meet the wants as per requirement. As the project worked with the most respected older people, so the provision for entertainment could be made within the project structure. The budget disbursement to partners’ against results was efficient and the process was timely, effective and efficient. HAI has provided the matching funds for the first year (29.489 €, 25% of the 1st year expenditure which is highly efficient actions. In all respect, the project was efficient and cost effective.

## 2.3 Effectiveness

Effectiveness of actions generally pushed forward to reach the objectives sets in log-frame of the project. The extent to which the development intervention's objectives were achieved, or are expected to be achieved, taking into account their relative importance. Effectiveness also used as an aggregate measure of (or judgment about) the merit or worth of an activity, i.e. the extent to which an intervention has attained, or is expected to attain, its major relevant objectives efficiently in a sustainable fashion and with a positive institutional development impact. The effectiveness of actions is presented in the following sections.

* + 1. In spite of contractual service agreement, project actions implemented in partnership approach and RIC- national NGOs are in actions. Streamlined partners’ accountability is enhancing performance of actions and generated considerably effective results. The reciprocal relationship between implementing and executing agencies’ management, *mechanism of accountability and horizontal decision making system developed that seems become the driving forces for operating system in most cases.* The partner’s participation in review and coordination meetings and supports of respective project coordinator made operation smooth and effective to address the challenges of old age people.
    2. The effectiveness of action varied by locations for geophysical and social context. The OPAs are functioning and creating facilities as well as providing supports to the vulnerable older people through their own initiatives. The horizontal follow-up and learning from other OPAs, participatory problem solution system developed by the project had strengthened effective results generation in ensuring access to health and other services supports and services. *The linkages with community clinics and government Upazila level hospital is an innovative approach that increasingly ensuring access to health services with less bothering likes much waiting time, disrespect by servicers providers, ignorance of old age people, etc*. *As the linkages with higher officials are effective so supports staffs of health services providing agencies follow their higher authorities.*
    3. OPAs at different levels have been performing actions after intervention of capacity building training and doing lobby with respective actors to ensure more supports and services. *The capacity building initiative along with social mobilization through different day observation, community level interactions had instigated community people, organization/association and institutions to act in line with old age people’s rights protection*. The most actors especially LGIS, Medical doctors of local hospital, young community people now are *more proactive, supportive and uphold positive attitude towards the old age people*. In most cases, participants and stakeholders stated as older people are united as consequences of all-inclusive and integrated actions performed by the project.
    4. Integrated implementation approach of actions through older people with support from stakeholders is found effective. The wide scope of resource mobilization from community in semi urban areas and its utilization helped in accumulation of resource in Maheshkhali was more successful than other part of the project. There was wider scope to strengthen capacity of OPAs to resource mobilization from the community level and that could be more effective and capable self-help OPA in project area.
    5. The initiative of bringing actors (GO, NGO and LBs) in board of older people rights protection is found effective irrespective of areas. The participation in terms of number is much more in areas where the influential members are included in the OPA than other areas. However, appropriate leadership and leader selection might make actions more effective in ensuring rights of older age people.
    6. Communication and visibility of actions are found effectively ensured by the project. As a result, people of all sectors can recognize what aging mean and what rights the older people should get from the family and society. Anyone can identify activities, target groups and actors by seeing those visible objectives. Old people are an issue, which is known to everybody of respective intervention area. The public events on specific days were found effective to make people aware about the aging issue and in creating supportive mentality.
    7. The baseline survey[[6]](#footnote-6) reveals that “among the older people ‘Gastric/ulcer/stomach’ rates high (28.2% and 24.8%) in both areas except for ‘General Sickness’ in Gangachara ( 41.1%) and ‘Cough and physical weakness’ in Maheshkhali (33.3%). ‘Ophthalmic problem’ is considerable among older people in Gangachara where it is nearly 13% and is of the same proportion among men and women. ‘Cough and physical weakness’ is markedly high in Maheshkhali while in tobacco producing Gangachara area it is reported to be as low as 2.5% from the older people respondents. Not a particular ailment rating considerably high does give a varied picture of health issue in relation to older people”. However, older people were used to avoid health care services but now they became much aware about health care services through horizontal learning that instigates them to take health services. Linkages between health services providers and older people through project actions increased access of older people to services. The linkage with government hospital, private cline and service providers, community clinic, etc., is found the most effective activities to ensure health services.
    8. **Home care volunteers and medical equipments:** In 20 selected villages, project had selected and oriented 20 home care volunteers (age 50- 65)-one from each village of Maheshkhali and Gangachara sub-districts. There are 151 female & 160 male were selected as the most vulnerable and isolated from their family supports- about one third were bedridden for home care supports. *The trained volunteers provided services include blood pressure measurement, diabetics check, cleaning, bathing, and gossiping to relief them from loneliness on a daily basis. The home care support was an innovative and effective action performed the project*. However, volunteers could be more trained on equipments use and supports to serve people. From humanitarian perspective, *the idea of home care volunteers was the unique and coordinated actions among volunteers, project staff, OPA leaders was undoubtedly encouraged supports from community. Initiatives to motivate and negotiate with relatives and neighbours to come forward to respond needs of the vulnerable older people could be initiated to increase community people’s responsiveness.*
    9. **Ageing awareness raising events:** The project conducted aging awareness raising events with colourful procession had contributed to make older people more aware about ageing as a problem. At the second year of project, participation was less than final year events. *The participation in public events had increased 26.46% and 8.8[[7]](#footnote-7) percent in third and fourth year respectively*. It indicates that processions had instigated more people for paying attention to these events. The participants put emphasized to arrange such event more frequently which would helped to make people more aware and proactive in achieving the overall objective of the project.
    10. **Publication and circulation of materials:** The publication and dissemination of information on ageing issues and policies to NSA and LAs covered the issues of Home care, Disaster, Climate change and older people in Bangladesh, IDOP-International day of the older persons, Urbanization and older People in Bangladesh, Active Ageing in Bangladesh and social protection and older people in Bangladesh. These Six newsletters on six crucial themes of older people lives were published and circulated to concerned stakeholders. There were every write-up on the relevance and use of these themes in Bangladesh context. During evaluation, a significant proportion of participant was found less aware about these documents. Accordingly, they emphasized on the needs to prepare all the documents in Bangla and circulation are to be increased among them. The project has published a supplementary in national English and Bangla newspaper to make people aware about aging issue.
    11. **Exchange visit of staff and OPA:** The exchange visit of both staffs and OPA leaders took place among the project sites that encouraged them to work. It was contributed to develop common understanding on project concept, operators and outcomes. Staff capacity especially on data collection and ability to analyze has improved through this exchange visit. Before the visit, the project management developed methodology and set actions to be performed during the visit, as a result staffs were been able to identify strengths-limitations, threat, barriers and opportunities of the project through sharing during the visit. OPA’s cross learning visit had strong dimension of participatory sharing and peer learning. It was more institutionalized and social in terms of their constraints of travel and modalities. They wrote papers and points to share each other focusing their respective issues. OPA leaders learned from other areas and replicated their learning in their respective areas.

*Mr. Provat Chandra Roy, a retired government officials and also secretary of Tumulia UP OPA, “we learned about OPA from nearby Nagori Union and with assistance of RIC staff, we started activities in our union. Now we are 400 member through some are not active. Aging problem was unclear to us but we have learned a lot through participation in project activities. We initiated by our own, for people like our age. Still we are continuing some actions but we feel support from RIC is still required.*

*“The exchange visit had created opportunity for me to learn about data collection and data analysis techniques. Prior to visit, what are to be done by each member and how to do those were instructed by Project Manager. Accordingly, we did with enthusiasm and high interest. We collected and analyzed data, did group presentation on our work. It helped me to understand the difference between my working area and visited areas-said Rajib Roy a staff of Gangachara area. ?It also made me confident about authentic data collection and analysis-he added.*

* + 1. **Community action plan preparation:** The community actions plan preparation created scope to address the disaster issue into the program activities. Resource persons facilitated to identify highly prioritized action points for funding from small grant supports. It followed an integrated approach for developing CAP exercise so the implementation became effective. The union facilitators seem less skilled in training and more effective training could make the program more operational. The community action plans were developed with wider vision but implementation seems limited. After completion of project actions, the implementation of plans has become stagnant.
    2. **Gender:** The coverage of women in project actions is found comparatively well. The access to supports and services data shows that women get more supports in comparison to male. However, participation level of women in OPA is less than the male and the committees are dominant by male members. The social and cultural factors are determines the participation of women in public places.
    3. The idea of monitoring committee formation at village, Ward and Union level is very impressive re older people. The monitoring committee prepared list of older people in their respective areas, taken care of old age people, sharing learning from other areas, and supported to the project staff for effective implementation of the project. However, after completion of the project, no specific guiding principles for monitoring committees were found and functions have already stooped. Moreover, during project period, these committees perform impressive works but after completion those committees merely performed any action.

## 2.5 Impact

The project impacted in many areas, i.e., in enhanced participation and empowerment of the rural poor in respective areas of Bangladesh especially OP-the direct beneficiaries. The OPAs have become an integral part of the community with higher levels of awareness and information on their needs, their common problems and their rights. The project actions have impacted on improvement of relationships with service providers re elderly issues and increased savings of OPAs. Despite, failure to maintain the saving scheme functional in significant OPAs, substantial improvement is visible in Union level OPAs. OPs are organized in groups for the first time in Bangladesh and they are in a much better position to reduce their chronic vulnerability and food insecurity. The OPAs has been able to increase their role in the community, improve social protection of the most vulnerable older people through their actions and participation. The lobby for their needs was addressed by LA and other service providers that are outcome of establishing relationship. It resulted to increase access to supports and services from the government and local government institutions. The OPAs actions have contributed to increased disaster preparedness through DRR action plans considerably. Participation, ownership and confidence of OP in all the villages have improved with considerable exception. OPA formation is definitely outstanding and effective actions to address the needs of old age people. Virtually OPAs are facilitating access of this group to other private and public services. The specific impact of the project has been presented in the following sections.

### 2.5.1 Individual level:

* The project activities enhanced access to support and services to social safety-nets supports that resulted older people have been getting such supports without any hassle. As the older people are organized and have power to claim rights which have contributed to get those supports. The old age people’s position and condition in family and society substantially improved as an effect of the project activities. A significant number of isolated older people have been reintegrated with their families through the joint efforts/counseling of OPA members to victim’s family members.
* Linkages with service delivery agencies are made inbuilt mechanism within project design to increase access of vulnerable older people to available services. The linkage and lobby with respective actors or institutions by implementing agency, actors have been able to increase access of them to health service delivery organization & institutions, social safety nets program of government and NGOs. It ensured more access to those supports and services with free of cost and reduced bothering in getting those services. Now, more OPs get VGD, VGF, old age allowances, widow allowances with preference which have been contributing to reduce vulnerabilities and food insecurity of old age people.
* The older people remained in inferiority complex because their opinions were counted by neither family members nor younger community people. In the some cases, old age male and female is not taken care of by their children. However, after OPA formation and capacity building training, Older People become aware and organized, took some effective action to reintegrate them in family.*OPA members did counseling to family members of isolated OP and visited houses of them and been able to reintegrated them in their families through united efforts. This messages spread in respective areas, so sons and daughter of older people do not misbehave with parents with the fear of visit of OPA in their house-which is considered as shame for them.*
* OP was reluctant to visit doctors due to lack of knowledge and awareness, value of taking health care for healthy life, etc. The project activities-meetings, workshops, training, access to information through participation in events have made them aware about value of sound health and made them confident about access to health services agencies. As several congenial environment for ensuring heath services from government hospital (old people’s corner), preferential services in community clinics, free of cost services from some private practitioners are created so that OP are more confident to avail supports and services. More OPs are getting health services from various service providers which were absent prior to intervention of this project.
* The most vulnerable male and female in selected areas got home care service from the trained deployed volunteers which are probably totally new initiative for the OP. This supports has encouraged them to live with dignity. The isolation and alienation from the family was critical issues for them but the home care services open up a new window for bedridden OPs.
* The project actions have created scope of new income generating activity for some vulnerable OP through financial support by their own initiatives. Unity of OP under the banner of OPA has made it possible. Though numbers of such people are few but the initiatives of self-help group is a remarkable initiative of OPAs which has impact on attitude and perception of wider community people.
* The OPs are more confident to survive themselves with dignitary and honor. They are more resilience to disaster and food insecurity. The monitoring by ward and village level monitoring committees has made them confidents and now they thought that their fellow members are with him. The project has made them confident throughout the process of implementation of this project. *The monitoring system impacted to change the mind set of most vulnerable people that they are not alone.*

### 2.5.3 Community level:

* The perception of the community people-especially young generation has changed throughout the process of intervention. Earlier, younger people often used to say *“buirar bhat nai’ means* no value of older people and their opinion. Now they used to say, *Buira eka na, mean* older people are not alone. They are united and more active against any injustices to the older people. The attitude and perception of young people towards the OP has drastically changed as consequences of intervention. Now young people rarely show dare to use such abusive ward which was frequent before. Social position and dignity OP has improved and space to put opinion has increased in village court, standing committee of UP and other social actions after the intervention.

*After meeting with Mohipur village OPA, evaluation team sat in a tea stall to have a cup of tea and started gossiping with a group of young people sitting over there. By the by, the team is enquired about their knowledge on older people’s activities. Instantly, Sohel 24 years old a young man replied, now we are cautious and do well behave with older people. The older people sat together on a regular basis and shared everything they experienced among them. If I dishonour any of them, he will share with other older people and my father will come to know about it. Then my father will accuse and asked me to explain why I did that. It was not common, that the young people honour older people of poorest households. But now we show respect to older people. We have also realized that we are obligated to respect them.*

* The Older People are getting more space in social and community level activities due to their organized force in the community. In some case, it was situation that people disrespected Older People identifying them as supporters of a party that they did not support. However, OPA formed with aged people irrespective of their political identity so that the non-political identity helped them to gain dignity and honor to all. *The project has created a neutral position and united stand of older people in the society. Older people from all section are members of committees so that it has become a social force to achieve their objectives*.
* OPAs have been able to create a position in society, so LGIs and other services providing agencies count their opinions, include them social actions, and try to support them in all respects. Some OPAs have been able to establish as community based organization and one has already got registration from social welfare development. A few of them are under the process of registration, as a result community people count them for their actions. The registration process has paved the way to institutionalize OPAs in mainstream system especially at the community and LGIs.

### 2.5.3 Organization level:

* Organization formation, capacity building and implementation of actions are results of the project intervention. Older People found capable to establish and run community based organizations by their own. Older People has proven activity management capacity to keep OPA functional and to make community people sensitive towards old age people’s rights issue and accordingly performing actions. Some OPA maintained records, developed strategy for future actions, though a significant number of them yet to be strengthened their capacity for performing actions maintaining the quality of records and accounts.

### 2.5.4 A General Overview on impact

* Old age population is gradually increasing and it will be a great challenge for government to addresses the aging issue in future. The government of Bangladesh initiated small scale initiatives like old age allowances, widow allowance to support them but it needs community level actions for stepping towards addressing this challenge. The project has created scope to realize the needs by the community and grassroots local government institutions. Now, the policy planners should realize the issues for future policy formulation to address the challenge effectively.
* OPA’s challenge is the state in which they do not have adequate access to basic services like, health and nutrition and opportunities of recreation and family support. Owing to social structural, functional and cultural nuance restrained OP from accessing those supports and services. At the same time, state and non-state actors were rarely proactive in ensuring OP’s rights for lack of awareness, traditional attitude and perceptions towards their rights. The capacity strengthening of non-state actors-specially the local government representatives has pushed them to take role in ensuring rights. The capacity building actions’ aimed to rights protection mechanism (both community & institutional levels) development through project intervention. The community actors, OPA at village and Union level OPA were developed who monitor and review activities in most areas and they also review the progress and bring community in actions to ensure rights of them. The access to, health and other opportunities of them gradually increasing and that has been contributing to reduction of miseries in old age people’s life.
* Institutional involvement (NGOs, LGIs, Government bodies) in project actions is admirable. Inclusion of LGI representatives especially Union Members and Chairmen is stepping towards institutionalization of project action in LGIs. It is realized that until and unless the project is owned by the government bodies and community people as well, the sustainability will remain beyond expectation. However, LGIs and OPA leaders are in same board and are playing proactive role in old age people’s rights protection initiative. It has only been possible because of several capacity strengthening actions of project. The inclusion of actors like business community leaders, social influential people, UP chairmen are found remarkable while active participation of a segment of actors-industrialist, power elites-have yet room for improvement to make actions more effective.
* Linkage and lobby actions have been successful in including LGIs in old age people’s right protection mechanism. OPA representatives coordinate respective actions, monitor progress of achievements, takes initiative to resolve disagreements among actors to protect rights. As old age members of LGIs also the member of OPAs in some areas, older people relies on them and feels confident about future.
* The project actions has sensitized and capacitated NSAs and LBs to manage and initiate actions through development of a comprehensive mechanism by their own. Accordingly, they mobilized resource to support most vulnerable male and female are effectively produced results. The NSAs and local bodies have been searching new scope and opportunities and accomplishing it in this regard and they have been contributing to reach project’s stated objectives and goal. The executing agencies have more scope to initiate such actions for the old age people.
* The existing development approach and strategies are generally confined within traditional structural and functional paradigm, but the POPA approach has been able to come out from that tradition and introduced new ideas like home care service through volunteers. The actions are contributing to shift organizational approach, strategies and polices for resources mobilization to support older people in respective actors. Accordingly, it provided supports and services for sensitization and capacity building of organizational management and staffs to understand the needs of ageing issue in organizational development agenda. According to the implementing agency, they developed program strategy to address issues of older people into their program fold and gradually it has been shifting to the community and non-state actors to keep it functional for sustaining the achievements.
* **Situation Based and Areas specific strategy:** Situation demanded, issue based and areas specific strategy development and in making strategy functional is a pioneering initiative to generate expected outcome. The different modus operations by location revealed coverage of diversity and location specific services. In Maheshkhali, OPAs have been able to manage fund to support the vulnerable old age people. The replication model approach through horizontal learning in Gazipur is also an innovative approach but after phase-out of program activities, OPAs of intervention areas as well as in replication areas not functioning properly in most cases. In all cases, participants stated that they needs more supports at least presence implementing agencies for longer duration.

**Gender disaggregated findings:** Participants in orientation meeting was 5,251, of them 836 was female which is about 15.9 per cent[[8]](#footnote-8) of total participants. In public places women’s participation is found less than their male counterpart. The baseline data shows that 1.9 percent male of Gangachara and 10.8 female and only 7.5 percent male received VGD Card[[9]](#footnote-9) during the project period. Of the total 17000 beneficiaries, 5626 and 5249 of Gangachara and Maheshkhali has received OAA which is about 33 per cent in Gangachara and 31 per cent of Maheshkhali sub-districts. The baseline survey findings show that 10 percent in Gangachara and 11.5 percent in Maheshkhali received the same services. Out of 311 high vulnerable male and women, 89 were bedridden. Of them, 48 female and 41 male got the home care supports from the project. Volunteers served them daily basis. In this case more women were served against their male counterpart. However, it is to be mentioned that in case of supports and services receive female are prominent while case of participation in public places meetings and orientation, the participation of male are more vibrant than their female counterpart.

## 2.6 Sustainability of Actions and Achievements

*Legal basis and united efforts has made the Boro Maheshkhali Union OPA as formal organization. It got registration from the Department of Social Welfare in Moheshkhali Sub district. The secretary OPA stated as “the registration has given us identity and now it is time to move forward. We have BDT 98000 as group saving, we are doing various social activities like distribution of food items during festivals, supporting poorest older people to do income generating activities, etc.*

*The committee members are active and participating in meeting regularly. Though the support of RIC has been stopped but our actions are going on in full swim. We have our office and assets. The social welfare department has allocated some money for social activities. UP is also continuing support to us. We are committed to ensure rights of older people-said the secretary of OPA.*

The sustainability of short durational capacity building activity and achievements and capacity utilization in transformation into actions is a challenging task. The procedural approach, institutionalization of activities, community participation, creation of ownership to respective actors, and strong commitment of target groups are determinant factors for sustainability. The sustainability of achievements and actions assessed under set criteria. Non-state actor’s capacity strengthening activities developed OPA and they are in place and some of them are functioning well.

The a significant proportion of Union level OPAs are strong and capable enough to take initiatives and implementation of micro level program actions, while a significant number of them are yet need supports to keep functional. Where the Union level OPAs are active, village level OPA are also considerably doing well. The initiatives of getting registration of OPAs from the respective authority are best way of sustainability of the achievements and actions. Out of 19 Union OPAs most of them are functioning well while some needs support to continue actions. The sustainability of those OPAs and their achievement are uncertain until and unless the supports continues.

The integrated approach has paved the way for sustainability of achievement and actions. The LGIs and government department are supportive and in some cases they are in board of actions. These indicate that the project is on the way to sustainability but it needs more supports for certain duration. The scaling up actions could enhance sustainability. Bringing LGI representatives in boards and its follow up- is another step of sustainability. The OPA under institutionalization process and get a legal basis that would lead to sustainability of project actions and achievement.

The small IGA initiative taken up, that fit with existing needs and therefore is appropriate and potentially sustainable. In spite of that fact once the IGA is lost then he/she would not have any scope for further support then the sustainability IGAs will be in challenge. There are two aspects to the sustainability of human capital gained through training, adequacy of the training programmes themselves – what was learned – and the application of that knowledge. The application of knowledge by OPA members and stakeholders are yet to be strengthened for sustainability.

## 3.7 Visibility:

The EU Visibility Guidelines – July 2009 were followed and several activities were promoted that enhanced visibility; Newsletters, Case Story Booklet, training materials, quarterly reports, and news paper supplementary acknowledge the EC funded and used logo of respective organizations. Many of the OPA programme related documents, the office equipment acknowledged EU funding support. The visibility of EU was ensured throughout the process of actions.

**2.9 Good Practices**:

* Linking most vulnerable persons in the community to supports mechanism is a good practice of the project. The older people are supporting their fellow members by their own initiatives is good practices and remarkable.
* Home care service by the trained volunteers to work with bed-ridden and fragile older people is very innovative actions of the project. It ensured the supports of isolated people and helped them to get relief from loneliness. A collective response to most vulnerable older people are getting shaped it needs addition attention in future course of action;
* Methodology development and assigning actions for each team members before cross visit was key learning point. It has created scope to build staff and visitors’ capacity in a systematic manner. The system pushed visitors to know their role and responsibility during visit and they can perform accordingly.
* Organizing a demonstrative training and kept separate some different training indicates good practice for capacity building of staff and participants. This learning can be helpful for similar capacity building actions of any organizations.

# 2.9 Lessons Learn, Recommendations and Conclusion

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## 2.9.1 Lessons learned

* + 1. Ageing is an issue for development but not realized earlier. However, the people now understand the problem and development issues related to aging. Participation of targets group in decision making process and development actions to address aging is important rather than excluding them from participation in rural development. The bottom up system shouldered responsibilities to the target group-beneficiaries, non-stage actors and local bodies that needs further enhancement.
    2. Without joint efforts of implementing agencies and OPAs, it was hard to implement the project activities. Flexible implementation strategy and actors’ participation is essential for comprehensive development actions. The participation should be prime focus for success of actions where multi-staged stakeholders are involved with. OPAs formation and keeping them functional is the beginning and continuous monitoring by monitoring team at the different level and other actors are needed for sustainability of actions.
    3. Specific issues based comprehensive advocacy program at national level for policy formulation and/or policy change is essential for sustainability of achievement. The advocacy issues are to be identified from present intervention which requires moving forward to policy formulation and replication in wider scale.
    4. Without any direct service delivery provision, supports and services like social safety-nets program, asset transfer of NGOs, health services delivery can be ensured through linkages. It is an established fact. Appropriate and effective linkage with those services delivery can contribute to food security of OP, which is one of the key learning points of the project.
    5. Saving of older people by them seems prospective activity and has ample opportunity to extend it in wider scale. Mobilization, linkage and lobby can open a new window of government services and private supports for OPA members. Voluntary and open micro savings scheme might be an initiative of self help income generating activities of old age groups. It needs extra effort to formalization within the system with specific operational modalities.
    6. The documentation is important element for authentication and setting evidential proves of actions. Simultaneously, it was also essential for replication as a Model as the project did in a separate area (Pubail). The short duration and inadequate exist strategy are challenges of this project. After phasing out of actions, certain duration to continue follow-up was needed to be part of project design for long term sustainability that was missing opportunity.
    7. Documentation of the project is well articulated and comprehensive at all level which is learning point for other actors.

## 2.9.2 Area of Improvement/Recommendations:

* Motivation, campaign and coordination among respective actors to operate monitoring and LGIs need strengthening. The program should promote the experience to spread in other areas with specific strategy.
* The voluntary saving scheme is an instance of open system of micro savings for old age people. It is established in almost all areas of the project, initiatives are required to spread in wider areas and ensure more regular savings. However, savings should not be the ultimate objective; process of utilization need to be sorted out, otherwise save money will remain unutilized for long period and would generate nothing.
* Participation in rural development and poverty reduction strategy for older people needs additional time, efforts to spell out because project goal was to develop them but how it would be achieved and possible strategy needed effort to spell out in coming future.
* The monitoring system can capture relevant data and preserve for measurement of change as an impact of intervention. The monitoring committee at the Ward and Union level functioned and data was collected for analysis. Those data could be used for change and trend analysis on status of old age people. However, after the end of the project, monitoring activities became stopped. Provision should be kept in similar project for follow-up for longer duration with data analysis for feeding the management for further improvement.
* Identification of available supports & services at Government and non-government organization, establish linkage with them and inclusion of older people as criteria for their beneficiary selection may be effective. The advocacy and lobby would be the best actions in this regards.
* The project has limited scope of advocacy at local level because the local authorities rarely have scope to changes policy rather they are entitled to policy implementation. Generally advocacy is performed to policy change and policy implementation. There is no specific rules exist regarding rights of Older people that needs review and analysis to clarify them to local authorities for policies formulation. Accordingly, issue and event based lobby with local authorities within the framework and jurisdiction should be considered as prime task at the project level. On the other hand, at the national level, there is a scope of advocacy to incorporate lesson learnt from the project like, putting old age issues into development agenda, inclusion of them development program activities, etc. As lessons learnt from the project, so national level advocacy campaign initiative to be taken to policy formulation in this regards.
* Problem identification analysis location specific analyses should be conducted to ensure that the causes of issue and different forms, levels and intensities of vulnerabilities are identified and not simply reliant on a description of the symptoms of issues. This will also enable that opportunities as well as challenges can be fully incorporated into any programme plans designed to address problems and vulnerability.
* Programme design would obviously be carried out in accordance with problem and vulnerability analysis to ensure that activities are appropriate to achieve results and that in turn delivers the programme objective and contributes to the overall programme objective. It is recommended that future programme planning takes this into account with consideration to these aspects. Firstly, a participatory appraisal be carried out with the communities to determine the causes of problems and particular aspects of vulnerability; secondly, that an appraisal mission reviews programme implementation plans to assess viability and make any recommendations for improvement and thirdly, to require actors to comment on the activities with regard to viability of the programme as part of their application and to make any suggestions for improvement.

## 2.10 CONCLUSION

As a unique approach, OPA is conceived with the objective of development of older people coverage in targeted unions. The approach encompasses a wide spectrum of development paradigms and older people-centred policy considerations. OPA defines as well as revitalize notions of pro-poor strategic standpoints. While the older people are conventionally treated as helpless and the weakest actors in their financial role-playing avenues, and that backwardness and poverty compounded with lack of capacity are responsible for their downtrodden status, OPA stands in opposition to the ‘blaming the victim’ mindsets. It counts people’s ability from the reverse order from the tradition. Instead of tracing incapability, OPA started with the mission of utilization of capability of older people, use of their potentials and making older people as part of development. Those who lack economic power may constitute a powerhouse of other capabilities such as leadership skill, catalytic sensibility, mobilizing expertise, and participative instinct. These capabilities also serve as ingredients of self-driven development drives. The capacity strengthening actions of both older people and local government has contributed to take the functional shape of OPAs.

The social development agenda of older people increasing position and condition in family and society goal extends far beyond the outcome parameters. This individual level achievement soon becomes translated into totality, while the OPA approach in revise. It strengthened capacity of total and helping their cohort by themselves. The old people association as a whole strives to ensure rights for all, no one fells behind. Some of the constituents that make this process unique and comprehensive are influence, inspiration, demonstration effect, insistence, motivation and learning from the experiences. Collaboration and sharing of ideas and opinions and success stories bridges the gap between old area and replication model areas. All these attributes compose the participatory nature of the approach. Participation becomes meaningful through leadership, coordination, motivation, and mobilization of people by the people for the people themselves. Frequent monitoring and follow up strategy of the actions keep the process alive through activity-cycles. POPP in Development in Rural Bangladesh is reversal program to ensure scope of participation of older people in development for themselves. At least the interventions have been able to prove the potential of older people and establish an approach to revive experienced actors in actions.

# Annex-1: List of participant

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Description** | **Participant** | **Position** |
| 2/7/13 | Meeting | 1. Shwali Jharna |  |
|  |  | 1. Manna Rahman ?? |  |
|  |  | 1. Mr. Kabir |  |
| 9/7/2013 | Meeting | 1. Mr. Liakat Ali | Chairman, Gajaghanta Union, Gangachara |

**List of persons met**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl** | **Name** | **position** | **Location** |  |
| 1 | Md. Amin | President | Choto Maheshkhali union committee |  |
| 2 | AbdusShukkur | Member | do |  |
| 3 | Md. Hossain | Member | Do |  |
| 4 | Mia Hossain | Member | do |  |
| 5 | Iman Ali | Member | do |  |
| 6 | Zakir Ahmad | member | do |  |
| 7 | Md. Siddik | Finance Secretary | Do |  |
| 8 | ShonaramDey | General Secretary | do |  |
| 9 | Bindu Roy Dey | Member | do |  |
| 10 | Akhter Kamal | General Secretary | BoroMaheshkhali Union Committee |  |
| 11 | Md. Rashid | Publication Secretary | do |  |
| 12 | HaziMonir Ahmed | Member | do |  |
| 13 | Nazir Ahmed |  | Do |  |
| 14 | MakbulRahaman | Member | Do |  |
| 15 | Motaher Mia | Member | Do |  |
| 16 | AbulKashem | Member | Do |  |
| 17 | SalimUllah | Member | Do |  |
| 18 | Md. Amin | Member | Do |  |
| 19 | Akkas Ali | Member | Do |  |
| 20 | AsmaBeagum | Member | Do |  |
| 21 | SalimUllah | Finance Secretary | Do |  |
| 22 | Md. Sultan Ahmed |  | Do |  |
| 23 | Al-HazAktar Kamal | Member | Do |  |
| 24 | SirazulMostofa | Member | Do |  |
| 25 | Kabir Ahmed | Member | Do |  |
| 26 | Minoti | Lady Secretary | Do |  |
| 27 | Mahabub Kamal | President | Matar Bari Union Committee |  |
| 28 | Ukil Ahmed | Finance Secretary | Do |  |
| 29 | Abdus Salam | Member | Do |  |
| 30 | AbulKalam | Member | Do |  |
| 31 | Md. Karim | Publication Secretary | Do |  |
| 32 | Sanoara Begum | Member | Do |  |
| 33 | HaziAzahar Mia | Member | Do |  |
| 34 | Master AbulBasar |  | Do |  |
| 35 | Md. Osman | President | Saplapur Union |  |
| 36 | Samsul Alam Siddiki | General Secretary | Do |  |
| 37 | Oli Ahmed | Member | Do |  |
| 38 | Mostak Ahmed | Member | Do |  |
| 39 | Nazir Ahmed | Member | Do |  |
| 40 | Md. Kabir | Member | Do |  |
| 41 | Md. HabiburRahaman |  | Kholeay Union |  |
| 42 | Md. Ayub Ali |  |  |  |
| 43 | Md. Abdullah |  |  |  |
| 44 | Md. Nur Islam |  |  |  |
| 45 | Sri NoreshChondroSarkar |  |  |  |
| 46 | Sri Ajit Kumar |  |  |  |
| 47 | Sri TilokChondroSarkar |  |  |  |
| 48 | Sri SudhirChondroSarkar |  |  |  |
| 49 | Srimoti Noni Bala |  |  |  |
| 50 | Mrs. SahenaBeagum |  |  |  |
| 51 | Sri NoreshChondro |  |  |  |
| 52 | Md. Hafiz Uddin |  | Laximiteri Union Committee |  |
| 53 | Md.Babar Ali |  |  |  |
| 54 | Md.HabiburRahaman |  |  |  |
| 55 | Md. SaidurRahaman |  |  |  |
| 56 | Md. KamorUddin |  |  |  |
| 57 | Md. Mostafizur |  |  |  |
| 58 | Md. Abdul Jabbar |  |  |  |
| 59 | Mrs. HakimonBeagum |  |  |  |
| 60 | Mrs. MorzinaBeagum |  |  |  |
| 61 | Md. AnisurRahaman |  |  |  |
| 62 | Md. Monsur Ali |  |  |  |
| 63 | Md. |  |  |  |
| 64 | Md. MoffazalHaque |  |  |  |
| 65 | Md. BazlurRahaman |  |  |  |
| 66 | Md. Soleman |  |  |  |
| 67 | Md. MoffazalHaque |  |  |  |
| 68 | Md. JoynalAbedin |  |  |  |
| 69 | Md. SofiUllah |  |  |  |
| 70 | Md. Joadul Islam |  |  |  |
| 71 | Md. Abdus Salam |  |  |  |
| 72 | Md. Abdus Salam |  |  |  |
| 73 | MusfiquirRahaman |  |  |  |
|  |  |  |  |  |

1. Final Narrative Report- 2013 under section -1.1.1) [↑](#footnote-ref-1)
2. Baseline Report-INCIDIN Bangladesh, (Table-44) [↑](#footnote-ref-2)
3. ROM Mission Report-2010. [↑](#footnote-ref-3)
4. [↑](#footnote-ref-4)
5. DCI-NSADVD-2008-156-800\_Annual Narrative Report-2012. [↑](#footnote-ref-5)
6. POPP Baseline Report, page-5: statistics used in 3.3.7 section used from baseline report. [↑](#footnote-ref-6)
7. Quarterly Reportt-year-4 [↑](#footnote-ref-7)
8. Final Narrative Report- 2013 under section -1.1.1) [↑](#footnote-ref-8)
9. Baseline Report-INCIDIN Bangladesh, (Table-44) [↑](#footnote-ref-9)