

# FAITH TO ACTION

## END OF PROJECT EVALUATION

### FINAL REPORT

Project Partners:



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## ACRONYMS

CAPA	:	Council of Anglican Provinces of Africa
CPR	:	Contraceptive Prevalence Ratio
F2A	:	Faith to Action
FP	:	Family Planning
FO	:	Faith Organisation
ICFP	:	International Conference on Family Planning
IRC	:	Inter-Religious Council of Uganda
LGBT	:	Lesbian, Gay, Bisexual, Transgender
MoFA	:	Ministry of Foreign Affairs
MOU	:	Memorandum of Understanding
MP	:	Member of Parliament
OAIC	:	Organization of African Instituted Churches
OECD/DAC	:	The Organisation for Economic Co-operation and Development / Development Assistance Committee
RFP	:	Requests for Proposals
SDGs	:	Sustainable Development Goals
SC	:	Steering Council
SRHR	:	Sexual and Reproductive Health and Rights
WHO	:	World Health Organisation



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## SUMMARY

The end of the Faith to Action (F2A) project (January 2013 - present), which has been financed by the Dutch Ministry of Foreign Affairs (MoFA) and has been carried out through a consortium of partners and implementing partners<sup>1</sup>, warrants an evaluation of the achievements. The project's central objective is to increase Faith Organisations' (FOs') commitment to and provision of sexual and reproductive health and rights (SRHR); information to young people, access to commodities, services and respect of rights. Four targeted outcomes of the project center on the issues of coordination and networking, policy and advocacy, capacity development as well as research and evidence. These are:

1. Financially viable global interfaith network established and coordinated as an effective platform for dialogue and advocacy on SRHR
2. Increased FOs participation and engagement in SRHR policy making processes
3. Technical and financial capacity of the network and its members built on SRHR issues
4. Knowledge on FOs approaches for SRHR policy making generated and disseminated.

The F2A project is (primarily) implemented in six focus countries namely; Kenya, Uganda, Rwanda, Burundi, Ethiopia and Ghana. In the course of the project some activities have been implemented in Indonesia and India.

The evaluation has been carried out according to the OECD DAC evaluation criteria of relevance, effectiveness, efficiency, impact and sustainability and provides learning opportunities, good practice and recommendations to inform the existing and future F2A Network's projects. Methods of analysis included a desk review, an electronic inquiry, interviews as well as country visits to Kenya and Uganda.

## KEY FINDINGS

**RELEVANCE:** The project design and implementation of the F2A project matched up with context, target group and donor priorities. The need for FO's to align their actions with national policies has been an important area of emphasis, chosen activities responded to expressed demands and the objectives of the project were in line with the four priorities of the Dutch SRHR fund.

### EFFECTIVENESS:

**Level of implementation:** The project implemented all planned activities which led to a full achievement of all outputs foreseen in the initial project document. No changes have been observed that affected the scope of the F2A project (objectives, outputs and outcomes). Unforeseen changes derived from lessons learned during the project and improved project implementation.

**Adequacy of project activities:** The selection of thematic areas and project activities of the F2A project has been built on solid arguments. The project activities correspond closely to the problems identified prior to the project and were adequate to make progress towards the project objective and targeted outcomes. The effectiveness of the F2A Project has been influenced in a positive way by the mixture of inter-faith cooperation at international, national and local levels, advocacy, capacity development and knowledge and research. During the formation stage the foundation of the F2A Network was firmly built. Peer influence among the leaders of different faiths produced fast understanding and action. Sharing and learning among faiths has empowered Network members, promoted tolerance and understanding and improved contacts with other stakeholders. Organised advocacy events have been important to

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<sup>1</sup> Implementing partners: Al-Azhar University, International Islamic Centre for Population Studies and Research, Christian Connections for International Health (CCIH) and the Muslim Family Counselling Services MFCS

carry the message, to find common ground and to show examples of results. Research and evidence has been critical in the advocacy process of the F2A Network and its members to make the case for change.

**Achieved outcomes :** The project targeted outcomes have been reached to a great extent.

1. The F2A Network has been able to bring various players from different faiths, professions and nations together, who are committed to advocate for the promotion of SRHR and to bring about change at local, regional and international levels. A variety of opportunities have been given to Network members to share experiences and to learn from each other and have led to a better understanding of global and local issues. The broad range of champions and high level support gained enhanced the legitimacy of the F2A Network and strengthened advocacy.
2. Being a member of the F2A Network raised FOs participation and influence in SRHR policy making processes considerably. Concrete examples of collective successes show the value of increased inter-faith cooperation and alignment for the advancement of SRHR. In various countries proposals led to changes in SRHR policies. Network members see improvements in the way they are being consulted by stakeholders. Membership puts them on the market for panel group discussions and speaking engagements to share their knowledge. They speak up more, get involved in country dialogues and teaching. They experience stronger engagement with church leaders and communities and provide resource materials and references of good practices in consultations, policy dialogue and lobbying with policy makers. They gained recognition.
3. Technical assistance and training have been paying off for members who participated. Their technical capacity on SRHR has increased. Knowledge and understanding raised their confidence to influence decisions on SRHR policies and budgets and their capacity to communicate and promote advocacy messages on SRHR. Despite the avenues provided by the F2A Secretariat to improve access to resources promoting better sexual and reproductive health care, and improved knowledge and skills, the resource mobilization efforts of F2A members have had limited success.
4. F2A members publish and use research and evidence generated through the F2A project to support their advocacy and campaigning, to empower women and youth and to work with policy makers and their community more effectively. Learning from each other made FOs aware of the fact that members face the same challenges irrespective of their Faith, and that collectively they can do better and assist one another to pursue a common goal. Collective learning underlined the need to forge relationships among nations and between nations and enabled them to build stronger partnerships. The number of readers of F2A information increased substantially. Articles and conferences helped dispel taboos and misperceptions on SRHR. Furthermore knowledge and exchange enabled members to develop a religious argument to address reproductive health issues and the challenges towards working with faith communities in different societies.

**EFFICIENCY:** Actual spending is considerably in line with the budget, showing good planning and budgeting capacity as well as responsible fund management. Possibilities for cost reductions can hardly be identified. In the current phase of the Network development it is justifiable that considerable money is being invested in capacity building of the members and strengthening of the Network as a whole. The financial sustainability of the F2A Network remains an important challenge.

**IMPACT:** Although Faith communities' cultures and values and services do not change overnight and impact has been measured during the project in a restricted way, it can justifiably be claimed that the F2A project generated progress towards impact targets. Improvements have been observed regarding more and better provision of SRHR information for young people in the intervention areas of the project as well as strong engagement of youth in peer education. SRHR manuals for youth and the enhanced capacity of FOs and religious leaders through access to SRHR knowledge and research have contributed to increase in information provision. There is not enough evidence regarding Improved access to SRHR

commodities that is directly attributable to the project. The F2A Network contributed to better SRHR care, particularly in Kenya and in Uganda where commitment among community faith leaders and MPs is high. The F2A Network contributed to greater respect and tolerance for SRHR of people and to the reduction of misperceptions, particularly via the participatory way of working, the focus on interfaith dialogue at local, national and international levels and joint projects. Results vary between countries and are, amongst others, influenced by the political and funding environment, the level of public attention for SRHR, existing misperceptions and the role of the public sector. The increasing influence of FOs on health systems, increased collaboration and the acceptance of religious leaders to be trained and to jointly explore alternative ways forward are important steps on the road to impact.

#### SUSTAINABILITY

A sustainability strategy has been drafted to ensure that the structures in place globally, regionally and nationally would survive. Although in some countries the way forward is already strategized or subject of discussion, absence of succession plans at the level of the members could be a limiting factor in operational sustainability beyond the project. Stakeholder engagement is likely to continue. The Faith to Action Network and its members gained recognition, showed innovative practices on FO's and SRHR and may count on support from target groups, SRHR experts and the larger environment in several countries for their ideas and for globally working across faiths. These results are important building blocks to achieve long term sustainability. The urgency of available resources to maintain the required level of intervention is a strategic concern of the Steering Council as leadership of the Network. the Secretariat has been able to secure a new grant which will support the activities beyond 2015. However, with the ambition of the strategic plan to expand activities, additional funding will be required.

**OVERALL CONCLUSION:** The F2A project has been very successful. The project appears to have covered more ground than envisaged by resources and time allocated. Located in the global South, the F2A Network is a relatively young, valuable platform for inter-faith dialogue and advocacy on SRHR, with visible collective successes of advocacy in support of SRHR and a high potential to make a difference at international, national and local level. By using different instruments the F2A Network has set the stage for dialogue, increased commitment and influence of FOs, and to relevant contributions to the promotion and advancement of SRHR. It has been worth funding the project and the importance of the F2A Network is evident.

#### KEY RECOMMENDATIONS

1. In order to keep up the momentum of the Faith to Action process, the F2A network needs to build on and reinforce the important successes that have been achieved so far, while acknowledging the challenges that lie ahead. All possibilities should be explored to retain the engagement built over this short past period for impact that can be achieved through joint effort among the members.
2. The F2A Network has and needs committed, inspired and powerful people who can make the right connections and make the value of what the F2A Network is doing visible. Investing in joined willingness and efforts to help the F2A "one step further" in its development is key.
3. Ways and means should be sought to ensure that skills gathered at national and organisational leadership (supreme) levels reach the lower levels where change is desired.
4. Highlight evidence in order to keep track of success in policy influencing and to draw conclusions regarding progress in result areas and make voices heard through amongst others through success stories
5. Strengthen financial viability (a multi annual financial plan do define a costing strategy, implementation of the resource mobilisation strategy and strengthen FOs accountability to improve their access to resources)

## I. INTRODUCTION

### A. Background and Context

#### FAITH ORGANISATIONS AND SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Faith organisations (FOs)<sup>2</sup> are a crucial building block for the achievement of sexual and reproductive health (SRHR) worldwide. Deeply rooted in the communities they serve and reach large numbers of people with health messages that resonate with local beliefs and culture, and provide health services through sustained networks of support. FOs also support maternal and child health while providing varied family planning services within their health facilities. However, there is scope for improvement in many areas of FO's commitment to and provision of SRHR and existing efforts are often disconnected. Participation by FOs and religious institutions in dialogue and SRHR decision making processes has been fragmented, resulting in gaps in many areas and overlaps in others. Influence has often been hindered by a lack of unified voice, low understanding of decision making processes, lack of credible champions for SRHR among faith leaders and misperceptions of decision-makers and other stakeholders caused by wrong assumptions about FOs approaches. Perceived challenges to FOs' SRHR provision include resource barriers, being the most often cited obstacle, social-cultural and religious barriers and various capacity gaps. Moreover, there has been very little dialogue between FOs and other development actors such as donors and governments.<sup>3</sup>

#### WORKING GLOBALLY ACROSS FAITHS

The launch of the Faith to Action (F2A) project has been a logical, important step in the follow up on the ground-breaking Interfaith Consensus Declaration – endorsed by more than 200 organisations spanning the secular and faith-based communities –in support of family planning (FP) and reproductive health<sup>4</sup>. In the Declaration, religious leaders committed to leveraging their networks to support families to have increased access to information and quality services on FP and reproductive health consistent with their faith. A feasibility study<sup>5</sup> investigated strategic and practical considerations of working globally across faiths to realise better FP and reproductive health funding and supportive policies (internal and external to faith organisations). The study found tremendous interest and momentum for pursuing interfaith collaboration on SRHR. Respondents agreed that partnering across faiths could accelerate acceptance of FP, minimise internal resistance within faith organisations, enable pooling of resources by the different faiths and improve the effectiveness of SRHR programmes. It could also increase the possibility that FOs, which were initially opposed to SRHR, would adopt favourable policies. The study found as well that many FOs were looking for platforms for inter-faith collaboration on FP and reproductive health and provided information on the potential for faith communities and organisations to drive policy change and garner wider support and funding for FP and reproductive health. Consultations showed that support for increased cooperation between FOs was even stronger than expected and led to the establishment of the F2A Network in June 2011 in Nairobi, Kenya and its formal

<sup>2</sup> FO's are religious organisations representing one of the 5 categories ( Faith-based non-governmental organisations; 2) Faith-based networks and intermediaries; 3) Faith-based service delivery infrastructure; 4) Denominational hierarchies; 5) local congregations and houses of worship – Monitoring and evaluation framework |faith to action| 12 October 2012

<sup>3</sup> Faith to Action Network Strategic Plan 2014-2018

<sup>4</sup> Interfaith Declaration to Improve Family Health and Well-Being – 29 June 2011, Nairobi, Kenya. In this declaration, Christian, Muslim, Hindu and Buddhist religious leaders committed to leveraging their networks to provide education and services that enable families to plan the timing and spacing of their pregnancies in ways consistent with their faith. They also called on others to support this initiative to further influence government and donor policies and funding.

<sup>5</sup> From Faith to Action Creating - an Interfaith Initiative to Advocate for Increased Funding for Reproductive Health and Family Planning, April 2012.

launch on 11 November 2013 in Addis Ababa, Ethiopia. Further support was required to enable the global interfaith network for advocacy on family health and wellbeing to develop. Partners with a history of jointly promoting an interfaith approach to the advancement of SRHR<sup>6</sup> targets formed a consortium and developed the F2A project proposal in order to enable the Network to carry out its important role in support of its members.

### OBJECTIVES

The F2A project (January 2013 - present) has been financed by the Dutch Ministry of Foreign Affairs (MoFA)<sup>7</sup>, and aims to contribute to the objectives of the Dutch government, described in the letter to the House of Representatives of 7 May 2012. The Dutch policy on SRHR is focused on the following outcomes:

1. Better information and greater freedom of choice for young people about their sexuality
2. Improved access to reproductive health commodities
3. Better sexual and reproductive health services, which are used by an increasing number of people
4. Greater respect for the sexual and reproductive rights of groups who are currently denied these rights.

The overall aim of the F2A project is increasing FOs commitment to and provision of SRHR information to young people, access to commodities, services, and respect for the SRHR of people to whom these rights are denied. The project is built on four thematic areas (1) Coordination and networking, (2) Policy and advocacy, (3) Capacity development and (4) Research and evidence.

The project has four outcomes:

5. Financially viable global interfaith network established and coordinated as an effective platform for dialogue and advocacy on SRHR
6. Increased FOs participation and engagement in SRHR policy making processes
7. Technical and financial capacity of the network and its members built on SRHR issues
8. Knowledge on FOs approaches for SRHR policy making generated and disseminated.

### GEOGRAPHIC FOCUS

The geographic focus of the F2A project lies on the continent where the burden, according to the literature, is highest: Africa. Although the project does not specifically focus on single countries in Africa, special attention has been paid to FOs in Benin, Burundi, Ethiopia, Ghana, Kenya, Malawi, Mali, Rwanda, Tanzania and Uganda. In the course of the project some activities, which were crucial in the project, have been implemented in Indonesia<sup>8</sup>.

### CHAIN OF REASONING

The intervention logic of F2A is derived from a Theory of Change which starts with the fact that FOs are vital for delivering SRHR information, resources, services and promoting respect of rights<sup>9</sup> and influential in policy circles. An integrated approach which combines coordination and networking with advocacy, capacity development and knowledge transfer was expected to be an adequate response to the urgent need to strengthen the capacity of FOs on SRHR, to open up the discussions between FOs and to support them to develop SRHR policies that both reflect religious values and answer the needs of youth. Strengthening FO's capacity and knowledge on SRHR and international interfaith cooperation, dialogue

<sup>6</sup> Sexual and Reproductive Health and Rights

<sup>7</sup> SRHR Fund - SRHR is one of the four priority themes of Dutch development cooperation policy

<sup>8</sup> This concerns the Meeting of the Steering Council in Indonesia which helped mobilise additional resources and partnerships that made it possible for the Faith Preconference to be held.

<sup>9</sup> According to the WHO, they provide between 30-70% of health care in developing countries often reaching the vulnerable and marginalised who are locked outside of the mainstream public and other private health services.



and common ground for work related to FP and reproductive health would catalyse the efforts and experience of all stakeholders and open doors to leverage their approaches to advance SRHR. Furthermore capacity development would have a snow ball effect in policy and funding arenas because FOs have close relationships with religious members of communities and policy makers, who rely on the same religious constituencies to ensure their election and legitimacy. Engaging with religious leaders who are on to FP / reproductive health can influence politicians and can lead to policy change, as well as changes in values and attitudes and will lead to increased commitment of FOs' for better SRHR (better information, increased access to commodities better SRHR services and indirectly to greater respect for the SRHR of people to whom these rights are denied).

### PROJECT MANAGEMENT

The project has been carried out through a consortium of partners<sup>10</sup> and implementing partners<sup>11</sup>. They were all involved in the planning and selection of countries and activities, gave their inputs during development of proposals and participated in planning, review and update meetings. Together with representatives from member organisations and selected donors, they take part in the global Steering Council of the F2A Network. DSW, as "religion-neutral" facilitator, was requested by faith based organisations that established the Network to serve as the Network's secretariat. The collaboration between DSW and the Network is in a transition phase. A MOU between DSW and the F2A secretariat defines the relationship. Staff contracts are now being signed by F2A Network.

## B. Purposes and scope of the evaluation

With the project ending in October 2016, an end of project evaluation has been foreseen.

### PURPOSE

The objectives of the evaluation are twofold:

1. To evaluate the project according to the OECD DAC evaluation criteria of relevance, effectiveness, efficiency, impact and sustainability<sup>12</sup>
2. Provide valuable learning opportunities, good practice and recommendations to inform the existing and future Faith to Action Network's projects.

### EVALUATION SCOPE

The evaluation primarily examined the four thematic areas of the F2A project and their impacts on the provision of SRHR by FOs. It also intended to capture any unintended effects regardless of the targeted outcomes of the project. The evaluation aimed to answer the following key questions:

1. To what extent was the project, as designed and implemented, suited to context and priorities of the target group and the donor?
2. To what extent was the project, as implemented, able to achieve its targeted outcomes?
3. Taking into account the timeline and the budget, to what extent were resources appropriately used to produce the desired outputs?
4. To what extent have the project activities contributed to better provision of SRHR by FOs?
5. To what extent are the benefits of the project likely to continue after the project has come to an end?

<sup>10</sup> Consortium Partners: The Deutsche Stiftung Weltbevölkerung (DSW –lead agency), Catholic Organisation for Relief and Development Aid (Cordaid) and the African Council for Religious Leaders-Religions for Peace (ACRL-RfP).

<sup>11</sup> Implementing partners: Al-Azhar University, International Islamic Centre for Population Studies and Research, Christian Connections for International Health (CCIH) and the Muslim Family Counselling Services MFCS

<sup>12</sup> OECD DAC Criteria for evaluating development assistance as laid out in the DAC principles for evaluation of development assistance and later defined in the glossary of key terms in Evaluation and Result Based management- [www.oecd.org](http://www.oecd.org)

## C. Methodology

The evaluation has been carried out in August and September 2016. An official letter from DSW introduced the evaluation team to Steering Council Members and colleagues and informed them about the evaluation. The evaluation team carried out a desk review and applied participatory approaches by inviting F2A Network Steering Council members, Network members, secondary beneficiaries (youth), project partners and stakeholders to share their experiences with the implementation of the project through an online survey (Table 1), key informant<sup>13</sup> and stakeholder interviews<sup>14</sup> and several meetings during country visits in Kenya and Uganda. Names of the people who received a questionnaire have been provided by DSW and the F2A Network Secretariat.

SurveyMonkey <sup>15</sup>				
Total Invitations : 84			Responses: 17*	
Opened	Unopened	Refused	Completed	Partial
44	30	10	12	5

Table 1: Response Survey Monkey

\* Response from Network members in Afghanistan, Cameroon, Uganda, Ghana, Nigeria, Kenya and Ethiopia.

## ORGANISATION OF THE COUNTRY VISITS

The country visit in Kenya was organised from 12 to 14 September 2016<sup>16</sup> and in Uganda from 15 to 17 September 2016.<sup>17</sup> The evaluation proceeded in both countries according to plan with minor adjustments. The areas of exploration related to the evaluation questions were followed closely without formal questionnaires. One on one interviews and meetings have been carried out, including with youth groups (secondary beneficiaries). Results were discussed together with relevant parties and then the decision was made on what changes should be reported on. The interviews were all conducted in English, except for the Mityana youth group from the Mubende District in Uganda where many interviewees narrated their stories in the local language.

## D. Limitations to the evaluation

Data collection and interpretation has been influenced by the fact that

- Some interviewees could not be reached and/ or did not react on the invitation for the interview, were only accessible via mobile phone / WhatsApp with weak connection or didn't speak English. This hampered the interview quality and the processing of information.
- As far as impact targets refer to long term behavioural changes, progress should be tracked over a longer period of time in a variety of contexts through a combination of sources of information, including sophisticated quantitative data. It would require much more time than has been available for the current evaluation to investigate changes in impact targets that are directly attributable to the project.

## ACKNOWLEDGEMENT

The Coalition Factory wishes to thank DSW and the F2A Secretariat most sincerely for the supportive way in which they facilitated the evaluation, and the host persons in Kenya and Uganda for their contributions in any form made during the country visits.

<sup>13</sup> Key informant interviews: Skype interviews with members of the Steering Council and implementing partners who have particularly informed perspectives regarding the design, financing and implementation of the project (Annex 3)

<sup>14</sup> Stakeholder interviews : Stakeholders in Rwanda, Ghana and Burundi and the Dutch MoFA (Annex 3)

<sup>15</sup> The Coalition Factory sent out a reminder on the 9<sup>th</sup> of September to encourage the response

<sup>16</sup> All interviews were held within Nairobi City, either at the DSW or at the offices of the interviewees

<sup>17</sup> Interviews were held in Kampala City and Mityana (secondary beneficiaries/Youth)

## II MAJOR FINDINGS AND ANALYSIS

### A RELEVANCE

**EQ 1: To what extent was the project as designed and implemented suited to context and priorities of the target group and the donor?**

#### FILLING A NICHE

The fact that the project, with its focus on promoting inter-faith cooperation for the advancement of SRHR, filled a niche since no other advocacy initiative was targeting FOs and religious leaders across the African continent, justifies addressing of the needs within the proposed framework. It complemented the numerous national and pan-African advocacy initiatives by uniting and positively mobilizing respected FOs and religious leaders by effectively addressing SRHR and by providing space to identify and discuss common values and areas of consensus.

#### IN LINE WITH CONTEXT CHARACTERISTICS

Interviewees from Rwanda, Ghana and Burundi underlined that the objectives respond to the urgent need in their countries to create unity between the different religious leaders and groups<sup>18</sup> and to stimulate interfaith dialogue and collaboration on SRHR topics, including the promotion of maternal health and the fight against HIV/Aids. The design and implementation of the project created opportunities to bring people from different faiths together, to promote necessary joint (multi-faith) analysis of SRHR issues and to identify realistic solutions acceptable for all faith groups. In Kenya it has been mentioned that the combination of selection of themes, phasing them into action and new ways of working was optimum under the circumstances where diversity of faith, capacity and levels of education could have led to reluctance, fear, division and competition.

#### ALIGNMENT WITH NATIONAL PRIORITIES

The need for FO's to align their actions with national policies has been an important area of emphasis during the trainings offered in Addis Ababa (2013), Mukono (2014) and Bali (2016). The projects developed through proposals by Network members and with technical support from the Secretariat are aligned to the national policies and guidelines; including; national health policies, national youth policies, adolescent health policies, national HIV/AIDS policies, family planning policies and gender-based violence, among others. Some are also aligned to regional protocols like the Maputo Plan of Action which most governments ratified.

#### ADRESSING TARGET GROUP NEEDS

No effort has been spared to identify target group needs, the problems they deal with and the context they work in prior to and during project design and implementation. The objectives and chosen activities are well-suited to address problems and target group needs identified before the project started. They responded to expressed demands. The feasibility study and the contextual analysis<sup>19</sup> highlight the challenges that FOs face, and the conditions under which institutions can work together for FP and sexual and reproductive health advocacy. Identified target group needs guided the project set-up and

<sup>18</sup> About 97% of the population in Rwanda belongs to different religions, 2012 senses.

<sup>19</sup> Contextual analysis | faith to action | revised 8 January 2013.

the selection and implementation of activities. The identification of risks during project design led to a careful, phased and flexible approach to developing the Network. Knowledge generated from a series of interviews with faith leaders in 2013, investigating faith-specific interpretations of SRHR, has been utilized in project planning and informed implementation. In the course of the project implementation active collection of feedback has taken place especially regarding advocacy and capacity development.<sup>20</sup> The Annual Survey of the Network's members<sup>21</sup> helped inform communications and served as basis for maintaining a common advocacy direction for the Network's members. FOs' feedback has been collected after conferences and trainings tailored to the type of the targeted audience and activity and influenced the design of future events.<sup>22</sup> In Uganda and Kenya, interviewees confirmed that project design considered the needs of FOs and that the project was designed in a participative manner: "*for the members and by the members*". In Kenya interviewees expressed some reservations in that the project design reflected what members could expect from the Network but little, if anything, was provided regarding the expectation of the Network from the members beyond commitment to belong, plan and implement activities. This created some dependency and high expectation of the members. The absence of an overall capacity development plan, reflective of needs assessment findings and guiding the capacity development process is a missing step between the needs identification and the implementation of capacity development interventions for selected target groups.

### IN CONFORMITY WITH THE PRIORITIES OF THE DUTCH MINISTRY OF FOREIGN AFFAIRS

The F2A Network was funded by the Dutch MoFA because its objectives were in line with the four priorities of the Dutch SRHR fund. Particularly F2As focus on religious leaders and youth made the Ministry decide to support the project as the promotion of dialogue between different (religious) groups is a key issue for the Minister and within Dutch development policy. The increasing numbers of people targeted and reached by the F2A Network are considered as very positive. Besides, the F2A Network is contributing to greater respect for SRHR for all by involving community leaders in the realisation of SRHR, by mobilising churches and faith-based organisations and by providing technical medical information and training to religious leaders on the subject of sexual health.<sup>23</sup> Acknowledging that outcomes and impacts are difficult to achieve during a three year project, the Dutch MoFA views policy and advocacy activities as *very relevant first steps* to realise longer term changes, particularly mobilising influential SRHR leaders and champions<sup>24</sup>.

<sup>20</sup> Faith to Action Network SRHR Narrative report 2013.

<sup>21</sup> The Annual Survey of Network members gathers information on key performance monitoring indicators but doesn't include all data needed for impact evaluation.

<sup>22</sup> Summary of Participants' Feedback Faith Pre-Conference: The role of faith communities in family planning advocacy and services towards achieving the Sustainable Development Goals, 24-25 January 2016, Nusa Dua, Bali, Indonesia 03 March 2016.

Summary of Participants' Feedback Training: Building Capacity for Increased Access and Quality SRHR Services, 6th – 11th October 2014 Mukono, Uganda.

<sup>23</sup> See page 6, SRHR and HIV/Aids, subtheme Rights and Respect ([www.dutchdevelopmentresults.nl](http://www.dutchdevelopmentresults.nl)).

<sup>24</sup> The actual contribution of the F2A project to the result areas is described under D. Impact, page 29.

## B EFFECTIVENESS

### EQ 2: To what extent was the project, as implemented, able to achieve its targeted outcomes?

#### 1. LEVEL OF IMPLEMENTATION

The project implemented all planned activities which led to a full achievement of all outputs foreseen in the initial project document. These were:

##### COORDINATION AND NETWORKING

1. **Legalisation and structuration of the network:** The F2A Network is the only interfaith network of organisations with a focus on FP, SRHR and SDGs as they apply to family health and wellbeing. The constitution of the Network was signed by Steering Council officials in 2014. The Network was fully established becoming a legal entity in 2015. The Network started working on its governance structure prior to the launching of the project. It was further refined during the Project Planning, Research Framework and Steering Council meeting(s) held in May 2013 in Mombasa, Kenya. The Network has four main structures in its governance: a General Assembly<sup>25</sup>, a Steering Council<sup>26</sup>, an Advisory Council<sup>27</sup> and the F2A Secretariat.<sup>28</sup>
2. **The diversity and representativeness of the network:** The Network had an initial target to recruit 150 members, but this target was revised to 90 to “ensure quality over quantity and assure the realisation of greater results and impact”.<sup>29</sup> The Network has currently 85 member organisations represented in 23 countries, 5 continents and representing the following faith traditions: 1. Islam, 2. Christianity, 3. Hinduism, 4. Confucian 5. Buddhism 6. Judaism.<sup>30</sup> Muslims and Christians are more represented and naturally involved since they run hospitals and clinics and more services than other faith groups, like Buddhists and small faith based groups.
3. **The development and implementation of the strategic plan:** The strategic plan for the period 2014 – 2018 has been developed in 2013 and endorsed in 2014. In the same year a popular version of the plan has been published and made available for the Network members. The F2A Network is implementing the strategic plan<sup>31</sup>, which includes several key achievements that relate to the Faith to Action project (official registration, increased membership, studies, training and advocacy actions). The F2A Network increased the implementation capacity<sup>32</sup>, planned the activities for 2017-2018 and identified the financial needs and strategies to fulfill the strategic plan until 2018.

##### POLICY AND ADVOCACY

1. **20-30 advocacy events and meetings organized with religious leaders and decision makers:** Participation in advocacy events and meetings with religious leaders and decision makers (MPs and

<sup>25</sup> The General Assembly is a Network members meeting where the Steering Council is elected and policies are being adopted.

<sup>26</sup> The Steering Council, composed by member organisations represented by nominated individuals, is responsible for the overall governance of the network and provides broad guidance, oversight and approval of key decisions and activities.

<sup>27</sup> The Advisory Council, composed by experts, celebrities and champions of reproductive health issues, advises the Steering Council on technical issues and raises the profile of the Network through high-profile endorsements.

<sup>28</sup> The F2A Secretariat administers and coordinates the day-to-day operations of the network, organises network meetings and coordinates the representation of the network at relevant international and national fora.

<sup>29</sup> Page 42, F2A Annual Report 2013.

<sup>30</sup> F2A Factsheet Milestones and footprints

<sup>31</sup> Faith to Action Network Strategic Plan 2015-2018 Implementation

<sup>32</sup> Projects supported by: Ministry of Foreign Affairs - Kingdom of the Netherlands, Capital for Good (CfG); Population Action International (PAI), Department for International Development (DfID) - United Kingdom).

civil servants) were key advocacy methods identified by the F2A Network.<sup>33</sup> In the course of the project the F2A Network organised 40 advocacy meetings and events<sup>34</sup>.

2. **20 Champions and high-level support gained:** Members of the F2A Advisory Council promoted the work of F2A on FP and SRHR at international levels.<sup>35</sup> The F2A Network gained over the project period the support of 897 Champions and high-level persons. Support came mostly from Kenya, Uganda, Indonesia, USA and Egypt<sup>36</sup>.

## CAPACITY DEVELOPMENT

1. **3 training curricula developed:** The F2A Network developed 3 training curricula<sup>37</sup> and ICFP 2016 Pre-conference materials.
2. **60 workshop participants from the network trained on SRHR, advocacy and resource mobilization:** The capacity of 181 religious leaders/FO's has been enhanced in the areas of resource mobilization, advocacy, communications, and monitoring & evaluation; through skills training, on-the-job training, exchange visits and mentoring. Training has been provided as well to health providers from faith based facilities on provision of comprehensive SRH services with focus on new technologies and approaches and to media on reporting on provision of SRH services provided by faith based health facilities and on the role of religious leaders
3. **Technical assistance provided to network members:** In the course of the project the F2A Secretariat offered over 200 times technical assistance, which included the identification of funding opportunities, assistance in proposal development, assistance in rural appraisal planning and implementation.

## RESEARCH AND EVIDENCE

1. **Comparative analysis of SRHR practices from different faith perspectives:** Analysis have been realised throughout the project period and resulted each project year in a number of articles on relevant topics.<sup>38</sup>
2. **Mapping of recent and current FOs SRHR initiatives:** In 2013 the F2A Secretariat conducted and published a mapping study on FOs and SRHR in order to construct an up-to-date review of FOs' interventions in SRHR and to highlight patterns and trends of FOs' SRHR provision.<sup>39</sup> The study received very positive feedback from a wide range of experts, donors and FO representatives and was made available on various websites of F2A partners and members.
3. **Knowledge on FOs and SRHR disseminated through articles and on conferences:** The F2A Network has showcased the value of interfaith approaches in addressing SRHR in presentations in conferences across the world, in interview series and in newsletters.<sup>40</sup>

<sup>33</sup> F2A, Advocacy Strategy, April 2016.

<sup>34</sup> Asia: 4; Africa: 29; USA: 4; Latin America: 1; Europe: 2.

<sup>35</sup> See for instance: Page 21 – 22, Faith to Action, Grant Report 2013, Activity No. 25003, 5<sup>th</sup> of June, 2014.

<sup>36</sup> F2A Annual Reports 2013, 2014 and 2015 (indicators 2.2.1. and 2.2.2.).

<sup>37</sup> (1) Youth SRHR and Faith Leaders Training, Ethiopia 2013; (2) Building capacity for increased access and quality SRHR, Uganda, 2014; (3) Caravan Training Manual- Al-Ahzar University – Building the capacity of Religious Leaders to support Birth Spacing, Women, Girls & Children's Health, 2015.

<sup>38</sup> In 2013, 66% of the set target was achieved, in 2014 100% (4 analyses) and in 2015 80% of the target (4 analyses). In 2016, one analyses has been published. Relevant topics included: Islam and Family Planning, Rights in Sexual and Reproductive Health from an Anglican Perspective, Providing FP and SRHR services through Christian Health organisations, the Dutch government SRHR policy and engagement with FOs, Islam and women's SRHR.

<sup>39</sup> "Advancing Sexual and Reproductive Health and Rights through Faith-Based Approaches: a mapping study, 2014". The study aimed to (1) identify synergies, value addition, gaps, and points of consideration while engaging with FOs in SRHR (2) recommend ways to advance SRHR from a faith-based perspective.

<sup>40</sup> (1) InterActive - a quarterly newsletter addressing the problem of insufficient documentation on the contributions by FOs to family planning and reproductive health; (2) e-InterAction - a bi-monthly e-newsletter designed to educate and inform Network members and stakeholders on thematic issues involving FP and reproductive health so as to promote dialogues and create an understanding of the role of FOs in delivering health; (3) e-InterLink newsletter facilitates linkages between Network Members on thematic issues on family health and wellbeing.

4. **M&E framework to measure the effect and impact of the F2A network:** The implementation and progressing tracking have been guided by a very comprehensive Monitoring and Evaluation framework, which has been used to monitor project outputs and outcomes and provided appropriate monitoring activities at critical stages of the project. The project did not include a mid-term evaluation, not only for budget reasons but also because an end of project evaluation exercise would more than a mid-term evaluation allow the inclusion of more accurately assessed criteria, such as impact and sustainability prospects.

## UNFORESEEN CHANGES IN IMPLEMENTATION

No changes have been observed that affected the scope of the F2A project (objectives, outputs and outcomes). The project recognised that policy processes and advocacy are not linear, require a long-term effort and occur in a dynamic and fast-changing environment, which needs enough flexibility to change tactics. The project offered space for changes and reports include proposals to adapt methods and activities (implications for the future). Unforeseen changes derived from lessons learned. They improved project implementation by adding activities to provide expert knowledge and theological answers on SRHR and FP<sup>41</sup>, by including additional target groups in training activities<sup>42</sup> or by supporting F2A members with the implementation of their action plans.<sup>43</sup>

## 2. ADEQUACY OF PROJECT ACTIVITIES

The selection of thematic areas and project activities of the F2A project has been built on solid arguments. The project activities correspond closely to the problems identified prior to the project and were adequate to make progress towards the project objective and targeted outcomes. Combining interfaith cooperation, advocacy, capacity development and knowledge and research has proven to be effective. The support strategies correspond closely to the problem level where capacity disparities were prevalent. The chosen interventions strengthened the focus of the Network on events, which has been important to carry the message, to find common ground and to show examples of results at global, national and community level. Due to resource constraints, the project adopted online means for follow-up. However, it has emerged that the FOs had no access to internet based technology methods which reduced the attention for dynamic and follow-up beyond events.

## COORDINATION AND NETWORKING

F2A coordination and networking activities were perceived as adequate to make progress towards the objectives and outcomes. Interviewees in Kenya underlined the importance of the formation stage of the Network, which was well facilitated and firmly built the foundation of the Network. Space for expression as well as transparent dialogue on divergent views led to common engagement of the four themes of the project. In general, it has been observed that especially the experience of sharing and learning among faiths promoted tolerance, understanding and ensured that the common spirit was upheld.

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*PEER INFLUENCE - "One of the best approaches in working with and through FO leaders in East and Central Africa. The approach was the most reliable and efficient way to achieve results around SRHR. Peer influence among the leaders of different faiths produced fast understanding and action. Open and progressive language was encouraged and employed. Project objectives were objectively set and well implemented."*

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<sup>41</sup> Kenya 2015: The organisation of Learning Caravans to deal with misperceptions, provide expert knowledge and theological answers on SRHR and FP.

<sup>42</sup> Revision of the Mukono training programme and subsequent inclusion of additional target groups, namely professionals on media and communications as well as medical professionals.

<sup>43</sup> The establishment of Faith + FP Action Fund to support the implementation of advocacy opportunities that have quick yields.



In Ghana, most FOs working on SRHR already collaborated before the start of the project, including cooperation with other, secular, NGOs and relevant government institutions.<sup>44</sup> In Rwanda faith-based cooperation on SRHR issues has been strengthened between organisations and individuals that already worked together in the same region prior to the launch of the Network and new faith-based links/cooperation on SRHR issues has been established between Christians, Muslims and Protestants. In Burundi, F2A could have done more to link different high level religious leaders at national level as they are often hampering change.

### POLICY AND ADVOCACY

According to the F2A Network, advocacy is a set of targeted actions for positive change internally within the faith based organisations and externally its improvements directed at decision/policy makers in support of specific value, beliefs, principles and positions for improved family health and wellbeing<sup>45</sup>. It was known that advocacy was likely to succeed if it were conducted with respect and sensitivity for and by different faiths.<sup>46</sup>

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*In Uganda, the use of one voice by all FOs, as was intended in the project, has been very relevant in advocacy where engaging the government and even certain deep-seated adverse cultural beliefs call for trust, influence, and consistent common effort. The pooling of resources and influence from trusted religious leaders made it possible for the government to acknowledge FOs as "important partners in service delivery". F2A added to what other inter-religious initiatives such as Inter-Religious Council of Uganda (IRC) had started.*

*Pooling of resources among FOs especially knowledge and skills propelled the F2A message into success within a relatively short time. F2A plan was acknowledged as among the best strategies to engage a common social problem that was rooted mostly in culture and faith. Meagre resources were an obstacle for some fairly influential leaders while those fairly rich with resources needed the influence of those without resources to get the message to the target groups and to policy makers and implementers. Complementarity produced results from design to implementation.*

*The "total engagement" towards SRHR where various faiths approached the matter freely but scientifically from their own perspectives meant that all efforts were directed jointly toward success right from the design stage. For instance, while some FOs allowed the artificial methods of FP, others went for natural methods and abstinence. Bringing in the government made it possible for the community to be given the chance to hear about all possible methods and then make informed choices. This approach was relevant in Uganda where the community consisted of many faiths and cultural values in addition to some who might not belong to any particular faith or culture. "The objectives were similar but approaches were different".*

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Most interviewees agree that the policy and advocacy activities carried out contributed to make progress towards the project objective and targeted outcomes, particularly (1) the increasing mobilisation of influential leaders and Champions in the field of SRHR, which enhanced legitimacy and credibility and strengthened the F2A advocacy at national and international levels. (2) the organisation of the Caravan which resulted in substantial media coverage and (3) the organisation of joint events through which, as in Ghana, different stakeholders complemented each other (e.g. by reaching out to local populations and supporting advocacy at local levels).

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<sup>44</sup> Relevant in this sense is the work of the high level Interagency Coordinating Committee for Contraceptive Security, established in 2002, where (binding) decisions on SRHR are taken. Apart from relevant government agencies also private sector and CSOs participate including FBOs. The F2A implementing partner Muslim Family Counselling Services is collaborating with this Committee, for instance on the development of a compendium of FP services and commodities in the country. They share links on the website and support dissemination of the information. Another example of already existing collaboration in Ghana is the Annual FP Week Celebration (week of 26<sup>th</sup> of Sept) during which all (faith) organisations support awareness raising activities. Muslim organisations are also active members of the organization committee.

<sup>45</sup> Faith to Action Network Advocacy Strategy April 2016.

<sup>46</sup> Feasibility study 2011.



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#### *Learning Caravan Kenyan Coast*

*In 2015, F2A organized a Learning Caravan at the Kenyan Coast (Mombasa, Kilifi and Lamu) to improve the capacity of F2A members to conduct internal (within faith communities) and external advocacy (towards national and county governments, international donors) and to enhance their knowledge on different SRHR issues. Activities included: training sessions and participatory engagement with community members. The Caravan was very successful; a total of 65 imams were trained on family planning and other SRHR issues, including early marriage, FGM and domestic and sexual violence. The Caravan generated substantial media coverage via television, radio and newspapers, particularly in Kenya.*

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### **CAPACITY DEVELOPMENT**

The overwhelming desire of FOs to be more effective in their response justifies tailor made support focused on a broad range of skills and competencies to effectively bring about change. They include technical, advocacy and financial capacity on SRHR issues.<sup>47</sup> During the F2A Council Meeting of May 2013 in Mombasa trainings were identified as good opportunities to bring members of the Network together as response to various capacity needs.<sup>48</sup> It has been expected that advocacy coupled with capacity building activities would increase FOs' positive engagement with contraceptives and medicines for better SRHR and that developing resource mobilisation skills could be a way in which their effectiveness might be increased.<sup>49</sup> According to interviewees, F2As activities in the area of capacity development were adequate to make progress towards the project objective and targeted outcomes. Stakeholders from Burundi recognize the value of the trainings because their participation in Addis Ababa in 2013 and in Mukono in 2014 contributed to improving their contacts with other stakeholders, including journalists and government representatives. As a result of their participation, they plan to organize a workshop in Burundi with participation of decision makers and leaders of the main religious groups to discuss the development of one common guiding document on SRHR to be used by all religious leaders. It is however noted that F2A should focus increasingly on the involvement of high level religious leaders in the country, to sensitize them and to promote collaboration.

### **RESEARCH AND EVIDENCE**

Research and evidence has been critical in the advocacy process of the F2A Network and its members to make the case for change. According to the interviewees, the F2As activities in the area of research and evidence were adequate to make progress towards the project objective and targeted outcomes. However, all interviewees coincide that there is still a need for more information on SRHR (e.g. on modern FP commodities), and that a lot of available awareness raising information needs to be adjusted to youth and the different religious groups. As expected, filling of the knowledge gaps increased recognition of F2A members and their possibilities to establish stronger partnerships and to improve understanding of internal and external stakeholders of scientific and/or faith based evidence for family health and wellbeing. In Kenya, the trickle down (cascading) of lessons learnt at the Kampala Conference has been partially realised. This is due to a low representation at follow up meetings to internalise the lessons and to transfer the lessons to the media, FO leaders and individual technical implementers. The same partial achievements were noted on the effect of the Learning Caravan campaign carried along the Kenyan coast.

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<sup>47</sup> An analysis from Pan African Christian AIDS Network indicates that lack of funding has been identified by the faith organisations in Namibia as the second strongest obstacle to establishing or expanding their HIV/AIDS activities Yates D (2003) Situational Analysis of the Church Response to HIV/AIDS in Namibia: Final Report. Windhoek, Namibia: Pan African Christian AIDS Network Available: [http://www.pacanet.net/index.php?option=com\\_idownloads&Itemid=100002&view=finish&cid=12&catid=8](http://www.pacanet.net/index.php?option=com_idownloads&Itemid=100002&view=finish&cid=12&catid=8). Similarly, a report from WHO (2007) concludes that many faith organisations have an overwhelming desire to be more effective in their responses, and developing resource mobilisations skills could be one way in which their effectiveness may be increased.

<sup>48</sup> Meetings Report Faith to Action Planning, Research Framework, Council Meeting May 13-17, 2013, Mombasa.

<sup>49</sup> WHO 2007.

### 3. ACHIEVEMENT OF PROJECT OUTCOMES

#### COORDINATION AND NETWORKING

##### THE EFFECTIVENESS OF COORDINATION MECHANISM

According to Survey Monkey respondents the F2A Network is a strong forum and effective platform for dialogue and advocacy on SRHR. They underline the Network's capacity to bring various players from different faiths, professions and nations together, who are committed to advocate for the promotion of SRHR and to bring about change at local, regional and international levels. Some interviewees consider the Network effective because it thinks about its members rather than competing with them and because it is managed by highly experienced personnel. The F2A Network is being viewed as a major rallying point for international policy making processes related to SRHR because the Network participates in the international policy monitoring process and is best suited to influence international advocacy process for the promotion of FP and SRHR priority issues of communities. Most interviewees are of the opinion that F2A contributed to the enhancement of inter-faith cooperation on SRHR issues at local (Burundi) and at national level (Ghana, Rwanda). Interviewees from Kenya mentioned that F2A has given FOs a common and formidable platform to advance crucial causes of the community from an informed perspective.

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*The government of Kenya was "proud to be part of F2A project". "The Network has been contributing to policy making and even to implementation of policies at the grass root level. The integrity of religious leaders makes their contributions undoubted and their influence comes in handy in making the population go with the policies of the government. The new policy, Population Policy for National Development, was contributed to by FO leaders and contains a specific provision for FO roles in its implementation"*

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It has been suggested to establish a strong Network of youth led organisations, to support participation of young people in the F2A Network and to provide basket funding for member networks to deliver the best to FOs in their regions and/or districts.

##### Examples of increased inter-faith cooperation and/ or alignment for the advancement of SRHR

- The Christian Health Association of Nigeria constituted in the Jos Plateau State an advocacy team in support of SRHR.
- The creation of a Family Planning advocacy forum in Uganda and the implementation of Family Planning in the Kyenjojo District.
- The facilitation of dialogue meetings with governments to increase the district budget on the reproductive health services and asked religious leaders to support the movement.
- Exchange visits and participation in the population day among other events.
- During the pre-budget hearing in Kenya<sup>50</sup>, F2A submitted a Memorandum to the National Treasury on behalf of FOs working in the reproductive health sub-sector. In the memorandum, the Network made two recommendations: Provision of free maternal and child health services by faith-owned health facilities and engagement of FOs in creating demand for SRHR services.
- The Caravan, the child spacing campaign among Moslems along the coast, was the most tangible experience of F2A intervention in Kenya although not to the scale that was achieved in Asian countries. The lessons from the caravan have been very useful for Uganda and are being used in mentoring Muslim leaders.

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<sup>50</sup> Kenya pre-budget hearing, 4-5 February 2014, Nairobi.

### IMPROVED ALIGNMENT OF ADVOCACY EFFORTS

- During the Ecumenical Pharmaceutical Networks' (EPN) Biennial Conference<sup>51</sup>, a representative of the Steering Council presented the F2A Network's Declaration, calling to partner with the Network in FP advocacy efforts. The conference was attended by approximately 150 faith-affiliated medical professionals, from Africa and beyond.
- In 2014, F2A was invited by the Ministry of Health in Uganda and Makerere University to provide input to stakeholder consultations on Costed Implementation Plan for Family Planning<sup>52</sup>. It involved the setting up of a national coalition of advocates and champions composed of religious leaders to scale up best practices in advocacy on FP. Declarations from the Kampala Conference have contributed to SRHR being fed into Sustainable Development Goals (SDGs) in Uganda and hence impact the global trajectory on SRHR.
- As a result of F2As work carried out during the 5<sup>th</sup> East Africa Health and Scientific Conference in 2015, the Ministry of Health, in partnership with UNFPA, UNEPI, UNICEF, GAVI and Inter-Religious Council of Uganda, organised a consultative meeting where over 600 religious leaders across the country pledged (via a Communiqué) to support reproductive, maternal and adolescent health<sup>53</sup>.
- The project managed to secure a document of commitment from all Network members on SRHR at the 2016 International Conference for Family Planning held in Bali, Indonesia. Best practices were shared at the conference, and communication continues till today among the members on the practices and experiences shared in that conference.

### THE WAY IN WHICH NETWORK MEMBERS WERE ENABLED TO SHARE EXPERIENCES AND LEARN FROM EACH OTHER

A variety of opportunities have been given to Network members to share experiences and to learn from each other. SurveyMonkey respondents mention that advocacy and Network events and experience sharing have been very empowering and have led to a better understanding of global and local issues. They see a big value in the international nature of the Network, in the connectivity to a variety of organisations and actors addressing the same issues, social networking and learning. In Kenya the Network has made some religious leaders (and even the organisations as bodies) realise that others were also suffering similar problems. Removing religion as a hindrance for cooperation and making it a tool for solutions has been appreciated... the mask of religion has been removed by the project". Religions in the Network are no longer outdoing each other – they are realising potential/power in their diversity: unity out of being different.

### POLICY AND ADVOCACY

#### INCREASED ENGAGEMENT OF FOs TO CONTRIBUTE TO THE ADVANCEMENT OF SRHR

Overall, F2As activities contributed directly or indirectly to an increased engagement of FOs to advance and promote SRHR. In Rwanda positive changes have been observed in FOs commitment to SRHR issues in the past three years. FOs are implementing what they have learned (e.g. in trainings), participate in awareness raising campaigns on SRHR (e.g. in radio shows such as "Voice of Africa") and new (Evangelical) churches are getting involved in discussions on SRHR. Decreased involvement of the Catholic Church in the provision of SRHR information and commodities complicates advocacy as almost 28% of the health facilities in the country are managed by the Catholic Church. In Ghana, FO's commitment and cooperation with the government (notably the Interagency Committee) and the organization of the annual FP Week Celebrations have put religion and SRHR firmly on the agenda. In Burundi FOs commitment has mostly increased at local and provincial level. The dialogue with religious leaders on SRHR problems faced by the youth, combined with national and international evidence resulted in more engagement of faith-based health centres to organise awareness raising activities with

<sup>51</sup> 28-30 April 2014, Nairobi, Kenya.

<sup>52</sup> Page 35, Faith to Action, Grant Report 2014, Activity No. 25003, 16<sup>th</sup> of June, 2015.

<sup>53</sup> Advocacy Events 2015 and High Level Support: Narrative 2015, page 1.

youth. They also give references to female adults and adolescents who like to use modern contraceptives. Participants in the Mukono training in 2014 share their knowledge with colleagues in their project (Next Generation) and advocate at district level to ensure that the secondary effects of the use of FP commodities are being dealt with for free in the project zone. This was successful in 6 provinces. However, on the other hand, changes at higher levels in Burundi are very slow as high level religious leaders (particularly from the Catholic Church) still block the use of modern contraceptives.

Some interviewees mentioned that the F2A Network should support and promote the establishment of a French advocacy group and that there is still a need to support partners to improve the advocacy at the grass root level and to reach out to unreached areas.

#### **PROPOSALS MADE IN SRHR POLICY MAKING PROCESSES**

The number of proposals made in policy making processes gives a good indication of the level of engagement and commitment of the F2A members and of their technical expertise on the subject matter. For some interviewees membership of the F2A Network was additional and supplementary to their existing engagements in SRHR activities. Others underline that the Network offered more opportunities to engage in regional and international level policy discussions and to engage both religious and non-religious organisations more effectively.

During the project period, several policy proposals were made to be used in different policy making processes. A good example is the submission of a joint proposal in Ghana<sup>54</sup> in 2013 by F2A members. Nevertheless, it is difficult to evaluate the exact number of policy proposals put forward, as F2A members also commented on SRHR policies. Most probably, policy proposals have been made by F2A members during their direct meetings with decision makers and influencers. It is not always clear who has been developing the proposals. An exception is the inclusion of 95 FOs<sup>55</sup> in the drafting process of the 16 recommendations put forward following the mapping of recent and current SRHR initiatives and FO interventions of SRHR.

#### **PARTICIPATION AND INFLUENCE IN POLICY MAKING PROCESSES**

Membership to the F2A Network raised FOs participation and influence in SRHR policy making processes considerably. Respondents to the Survey Monkey experienced increased influence by speaking up more, by getting involved in country dialogues and teaching, by stronger engagement with church leaders and communities and by providing resource materials and references of good practices in consultations, policy dialogue and lobbying with policy makers. A presentation on FP and Youth and Adolescents at the 1st Uganda National Family Planning Conference<sup>56</sup> resulted in the Network being invited to provide faith-based input to the National Family Planning Costed Implementation Plan for the Ugandan Ministry of Health and managed with the influence of F2A to sign a MOU with the Kyenjojo District local government. Religious leaders at sub national level were able to sign a declaration to support FP. In Nigeria the knowledge gained facilitated the presentation to church leaders and led to the incorporation of SRHR into the church HIV/AIDS policy document which informed the training of SRHR issues as part of messages during activities. Prior to this it was not allowed.

The F2A Network helped FOs to participate in policy making through electronic contribution to discussions and debates and to participate in partner organisation meetings. They provided input and views on different policy papers such as declaration statement on support of FP at the ICFP 2016 or added a SRHR paragraph in their own organisation's staff Code of Conduct. Network members see

<sup>54</sup> Annual Report 2013, page 16.

<sup>55</sup> Page 31, Annual Report 2013.

<sup>56</sup> July 2014

improvements in the way they are being consulted by stakeholders in SRHR policy processes. Membership puts them on the market for speaking engagements, panel group discussions, dialogue and other related activities. Some interviewees gained huge recognition by policy makers, received invitations from religious leaders, church groups and communities or were approached to share their knowledge about specific issues, as for example the language of birth spacing.

According to the F2A annual reports<sup>57</sup>, the number of direct meetings with decision makers and decision influencers to discuss SRHR increased substantially during the project period, from 47 meetings in 2013 to 78 meetings in 2014, to 248 meetings in 2015. This is an indication of the growing engagement of members of the F2A Network as well as their visibility at the level of decision makers (and hence their credibility and legitimacy). Some examples of F2A participation are:

- In 2013, 11 F2A Network members in Burundi, Ghana, Ethiopia and Kenya engaged in SRHR policy making processes and conducted 96 advocacy actions during 5 events. According to the annual report 2013<sup>58</sup>, this is an increase (with 1) in relation to the 2012 baseline. Activities included: analyses of policies and budgets on SRHR, submission of comments on draft SRHR policies, meetings with decision makers on SRHR to discuss comments, participation in fact finding missions and studies on SRHR, conduct trainings on SRHR accountability and SRHR policy / budget influencing.
- In 2014, 10 F2A members from were involved in decision making processes on SRHR<sup>59</sup>. Members came from Kenya, Uganda, Burundi, Ghana and Ethiopia and the work resulted in a total of 115 advocacy activities (meetings with decision makers, studies and fact finding missions on SRHR on the invitation of governments and donors, organization of trainings, on SRHR accountability demand and/or policy and budget influencing and offline or online campaign(s) on SRHR.
- In 2015, the F2A Network was present in 24 advocacy events in Africa, Asia and USA. During that year there was also an increase in the number of advocacy activities compared to 2012, particularly regarding meetings with decision makers on SRHR. During 2015, a total of 309 faith based organizations participated in policy dialogue and decision making processes.<sup>60</sup>

It has been mentioned that the participation of FOs increased considerable in the period between the F2A Addis Ababa meeting in 2014 and the Bali meeting in 2016. In Ghana, the participation of FOs in policy making processes is getting better over the years. In Rwanda, the development of the toolkit for youth at primary school on SRHR contributed to an increase in participation of FO (RICH) in SRHR policy making processes. Also in Burundi the participation increased, specifically from local FO partners, but at national levels, participation from religious leaders in policy making processes (especially Catholic Church) did not increase.

As observed by F2A themselves<sup>61</sup>, evidence for real influence is difficult to gather because of the often long term processes involved in advocacy. But some concrete examples of collective success of F2A's participation in policy making processes can be identified:

- The **Bali Commitment** on FP; the first time in history of the FP Conference that the voice of faith-based organisations were captured, recognised and were given the opportunity to deliver SRHR messages.
- In **Burundi** the participation of FOs and others ensured that the secondary effects of the use of FP commodities are being dealt with for free in 6 provinces. However, the influence at national level

<sup>57</sup> Annual Reports 2013, 2014, 2015.

<sup>58</sup> Page 17, Faith to Action, Grant Report 2013, Activity No. 25003, 5<sup>th</sup> of June, 2014.

<sup>59</sup> Page 19, Faith to Action, Grant Report 2014, Activity No. 25003, 16<sup>th</sup> of June, 2015.

<sup>60</sup> Page 6, Faith to Action, Grant Report 2016, Activity No. 25003, September, 2015 (*unpublished*).

<sup>61</sup> See for instance Page 17 of Faith to Action, Grant Report 2013, Activity No. 25003, 5<sup>th</sup> of June, 2014, and Page 16, Faith to Action, Grant Report 2016, Activity No. 25003, September, 2015 (*unpublished*).

remains relatively weak as the collaboration between the different religious groups just recently started.

- In **Ghana** the advocacy by F2A members complemented the work of the government and resulted in 2015 in the inclusion of FP into the National Health Insurance Act 852, which if well implemented passed will benefit 80.000 women of reproductive age.
- In **Ethiopia**, the success of the Ethiopian Evangelical Church Mekane Yesus (EECMY) Development and Social Services Commission(DASSC) on immunization in the Gambella Region has been published.<sup>62</sup>
- In **Kenya** the Caravan led to Imams adopting a 7 point commitment in Lamu, Kilifi and Mombasa Counties in support of Child Spacing in the Islamic context.<sup>63</sup>

## CAPACITY DEVELOPMENT

### INCREASED KNOWLEDGE ABOUT SRHR ISSUES

The levels of knowledge and understanding amongst religious leaders/FOs, Health Professionals, Media and Communications Personnel 'before' and 'after' the trainings have been measured. After the training for Faith & Religious Leaders in 2013 in Addis Ababa the biggest knowledge increase has been reported on the topic of Young People and SRHR-country situation.<sup>64</sup> During the training 'Building Capacity for Increased Access and Quality SRHR Services' in 2014 in Mukono, Uganda religious leaders/FOs reported knowledge and understanding increase on emerging SRHR issues that young people are facing, how faith leaders can effectively respond to these emerging issues and on how evidence and documentation supports SRHR programming, resource mobilization and advocacy. Media and communications professionals reported knowledge and understanding increase on the 'How to write stories about faith and SRHR' in a way that accurately informs the public, techniques/tools in behaviour change communication on SRHR and 'How to report on SRHR issues in a way that creates social impact'. Health professionals reported knowledge and understanding increase on ethical issues that affect healthcare, the implications of birth spacing for survival and health of women and children and different contraceptive methods and how they work. An important aspect of SRHR has been the provision of medical information and training to religious leaders.

### CAPACITY IN CONDUCTING ADVOCACY AND IN COMMUNICATING AND PROMOTING ADVOCACY MESSAGES

The trainings in Ethiopia and Uganda also contributed to a better understanding of the need to involve religious leaders from the beginning onwards into the process and to try to achieve joint advocacy messages. Participants who attended the advocacy workshop in 2014 in Uganda reported knowledge and understanding increase on components of the advocacy cycle, on 'key advocacy issues around SRHR' such as: information, access, services and rights and on developing an action plan/advocacy strategy to conduct SRHR advocacy at the national-level. Respondents to the SurveyMonkey observe changes in their capacity to communicate and promote advocacy messages on SRHR, which influenced the way in which they handle advocacy issues on SRHR, their ways of presenting the script and the interfaith language and FP un-packaging and relationship building with policy makers, both locally and at international levels. They mentioned that the initial fear about SRHR has been overcome and that they can teach freely with informed knowledge: *"I now engage with religious families by encouraging them to space their births and not mention family planning"*. The media training has helped to improve communication and advocacy materials and was very effective in terms of building capacity on how to work with media for advocacy towards the promotion of FP and reproductive health. Strengthening regular follow-up and support to members regarding the implementation of advocacy plans should according to respondents be taken into consideration.

<sup>62</sup> Ethiopia Evangelical Church Mekane Yesus (EECMY) Development and Social Services Commission(DASSC).

<sup>63</sup> Caravan report, <http://www.faithtoactionnetwork.org/resources/pdf/Caravan%20report2.pdf>

<sup>64</sup> Summary of Workshop Assessment Forms SRHR and Young people. Training for Faith & Religious Leaders, 6-11th November 2013, Addis Ababa.



### **CAPACITY TO INFLUENCE DECISIONS ON SRHR POLICIES AND BUDGETS**

SurveyMonkey respondents have become more confident in their capacity to influence decisions on SRHR policies and budgets through interaction and networking. They are using resources and materials for their policy dialogue and lobbying with policy makers. They share information in their organisation and with partners or request for information.

### **ACCESS TO RESOURCES PROMOTING BETTER SEXUAL AND REPRODUCTIVE HEALTH CARE**

Funding opportunities on health matters are shared in the F2A Network. The Secretariat has been updating the Network members on current affairs and on Requests for Proposals (RFPs) for resource mobilisation purposes. However, the approach does not seem to yield intended results relative to investment by applicants. Survey Monkey respondents observed some indirect increase in SRHR resources through leads from other members and contacts or with the help of the F2A Secretariat. Members who were familiar with different donors and potential partners have submitted funding applications or used the avenues provided by the Network on new applications for proposal writing. In some cases the amount of funds realized was not much but the members concerned consider it as a good beginning. Others, who are aware of the fact that fundraising is a process and sometimes received help from the Secretariat, have not been able to mobilise funds although they attempted several times. Not only are some RFPs onerously demanding relative to the level of the FOs e.g. demanding audited financial statements, some RFPs are responded to by all FOs thereby over-investing as a group with equal needs. Those of relatively low capacity are also consistent losers while those of high capacity are constant winners thereby creating classes among members and discouraging some. Members expressed the need to improve resource mobilization efforts, to strengthen their capacity in grant making and to introduce them to donors and potentials partners in order to increase their access to more resource for their activities in the area of SRHR. It was felt by some that a regular newsletter would help in controlling the interactions such that one would expect communication at given times and on agreed areas of common interest, even if it means summarising business transacted through the email list in-between. They would also like to receive a list of potential donors and funding opportunity on a regular basis.

### **RESEARCH AND EVIDENCE**

#### **INCREASED KNOWLEDGE OF FOs ON DIVERSE FAITH-BASED APPROACHES TO SRHR**

According to the stakeholders interviewed, most knowledge on SRHR practices was obtained via their participation in trainings and workshops, e.g. Mukono and Addis Ababa. Knowledge was also disseminated online via the F2A Network Newsletters and via the Interview Series.<sup>65</sup> Information sharing on SRHR practices from different faith perspectives was one of the main topics dealt with in the F2A Newsletters, Interview Series, etc. Particularly the Interview Series proved to be successful for the dissemination of information on different SRHR practices with a substantial increase in readers in 2015 (Table 2). The number of readers on SRHR practices and the mapping are increasing from 2013 onwards, and it is expected to increase in 2016 as well.

Another important way to disseminate the information to non-member FOs and the wider public was the use of media (press, television, radio). Information was disseminated to both faith-based and secular stakeholders to promote same-faith, interfaith and faith-secular partnerships for better SRHR. During the project period, the number of readers of F2A information increased substantially.<sup>66</sup>

The presence of the F2A Network on the internet makes it easy to be reached as well as easy to reach out. It is not clear to what extent (and in what numbers) website visits have contributed to the dissemination of information on SRHR practices. During the project period, the overall size of audience

<sup>65</sup> launched in 2014 to provide multiple perspectives on SRHR

<sup>66</sup> Faith to Action Narrative Reports 2013, 2014 and 2015.

targeted with knowledge on SRHR practices increased substantially in relation to the baseline survey held in 2012<sup>67</sup>. In 2013, 318 persons were targeted with knowledge on FBOs approaches on SRHR<sup>68</sup>. In 2014 the size of audience targeted with knowledge on FOs approaches to SRHR increased and reached almost 2 million<sup>69</sup>, mainly due to traditional media coverage (television, radio and newspapers). In 2015, more than 14 million people were targeted and reached.<sup>70</sup> Information sharing was also envisaged between F2A project staff and the Dutch MoFA, particularly on acceptable FP and reproductive health rights language by FOs and vice versa. According to MoFA, this has not been done explicitly as it became clear that the wording and language used by F2A, particularly regarding FP, was very much in line with common use.

Dissemination Channels	Number			Number of readers		
	2013	2014	2015	2013	2014	2015
Newsletters	-	3	2	-	961	Not yet available
Interview Series	-	2	4	-	1400 + 397 online	5848
Articles	0	8	31	0	1400 + 397 online	5848
Presentations	4	6	>8	300	?	
Study on SRHR practices	1	-	4	28	1812	?
Mapping of FO SRHR initiatives	1	-	-	28	434	?

Table 2: Dissemination channels and number of readers.

Even though a substantial number of FOs and the general public has been targeted, it does not mean that they automatically have knowledge on SRHR practices from different faith perspectives. Some examples of the actual use of the knowledge obtained are<sup>71</sup>:

- In the annual report 2014 and 2015, it is mentioned that in 10 cases in 2014 research and evidence generated through the F2A programme were utilized by the F2A Network and its members.
- Feedback from participants in the Mukono training indicate that participants increased their knowledge on SRHR practices from different faith perspectives. Moreover, three action plans were submitted to the F2A Secretariat following up on the training from participants from Burundi, Ghana and Uganda to enhance information and services on SRHR, to improve capacity of personnel, religious and cultural leaders to provide youth friendly SRHR services and to increase budget allocation for SRHR information interventions.
- Some F2A members published the 2014 study on *“Advanced SRHR through Faith-Based approaches”* on their websites, an indication of their acknowledgement of the usefulness of the study. Other members used the research in their own networks and during advocacy meetings.
- The Interview Series, which included information on SRHR practices from different faith perspectives, have been used by faith-based leaders for advocacy and sensitization tool on SRHR issues. Several testimonials refer to using the information to support advocacy in (international) fora.

The F2A Network contributed to generating and disseminating knowledge on FOs approaches for SRHR policy making, particularly when it comes to interpretation of different religions of SRHR, and how to make that information through awareness raising more accessible. Interviewees in Ghana mention that there is more SRHR information available at the moment, but that there is still a need to have more resources and accompanying activities to reach out to young people. Also in Burundi there is still not

<sup>67</sup> Faith to Action, Grant Report 2013, Activity No. 25003, 5<sup>th</sup> of June, 2014.

<sup>68</sup> Page 6, Faith to Action, Grant Report 2013, Activity No. 25003, 5<sup>th</sup> of June, 2014.

<sup>69</sup> Page 6, Faith to Action, Grant Report 2014, Activity No. 25003, 16<sup>th</sup> of June, 2015.

<sup>70</sup> Page 6, Faith to Action, Grant Report 2016, Activity No. 25003, September, 2015 (*unpublished*).

<sup>71</sup> F2A Grant Report 2014, pages 27, 34 and 39, Activity No. 25003, 16<sup>th</sup> of June, 2015.



enough information available and a common document on SRHR policies and issues endorsed by all religious groups is lacking. The Dutch MoFA underlines that for real policy change more knowledge is needed, e.g. about policy development processes.

#### UPTAKE OF KNOWLEDGE AND INFORMATION ON SRHR BY FOS

Most SurveyMonkey respondents highly appreciate the information provided. Quotes, tools, information about rights and responsibilities and new information were a very great help and increased in most cases their commitment to improve practices and policies. They underline that it calls for regular updated and new information. They use the information and advocacy tools in community sensitization, policy advocacy, campaigning, youth engagement and empowerment and women empowerment, teaching, research, and in creating awareness to the staff and county forums. Information has also been replicated to fit the situation of sub national and district levels and provide members more evidences and information that increased their ability to work with policy makers effectively. Some respondents used the media training materials to improve their advocacy efforts in their work with religious leaders on the importance of SRHR for youths.

Articles and conferences which have been organised helped some members dispel taboos and misperceptions on SRHR in their own faith community. In other situations, known authorities in theology and medicine were brought in to address misperceptions as was the case of Al-Azhar during the Caravan in Kenya. The materials provided the updated discussion and evidence to change the misconceptions and taboos which prevailed in their communities in relation to SRHR ongoing at a slow pace. It appeared to be more difficult to reach other communities when members had limited knowledge of other faith in their own context. Members used the materials and evidences for proposal development and as approaches to work with communities. In Kenya, knowledge uptake and knowledge sharing among FOs improved as well as the level of tolerance among members.

#### FOS LEARNED FROM EACH OTHER'S APPROACHES

Respondents to the Survey Monkey remarked that learning from others made them aware of the fact that members face the same challenges irrespective of their Faith, that they are not alone in the challenges of SRHR issues and that collectively they can do better and assist one another to pursue a common goal. Collective learning underlined the need to forge relationships among nations and between nations and enabled them to build stronger partnerships. Sharing of experiences and best practices with other Network members increased their knowledge on effective faith leader engagement in advocacy and service delivery, community mobilization activities, faith based norms, language use in SRHR issues with faith groups, SRHR issues at grass roots level and management. Exchange has helped members to develop a religious argument to address reproductive health issues and the challenges towards working with faith communities in different societies. They became aware of new interventions to promote an enabling environment for young people and youth in regard to access to reproductive health services and products.

There is other evidence that FOs indeed learned from each other's approaches, for instance:

- Some members acknowledge the usefulness of the information disseminated by F2A (via e-Interlink) to be used in the own programs.<sup>72</sup> *"I am very interested in the activities of others; I can get some inspirations from them which can be useful to our program"; "the information is quite rich and insightful and I definitely have to go through it and identify areas of common interest and opportunities for collaboration."*

<sup>72</sup> Email correspondence regarding e-InterLink Newsletter, September 2015.

- F2A members and participants expressed their appreciation about the information presented and exchanged in the training on evidence-based programming on SRHR.<sup>73</sup>
- Interviewees acknowledge learning from each other's approaches during their participation in the Addis Ababa and Mukono training sessions.
- A Rwandan stakeholder realized after the training sessions with youth on SRHR that a huge part of the young population did not have information on SRHR and if so, received very mixed messages. He realised that this caused distrust: *"Now, it is clear, that our organisation needs to change its way of working to try to better link SRHR issues with youth issues (link SRHR science with belief/religion): there is a need to go to the specifics of each religion to be able to make a connection."*

#### UNINTENDED OR UNEXPECTED EFFECTS

1. Some FOs in Kenya used skills gained for policy and advocacy to successfully engage their counties to set aside funds entirely for FP promotion. This was exceptional. The government usually sets general policies and earmarks funds for health matters but never funds for family planning interventions in particular.
2. In Kenya F2A assumed that all FOs would participate in implementation along their respective faiths. Some mainstream religious organisations, notably the Catholic Church, appeared hesitant to a large extent apparently fearing for the compromise of their beliefs and values. More effort should be made to ensure that the parts they agree with within the SRHR ambit are taken up in their ranks and in their institutions and structures. Missing out the influence of these churches and their support (some are relatively well resourced) has, in a way, resulted in slow pace along the initiatives they would agree with and in the community that follows their teachings and respects their word.
3. The emerging collaboration between the Al-Azhar University in Cairo and the Muslim Community at the coast of Mombasa was an unexpected outcome. As F2A engaged with the Imams of the coastal region during the caravan program it emerged that most of the imams were not properly grounded in the Quran and that there was no minimum requirement in terms of education for anyone to preach at the mosque, creating space for radicals to high-jack that platform. The Imams expressed the desire for establishing minimum standards which would require developing a curriculum and training opportunities. Faith to Action and the scholars from Al-Azhar Cairo, who were part of facilitating the caravan program, agreed to explore the possibilities. Consequently, some members of the Faith to Action Network and representatives of the Imams from Mombasa at the invitation of the Grand Mufti will be traveling to Cairo on the 23rd October to follow up discussions with the Al -Azhar University faculty.

## C EFFICIENCY

### EQ 3 Taking into account the timeline and the budget, to what extent were resources appropriately used to produce the desired outputs?

In general, actual spending is considerably in line with the budget, showing good planning and budgeting capacity as well responsible fund management. Direct costs are indicated at activity level and showed per output. The cost per outcome is the total of the costs for each output resulting in the identified outcome. For reasons of simplicity and the fact that actual expenditure does not deviate too much per output or activity, only the cost per outcome are reflected. Indirect costs and overhead are the salary costs of the staff in the network secretariat. F2A Staff has been paid through the DSW payroll. In the

<sup>73</sup> Page 28, Faith to Action, Grant Report 2013, Activity No. 25003, 5<sup>th</sup> of June, 2014.

operational budgets for each year the indirect and overhead costs are allocated to the activities and therefore included in the costs occurred under each outcome.

#### OVER AND UNDERSPENDING PER OUTCOME IN 2013, 2014 AND 2015

The financial report of 2013 shows significant underspending (>20%) in the budget line for operational research (-74%; see annex X). Budget variations in other budget lines for outcomes did not exceed 10%. In 2013 overall budget variance was -12%. Underspending may be caused by the fact that the program was still in its start-up phase. Another reason is that part of research activities is funded under outcome 1 to 4. Research, likewise the costs of staff could have been allocated to the costs under each outcome. The budget for 2013 was later adjusted to the actual expenditure.

In 2014 significant underspending was reported for Outcome 3 Technical and financial capacity building of network members (-21%) and again for operational research (-72%). In 2015, the F2A network spent 19% less than was initially budgeted. Significant underspending was under outcome 1 and 3 and in operational research. The fact that hardly any money was spent in Indonesia (only € 2.200 spent instead of the budgeted € 54.200, which explains > 2/3 of the underspending. The other underspending was the result of lower expenditure at the level of the secretariat in Kenya. Based on the figures it is not possible to say whether this is the result of cost reductions or postponed activities.

Financial reports also show expenditure per country in which the Network is operating. The lion share of the funding is spent in Kenya where the F2A secretariat is located. Therefore, the money spent in this country includes the salary and office costs. Financial reports do not provide the costs per costing category and therefore it is not known which part of the expenditure was actually spent on salaries and office. In 2013, underspending of 31% was reported in the 'other' countries in (East) Africa, Europe and USA, while in 2014 significant underspending was reported in Uganda, Ghana and other countries. Because the establishment of the F2A Network started from Kenya, it is easier to grow the network in East Africa. Setting up the Network in West Africa and other countries may be much slower, hence, require less investments in capacity strengthening and joint interventions early in the process where identification and negotiation play a more important role.

Half way the period of the F2A project, DSW through the Network spent 50% of the available funding. Based on the budget forecast for 2015 and 2016 the total expenditure is estimated at € 428.300 and € 180.100 respectively. It makes indeed sense to have extra budget available in 2015 in order to expand the Network further and invest in capacity strengthening of the members based on the experience and lessons learned from the first two years and have time to phase out the Dutch MoFA funding in 2016.

In order to maintain the level of service delivery of 2014 and 2015 the F2A Network should already have started preparing for raising of alternative funds in 2015 and have started implementation of the resource mobilisation strategy latest in the second half of 2015. Financial reports for the four years show the income from external funding (Dutch MoFA). There is no other income planned. According to the financial reports, member organisations of the F2A Network do not contribute to the costs of running the network.

#### COST REDUCTION OPTIONS

The Network Secretariat managed very well the available funding. However, that does not mean that the F2A project is well funded. Funds for IEC materials in advocacy and for workshops for both advocacy and research were limited. Raising own resources was limited by lack of skills in fundraising. Individual FOs were always encouraged to carry on lessons and other activities on their own after the initial process.

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*FOs In Uganda reported that they attained far more than what was envisaged at the beginning. Local resources were utilised wherever possible at less than market rates or even completely free: conference facilities, vehicles, facilitators and meals. Novel ways of doing business were also employed – taking advantage of events hosted by other parties to champion the F2A cause. Some facilities at clinics, games stadia and college canteens like large TV screens were used to relay powerful messages while audiences were out there for some other business. Annual events for colleges and other large gatherings were used to distribute IEC materials and even give short speeches without paying out allowances and other expenses.*

*Some FOs and even the F2A Secretariat realised that the planned activities would not be realised with the budget allocation for F2A interventions. This was the case especially with the Costed Implementation Plans. Strategic local reallocation was done to engage into advocacy among the stakeholders for volunteerism. Some FBOs allowed their facilities to be used free while officials sat in meetings without allowances. The dollar was thereby stretched and could meet the planned activities optimally.*

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From interviews it appeared that members need more funding to invest in joint interventions under the network and to strengthen the funding base of their own interventions under outcome 2. Reducing the costs of current operations in order to increase the budget for outcome 2 may not be easy and not provide significant funding for operations at the level of the member organisations. The F2A Network rightly opted for more investment in capacity strengthening of members including fundraising capacity. Almost all members that participated in these trainings indicate that they have improved their knowledge and skills in this area. In the longer run this may provide more positive outcome in terms of improved funding base for the member organisations.

#### **FUND RAISING**

Capacity building of the F2A Network members is not enough to have significantly better access to funding. Further strengthening of the members on SRHR, promoting the Network as a relevant network with high quality on SRHR knowledge and lobby and advocacy are evenly important. Network members can also be equipped by carrying the logo of the Network in all their correspondence and present themselves as member. Promoting and strengthening the Network and careful selection of new members that fit the F2A profile will still require significant investment in time and money. A scan of relevant donors worldwide may help to implement the resource mobilisation strategy 2013-2018<sup>74</sup>. currently being discussed by the Network Steering Committee. The set goal to raise about 1 mill. Euro's on an annual basis is an ambitious target and may not be achieved in the longer run after the funding through the Dutch MoFA has phased out.

Funding needed to run the secretary is semi variable depending on the number of member organisations. Therefore the future growth of the network should be one of the denominators to estimate funding needs. Fundraising through donors and adequate donor management make a lot of sense. However, donor budgets on the bilateral and multilateral side as well as European Civil Society support organisations are under increased pressure due to changing priorities in international relationships and the increasing influence of the European populist political parties and movements.

In order to raise funds through service delivery, the F2A Secretariat needs to develop clear guidelines on what services could be provided to members without entering into competition with service providers

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<sup>74</sup> A Resource Mobilization Strategy and Implementation Plan for Faith to Action Network (F2A) 2013 – 2018 by Vitalis Mukhebi in cooperation with Peter Munene, Angela Mutegi and Dominika Jajkowicz.



operating in the market. E.g. services provided by the secretariat at a cost should be services that cannot be provided by external service providers because of the specific nature of these services, specific knowledge of the network, ideology or religious aspects.

Joint fundraising may be a plausible strategy, however this also needs to be regulated along certain principles. Organisations are not easy to convince to raise considerable funds for other organisations, even not within the context of the F2A Network. Joint fundraising among a group of member organisations based on mutual strengths (capacities) and benefits may be more promising and offer opportunities to the network secretariat/coordination unit to provide coordination services.

#### FINANCIAL VIABILITY OF THE FAITH TO ACTION NETWORK

A major objective of F2A Network is to become financial sustainable, which is often not easy. Network organisations often find funds for joint activities that contribute to the overall objective for which the Network was established. Fund acquisition for the secretary is a much bigger challenge, because many donors prefer to invest in activities directly contributing to the expressed needs of the target group. In the ideal situation, the secretariat/coordination unit is funded through membership fees. The F2A Network is also focusing on funding through the membership, but this strategy has not yet been put in place. As long as the secretariat is funded through external funding for the Network, the Network itself is not considered financial viable. Often members are resistant to contributing to the cost of the Network, unless the benefits of membership outweighs the costs.

Although this is a difficult analysis and because the benefits may differ among the different members, it is worth to carry out regular assessments on how the members perceive the benefits of membership and how much they are prepared to invest in the functioning of the Network. In general Network members do not consider membership fees as a cost and are therefore not included in the budgets of their operations and funding proposals to donors. At the same time, the membership may be an important factor for donors and other partners to work with the F2A Network members. Network membership should be considered by the members as an important contribution to organisational learning, improved effectiveness (quality of interventions) and often increased efficiency (in terms of geographical coverage, outreach to the target group, influence at national and international levels).

## D Impact<sup>75</sup>

### EQ 4 To what extent have the project activities contributed to better provision of SRHR by FOs?

#### BETTER SRHR INFORMATION FOR YOUNG PEOPLE

From 2013 onwards F2A measured progress against two first result areas from the Dutch Ministry's SRHR framework: (1) Young people are better informed and are thus able to make healthier choices regarding their sexuality, and (2) Improved access to reproductive health commodities. Data for the two Result Areas was collected through the Annual Survey of F2A Network members as part of the monitoring process (Table 3). A varying number of F2A members in different countries participated in the Survey. As a consequence the changes in numbers between the project years might be attributed not only to an increase or decrease in services but also to the fact that more or less F2A members provided the data. No data are available which tracked progress on the third result area related to the provision of better sexual and reproductive healthcare services by public and private clinics given that some current F2A

<sup>75</sup> Collected information is based on anecdotal evidence via interviews and the F2A M&E Framework.

members do not own health facilities and those who own health facilities<sup>76</sup> do not record exact quantitative data. As indicated in the revised proposal submitted to the Dutch MoFA<sup>77</sup>, no impact indicators have been measured for the 4<sup>th</sup> Result Area: greater respect for the sexual and reproductive rights of people to whom these rights are denied.

Dutch MFA's SRHR Result Areas	Number of F2A members reporting on Result Area	Baseline 2012	2013	2014	2015
<b>Young people are better informed and are thus able to make healthier choices regarding their sexuality.</b>	2013: 4 (from Uganda and Ghana) 2014: 9 (from Uganda, Ghana, Ethiopia, Kenya) 2015: 5 (from Ghana, Uganda, Ethiopia)	- 290,000 young people (aged 15-24) with comprehensive correct information of HIV/AIDS	- 341,000 young people (aged 15-24) with comprehensive correct information of HIV/AIDS <sup>78</sup>	- 1,650,404 young people (aged 15-24) with comprehensive correct information of HIV/AIDS	- 19,798 young people (aged 15-24) with comprehensive correct information of HIV/AIDS
<b>Improved access to reproductive health commodities.</b>	2013: 12 (from Ghana, Uganda, Kenya, Ethiopia, Burundi) 2014: 7 (from Burundi, Ghana, Rwanda, Uganda) 2015: 2 (from Ghana and Uganda)	- Provision of a total of 1,000,300 pills, condoms and spermicides - Distribution of 10 injectables - 558 confirmed clients who use natural family planning	- Provision of a total of 1,053,140 pills, condoms and spermicides - Distribution of 13 injectables - 776 confirmed clients who use natural family planning	- Provision of a total of 1,112,926 pills, condoms and spermicides - Distribution of 338,876 injectables - 49 confirmed clients who use natural family planning	- Provision of a total of <b>120,343</b> pills, condoms and spermicides - Distribution of 1,894 injectables - 181 confirmed clients who use natural family planning

Table 3: Contribution to the Dutch MoFA SRHR result areas.

Overall, a growing number of young people aged 15 – 24 are better informed on SRHR issues and able to make healthier choices. In Burundi, the access to information on SRHR for youth has improved the last years, and information is now available in 10 out of 18 provinces. SurveyMonkey respondents confirm that the Faith to Action activities contributed to more and better SRHR information for young people. They observe increase in the capacity of religious scholars on the importance of SRHR for youths and gain their support for SRHR interventions for youths in their communities and youth corners. Many young people are aware of their SRHR through the F2A project because the information used the language of the youth. In some contexts awareness creation to the youth was to some extent restricted.

In **Kenya** the youths are actively engaged by FOs in peer education using skills from F2A interventions, IEC materials and social media initiatives. The National Organisation for Peer Educators (NOPE) is assisting in capacity building and even providing some tools and facilities to the youth peer educators. The youths are ready and willing to learn and to change in line with the SRHR training. They wish for more dialogue on their situation especially with apparently traditionalist churches to ensure common understanding on core SRHR matters and with the government on policy issues. The message on SRHR has reached relatively small but conservative and lowly educated religious groups in the country. These include “Mafuta Pole” in West Pokot and “African Divine Church” in Pokoyane, both members of Organisation of African Instituted Churches (OAIC). They had an initial introduction of the project to an average of 40 participants in a conference in Machakos. The response is now attracting over 200 leaders engaged in active promotion of SRHR.

<sup>76</sup> Many of the larger FOs own health facilities – in Uganda these were the main inroads to the community on SRHR: the government acknowledged this especially for the Anglican, Baptist and SDA churches

<sup>77</sup> 08 January 2013.

<sup>78</sup> Adequate facts on HIV including information on the two major methods of preventing the sexual transmission of HIV: limiting sex to one faithful, uninfected partner and using condom.

In **Uganda** commitment is reported to be higher among the youth to engage in peer education than before the F2A intervention. This commitment has helped spread the message and now youths are reported to make more informed decisions on sexuality than before. The CPR is said to be high on account of peer training (this is to be scientifically established as one measure under the Costed Implementation Plan). Youth however need more practical training in family planning and other areas e.g. showing them the physical family planning pills, female condoms etc that are rare objects and difficult to share about. The availability of the female condoms and pills should also be guaranteed to back up the education among the youth through peer process. Communication especially while reaching the youth was a difficult area that needed to be improved. The language used, especially in training peer educators, was deemed out of their level of education and of those they will be reaching out to. The Caravan campaign for instance employed Muslim scholars of high calibre – useful in demystifying SRHR – but the cultural perspective of the audience, the age diversity, the underlying poverty and poor levels of education were apparently not well researched into. The concrete context needed to be well considered for a better effect. Provocative and out of context language could marginalise some groups who may be tempted to fight the trajectory thereby jeopardising the desired impact of the project. For instance, women and youth clubs in Masjids, schools and colleges could be used to bring out the concrete context and also to spread the message in acceptable language.

#### **BETTER ACCESS FOR PEOPLE TO CONTRACEPTIVES AND OTHER COMMODITIES**

According to the monitoring results (table 3), there is a growing number of people with access to anti-retroviral drugs, contraceptives and other commodities required for good sexual and reproductive health. The provision of pills, condoms and spermicides rose slightly from 1,000,300 in 2012 to 1,112,926 in 2014. The lower quantities in 2015 are mostly caused by less F2A members reporting. The distribution of injectables rose from 10 in 2012 to 1,894 in 2015 and included monitoring data of a F2A member from Uganda. The number of clients using natural family planning rose from 558 in 2012 to 181 in 2015. This change in numbers is influenced by the number of F2A members participating in the monitoring. Because of the changing numbers of F2A members reporting on the result areas, it is very difficult to draw conclusions regarding progress.

In **Burundi**, misperceptions have decreased slightly, but continue to exist, particularly amongst high level leaders of the Catholic Church who are firmly opposed to the use of modern contraceptives for FP. At lower levels Catholic Health Centres started to give references to women in search for modern contraceptives. F2A contributed to enhance access to SRHR commodities the last three years. Not all SurveyMonkey respondent have information regarding access to commodities. Some respondents indicate that the project influenced health systems to improve access for young people and that other options were used to boost access. In Uganda networking with faith centres and institutions included relations with the Uganda private contraceptive chain and the health marketing group.

#### **BETTER SRHR CARE, PROVIDED BY PUBLIC AND PRIVATE CLINICS**

SurveyMonkey respondents mention that better collaboration in public private partnerships contributed to better SRHR care. In Uganda commitment among community leaders and members of parliament is high. Much as there was no commitment on budget from the government specifically for SRHR there were joint meetings with government ministers, the Health Committee of the Parliament and the mentioned joint meeting of religious leaders in July 2016 who committed to reproductive, maternal and child health. “The ground is fertile” for a concerted inroad into SRHR. The government has realised the potential of the FO structures and forums in engaging the public – over 20 million people can be reached between Friday and Sunday alone at prayer centres. SRHR is already institutionalised in Uganda – people can’t stop talking about SRHR. F2A had significant influence in bringing SRHR to the surface and lead initial dialogue on how to handle the subject in public and with the public. The subject is now literally



into all public and private endeavors seeking to solve problems in all spheres of life. The demand for SRHR education and facilities is high in the community. Meetings are well attended. Clinics operate at full capacity and are running short of SRHR-related supplies. The demand for healthy families is not confined to religious circles only: the global (not health) vision statement of Mityana District for instance clearly includes the quest for healthy families where “A prosperous district with healthy families” is envisioned.

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*F2A implemented between July 2014 and June 2016 a demonstration project in Garissa and Machakos counties in Kenya aimed at improving maternal neo-natal and child health by applying the government’s community health strategy. In addition to strengthening the capacity of health facilities and community health volunteers to providing community health services, it engages faith leaders in promoting health seeking behaviour in their congregations. While an end line analysis has not been carried out yet, there is emerging evidence of the intervention’s success. 26,355 services have been delivered and health messages have reached 175,940 people, substantially improving access to maternal neo-natal and child health services.*

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#### **GREATER RESPECT AND TOLERANCE FOR SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF PEOPLE, CONSISTENT WITH THEIR FAITH**

SurveyMonkey respondents mention that in the formulation of documents every faith was listened too, that they learned to work in line with values and norms in advancing SRHR and that the acceptance to talk about SRHR was a great achievement. The fear and suspicion on educating youth and women was overcome due to better understanding using the scriptures.

In Rwanda F2A contributed via its partner Cordaid to more mutual respect between religious confessions via the production of a toolkit on SRHR. Religious leaders are increasingly working together and trying to understand the issues around key populations (e.g. LGBT, sex workers, etc.). The use of the toolkit<sup>79</sup> in primary schools has the potential to enhance the information and freedom of choice amongst young people and improve access to resources promoting better sexual and reproductive health care. Moreover, F2A contributed to reduce misperceptions on faith-based organisations as it became easier for FOs to talk about SRHR. This also contributed to more tolerance for and acceptance of people who think differently. Finally, religious leaders accept more and more to be trained and sensitized and to jointly explore alternative ways forward. According to the interviews, F2A contributed in Ghana to an enhanced willingness to collaborate with FOs because F2A understands the issues and dynamics of religious leaders and use an acceptable and peaceful approach. Moreover, F2A speak the language of religious groups in the country and this means that more people, organisations and government institutions would like to collaborate with them.

The lack of visibility of the F2A Network in Rwanda and Burundi seems to make it more difficult to establish a clear link between the activities of F2A and the possible impacts. Visibility should be improved to facilitate coordination and to ensure that religious leaders from all levels are aware of the F2A activities. The installation of a F2A Focal Point or Antenna could be considered, as well as official presentations by F2A leadership and the organisation of concrete activities with high level religious leaders (Churches being hierarchical institutions).

Results vary between countries and are, amongst others, influenced by the political and funding environment, the level of public attention for SRHR, existing misperceptions and the role of the public sector. The increasing influence of FOs on health systems, increased collaboration and the acceptance of religious leaders to be trained and to jointly explore alternative ways forward are important steps on the road to impact.

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<sup>79</sup> Yet to be validated and launched by the Government of Rwanda.



**EXTERNAL FACTORS AFFECTING THE PROJECT IMPACTS OR ITS PROSPECTS**

1. In **Rwanda**, important positive external factors are the already existing discussions between youth with a similar religion and the growing visible attention (via posters, billboards along the roads, etc.) for SRHR in the country. A negative external factor in the country is the unstable funding environment (e.g. massive reductions in funding the last three years from PEPFAR, Global Fund) which has caused a loss of advocacy capacity of FOs at high level meetings. Another negative factor concerns the recently adopted law governing FBOs in the country: the need for official registration of all FOs poses a challenge for interfaith collaboration and advocacy on SRHR as most new organisations are not familiar with SRHR / health issues. Another challenge is the lack of preparation of FOs to advocate for the rights of LGBT (who are mostly young people) and this causes problems in relation to access to funding from international donors as these often want different religious groups to work together on this topic.
2. In **Ghana** the role of the public sector in the country is an important external factor because they share important (technical) information with FOs and NGOs so they can realise their roles as advocates.
3. In **Burundi** the overall insecurity impacted on the opportunities to network. The negative official position of the Catholic Church in relation to the use of modern FP commodities and the non-reaction of Muslim and Protestant religious groups were factors influencing the impact of the F2A project. Positive factors in Burundi include the fact that most SRHR commodities are free of charge, that SRHR service providers are paid via PBF (and are as such encouraged to perform) and support from the government to improve the work on SRHR.

**E Sustainability prospects****EQ 5 To what extent are the benefits of the project likely to continue after the project has come to an end.****ON THE PRESENCE OF FOLLOW UP STRATEGIES**

The F2A Network Secretariat put effort in the establishment of follow up strategies on the F2A project to ensure continuity of benefits after the project. A sustainability strategy has been drafted to ensure that the structures in place globally, regionally and nationally would survive. The strategy is awaiting the approval of the Steering Council. As a means of ensuring that FOs continue with the work after the project the Secretariat sought and distributed fitting RFPs to FOs for responses. The FOs responded individually, together or in cooperation with the Secretariat. In some cases the more established CSOs working in SRHR like Reproductive Health Uganda (RHU) are helping the nascent FOs to make viable proposals. These CSOs are linked with the FOs by the F2A Secretariat as a strategy to ensure that the project work continues beyond the project life.

In **Kenya**, some FOs have established some working relationships internally on the SRHR aspect mostly pegged on joint trajectories funded by external donors. Quite a few FOs do not have the capacity to respond successfully to RFPs. The Secretariat often stepped in to build the capacity of the leaders by accompanying them while responding to RFPs. This was done both online and one-on-one basis depending on possibilities. In so doing the Secretariat was mindful of the underlying faiths so that no compromises would be incurred for the sake of obtaining funds.

The Church of **Uganda** has a strategic plan in place for FP and a curriculum has been compiled to train pastors on SRHR. The Archbishop has issued clear instructions on mainstreaming SRHR in sermons in the whole of Uganda. These instructions are backed up by a number of handbooks and written commitments from the pastors to spearhead SRHR in the diocese. Absence of succession plans among some FOs could

be a limiting factor in operational sustainability beyond the project. This is especially the case where projects were based on individual initiatives. This is common in the FO sector and especially around a sensitive subject like SRHR. Some governance training is recommended below in this respect.

#### ON THE LEVEL OF STAKEHOLDER ENGAGEMENT

Leveraging faith based approaches to advance SRHR has been the core philosophy of F2A; FOs are more compassionate, persistent in serving the local communities; therefore they offer stronger sustainability prospects.<sup>80</sup> Stakeholders from **Rwanda, Burundi and Ghana** are very likely to continue their engagement with the F2A Network, and are hoping to be able to intensify collaboration at institutional and personal levels. Even though some stakeholders do not have an official engagement with F2A (e.g. as is the case in Rwanda), they confirm their willingness to join the Network. Stakeholders from Burundi stress the importance of presenting the F2A Network in their country (at high level) and explain to religious leaders the advantages of joining. In **Ghana** there is still a need to enhance collaboration with FOs as they are seen as key stakeholders by the government since they are in touch with a significant part of the population and can work in a complementary way. In **Kenya**, the Ministry of Health's engagement is likely to continue as a convenor of FOs. Because there is no competition between FOs in the country and top FO leaders were involved in the F2A project, continuous engagement is likely beyond the F2A project. The engagement of implementing technical staff is not clear due to poor retention schemes. This might affect continuity. Some F2A Network members are likely to continue their engagement as they already contributed to the Network, as is the case of the Garissa Machakos Reproductive Mother and Child Health (RMCH) project. Secondary beneficiaries (youth) and stakeholders in **Uganda**, notably CBOs and FOs, are already engaged, have organised themselves, participate in peer education and have integrated SRHR components in their work. These efforts are unlikely to die off after the end of the F2A project. Moreover, Churches are engaged by mainstreaming SRHR in sermons and in annual church events. The government of Uganda is engaged via the contribution of utilities and small contributions to the static health facilities of the Churches/FOs – facilities rendering services beyond SRHR cases and this is currently being enhanced through formal relationships including the Costed Implementation Plans on family planning. Finally, the majority of the Ugandan population being Christians can be engaged; being careful about the Christian context in packaging the SRHR message should see the trajectory into success. The only exception seems to be the Catholic Church as an institution, and efforts are underway to ensure that the Catholic Church commits itself in the SRHR trajectory in the values and practices acceptable to it.

It was clear from the beginning that the contribution of the Dutch MoFA would be for a period of 3 years; MoFA is not planning to continue their financial engagement after the end of the project, but will continue to participate in conferences and meetings via the Dutch SRHR ambassador and via the exchange of information.

According to interviewees relevance is key to assuring that the Network is sustainable ('Face of accountability') and requires unlocking opportunities, targeted interventions on capacity building and an advocacy plan to keep SRHR on the agenda. Since it will not always be possible to meet face to face, the use of technology will be very important to assure the best collaboration. It has been mentioned that donors are willing to connect to the F2A Network but they want to know what is in it for them in terms of visible contributions to their goals. Several interviewees underline that members are responsible for the network and now have to keep up the action.

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<sup>80</sup> Narrative report 2013.

**ON EXPRESSED NEEDS OF THE TARGET GROUP**

In **Kenya**, more empowerment of religious leaders on SRHR matter is needed and they should take the lead in advocacy work for long term results. More attention should be given to train specialists on topics such as ‘youth and sexuality’ as there are few specialised persons available. As African Institutional Churches (and a few FOs) are male dominated, the engagement of both genders would be important to generate better chances for both operational and financial sustainability in the future. In **Uganda**, expectations of youth on the contribution of the F2A Network may jeopardise interventions as they believe funds are available for trainings and the free distribution FP facilities. More mentoring is needed to ensure that youths become aware that they should pay for their own facilities. Another point of attention regarding youth in Uganda is the need to use pictorial expressions, audio visual images and even role plays communicated through games to raise their awareness. Overall, the needs of the target group have been put in a Costed Implementation Plan to be implemented in the next five years, and FOs are expected (by government officials) to “see the plan implemented” as they participated in the development of the plan.

**ON THE LEVEL OF BUDGETARY AND INSTITUTIONAL SUPPORT TO MAINTAIN REQUIRED LEVEL OF INTERVENTION:**

The need for financial resources for the target group requires a continuous and careful response. The urgency of available resources is a strategic concern of the Steering Council as leadership of the Network. Thanks to continuous funding pursuit, the Secretariat has been able to secure a new grant which will support the activities beyond 2015. However, with the ambition of the strategic plan to expand activities, additional funding will be required.

**ON SUSTAINABILITY OF THE NETWORK SECRETARIAT**

As the strength of the F2A Secretariat depends on the membership, this needs to be strengthened especially in resource mobilisation and innovation within their own contexts in ensuring perpetuation of the SRHR message. Current support of the Secretariat to develop funding proposals with FOs (for instance in Kenya for VOICE where the Secretariat is working closely with OAIC) is essential as well as the approval and implementation of the (draft) F2As Resource Mobilisation Strategy. Currently, the F2A Secretariat cannot support all members and cannot be everywhere as current staffing levels are inadequate relative to demand on the ground. The use of volunteers and interns can be considered to enhance capacity and to have a larger pool available for future employment either at the F2A Secretariat or with the Network members. The delay in the collection of F2A Network membership fees affects partly the sustainability of the F2A Network.

### III. CONCLUSIONS, LESSONS LEARNED, BEST PRACTICES

#### A. Conclusions

The F2A project has been very successful; the project appears to have covered more ground than envisaged by resources and time allocated.

##### RELEVANCE

1. Project design and implementation match up with context, target group and donor priorities.
- a. The project filled a niche by uniting and positively mobilizing respected faith organisations and religious leaders by addressing SRHR and by providing space to identify and discuss common values and areas of consensus.
- b. The project has been in line with context characteristics. Alignment of FOs actions with national priorities has been given a lot of attention.
- c. No effort has been spared to identify target group needs, the problems they deal with and the context they work in prior to and during project design and implementation. The attention given to network member assessments is very important since the internal and external dynamics of each FO, its country, region, and community are unique and capacity building of (network) organisations demands a tailored rather than a blueprint approach.
- d. The objectives were in line with the four priorities of the Dutch SRHR policy. Policy and advocacy activities (particularly mobilising influential SRHR leaders and champions) are being viewed by the Dutch MoFA as *very relevant first steps* to realise longer term changes.

##### EFFECTIVENESS

1. The project implemented all planned activities which led to a full achievement of all outputs foreseen in the initial project document.
2. The project recognised that policy processes and advocacy are not linear, require a long-term effort and occur in a dynamic and fast-changing environment, which needs enough flexibility to change tactics. Unforeseen changes in implementation have been well explained and led in all cases to quality improvement.
3. Some sort of mid-term measurement would have been important to identify short comings of the project, if any, at an earlier stage. In order to draw conclusions regarding progress in the results areas of the Dutch MoFA it would have been useful to monitor a fixed number of F2A members from the second project year onwards.
4. The selected thematic areas and interventions are appropriate to the broader project aims. Combining interfaith cooperation, advocacy, capacity development and knowledge and research has proven to be effective. The support strategies correspond closely to the problem level where capacity disparities were prevalent. The chosen interventions strengthened the focus of the Network on events, which has been important to carry the message, to find common ground and to show examples of results at global, national and community level. Less attention has been given to dynamic and follow up beyond events.
5. The project activities correspond closely to the problems identified prior to the project and were adequate to make progress towards the project objective and targeted outcomes. Transparent dialogue on divergent views led to common engagement of the four themes of the project. The experience of sharing and learning among faiths promoted tolerance and understanding and increased collaboration. Advocacy conducted with respect and sensitivity for and by different faiths generated trust, influence, and common efforts. Trainings appeared to be good opportunities to

bring members of the Network together in response to various capacity needs. Research and evidence has been critical in the advocacy process of the F2A Network and its members to make the case for change.

6. The project targeted outcomes have been reached to a great extent.
  - a. The F2A Network brings various players from different faiths, professions and nations who are committed to advocate for the promotion of SRHR and to bring about change at local, regional and international levels in an effective way together. Numerous examples exist of increased inter-faith cooperation and/ or alignment for the advancement of SRHR. The support of Champions and high-level persons has been very important.
  - b. Overall, F2A's activities contributed directly or indirectly to increased engagement of FOs to advance and promote SRHR. Several policy proposals were made to be used in different policy making processes and led to concrete SRHR policy changes. Membership of the F2A Network raised FOs participation and influence in SRH processes considerably and improved the way in which they are being consulted by stakeholders. They gained recognition.
  - c. Services like technical assistance and training have been paying off for members. The technical capacity on SRHR has increased for members who participated in trainings. Knowledge and understanding raised their confidence to influence decisions and their capacity to communicate and promote advocacy messages on SRHR. The financial capacity requires further investments. The current resource mobilisation at FO level through RFPs shared by the Secretariat does not seem to yield intended results relative to investment by applicants.
  - d. The F2A Network contributed to generating and disseminating knowledge on FOs approaches for SRHR policy making, particularly when it comes to interpretation of different religions on SRHR, and how to make that information more accessible. Knowledge has been obtained through members' participation in trainings and workshops, via the F2A Network newsletters and Interview series and the media. The number of readers of F2A information increased substantially. FO's learned from each other's approaches. Sharing of experiences and best practices with other network members increased their knowledge on effective faith leader engagement in advocacy and service delivery, community mobilization activities, faith based norms, language use in SRHR issues with faith groups, SRHR issues at grass roots level and management. Exchange has helped members to develop a religious argument to address reproductive health issues and the challenges towards working with faith communities in different societies.

#### EFFICIENCY

1. The financial reports provide clear overviews of the budgeted costs and actual expenditure of activities and the establishment of the network. All costs including indirect costs and other overhead are related to outcomes based on activities under each outcome. Activity based budgeting provides a good overview of the costs of activities and allows comparison to the costs of similar activities in other projects. To provide more understanding of the cost effectiveness and efficiency of the network it is necessary how costs are calculated (the rates for example for International transport, use of office space and other indirect costs. It would be relevant not only show the costs per outcome and per activity but also through the different cost categories, where funds allocated to member organisations is a separate category.
2. The quality of the financial management of the network is high. Underspending under some outcomes was compensated by overspending in other budget lines. After two years of implementation of the project, F2A network had spent 50% of the funding.
3. Possibilities for cost reductions can hardly be identified. In the current phase of the network development it is justifiable that considerable money is being invested in capacity building of the network members and strengthening of the network as a whole.
4. Currently the running of the F2A Network depends on external funding. It is important to identify which services should be rendered by the Network.

### IMPACT<sup>81</sup>

Faith communities' cultures and values don't change overnight. It takes a long term Multi faith effort to talk to each other, to appreciate each other in a context of understanding and to speak up together for better sexual and reproductive healthcare and respect of rights and to change.

1. F2A's activities contributed to more and better provision of SRHR information for young people in the intervention areas of the project. F2As work on awareness raising of religious scholars, peer education and the development of SRHR manuals for youth have contributed to increase in information provision. F2A also enhanced the capacity of FOs and religious leaders through access to SRHR knowledge and research which contributes to a pool of knowledge and skills for better provision of SRHR.
2. Because of the changing numbers of F2A members reporting on access to SRHR commodities, it is not possible to draw conclusions regarding improved access to SRHR commodities that is directly attributable to the project.
3. Based on the available data, the evaluators conclude that F2A contributed to better SRHR care, particularly in Uganda where commitment among community faith leaders and MPs is high. Also in Kenya F2A's work contributed to improved service delivery.
4. The evaluators are of the opinion that F2A contributed to greater respect and tolerance for SRHR of people and to the reduction of misperceptions, particularly via the participatory way of working, the focus on interfaith dialogue at local, national and international levels and joint projects.

Results vary between countries and are, amongst others, influenced by the political and funding environment, the level of public attention for SRHR, existing misperceptions and the role of the public sector. The increasing influence of FOs on health systems, , increased collaboration and the acceptance of religious leaders to be trained and to jointly explore alternative ways forward are important steps on the road to impact.

### SUSTAINABILITY

1. A sustainability strategy has been drafted by the secretariat to ensure that structures can stay in place. Donor confidence and the fundraising capacity of the F2A Network are important to retain and increase stakeholder engagement. The F2A Network has put strong emphasis on partnership building and has been able to secure a new grant which will support activities beyond 2015. More will be needed to meet the growing demand for support. Although in some countries the way forward is already strategized or subject of discussion, absence of succession plans at the level of the members could be a limiting factor in operational sustainability beyond the project.
2. In terms of Network development, the F2A Network is still relatively young and has through the support from the F2A project been able to accomplish a lot. The Faith to Action Network and its members gained recognition, showed innovative practices on FO's and SRHR and may count on support from target groups, SRHR experts and the larger environment in several countries for their ideas and for globally working across faiths. These results are important building blocks to achieve long term sustainability
3. The F2A Secretariat plays a major role in the development of the network. The members are the heart and soul of the Network and need to 'own' the network. Ownership is built and taken over time, as the actors grow in capacities, understanding and commitment. The evaluation found strong engagement of the members for the objectives and ideas of the network and for the further development of inter-faith cooperation on SRHR. More is needed in terms of membership dynamic and follow up beyond events to increase ownership.

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<sup>81</sup> See also Limitations to the evaluation. Collected information is based on anecdotal evidence via interviews and the F2A M&E Framework.

## B. Lessons Learned

### KENYA

Coordination and networking	
<b>Lesson 1:</b>	<b>Projects can be successful if commitment of project managers meets the commitment of beneficiaries</b>
<b>Context</b>	Relatively little monetary investment in the project produced wonderful results in a short while.
<b>Causal factors</b>	Participative planning and professional management created ownership even with divergent capacities and beliefs among the members. Professional management created confidence among members.
<b>Project goals</b>	The Network can grow tremendously and objectives attained cheaply. SRHR can be spearheaded among stakeholders effectively with comfortable target groups even if financial resources may be constrained.
<b>Who and how</b>	The target population of the project stand to benefit a lot from fulfilled needs by having facilities and information on alternatives and opportunities to choose from. The FOs can also benefit from efficient services to their faithful.
<b>Future action</b>	Monitoring and evaluation coupled with other managerial checks and balances should be strengthened to ensure professionalism in the management of the Network and constant feedback to and from the beneficiaries.

Capacity Development	
<b>Lesson 2:</b>	<b>Context matters</b>
<b>Context</b>	The message of the project on SRHR has made impact by addressing the context of the receivers.
<b>Causal factors</b>	Packaging of messages and preparing the delivering persons in the light of the culture, beliefs, ages and education levels of the target persons made the messages fit into concrete situations of the target people. These appreciated and respected those who appeared knowledgeable yet meek and genuinely concerned on their situations.
<b>Project goals</b>	Informed decisions or choices on sexuality matters can now be made by the target group. Services can also be used by those in need after appreciating what they mean to their real lives.
<b>Who and how-</b>	The target group here will benefit from well packaged and delivered messages that will not be tainted with any cultural, religious or artificial overtones. The community will also benefit by having healthy families for a healthy economy.
<b>Future action</b>	Continuous education should be rendered to those packaging messages for the target population.

Research and Evidence	
<b>Lesson 3:</b>	<b>Enlightened religious leaders</b>
<b>Context</b>	The Network subsisted despite divergence in beliefs and values.
<b>Causal factors</b>	Open sharing of values and beliefs and training in technical SRHR has enlightened religious leaders into realities they did not know before. They could make voluntary choices either to belong to the network or work on their own.
<b>Project goals</b>	Respect for space for FOs to make their own decision to join F2A or simply work in collaboration opens up opportunities for wide collaboration that enhances the understanding of the community on the objectives of F2A without depending on using members for propagation of its cause. This generated more knowledge on diverse approaches to SRHR, better uptake of knowledge and skills and enhanced tolerance.
<b>Who and how</b>	FOs now render more valuable services to their faithful with facts to back up their messages. The FOs also know the potentials of each other in case they need to refer cases they would not touch in keeping with their faiths and values.
<b>Future action</b>	All FOs should be encouraged to participate in introductory trainings on SRHR and to technical trainings before they are invited to become members.



## UGANDA

<b>Coordination and networking</b>	
<b>Lesson 1:</b>	<b>“Working with us, not for us” guaranteed ownership</b>
<b>Context</b>	Participative planning and implementation of the project ensured ownership among the stakeholders.
<b>Causal factors</b>	Initial feasibility that indicated that the target group would not take up lectures in respect of their lives especially where faith and culture were involved.
<b>Project goals</b>	This has led to voluntary memberships and wider uptake of using family planning methods at one’s informed choice, voluntary testing on cervical cancer, attending HIV counselling and treating centres and enhanced checking of one’s health for diseases around sexuality.
<b>Who and how</b>	This affects both the target groups, religious leaders, policy makers and policy implementers by ensuring fluid interactions, constant and full feedback, adequate supplies as far as resources allowed and consistent engagement at peer levels.
<b>Future action</b>	Interventions should be participative.

<b>Policy and Advocacy</b>	
<b>Lesson 2:</b>	<b>Close partnership and collaboration are important in policy and advocacy areas</b>
<b>Context</b>	Extraordinary achievements were reported where FOs engaged policy makers and implementers (the government) in one voice.
<b>Causal factors</b>	Awareness creation by F2A and the work of champions convinced potential collaborators into bonding for a common cause.
<b>Project goals</b>	There are policy changes with some districts now setting aside funds for family planning purposes; there is a common platform between the FBOs and the government on SRHR intervention through the Costed Implementation Plans.
<b>Who and how</b>	Target groups are the main beneficiaries here. The FOs and the government are also gaining in that their work is made easier through working together.
<b>Future action</b>	The spirit of working together should be extended even in other areas beyond SRHR. Effort should be made to ensure that Catholic leaders join the partnership to pursue their accepted norms on SRHR within the partnership thereby tapping into the common pool of resources and serving the whole community without conflicting messages or wasteful competition.

<b>Capacity Development</b>	
<b>Lesson 3:</b>	<b>Training senior religious leaders is useless if training is not cascaded to lower levels</b>
<b>Context</b>	This was summarised as “religious leaders listen to fellow religious leaders”. They do not listen to those that they lead. The message from F2A may end at the leadership level and not trickle down to the lower actors who relate directly with beneficiaries
<b>Causal factors</b>	Sex is a taboo – a sensitive matter. SRHR is an area a few venture to enter into dialogue publicly. The leaders taken up by F2A may have come forward as individuals. Those below them may not have the education or attitude to discuss the matter at hand.
<b>Project goals</b>	Offering the target groups enough and appropriate education so that they can make informed choices may not be realised. Target groups may continue suffering even as facilities are in place for sexual health and counsellors in place for counselling.
<b>Who and how</b>	The beneficiaries will suffer most. Secondary level leaders may not be able to render services to the target group optimally due to inadequate knowledge and even skills on the subject matter. Resources may be wasted..
<b>Future action</b>	Religious leaders below top (national) leadership should be trained in SRHR. Memberships and even training trajectories in future should be closely vetted to ensure that leaders who intimate readiness of their FOs to be members have mandate to do so and that they have plans to mainstream or cascade the trainings to those actively engaged with the beneficiaries.

## C. Best practices

1. **ACTING TOGETHER:** Especially in policy matters acting together ensured impact. Lone voices are most likely to be silenced or to be forgotten easily.
2. **BE THE CHANGE:** The Mityana Diocese of the Church of Uganda diocese covers four administrative (government) districts and is championing SRHR (especially family planning) in all districts with Mityana District in the forefront. The Bishop, a committed champion himself involved in F2A trainings and activities since inception, is leading the way. The Costed Implementation Plan for Mityana District was the first one in the country to have been possible at district level, thanks to the diocese encouraging all FOs and all sectors of the government and members of parliament to work towards it. The diocese volunteered physical and human resources to its realisation just as it did for services all the time. Strategic approaches, encouraging innovation, openness to enquiries and to cooperation with all FOs, responding to concrete situations promptly, personal exemplary behaviour and sheer commitment has brought the diocese into unequalled reputation and success in her own interventions.
3. **COHESION:** Dressing, content and language tailored to context of particular audiences contributed to attracting target groups and obtaining genuine feedback for the furtherance of the intervention. Respect to values and being careful in language brought cohesion among the FOs in the Network and even within the FOs themselves in tackling SRHR issues pertinent to the community. This also attracted the government in that there was plenty of room for secular interventions to go hand in hand with religious initiatives without friction or embarrassment. This increased membership of F2A Network as well as impact on the target groups.
4. **COLOURED “MOON BEANS”:** In order to contextualize SRHR messages and family planning methodologies coloured “moon beans” have been used that are available locally to make gadgets for natural family planning methods (Billings Ovulation Method). These are cheap and since the beads are available locally the gadgets could be copied elsewhere if documented.
5. **CONCENTRATE ON ONE DISTRICT AT A TIME:** Realising that funds were constrained some FOs in Uganda opted to concentrate on one district at a time before moving to others so that available funds could produce tangible results. Lessons from the first district informed action in the others. Good impact also spread the message to other districts without too much effort from the FOs. In this way funds realised the purpose and even surpassed the target in some instances. These achievements should be shared so that more FOs can consider adopting this method in their own contexts.
6. **THE CONCEPT OF CARAVAN:** The concept of caravan and what it meant in Kenya has been effective and successful and has the potential for replication and is therefore adaptable to similar objectives in varying situations, for example in French speaking countries in Africa.
7. **CORPORATE MEMORY:** Involvement of top FO leaders brings in more consistency and more lasting corporate memory than involvement of technical implementers who are prone to frequent turnover.
8. **EXPOSURE TO THE OUTSIDE WORLD:** Meetings and conferences have been held either internationally or regionally. This is a good practice that ensures cross-learning and builds confidence among those who wished to validate own convictions and lessons not well grasped at national level. Exposure to the outside world also confirmed some perceptions in the changing world hence encouraged further self-development and research.
9. **CULTURE OF DOCUMENTATION:** People understand what is going on and stay connected to the Network through the culture of documentation.

## IV RECOMMENDATIONS

### 1) KEEP UP THE MOMENTUM

In order to keep up the momentum of the Faith to Action process, the F2A network needs to build on and reinforce the important successes that have been achieved so far, while acknowledging the challenges that lie ahead. All possibilities should be explored to retain the engagement built over this short past period for impact that can be achieved through joint effort among the members. It will be most important

- (1) to approach the further consolidation and ambitions of the Network from a realistic perspective looking at the available human capacity of the secretariat and resources.
- (2) to strengthen Network dynamic and follow up by enhancing interaction and exchange during and beyond events;
- (3) to encourage common reflection to agree collectively on what the members wish to achieve, on their own role in the achievements and to draw up a to this ambition related capacity development plan.
- (4) to facilitate the work of the members by encouraging members in practical ways to educate their own faith leaders and to achieve their national objectives on FP and reproductive health.
- (5) to develop strategies and organized advocacy for governments to respond.

Targeted interventions and follow up on capacity building, a shared advocacy agenda and unlocking opportunities are required to keep the Network's relevance. Since it will not always be possible to meet face to face, the use of technology will be very important to assure the best collaboration.

### 2) INVEST IN JOINED WILLINGNESS AND EFFORTS TO HELP THE NETWORK "ONE STEP FURTHER" IN ITS DEVELOPMENT

The F2A Network has and needs committed, inspired and powerful people who can make the right connections and make the value of what the F2A Network is doing visible. It will be important to strengthen pro-actively

- (1) sustainability strategies at the level of the Network and at the level of the members;
- (2) relations with governments, the private sector and the donor community;
- (3) relations between Think tanks of medical experts with senior religious leaders ;
- (4) the establishment of a more structural high-level Champions Advocacy group at global level. The latter could engage the EAC, AU and UN agencies, in conjunction with religious networks at those levels such as Africa Health Leaders' Summit;

### 3) REACH ALL LEVELS

Ways and means should be sought to ensure that skills gathered at national and organisational leadership (supreme) levels reach the lower levels where change is desired. This could be through

- (1) bridging the generation gap between the relatively elderly leaders who have been capacitated and the youthful leaders and youth beneficiaries at lower levels;
- (2) more emphasis and strategies on tactics and packaging of messages for the easy assimilation of those being targeted;
- (3) education and guidance of the media (social media and formal media);
- (4) design of own official nodes for information, broadcasting own, contextualised material on local channels

- (5) having official spokespersons, employing professional specialists and promoting own motivational speakers.

#### 4) HIGHLIGHT EVIDENCE AND VOICE

##### Evidence

In order to draw conclusions regarding progress in result areas it is important

- (1) to monitor a fixed number of F2A members,
- (2) to strengthen Network member's capacity to collect sophisticated quantitative data and
- (3) to keep track of results of direct meetings with decision makers and influencers.

##### Voice

- (1) continue to document success stories<sup>82</sup> and documentation of popular positive voices from faith based coalitions and from FO leaders within the community.
- (2) Inroads should be made on time to ensure that certain reserved areas are demystified such as discussing "sex" openly. Various methodologies are available notably social media and local FM radios that often beam in vernaculars.
- (3) contradicting messages should be avoided as they confuse the target groups. All those involved in SRHR should speak the same language. Hence, gaps should be bridged between FO leaders and health professionals, between FO leaders and peer educators and between service providers and beneficiaries.
- (4) Powerful motivational writers could be engaged to interpret current SRHR literature. More diversity is called for in IEC materials and messages delivered in social media and the formal media. Cartoons and slangs could send a message further than formal dogmatic lectures or literature.
- (5) More community radios e.g. "Ghetto Radio" that discuss youth matters in slangs should be encouraged.

#### 5) STRENGTHEN FINANCIAL VIABILITY

- (1) Develop a multi annual financial plan for the Network secretariat/coordination unit to identify mid-term and long term financial viability. The plan is an important input to define a costing strategy for the overall network cost.
- (2) Finalise and implement the resource mobilisation strategy and assure commitment of current and future member organisations. Part of the resource mobilisation could be a cost recovery strategy through the membership taking into account the financial strength of different groups of members, benefits for members and services delivered to members.
- (3) Strengthen FOs accountability to improve their access to resources. A more collective approach to engaging RFPs may pay off both to the network and to the individual FOs. It is recommended that some dialogue is entered into around the secretariat rendering formal backstopping for RFPs against a management fee. The secretariat could also target RFPs to those deemed capable of meeting demands with a commitment from those picked to share implementation of projects with the relatively nascent ones in order to build their capacities.

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<sup>82</sup>Example Mityana Diocese of the Church of Uganda had unique results in the family planning areas of SRHR. This was said to be due to strategic approaches, encouraging innovation, openness to enquiries and to cooperation with all FOs, responding to concrete situations promptly, personal exemplary behaviour and sheer commitment. These brought the diocese into unequalled reputation and success in her own interventions. Few FOs had such initiatives and even priorities in their agenda while working for healthy families. The story of Mityana should be documented to encourage emulation by others.

## ANNEX 1: Evaluation Questions

As mentioned in the ToR, the evaluation primarily examined the four thematic areas of the Faith to Action Project: (1) Coordination and networking; (2) Policy and advocacy; (3) Capacity Development and (4) Research and evidence in order to collect information regarding relevance, effectiveness, efficiency, impact and sustainability prospects of the project.

<u>Criterion</u>	<u>Question</u>		<u>Related Sub-Question</u>	
Relevance	EQ 1	To what extent was the project, as designed and implemented, suited to context and priorities of the target group and the donor?	EQ 1.1	Were the objective(s) of the project in line with the needs of FOs?
			EQ 1.2	Has the implementation been adapted to context and priorities of the target group?
			EQ 1.3	To what extent were the project design and implementation consistent and supportive of the Dutch MFA's SRHR results framework?
Effectiveness	EQ 2	To what extent was the project, as implemented, able to achieve its targeted outcomes?	EQ 2.1	To what extent was the project implemented as envisaged by the project document? If not, why not?
			EQ 2.2	Were the project activities adequate to make progress towards the project objective and targeted outcomes?
			EQ 2.3	To what extent have the project targeted outcomes been reached?
Efficiency	EQ3	Taking into account the timeline and the budget, to what extent were resources appropriately used to produce the desired outputs?	EQ 3.1	Was the project adequately resourced to enable the achievement of desired outcomes in the four thematic areas?
			EQ 3.2	Was the budget designed, and then implemented, in a way that enabled the project to meet its objectives?
Impact	EQ4	To what extent have the project activities contributed to better provision of SRHR by FBOs?	EQ 4.1	To what extent has/have the realization of the project objective and project outcomes of the four thematic areas had an impact on the problem the project aimed to address?
			EQ 4.2	Have the targeted FOs experienced tangible impacts? Which were positive; which were negative?
			EQ 4.3	What links exist between the Faith to Action project and the observed impacts?
			EQ 4.4	Did change actually occur in the ways as expected in the theory of change?
			EQ 4.5	What external factors, if any, have affected the project impacts or its prospects?
Sustainability	EQ5	To what extent are the benefits of the project likely to continue after the project has come to an end?	EQ 5.1	Did the project incorporate mechanisms that guarantee project benefits on a continuous basis?
			EQ 5.2	To what extent are the project results (impact if any, and outcomes) likely to continue after the project?
			EQ 5.3	Is stakeholders' engagement likely to continue, be scaled up, replicated or institutionalized after the project ends?
			EQ 5.4	What were the major factors which influenced the achievement or non-achievement of sustainability of the project

## ANNEX 2: List of documents reviewed

- Annual Surveys 2013, 2014, 2015
- Advancing sexual and reproductive health and rights through faith-based approaches: A mapping study – Faith to Action Network, 2014
- Caravan report
- Case study 2015 Develop the capacity of religious communities to address sexual and reproductive health and rights (SRHR) of young people Faith to Action Experience in Kenya, Uganda and Rwanda Draft 30 May 2015
- Contextual analysis | faith to action | revised 8 January 2013
- Documents regarding the Faith Pre-Conference: The Role of Faith Communities in FP Advocacy & Services Towards Achieving the Sustainable Development Goals (SDGs)
- Faith to Action Network Advocacy Strategy April 2016
- F2A Network organisation Structure, constitution and Steering council
- Faith to Action (F2A) Project's 2013 & 2014, 2014 & 2015, 2015 – June 2016 Workplan
- Faith to Action Network checklist 2013, 2014, 2015
- Faith to Action Strategic Communication and PR Plan July16, 2013
- Faith to Action Network Interview series
- Faith to Action Network Member List
- Faith to Action Network: A Resource Mobilization Strategy and Implementation Plan for Faith to Action Network (F2A) 2013 - 2018
- Faith to Action Strategic Plan 2014-2018
- Faith to Action Network Strategic Plan 2015-2018 Implementation
- Faith to Action Workplan 2015 to extension in June 2016
- Faith to Action Workplan with initial extension till March 2016
- ICFP Faith-Statement
- Leaders who publicly voice support to Faith to Action Network At Caravan Training (August 2015)
- Media coverage 2015\_2016
- Meetings Report Faith to Action Planning, Research Framework, Council Meeting May 13-17, 2013, Mombasa
- 5<sup>th</sup> East African Health and Scientific Conference- Uganda (25<sup>th</sup>-27<sup>th</sup> March 15)
- Newsletter published 2015
- Programme Proposal | Faith to Action | 12 October 2012 Revised 8 January 2013
- Result framework 2013, 2014, 2015
- Signed contracts
- Steering Council member advocacy events
- Steering Council Members Advocacy events 2015
- Summary\_DSW\_Faith2Action\_ActivityNo 25003\_8January2013
- Technical assistance monitoring
- Training assessment tools and results
- F2A Network Project Monitoring Framework
- DSW application to the SHHR fund, Category C for activity 25003
- The F2A work plan for the period 2014 – 2015

**ANNEX 3: List of Persons interviewed****KEY INFORMANT INTERVIEWS (SKYPE)**

	Date	Name	Organisation
1	09-09-2016	Mrs Geertje van Mensvoort	Catholic Organisation for Relief and Development Aid (Cordaid)
2	13-09-2016	Mrs. Mona Bornet	Christian Connections for International Health (CCIH)
3		Dr. Francis Kuria	the African Council for Religious Leaders-Religions for Peace (ACRL-RfP).
4	15-09-2016	Mr. Mohammed Bun Bida	the Muslim Family Counselling Services (MFCS)
5	20-09-2016	Mrs Ulrike Neubert	The Deutsche Stiftung Weltbevölkerung (DSW )
6	22-09-2016	Mr Douglas Huber	Christian Connections for International Health (CCIH)
7	26-09-2016	Prof. Ahmed Ragab	Al-Azhar University

**STAKEHOLDER INTERVIEWS RWANDA - BURUNDI - GHANA ; Dutch Ministry of Foreign Affairs**

	Date	Name	Organisation
1	15-09-2016	Mr. Benjamin Nduwumuremyi	Cordaid, Burundi
2	16-09-2016	Mr. Ignace Singirankabo	Rwanda Interfaith Council for Health (RICH), Rwanda
3		Dr. Yaa Asante	Ministry of Health Division, Ghana
4		Mr. Nathan Ndyamiyemensi	Baptiste Church, Rwanda
5	20-09-2016	Mrs. Daisy Walburg	Ministry of Foreign Affairs, The Netherlands
6	22-09-2016	Dr. Epitace Kubwimana	Society for Women Against Aids, Burundi

**COUNTRY VISIT KENYA – FOCUS GROUP MEETINGS WITH FOs ( Network members)**

	Date	Name	Organisation
1	12-09-2016	Jane Kishoyan	Christian Health Association of Kenya (CHAK)
2		Fr Joseph Mutie	Organisation of African Instituted Churches (OAIC) - Kenya
3		June Nderitu	Council of Anglican Provinces of Africa (CAPA)
4	13-09-2016	Fadhili Msuri	Kenya Muslim Youth Development Organisation
5		Sheikh Jamaludin Yahya	Kenya Muslim Youth Alliance
6		Nitin Malde	Hindu Council of Kenya
7		Rev. Anthony Sasaka	Chemichemi ya Ukweli
8		Cynthia Cherono	Interreligious Council of Kenya Kenya Women of Faith Network
9		Rolex Mwamba	Interreligious Council of Kenya

**COUNTRY VISIT KENYA –MEETING WITH FO ( Non Network members)**

	Date	Name	Organisation
1	14-09-2016	Jane Ng'ang'a	Kenya Network of Religious Leaders Living with HIV/AIDS (KENERELA)

**COUNTRY VISIT KENYA – FOCUS GROUP MEETINGS WITH SECONDARY BENEFICIARIES (YOUTH)**

	Date	Name	Organisation
1	13-09-2016	Zachariah Kahwai	Githurai Youth Empowerment Centre
2		Michael Kihonge	Githurai Youth Empowerment Centre
3		Allan Kariuki	Githurai Youth Empowerment Centre
4		Tabitha KImani	Githurai Youth Empowerment Centre
5		Orianna Wanjiru	Githurai Youth Empowerment Centre
6		Joan Mutheli	Githurai Youth Empowerment Centre
7		Edgar Ogutu	Githurai Youth Empowerment Centre



**COUNTRY VISIT KENYA – INTERVIEW WITH GOVERNEMENT REPRESENTATIVES RESPONSIBLE FOR SRHR POLICY**

	Date	Name	Organisation
1	13-09-2016	Peter Arisi Nyakwara	National Council for Population and Development

**COUNTRY VISIT KENYA – INTERVIEW WITH INDIVIDUAL CHAMPIONS OF THE PROJECT**

	Date	Name	Organisation
1	14-09-2016	Matthias Brucker	International Planned Parenthood Federation (IPPF), Regional Office

**COUNTRY VISIT KENYA – FAITH TO ACTION SECRETARIAT**

	Date	Name	Function
1	14-09-2016	Vitalis Mukhebi	International Resource Mobilisation Officer

**COUNTRY VISIT UGANDA - FOCUSGROUP MEETINGS WITH FOs ( Network members)**

	Date	Name	Organisation
1	15-09-2016	The Rt Rev. Dr Stephen Samuel Kaziimba	Mityana Diocese
2		Rev. Moses Ssemugooma	Mityana Diocese
3		Fr Constantine Mbonabingi	Mityana Diocese (Ngombe Health Project)
4		Mr Ronal Mutebi	Mityana Diocese

**COUNTRY VISIT UGANDA - MEETING WITH SECULAR CIVIL SOCIETY ORGANISATIONS THAT FOCUS ON SRHR ISSUES**

	Date	Name	Organisation
1	16-09-2016	Doreen Kansiime	Reproductive Health Uganda
2		Kiwanuka Alex	Reproductive Health Uganda
3		Richard S. Mugenyi	Reproductive Health Uganda

**COUNTRY VISIT UGANDA - FOCUSGROUP MEETINGS WITH SECONDARY BENEFICIARIES (YOUTH)**

	Date	Name	Organisation
1	15-09-2016	Nakazibwe Viola	Kyanamugera, Mubende
2		Luyima Allan	Kyanamugera, Mubende
3		Kaskia Ronald	Kyanamugera, Mubende
4		Sseruga Livingstone	Kyanamugera, Mubende
5		Wasswa Eric	Kyanamugera, Mubende

**COUNTRY VISIT UGANDA – INTERVIEW WITH GOVERNEMENT REPRESENTATIVES RESPONSIBLE FOR SRHR POLICY**

	Date	Name	Organisation
1	15-09-2016	Mr Emmanuel Zirabamuzaale	Mityana District Council
2		Dr Lwassampijja Fred	Mityana District Council
3	17-09-2016	Dr Betty Nakazzi Kyaddondo	National Population Council

**COUNTRY VISIT UGANDA – INTERVIEW WITH REPRESENTATIVES OF FBOs (Network members)**

	Date	Name	Organisation
1	15-09-2016	Dr Ruth Obaikol	Church of Uganda
2		Mr Stephen Ang'ala	Church of Uganda
3	17-09-2016	Sr Maria Goretti Kisakye	Inter religious and cultural dialogue programme

**COUNTRY VISIT UGANDA – INTERVIEW WITH INDIVIDUAL CHAMPIONS OF THE PROJECT**

	Date	Name	Organisation
1	15-09-2016	Rev. Alfred Wonyaka	Freelance Consultant/Priest/Ex Inter Religious Council of Uganda
2	17-09-2016	Sheikh Ali Waisswa	Makerere University Business School/ member to many Muslim and interfaith organisations
3		Rev. Rowland Ringishi	Arcdeacon at Abim All Saints Parish, Karamoja

**COUNTRY VISIT UGANDA – FAITH TO ACTION SECRETARIAT**

	Date	Name	Function
1	17-09-2016	Jackie Beinomugisha	International Advocacy Officer

## ANNEX 4: Data Collection Tools

The evaluators used the following data collection tools

1. A **DESK STUDY CHECKLIST** to collect essential, basic, project information with an emphasis on information related to the evaluation questions
2. An **IMPLEMENTATION LOG** to identify the level of project implementation and unforeseen or planned changes during the project life span (planned activities, actual implemented activities, changes, observations)
3. An **ELECTRONIC INQUIRY** (Survey Monkey)  
The electronic inquiry for FOs, who are member of the Faith to Action Network, focussed on the outcomes of four thematic areas and the impact of the project

### QUESTIONNAIRE End of project evaluation ‘Faith to Action’

#### General information

1 Name	
2 Organisation	
3. Country	

#### PART 1

	QUESTION	ANSWER
4	Consider your involvement in interfaith cooperation on SRHR issues as part of Faith to Action. What would you, from your personal perspective, regard as the <u>two</u> most important benefits of this involvement?	
5	What did you learn from other Network members of the Faith to Action Network?	
6	Could you give an example of a collective success of Network members’ advocacy in support of SRHR over the lifetime of the Network?	
7	In which way, if at all, membership to the Faith to Action Network increased your participation in SRHR policy making processes? (Please provide examples to illustrate your answer. (For example: did you take initiatives to participate in policy making processes, did you develop policy proposals ?)	
8	In which way, if at all, membership to the Faith to Action Network increased your influence in SRHR policy making processes? Please provide examples to illustrate your answer.	
9	Since becoming a member of the Faith to Action Network, have you observed any improvements, if at all, in the way you are being consulted by stakeholders in SRHR policy processes? Please provide examples to illustrate your answer (For example Did they, more than before, invite you to present your views, to explore policy options, to give feedback on proposals or to take part in focus groups or panels related to SRHR policies)	
10	What , if anything, could in your opinion have been done differently/ better by the Faith to Action Network regarding faith-based advocacy on SRHR issues?	
11	What, if any, is for you the value of the advocacy and networking events which have been organised by the Faith to Action Network?	
12	Since becoming a member of the Faith to Action Network, have you observed any changes in your capacity to communicate and promote advocacy messages on SRHR? If yes, please provide examples.	
13	Since becoming a member of the Faith to Action Network, have you become more confident in your capacity to influence decisions on SRHR policies and budgets?	
14	Since becoming a member of the Faith to Action Network, have you been able to better mobilize funds necessary to increase the range of SRHR resources provided?	
15	Overall, how satisfied, if at all, are you with information which you received through the Faith to Action Network (through articles, studies, presentations) about SRHR? What, if anything, could be improved?	
16	How did you use, if at all, this information in your SRHR practice (awareness raising (youth communities), services for youth/women, advocacy, other ways)?	
17	Did the information received through the Faith to Action Network influence your commitment to SRHR? If yes, in what way?	

**PART 2 :** Tick the answer that best reflects your opinion in each of the areas mentioned below using the following scale: **1 = Strongly Disagree, 2 = Disagree, 3 = Neither Agree or Disagree, 4 = Agree, 5 = Strongly Agree, 6= Not applicable.** Please explain your answer.

	1 Strongly Disagree	2 Disagree	3 Neither Agree or Disagree	4 Agree	5 Strongly Agree	6 N/A	Explanation
The Faith to Action Network is an effective platform for dialogue and advocacy on SRHR							
The Faith to Action Network is a major rallying point for international policy making processes related to SRHR							
Being a member of the Faith to Action Network increased my engagement in SRHR programmes and activities							
The Faith to Action Network activities contributed to better SRHR information to young people							
The Faith to Action Network contributed to better access of people to contraceptives							
The Faith to Action Network contributed to better SRH care, provided by public and private clinics							
The Faith to Action Network contributed to building greater respect and tolerance for sexual and reproductive health and rights of people, consistent with their faith							
The resource mobilisation and fundraising activities of the Faith to Action Network improved my access to resources promoting better sexual and reproductive health care							
Articles which I received and conferences which have been organised through the Faith to Action Network helped me dispel taboos and misperceptions on SRHR in my own faith community							
Articles which I received and conferences which have been organised through the Faith to Action Network helped me dispel taboos and misperceptions on SRHR in other faith communities							
Articles which I received and conferences which have been organised through the Faith to Action Network helped me dispel taboos and misperceptions of donors, governments and NGOs on faith-based approaches to SRHR							

4. An **EVALUATION INTERVIEW PROTOCOL** for consultants to align questioning during the key informant and stakeholder interviews (Skype) and in-country research in Kenya and Uganda. The protocol included the questions to be asked and guidelines for reporting related to the recommended structure of the final evaluation report as mentioned in the ToR.<sup>83</sup>
5. An **INTERVIEW SCENARIO** for the country visits in Kenya and Uganda to collect in-depth and context related information related to all evaluation questions as far as they were relevant for the specific focus group or stakeholders.
6. **LESSONS LEARNED TABLE.**<sup>84</sup> Since learning is an important component of the evaluation, lessons learned tables have been used to bring together any insights gained in Kenya and Uganda during the F2A project. The tables are related to the four thematic areas: (1) coordination and networking, (2) policy and advocacy, (3) capacity development and (4) research and evidence. Observations have only been considered as 'lessons learned' when it was possible to identify the influence on project goals, people affected by it, and when they gave an indication of what should be avoided or repeated in future action.

<sup>83</sup> TOR End of project evaluation F2A\_22 July 2016.

<sup>84</sup> A Lesson Learned is an insight derived from project or program implementation that imparts new knowledge or understanding about a given implementation approach, and may benefit those embarking upon similar activities in the future.