



FOUNDATION

PARTNER PAPER NO. 6
LONGTERM IMPACT
EVALUATION



Editorial

There is sufficient evidence that proves that education is a prerequisite for reducing poverty, improving preventative healthcare, and creating a committed civil society. But we specifically wanted to verify whether our commitment changed living conditions in the targeted villages in the long term and beyond the scope of our educational projects, especially in the context of our consistent approach of helping people to help themselves. Before starting our programmes, evaluators in three countries and 56 villages collected basic data on education, health, mobility, communication, economic development, and civic engagement. Four years later, they reviewed the progress achieved and compared it with average data from the respective provinces. With the present Partner Paper we proudly present to you the evaluator's report. It is with satisfaction that our hypothesis has been proven and the evaluators were able to confirm encouraging results. There is only one conclusion: involving the local population and encouraging them to take personal responsibility for themselves is worthwhile! We would like to thank our partners Action Aid Malawi, Peoples Action Forum, Reformed Open Community Schools, CAMFED, Child Protection Society and UNICA for their collaboration in the set-up of this long-term impact study on community engagement.

Janine Händel, CEO Roger Federer Foundation, March 2019



Executive Summary

An endline evaluation was conducted in 56 communities in Malawi, Zambia and Zimbabwe supported by AAM, PAF, ROCS, CAMFED and the Child Protection Society in partnership with United Children of Africa (UNICA). The purpose of the study was to collect endline data on key indicators located in the domains of education, health, mobility, communication, income generation and business development, and social environment. This data was compared to baseline findings obtained in 2014, to determine if any changes have taken place in the abovementioned domains as a result of the work of the implementing partners and the RFF.

In **education**, 93% of the sites reported positive changes in education, particularly geographic access to schooling. There has also been some improvement in the quality of education and school infrastructure. Additionally, parents are more positive about education quality and there has been an overall improvement in community perceptions of the importance of education. These positive shifts have contributed to improved education outcomes for children.

In **healthcare**, of the 56 sites sampled, 95% reported having had significant changes in healthcare, particularly in relation to access to child health services, hygiene and sanitation and nutrition awareness and practice. As a result, improved health outcomes, especially for children, are reported. The data shows that healthcare has been made more accessible geographically through more economical transport options being available. Additionally, the increase in Healthcare workers means that there is improved reach of health services in the communities targeted.

Evidence from baseline and end line data show little change in overall access to **transport** across the sites. Although there have been some improvement of roads most of them are still in poor condition. There is evidence that there have been improved access to **communication** across the 56 sites. However, these changes are attributed to the cell phone and network service providers and except for 2 sites in Zimbabwe, would have happened anyway.

Of the sites sampled, 73% report positive changes in **business development and income generation**. These changes include an increase in the types of businesses operating in the sites included as well as an increased level of involvement by women. The data shows that there has been a decline in agricultural-related activities since baseline. Other challenges include the high cost of agricultural inputs coupled with low profits on agricultural produce. Mitigating these challenges is a reported increase in access to social grants and a shift from agriculture to other IGAs such as the sale of goods and services. Thus, an equal number of respondents noted the implementing organisations and government as the two key contributors to the reported changes in this specific area. Implementing organisations have contributed directly to improved access to livelihoods through their provision of business skills development and training as part of their educational packages.

Of the 56 sites sampled, 84% report positive changes in **community cohesion and participation**. These changes include an increase in the number of operational committees and improvements in committee efficiency and management. Increased community participation in events and improved communication regarding events and event organisation, were also noted.

RFF supported organisations thus played a strong role in strong education and healthcare outcomes. In terms of transport, there is evidence it played an indirect role in terms of community mobilization, and some communities do feel that IPs directly and indirectly supported positive change in income generating activities. Additionally, it can be concluded that IPs have contributed towards community cohesion and participation directly through the provision of spaces for community engagement and indirectly through their facilitation of community collaboration.

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Abbreviations

AAM	Action Aid Malawi
CAMFED	Campaign for Female Education
CBCC	Community Based Childcare Centre
CPC	Child Protection Committee
CPS	Child Protection Society
CWAC	Community Welfare Assistance Committee
ECD	Early Childhood Development
FGD	Focus Group Discussion
IGA	Income generation activity
IP	Implementing Partner
MK	Malawian Kwacha
MSC	Most Significant Change
MSG	Mother Support Group
NGO	Non-governmental Organisation
OVC	Orphans and Vulnerable Children
PAF	Peoples Action Forum
PASGAP	Participatory School Governance and Advocacy Project
PTA	Parent-Teacher Association
PWD	People with Disabilities
RFF	Roger Federer Foundation
ROCS	Reformed Open Community Schools
SDC	School Development Committee
SH	Southern Hemisphere
SMAG	Safe Motherhood Action Groups
SSI	Semi-structured interview
Std	Standard
UK	United Kingdom
UNICA	United Children of Africa
USD	United States Dollar
VSL	Village Savings and Loan
WASH	Water, Sanitation and Hygiene
WASHE	Water, Sanitation and Hygiene Education

1 Introduction

This report presents the findings of the impact study on community development in 56 communities which have been provided with a package of measures for better education by the Roger Federer Foundation (RFF). The study was commissioned for Southern Hemisphere by the RFF in late August 2014 for the baseline study and with the endline study in September and October 2018 as part of its work with five implementing partners in Malawi, Zambia and Zimbabwe. These partners are Action Aid Malawi (AAM), Campaign for Female Education (CAMFED), Child Protection Society (CPS) together with UNICA, Reformed Open Community Schools (ROCS), and Peoples Action Forum (PAF).

There are several key factors which influence children's potential: Education, health, mobility, income generation and social environment. These factors has been qualified and quantified in order to get a comprehensive picture about the RFF's long-term achievements in a community, a region or a country.

The objective of the study is to conduct a comparative assessment on the development that has taken place in these domains of development as a result of the work of the Roger Federer Foundation in the 56 communities in Malawi, Zimbabwe and Zambia. The purpose of the study is to test the hypothesis that "If RFF is organising and supporting the various communities with an educational package then the community members will come together to organise other factors which will develop their community".

The report contains analyses of the findings in terms of testing the hypothesis within the six domains of education, health, mobility, income generation and social environment. Each chapter starts with the key findings/message, followed by recommendations and then the evidence supporting the findings. The data has been aggregated across the 56 sites.

Appendices 1-5 contain the findings within the six domains for each of the implementing partners.

Southern Hemisphere thanks all those who generously made themselves available for focus groups and interviews and shared information and their experiences with the evaluation team.

2 Methodology and sample

2.1 Methodology

A participatory, mixed method, qualitative methodology was used for this study. It was noted as a limitation in the baseline study that respondents were overly positive in particularly when assessing the quality of education and perception of the importance of education. In order to extract the real change/impact, SH has applied the Most Significant Change (MSC) technique. Besides answering the same questions as in the baseline study, the respondents were given an opportunity to reflect on the major changes that they have encountered within each domain over the last four years and what factors had contributed to these changes.

The following indicators were elaborated on in the instruments and reported on in this evaluation report.

Table 1: Domains and Indicators of measurement

Domains	Indicators
Education	<ul style="list-style-type: none"> • General education level in the communities • Perception of the importance of education
Health	<ul style="list-style-type: none"> • Social welfare and availability of health care • Individuals access to health care
Mobility	<ul style="list-style-type: none"> • Transport opportunities in the community • Communication opportunities
Income generation	<ul style="list-style-type: none"> • Development of agriculture • Development of business • Development of individual income
Social environment	<ul style="list-style-type: none"> • Grade of solidarity and organization of the community • Grade of participation

The evaluation process is mapped out below.

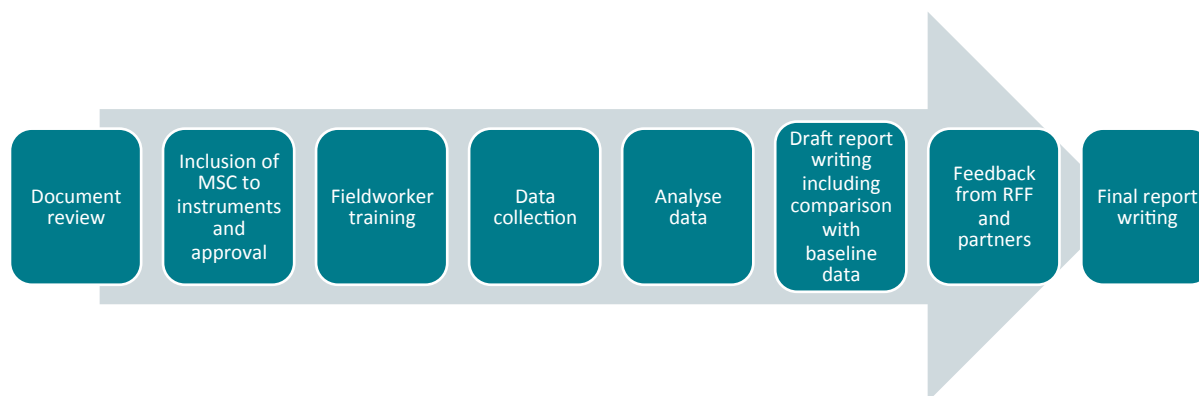


Figure 1: Evaluation Process Diagram

2.1.1 Telephonic Evaluation planning meeting

An initial telephonic planning meeting took place with the CEO of the Roger Federer Foundation to gauge the expectations and the scope of work.

2.1.2 Document review

A review of implementing partner documents related to the programme as well as available statistics was conducted. Information obtained from these documents allowed evaluators to familiarise themselves with the programme and extract statistics.

2.1.3 Instrument design

Based on the questions and indicators defined by the RFF prior to contacting Southern Hemisphere in 2014 instruments were developed. These included two semi-structured interview schedules, two focus group schedules, one observation schedule and three different types of statistical sheets. These instruments were applied in both the baseline and end line study although additional MSC questions were integrated into the end line questionnaires.

2.1.4 Fieldworker training

A training session of fieldworkers took place prior to fieldwork and included the following: introduction to the RFF programme; overview of the study including the key objectives of the study, method, sample; input on the study instruments; and discussion of fieldwork roll-out and logistics. This fieldworker training was conducted via teleconference. The study benefitted from the same fieldworkers conducting the same data collection at the same sites in both the baseline and end line studies.

2.1.5 Data collection

The fieldwork took place from October to November 2014 and again in September to October in 2018.

Face-to-face semi-structured interviews were conducted with head master/mistress, the headmen, the district education officer and the social welfare officer while focus group schedules were applied for the women committees and the parents. One observation was done at each of the schools or ECDs visited.

2.1.6 Analysis

As this is a baseline study, the qualitative data was grouped and analysed according to themes and compared with statistical data collected as well as statistics obtained.

2.1.7 Report

This draft report was submitted for comments on 15 November 2018. Comments will be incorporated and the report will be finalised and submitted to client on 28 November 2018.

2.2 Sample

The following reflects the planned versus actual sample for the end line study.

Table 2: Sample

Stakeholders	Planned number of SSI/FGD	Actual number of SSI/FGD	Actual total number of respondents
Parents committee (FGD)	56	56	273
Headmen (FGD)	56	55	130
Women committee (FGD)	56	56	381
Headmaster (SSI)	56	55	72
Head caregiver (SSI)	0	10	10
District officials (Social Welfare and Education Officer) (SSI)	10	9	9
TOTAL	234	241	875

2.3 Limitations

This section describes the general limitations to the study. The specific limitations to the study per implementing organisation are described under those reports in appendices 1-5.

Statistical data provided to be difficult to obtain from the District Offices of Education and of Social Welfare but was acquired after much persuasion at some of the districts. However it emerged that some of the data requested could only be obtained by the District Office of Health who across all three countries did not want to provide the data. To mitigate this and where possible the evaluation team tried to obtain statistics from other secondary sources.

In the baseline study, given that the interviewers were ‘outsiders’ to the community, there were some instances where respondents tried to answer questions to appear more ‘favourable’ particularly when assessing the quality of education and perception of the importance of education. In order to address this, the interviewers used more probing questions and also interviewed parents and teachers separately which allowed for a more balanced response. Hence in the end line study it was decided to use the MSC techniques and include MSC questions to triangulate with the comparative data from the baseline and end line study. This has made the findings more robust and it balanced with the more quantitative questionnaires.

Finally, no comparison group was used in the evaluation design. This limits the extent to which evaluators can confidently say that the change was directly/indirectly related to the programme, as we cannot compare whether other communities have also shifted in the same way. Thus, where the implementing partner or supported school is not specially mentioned as contributing to change, it is difficult to attribute this (even indirectly) to the programme, as the evaluation was not optimally designed to rule out other possible explanations for the changes identified.

3 Education

Findings/key message

Of the 56 sites, 93% reported positive changes in education since 2014. Geographic access to schooling has improved, with a significant improvement in access to ECDs/CBCCs across all sites. There has also been some improvement in the quality of education; some observable improvements in the school infrastructure across sites; and parents are more positive about the quality of education in 2018 compared to four years ago. Furthermore, there has been an overall improvement in community perceptions of the importance of education and, in particular, ECD.

These positive shifts have contributed to improved education outcomes for children. This includes an increase in the number of learners enrolling and completing grade 7 across the 56 sites over the past four years. This is commendable given that the district level statistics has shown a decrease for both of these outcome areas across all the districts.

The implementing organisations were identified as making a significant contribution to these changes through their multiple school and community level interventions; and there is evidence that this has stimulated community participation. Over half of the sites noted that positive changes have come about as a result of community members requesting change or becoming agents of change themselves.

It can thus be concluded that the RFF education support, in partnership with the IPs, has stimulated community members' involvement in education-related development activities over the past four years.

Some challenges that still persist include: significant decrease in completion of female learners in primary schools and decrease in learners enrolled in secondary schools across districts; insufficiency of learning materials and non-stimulating learning environment; increased incidents of children being sent home due to school fees and school clothes; and poor classroom structures.

Recommendations

Although IPs cannot expand the scope of their work within the current funding period, the following education related challenges were identified which could be considered as potential areas for future intervention:

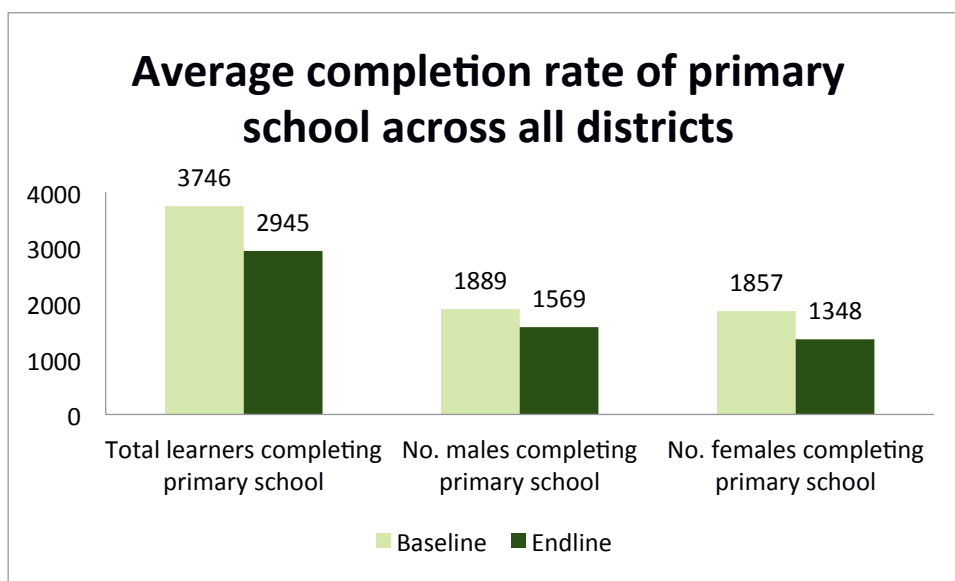
- Based on district level data there is a reduction in the number of learners enrolling in secondary school over the past four years despite grade 7 completion rates remaining high. The reasons for this finding are could be explored further with a view to creating targeted interventions for children who have completed primary school education.
- Children still experience exclusion from school due to school fees/levy/fund not being paid and interventions should be designed to address this issue.
- Schools can used more consciously as a hub of community development activity (i.e. meeting space, access to television for children, etc.). This will provide IPs/schools with better access to the community and can assist with addressing issues more broadly.
- Government, other NGOs and traditional leaders are all key players contributing to change in the education sector. IPs should consider closer coordination and collaboration with these stakeholders in order reduce duplication of services and maximise impact for children and communities in general.

3.1 Access to quality education

This section presents the data on access to quality education, which is comprised of geographic access to schooling, enrolment and completion of primary schooling, the sufficiency and competence of teaching staff, perceptions of the quality of education and school infrastructure.

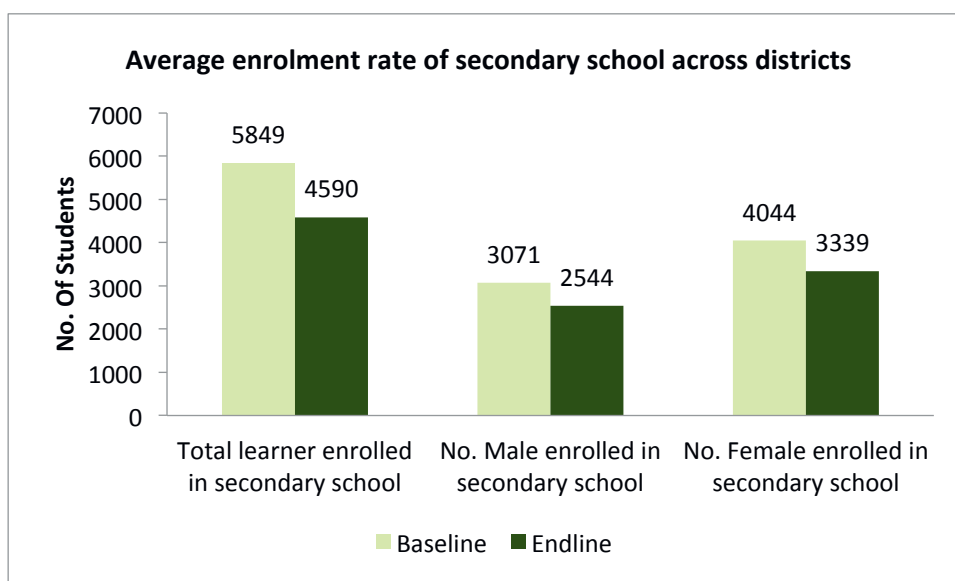
3.1.1 Enrolment and completion of schooling

Table 3: Completion statistics for primary school for the district



Since 2014 the district completion rate for primary school has decreased by 21%¹ with the female learner completion rate decreasing by almost a third (28%) compared to the male learners whose completion rate has decreased at 17%. It is unclear why there is a decrease since the qualitative data reveals that most respondents hold the perception that the pass and throughput rates were increasing.²

Table 4: Enrolment statistics for secondary school for the district



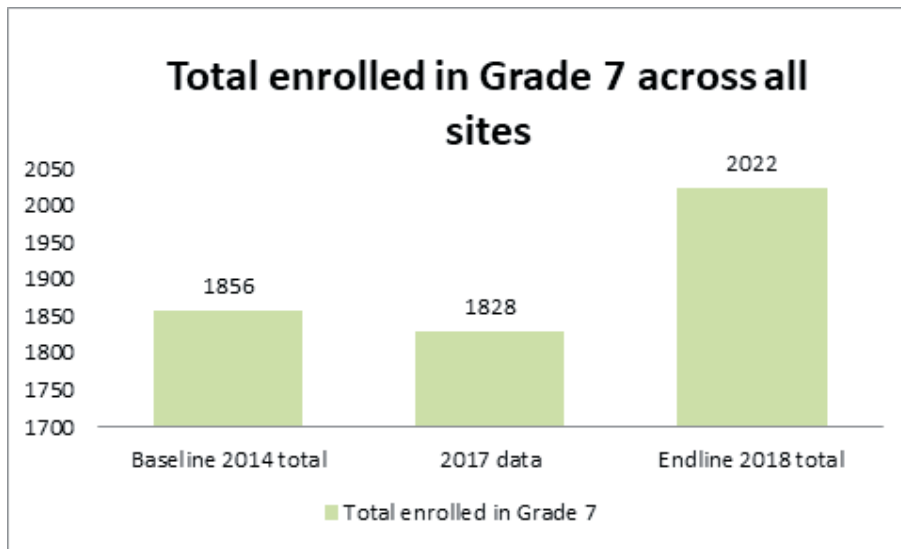
The trend over the last four years is that there has been a decrease (22%) in the number of learners enrolled in secondary school. A positive finding is that more females are being enrolled into secondary school which may be due to the increase in the number of donors which are focusing on education of the girl-child. However, the enrolment rate has decreased at the same pace (17%) for both male and female groups. This is an alarming

¹ District level data on completion rate for primary school was available for three out of the five districts (32 sites). The districts are Matobo District, Zimbabwe; Rumphi District, Malawi; Chadiza District, Zambia.

² Based on data for two districts: Matobo District, Zimbabwe; Rumphi District, Malawi.

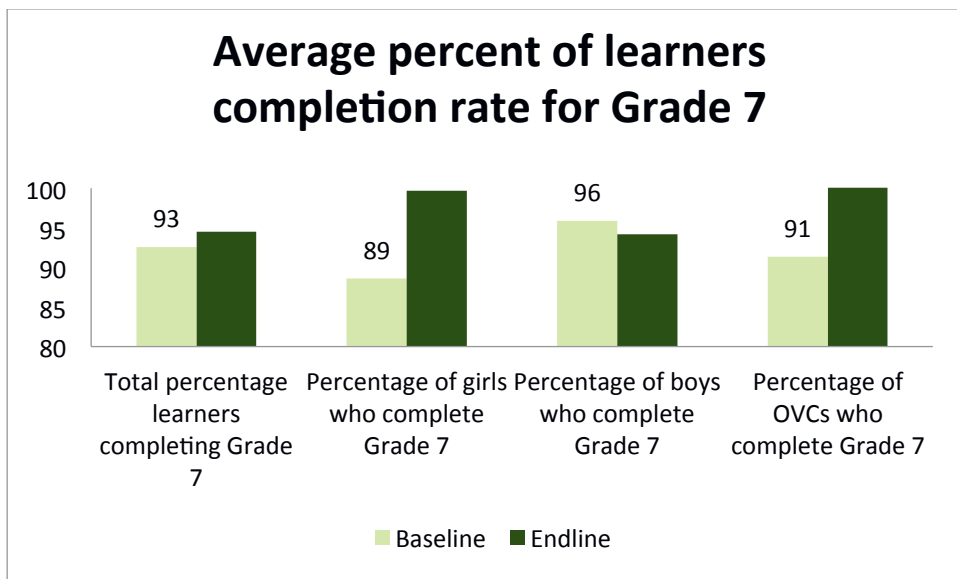
statistic which may be linked to a decrease in the total number of children of secondary school going age across the districts which the evaluator was unable to establish.

Table 5: Total number of learners enrolled in Grade 7 across all sites



While there has been a slight decrease in the number of learners enrolled in grade 7 across the 54 sites in 2017, this increased by almost 10% in 2018.

Table 6: Average Percentage of learners' completion rate of Grade 7 across all sites³

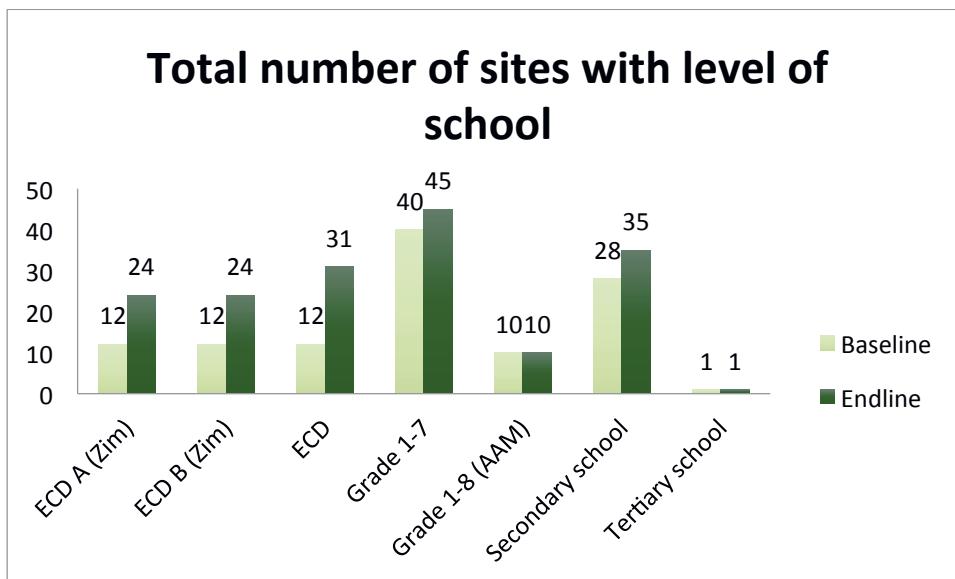


The percentage of learners completing grade 7 has remained high over the past four years with a slight improvement of 2% when comparing baseline and endline data. The percentage of girls and OVCs completion rate has increased by approximately 10% for both groups which is noteworthy and supports the strongly held belief that education is particularly important for vulnerable groups, (see section 2.2 below).

3.1.2 Geographical access to schooling

Table 7: Number of sites with level of school

³ The data from AAM sites was excluded because it compared grade 8 completion rates (baseline) with grade 7 completion rates (endline).

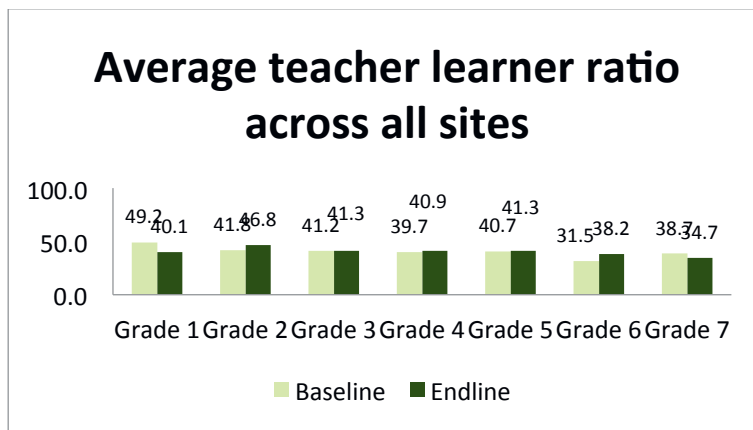


The availability of primary and secondary schooling within the targeted communities has improved due to the construction of schools in Zimbabwe and Zambia over the past four years. This is evidence of government’s commitment to improving access to education for learners in rural communities. There is also a significant increase in the number of sites which have now have access to ECD/CBCCs since 2018 and there is no doubt that the IPs have made a major contribution here (see section 2.3 below).

On average learners have to travel about 6km to secondary school, mostly on foot or by bicycle in Zambia (PAF sites). There are still no tertiary education institutions in all except one of the 54 sites.⁴

3.1.3 Teaching capacity

Table 8: Average teacher learner ratio across all sites



The average learner teacher ratio across all sites has remained the same at 1:40 when comparing baseline and end line data. The ratio is thus still high and has a negative effect on the quality of education.

The number of qualified teachers has increased across all 54 sites. This, as well as a significant (41%) reduction in absenteeism of teachers (from 1808 days in 2014 to 1066 days in 2018), are positive achievements that suggest improved capacity and commitment of teachers which is likely to contribute to better quality of education for learners. This finding is supported by the parents who reported a reduction in teacher absenteeism over the last four years (see below).

⁴ The report on tertiary schooling is positively skewed as data was provided for the zone rather than the community in the PAF sites.

3.1.4 Perception of quality of education

For the graphs below the following scale was used.

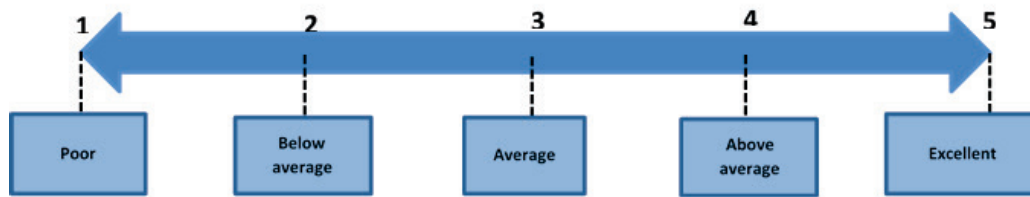
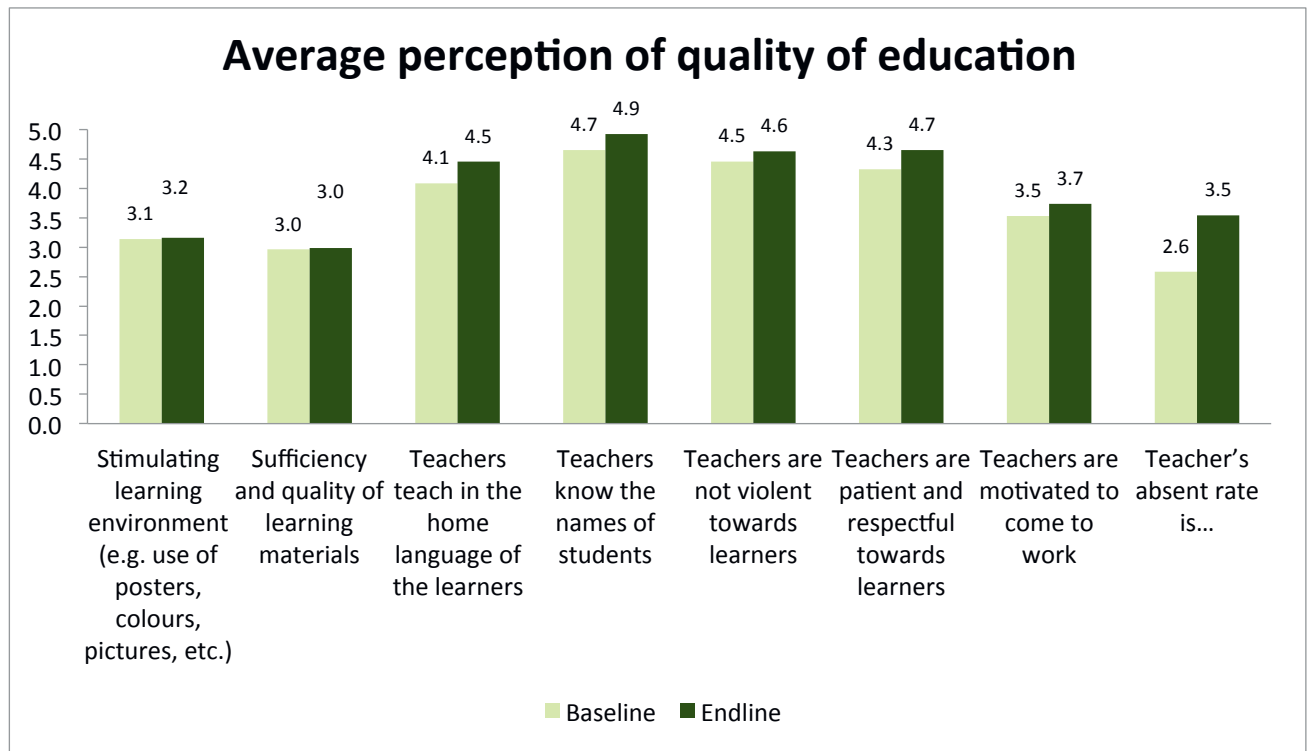


Table 9: Perception of quality of education on average across all sites

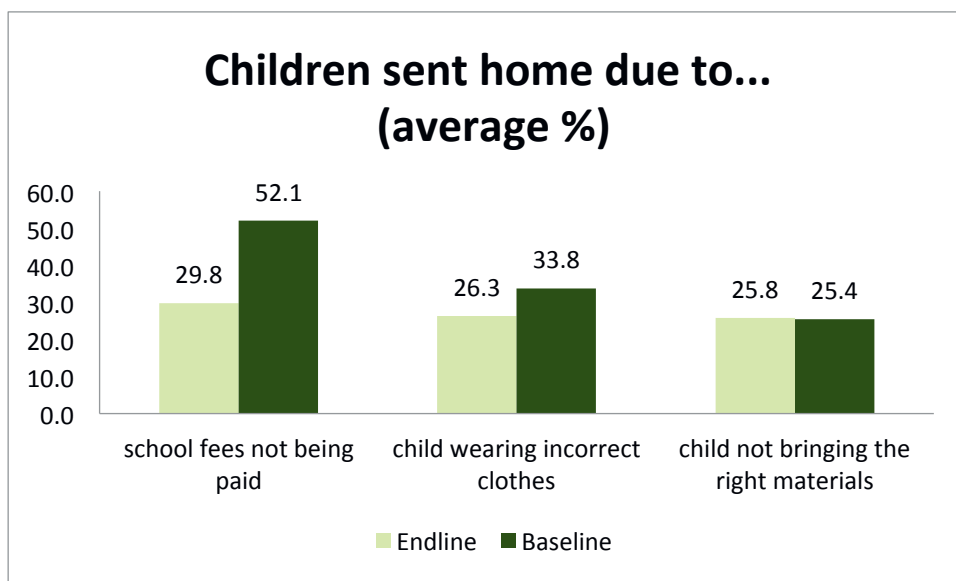


Two variables were measured around the perceptions of the quality of education: 1) the physical learning environment and 2) the quality of teaching staff.

The headmaster and the parents on the School Development Committee (SDC) were in separate interviews/focus groups when asked to rate their school in terms of quality of education. While scores were already high (above average and excellent) for the quality of teaching staff in 2014, they have improved for three measures of good quality teaching.

On the other hand sufficiency and quality of learning materials remains a challenge and this creates the perception of a learning environment that is not sufficiently stimulating.

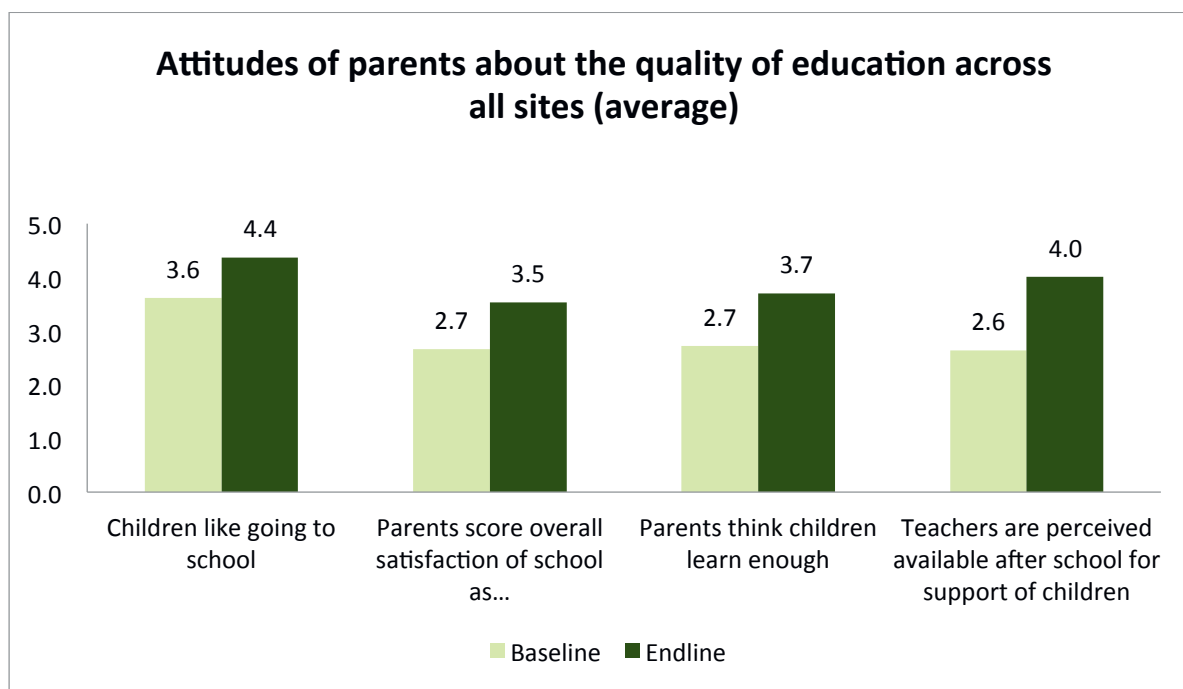
Table 10: Level of understanding and compassion shown by teachers and members of school development committee



The graph above shows that there has been a significant (22%) increase in the incidence of children being sent home due to school fees/levies/school funds not being paid across all sites. It is concerning that over half of the children are now being sent home for this reason despite the fact that free primary education has been rolled out in all three countries. Furthermore that has been an increase to over a third of children now being sent home for not wearing the correct clothes; and just over a quarter are sent home due to insufficient school materials. This is evidence that economic barriers to accessing schools persist across all sites.

On the other hand Headmasters and SDC members across sites report that they are struggling to get parents to pay the fees/levies/funds and this affects their ability to maintain and improve the quality of the school.

Table 11: Average attitudes of parents about the quality of education



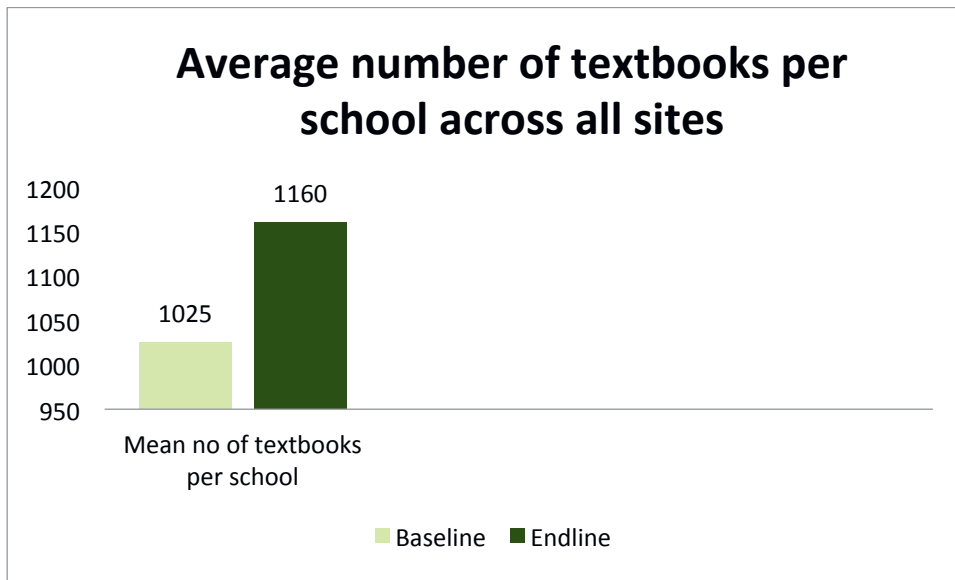
Parents across all sites perceive the quality of education to be better in 2018 than it was in 2014. This category’s average score increased from 2.9 (average) at baseline to 3.9 (above average) at end line.

Generally parents are satisfied with the overall quality of schooling and the learning that takes place at school and there is an increased perception that children like going to school and that teachers are available after school for support.

Overall parents continue to feel confident to approach the headmaster or teacher to discuss problems regarding their children and parents confirm that they have done so. There is only a slight overall decrease in the number of sites where parents report to have done so.

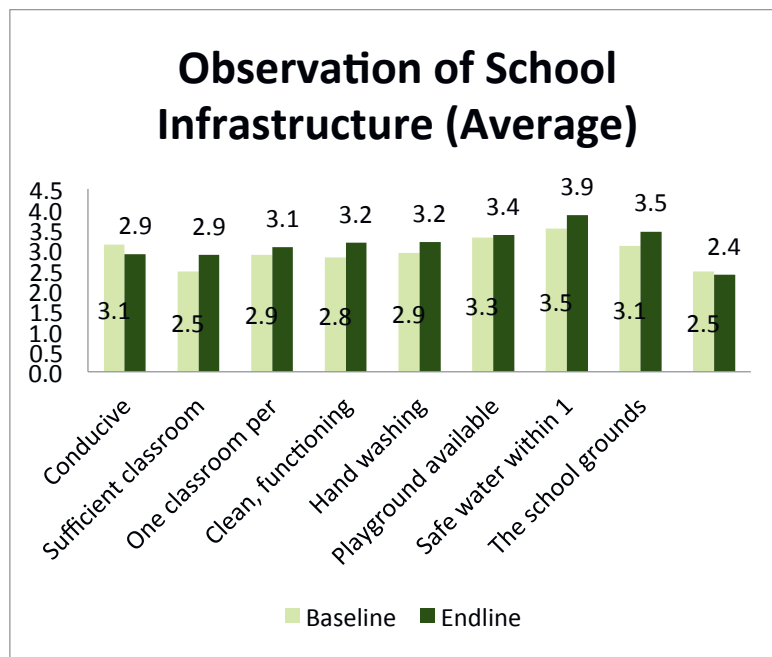
3.1.5 School infrastructure

Table 12: Average number of textbooks per school



The average number of textbooks has increased by just over 10% across all sites since 2014 despite parents and headmasters remaining concerned about the inadequacy of learning materials (see table 7 above). Whilst this is an encouraging finding a range of challenges still persist across sites including: insufficient number of text books per learner; absence of textbooks in one school; and the introduction of the new curriculum in Zimbabwe which requires new textbooks which have not yet been distributed.

Table 13: Observation of school infrastructure (average)

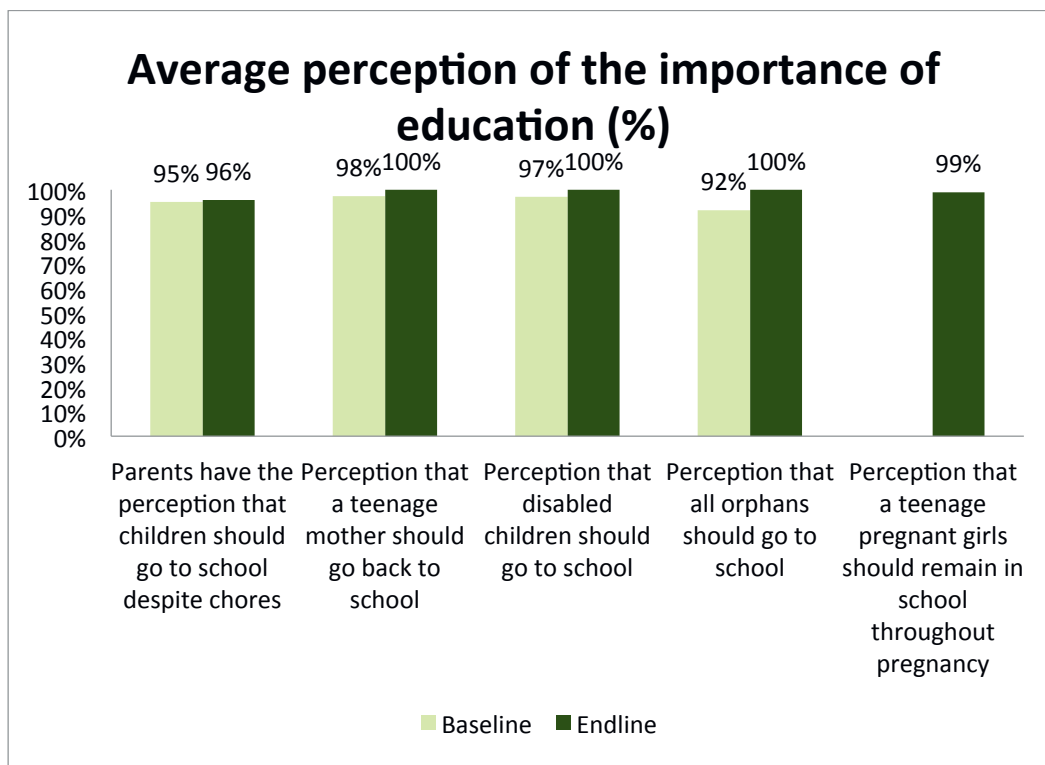


The table above shows that the evaluators observed improvements in infrastructure since 2014 on all except two measures. However, the average overall score for infrastructure improved only slightly from 2.9 to 3.1. The biggest improvements are: sufficiency of classroom equipment, availability of toilets, access to safe water, and improved safety of school grounds. However, the score only shifted by 0.4 points.

Those challenges which persist are the poor classroom structures and fewer vegetable gardens. Whilst gardens are often available, they are not producing vegetables because of recurrent droughts and the space is often invaded by animals.

3.2 Perception of the importance of education

Table 14: Perception of the importance of education⁵



There has been a slight increase in the perceptions amongst parents regarding the importance of education since 2014. All sites found in 2018 that education is important for vulnerable children including teenage mothers, teenage pregnant girls, children with disabilities and orphans. Although scores are high, the following was noted:

- Boys are sometimes prevented from attending school due to farming and agricultural activities. This may explain by fewer boys are enrolled in secondary school (see Table 4: Enrolment statistics for secondary school for the district)
- Many girls do not return to school after childbirth due to economic pressures and sometimes boys and girls are pressurised into early marriage which leads to school dropouts. This is particularly the case in Zambia where early marriages are a persistent problem.
- Children with physical disabilities are often unable to access to schools. This is particularly difficult in rural areas where the sandy terrain makes it difficult to navigate with a wheelchair. In addition, teachers lack the skills to accommodate their needs.

⁵ There is no baseline data available on this measure for 4 of the organisations, namely PAF, AAM, UNICA and ROCS

3.3 Narrative

Table 15: Most significant change

Education	AAM	PAF	ROCS	UNICA	CAMFED	Total No of sites	% of sites
Positive change has happened	10	9	9	12	12	52	93%
Change is due to school (teachers, principal, school committee)	8	6	0	12	0	26	46%
MSC due to implementing organisation	9	6	2	12	12	41	73%
MSC due to community request or community involvement	6	8	0	12	4	30	54%
Change is due to government	8	5	4	0	0	17	30%
Change is due to traditional leaders	7	9	0	0	0	16	29%
Due to other organisations	0	6	2	7	2	17	30%
Changes would have happened anyway	0	0	0	0	0	0	0
No change	0	0	0	0	0	0	0
Negative change	0	0	0	5	4	9	16%

Positive changes in education were identified in 52 out of 56 (93%) since the baseline. The most frequently mentioned changes include the following:

- Positive shifts in community perception of importance of education, especially ECD (all 5 of the IPs)
- Increased enrolment in ECD and primary school (3 of the IPs)
- Active community involvement in education-related activities such as building infrastructure (3 of the IPs)

The three key contributors to the positive changes include:

- The implementing partner (73% of sites)
- Community request or community involvement (54% of sites)
- The school (46% of sites)

The support provided by implementing partners included community sensitisation and dialogues on the value of education, building and supporting ECDs and CBCCs, building playgrounds, school feeding, provision of uniforms, business skills training. Community involvement has been instrumental in effecting positive change:

“Back in 2014 we did not know anything about indoor and outdoor play equipment or how to set up a tuckshop.... now we know how to set up a business and how to mobilise and maintain the equipment with being paid – we do it voluntarily and UNICA has contributed to this”, (FGD, Parents, UNICA)

Positive outcomes for children have already been identified across a number of sites as the following respondent reveals:

“There has been an improvement in literacy and reading - those children that come to primary school from the CBCC can already read; they also understand and grasp concepts easily as they are oriented to learning” (SSI, Head teacher, AAM)

Other important contributors to education related changes include: other organisations (30%); government (30%); and traditional leaders (29%). These are important partners which need to be considered for future collaboration.

Nine sites (UNICA and CAMFED sites) reported negative changes around education. These include the shortage of teachers and insufficient payment of school levies by parents.

4 Healthcare

Findings/key message⁶

Of the 56 sites sampled, 95% reported having had significant changes in healthcare since the baseline, particularly in relation to *access to child health services, hygiene and sanitation and nutrition awareness and practice*. As a result improved health outcomes, especially for children, are reported.

The data shows that healthcare has been made more accessible geographically over the past 4 years through more economical transport options being available to communities. The increase in Healthcare workers means that there is improved reach of health services in the communities targeted.

Implementing partners have contributed to improving access to health services as they have played a direct role in nutrition programmes, community sensitization and education on health. There are a few examples of where the IPs have supported the work of health care workers through either initiating them or providing a space, through ECD centers, for organizing themselves.

Thus it can be concluded that the IPs supported by RFF have played a direct role in the improved health outcomes evident in the targeted communities. They have also played an indirect role through the support that have provided to health care workers/women's groups, as these groups play a significant role in improving access to health in targeted communities. In this way, the RFF education support has contributed to the community organizing around health issues.

Some challenges that still persist are the availability of medication and the discrimination still experienced by pregnant teenagers, OVC and children with disabilities. AAM sites (Malawi) still seem to have challenges with accessing health care.

Recommendations

- While IPs cannot necessarily expand the scope of its work to cover broader community development issues (or health specifically), they could perhaps play a better role in partnering/supporting organisations/structures/individuals (civil society, government, community organisations) to contribute to the broader community development agenda.
- Committees /Healthcare workers and teachers play a significant role in providing access to health care and information respectively. They are critical access points in the community for effecting improved access to health, and so IPs should target them for programming.
- Targeted support should be provided to ensure that pregnant teenage girls, OVCs and children with disabilities receive access to adequate healthcare. Healthcare workers should play a role in identifying these vulnerable children, facilitating access to the necessary health care, and sensitising the community about their inclusion. Organisations such as RFF and the IPs can play a capacity building role for these healthcare workers.

4.1 Accessibility of Healthcare

The average distance to clinics and hospitals has reduced slightly since the baseline. In the baseline evaluation, there was more reliance on scotch carts and ambulance as a mode of transport in serious cases. There is increased access to transport options (minibuses, private car and motorbikes in addition to ambulances) in 2018, and a general reduction in the use of scotch carts for transport to healthcare facilities. Transport has also become more affordable all round. Although the cost of buses, motorbikes and minibuses appears to have

⁶ Data on district health outcomes were sparse and so cannot be reported in any meaningful way.

increased slightly, this is only because these transport options were not previously available in the community and therefore had a baseline value of \$ 0.

Table 16: Distance to health facilities

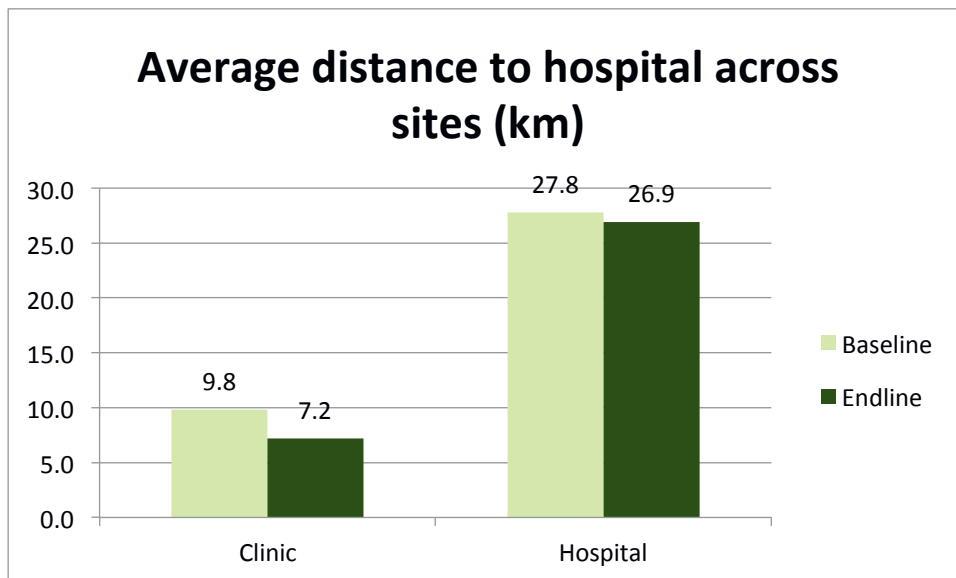


Table 17: Percentage of sites with access to transport to health facility in serious cases

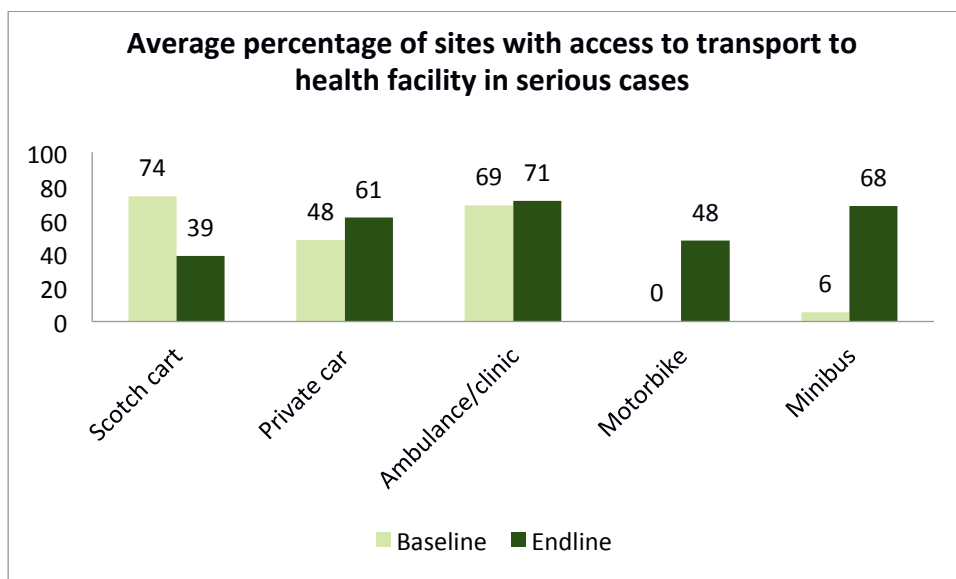
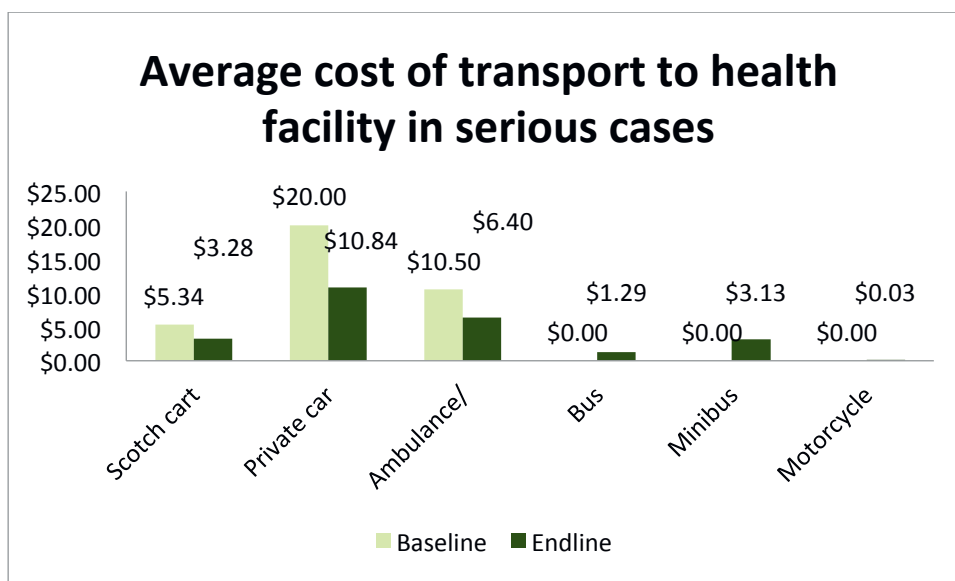
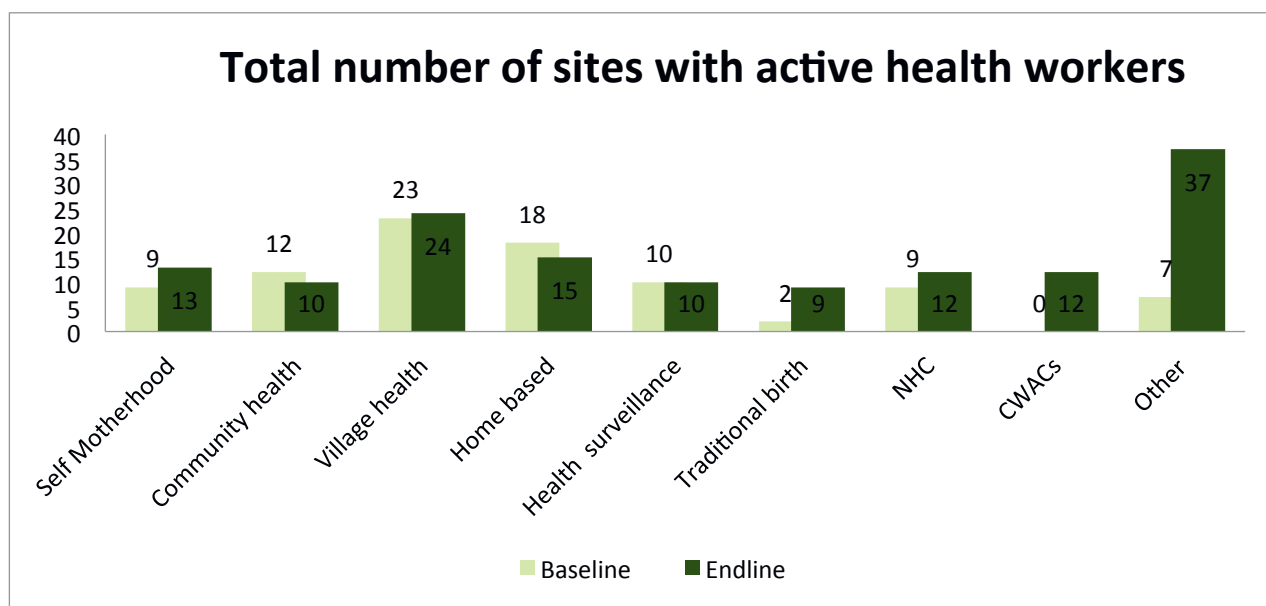


Table 18: Cost of transport to health facility in serious cases



4.2 Adequacy of healthcare

Table 19: No of sites with active health workers



In the baseline evaluation there were a total of 78 healthcare worker groups operating in communities, while there are now a total of 130 Healthcare workers groups/committees. Village Health Workers seem to be the most frequently mentioned healthcare workers in the communities targeted, with almost half of the sites mentioning these. AAM sites in Malawi have the fewest number of a Healthcare worker groups/committees (i.e. Health Surveillance Assistants). Transport in the AAM and CAMFED sites seem problematic and hinders their reach.

The availability of medication is a challenge for most communities, and has sometimes worsened compared to the baseline results.

4.3 Access to healthcare for OVCs and general treatment of OVCs

Perceptions of the treatment of children were generally high at both the baseline and endline. The biggest change in the treatment of vulnerable children has been for teenage mothers where just more than half of the

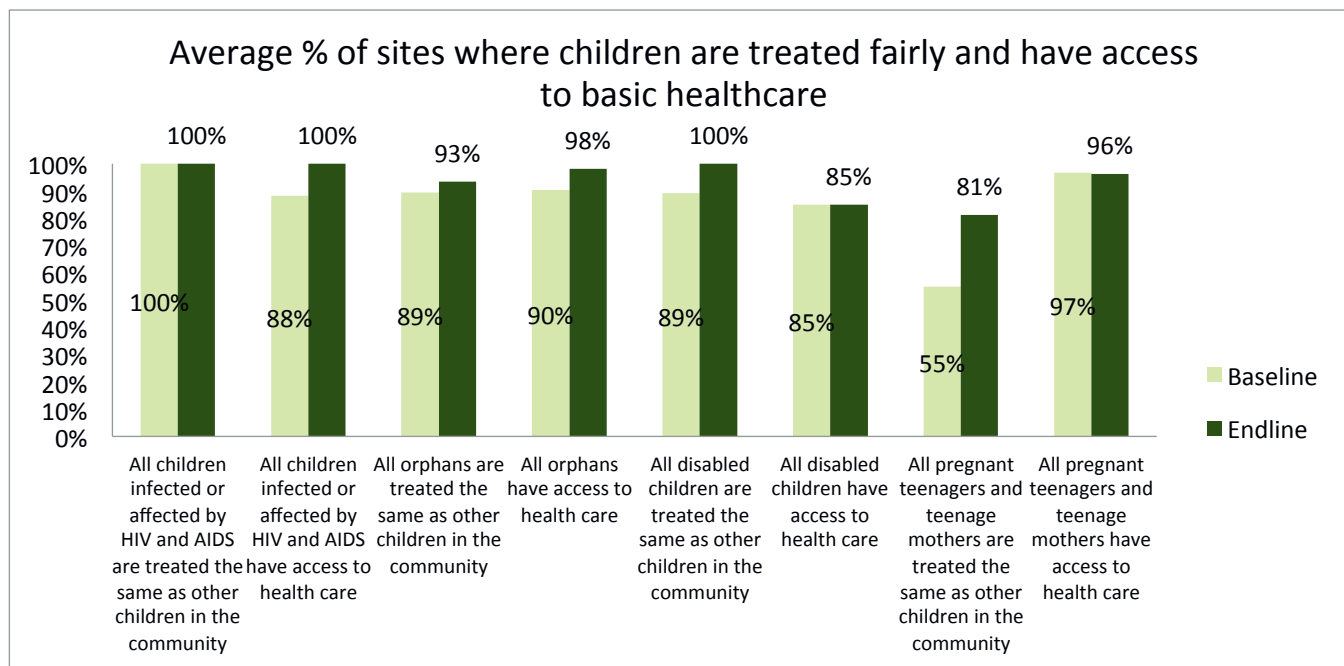
sites in the baseline indicated that pregnant teenagers or teenage mothers were treated the same as other children; this has increased to just over 80% of respondents.

Most communities within which IPs operate show positive shifts in monitoring the health of OVCs as there are now more committees responsible for this. This is perhaps indicative of an increasing concern for this vulnerable group.

While results are generally positive, the qualitative data suggests that the following groups are stigmatised or treated differently to other children:

- **Teenage mothers** are still stigmatised in the PAF communities
- **Orphans** are not treated the same as other children in ROCS communities
- Access to basic healthcare for **children with disabilities** is a challenge in UNICA communities.

Table 20: Treatment of vulnerable children



4.4 Narrative

Table 21: Most significant change in health services/outcomes across sites (n=56)

Nature of the change	AAM	CAMFED	ROCS	PAF	UNICA	Total No. of sites	% of sites
Positive change has happened	10	12	10	10	11	53	95%
MSC due to implementing organisation	10	1	8	1	4	24	45%
MSC due to school	7			4	9	20	38%
MSC due to community request or involvement or committees	6	5	8	10	2	31	58%
Due to government	10	5	12	7	0	34	64%
NGOs	0	0	7	0	0	7	13%
Traditional leaders	6		2	6	0	14	26%
Change would have happened anyway	0	12	0	0	0	20	38%
No change	0	0	0	7	0	0	0%
Negative change	10	0	0	0	10	18	32%

Of the 56 sites sampled, 53 (95%) reported having a significant change in access to healthcare since the baseline. The changes were mostly reported in relation to:

- Child health services and outcomes (in 4 of the IPs)
- Hygiene and sanitation (3 of the IPs)
- Nutrition awareness and practice (3 of the IPs)

The three key contributors to the positive changes reported have been identified as:

- Government (64% of those that report change),
- The community, particularly through community healthcare workers (58%), and
- The implementing organization (45%).

Implementing partners have played a particular role in the implementation of nutrition programmes (though school feeding scheme and nutrition supplements), community sensitization and education on nutrition, hygiene and sanitation and family planning, supporting the work of health care workers (through the ECD center), and establishment of women's groups to address health issues.

“This ECD centre built by UNICA is like a support centre for the village health workers because the clinic has a routine programme where we come here and monitor the health of young children....in 2014 we only did it at the school, but now we also do it at the ECD”, (FGD, Women’s Committee, UNICA)

20 sites (UNICA and CAMFED sites) indicate that there have been negative changes around healthcare, particularly in relation to an increase in teenage pregnancy and decrease in the availability of medication.

5 Transport

Findings/key message

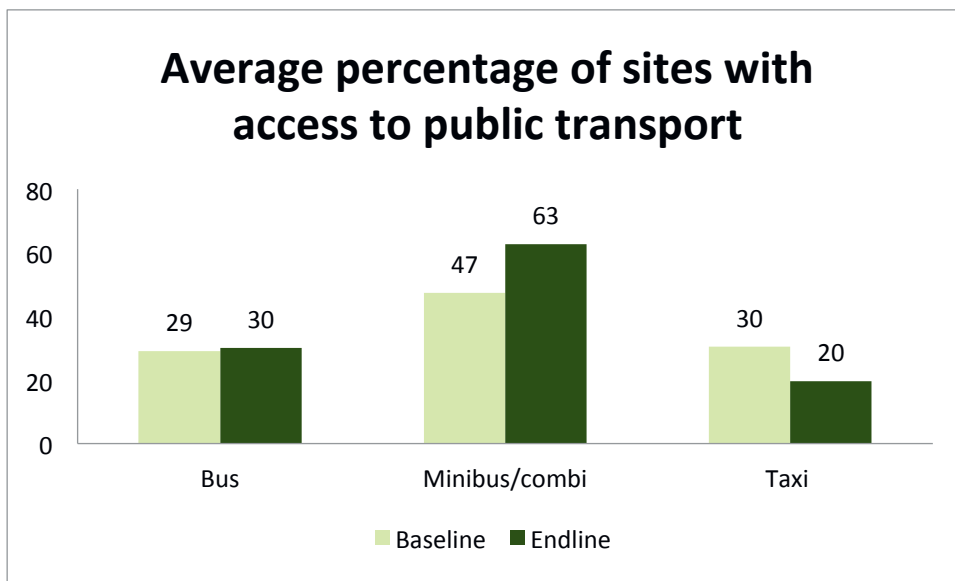
Evidence from baseline and end line data show little change in overall access to transport across the sites although new kind of transport modes like motorbikes have appeared. Although there have been some improvement of roads most of them are still in poor condition. However, of the 56 sites, 77% reported positive changes in terms of access to transport, while 16% reported no changes and 5% sites reported negative changes. There is evidence that Roger Federer Foundation with implementing partners have indirectly contributed to the community being mobilised to request better access to public transport in few sites in Zimbabwe and directly in two ROCS sites. However, in most sites this have not yet been the case.

Recommendations

- To have better impact on community development in terms of access to transport it is recommended that Roger Federer Foundation and implementing partners include collaboration with the district council in the design of a new phase of the programme to ensure that the communities have an avenue to advocate for improvements.

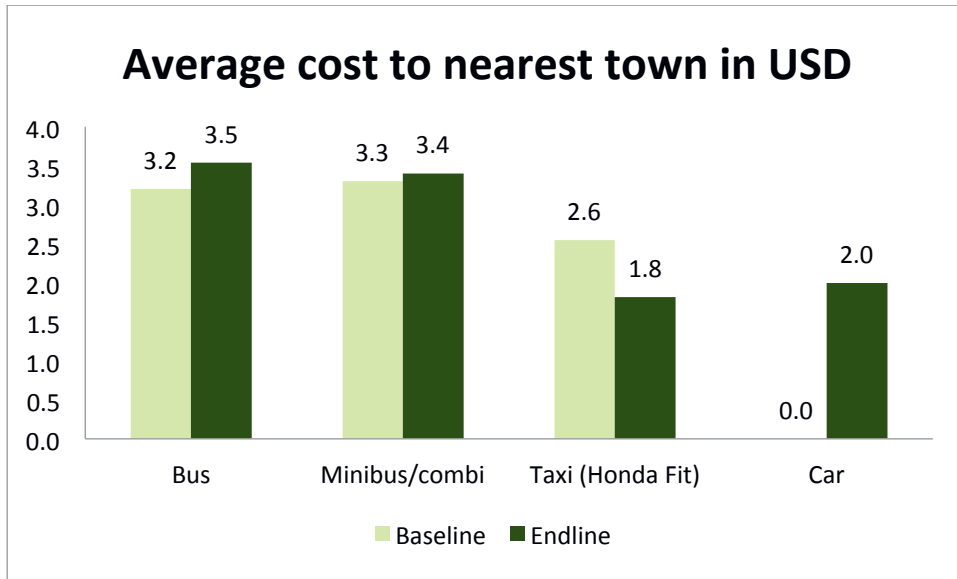
5.1 Access to transport

Table 22: Percentage of sites with access to public transport



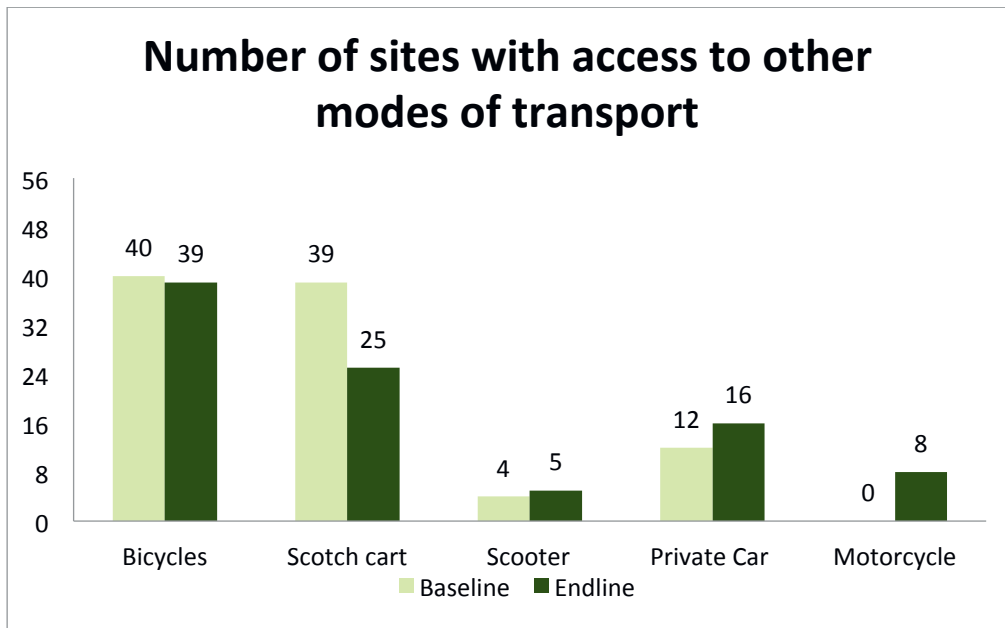
During the course of the last four years there has been an increase in access to minibuses/combis in the 56 sites with 63% of the sites now having this mode of transport operating. There has only been a slight increase of 1% of sites with access to buses, leaving below a third of the sites with access to bus services. Access to taxis have decreased with 10% over the 56 sites despite CAMFED and ROCS sites seeing an increase in operation of Honda fits in those sites. However, almost all the UNICA sites used to have access to taxi while in 2018 they have disappeared entirely. The poor conditions of roads is preventing further access to public transport although some sites in Zimbabwe had better roads since 2014.

Table 23: Average cost one way to nearest town in USD



The average costs to nearest town in USD has gone up slightly for the use of buses and minibuses while it has decreased for the use of taxi.

Table 24: Number of sites with access to other mode of transport



Bicycles and scotch carts are still the most common mode of transport although less sites report accessing these in 2018 compared to 2014. There has been a slight increase in the access to private cars across the 56 sites. Of the 16 sites reporting access to private car, 12 of them were in CAMFED sites, where it was suggested that this increase was a result of the improved economy in certain sites due to increase in gold panning. Eight sites in AAM and ROCS sites also reported access to motorbikes while these were not accessed in 2014.

5.2 Narrative

Table 25: Most significant change

Transport	AAM	PAF	ROCS	UNICA	CAMFED	Total	% of sites
Positive change has happened	9	6	11	5	12	43	77%
MSC due to implementing organisation	0	0	2	0	0	2	4%
MSC due to community request	0	0	0	2	4	6	11%
Change is due to government	5	0	3	0	0	8	14%
Competition	0	0		0	1	1	2%
Changes would have happened anyway	0	0	0	5	0	5	9%
Change is due to increased levels of disposable income	6	0	7	0	4	17	30%
No change	1	3	1	4	0	9	16%
Negative change	0	0	0	3	0	3	5%

Of the 56 sites, 77% reported positive changes in terms of access to transport, while 16% reported no changes and 5% sites reported negative changes. The improved positive changes are attributed to the increased level of disposable income (30%) infrastructure development by government (14%), the community requesting better access to public transport (6 sites in Zimbabwe) while some sites (9%) reported that changes would have happened anyway. In two ROCS sites the changes were attributed to the implementing partner.

6 Communication

Findings/key message

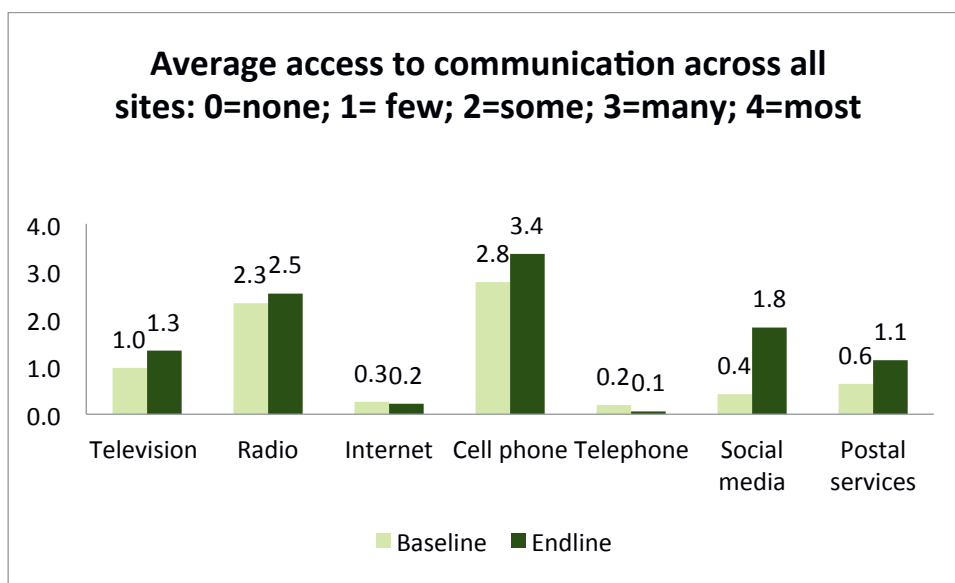
There is evidence that there have been improved access to communication during the last four years across the 56 sites. However, these changes are attributed to the cell phone and network service providers and these changes would have happened anyway without the interventions of the Roger Federer Foundation and the implementing partners, with the exception of two sites in Zimbabwe. Hence the hypothesis that supporting school and communities with an education package will lead to community development around communication has not been supported.

Recommendations

- As many of the sites reported that the cell phone signal was bad in their areas, it is recommended that the communities are encouraged to mobilise for the request of network boosters. To ensure that the communities have an avenue to advocate for improvements, it is recommended that Roger Federer Foundation and implementing partners include collaboration with the district council in the design of a new phase of the programme.

6.1 Access to communication

Table 26: Access to communication on average across all sites



In the past four years there has been an increase in access to all modes of access except telephone and internet. Particularly, the use of cell phones and WhatsApp has increased. Various new network providers have appeared, bringing the prices for WhatsApp use down. Many of the sites however reported that the cell phone signal was bad in their areas. Access to television and radio has also increased. Even the use of postal service has increased but this is due to the increase at UNICA sites as the use of postal services at other sites has decreased. A frequent mentioned challenge for access to communication has been lack of good cell phone signal and radio reception.

6.2 Narrative

Table 27: Most significant change

Communication	AAM	PAF	ROCS	UNIC A	CAMFE D	Total	% of sites
Positive change has happened	10	10	12	11	12	55	98%
MSC due to implementing organisation	0	0	0	0	1	1	25
Due to school	0	1	0	5	0	6	11%
MSC due to community request	0	0	0	0	1	1	2%
Changes would have happened anyway/network providers	8	6	5	11	11	41	73%
Change is due to government	5	1	4	0	0	10	18%
No change	0	0	0	1	0	1	2%
Negative change	0	0	0	0	0	0	0

All sites (98%), except for one UNICA site, said that there have been positive changes during the last four years in terms of access to communication. These changes were mostly (73%) attributed to increase in network providers, but some sites also attributed them to government (18%). At 6 sites (UNICA and PAF) it was attributed to the school as they have ICT lessons with access to internet while two CAMFED sites attributed the positive changes to the implementing organisation or special request from the community. In one community, they have requested a network booster, while in another community the improved communication in the school and increased income generation was attributed to the CAMFED intervention. However, in most sites the increased access to cell phones and WhatsApp was attributed to general development which would have happened anyway or as a result of more money in the community.

7 *Earning a Living and Business Development*

This section of the report provides an overview of the data obtained regarding business development and income generation. It commences with a summary of key findings, followed by a more detailed explanation of endline findings regarding sources of income, types of businesses and community level support structures for income generation activities (IGAs).

Findings/key message

Of the 56 sites sampled, 73% report positive changes in business development and income generation. These changes include an increase in the types of businesses operating in the sites included in the end line study, as well as an increased level of involvement by women in IGAs, which has contributed to women's empowerment more broadly.

The data shows that there has been a decline in agricultural-related activities since baseline. The main factor contributing towards this across all sites is climate change and erratic or limited rainfall. Other challenges include the high cost of agricultural inputs coupled with low profits on agricultural produce. Mitigating these challenges is a reported increase in access to social grants and a shift from agriculture to other IGAs such as the sale of goods and services. The latter outcome demonstrates the resilience and resourcefulness of the communities included in this study, while the former speaks to an increase in government social protection initiatives – although these appear to target mainly the elderly at present. It is therefore not surprising that an equal number of respondents noted the implementing organisations and government as the two key contributors to the reported changes in this specific area; that is 34% for both categories of contributor.

Implementing organisations have contributed directly to improved access to livelihoods through their provision of business skills development and training as part of their educational packages. In addition, some of the organisations; for example, AAM, have initiated savings and loans schemes as well as IGAs such as goat rearing, using the CBCC as a hub for these activities. In this way, community members have been able to access resources for income generation projects. The implementing organisations have also contributed towards the reported changes in an indirect manner through their facilitation of the formation of community groups or structures, such as the Mother's Support Group in Zimbabwe or the Women's Forum in Malawi. These groups have often initiated IGA schemes and projects in their communities and, in doing so, have motivated other community members' participation in such activities. It may also be argued that these structures have enabled collaboration and mutual support, which has further strengthened community members' willingness and motivation to engage in IGAs.

Thus it can be concluded that the implementing organisations supported by RFF have contributed directly towards improved livelihood and income generation outcomes in the targeted communities. They have also played an indirect role in facilitating these outcomes through the support and motivation provided by their community groups. In this way, RFF's education support has contributed to targeted communities' organisation and initiation of income generation projects.

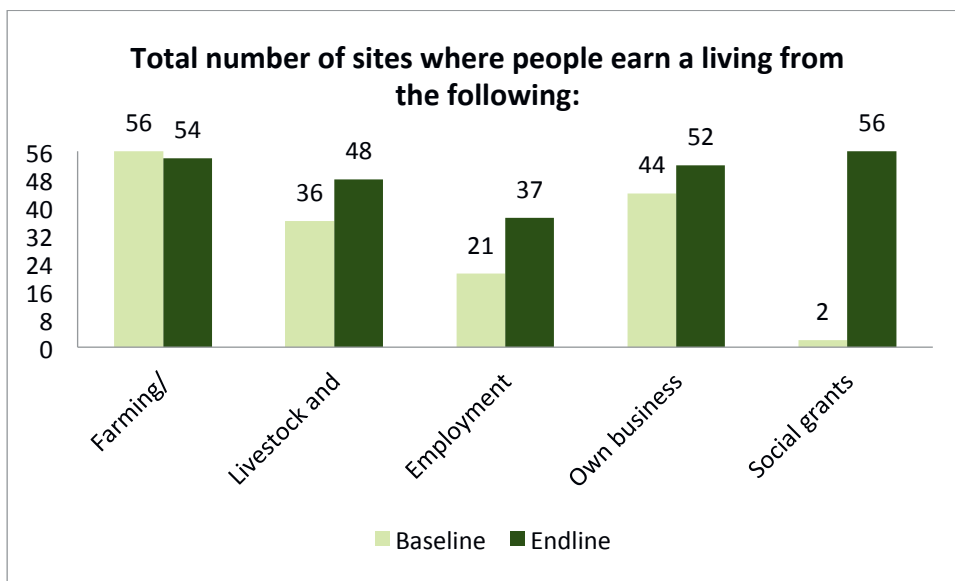
Challenges that still persist include the availability of – and access to – start-up capital and low profit levels on agricultural produce and items produced for sale. UNICA and CAMFED sites (Zimbabwe) also face the challenge of the poor economic climate in Zimbabwe and the country's current cash crisis, which impacts negatively on community members' purchasing power and hence on local businesses.

Recommendations

- The initiation of IGAs and savings and loans schemes should continue as a key element of the education package.
- The community groups and fora established by the implementing organisations should be supported in their support of community income generation initiatives. This could be done through the facilitation of network formation between these groups and other community structures and assets where these exist, such as local business councils or entrepreneurs.

7.1 Source of income

Table 28: Number of sites where people earn a living in the following ways



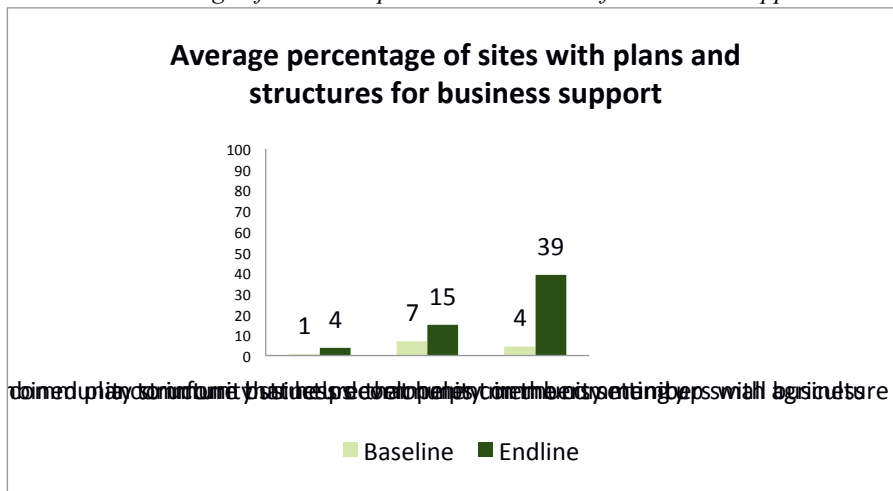
Overall, there has been a slight reduction in farming / agricultural activities. This was noted by respondents in the sites targeted by CPS/UNICA in Zimbabwe and by ROCS and PAF in Zambia, with the main reason being climate change and ongoing droughts in these areas. However, endline data indicates an increase in activity across the remaining categories of income generation; namely, livestock rearing, employment (part-, full-time and casual), business ownership and the receipt of social grants.

The greatest shift is noted in levels of access to social grants. In Zimbabwe, grants take the form of in-kind benefits of maize meal or grain allocations to elderly community members and people with disabilities (PWD). Similar observations were made by respondents in Rumphu district, Malawi; that is, that social grants targeted the elderly.

7.2 Types of businesses

The number of different types of businesses reported has generally increased across all of the sampled endline sites. Data collected in Malawi and Zimbabwe indicates a shift from subsistence activities towards the selling of crafts, second-hand clothing and groceries; while construction and brick-making were noted by respondents in both the Chadiza and Lundazi districts in the Eastern Province of Zambia. The brewing and selling of alcohol was noted across all 56 sites, with an increase in frequency of reporting of such business activities from baseline to endline.

Table 29: Percentage of sites with plans and structures for business support



The number of sites reporting plans to inform and facilitate business development remains low at endline. Similarly, while an increase in the number of sites reporting business development support structures was noted at endline, this too remains low at only 15% of the sampled sites. However, this does not appear to have deterred communities from setting up new business nor from diversifying into new business areas (as noted in section 7.3).

The most frequently reported change over the course of the past four years is the establishment of community structures that assist communities with agriculture-related issues. In Rumphi district in Malawi, tobacco farming has increased substantially and this possibly explains why the number of agriculture support structures reported by Rumphi communities has risen by 100%.

The reported decline in the level of reporting of income generation via agriculture may account for an increase in agriculture support structures across the remaining sites; that is, the establishment of such structures may be in response to a need to ensure that agriculture remains a viable form of livelihood. This is particularly relevant in Zimbabwe, where high levels of household poverty and food insecurity were reported. Drought has also reportedly impacted on agricultural activities in Zimbabwe and Zambia.

7.3 Narrative

Table 30: Most significant change

Income generation and business development	AAM (10 sites)	PAF (10 sites)	ROCS (12 sites)	UNICA (12 sites)	CAMFED (12 sites)	Total	%
Positive change has happened	10	2	10	8	11	41	73%
Change is due to implementing organisation	5	1	0	7	6	19	34%
Change is due to community request / involvement	0	0	5	3	2	10	18%
Change is due to government	3	2	3	8	3	19	34%
Other NGOs	1	2	0	Noted but not specified	3	6	11%
Change is due to school / CBCC or ECD centre / teachers	1	0	0	6	0	7	13%
Change is due to traditional leaders	1	0	0	0	0	1	2%
Development would have happened anyway	1		0	0	0	1	2%
Other	9 (tobacco companies)		0	0	0	9	27%
	6 (lending institutions)		0	0	0	6	
No change	0	0	2	4	1	7	13%
Negative change	0	9	0	0	0	9	16%

Of the 56 sites sampled, 41 (73%) reported that positive changes have taken place in terms of business development and income generation. The most frequently reported changes included:

- An increase in the number of businesses as well as diversification in the types of business being operated
- An increased level of community involvement in IGAs, often motivated by the successes achieved by other business owners and operators in the community
- An increased level of involvement by women in IGAs, which has led to an increase in women's economic empowerment and their empowerment more broadly, as reflected in their increased participation in community structures and committees

The three key contributors to the abovementioned changes were identified as:

- The implementing organisations (34% of those that reported change)
- The government (also 34% of those that reported change), and
- The establishment of other support structures such as lending institutions, plus increased investment in the area (for example, by the tobacco companies in Rumphi district in Malawi)

Implementing partners' contribution to the abovementioned changes includes the provision of business skills development and training as part of their educational packages (UNICA and CAMFED), which would have provided community members with a good level of knowledge and possible confidence to initiate IGAs. The organisations' implementation of savings and loans schemes (AAM) and income generation projects, such as goat rearing or 'pass the goat' (AAM) would have contributed directly to community members' ability to access resources for micro- and small-business development plus livelihood endeavours. The implementing partners' enabling of community based structures, such as the Mothers Support Group (MSG), also played a role in effecting the reported changes, mainly as a result of these groups inspiring and supporting other community members with their business- and IGA-related activities.

Communities targeted by ROCS and PAF in Zambia reported less positive outcomes. For example, nine of the 10 sites under PAF noted that climate change and drought had reduced the level of agricultural activity. This is of concern, given that agriculture is the main source of livelihood in that area. Similar observations were noted by the communities in Lundazi district, targeted by ROCS. Here, a decline in agricultural production and prices for agricultural produce was reported. However, respondents noted that these challenges had led to IGA diversification and an increase in other forms of business, such as cross-border trade and the selling of goods at local markets.

8 Community Participation

This section of the report looks at the findings regarding community participation. It includes an overview of community committees in operation and how they operate, as well as women's representation on those committees.

Findings/key message

Of the 56 sites sampled, 84% report positive changes in community cohesion and participation and improvements in the level of community participation from baseline to date. These changes include an increase in the number of operational committees as well as improvements in committee efficiency and management. An increased level of community participation in events as well as improved communication regarding events and event organisation, were also noted during primary data collection at endline. Lastly, better communication amongst community members and improved levels of community consultation were reported by endline study participants.

The two key contributors to these reported changes are traditional leaders and implementing organisations. While the role of traditional leaders was more frequently noted, it does appear that respondents perceive RFF-supported organisations as playing a role in the achievement of community cohesion outcomes. For example, it was reported that the organisations have contributed directly to improved community participation through their provision of physical spaces for community meetings; that is, through their construction of CBCC / ECD centres. However, possibly more importantly, the organisations have contributed towards higher levels of community collaboration, cooperation and mutual support through their involvement in school-related activities and projects as well as implementing organisation-led IGAs. This, it is argued, has motivated community members to collaborate in other areas of their lives.

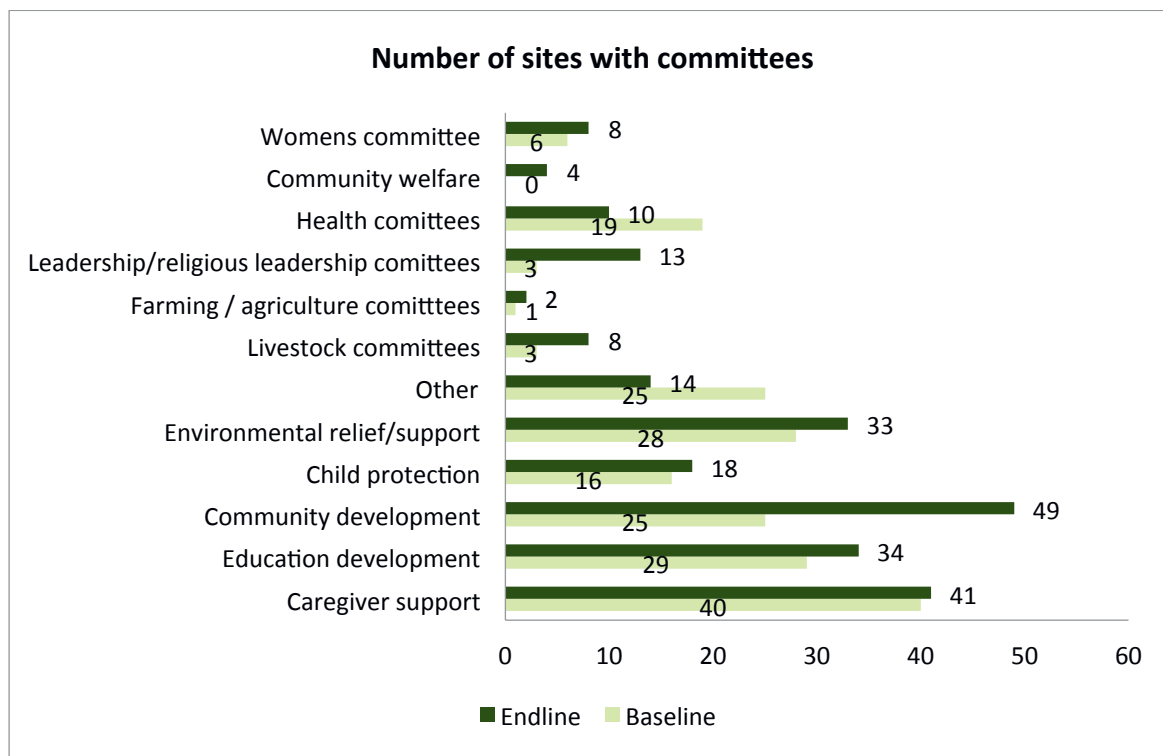
Thus it can be concluded that the implementing organisations supported by RFF have contributed towards community cohesion and participation. This they have achieved directly through the provision of spaces for community engagement and indirectly through their facilitation of community collaboration.

Recommendations

- Hosting of school and CBCC / ECD centre events are a key means of bringing community members together and encouraging community cohesion. Therefore, support for such events and celebrations should be included in education packages going forward.

8.1 Community committees

Table 31: Number of sites with committees⁷

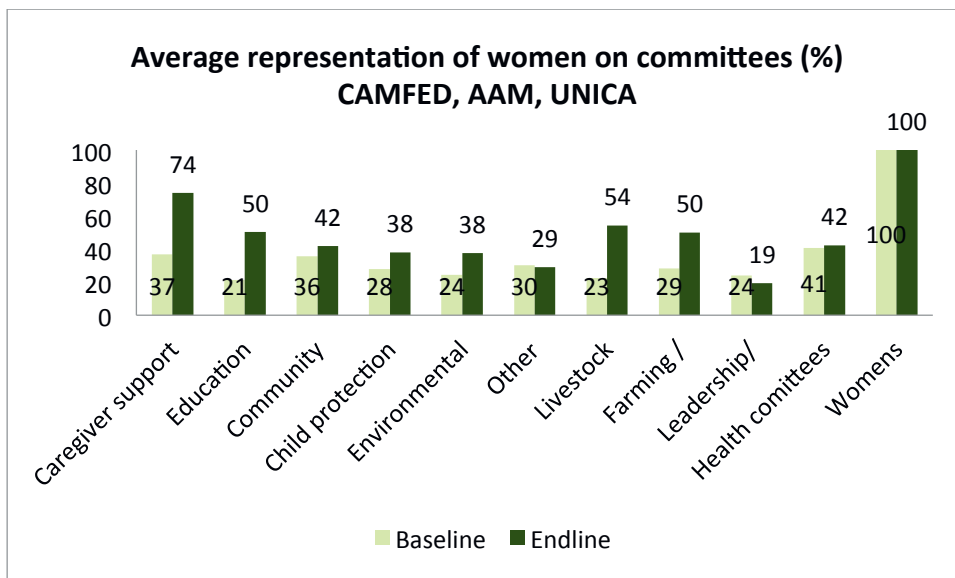


Endline study findings indicate that there has been an increase in the number of committees in operation across sites, with the exception of the communities targeted by PAF, where the overall number of committees declined from 32 at baseline to 12 in 2018.

In addition, it appears as though a number of new committee structures have been set in place since 2014. In Malawi, these new committees appear to cater predominantly for vulnerable community members, such as those living with HIV / AIDS or in need of home-based care.

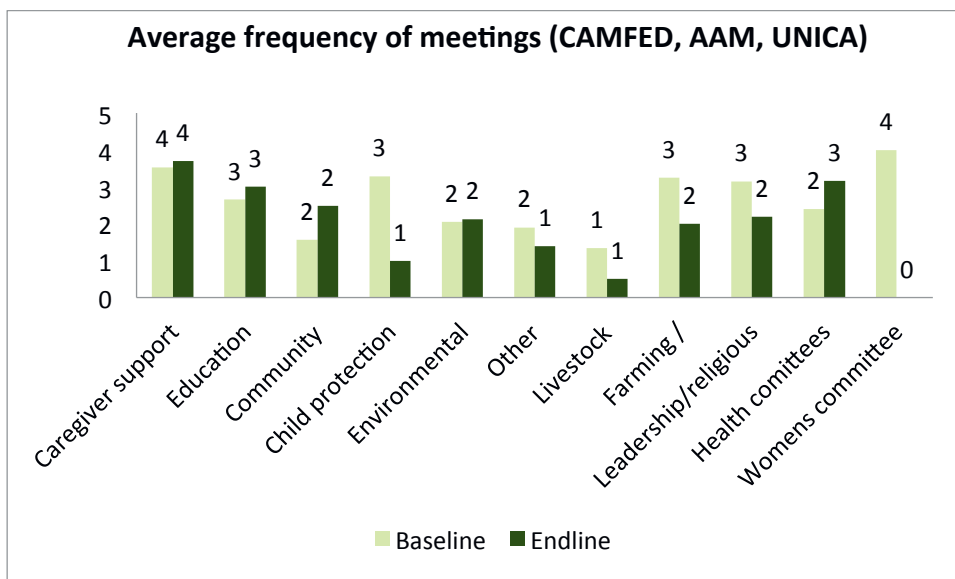
⁷ This excludes ROCS sites as the baseline data is unavailable

Table 32: Percentage representation of women on committees



As summarized in Table 33 above, women’s representation on committees has generally increased across the communities targeted by CAMFED, UNICA and AAM over the course of the past four years. This finding corresponds with the findings regarding an increase in women’s empowerment and community participation, noted in section 7 above.

Table 33: Frequency of meetings

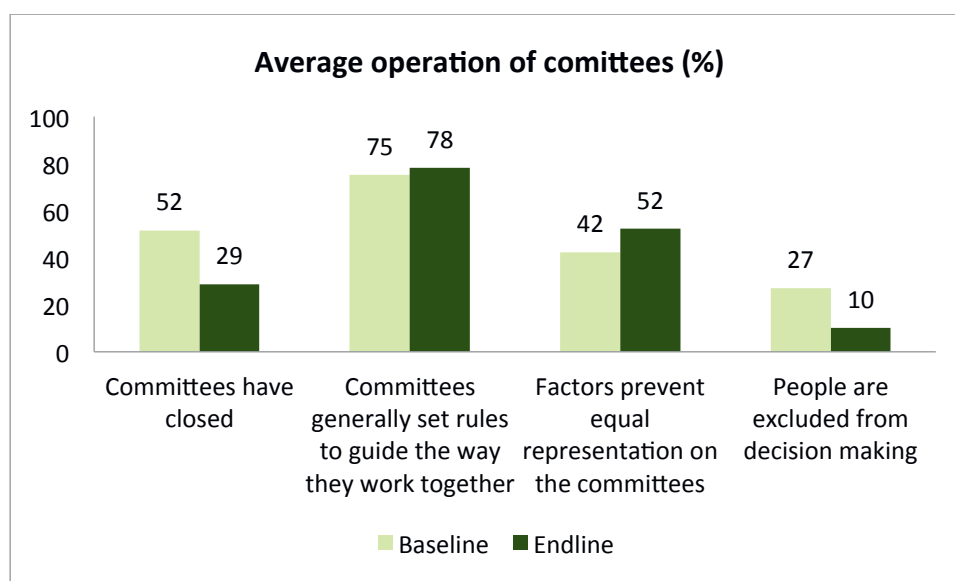


Input obtained at endline indicates that committees are maintaining a good level of activity; for example, the majority of committees reported on at endline in AAM-targeted communities meet at least monthly, while the same finding applies to just over half of the committees reported on across UNICA and CAMFED sites.

An increased level of activity is also noted amongst the majority of committees that were in operation at baseline and endline in AAM (9/12) and CAMFED (9/13) sites. However, this was reported for only four of the nine committees that have continued to operate from 2014 to date in UNICA-targeted sites.

No data was available for the communities targeted by PAF and ROCS.

Table 34: Operation of committees



Endline findings indicate that fewer committees are closing and that there has been a reduction in the exclusion of certain groups from decision-making processes since baseline. There has also been a slight increase in the number of committees that are setting clear rules and guidelines for their operation.

Of interest is that there has been an increase in the reporting of factors preventing equal representation on committees. This was noted specifically in AAM-, CAMFED- and PAF-targeted sites and appears to be largely based on gender role allocation and gender stereotyping. For example, respondents located at PAF sites noted that women are seen as carers whereas men are viewed as the ‘decision-makers’. Similarly, those participating in the endline study at CAMFED sites noted that committees requiring the enforcement of rules were considered to be ill-suited to women committee members.

8.2 Narrative

Table 35: Most significant change

Community participation	AAM (10 sites)	PAF (10 sites)	ROCS (12 sites)	UNIC A (12 sites)	CAMFED (12 sites)	Total	%
Positive change has happened	10	10	12	11	4	47	84%
Change is due to implementing organisation	6	2	1	6	2	17	30%
Change is due to community request / involvement	0	1	0	9	0	10	18%
Change is due to government	1	2	5	0	0	8	14%
NGOs / other organisations	0	6	0	0	0	6	11%
Change is due to school / CBCC or ECD centre / teachers	6	0	0	1	0	7	13%
Change is due to traditional leaders	6	9	6	0	2	23	41%
Development would have happened anyway	1	0	0	2	0	3	5%
Other	1 (tobacco farming)	0	0	0	0	1	2%
No change	0	0	0	1	5	6	11%
Negative change	0	0	0	2	1	3	5%

Of the 56 sites sampled, 47 (84%) reported that positive changes have taken place in terms of community participation. The most frequently reported changes include the following:

- An increase in the number of operational committees – and an improvement in the efficiency of committee operations and management;
- An increased level of community participation in events as well as improved communication regarding events and event organisation; and
- An improvement in communication amongst community members and in community consultation processes.⁸

Two key contributors to the abovementioned changes were identified. These are:

- The implementing organisations (30% of those that reported change)
- Chiefs / traditional leaders (41% of those that reported change)

Implementing organisations have contributed to changes in community participation through two means:

- Firstly, through raising awareness regarding the benefits of collaboration and cooperation amongst community members. This was noted specifically in relation to collaboration around school-related projects and initiatives, such as parents working together on infrastructure improvements or to implement school feeding programmes. Attendance at school events, such as the CBCC / ECD graduation ceremony was also noted by respondents at AAM- and UNICA-targeted sites as a means of building community cohesion. This is located around a shared sense of pride and celebration of the community's children's achievements. In addition, the implementing organisations' roll-out of income generation projects was also noted as a means of encouraging community cooperation and mutual support.
- Secondly, the centres constructed by the implementing organisations have provided communities with a physical space that can be used for meetings, discussions and community-level engagement. This was noted specifically by respondents in AAM, UNICA and PAF sites.

What also emerged from endline data collection is that traditional leaders are another key contributor to community cohesion, cooperation and participation in community events. Their ability to spread information about events and to mobilise community members to attend were specifically noted. In addition, traditional leaders are often responsible for providing the resources for community events.

⁸ An increased level in transparency of leadership selection was also reported amongst respondents in ROCS-targeted sites.

9 Conclusion

The purpose of this study was to assess the following hypothesis: “If RFF is organising and supporting the various communities with an educational package then the community members will come together to organise other factors which will develop their community”. This hypothesis was tested across 56 communities in Malawi, Zambia and Zimbabwe.

The study found that there have been positive changes in **education** across all sites since 2014. These include improvements in geographic access, quality of education and infrastructure, and community perceptions of the importance of education. These changes have contributed to improved education outcomes for children as evidenced by the average increase in grade 7 learner enrolment and completion across all sites. The implementing partners have made a significant contribution to these changes with the support of the community members who have become agents of change. It is thus concluded that the RFF support has stimulated the community’s involvement in education development over the past four years.

Of the 56 sites sampled, 95% reported having had significant changes in **healthcare** since the baseline, particularly in relation to *access to child health services*, hygiene and sanitation and nutrition awareness and practice. The data shows that healthcare has been made more accessible over the past 4 years. Implementing partners have contributed to improving access to nutrition programmes, community sensitization and education on health and supporting the work of health care workers (through ECD centers). Thus the IPs supported by RFF have played a direct role in the improved health outcomes evident in the targeted communities, as well as an indirect role through the support that have provided to health care workers/women’s groups.

Evidence from baseline and end line data show little change in overall **access to transport** across the sites although new kind of transport modes like motorbikes have appeared and private cars are more accessible. Although there have been some improvement of roads most of them are still in poor condition. However, the Most Significant Change stories reveal that of the 56 sites, 77% reported positive changes in terms of access to transport, while 16% reported no changes and 5% sites reported negative changes. There is evidence that Roger Federer Foundation with implementing partners have indirectly contributed to the community being mobilised to request better access to public transport in few sites in Zimbabwe and directly in two ROCS sites. However, in most sites this have not yet been the case.

There is evidence that there have been improved **access to communication** during the last four years across the 56 sites. However, these changes are attributed to the cell phone and network service providers and these changes would have happened anyway without the interventions of the Roger Federer Foundation and the implementing partners, with the exception of two sites in Zimbabwe. Hence the hypothesis that supporting school and communities with an education package will lead to community development around communication has not been supported.

Of the 56 sites sampled, 73% report positive changes in **business development and income generation**. These changes include an increase in the types of businesses operating in the sites included in the end line study, as well as an increased level of involvement by women in IGAs, which has contributed to women’s empowerment more broadly. An equal number of respondents noted the implementing organisations and government as the two key contributors to the reported changes in this specific area; that is 34% for both categories of contributor. The implementing organisations have also contributed towards the reported changes in an indirect manner through their facilitation of the formation of community groups or structures, such as the Mother’s Support Group in Zimbabwe or the Women’s Forum in Malawi. These groups have often initiated IGA schemes and projects in their communities and, in doing so, have motivated other community members’ participation in such activities. Thus it can be concluded that the implementing organisations supported by RFF have contributed directly towards improved livelihood and income generation outcomes in the targeted communities. They have also played an indirect role in facilitating these outcomes through the support and motivation provided by their community groups. In this way, RFF’s education support has contributed to targeted communities’ organisation and initiation of income generation projects.

Of the 56 sites sampled, 84% report positive changes in **community cohesion and participation** and improvements in level of community participation from baseline to date. These changes include an increase in the number of operational committees as well as improvements in committee efficiency and management. An increased level of community participation in events as well as improved communication regarding events and event organisation, were also noted during primary data collection at end line. Lastly, better communication amongst community members and improved levels of community consultation were reported by end line study

participants. The two key contributors to these reported changes are traditional leaders and implementing organisations. While the role of traditional leaders was more frequently noted, it does appear that respondents perceive RFF-supported organisations as playing a role in the achievement of community cohesion outcomes. However, possibly more importantly, the organisations have contributed towards higher levels of community collaboration, cooperation and mutual support through their involvement in school-related activities and projects as well as implementing organisation-led IGAs. This, it is argued, has motivated community members to collaborate in other areas of their lives. Thus it can be concluded that the implementing organisations supported by RFF have contributed towards community cohesion and participation. This they have achieved directly through the provision of spaces for community engagement and indirectly through their facilitation of community collaboration.

A young child with dark skin and hair is being measured for height against a wooden stadiometer. The child is looking slightly to the left. A hand is visible at the top, holding the wooden frame. The background is blurred, showing other people and a red wall.

Masthead

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Sources of Images

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