



# EVALUATION REPORT

## INTEGRATED COMMUNITY BASED RISK REDUCTION (ICBRR) PROGRAMME PHASE 2 (2022-2023)



**Authors:**  
**Tetty Marlina Rajagukguk** (IFRC Country Cluster Delegation Indonesia, Brunei Darussalam, Singapore, and Timor-Leste – Disaster Risk Management Specialist)  
**Puput Ertiandani** (IFRC Country Cluster Delegation Indonesia, Brunei Darussalam, Singapore, and Timor-Leste – Planning, Monitoring, Evaluation and Reporting Senior Officer)  
**Agung Lestyawan** (IFRC Country Cluster Delegation Indonesia, Brunei Darussalam, Singapore, and Timor-Leste – Water, Sanitation and Hygiene Senior Specialist)  
**Macario Santos Lopes** (IFRC Country Cluster Delegation Indonesia, Brunei Darussalam, Singapore, and Timor-Leste – Programme Senior Officer)  
**Ewinur Machdar** (IFRC Asia Pacific Regional – Water, Sanitation and Hygiene Coordinator)  
**Rohini Indran** (IFRC Asia Pacific Regional – Planning, Monitoring, Evaluation and Reporting Officer)

## Table of Contents

<b>Table of Contents</b> .....	<b>2</b>
<b>Executive Summary</b> .....	<b>4</b>
<b>A. Background</b> .....	<b>9</b>
<b>B. Evaluation Purposes, Scope, and Objectives</b> .....	<b>9</b>
B.1. Purposes .....	9
B.2. Scope.....	10
B.3. Objectives .....	10
<b>C. Evaluation Methods and Limitations</b> .....	<b>11</b>
C.1. Evaluation Methods .....	11
C.2. Limitations.....	12
<b>D. Evaluation Findings</b> .....	<b>14</b>
<b>D.1. Relevance and Appropriateness</b> .....	<b>14</b>
D.1.1. Relevance and Appropriateness in Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention .....	14
D.1.2. Relevance and Appropriateness in Health and WASH Intervention .....	17
D.1.3. Relevance and Appropriateness in Youth Intervention .....	18
<b>D.2. Effectiveness</b> .....	<b>19</b>
D.2.1. Endline Finding and Analysis .....	19
D.2.2. Effectiveness on Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention .....	37
D.2.3. Effectiveness on Health and WASH Intervention.....	39
D.2.4. Effectiveness on Youth Intervention .....	40
<b>D.3. Impact</b> .....	<b>41</b>
D.3.1. Programme Impact to CVTL at National Level .....	41
D.3.2. Programme Impact to CVTL at Local Level .....	42
D.3.3. Programme Impact to Community .....	42
<b>D.4. Coherence</b> .....	<b>43</b>
<b>D.5. Sustainability and Connectedness</b> .....	<b>45</b>
D.5.1. Sustainability and Connectedness on Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention .....	45

D.5.2. Sustainability and Connectedness on Health and WASH Intervention.....	46
D.5.3. Sustainability and Connectedness on Youth Intervention.....	46
<b>E. Challenges.....</b>	<b>47</b>
<b>F. Lessons Learned .....</b>	<b>49</b>
<b>G. Recommendations.....</b>	<b>50</b>
<b>H. Conclusion.....</b>	<b>54</b>
<b>Appendices.....</b>	<b>55</b>

## Executive Summary

### Introduction

Integrated Community Based Risk Reduction (ICBRR) programme was *Cruz Vermelha de Timor-Leste* (Timor-Leste Red Cross/CVTL)'s programme to tackle issues on: Disaster and Risk Reduction (DRR); Climate Change Adaptation (CCA); Livelihood; Health and Water, Sanitation, and Hygiene (WASH); and Youth. This programme was funded by The Government of Republic of Korea through The International Federation of Red Cross and Red Crescent Societies (IFRC) and The Republic of Korea National Red Cross (KNRC). ICBRR was a two-year programme throughout January 2022 to December 2023. This programme covered four *suco* (villages) in two municipalities (Ainaro and Manufahi) as shown on the map below.



Picture 1. ICBRR Coverage Area

### Purpose and Scope

In the end of programme implementation, an internal evaluation was conducted to assess the achievements of the ICBRR programme and draw lessons learned from its implementation, providing valuable input to improve future programming. The evaluation's scope was focused on the CVTL headquarter and branch, communities in the targeted areas, and local governments. The targeted areas are Manelobas and Aituto Village in Ainaro Municipality and Tutuluro and Caicasa Village in Manufahi Municipality. The evaluation addressed<sup>1</sup>: 1) Relevance and appropriateness, 2) Effectiveness, 3) Impact, 4) Coherence, and 5) Sustainability and connectedness.

### Methodology

In conducting the evaluation, the specific methodology was determined through close consultation between the IFRC and CVTL, drawing upon primary methods such as desk review, observation, endline survey to 331 households and 250 youth, 28 key informant interviews (KII), and focused group discussion (FGD) to 16 groups. The data collection took place in December 2023, involving the community including youth, CVTL at national and municipal level, and stakeholders at national and municipal levels.

<sup>1</sup> <https://www.ifrc.org/document/ifrc-framework-evaluation>

## Findings

The evaluation had resulted in some key findings, including:

- Relevance and appropriateness:** The intervention aligned with the Government of Timor-Leste (GoTL) Strategic Development Plan 2011-2030 by focusing on key priorities in rural development, water sanitation, health, and agriculture. Water, Sanitation, and Hygiene (WASH) related interventions proved to be the most impactful assistance in the community complemented by health promotion. The community's understanding of Climate Change Adaptation (CCA) and Disaster Risk Reduction (DRR) appeared to be somewhat limited possibly because not all community members participated in the trainings and heavy reliance was on information dissemination. On livelihood, community just recently initiated livelihood activities with CVTL therefore they were unable to show any tangible income improvement at the time of the evaluation. Regarding interventions for youth, it focused on sports, musical and performance art, and information disseminations on health, WASH, and DRR issues. The intervention for youth such as providing sports & musical equipment, performance art, and information disseminations on health, WASH, and DRR issues were deemed appropriate for youth at school-going age. However, youths aged above 20 years old expressed a need for more life skill capacity building opportunities.
- Effectiveness:** Some outcome and output indicators showed an increase in endline values at the end of the programme, yet some were adjusted to better suit the context and needs, of both CVTL and community capacity. The ICBRR strategy on the community volunteer recruitment and training influenced the programme's success. They understood the community context and needs, enabling them to deliver the programme intervention locally. The community volunteers conducted door-to-door visits and mobilised community members to be involved in the activities. Despite the programme's success, CVTL faced challenges related to community's remote areas, staff and volunteer's capacity, and community priorities that affected interventions of DRR, CCA, Livelihood, Health, WASH, and Youth.
- Impact:** The ICBRR programme had influenced the capacity improvement of CVTL at both national and municipal levels. The reputation of CVTL as the auxiliary of public authorities was strengthened and had more recognition by the community and stakeholders as a trusted humanitarian organisation. At community level, the impact of the programme could be seen in the improvement of knowledge and capacity regarding DRR, CCA, livelihood, health, WASH, and youth empowerment. However, further strengthening of these aspects will be necessary in the future.
- Coherence:** To implement the programme, CVTL had involved the partners and stakeholders at both national and municipal levels. To widen the impact of the programme, CVTL were involved in some of the national and local forums or networks with other organisations including government agencies. Consistent communication and engagement with the stakeholders are crucial.
- Sustainability and connectedness:** Since the beginning of the programme, CVTL involved the community to participate in the activities to strengthen their ownership. For example, to sustain the WASH facilities, the community formed *Grupu Maneja Fasilidade* (Facility Management Group/GMF) who were ready to take the ownership and management of WASH facilities maintenance. They even had regular fee collection from the community. All funds collected would be used for facility maintenance. During the programme implementation CVTL ensured to assess the vulnerable groups and involve them. Women and youth actively participated and could deliver their voice. While for the DRR, CCA, and Livelihood assistance, the community's knowledge and practice still needed to be strengthened. Moreover, CVTL

also mobilized community volunteers to assist the community in implementing the programme. Their presence in the community took an invaluable role for the programme sustainability.

## Challenges

The implementation of the programme by CVTL encountered various challenges, including geographical constraints in remote areas with limited infrastructure, human resource limitations with stretched staff and volunteers, and difficulties in engaging communities effectively. Despite efforts to deliver knowledge through direct communication methods, such as door-to-door socialization, community members expressed more interest in interactive activities, facing obstacles like limited local ingredients and accessibility issues for marginalized groups. Youth engagement initiatives struggled to meet diverse needs, compounded by difficulties in gathering youths due to education or employment commitments elsewhere. Competition with other organizations, coordination with multiple stakeholders, and socio-economic factors like political transitions and the COVID-19 pandemic further complicated the programme's success. Internally, CVTL faced challenges with procurement processes, budget transparency, and the lack of a formal feedback mechanism, alongside issues in setting intervention timelines, leading to implementation delays.

## Lessons Learned

Based on the findings and challenges captured during the evaluation, there are some lessons learned to note, as explained below:

- **Environment and Changing Climate:** In terms of building community resilience, community preparedness to face upcoming hazards is essential. Given that the community areas are prone to frequent hazards, a more comprehensive community-based early warning system approach is useful and necessary.
- **Community Interest and Programme Deliverance:** Through the programme, it is recognized that sustainability could be achieved by empowering communities to take ownership of initiatives and fostering collaboration with the local government to promote greater accountability, relevance, and long-term sustainability. This can be shown by WASH infrastructure with the formation and capacity building GMF as a strategy to increase community ownership and sustaining the practices of hygiene and sanitation.
- **Partnership and Socio-economic:** As shown by the partnership built with some stakeholders, continuous communication with the municipal and national level is essential. The evaluation has highlighted that when coordination mechanisms are firmly established at the municipal level, they contribute to programme's success. This partnership fosters alignment of goals, sharing of resources, and mutual support, all of which are critical for the sustained impact of the programme.
- **Human Resources and Programme Management:** The efficient operation of the ICBRR, despite limited staffing, it is necessary to appoint a dedicated programme manager to oversee daily activities. This will help in planning and setting objectives, as proper planning enhances efficiency and resource utilization, while poorly planned objectives may lead to irrelevant interventions. Moreover, encouraging collaboration among different units within CVTL proves importance in programme management. This collaborative approach promotes progress sharing, identifies synergies, and mitigates challenges, that resulting in more cohesive and impactful programme management.

## Recommendations

Based on the findings and the lessons learned, the following recommendations are proposed for improvement in the future. Firstly, it's crucial for CVTL to develop flexible program designs that can adapt to environmental challenges and encourage diversification in agriculture to enhance resilience. Secondly, shifting towards interactive engagement methods rather than passive dissemination can improve community involvement and interest. Thirdly, collaboration with stakeholders and proactive advocacy efforts can strengthen the organization's impact and sustainability. At community level, CVTL needs to apply the Protection, Gender, and Inclusion (PGI) principles by improving the involvement of vulnerable groups especially people with disability to participate in community activities, programme management from the assessment to exit strategies, and activation of Community Engagement and Accountability (CEA). Fourthly, enhancing staff capacity through training and communication channels can improve programme management and transparency. Lastly, completing delayed activities is vital for community engagement and programme continuity. Prioritizing strategic planning and objective targeting is essential for future programme success.

## Conclusion

It can be concluded that ICBRR programme has brought significant improvement to the community and CVTL by strengthening organizational capacity, widen the network with the stakeholders, and involving the community during the implementation to enhance ownership and sustainability of the programme. CVTL also faced many challenges and constraints in implementing the programme, including internal and external factors such as access to remote areas, organizational administration process, limited human resources and capacity, etc. Therefore, there are still areas for improvement for further development.

Regarding the evaluation results, CVTL could potentially gain further implications in positive ways. First, the CVTL reputation and visibility have increased in the eyes of community and stakeholders, including the government. As a trusted humanitarian organization in the country, CVTL should maintain the excellence of work and widen the impact. The success of the programme implementation could also increase people's expectations of CVTL assistance across the country. For donors, the evaluation results demonstrates the importance of the support provided to CVTL and the community in Timor-Leste. A longer programme duration may bring significant changes to the community.

## PROGRAMME EVALUATION



---

*Imanuel Tilman in Tutuluro village tending to his 10 chickens in a USD 200 coop funded in part by profit from his horticulture endeavors after a training in 2023.*

---

## A. Background

Integrated Community Based Risk Reduction (ICBRR) programme was the *Cruz Vermelha de Timor-Leste* (Timor-Leste Red Cross/CVTL)'s flagship programme. It was the first model ever applied in CVTL using an integrated approach to tackle some issues such as: Climate Change Adaptation (CCA), disaster Risk Reduction (DRR), Health including Water, Sanitation and Hygiene (WASH), Livelihood, and Youth. CVTL started the implementation of the first ICBRR programme in 2016 – 2018 through a consortium with New Zealand Red Cross, The Australian Red Cross, and The Republic of Korea National Red Cross (KNRC). To support the programme sustainability, the ICBRR programme Phase I continued in 2018 - 2021 with the support of the Republic of Korea Ministry of Foreign Affairs through KNRC and IFRC. This programme approach was then extended to Phase 2 for two-year implementation in 2022 - 2023. Starting in January 2022, the programme was implemented in two Municipalities (Ainaro and Manufahi) that covered four target villages (Ainaro: Manelobas and Aituto, Manufahi: Tutuluro and Caicasa) and ended in December 2023.

The objective of the programme was to build safer, healthier, and more resilient communities. To achieve its objective, there were expected outcomes to be resulted:

**Outcome 1:** CVTL has a successful ICBRR programme operating in 2 target Municipalities with support from CVTL National Headquarters.

**Outcome 2:** Localized capacities have been strengthened to support programme at Municipality level for vulnerable communities and households in 2 targets municipalities.

**Outcome 3:** Targeted households and schools are better prepared and able to respond and recover from disasters through integrated interventions to foster resilience, improved coordination, planning, livelihood, health and hygiene practices and access to safe water and sanitation.

To measure the result of this programme, an internal evaluation study was conducted. This aimed to compare the endline to the baseline value and go through the reflection during the intervention. This evaluation could be a good lesson learned process for CVTL internally and the related stakeholders. The evaluation result is expected to give valuable recommendations for the next programme management and implementation.

## B. Evaluation Purposes, Scope, and Objectives

### B.1. Purposes

The evaluation was expected to contribute to the understanding of the ICBRR's programme performance against planned programme objectives, expected results and targets outlined in the logical framework. Through this study, CVTL would be able to evaluate the quality and capacity improvement of their services at national and municipal levels.

The purposes of the evaluation were to assess the achievements of the ICBRR programme, draw lessons learned from its implementation and providing valuable input to improve future programming. Key lessons and recommendations from this evaluation would guide CVTL in ongoing and future programmes, enhance programme implementation for long-term impact and sustainability and contribute to broader Red Cross Red Crescent Movement learning.

The evaluation process attempted to include CVTL at National Headquarters (NHQ) and Branch, stakeholders at the national and municipal level and communities in the targeted areas. The lessons learned, recommendations and evidence-based best practices had been identified while assessing the extent of the programme, which covered DRR, CCA, Health, WASH, Livelihood and youth assistance, that influenced the community behaviour change. Besides, challenges faced and overcome in the programme implementation had also been analysed.

The evaluation served as an accountability and transparency mechanism for CVTL towards donors and the related stakeholders. The results of this evaluation are to provide insights into collaboration among the IFRC membership and stakeholders involved in the programme and inform decisions on future support and collaboration with CVTL. IFRC could take benefits from the evaluation by assessing its assistance to the CVTL, guiding management and membership services for ongoing and future programmes, while documenting and sharing lessons learned to the Red Cross and Red Crescent Movement.

Finally, this evaluation aimed to promote and celebrate CVTL's work through the ICBBR programme. The evaluation results can support resource mobilization and advocacy, while recognizing and celebrating the National Society's accomplishments, demonstrating returns on invested resources, and acknowledging the programme team's effort.

## B.2. Scope

The evaluation was focused on the ICBBR programme implementation from January 2022 to December 2023. CVTL NHQ and Branches of Ainaro and Manufahi municipality were included during the process. The personnels in the management leadership and technical team (DRR, Health and WASH, Youth) were engaged as resource persons. As volunteer mobilization played a key role in assisting the community, volunteer representatives were also included.

Besides CVTL, the targeted groups involved in the evaluation process were the assisted communities in four targeted areas namely Manelobas and Aituto Village of Ainaro Municipality, and Tutuluro and Caicasa Village of Manufahi Municipality. As the sectoral interventions were integrated in the community, the targeted groups of the evaluation included community leader, schoolteachers, men groups, women groups, youth groups, water committees, and community volunteers.

To have external perspectives, the related stakeholders were considered during the data collection inviting the representative of Timor-Leste government representatives at both national and municipal level. Representatives of the government including Ministry of Health (MoH), Civil Protection Authority (APC), National Department of Aquatic Resources and Sustainability (DNRAS) who are at national level and some official representatives at municipal level such as Agricultural Official, Water and Sanitation Official, and Health Official who collaborated closely with CVTL.

## B.3. Objectives

The evaluation had objectives to evaluate the relevance and appropriateness, effectiveness, impact, coherence, and sustainability and connectedness of the programme in terms of:

1. Programme implementation against programme planning and desired community outcomes as reflected in the logical framework.
2. Strength and weakness of CVTL programme coordination and management at both national and local level.

3. Lessons learned from programme implementation, including good practices, innovation, and challenges.
4. Recommendation to CVTL and related stakeholders including IFRC for an exit strategy and future programmes.

## C. Evaluation Methods and Limitations

### C.1. Evaluation Methods

Appropriate participatory approaches are essential to a proper information triangulation. A balanced mix of qualitative and quantitative methods such as desk review, survey, focus group discussions (FGD), key informant interviews (KII), success stories of beneficiaries and observation were used to collect primary data. KII and FGD were conducted to CVTL (NHQ and municipality branches), local key government officials, community representatives, teachers, and other assisted people in target areas. The quantitative data collection used a simple random sampling method to gain a coverage situation while the qualitative data collection used purposive sampling to gain detailed knowledge and deep information of the informants.

The evaluation methodology and tools were drawn upon the following primary methods:

- **Desk review.** It was done to the relevant documents relating to ICBRR programme and any relevant sources of secondary data, such as reports on prior programme iterations, baseline reports, Community Action Plan (CAP) results/reports, indicator tracking, pre-post training test result, meeting/workshop feedback, and other relevant data.
- **Field visits/observations.** This was conducted at target areas to observe on programme results and activities. The observation included some programme's result such as WASH infrastructure construction, community livelihood and CVTL materials or facilities at both national and municipal level. This supported to assess the Outcome 2 and some outputs in Outcome 3. In total, there were five observations conducted to WASH infrastructures and Livelihood activities.
- **Key informant interviews (KII).** KIIs were conducted to gain information from key persons to complement and cross-check information. The informants included were from CVTL NHQ representative (Secretary General, External Relation Coordinator, and the unit managers), CVTL Municipal representative (Branch Coordinator/ICBRR officer/volunteer), village leader, water committee, and related stakeholder at both national and municipal level.
- **Focus group discussions (FGD).** FGDs involved more the assisted groups or community to assess the significant changes during the programme assistance. The groups included were men group, women group, youth group, and community volunteers. In total there were 16 FGDs conducted.
- **Endline survey** to compare the endline and the baseline value by including community members as household representatives and youths. This process was conducted by CVTL, with a guidance from IFRC. The intended total targeted people of this project in spread over four villages with the total population of 11,655 including 922 young people. Using simple random sampling with a confidence level of 95%, and a margin of error of 5%, a total of 330 households and 272 youths were supposed to be taken as sample size for the endline survey<sup>2</sup>.

---

<sup>2</sup> After data cleaning, the total sampling data collected was 331 household respondents and 250 youth respondents.

## Household Survey

Table 1. Household Survey Sampling

Village	# Population	# of HH Population	# Samples	# Buffer
Caicasa	905	217	31	3
Tutuluro	1228	245	35	3
Aituto	8015	1534	218	22
Manelobas	1510	329	47	5
Total	11655	2325	330	33

## Youth Survey

Table 2. Youth Survey Sampling

Village	# Youth Population	# Samples	# Buffer
Caicasa	102	30	3
Tutuluro	284	84	8
Aituto	438	129	13
Manelobas	98	29	3
Total	922	272	27

## C.2. Limitations

Throughout the evaluation process, some limitations were identified, some of which had been recognized since the beginning of the process and others that emerged during the evaluation. These limitations included:

### Desk Review

1. Limited and unstructured documentation during the implementation resulted in missing information and unmatched data for triangulation. These issues stemmed from low data quality, lack of monitoring, and different documentation mechanism across units. To mitigate these challenges, efforts were made to compile all available documentation and categorize it according to program objectives and evaluation criteria, facilitating the review and analysis process.

### Observation

1. The diversity of interventions across the four targeted villages posed a challenge for the evaluator to observe all program results comprehensively. An observation made in one village might not accurately represent the achievements of other villages. To mitigate this risk, observation activities on WASH and livelihood were conducted on samples from the area with the most activities.
2. Programme planning schedule, especially for livelihood significantly impacted the intervention results. Due to the delay in implementation, the result of livelihood activities in horticulture and chicken farming could not be observed optimally during the evaluation. Facing this constraint, evaluations collected as much as information regarding the group member, challenges, plannings, and stakeholder related to continue the assistance after the programme ended.

### **FGD and KII**

1. The informants interviewed did not adequately represent the target group, especially the youth group that only gave limited information. This caused data bias and irrelevant information. To mitigate this limitation in the future, CVTL or project team and evaluator should agree the assisted areas and groups specifically before collecting data.
2. Language barriers between the evaluators and the informants resulted in unclear information and different understandings. To mitigate this risk, the CVTL staff and volunteers were involved in the discussion and interview as translators even though they themselves faced difficulty in interpreting some local dialects. To ensure the process could be conducted effectively, the evaluation team should be sensitized about the questions before the interviews.
3. Stakeholders re-structuring at local to national level resulted in changes government authorities and therefore impacting their ability to provide information during ICBRR implementation. To mitigate this, evaluators in consultation with CVTL, only contacted the capable focal person of each targeted stakeholder to obtain relevant information.

### **Endline Survey**

1. Outdated population data posed challenges in making precise target number of endline survey sampling, potentially resulting data/information bias that does not really represent the entire communities in the areas. To mitigate this risk, the evaluation team had relied on data source provided by CVTL's internal database of assisted villages and communities ensuring a better reflection or representation of current communities' dynamics in the areas.
2. CVTL's role as the last resort for the endline survey, following unsuccessful attempts to secure a consultant for the final evaluation highlighted challenges in the preparation and implementation of endline survey. With limited time and strained resources, the supervision of the endline survey process was affected. This led to insufficient enumerator training and simulation, resulting in a lack of understanding of the questionnaire and incorrect input of data in the mobile data collection form.
3. Data cleaning process became challenging due to invalid or inconsistent data or the omission of responses to key questions. One example is youth survey was set to collect 272 respondents at minimum, but the number of data collected is only 250. Therefore, findings of survey may not fully capture/represent the youth population in the areas.
4. The baseline questionnaire did not fully capture, address, or measure the defined indicators in the ICBRR programme. Recognizing this gap, the evaluation team made necessary revisions to the survey tools to ensure a more comprehensive measurement of the defined indicators. This adjustment allows for a more accurate assessment of impact, divided into baseline and endline comparisons in both quantitative and sectoral analyses. To define the endline value, the evaluation method and key questions were adjusted to answer the same question in the baseline and to answer the current situation at the end of programme intervention. Before collecting data, the enumerators were trained and facilitated to simulate testing of the questionnaire and tools.

## D. Evaluation Findings

The evaluation findings are categorized into evaluation criteria including Relevance and Appropriateness; Effectiveness; Impact; Coherence; and Sustainability and Connectedness. Some criteria will be further explained in three main areas which are: Disaster Risk Reduction (DRR), Climate Change Adaptation (CCA), and Livelihood; Health and WASH; and Youth. This finding categorization is slightly different from the programme proposal and baseline report that categorized the sectors. The adjustment was made to simplify the analysis since the programme implementation was managed by three main divisions which are: Disaster Management unit, responsible for DRR, CCA, and Livelihood; Health unit responsible for health and WASH; and Youth unit responsible for youth related interventions. Although the program was integrated in implementation, each sector unit had its own unique approach to applying interventions in the community. Meanwhile, the classification based on evaluation criteria will help CVTL to have a holistic view in managing all sectors.

### D.1. Relevance and Appropriateness

#### D.1.1. Relevance and Appropriateness in Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention

The evaluation findings show that all the ICBRR interventions in Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention were relevant and appropriate. The intervention was aligned with the Government of Timor-Leste (GoTL) Strategic Development Plan 2011-2030 which emphasizes key priorities in rural development, water sanitation, health, and agriculture. This agreement on relevance was also emphasized by CVTL's secretary general as he explained *"We are contributing to government priorities, they even approached us for program funding like ICBRR - how to build the community resilience, like through youth health, climate and disaster resilience, and health."*

Interviews with the key government partners at municipal and national levels also validated the relevance and alignment of the programme with the Government Policies and Priorities, especially on capacity building and the dissemination of risk reduction strategies at the community level even in remote areas where the government may face challenges in reaching. The ICBRR programme had shown a positive impact on CVTL NHQ and Branch's coordination and service delivery capacity.



*Photo 1. Community volunteer disseminating Disaster Response Plan through door-to-door visit.*

Evaluating the programme's relevance and appropriateness, the community expressed that DRR, CCA and Livelihood interventions were catering to their needs. Based on the Vulnerable and Capacity Assessment (VCA) results in four villages, the communities are prone to several hazards include typhoon, landslides, considering the context of forested areas. The intervention in DRR included conducting risk assessments, development of Community Action Plans (CAP), DRR socialization, DRR education for children, establishing Early Warning System (EWS), simulation exercises for emergency drills, conducting disaster mitigation activities (e.g., tree planting), and capacity building on climate change and safe shelters, had been conducted to strengthen community preparedness. However, despite this effort, FGDs with the community reported that they have a limited understanding of community resilience. Through delivery of knowledge with direct communication method (door-to-door socialization) which used visual posters for DRR campaign, community questioned the effectiveness of visual posters. Although it highlighted the importance and active engagement of community volunteers, community members concerned it was not appropriately catered to the diverse group such as children and elderly and suggested for a more creative approach such as drama performances.

Timor-Leste is likely to experience increased intensity and frequency of hydrometeorological hazards. At the community level, weather forecasting is still using traditional knowledge. However, due to the changing climate, these are often no longer reliable. They also lack the knowledge and skill to access weather information provided by the government. Early Warning System (EWS) plays an important role in reducing the vulnerability of communities and is highlighted by the government of Timor-Leste. Community-based early warning system (CEWS) involves the community in identifying, monitoring, and responding to potential hazards. It typically includes utilization of monitoring and Alert System, establishing reliable communication channels, inclusive community involvement and planning, and collaboration with local authorities and stakeholders. CVTL intervention in building CEWS is important

and serves as a foundational step in cultivating a culture of preparedness and proactive measures through early warning. CVTL has capacitated the community on the benefits of EWS, the role and responsibility of the community in EWS, actions after receiving early warning, and distribute a tool (loudspeaker) to facilitate the communication of critical and real-time information to the community. Communities had expressed their usefulness in disseminating warning and household preparedness during typhoon season. However, there is a recognition to establish a comprehensive CEWS that integrates various communication channels, technologies, and sources of information and collaboration with local government authorities, as well as development of feedback mechanism that are important to build a robust culture of preparedness.

Furthermore, the ICBRR also demonstrated strong relevance and appropriateness of livelihood intervention. Livelihood analysis was conducted in 2022 and further CAP Review in 2023 showed appropriateness of intervention of horticulture training, chicken rearing training, and saving and loans group assistance. Through some interviews with the community members and partners, community in the targeted areas are challenged with some hazards such as drought in a long dry season and sudden floods, typhoon, and landslides during rainy season. These conditions hardened the communities to rely on seasonal plantation only such as coffee. To help the community in generating their income, horticulture could answer the problem where people could plant vegetables that need shorter time to harvest. The vegetables were also selected which could grow in any season, so the community could gain income regularly. Moreover, through saving and loan activities, the community, through an interview during evaluation, shared that they could learn financial literacy to balance their income and expenditure. One of good practices is a member of saving and loan group in Tutuluro could use the loan to buy some chicken and vegetables seedlings to plant that increased the family income.



*Photo 2. Community members showcasing their horticulture demo plot (Tutuluro, 2024)*

DRR and Livelihood should be giving more attention to the issue of CCA efforts as it is relevant to the community's challenges. Cross-validation shows that the horticulture training can be improved by incorporating various planting techniques suitable for both drought and rainy seasons, taking into

consideration the changing climate, including prolonged and intensified rainy seasons, as suggested by the FGD participants.

### D.1.2. Relevance and Appropriateness in Health and WASH Intervention

CVTL's ICBRR Programme showcased strong relevance and appropriateness in the Health and WASH sector. The Ministry of Health at the national level confirmed that the ICBRR interventions were in line with the Government of Timor-Leste (GoTL) Strategic Plan 2011-2030 and the current policies.

The programme's adaptation and enhancement of government-standardized designs for water facilities aligned with the established guidelines, ensuring compliance, and contributing to improved water quality and accessibility. The emphasis on regulatory standards enhances project appropriateness. To manage the water facilities constructed, the forming of GMF (water committee) in each village was an effective intervention. The group received capacity building not only on technical water maintenance but also on set up finance and administration part for sustainability.



*Photo 3. WASH Facilities in Caicasa Village*

Significantly, the programme reports a noteworthy increase in community knowledge, attitude, and practice related to good hygiene behavior. By focusing on crucial habits like treating drinking water, using latrines, and proper handwashing, the initiative effectively addresses public health concerns, reinforcing its relevance in promoting overall community health.

The programme's targeted engagement with youth, resulting in improved knowledge, attitude, and practice related to health, demonstrates a specific and effective approach to meeting the health needs of this demographic. The inclusion of health components ensured the programme's relevance to youth, fostering a culture of health and resilience among younger community members.

The integration of cultural and traditional practices into community activities, supported by CVTL's technical expertise in piping and sanitation systems, reflects a holistic approach to health and WASH. This integration aligns with the community activities with local customs while promoting a sustained behavioral change.

The programme's commitment to conducting handwashing promotion sessions in schools highlights its adaptability. This ensures that health-related education persists even in difficult conditions, reinforcing the project's relevance and appropriateness in addressing health and WASH concerns within the

community. In summary, CVTL's ICBRR Programme demonstrated a comprehensive and tailored approach, ensuring its relevance and appropriateness in enhancing community well-being.

The hygiene and health promotions were mostly conducted by community and CVTL volunteers who obtained relevant training on the material prior. The door-to-door socialization and distribution of posters included basic health information, such as hand-washing posters, dengue, and diarrhea prevention were conducted. Similar strategies also target school children dengue and diarrhea prevention in their school. Hand washing practice was also promoted at school, through campaigns, and poster distribution.

To support community health intervention, nutrition session activities and cooking demonstrations with group mothers in Caicasa, Aituto, and Manelobas had been implemented. ICBRR staff facilitated nutrition sessions and shared the nutritional pyramid theory with the mother group. Those activities were to ensure the mother and their children had access to proper nutrition in the community. However, found challenges faced by the community including limited local ingredients and distance to the local market, as shared in FGDs with the women groups.

### **D.1.3. Relevance and Appropriateness in Youth Intervention**

The ICBRR programme's design, which emphasized community and youth participation was relevant through its various activities aimed at enhancing youth well-being and preparedness. According to CVTL policy, youth is categorized as young people aged 12-25 years old. The promotion of DRR, CCA, and Health and WASH provided to the adult community also provided youth through relevant activities. Those intended to eventually encourage and promote youth participation and to showcase their talents and ability to be involved at the local and national level activities. Although some youths were away for tertiary education in Dili, there was enthusiasm to involve them during holidays, emphasizing the benefit of scheduling sessions before Christmas when many were expected to return home.

Youth in the target communities participated in activities, including a dissemination of DRR and CCA, health promotion, sports activity, and musical equipment distribution facilitated in youth group at village level. CVTL had also provided crucial education on sexual health and menstrual hygiene, aiming to address issues like child marriages, child pregnancy, and the resulting problems such as early divorce and abortion at young age.

Besides youth intervention through youth groups, CVTL also educated children at school coordinated with the schoolteachers to give DRR, Health, and WASH promotion (e.g. handwashing). Through some KIIs with schoolteachers, they shared those students had improved hygiene practices (e.g. handwashing, wearing clean uniforms, maintain clean environment) that contributed to reduce diarrhea cases among students.

Those assistances resulted in positive changes that youth became more vocal and participated actively in youth meetings. As specified by a community volunteer in Tutuluro, community members were generally weary with visits by other aid organisations to their villages. However, with the presence of CVTL, even the women and youth participated in activities when they usually were just shy away.



Photo 4. Manelobas Youth Group's musical performance at community event

Based on FGDs with youth groups, they shared that the community further explores music with songwriting led by youth leaders, but they need more capacity building in areas like sewing, mechanics, and public speaking that will increase their life skills.

## D.2. Effectiveness

### D.2.1. Endline Finding and Analysis

The endline values toward the outcomes and outputs were collected through desk review of CVTL monitoring documentation and endline survey conducted with household and youth representatives across four targeted villages. Endline survey was conducted to 331 household representatives (male: 192, female: 139) with most of them were at age of 31-40 (25%) and 41-50 (20%) and 250 youth representatives (male: 133, female: 117) as shown in the figure below (figure 1; figure 2).

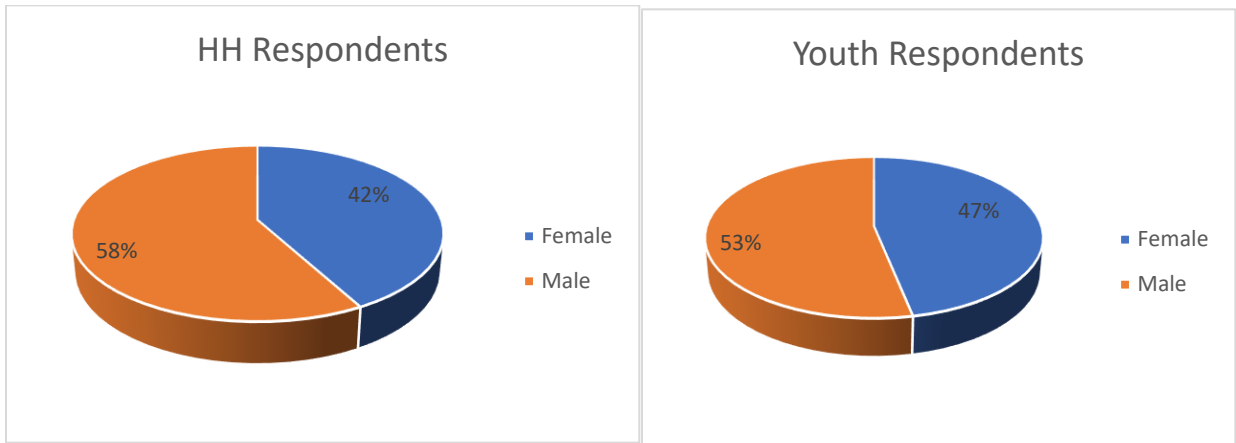


Figure 1. Proportion of Endline Survey Respondents

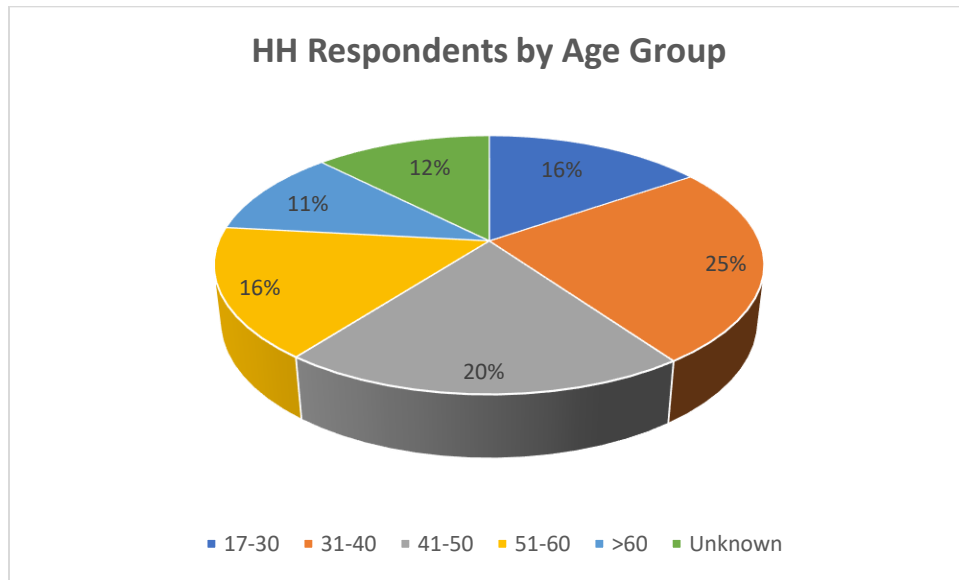


Figure 2. Household Respondents by Age Group

The goal of the ICBRR programme was to **build safer, healthier, and more resilient communities**. Below are the endline outcomes and outputs to support the objective.

**Outcome 1. CVTL has a successful ICBRR program operating in 2 target Municipalities with support from CVTL National Headquarters.**

Indicator	Baseline Value	Endline Value
All planned program activities are implemented on time and within budget	N/A	48% planned program activities are implemented on time
Target communities are satisfied with CVTL service and support during implementation of the ICBRR program	27% respondents trusted CVTL to seek help when disaster come	59% respondents trusted CVTL to seek help when disaster/hazard come

To have a successful programme implementation, CVTL needed to have a timely implementation and within budget planning, validated by the community satisfaction. The programme planning monitoring by December 2023 recorded that 48% of planning were implemented in a timely manner. CVTL conducted

regular coordination between NHQ and Branches to maintain the timely planning deliverables. However, there were delays on some activities caused by administrative procedures and concurrent hazards that happen in the community area.

In terms of community satisfaction, the jump up from 27% to 59% signifies a substantial 32% improvement as respondents expressed increased trust in CVTL for seeking help during disasters or hazards. The satisfaction of community for CVTL services not only in disaster or hazard response but can also be considered as the result of DRR activities such as through door-to-door socialization, simulation drill, early warning, and capacity building in responding to hazard for the village leader and community volunteers.

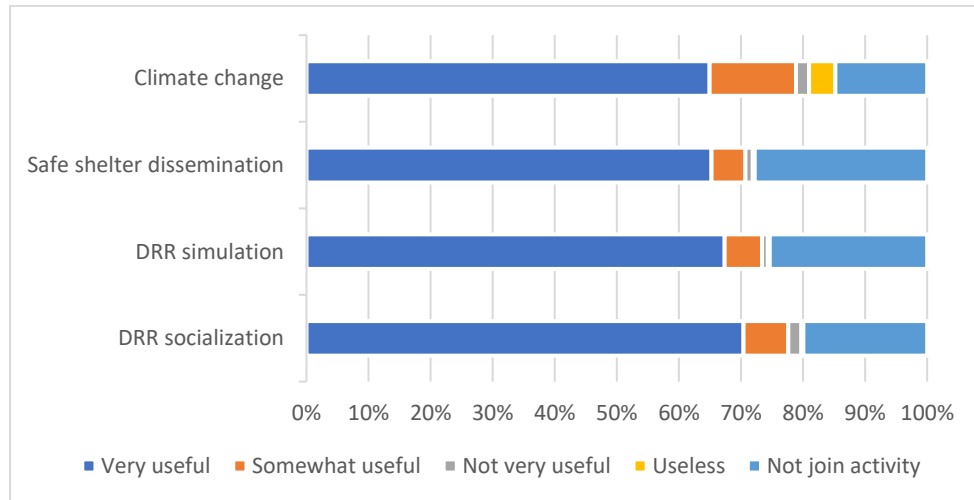


Figure 3. DRR and CCA Intervention Usefulness

The figure above (figure 3) shows that on average, more than half of respondents (67%) who participated in CVTL activities found that the DRR and CCA interventions were very useful. Only a few people (2%) perceived the interventions as not very useful, and even fewer (1%) considered them useless, especially in relation to climate change. It suggests that the implemented interventions were suitable and well-received by the community. Building on these findings and recognizing the strong interconnection between climate change and the evolving nature of hazards, especially in the context of hydrometeorological events, and considering the potential impacts on community life, including livelihoods and shelter, it becomes crucial to implement strategies aimed at enhancing community awareness on climate change.

**Output 1.1. National Coordination - CVTL NHQ and Branches collaborate with government and other organizations engaged in strengthening the resilience / reducing vulnerabilities in Timor-Leste.**

Indicator	Baseline Value	Endline Value
# Of government and other agencies engaged in the program in NHQ level	0	40
10 events of meeting, workshop or other joint activities conducted with the stakeholder in NHQ level	0	10

CVTL has built and maintained coordination and collaboration at the national level with other stakeholders, including the government. Throughout the program duration, CVTL involved 40 government and other agencies in the programme and conducted 10 meetings, including workshops.

CVTL has shown commendable engagement at the national level such as the Community Based Disaster Risk Management (CBDRM) networking group where CVTL was appointed as host in 2022. CVTL also took part in the National Climate Change working group where CVTL contributed water gallons and water bottles during the conference that reached 200 people. Moreover, CVTL joined Early Warning Capacity Enhancement workshop which aimed to support the operationalization and sustainability of disaster awareness within the local context, with an emphasis on flooding and landslides. In 2023, CVTL participated in workshop on Anticipatory Action, jointly organized by UN Food and Agriculture Organization (FAO), Red Cross Climate Center and IFRC, and with participation of stakeholders including some of government agencies and NGOs held at the national level. In addition, CVTL also supported the government in conducting emergency needs assessments and relief distribution.

**Output 1.2. National Capacity Building - Program Management capacities of CVTL NHQ staff & volunteers are strengthened**

Indicator	Baseline Value	Endline Value
# of staff/volunteer attend the integrated planning meeting conducted quarterly at NHQ	0	12
% of ICBRR staff participate in the training increased its knowledge on ICBRR programing	0	100% of 25 people trained had increased knowledge
# of media produced to deliver the key messages	0	7
Final evaluation is conducted with support of independent consultant	0	Final evaluation is conducted internally

Through this programme, CVTL has increased staff and volunteer capacity in programme management. Twelve staff or volunteers were involved in quarterly meetings conducted by CVTL NHQ. Based on CVTL documentation, there were 25 CVTL staff and volunteers trained during the programme implementation. In managing the programme implementation, with support from IFRC, CVTL conducted some series of PMER capacity building sessions to the staff in developing monitoring evaluation plan, documenting achievement, and reporting.

Besides improving monitoring mechanism, Community Engagement and Accountability (CEA) was a way to maintain community trust toward CVTL. Throughout the programme implementation, community feedback had been received by CVTL on a regular basis through verbal communication to community volunteers or CVTL staff. However, the feedback was not well-documented due to the absence of an established feedback mechanism within CVTL.

To increase visibility, seven media outputs were produced to promote and publicize the ICBRR programme achievements. This included successful engagements with national television (RTTL) and radio (Metro Radio) in 2023.

At the end of implementation, a final evaluation was conducted to see the successful implementation and lessons learned resulted from the programme. This evaluation was conducted internally, involving

IFRC and CVTL staff and volunteers, to comprehensively review the progress towards community resilience.

**Outcome 2. Localized capacities have been strengthened to support program at Municipality level for vulnerable communities and households in 2 target**

Indicator	Baseline Value	Endline Value
CVTL branch capacities are improved through training and coaching from CVTL NHQ	N/A	16 staff trained in mapping, PMER, EVCA, communication
Decentralized program management is well implemented in 2 (two) CVTL branch target area.	N/A	Branch submitted activity report including finance related document to NHQ every time they conducted activity

CVTL Branches capacity strengthening is one of the priorities of ICBRR. Beyond training sessions, CVTL Branches were empowered to manage program activities in their respective areas, requiring them to regularly submit activity and financial reports to CVTL NHQ. At community level, CVTL Branches then focused on building community volunteer’s capacity to foster ownership and sustainability. Through the KIIs with Branch representatives, the regular coordination and capacity building were found to be useful, however refreshments on some areas such as technical information on DRR, CCA, health, and WASH and technology such as using mobile data collection, computer, or writing report are needed.

In total, 16 Branch staff were trained in mapping, PMER, Enhanced Vulnerability and Capacity Assessment (EVCA)--a specific training to capacitate the staff and volunteers to assess the community capability and needs, and communication. In 2022, the staff received training in map development and production, creating both digital and printed maps for CVTL, including targeted areas for the ICBRR programme. This visual aid played a crucial role in better understanding the situation and facilitating programme implementation in specific areas. CVTL also provided training on the use of drones in disaster response to allow real time images and video of areas and infrastructure affected by disaster. CVTL NHQ also trained CVTL Branches to utilize online data collection and form in doing their activity documentation and reporting regularly.

**Output 2.1. Municipality Coordination - CVTL Branches collaborate with Government and other organizations in strengthening resilience / reducing vulnerabilities in municipalities**

Indicator	Baseline Value	Endline Value
# Of government and other agencies engaged in the program in municipality level	N/A	6
# Of meeting, workshop or other joint activities conducted with the stakeholder in municipality level	N/A	5
10 events of International and National Days of Recognition organized by branches in	N/A	7

cooperation with local stakeholders		
-------------------------------------	--	--

During the programme duration, six government and other agencies were engaged in the programme, two collaborative workshops at municipal level, and seven events of International and National Days were conducted. This coordination signified strengthened abilities in building partnerships.

CVTL Branch in Ainaro and Manufahi actively participated in some sector coordination meetings with the local stakeholder institutions, such as Civil Protection Authority (APC) for any DRR response assessments (not limited to ICBRR). They also collaborated with existing stakeholders such as *Luta Ba Futuru* (LBF) for saving and loans training, and Municipal Department of Agriculture on several activities such as tree planting for reforestation program, horticulture training and chicken rearing activities. Through KIIs, CVTL Branches also highlighted the need to advocate for continued government or external support to the community post-programme.

At the village level, the ICBRR officer at the branch closely coordinated with the community volunteers and village governments to implement the programme activities. CVTL conducted community meetings with the support from the village or community leader to promote a shared understanding of ICBRR activities.

**Output 2.2. Municipality Capacity Building - Program Capacity of CVTL staff and volunteers in targeted 2 municipalities is strengthened**

Indicator	Baseline Value	Endline Value
% of volunteer increased demonstrating increased knowledge after training	N/A	109 (male: 58, female: 51) community volunteers recruited and trained

During the programme implementation, 109 community volunteers were recruited and trained to increase their technical knowledge. Series of capacity buildings including sexual health, malaria, dengue, first aid, and DRR response were delivered. CVTL Branch volunteer started to train one to two community volunteers in the villages who then would deliver the information to the community using creative approaches such art performance by mobilizing youth groups, door-to-door campaigns, and simulations.

**Outcome 3. Targeted households and schools are better prepared and able to respond and recover from disasters through integrated interventions to foster resilience, improved coordination, planning, livelihood, health and hygiene practices and access to safe water and sanitation**

Indicator	Baseline Value	Endline Value
The knowledge, attitude and practise of the community and youth on DRR and Health and it's the cross-cutting issues (eg. PGI, Climate change, etc) in the target area are increased 60-70%	47.5% of community who know what to do when disaster/outbreak happen and treat the illness by giving common medicine or bringing to medical treatment (doctor, clinic, hospital)	27% of community who know what to do when disaster/outbreak happen and treat the illness by giving common medicine or bringing to medical treatment (doctor, clinic, hospital)

The illness rate in the community is decreased by the end of the program	25% of community got sick in the last six months	46% of community got sick in the last six months
Target community supported by livelihood have increased their income or have improved their income generation activity	35% of community have income more than USD 60/month	17% of community have income more than USD 60/month

This outcome aimed to enhance community resilience, particularly among youth and children, through improved DRR preparedness, CCA, livelihood, health, WASH, and social inclusion initiatives. First, the objective was to increase the knowledge, attitudes, and practices of the community and youth regarding DRR and health to reach 60-70% of the population. Unfortunately, the endline survey in 2023 showed a decrease to 27% (CI: 22.4% - 32.3%) who knew actions to respond to disaster, outbreak or hazard happens and could treat the illness by giving common medicine or bringing the casualty for medical treatment (doctor, clinic, hospital) compared to the baseline value of 47.5%, (CI: 42.5% - 52.1%) in 2022. This decrease of community confidence and ability could be affected by the increase of hazard frequency induced by climate change namely hurricanes and storms, floods, and drought. The community's ability to cope with hazards and crises, including health issues, was also affected by the fluctuating national economic situation during and after the COVID-19 pandemic. Non-oil real Gross Domestic Product (GDP) growth reached 4% in 2022, driven by the post-pandemic re-opening and a strong fiscal expansion, However, growth slowed to 1.5% in 2023 due to difficulties in executing the budget surrounding the elections in May 2023. Inflation rose to above 8% in 2023, affected by food prices and transport costs.<sup>3</sup>

CVTL assisted the community in preparing for potential hazards in the area. Based on the endline survey results, 72% of people participated in the DRR activities including simulation, early warning, and household preparedness (figure 4). Among these activities, simulation activities reached the highest number of people (59%) in the assisted population. One challenge was the diverse area coverage from one village to another. In some remote areas, CVTL and the volunteers had difficulty in reaching and mobilizing people to participate in certain activities. It was also worsened by unpredictable season that limited access to reach the community.

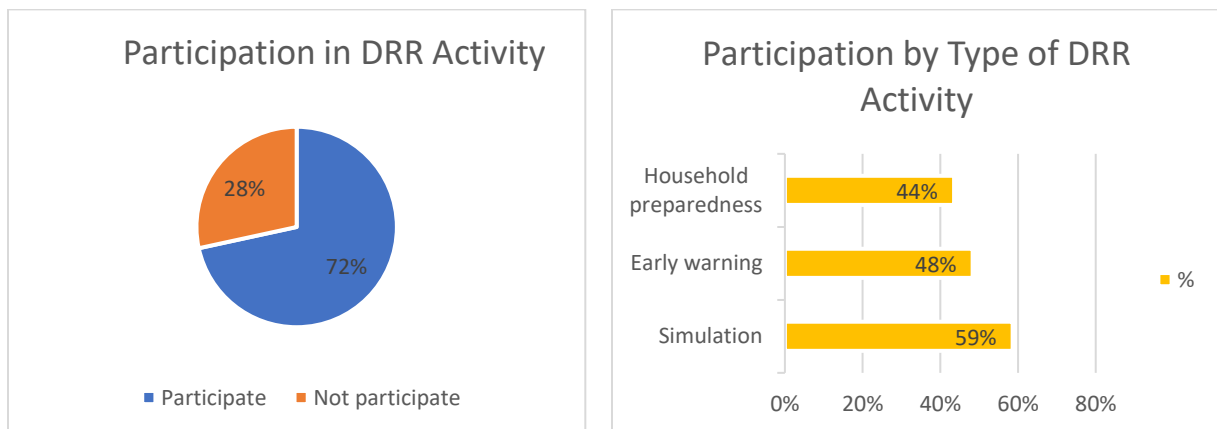


Figure 4. Participation in DRR Activity

<sup>3</sup> IMF Executive Board Concludes 2023 Article IV Consultation with Timor-Leste

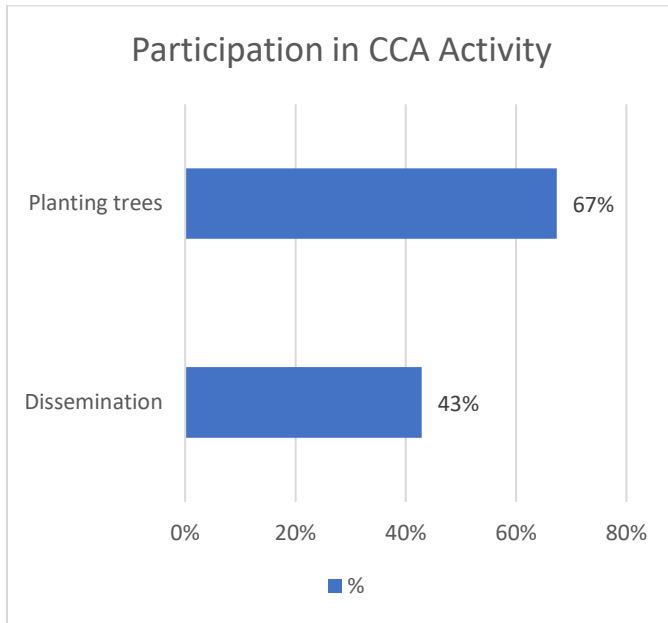


Figure 5. Participation in CCA Activity

The community is aware that there is change on the potential hazard related to climate change. In response to this situation, CVTL included Climate Change Adaptation (CCA) to educate the community about preparedness. According to the survey, 66% of respondents described climate change as long-term shifts in temperature patterns, while 55% described it as long-term shifts in weather patterns. It indicates that more than half of the population already had knowledge about climate change and its effects. The figure on the left (figure 5) shows that 67% of community participated in planting trees and 43% of community received climate change information dissemination.

In addition to adults, CVTL also provided intervention to youth to increase their knowledge of DRR, CCA and health. The youth endline survey revealed that 65% of participants engaged in DRR and CCA activities. This enhanced their understanding of disaster preparedness and climate change adaptation. The figure below (Figure 6) shows that that over half of the youth significantly increased their knowledge, with 51% showing a significant increase and 11% showing a moderate increase, after participating in DRR and CCA activities.

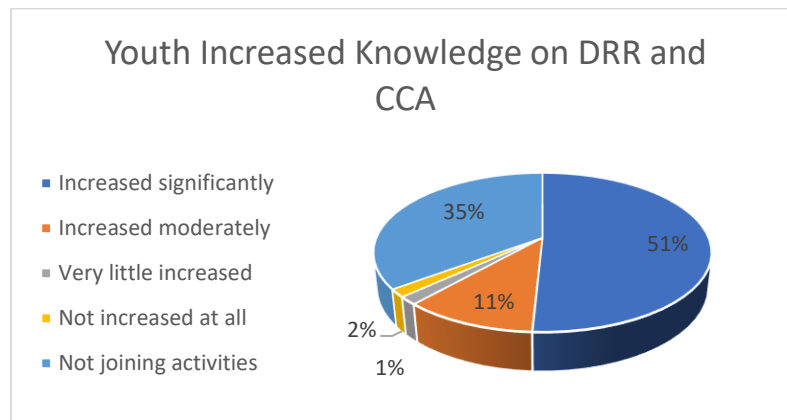


Figure 6. Youth Increased Knowledge on DRR and CCA

The second indicator of this outcome is “The illness rate in the community is decreased by the end of the program”. To measure the achievement of this indicator, the proportion of the population who reported being sick in the last six months with at least one of the serious diseases recognized in the community was assessed. The endline survey found that the proportion of community who got sick increased significantly from the baseline value at 25% (CI: 20.9% - 29.3%) to 46% (CI: 40.4% - 51.4%). The details of serious illness mentioned by the respondents can be seen in the table below (table 3).

Table 3. Illness Affecting Family in the Last 6 Months

Illness affecting family in the last 6 months	Number of respondents answer	% of respondents answer
Malaria	94	28%
Dengue fever	73	22%
Heart Diseases	43	13%
Diabetes	40	12%
Stroke	37	11%
Diarrhea	30	9%
Respiratory Diseases	15	5%
Skin diseases	10	3%

The decreasing proportion of the community who could treat the sick well and the increasing illness experienced by the community could also be impacted by climate change. As found in the survey, there was an increase in diseases attributed to temperature and weather shifts, as shown in the table below (table 4). However, most respondents (60%) could not specify what kind of diseases were affected by climate change.

Table 4. Type of Disease Increasing due to Climate Change

Type of Diseases	Number of respondents identify increasing of disease due to climate change	% of respondents identify increasing of disease due to climate change
Zoonoses	60	18%
Food-, water- and vector-borne diseases	114	34%
Mental health issue	2	1%
Do not know	198	60%

The third indicator of this outcome is “Target community supported by livelihood have increased their income or have improved their income generation activity”. The endline survey showed a decrease of the community income from 35% (CI: 30.3% - 39.5%) at the baseline to 17% (CI: 13% - 21.4%) of the community having an income of more than USD 60 per month at the end of the programme.

Based on the information collected from interviews with CVTL and observation to the community, it was found that CVTL initiated the livelihood activities through horticulture and chicken rearing. However, these activities experienced delays in implementation due to various challenges, including administrative processes and scheduling timelines. Moreover, the planned implementation of livelihood activities was scheduled for the second year, nearing the end of the program. Unfortunately, the administrative processes took longer than anticipated, further delaying the implementation. At the time of evaluation, the CVTL had only distributed the chickens thus hindering the demonstration of any benefit for income improvement.

During the programme implementation, Timor-Leste was in a transition phase from COVID-19 pandemic to endemic status while at the same time experiencing political transition nationally. These conditions

impacted many sectors of life, particularly people’s livelihood. Inflation reached 9.6 percent by March 2023 which was a significant increase compared to 6.0% in 2022. Additionally, export activities growth faced obstacles due to lack of commodity diversification which limited the ability to buffer against any economic shocks.<sup>4</sup>

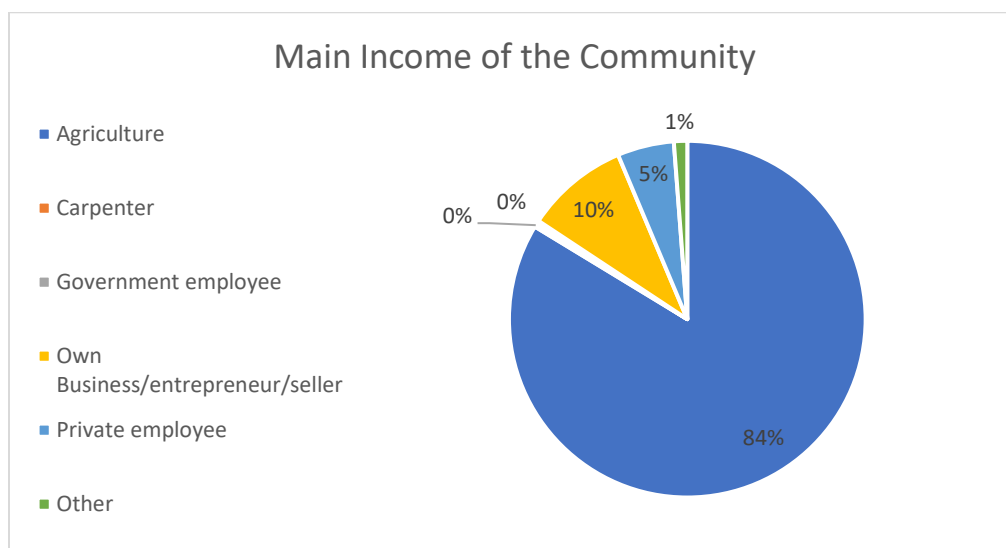


Figure 7. Main Income of the Community

Climate change not only impacts hazards and health, but also the community livelihood since the community depends heavily on agriculture. In total, 84% of the community worked in agriculture (figure 7). The table below (table 5) outlines the affected livelihoods identified by the survey respondents across the targeted villages. As much as 75% of respondents identified that planting and cropping season was highly affected due to climate change effects. Based on some interviews with Agricultural Officials and the community, seasonal changes also led to virus outbreaks, which in turn affected farming activities. This explains why many of the chickens distributed to the community died.

Table 5. Type of Livelihood Activities Affected by Climate Change

Livelihood activities affected by climate change	Number of respondents identify livelihood changes due to climate change	% of respondents identify livelihood changes due to climate change
Planting and cropping season	249	75%
The availability of grains, pasture, and forages for animal	92	28%
Animal health or disease	38	11%
Price increases due to changes on crops	73	22%
There is no change	11	3%
Do not know	35	11%

<sup>4</sup> National Directorate for Economic Policy, Quarterly Inflation Review, Lao Hamutuk, 2023  
Great Expectations Hang on New Government to Steer Timor-Leste’s Economy, The World Bank, 2023

**Output 3.1. Red Cross volunteer and community group support - Target villages have increased capacity to manage their risks through community structure and volunteers**

Indicator	Baseline Value	Endline Value
# of community volunteers recruited per village (% percentage of volunteers recruited who are women)	N/A	109 (male: 58, female: 51) Female: 46%

CVTL recruited 109 community volunteers, 46% out of them are women from all four targeted villages. CVTL trained them regarding DRR, CCA, Livelihood, Health, WASH and involved in youth assistance. The community volunteers were crucial in ensuring activities were being implemented at the local level. CVTL had monthly meetings with the community volunteers in each village to strengthen coordination and update the programme plan and implementation. This regular meeting also discussed constraints and challenges and solutions.

**Output 3.2. Village VCA & CAP - Vulnerability and Capacity Assessments and Community Action Plans are conducted and reviewed annually in target villages**

Indicator	Baseline Value	Endline Value
4 VCA completed and 4 CAP (Community Action Plan) developed completed	N/A	4
Baseline/Endline survey in target 4 villages is completed	4 villages, completed	4 villages, completed
CAPs are reviewed in 4 villages	N/A	CAP review in 4 villages, completed
Exit strategy and project handover is properly conducted	N/A	Exit strategy and project handover has not been conducted

In the beginning of the programme, CVTL conducted VCA in four village and developed four Community Action Plan (CAP) based on the VCA analysis. CVTL facilitated the community to review the CAP and evaluated what they could do better in tackling their issues. Through ICBRR, CVTL tried to fill the gap to increase the community resilience.

To ensure that the programme continues and sustainable, CVTL made an exit strategy by empowering the local community to manage the programme deliverables especially in WASH infrastructure that would be managed by GMF (water committee) and youth group structure who would manage the youth activities. However, CVTL had challenges to involve other stakeholders including government since the beginning of the programme to gain their commitment to support the community continuing the livelihood assistance including horticulture and saving and loan activities. A more comprehensive exit strategy for the program is recommended to be developed and communicated since the beginning. The exit strategy should outline the steps, timelines, and responsibilities involved in handing over the program's activities, resources available and needs, and responsibilities to the local community or other relevant stakeholders. By communicating this strategy early on, all stakeholders can understand their roles and contribute to a smooth transition process. This ensures that the benefits and impacts of the program are sustained even after its formal conclusion.

**Output 3.3. Village program of DRR action - To Develop and Increase the resilience of communities through disaster Preparedness risk reduction**

Indicator	Baseline Value	Endline Value
% Volunteers and community leaders DRR knowledge are increased after the training/capacity building process	51% of community know what to do when disaster/outbreak happen	29% of community know what to do when disaster/outbreak happen
% target community increases the awareness in DRR by the end of the program	51% of community know what to do when disaster/outbreak happen	29% of community know what to do when disaster/outbreak happen

This output focused on the development and increasing of community resilience through DRR. The program provided capacity building opportunities for community members, volunteers, and leaders. However, the endline survey revealed that only 29% (CI: 24.4% - 34.5%) of community members knew what to do when a disaster or outbreak occurred.

This value decreased from 51% (CI: 45.9% - 55.6%) in the baseline. The decline in community knowledge and preparedness could be attributed to the increased frequency of hazards induced by climate change, such as hurricanes, storms, floods, and droughts. Additionally, the community's ability to respond to crises, including health issues, was impacted by the national economic situation during and after the COVID-19 pandemic and political transition, as discussed in the Outcome 3 section above. From FGDs with the community members, it was found that not all communities have understanding on DRR and CCA. Some community members received information through door-to-door visits or simulations but did not attend capacity-building sessions on early warning systems, resulting in a lack of knowledge about household preparedness plans.

**Output 3.4. Increased access to livelihood options for income generation - To develop and increase the resilience of target communities through livelihood support activities**

Indicator	Baseline Value	Endline Value
% of targeted households that have increased income or benefit by the end of the project	35% of community have income more than USD 60/month	17% of community have income more than USD 60/month

The endline survey found a decrease from 35% (CI: 30.3% - 39.5%) to 17% (CI: 13% - 21.4%) of the community with income more than USD 60/month. Key Informant Interviews (KIIs) conducted with Agricultural Officials in municipalities highlighted several challenges in implementing livelihood activities. Apart from seasonal changes affecting planting and cropping schedules, the officials reported viral outbreaks causing chicken deaths across the municipal area.

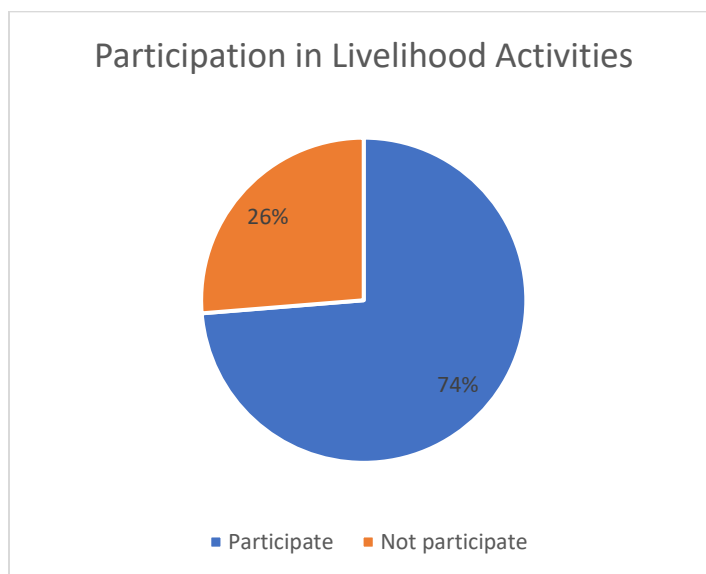


Figure 8. Participation in Livelihood Activity

CVTL had facilitated the community through livelihood activities including horticulture, chicken rearing, and saving and loan group. A significant portion of community members, 74%, participated in these livelihood activities throughout the program (see figure 8). However, challenges arose in program management, including delays in administrative processes and scheduling, compounded by the socio-economic context at the national level, as elaborated in the Outcome 3 section above.

**Output 3.5. Community Health - To improve community health practices**

Indicator	Baseline Value	Endline Value
% Reduction in general illness rate in the target community	25% of community got sick in the last six months	46% of community got sick in the last six months
% of the community in the target area improve their knowledge to prevent illness and maintaining their health	11% out of people who got health promotion from CVTL	55% out of people who got health promotion from CVTL

As mentioned in the Outcome 3 section above, the endline survey found 46% (CI: 40.4% - 51.4%) community members got sick in the last six months from only 25% (CI: 20.9% - 29.3%) at the beginning of the programme. Despite the prevalence increase in illness rate and challenges, there was increasing on people engagement with CVTL activities, especially in Health. 55% (CI: 50% - 61%) people received health promotion from CVTL compared to the baseline which was only at only 11% (CI: 8% - 14%). Additionally, 64% of people received health promotion from other organizations beside CVTL, such as government and NGOs (figure 9).

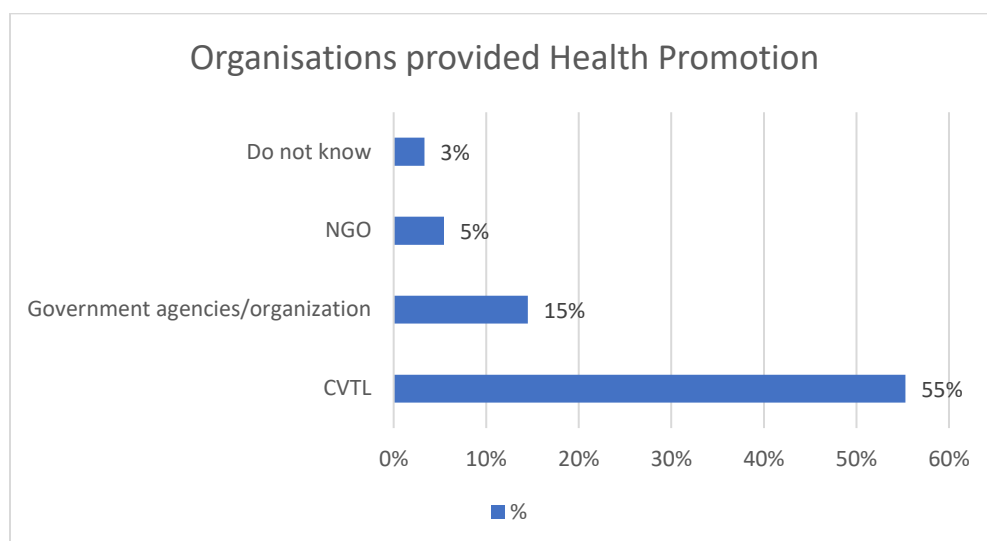


Figure 9. Organisations who Give Health Promotion

Knowing the challenges in health issues, the community applied their knowledge to prevent illness and maintain health by implementing hygiene, learning, nutritional, and medical activities in their daily life, as displayed in the table below (table 6). Most people practiced hygiene such as washing hands with soap and water regularly (94%), disposing of trash in proper bins (69%), and cleaning toilets regularly (57%). However, there were still a small number of people who ensured their family members got vaccinated (10%). This lack of medical practice could pose challenges in preventing illnesses that need to be addressed by enhancing people’s immune systems.

Table 6. Prevention to Illness and Maintain Health

Prevention to illness and stay healthy	Number of respondents answer	% of respondents answer
(Hygiene) Wash hands with soap and water regularly	312	94%
(Hygiene) Dispose trash in proper bins	228	69%
(Hygiene) Clean toilets regularly	190	57%
(Learning) Join health talks, healthy cooking class	114	34%
(Learning) Follow advice of health experts	103	31%
(Nutrition) Eat fruits and vegetables daily	111	34%
(Nutrition) Eat protein like fish, meat, eggs	97	29%
(Medical) Make sure family members are vaccinated	33	10%
Other	22	7%

**Output 3.6. Provision of water and sanitation - To improve access to safe water supply and sanitation facilities through provision of adequate and sustainable access to safe water**

Indicator	Baseline Value	Endline Value
% of community that has improved access to water and sanitation by the end of the program	89% of households could access safe water sources such as spring water, hand dug well, piping system, and borehole.	97% could access to water and sanitation (CVTL water facilities, hand dug well, borehole)
% Reduction in WASH related diseases in the target community by the end of the program	22% respondents identify diarrhea that is likely to happen in the community	23% respondents identify diarrhea that is likely to happen in the community
% of target community increased their knowledge attitude and practice toward good hygiene behavior	71% households have their own latrine	90% households have their own latrine

CVTL helped the community improve access to safe water through WASH infrastructure and hygiene promotion activities. The endline survey found that almost all respondents, 97% (CI: 94.9% - 98.7%) have access to water and sanitation (CVTL water facilities, hand dug well, borehole). This represented a slight increase from the baseline figure of 89% (CI: 85.5% - 91.7%).

The WASH intervention was aimed to reduce the prevalence of WASH related diseases in the community. Although there was an increase in WASH access and practice, at the end of programme, it was found that 23% (CI: 18.5% - 27.8%) of respondents still identified diarrhea as a likely occurrence in the area. This condition showed no significant change compared to the baseline that there were 22% (CI: 18% - 26%) at the beginning of the programme. In addition to diarrhea, the community faced various disease outbreaks during the last two years, as illustrated in the table below (table 7). Most respondents (51%) found malaria cases in their community. While WASH interventions may have prevented an increase in waterborne diseases, there is room for improvement to reduce the incidence of such diseases in the future.

Table 7. Disease Outbreak

Disease outbreak	Number of respondents answer	% of respondents answer
Malaria	169	51%
Dengue fever	123	37%
COVID-19	85	26%
Do not know	76	23%
Diarhea	76	23%
Measles	32	10%
Tuberculosis	32	10%
Skin diseases	23	7%
Respiratory Infection	13	4%
Other	6	2%
Cholera	5	2%

Despite the challenges in addressing health issues, CVTL and the community worked together to keep improving the knowledge, attitudes, and practices toward good hygiene behavior. One effective practice was supporting the community in becoming open defecation-free (ODF). The endline survey found that 90% (CI: 85.9% - 92.7) of the community had their own latrine at home. This is an increase compared to the baseline at 71% (CI: 66.3% - 75.1%). These results indicate that the WASH intervention brought about positive changes in the community.

Through hygiene promotions, there have been changes in how the community treats the water they consume daily. The diagram below (figure 10) shows that the majority now treat drinking water by boiling (88%) or filtering (85%) before consumption, while only 7% consume untreated water. This practice could contribute to community health, although there is still room for improvement to ensure that all individuals have adequate knowledge about treating water. Additionally, the community has demonstrated good practices in storing water, with most people opting to store water in jerry cans, water bottles, or thermoses (91%), and using buckets (58%) (figure 11).

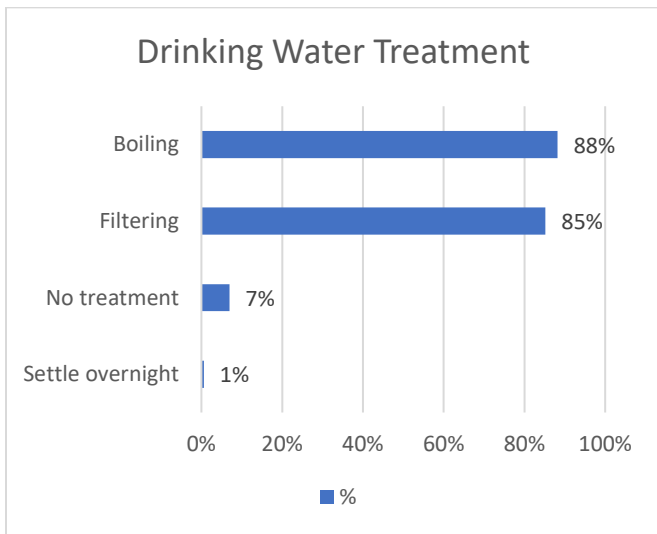


Figure 10. Drinking Water Treatment

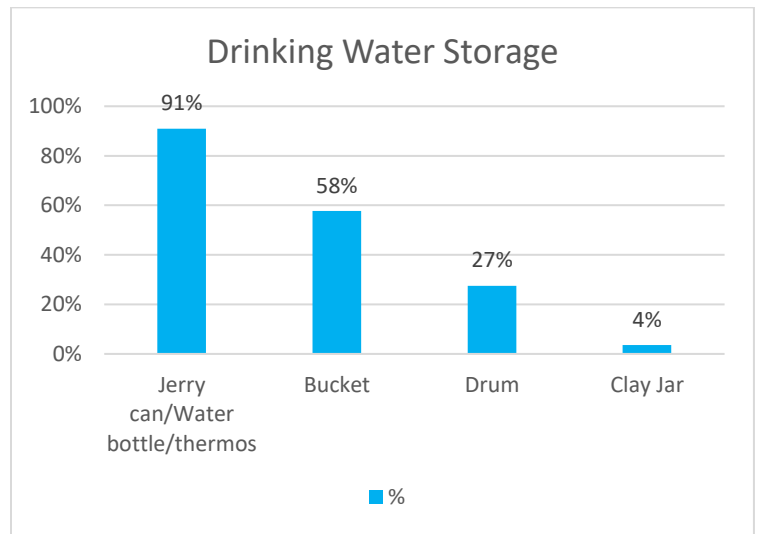


Figure 11. Drinking Water Storage

Another good hygiene behavior is handwashing. According to the survey, 97% of community members reported that they practice handwashing using water and soap (figure 12). Moreover, more than half of the community regularly engages in handwashing, including before eating (90%), after using the latrine (70%), after working (69%), before preparing food (60%), and before feeding children (53%). Only 2% of respondents indicated that they had not practiced handwashing yet (table 8).

Table 8. Timing of Handwashing

Timing of hand washing	Number of respondents answer	% of respondents answer
Before Eating	310	94%
After using latrine	232	70%
After Working	230	69%
Before preparing food	199	60%
Before feeding children	175	53%
After touching animals	99	30%
After cleaning baby	94	28%
Not Practicing Handwashing	7	2%
Other	0	0%

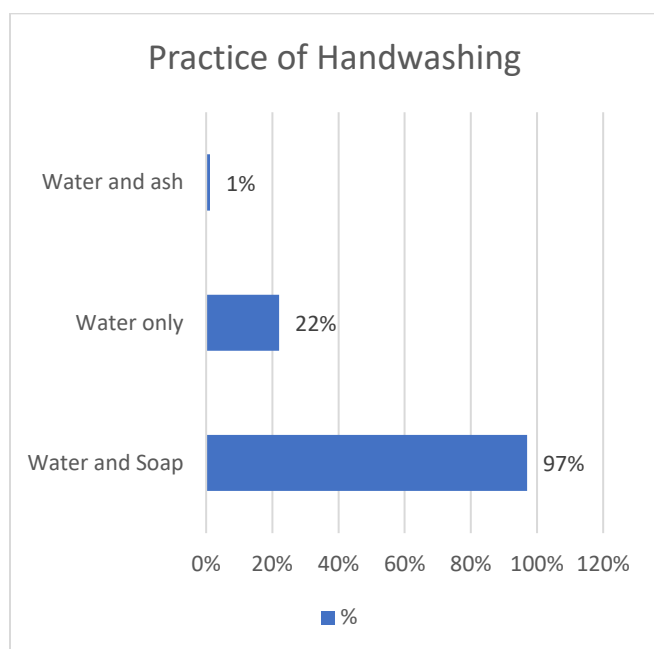


Figure 12. Practice of Handwashing

**Output 3.7. Suco Youth Engagement - Young people apply skills learned in safe, healthy, and resilient life workshop and become agents of behavioral change in the communities**

Indicator	Baseline Value	Endline Value
% of target youth increased their knowledge attitude and practice on health by the end of the program	56% of youth have good knowledge, attitude, and practice on health by treat the illness by giving common medicine or bringing to medical treatment (doctor, clinic, hospital)	56% of youth have good knowledge, attitude, and practice on health by treat the illness by giving common medicine or bringing to medical treatment (doctor, clinic, hospital)
% target community increased their knowledge attitude and practice protection, gender and inclusion issues.	33% community know that there are people with disability in their neighbourhood	29% community have family member with disability
# of target youth involved in the program as agents of change in the target community	30% youth are involved in activity or organization	84% youth are involved in activity or organization

Youth assistance had been one of the main focuses in the ICBRR programme. As integral members of the community, youth were expected to drive positive changes and make an impact within their communities. CVTL empowered youth to become agents of change by actively advocating for youth and community issues in their respective areas. Similar to the adult community, youth also received health promotion. At the end of programme, an endline survey revealed that 56% (CI: 49.2% - 61.8%) of youth could provide proper treatment to sick individuals by administering common medicine or seeking medical treatment from doctors, clinics, or hospitals. Although this percentage remained unchanged compared to the baseline at 56% (CI: 46.4% - 64.8%), the noteworthy observation is that youth demonstrated a higher level of knowledge and capability in treating sick individuals compared to the adult group. The

survey indicated that only 25% of the adult community were able to provide adequate treatment for sick individuals. This suggests that youth possess the capacity to educate their community and effect change in the future.



*Photo 5. Youth health training in Caicasa Village*

Through the endline survey, youth were asked about their opinion on involving youth, women, and people with disability in community activities. The survey found that most of them strongly agree (16%) and agree (65%) with the idea of involving them (figure 13). They shared several reasons supporting their stance, including the rights of these groups to participate, the need to enhance their knowledge, skills, and experiences, the importance of social interaction with peers, and the promotion of gender equality. However, there was a small percentage of youth who disagreed (10%) or strongly disagreed (4%) with the involvement of these groups. Their reasons included beliefs that youth are not as important as adults, that youth have limited understanding of community activities, that women should primarily focus on domestic duties, and that people with disabilities are unable to participate due to their physical limitations.

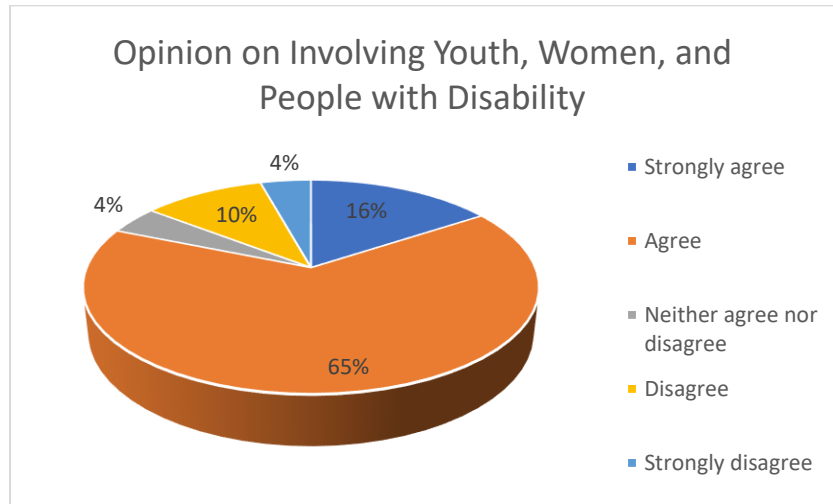


Figure 13. Opinion on Involving Youth, Women, and People with Disability

As agents of change in the community, youth were encouraged to participate in positive activities facilitated by CVTL or other organizations. By the end of the programme, 84% (CI: 78.4% - 87.9%) of youth were involved in activity or organization. This increased significantly from 30% (CI: 22% - 39%) before the programme intervention. Most of youth (63%) joined school activities and few of them (3%) join other activities such as martial arts (figure 14).

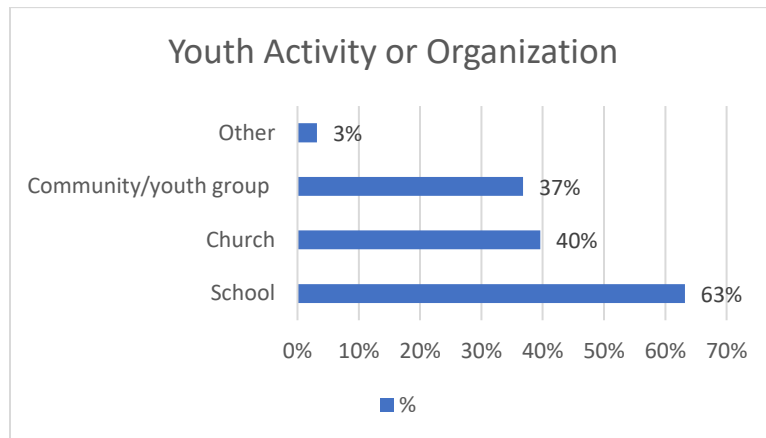


Figure 14. Youth Activity or Organization

### D.2.2. Effectiveness on Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention

The effectiveness of DRR, CCA, and Livelihood interventions vary across different activities. The baseline value of the ICBRR indicated significant gaps in the community knowledge (51%) related to EWS, disaster risk management, and income levels. To address those, CVTL implemented different activities such as training to 109 community volunteers on Disaster Risk Reduction (DRR) with substantial improvements in knowledge levels, as evidenced by a notable increase from an average score of 3 during pre-test to a score of 7 on post-test. The ICBRR strategy on the recruitment and training of community volunteers determined the overall success of the programme. On average there were 20 active community

volunteers from diverse groups including the *suco* (village) and *aldeia* (sub-village) leaders showing a reasonable interest and engagement. However, they also faced challenges like lack of incentives and distance between their home and venue of activity. CVTL also helped to establish community based early warning system (CEWS) and conducting door-to-door education reaching 3,659 households and DRR education to 232 students.

The ICBRR programme also aimed to increase community income through livelihood activities, such as chicken rearing, horticulture training, and saving and loans group. However, challenges arose as the community expressed experiencing chicken mortality and delay in horticulture activities due to seasonal changes. The Manufahi and Ainaro Department of Agriculture explained that chicken mortality is due to an endemic Newcastle Disease, emphasizing the importance of a comprehensive approach to poultry management for sustainability including refresher training, food, vaccines, care/household treatment, and coop management for CVTL future considerations.

The saving and loan activities in Tutuluro was highlighted as an effective intervention with the saving and loan group, where capacity buildings and monitoring led to a functional saving and loan group whose members have benefited with increased financial literacy and provided access to a safety net. CVTL stakeholder *Luta ba Futuru* (LBF) raised a noteworthy consideration regarding their closed collaboration for this activity as their partnership appears to be primarily built on personal connections. The absence of formal agreement between two organizations could potentially impact the future relationship. As both organizations face insufficient budgets to maintain regular monitoring beyond the programme timeline which is crucial in providing the required technical support for the saving and loan group in Tutuluro, LBF suggested CVTL to help establish connection between the Saving and Loan Group to a municipality cooperative. This broader financial network can enhance the Saving and Loan group to additional resources and valuable support mechanisms to support their sustainability.

Some collected testimonies from the communities indicated increased knowledge and skills, however the intended goals of household's income improvement remain unrealized by the time of this evaluation. CVTL noted several challenges including internal finance and procurement lengthy administration process. CVTL branch added that the absence of local vendors with the capacity to meet quantity and administrative requirements has significantly affected the procurement process. CVTL NHQ explained 2023 as a political year in Timor-Leste and impacted the program implementation timeline (chicken rearing supposedly in April 2023 was delayed to the second semester of 2023) as CVTL were unable to schedule meetings with the national stakeholders and community. Moreover, the country was overwhelmed with elections, faced changes in policy and leadership which influenced the operational of development initiatives such as the ICBRR programme. CVTL acknowledged the complexities of the issue in the community and external challenges, including geographical barriers to remote communities, especially during rainy season that was potentially to hazard.

In addition to the financial management, CVTL also faced a challenge in human resource capacity and workload. The CVTL Secretary General, in a KII noted a lack of focused attention on the ICBRR programme among staff, both at NHQ and Branch levels, indicating a need for greater understanding and alignment with the programme objectives. To address this, the CVTL External Relations Coordinator highlighted the need to recruit a dedicated project manager to enhance project oversight, monitoring, and reporting for the future ICBRR or other programming. CVTL also emphasizes the importance of further hands-on support and clarification of roles and responsibility from the IFRC.

To manage the programme implementation, coordination at the NHQ was facilitated through a regular meeting to ensure effective programme implementation. The regular meeting was conducted monthly and quarterly coupled with field monitoring to enhance skills and competencies due to real-time insight to the ICBRR progress and challenges.

In terms of capacity building, CVTL also touched on the crucial elements of project management such as Planning, Monitoring, Evaluation, and Reporting (PMER) and Information Management training with the support of IFRC. Those capacity buildings were conducted especially at the beginning of the programme. According to CVTL, these capacity buildings provided staff and volunteers with an opportunity which resulted in an increased self-worth as the rate of unemployment is high and these activities gave them a sense of purpose while building confidence. However, the challenges persist, where CVTL Branch volunteers had awareness gaps in their involvement with the community (in such case where training was only limited for information dissemination). CVTL Branch also sees the need for refresher training to update and reinforce knowledge, skill, and competencies of individuals from the initial training to sustained progress.

### **D.2.3. Effectiveness on Health and WASH Intervention**

A significant achievement was reported as an increase of community access to water and sanitation, indicating tangible improvements in daily life through effective WASH interventions. The impact extends to the youth, with a notable 65% receiving promotion or dissemination related to DRR and health. This underscores the success of educational components in influencing positive behavioral changes within the community.

Observations from Manelobas Primary School further highlighted the programme's effectiveness. Enhanced understanding and behavioral changes among students, successful integration of health education and disciplinary principles, and a collective commitment to personal hygiene signified a positive impact on the school culture and the overall well-being of students. However, challenges related to handwashing and hygiene due to water scarcity were acknowledged at the school environment. The recommendation to schedule activities on weekends revealed a pragmatic approach to address logistical constraints, emphasizing the need for adaptive strategies to optimize the programme's impact. Additionally, schoolteachers, particularly those in Tutuluro and Aituto, had expressed their worries regarding the need for children to maintain consistent handwashing and hygiene practices at school. This concern arose from the inadequate provision of water storage facilities and the presence of malfunctioning toilets, which remain unrepaired in government-operated schools.



Photo 6. Youth Health dissemination at school

For the WASH infrastructure interventions in the community, though there were some positive outcomes, there were also notable observation findings that are worth highlighted for better future outcomes. The assisted household selection for household latrine construction should be aligned with the objective of reducing health risk rather than just upgrading the existing facilities. Therefore, to mitigate, selection criteria should be consulted with the community which information is accessible publicly. Furthermore, on the communal water system, community leaders and GMF could be more proactive on monitoring the pipeline to prevent illegal connection in the future as the risk is likely to happen.

Despite those challenges, in conclusion, CVTL's health and WASH interventions demonstrated effectiveness through positive behavioral changes, holistic integration into educational institutions, and improvements in sanitation practices. Addressing challenges, particularly regarding water scarcity and selection criteria in family latrine construction are vital for a sustained success to increase community participation that showcase a commitment to a continuous improvement and impact optimization.

#### D.2.4. Effectiveness on Youth Intervention

The ICRR programme had an effective impact for the youth by encouraging youth engagement in DRR and Health activities where they showed positive changes to be more vocal and participative. The programme also provided musical instruments and sports equipment, facilitating activities such as drama and musical performances, sports competitions, and community events during Christmas and New Year. The youth also expressed their interest in expanding their capacities in music via songwriting. However, capacity building is still needed in areas of life skills such as sewing, mechanics, and public speaking. Regarding the CVTL policy, youth is categorized as people aged 12-25 years old that is divided into Youth Junior (12–17-year-old) and Youth Senior (18-25 years old). To ensure the intervention effectiveness, CVTL should consider the alignment of programme activities with each age group's needs.

The youth intervention implemented within the community had yielded notable improvements in youth behavioral practices. The final evaluation findings, obtained through Key Informant Interviews (KII) with Ainaro Branch Volunteers, shed light on the transformative impact of the programme. It was revealed that before the youth program implementation, many youths were observed to be under the influence

of alcohol and showed misbehavior. Through the sustained efforts of volunteers and staff in executing planned activities gradually led to positive shifts in the behavior of the targeted youth within the communities. Over time, these youths demonstrated increased willingness to engage in structured youth meetings, participated in health-focused sessions, and actively involved themselves in various positive activities.

Furthermore, positive changes were also experienced by the community volunteer. According to a community volunteer in Manufahi through an FGD, their public speaking abilities had significantly enhanced. The volunteers no longer experienced anxiety when speaking in the crowd. Even in situations where they may not be warmly received by the community during door-to-door visits, the training provided by CVTL had equipped them with the composure to remain calm and articulate their intentions in a composed manner.

Those transformations underscore the effectiveness of the youth intervention in fostering constructive behavioral changes among community youth and also volunteers. It serves as a testament to the importance of consistent engagement and targeted programming in addressing societal challenges and promoting positive youth development.

Expanding on this, it is crucial to recognize the broader implications of such interventions beyond immediate behavioral changes. Engaging youth in constructive activities not only contributes to individual development but also fosters community cohesion and resilience. By providing youths with opportunities for meaningful participation and empowerment, it paved the way for a brighter and more inclusive future for the communities.

## D.3. Impact

### D.3.1. Programme Impact to CVTL at National Level

The second phase of the ICBRR programme had significantly contributed to enhancing CVTL's standing in its role as an auxiliary to the public authorities of Timor-Leste. Over the course of two years, the programme has shown tangible results fostering not only trust from local communities and municipal governments but also effecting positive change in the lives of the most vulnerable in some remote areas.

CVTL's flagship ICBRR programme, reaching remote areas and driving positive transformations, was appreciated by the government. This initiative had positioned CVTL as a key stakeholder within the Disaster Risk Management networking group. The programme strategically engaged youth as volunteers and leaders in the community programmes, ensuring sustainability and leveraging their recognized influence within the local communities.

The localized capacity of the National Society was a key highlight of the project outcomes, specifically, in project Outcome 1 that ICBRR programme had capacitated staff and volunteers at both national and branch levels. The capacity-building initiatives were crucial for the successful implementation of the ICBRR programme. The technical skills delivered in the ICBRR programme include the risk assessment approach, Community Based Health and First Aid (CBHFA), WASH, PMER, and communication training. These trainings did not only improve CVTL's capacity but had been effectively utilized to support the Civil Protection Authority (APC) during emergency response in Ainaro and Manufahi Municipality. The expertise

of CVTL staff and volunteers had positioned them as the primary and preferred partners of the APC in responding to emergencies and early warning awareness raising at both the national and municipal levels.

In conclusion, the significant impact of the ICBRR programme was evident in the endorsement from the Cabinet of the Prime Minister (SASCAS), which had expressed interest in investing in the programme's sustainability. The Prime Minister Cabinet had soft-pledged to allocate funding for the ICBRR programme, underscoring the recognition of the programme's importance.

### **D.3.2. Programme Impact to CVTL at Local Level**

CVTL Branches had increased visibility and influence with the government and within the sectors in the municipal level through active participation in sector coordination meetings with the local government institutions and NGOs who were operating in the same area. The programme strengthened the collaboration between CVTL Branch with the local government and the community. The programme demonstrated positive short-term outcomes, for example the successful facilitation of Saving and Loans Group training for the community. To enhance a long-term impact, addressing gaps such as the need for formal agreements and coordination with government entities should be improved for a more sustainable and effective programme.

The ICBRR officer at the branch level closely coordinated and connected between CVTL and community volunteers to implement the programme activities at village and municipal level. There were some good lessons learned between CVTL Branch in Ainaro and Manufahi. The CVTL Branch of Manufahi exhibited strong ownership to effective leadership and staff, while in Ainaro they focused on maximizing volunteer capacity despite staff limitations. Both strategies could be carried out to implement the programme well in the community. Moreover, enhancing engagement with communities not only supported CVTL branches but also elevated their reputation, notably in the eyes of the public authorities.

As strengthening local capacity, staff and volunteers at branch level were also facilitated with some capacity buildings or trainings such as PMER training, Community Engagement and Accountability (CEA)/Risk Communication and Community Engagement (RCCE) training, and EVCA training. Those capacity buildings had increased staff and volunteers' knowledge to transfer to community volunteers at village level.

### **D.3.3. Programme Impact to Community**

On the community side, community members had significantly benefitted from the programme through the access of water which had enabled various activities like building latrines and practicing personal hygiene. Improved water access has allowed community members to wash clothes and bathe regularly, addressing challenges posed by a distant river source, and aids in coping with the prolonged drought affecting traditional corn farming, enabling irrigation for other crops while discouraging open burning practices. Other interventions through door-to-door visit and assistance also enhanced community knowledge.

Notable changes involving the youth also include improved sanitation and youth engagement in village activities. The impact of the programme on youths was evident, particularly through activities like sport and music. Feedback gathered indicated that youths actively participated in weekly sport matches and inter-village tournaments, fostering social engagement and interaction. Additionally, the desire for more musical instruments across all villages enhanced the groups' enthusiasm to expand these activities.

However, improvement may still be required considering recommendation from Phase 1 of the project highlighting the need to increase empowerment of youth by strengthening the institutionalisation of youth groups, enabling them to drive behavioural change. Furthermore, there are areas identified for improvement, such as children's education and health awareness, particularly focusing on sexual health. Schoolteachers and youth leaders note concerns about school dropout rates and teenage pregnancies, emphasizing the need for increased awareness. *“Being in remote areas, community members do not see the importance of going to school. It is hoped that CVTL will do more information sharing on the importance of education to both parents and children. Also hope CVTL will continue awareness sessions on sexual health for students as they are not exposed to these topics.”* Schoolteacher, Tutuluro.

#### D.4. Coherence

In evaluating the coherence of the programme in DRR and Livelihood interventions, CVTL had demonstrated some positive instances showcasing the successful coordination both internally and externally throughout the design and implementation period.

Within the internal workings of CVTL, coordination efforts were conducted regularly (monthly and quarterly meeting) to facilitate communication and collaboration between intervention sectors and levels of the organization. These regular meetings served as a platform for sharing information, discussing progress, and addressing challenges, ensuring a unified and integrated approach to program implementation.

At the community level, CVTL conducted consultation through community-based risk assessment approach known as VCA through various methodologies and tools to assess community's complex challenges. CVTL facilitated the development of CAP process which agreed on and consolidated the community again during the review process of said Community Action in 2023. Consultation and engagement occurred regularly through field and monitoring visits. CVTL had established a solid relationship with the local authorities and community leaders in each village, which was useful in coordinating the activities, especially for ones that required mass community participation. In addition, community meetings were also held regularly to promote shared understanding of program activities.

Approach to external coordination at the municipal level began with ICBRR programme dissemination to the key stakeholders. Many of the stakeholders showed great interest in working with CVTL. This was apparently due to CVTL strong credential as auxiliary of the public authorities and previous work on disaster response and preparedness which had contributed to stakeholders' enthusiasm for ICBRR programme. Regular communication with other organizations occurred during a regular meeting facilitated by local governments, that enable to update any progress, prevention of overlapping interventions, and efficient collaboration.

The evaluation found effective partnership and coordination by CVTL Branch varied across municipality and intervention issue. CVTL Ainaro and Manufahi Branch had established collaboration with the

Municipal Agriculture Department and Veterinary for capacity-building initiatives in horticulture and poultry at the community level. However, partnership appeared stronger and more effective in Ainaro municipality compared to Manufahi as there was a lack of awareness on the ICBRR intervention progress and impact. Ainaro stated *“The Agriculture official is involved through regular coordination, joint monitoring, and collaboration. What needs to be done better is CVTL should consult earlier before the intervention to ensure the relevancy of intervention and maintain coordination with the stakeholders at all levels”*. Manufahi Agriculture also calls for a stronger partnership instead of relying on individual relationships.

While coordination with Ainaro Municipality Health Services occurred at the beginning of the programme, there was a gap in ongoing updates and coordination regarding field-level activities throughout the implementation period. Whereas the Manufahi Health Department was currently uninformed about CVTL's work but expressed a keen interest in working closely, especially in remote areas that their department encounters difficulties accessing.

Both Service for Support to Civil Society and Social Audit (SAS) and the Water Department see CVTL as a valuable partner, filling gaps in areas the government has not reached. The collaboration was characterized by good communication that worked effectively to address local needs through a regular WASH Forum where local stakeholders attended.

According to APC in Manufahi, CVTL is one of their most prominent partners regularly present at the coordination meeting at the municipal level, as they exemplified APC participation in DRR training in Caicasa village. In Ainaro, APC acknowledged DRR and emergency response initiatives have positioned CVTL effectively to engage with communities, citing CVTL's invaluable contribution during the emergency response in July 2023. Despite a shortage of human resources, APC Ainaro accomplished successful rapid assessment and distribution of relief aid in collaboration with CVTL Branch. The APC Ainaro expressed their plans for DRR activities with CVTL Ainaro Branch with particular focus on EWS awareness.

Collaboration with stakeholders is often fostered through personal connections and a shared passion for community development. There is a need for a more institutional approach with stakeholders as suggested by different government authorities and LBF who partnered with CVTL on Saving and Loans activity. LBF further recommended CVTL to set aside budget for coordination and host the meeting for the government and other organization to specifically update and promote the ICBRR programme for collaboration on sustainability, replicability, and scalability with the local stakeholders. With regards to their coordination effort, CVTL Branch expressed their challenge in the coordination is particularly due the lack of understanding of budgeting purpose and the use of it at the municipal level.

The findings revealed a notable gap and variation with national stakeholders. CVTL displayed a strong partnership with the Government-led Water and Sanitation Cluster. CVTL's Water and Sanitation unit had fostered communication with the National Authority of Water and Sanitation (ANAS, *Autoridade Nacional Agúa e Saniamentu*), and further strengthened with CVTL's active participation in the Health working group, in which detailed plans of ICBRR interventions at the community level, especially on the provision of safe water and sanitation services to the most vulnerable families across four targeted ICBRR communities, had been shared at the beginning of the programme. CVTL also successfully obtained approval from ANAS on the detailed engineering plans of gravity-fed water systems in the four targeted villages. Unfortunately, during the evaluation process, the evaluation team was not able to secure a

schedule with ANAS due to the restructuring of the government, leading to the redundancy of the authority replaced by the National Directorate of Water and Sanitation.

The Ministry of Health (MoH) expressed concerns over the lack of well-established communication and coordination and highlighted the limited sharing of activity reports, and lack of update on the number of beneficiaries and coverage area. MoH highlighted that during the life of the program, they had never participated directly in the ICBRR programme activities. This is particularly significant given the Ministry's obligation to monitor and provide guidance on health intervention programme across the country to ensure contribution to GoTL Strategic Plan 2011-2030. Similar responses were also expressed by APC at the national level who noted the lack of information and participation in the ICBRR activities. Both stakeholders suggest CVTL adopt a structured approach to regular coordination with stakeholders to enhance the overall effectiveness of the program and sustainable positive impact in the community.

According to CVTL, relationship maintenance with the national stakeholders has been difficult since the current government is applying performance review per 120 days for all the authorities (ministries). A representative further explained that ministries that are not performed and cannot achieve the target within 120 days will be cut off. This is added with conflicting priorities with the government schedule in accepting CVTL's invitation which often subject to postponement.

## **D.5. Sustainability and Connectedness**

### **D.5.1. Sustainability and Connectedness on Disaster Risk Reduction, Climate Change Adaptation, and Livelihood Intervention**

CVTL's strategy to ensure sustainability on DRR, CCA, and Livelihood was by doing community volunteer recruitment and capacity building through trainings, simulation, raising awareness, etc. The community volunteers expressed confidence that the acquired knowledge and skills on DRR, CCA, and Livelihood will remain relevant and essential within the community. This suggests potential replicability and scalability of knowledge and skills sharing beyond the current programme's scope. The programme interventions had shared commitment and sense of ownership in the community.

DRR, CCA, and Livelihood should be maintained integrated. While there were positive benefits reported from the Livelihood intervention, communities also revealed sustainability concerns. Climate uncertainties and seasonal changes can pose risk to farming by affecting community's planting schedules and subsequent yield. Additionally, these climate conditions may create favorable environments for the spread of diseases, impacting the viability of chicken rearing initiatives.

During the programme, CVTL found difficulties in getting the local government to invest in the community groups. This difficulty may constraint sustained community development. This sentiment was further highlighted by CVTL Branch who saw the need to advocate for government or external support to ensure continued support for the community, especially for vulnerable groups.

Despite the challenge faced by CVTL in building partnership with the government, a good collaboration had been successfully maintained in Ainaro. Through a KII, the Department of Agriculture in Ainaro official shared that the government is aware that organizations such as CVTL have limited time frame and funding. In response to this, they expressed their plan to mobilize technical officer or field facilitator as they emphasize the need for continuous technical guidance, monitoring, and considerations for sustainability

indicate efforts to ensure the programme's sustainability. However, the local government, especially APC in Ainaro suggested a proper programme handover to the local government.

By the end of the implementation year, handover activity was still on planning and would extend beyond established timelines. CVTL's Secretary-General emphasized the ongoing struggle to formulate a cohesive exit strategy, considering the programme's time-limited nature. He further highlighted the complexities of their work and the need to identify and communicate proper strategies for sustainability and exit strategy at the beginning of the programme.

#### **D.5.2. Sustainability and Connectedness on Health and WASH Intervention**

The exit strategy for ICBRR Phase 2 primarily centered on the sustainability of Water, Sanitation, and Hygiene (WASH) intervention, showcasing a strategic partnership with the local government. CVTL's adoption of the government's standardized design for water tanks and gravity-fed water systems approved by National Authority of Water and Sanitation (ANAS, *Autoridade Nacional Água e Saniamentu*) ensures the adherence of the government guidelines. This strategy has enabled an easy hand-over process and transition into government's maintenance and management, therefore ensuring its sustainability.

Throughout the programme, CVTL coordinated efforts with the local government and established the GMF group, a collaborative effort involving community members and local government officials. This group is positioned to play a pivotal role in planning, monitoring, and maintaining the completed WASH infrastructures beyond the programme's conclusion in 2023. This collaborative approach ensured that the community and local authorities are actively engaged in the long-term success of the WASH interventions.

The sustainability of health and WASH practices is reinforced by the increase in community knowledge, attitude, and practice toward good hygiene behavior. The community's confidence in the sustainability of Water Infrastructure, evidenced by reduced workload in water fetching, further underscores the programme's effectiveness. One notable challenge found in involving people with disabilities and sustaining the active participation of marginalized individuals, highlighting unintentional consequences in the selection criteria for WASH sectoral interventions.

To enhance sustainability and connectedness, the evaluation finding advocates for continuous feedback and adjustments based on real-time challenges. This proactive approach acknowledges the importance of ongoing assessment and adaptation to ensure the interventions align with the community's evolving needs. In summary, the ICBRR Phase 2's sustainability was marked by a strategic exit strategy, community involvement, increased knowledge, and a commitment to addressing potential gaps for sustained success in Health and WASH initiatives.

#### **D.5.3. Sustainability and Connectedness on Youth Intervention**

Youth representatives from the various communities agreed that they need to work as a community to sustain what had been initiated by CVTL. Youth groups are confident in maintaining the sports and musical activities. The youth are well united and can continue the coordination within the group and with other groups at village level. As part of community, the youth groups were actively involved in DRR efforts, committed to ongoing reminders for the community's vigilance, with regular monthly meetings organized

by the existing youth group structure established. Youth also actively participated in the groups, where their voices were heard without gender-based distinctions, engaging in diverse activities, but facing the challenge of varying interests. Nevertheless, although the youth representatives are confident to continue the activities, they need to build their leadership skills to have better opportunities amongst villagers as the agent of change.

## E. Challenges

Throughout the program implementation and its achievements, CVTL and communities faced several challenges:

### Environment and Changing Climate

1. Four targeted villages are in remote areas which have limited infrastructure such as well-paved roads, internet access, and electricity. In the rainy seasons, the areas were prone to floods and landslides that could block access to the village. These challenging conditions make it difficult for CVTL staff and volunteers to reach the communities and assist in implementing planned activities.
2. Based on information gathered from interviews with Agricultural Officials at the municipal level and community members, it was noted that seasonal changes also contributed to outbreaks of viruses, which adversely affected farming and poultry activities. This helps to explain why the chicken rearing initiatives implemented by the community groups mostly failed.

### Community Interest and Programme Deliverance

1. Through the delivery of knowledge via direct communication methods such as door-to-door socialization, which included the use of visual posters for DRR campaigns, the community raised concerns about the effectiveness of these posters. They expressed greater interest in interactive activities such as simulations or art performances for better engagement and understanding.
2. On health, community members, especially mother groups, were trained in nutrition or cooking classes. These activities aimed to empower mothers to provide proper food and nutrition for their families. The limited availability of local ingredients and the distance to the local market posed significant challenges, impeding their ability to prepare foods as intended.
3. WASH intervention was considered appropriate and relevant; however, challenges remained, especially regarding its intervention in schools. Issues such as water scarcity, inadequate provision of water storage facilities, and malfunctioning toilets, posing challenges for students to practice hygiene at school.
4. The community showed interest in joining CVTL activities; however, they also faced some challenges, such as the lack of incentives, especially considering that participants sometimes needed to travel long distances from their homes to the activity venues. Additionally, access for people with disabilities or marginalized community members was found to be difficult, despite them being considered as the most vulnerable.
5. CVTL has a policy defining youth as individuals in the age group of 12–25 years old. Within this age range, there have been diverse interests among group members. While the assistance provided focused more on sports, art performances, and material dissemination, it was challenging to address the needs of all youth in the village. Additionally, there was difficulty in gathering youths in the village, as some were away for tertiary education or employment in Dili or other municipalities, requiring them to leave their village and youth groups.

## Partnership and Socio-economic

1. CVTL was not the only organization operating in the community, leading to potential competition with other organizations involved in similar initiatives. The competition could include funding, community support, and project implementation opportunities. This competition could encompass aspects such as funding, community support, and project implementation opportunities. With multiple organizations trying to address community needs and support, there was a dynamic environment where each organization sought to distinguish itself and demonstrate its effectiveness. Furthermore, coordination with multiple stakeholders could cause conflict of interest where each party had their own priorities, objectives, and approaches, making it challenging to align efforts and resources effectively.
2. Working with the public authorities required CVTL's adaptability with the political situation or government's policy. The government's 120-day review program aimed to restructure any underperforming government institutions. This often resulted in administrative and personnel restructuring, potentially disrupting program coordination and established relationships with certain government officials.
3. During the programme, CVTL found difficulties in getting the local government to invest in community groups. Moreover, the absence of formal agreement between CVTL and other stakeholders including government agencies could potentially impact their commitment and engagement in the future.
4. During the programme implementation, Timor-Leste was in a transition phase from COVID-19 pandemic to endemic status while experiencing a political transition nationally because of the presidential election which affected the national economy. This condition affected the community's livelihood and reduced the ability to cope with any hazard or crises.

## Human Resources and Programme Management

1. The quantity, capacity, and workload of CVTL staff and volunteers significantly impacted all program interventions. Both at the NHQ and Branch levels, CVTL staff were limited in number, requiring them to manage multiple activities while also building the capacity of volunteers and communities. Additionally, community volunteers still required assistance and capacity building from CVTL, especially when initiating new activities.
2. Internal challenges within CVTL included issues related to procurement processes and budget transparency. Lengthy procurement procedures & lack of understanding of the proper procurement process have resulted in delays, mostly due to the timely acquisition of necessary resources and materials for projects and operations. Additionally, concerns regarding budget transparency may stem from a lack of clarity or accountability in how funds were allocated, spent, and reported.
3. The community feedback was not documented well due to the absence of an established feedback mechanism within CVTL. Despite maintaining a good relationship with the community during the program implementation, some community needs were not adequately met. For instance, there was a lack of documentation regarding the need for water at schools beyond health promotion, inclusion of marginalized individuals in community activities, and the need for capacity building among youth. These could have been documented and responded effectively if CVTL had a proper feedback mechanism in place that allowed the community to freely express and suggest input.
4. The delays in procuring resources for continuing the chicken rearing livelihood activities into the program's second year, along with the program's short duration, have hindered the proper timing for assessing any income generation or improvement resulting from those activities. These activities should have been initiated earlier in the program to allow for adequate evaluation.

## F. Lessons Learned

From the whole process of ICBRR implementation and evaluation process, looking at the success and constraints, there are some lessons learned that CVTL and other related stakeholders could take, including:

### Environment and Changing Climate

In terms of building community resilience, community preparedness to face upcoming hazards is essential. Given that the community areas are prone to frequent hazards, a more comprehensive community-based early warning system approach is useful and necessary.

### Community Interest and Programme Deliverance

Through the programme, it is recognized that sustainability could be achieved by empowering communities to take ownership of initiatives and fostering collaboration with the local government to promote greater accountability, relevance, and long-term sustainability. This can be shown by WASH infrastructure with the formation and capacity building GMF (water committee) as a strategy to increase community ownership and sustaining the practices of hygiene and sanitation.

### Partnership and Socio-economic

As shown by the partnership built with some stakeholders, continuous communication with the municipal and national level is essential. The evaluation has highlighted that when coordination mechanisms are firmly established at the municipal level, they contribute to programme's success. This partnership fosters alignment of goals, sharing of resources, and mutual support, all of which are critical for the sustained impact of the programme.

### Human Resources and Programme Management

1. Due to the limited number of staff and volunteers that affected the workloads, it seems important to assign a dedicated project manager to help oversee the day-to-day operation of the ICBRR.
2. An important lesson learned revolves around the planning of schedules and the precise targeting of objectives. By scheduling activities and setting clear and achievable objectives, CVTL could enhance efficiency, maximize resources, and ensure alignment with overarching goals. Otherwise, when the scheduling and objective setting was not prepared well it could affect irrelevant intervention.
3. A significant lesson learned emphasizes the importance of fostering collaborative efforts between different units within CVTL to effectively manage programs. For example, the Youth unit would coordinate with the health unit to provide support to youth groups in disseminating health information. Additionally, the DRM unit would offer training or DRR-related materials to capacitate youth groups in promoting community resilience. This collaborative approach facilitated the sharing of progress, the identification of synergies, and the mitigation of potential challenges. By cultivating a culture of collaboration and open communication among units, it could result in more coordinated, cohesive, and impactful program management.

## G. Recommendations

Based on the evaluation findings, challenges, and lessons learned found, below are recommendations suggested for future programming:

No.	Challenges/Findings	Recommendations	Priority	Responsible Party	Timeline
<b>Environment and Changing Climate</b>					
1.	Programme implementation in remote areas which have limited infrastructure and vulnerability to hazards	Develop an agile program that can adapt to changing conditions and unforeseen challenges. This may involve incorporating contingency plans, alternative strategies to mitigate risks and ensure program continuity.	Medium	CVTL Senior Management	Mid-term
2.	Seasonal changes can lead to viral outbreaks that adversely affect agriculture and livestock.	Integrate climate-resilient agriculture practices and livelihood diversification in their programming.	High	DRM unit	Short-term
<b>Community Interest and Programme Deliverance</b>					
3.	Ineffectiveness of visual poster using in giving dissemination	Integrate more interactive and engaging approaches that actively involve the audience. This could involve organizing workshops, seminars, art performance or group discussions where participants can ask questions, share experiences, and interact with the material being presented	Medium	CVTL all programme unit (DRM, Health and WASH, Youth)	Long-term
4.	Limited availability of local food ingredients and challenges in accessing local markets for nutritious food	Coordinate and consult closely with the local governments on alternative sources of nutritious foods beyond traditional ingredients available locally and can thrive in home gardens or small-scale farming.	High	DRM and Health and WASH unit	Short-term
5.	Water scarcity, inadequate provision of water storage facilities, and malfunctioning toilets that challenged the	Collaborate with local government agencies, non-governmental organizations, and community stakeholders to mobilize resources, expertise, and support for improving water and sanitation infrastructure in schools.	High	CVTL Senior Management, Health and WASH unit	Mid-term

No.	Challenges/Findings	Recommendations	Priority	Responsible Party	Timeline
	students to practice hygiene at school.				
6.	Less participation from the community due to lack of incentives, distance/hard access, and disability.	Applying PGI principles to actively engage and accommodate vulnerable groups, fostering an environment where their voices are heard, their needs are addressed, and their contributions are valued.	High	All CVTL programme unit (DRM, Health and WASH, Youth)	Long-term
7.	Youth activities could not fully address the diverse needs of all youth in the village, given their varied interests. Moreover, gathering youths in the village is challenging due to many being mobilized elsewhere for study or work commitments	Considering CVTL's policy categorizing youth as individuals aged 12-25 years old, interventions should be tailored to each age group. For instance, school-aged youth and those who have graduated may have different interests and needs. Older individuals could benefit from practical life skills training to prepare them for livelihood options, such as computer courses, sewing courses, or entrepreneurship. Conversely, younger groups could be engaged through talent exploration approaches like sports and music.	Medium	Youth unit	Long-term
<b>Partnership and Socio-economic</b>					
8.	The potential conflict due to presence of other organizations in the targeted areas.	Collaborate with other organizations where possible while also ensuring its unique contributions and impacts to be recognized and valued by the community. To minimize potential conflicts, CVTL should initiate or actively participate in a regular meeting among organizations to keep coordinating and collaborating where it was possible.	Low	CVTL Senior Management CVTL programme unit (DRM, Health and WASH, Youth)	Long-term
9.	Government regulation and political issue could cause policy changes and administrative restructuring which can disrupt CVTL	Engaging in proactive advocacy efforts to influence the government's support for the objectives and continuity of CVTL programs. CVTL should establish relationships with government officials, legislators, and key stakeholders to effectively communicate	Medium	CVTL Senior Management	Long-term

No.	Challenges/Findings	Recommendations	Priority	Responsible Party	Timeline
	programme implementation and coordination.	priorities, highlight program impacts, and advocate for policy reforms that foster an enabling environment for community development initiatives.			
10.	CVTL found difficulties in getting the local government to invest in the community groups.	Develop a more comprehensive exit strategy for the program and communicate it to all stakeholders to ensure awareness and preparedness for the handover process of groups, facilities, etc., to existing partners.	High	All CVTL programme unit (DRM, Health, Youth)	Long-term
11.	Absence of formal agreement between CVTL and other stakeholders including government agencies could potentially impact their commitment and engagement in the future.	Encourage and prioritize the institutionalization of coordination mechanisms by formalizing channels for dialogue, collaboration, and decision-making at both municipal and national levels.	Medium	CVTL Senior Management	Mid-term
<b>Human Resources and Programme Management</b>					
13	CVTL staff and volunteer's quantity, capacity, and workload affected all programme interventions.	Continue capacity building for CVTL staff, particularly in Programme and Financial Management. CVTL also need to establish a dedicated Programme Manager role for the ICBRR to foster collaborative relationships among units, enhance coordination with stakeholders.  Refresher training for CVTL branches to update and reinforce knowledge, skill, and competencies of individuals from the initial training and therefore sustained progress.	Medium	CVTL Senior Management	Mid-term
13.	CVTL's internal procedure of procurement processes and budget transparency at different levels.	Identify all procurement needs since the beginning of the program to ensure proper support from the logistics department.	High	CVTL Senior Management, Finance and procurement unit	Mid-term

No.	Challenges/Findings	Recommendations	Priority	Responsible Party	Timeline
		Conduct sensitization of internal policies related to procurement processes and budget transparency to ensure compliance and understanding and adherence to organizational procedure.			
14.	The community feedback was not documented	Appoint designated CEA officer, capacity building on CEA, develop proper feedback mechanism on various trusted communication channels and monitor feedback and document progress.	High	CVTL Senior Management	Short-term
15.	Delay deliverance due to CVTL's programme timeline setting or scheduling.	<ul style="list-style-type: none"> <li>Consider completing the delayed activities in the same villages in the next phase programme or other programme related.</li> <li>Prioritize strategic planning and objective targeting toward their programmes.</li> </ul>	High	All CVTL programme unit (DRM, Health and WASH, Youth), PMER unit	Short-term

## H. Conclusion

Overall, compiling all the evaluation results of ICBRR programme, can be concluded that:

1. While the successful implementation of the ICBRR programme is evident in the provision of clean water, its impact on climate change adaptation (CCA) and livelihood development had not been as pronounced. This disparity highlights the challenges encountered, particularly regarding the delayed distribution of livelihood support. Moving forward, addressing these challenges and enhancing the timeliness and effectiveness of livelihood interventions will be crucial for ensuring the holistic success and sustainability of the program.
2. The strengthened engagement between CVTL NHQ and its branches through regular monitoring and capacity building had significantly enhanced the skills and capabilities of both staff and volunteers. This required effort to foster a more cohesive and empowered organizational structure, facilitating more effective program implementation, and ultimately contributing to the organization's overarching mission of serving communities with greater efficiency and impact.
3. While efforts to promote PGI principles have been made, there remains room for improvement, particularly in engaging more vulnerable groups, especially individuals with disabilities, in program activities. Recognizing the importance of diversity and equitable participation, it is imperative to redouble efforts to ensure that all members of the community are fully included and able to benefit from program initiatives. By prioritizing inclusivity and actively seeking to remove barriers to participation, CVTL can create more equitable and impactful programs that truly serve the needs of all community members. An established CEA will be advantageous for CVTL to engage with community and understand their needs.
4. Effective risk management and prioritization of activity implementation had been demonstrated through a strategic focus on initiatives such as WASH construction and chicken distribution. By identifying and addressing key risks while prioritizing impactful interventions, CVTL had been able to optimize resource allocation and enhance programme outcomes. Moving forward, maintaining this strategic approach will be essential for ensuring continued success and maximizing the positive impact of programmes on the communities they serve.

## Appendices

### A. Evaluation Documentation



Photo 7. CVTL volunteer conducting endline survey with youth respondent



Photo 8. Community member in Tutuluro village tending to his chickens.



Photo 9. Mr. Abrau, the Farmer Group Leader in Manelobas village showcasing the seedlings



Photo 10. Water Facility in Manelobas



Photo 11. KII with Municipal Stakeholder in Manufahi



Photo 12. Focus group discussion with men Group in Tutuluro Village

## B. Evaluation Matrix

No	Evaluation Criteria	Questions	Secondary Data	Endline Survey		Focus Group Discussion				Key Informant Interview					Field Observation			
				HH	Youth	Community volunteer	Men group	Women group	Youth group	CVTL NHQ	CVTL Branch	National stakeholder	Municipal stakeholder	Village leader/water committee	School Teachers	WASH	Livelihood	
1	Relevance and appropriateness	Are there indications that CVTL's coordination and service delivery capacity has improved in target locations and to what extent can this be linked to programme interventions?	x							x	x							
		To what extent has capacity building activities met the needs and have these activities addressed capacity gaps of communities and CVTL branches?	x	x	x	x	x	x	x		x			x		x		
		Are there measurable improvements in water supply and sanitation coverage and community/school health indicators, and to what extent are the improvements linked to programme interventions?	x	x	x	x	x	x	x				x	x	x	x		
		Are there measurable improvements in the communities' knowledge and skills on DRR, CCA and livelihoods, and to what extent can the improvements be linked to programme interventions?	x	x	x	x	x	x	x					x	x			
		To what extent has hygiene promotion education changed knowledge, attitudes and practices in the target communities and schools?	x	x	x	x	x	x	x				x	x	x			
		How have the youth applied the specific skills acquired through the programme in their community practice, and became agents of behavioral change?	x		x				x					x	x			
		Is the intervention in line with government policies and does it contribute towards the achievement of national and regional objectives?	x								x		x	x				
2	Effectiveness	What outcomes and outputs were achieved by the programme interventions, and how did they align with the programme's intended expected results, objectives and indicators?	x	x	x	x	x	x	x	x	x	x	x	x	x	x	x	
		What factors and constraints, including technical, managerial, organizational, policy-related and other unforeseen internal/external issues, affected programme implementation?	x			x					x	x	x	x	x			
		Were the programme results significantly varied across different locations? What factors contributed to the varied results and what are the lessons learned from the outcomes?	x				x	x	x	x	x	x		x				
3	Impact	What specific short-term outcomes and long-term impact or change has the CVTL experienced as a result of the programme?	x							x	x	x	x					
		How have the implementing CVTL branches changed because of this intervention?	x							x	x							
		Are there any unintended consequences (positive and negative) resulted from the programme?	x							x	x							
4	Coherence	How effective was the coordination within and among the organisations and with other actors or stakeholders during programme implementation?	x							x	x	x	x	x				

No	Evaluation Criteria	Questions	Secondary Data	Endline Survey		Focus Group Discussion				Key Informant Interview						Field Observation	
				HH	Youth	Community volunteer	Men group	Women group	Youth group	CVTL NHQ	CVTL Branch	National stakeholder	Municipal stakeholder	Village leader/water committee	School Teachers	WASH	Livelihood
		How well did the project consult and engage stakeholders and local beneficiary communities during programme implementation? How was information about the project disseminated?	x								x	x	x	x	x		
		What is the added value of the coordination and partnerships between stakeholders in the project? What is the key learning from this?									x	x	x	x	x		
5	Sustainability and Connectedness	Is there any indication the programme interventions are sustainable? (organizational and community institutional capacity, replicability/scalability, policy integration/mainstreaming, financial sustainability or environmental sustainability)				x	x	x	x	x	x	x	x	x			
		Is there a sense of ownership of the programme by the local communities and local stakeholders?				x	x	x	x				x	x			
		Did the implementation process give adequate room for genuine participation of stakeholders, particularly women, but also children, the elderly, sick, people with disability and poor people?	x	x	x	x	x	x	x	x	x				x		
		To what degree has the partnership between community organisations and local stakeholders contributed to the sustainability of the programme?											x	x			
		How effective was the exit strategy and handover process? What was done well and what could be done better?	x								x	x			x		

### C. Evaluation Tracker

Municipality/ National	Village	Endline Survey		Focus Group Discussion				Key Informant Interview														Field Observation						
		HH	Youth	Community volunteer	Men group	Women group	Youth group	CVTL NHQ					CVTL Branch		National stakeholder	Municipal stakeholder					Water committee	Comm. community leader	Saving & Loan Group	School Teachers	WASH	Livelihood		
								SG	Ext Relation	DM	Health	Youth	BC	Volunteer		Agriculture	LBF/ NGO	Husbandry/ vet	APC	SAS							Health	
Ainaro	Aituto			v	v	v	v						v	v			v									v		v
	Manelobas			v	v	v	v						v	v			v		v							v	v	v
Manufahi	Tutuluro			v	v	v	v														v	v	v	v				v
	Caicasa			v	v	v	v							v			v		v	v								v
National								v	v	v	v	v				v												
<b>Complete</b>		331	250	4	4	4	4	1	1	1	1	1	1	2		3	2	1	2	2	1	2	2	1	1	3	2	3
<b>Incomplete</b>				0	0	0	0	0	0	0	0	0	0	0		0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total</b>		<b>331</b>	<b>250</b>	<b>16</b>				<b>5</b>					<b>3</b>	<b>3</b>	<b>10</b>					<b>7</b>				<b>5</b>				

## D. ICRR List of Interventions

Municipality	Village	Intervention					
		DRR	CCA	Livelihood	Health	WASH	Youth
Ainaro	Manelobas	<ol style="list-style-type: none"> <li>1. Early warning awareness</li> <li>2. DRR education for children</li> <li>3. DRR awareness campaign to community</li> <li>4. DRR education and training for community leaders</li> <li>5. Disaster response simulation</li> <li>6. Warning sign board</li> </ol>		<ol style="list-style-type: none"> <li>1. Chicken poultry</li> <li>2. Horticulture</li> </ol>	<ol style="list-style-type: none"> <li>1. CBHFA training to community volunteers</li> <li>2. Door to door basic health promotion</li> <li>3. Dissemination of health information at schools</li> <li>4. Cooking demonstration</li> </ol>	<ol style="list-style-type: none"> <li>1. Water piping, clean and safe water system</li> <li>2. Latrine, septic tank</li> <li>3. Establish GMF/water committee</li> <li>4. International Health Day celebration: hand washing in community</li> </ol>	<ol style="list-style-type: none"> <li>1. Musical instruments to youth group</li> <li>2. Sport equipment distribution</li> <li>3. Establishment of youth structure/youth group in community</li> <li>4. Workshop on disability and inclusion awareness</li> <li>5. Perform drama of healthy youth module</li> <li>6. Dissemination on tobacco and drugs</li> <li>7. Healthy youth training</li> </ol>
	Aituto	<ol style="list-style-type: none"> <li>1. Early warning awareness</li> <li>2. DRR education for children</li> <li>3. DRR awareness campaign to community</li> <li>4. DRR education and training for community leaders</li> <li>5. Disaster response simulation</li> <li>6. Warning sign board</li> </ol>	<ol style="list-style-type: none"> <li>1. Planting trees</li> </ol>	<ol style="list-style-type: none"> <li>1. Chicken poultry</li> <li>2. Horticulture</li> </ol>	<ol style="list-style-type: none"> <li>1. CBHFA training to community volunteers</li> <li>2. Door to door basic health promotion</li> <li>3. Dissemination of health information at schools</li> <li>4. Cooking demonstration</li> </ol>	<ol style="list-style-type: none"> <li>1. Water piping, clean and safe water system</li> <li>2. Latrine, septic tank</li> <li>3. Establish GMF/water committee</li> <li>4. International Health Day celebration: hand washing in community</li> </ol>	<ol style="list-style-type: none"> <li>1. Musical instruments to youth group</li> <li>2. Sport equipment distribution</li> <li>3. Establishment of youth structure/youth group in community</li> <li>4. Workshop on disability and inclusion awareness</li> <li>5. Perform drama of healthy youth module</li> <li>6. Dissemination on tobacco and drugs</li> <li>7. Healthy youth training</li> </ol>

Municipality	Village	Intervention					
		DRR	CCA	Livelihood	Health	WASH	Youth
Manufahi	Tutuluro	<ol style="list-style-type: none"> <li>1. Early warning awareness</li> <li>2. DRR education for children</li> <li>3. DRR awareness campaign to community</li> <li>4. DRR education and training for community leaders</li> <li>5. Disaster response simulation</li> <li>6. Warning sign board</li> </ol>	<ol style="list-style-type: none"> <li>1. Planting trees</li> </ol>	<ol style="list-style-type: none"> <li>1. Chicken poultry</li> <li>2. Horticulture</li> <li>3. Saving and loan group</li> </ol>	<ol style="list-style-type: none"> <li>1. CBHFA training to community volunteers</li> <li>2. Door to door basic health promotion</li> <li>3. Dissemination of health information at schools</li> <li>4. Cooking demonstration</li> </ol>	<ol style="list-style-type: none"> <li>1. Water piping, clean and safe water system</li> <li>2. Latrine, septic tank</li> <li>3. Establish GMF/water committee</li> <li>4. International Health Day celebration: hand washing in community</li> </ol>	<ol style="list-style-type: none"> <li>1. Musical instruments to youth group</li> <li>2. Sport equipment distribution</li> <li>3. Establishment of youth structure/youth group in community</li> <li>4. Workshop on disability and inclusion awareness</li> <li>5. Perform drama of healthy youth module</li> <li>6. Dissemination on tobacco and drugs</li> <li>7. Healthy youth training</li> </ol>
	Caicasa	<ol style="list-style-type: none"> <li>1. Early warning awareness.</li> <li>2. DRR education for children</li> <li>3. DRR awareness campaign to community</li> <li>4. DRR education and training for community leaders</li> <li>5. Warning sign board</li> </ol>		<ol style="list-style-type: none"> <li>1. Chicken poultry</li> </ol>	<ol style="list-style-type: none"> <li>1. CBHFA training to community volunteers</li> <li>2. Door to door basic health promotion</li> <li>3. Cooking demonstration</li> </ol>	<ol style="list-style-type: none"> <li>1. Water piping, clean and safe water system</li> <li>2. Latrine, septic tank</li> <li>3. Establish GMF/water committee</li> <li>4. International Health Day celebration: hand washing in community</li> </ol>	<ol style="list-style-type: none"> <li>1. Musical instruments to youth group</li> <li>2. Sport equipment distribution</li> <li>3. Establishment of youth structure/youth group in community</li> <li>4. Workshop on disability and inclusion awareness</li> <li>5. Perform drama of healthy youth module</li> <li>6. Dissemination on tobacco and drugs</li> <li>7. Healthy youth training</li> </ol>

## Contact Information

For further information, specifically related to this operation please contact:

### In the Timor-Leste National Society

- Luis Pedro Pinto, Secretary General; email: [lpedro\\_cvtl@redcross.tl](mailto:lpedro_cvtl@redcross.tl)
- Vidiana Xareal, External Partnership Coordinator; email: [vidianaxareal\\_cvtl@redcross.tl](mailto:vidianaxareal_cvtl@redcross.tl)

### In the Country Cluster Delegation for Indonesia, Brunei, Singapore and Timor-Leste

- Elkhan Rahimov, Head of Delegation; e-mail: [elkhan.rahimov@ifrc.org](mailto:elkhan.rahimov@ifrc.org)
- Vijay Kumar Ummidi, Programme Coordinator; e-mail: [vijaykumar.ummidi@ifrc.org](mailto:vijaykumar.ummidi@ifrc.org)

### In the Asia Pacific Region

- Alexander Matheou, Regional Director; e-mail: [alexander.matheou@ifrc.org](mailto:alexander.matheou@ifrc.org)
- Rachna Narang, Senior Officer, Partnerships and Resource Development; e-mail: [rachna.narang@ifrc.org](mailto:rachna.narang@ifrc.org)
- Pui Wah Alice Ho, Regional Head of PMER and Quality Assurance; e-mail: [alice.ho@ifrc.org](mailto:alice.ho@ifrc.org)

*The ICBRR programme's provision of water  
improving community sanitation and hygiene*

