

TONGA CAN DO COVID 19 & TROPICAL CYCLONE HAROLD PROJECT EVALUATION

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INTRODUCTION TO THE EVALUATION

PROJECT OVERVIEW

In 2021, local churches and church agencies in Tonga – The Tongan National Council of Churches (TNCC), Seventh Day Adventist Church in Tonga (SDA), Free Wesleyan Church of Tonga (FWC) and Caritas Tonga (CT); came together to respond to the impacts of TC Harold in the midst of the C19 pandemic.

These Tongan project partners were supported by the CAN DO consortium – Act for Peace (AfP), Uniting World (UW), Caritas Australia (CA), and funded through the Australian Government Australian Humanitarian Partnership (AHP). With a total project budget of AUD 500,000 the project was implemented from 1 June 2020 - August 2021.

The overall objective of the project was to meet the immediate needs of 19,465 people (minimum 50% women) impacted by TC Harold and to strengthen COVID-19 prevention capacities in affected areas. The project drew specifically on the grassroots presence and technical strength of local Tongan partners in health promotion and support (PSS and health/hygiene), WASH and food security, targeting those most in need.

EVALUATION OVERVIEW

From the outset, the project teams planned to undertake an internal evaluation together. Project teams came together in July 2021 to begin the evaluation process which concluded in September 2021. Detail on the evaluation plan and evaluation team have been provided in Appendix 1.

Evaluation purpose

It was agreed that the purpose of the evaluation was to reflect and learn together as a team, undertaking collaborative inquiry to understand the effectiveness of the project, its outcomes, relevance to local communities, and our localisation efforts.

Key evaluation questions:

- 1. To what extent did the project reach its intended objectives?
- 2. Was the project relevant to affected populations and reach vulnerable communities?
- 3. To what extent did the project focus on localisation and sustainability?
- 4. What are partners' reflection on working together as a collaboration?

The objectives of the evaluation were to understand:

- Effectiveness of the project
- Did we reach the intended outcomes of the project?
- Learning what worked well, what skills and knowledge have been learnt, what could be done differently next time?
- How well did we work together as a team (leadership, process of how we delivered, localisation)?
- Beneficiary Feedback: was the project important & relevant to them, did they participate?
- Did we reach the most vulnerable people?
- Are current outcomes sustainable, e.g. have a long-term impact, can be 'carried on'
- The extent of local leadership in the project what were strengths and what are opportunities for the future?

Evaluation approach:

This evaluation has strong emphasis on localisation throughout. CAN DO Australian members have sought to be primarily behind the scenes, supporting local partners to be at the centre of the design of the evaluation, the data gathering and evaluative judgement, with support from Australian partners in regards to analysis

and synthesis. Together, Australian CAN DO members and local implementing partners decided to embark on a strongly collaborative and participatory approach – both practical and meaningful to local project partners. The evaluation will draw on mixed methods, a relevant use of qualitative and quantitative data collection and analysis; with a particular focus on talanoa techniques and participatory sense making, for collaborative synthesis and analysis. There are a number of theoretical underpinnings to the planned evaluation approach, summarised in the table below.

Theoretical Underpinnings of the Evaluation

Transformative Participatory Evaluation

There are two streams of participatory evaluation. While Practical Participatory Evaluation (P-PE) is primarily conducted from a utilisation perspective, to enhance relevance and ownership; **Transformative Participatory Evaluation (T-PE) is premised on transforming power relations and promotion of social action and change.** In T-PE, participants work collectively on the evaluation, the distance between the researcher and the researched is reduced, popular knowledge is viewed equally as credible as scientific knowledge, and critical reflection of a broad range of social factors and perspectives is required. Additionally, those who might be seen as less powerful in a social context are critical to the production and control of knowledge of the evaluation and its findings, and their skills and capacities are progressively strengthened and utilised.

Cousins, J. B. & Whitmore, E. (1998) Framing Participatory Evaluation; New Directions for Evaluation, no.80, winter 1998, p.5-23, Jossey-Bass Publishers, San Francisco

Interactive Evaluation Practice

Interactive Evaluation Practice is the practice of intentionally engaging people in making decisions, taking action, and reflecting while conducting an evaluation study.

King, J. A. & Stevahn, L. (2013) Interactive Evaluation Practice: Mastering the Interpersonal Dynamics of Program Evaluation; Sage Publications, USA

Evaluation Capacity Building

Evaluation Capacity Building (ECB) can be considered as a continuum which examines the evaluator's commitment to building evaluation capacity to promote social change. At one end is traditional evaluation practice whereby a single evaluation is carried out in order to utilise findings. In the middle is standard ECB – building capacity of evaluation participants so that they are well equipped to evaluate into the future. At the other end of the continuum the evaluator plays the role of 'change agent' in which evaluation is utilised to build an organisations ability to use evaluations and evaluative practice over time, in order to promote social change.

King, J. A. & Stevahn, L. (2013) Interactive Evaluation Practice: Mastering the Interpersonal Dynamics of Program Evaluation; Sage Publications, USA

Localisation of Humanitarian Action

The concept of 'localisation' in humanitarian response can be defined as "*a process of recognising, respecting and strengthening the leadership by local authorities and the capacity of local civil society in humanitarian action, in order to better address the needs of affected populations and to prepare national actors for future humanitarian responses*".

Fabre, C., (2017) Localising the Response: World Humanitarian Summit, Putting Policy Into Practice, The Commitments into Action Series, Organisation for Economic Cooperation and Development: <u>https://www.oecd.org/development/humanitarian-donors/docs/Localisingtheresponse.pdf</u>

PART 1: EXECUTIVE SUMMARY

LOCAL LEADERSHIP & OWNERSHIP

The objective of this project was to meet the immediate needs of 19,465 people (minimum 50% women) impacted by TC Harold and to strengthen COVID-19 prevention capacities in affected areas. The project strategy intentionally drew grassroots presence and technical strength of Tongan project partners in health promotion and support (PSS and health/hygiene), WASH and food security, targeting those most in need. The project was designed to focus on TC Harold recovery to maintain COVID-19 preparedness in most affected areas (WASH, hygiene and health promotion), and to respond to the protection and psychosocial impacts of TC Harold and COVID-19, through community engagement and media campaign providing national coverage and culturally-relevant targeted messaging for health promotion, protection and psychosocial support.

This project has had a particularly strong focus on **locally led design, implementation and evaluation**. While Australian CAN DO members have provided constant support, Tongan project partners have been at the forefront of design and implementation and have led core parts of the evaluation (design, data gathering, evaluative judgement).

Part 2 of this report provides a summary of the **Partnership & Collaboration Survey** which was designed by Australian CAN DO members and completed by Tongan project partners as a part of this evaluation. The survey confirms that Tongan partners led decision making and felt supported by Australian partners. Responses from the survey also provide recommendations as to ways in which Australian partners can provide support in future, including training in both project management and in relation to specific project activities. Survey respondents indicated that while communities were well served, needs of the community changed over the course of the project and that the project should consider adaptations accordingly.

PROGRESS TOWARDS OUTCOMES

Overall the project reached a total of 23,254 direct beneficiaries and approximately 84,558 indirect beneficiaries. The full beneficiary count is available at Appendix 2.

Tongan project partners led on all aspects of data gathering for the evaluation and were supported by Australian members in synthesis and analysis. Project Findings were presented in a Collaborative Synthesis Workshop through which Tongan partners considered results and provided **Outcome Ratings**, along with both rationale and recommendations. This is provided in Part 3 of this report, followed by a summary of **Output Indicators**.

Tongan partners rated progress towards **Outcome 1** as **"4 – Good Progress"** noting the strong foundations established across project activities but also that the project design may have overestimated the level of community reach possible in a short project timeframe. Strong foundations established through the Disaster Chaplaincy Network and TOTs in child protection, counselling and psychosocial support are likely to continue to provide fruits in future emergencies, given the quality of the training and targeting of these activities to relevant emergency stakeholders including faith leaders, community-based organisations, schools and relevant Government Ministries. One-way messaging for Risk Communication and Community Engagement regarding psychosocial support and COVID-19 preparedness achieved a large reach due to the use of multiple radio and TV broadcasts.

Outcome 2 was rated **"5 – Excellent Progress"**. Not only were WASH installation targets exceeded but project staff also conducted a large amount of project monitoring via interviews, surveys and case studies which all reported positive impact of the WASH interventions. WASH interventions prioritised vulnerable households and communal access, as such reaching a large population.

Outcome 3 was not given a rating by project partners due to insufficient information at the workshop.

REFLECTIONS ON THE EVALUATION

The process of a locally led, highly participatory and collaborative evaluation has created opportunity for partners to reflect together on program strengths and lessons learned – both each project partner and as a collaboration.

Tongan project partners can be proud of volume and quality of primary data collection, which enabled tracking across output indicators as well as reflection on progress towards outcomes. Participatory analysis and synthesis workshops held virtually provided an effective way for project partners to reflect on the project, and have ownership of the evaluative judgement.

As an internal evaluation, data collection, analysis, synthesis and follow up were time intensive for all partners, and this is important to note for future similar processes. However, it is hoped that the highly participatory and collaborative approach strengthened M&E skills of all involved and provided a much more interactive way to reflect on the project, than simply writing a collaborative report.

PART 2: PARTNERSHIP & COLLABORATION

The Tonga TC Harold & COVID-19 project was the first instance in which these Tongan project partners had collaborated together in project delivery. The project design emphasised the leadership of local partners, as well as importance of partnership and collaboration. This evaluation has sought to understand the extent that local leadership has been supported and ways to improve it into the future. A survey was designed by Australian partners for completion by Tongan local partners. Four respondents completed the survey. While a small sample, it is possible that it is fully representative of all four local partners and undertaken by the majority of project coordinators working on the project. A summary of findings is included below and further detail is provided on the survey responses in Appendix 1.

SURVEY FINDINGS

Findings from the survey indicate a **strong resonance that the project was authentically led by Tongan partners** – across design, implementation and evaluation.

Overall, survey respondents indicated **successful partnership and collaboration** but did identify the importance of ensuring lessons were learned and applied to future projects. Specifically, in relation to partnership and collaboration respondents reported importance of:

- Ongoing partnership building
- Communication with the right people
- Collaboration and consultation with communities
- Consideration of context, localisation, and possible redesign of activities if required
- Communication support to be able to **tell story and share successful practice and learning** with the wider international community
- Clarity on roles of each partner and understanding of activities
- Importance of common values and open communication

Respondents indicated **appreciation of the support provided by Australian colleagues** and suggested that this could be increased in future projects, through more regular virtual meetings and **provision of training**:

- Project management: financial management, logistics, procurement, use of templates
- Specific project activities particularly WASH & youth engagement

"We are grateful for the spirit of partnership from the Australian partners particularly in facilitating the Tongan partners to exercise local autonomy with project planning design implementation and evaluation for the trust and platform presented for Tongan partners to engage the Tongan context and localize the response for the suitability of our communities and their needs."

Respondents reflected that **communities were well served through the project**, but that there was more need that could be met. Respondents also reported **increased engagement with communities over the course of the project**, leading to sense of ownership and stronger understanding of community needs. Answers across a range of question suggest an opportunity to **reflect part way through the project to consider changing community needs** and if adaptions to the project are required accordingly.

PART 3: OUTCOME RATING & INDICATOR SUMMARY

OUTCOME RATING

Project partners gathered in a workshop together to reflect on project results within each of the outcomes. After each partner presented project results, partners each gave a rating of progress towards that particular outcome, providing rational and recommendations. NB: these ratings were given entirely by local Tongan partners (recorded only by Australian partners).

| Outcomes & Indicators | 1. Insufficient / very poor | 2. Poor progress | 3. Moderate Progress | 4. Good Progress | 5. Excellent Progress | Insufficient Information |
|--|-----------------------------------|------------------------|----------------------------|------------------------|-----------------------------|-----------------------------|
| Outcome 1: Public health support for psychosocial and protection needs of those impacted by TC Harold and COVID-19. | | | | ✓ | | |
| Outcome 2: Affected community members have improved WASH facilities and information to improve hygiene and health post- disaster, and reduce the spread of COVID-19. | | | | | ~ | |
| Outcome 3: Affected community members have increased food security. | | | | | | * |

OUTCOME 1: Public health support for psychosocial and protection needs of those impacted by TC Harold and COVID-19.

Indicator: Community members in Tonga affected by TC Harold and COVID-19 report increased psychosocial wellbeing and safety for vulnerable groups.

Rating: 4 – Good Progress

Rationale:

- The radio programme was effective and messaging at communities worked well.
- Made progress on the TV/radio sharing, exceeded training targets, but slower on deployment.
- The counselling and the child protection training was delivered to those identified as vulnerable in the community, including students in remote areas across main islands.
- Training was TOT and participants can continue to utilise the training over many years, and to others within the community.
- Important social institutions such as schools and community organisations participated, achieving good coverage across both church run and government institutions.

Recommendations:

- 1. Need more time for greater engagement with external agencies to message through the networks.
- 2. Continue with radio and TV announcements scheduled.
- 3. There is still a need to continue with further counselling program and protection programs. Also, there is a need to support transitioning of staff and handover.

OUTCOME 2: Affected community members have improved WASH facilities and information to improve hygiene and health post-disaster, and reduce the spread of COVID-19.

Indicator: Community members affected by TC Harold report improved knowledge and access to WASH and awareness of critical COVID-19 prevention.

Rating: 5 – Excellent Progress

Rationale:

- The people are very satisfied and very happy with the quality of the work.
- Made variations to tank sizes to adapt to needs of vulnerable people.

Recommendations:

- 1. Budget needs to be increased for future interventions.
- 2. Create opportunities for consultation so that numbers can be adapted according to needs and sizes required on the ground.

OUTCOME 3: Affected community members have increased food security.

Insufficient information on results was presented at the workshop for participants to consider rating of progress against this outcome.

OUTPUT INDICATORS SUMMARY

| Indicator | Total | Male | Female | Further disaggregation |
|---|------------------------|------------------------|------------------------|---|
| Outcome 1 | | | | |
| Output 1.1 (Caritas Tonga) | | | | |
| Number of people who received mental health and psychosocial support (AHP H.11) | 10,590 | 6,085 | 4,505 | - |
| Number of people who participated in sessions on prevention, reduction and response to violence, abuse and exploitation of children (AHP CP.01) | 134 | 13 | 61 | - |
| Number of referrals for additional psychosocial support and trauma counselling | 0 | 0 | 0 | - |
| Output 1.2 (FWC) | 1 | | | 1 |
| Number of people who received mental health and psychosocial support (AHP H.11) | 500 | 300 | 200 | - |
| Number of people who participate in sessions to help reduce, prevent or respond to sexual exploitation, abuse and psychosocial and trauma needs | 87 | 57 | 30 | - |
| Number of referrals for additional psychosocial support and trauma counselling | 0 | 0 | 0 | - |
| Output 1.3 (FWC + SDA) | | | | |
| Number of people reached through one-way messaging on COVID-19 prevention and access to services (AHP H.08) | FWC +SDA: 16,800 | FWC + SDA: 8,409 | FWC + SDA: 8,391 | - |
| Outcome 2 | | | | |
| Output 2.1 (FWC, TNCC) | | | | |
| Number of people with household access to improved drinking water sources (AHP W.01) | FWC: 992 | FWC: 393 | FWC: 599 | FWC: 69 of those counted are PLWD |
| | TNCC: 2,059 | TNCC: 1,158 | TNCC: 901 | SDA: Elderly M: 84 Elderly W: 87 Adult M: 796 Adult W: 573 Child M: 271 Child G: 227 PLWD M: 7 PLWD W/G: 14 |
| Output 2.2 (SDA) | | | | |
| Number of people with household access to improved sanitation facilities (W.09) | 18 | 11 | 7 | Adults: 11 Children: 7 |
| Output 2.3 (TNCC) | | | | |
| Number of people participating in interactive events or sessions related to COVID-19 public health measures and prevention (H.09) | 6,638 | - | - | - |

| Outcome 3 | | | | |
|--|------|---|---|---|
| Output 3.1 (SDA) | | | | |
| Number of community members reporting improved access to | 2286 | - | - | - |
| sufficient food as a result of increased garden yields | | | | |

PART 4: RESULTS ACROSS PROJECT OUTCOMES

OUTCOME 1: Public Health Support for Psychosocial and Protection Needs of Those Impacted by TC Harold And COVID-19

Output 1.1: 4 Nationally accredited counsellors and 40 trained volunteers provide PSS and trauma counselling to over 7,000 youth and vulnerable community members

TARGETS

| Target | Target | Actual Achieved | Rating |
|---|-----------------------|--|-------------------------------------|
| National Counsellor Trainer | 4 | 1 | 25% target |
| Volunteer Counsellors Trained | 40 | 90 | Exceeded 225% |
| Youth Reached | 7,000 | 10,167 students (youth) 371 teachers (adults) | Exceeded 145% (plus teachers) |
| Community Members Reached | 500 | 234 reached in total 71 via prisons 89 members of community groups 74 community members across 4 districts in CP training | 72% target |
| 10 church-based agencies and CSOs trained in child protection in emergencies and PSEAH, reaching 80 individuals | 10 org's 80 people | 13 org's (MoIA, MoI, MoJ) 60 people | 75% target |

INDICATORS

| In | dicator | Total | Male | Female | Further |
|----|---------|-------|------|--------|----------------|
| | | | | | disaggregation |
| | | | | | |

| Number of people who received mental health and psychosocial support (AHP H.11) | 10,618 | 6,085 | 4,505 | - |
|---|--------|-------|-------|---|
| Number of people who participated in sessions on prevention, reduction and response to violence, abuse and exploitation of children (AHP CP.01) | 134 | 13 | 61 | - |
| Number of referrals for additional psychosocial support and trauma counselling | 0 | 0 | 0 | - |

RESULTS DISCUSSION

The project worked with a nationally accredited counsellor to train 90 volunteer counsellors to provide counselling support reaching a total of 10,596 people, including 10,167 youth and 371 teachers through schools, 58 People via prisons and 303 via community organisations. The project also engaged 13 organisations (60 people) in child policy and PSEACH training and policy. The activities were implemented on the main Island Tongatapu and also one outer island was benefit from this project is 'Eua.

The project exceeded some targets but was unable to reach others. The project more than doubled the number of volunteer counsellors and reached a large number of schools and community organisations, and through these institutions, the reach is likely to be significant and have an element of sustainability.

Volunteers Counsellors Trained

While the project engaged only 1 of the 4 planned nationally accredited counsellors, it more than doubled the number of volunteer counsellors and reached a large number of schools and community organisations, and through these institutions, the reach is likely to be significant and have an element of sustainability.

Counselling in Schools

The project reached a total of 10,167 students (youth) and 371 teachers (adults); significantly exceeding the targets in these two areas. Observations by counsellors indicate that both students and teachers responded well to the counselling training. This is significant because natural disaster is a frequent/occasional occurrence in Tonga, communities and the children themselves know to expect disasters, particularly during the cyclone season. Yet, this is the first time that such counselling awareness/support/training has been provided in these schools. In this way, the provision of counselling training and support provides a useful tool for teachers and students to draw on in future emergencies.

"Children are able to identify and understand when Disaster Phenomenon both natural and man-made are impacting the country. As well as this, students generally have a good understanding of the annual cyclone season here in Tonga- and students were well aware of the extensive damage to 'Eua Islands in the aftermath of TC Harold. Students were also well aware of the Global Pandemic COVID 19 and its current worldwide impact." Counsellor at School Houma, Angaha, 'Ohonua

"[A] Significant number of students at this school who showed a real interest in the topics covered as well as the rich sharing between the facilitators and the students. It was clear that such a programme was highly valued by the students especially due to the provision of a 'safe platform for students to share and not be judged." **Counsellor at Primary school: Hango 'Eua.** "This was raised as a vital service that will help to minimize the wrongful referral of students to various services who may not be the correct intervention team, where they will not receive the right support or accompaniment leading to confusion and duplication of assistance which ultimately does not help the student's immediate or long term need." **Counsellor at Apifo'ou College – Catholic School.**

Counselling in Prisons

Through consultations with the Tonga Prisons and Safety and Protection cluster the project identified a significant need to provide psychosocial support to people in prisons who themselves are marginalised and often miss out on such support during crises. The project reached 58 people through the prisons.

The prisoners feel that this is a vital training and the strategies taught are very helpful to them, They do appreciate the time of lead Counsellor Kalo and Senior counsellor Semisi (who is also the Prison Commissioner)... They enjoyed the rich sharing as well as the songs and felt a spiritual connection. They feel happy to come out of their rooms and join in such an important training. **Feedback from participants at Sainai Prison**.

Child Protection & PSEACH Training

The project intended to deliver child protection and PSEACH training to 80 people through 10 civil society and church based agencies. While the project didn't reach 80 people directly, it did exceed its target in organisations – reaching a total of 13 agencies including important government ministries such as Ministries of Internal Affairs, Ministry of Infrastructure, and the Ministry of Justice. CP training was delivered together with lawyers from the 'Family and protection department' - providing additional legal information.

Output 1.2: 192 trained and accredited ministers provide PSS and trauma counselling to 3,000 people through the national disaster chaplaincy network

TARGETS

| Target | Target | Actual Achieved | Rating |
|--|--------|---|------------------|
| Chaplains trained | 40 | 87 reached in total. 71 chaplains (22 W; 49 M) 16 service providers (eg. Govt reps, NDMO, women's support groups) (8W; 8M) | Exceeded 218% |
| Theological students trained | 152 | 37 students (8W; 29M) | 24% target |
| Community members reached, including most vulnerable | 3,000 | 500 (200 W; 300 M) | 16% target |

INDICATORS

| Indicator | Total | Male | Female | Further disaggregation |
|---|-------|------|--------|---------------------------|
| Number of people who received mental health and psychosocial support (AHP H.11) | 500 | 300 | 200 | - |
| Number of people who participate in sessions to help reduce, prevent or respond to sexual exploitation, abuse and psychosocial and trauma needs | 87 | 57 | 30 | - |
| Number of referrals for additional psychosocial support and trauma counselling | 0 | 0 | 0 | - |

RESULTS DISCUSSION

The project provided training and mentoring in post-disaster psychosocial support to a total of 68 people including church chaplains and other targeted service providers, and conducted weekly interactive sessions with 25 theological students. Those trained went on to provide psychosocial support and trauma counselling to 500 community members affected by TC Harold and individuals experience isolation and other social impacts as a result of the COVID-19 lockdown measures. No referrals to other psychosocial support or counselling were documented. Project activities were undertaken in Tongatapu, Ha'apai, and Vava'u.

While the project has not reached its target for community outreach it has invested in strong foundational establishment of the National Disaster Recovery Chaplaincy Network (DCRN). This is a significant milestone for locally led disaster response in Tonga a predominantly Christian nation (more than 96% identify as Christian) in which faith plays a central role for most of its people, and Churches are seen as a trusted source of information and support. The National DCRN was first conceived by the Free Wesleyan Church of Tonga after category 5 Cyclone Ian hit Ha'apai in 2014 and invited Rev Dr Stephen Robinson from Australia's DRCN to visit and support local Ministers as recovery Chaplains.

The Network has been established to include both church chaplains as well as relevant service providers in the training who will have roles in future disaster response, each participant provided with a set of resources and in-depth training. The Network has been established with strong connections with both NEMO and referral services:

"I would like to thank TNCC/FWC and your Australian partners for such awesome contribution to humanitarian work in Tonga. This is the area of support NEMO and other humanitarian agencies have been missing and the church is rightly in the best position to support affected people, we will be happy to support." Paula Finau, NEMO

"After sitting in this training I now have come to understand the important role the Bible plays in the psychology and mental health of persons." Mrs Nancy Schaumkel, trained psychiatrist, Ministry of Health

"Witnessing families who are terrified and fearful of the global pandemic is a challenge to our ministry, it challenges us ministers to relook into our theologies to be relevant and applicable more meaningful to people. It is our task as chaplains takiama to lift the light of hope for people in despair." **Rev Tevita Liu, Free Wesleyan Church.** **Output 1.3:** Culturally relevant and biblically based IEC messaging campaign promoting health, protection and inclusion, achieving national reach

TARGETS

| Target | Target | Actual Achieved | Rating |
|---------------------------------|----------------------|---|---------------|
| Number and type of messages | No target set | Weekly radio & television slot on Tonga Broadcasting Commission dedicated to C19 messages August 6th 2021 - First TV program. Ecumenical Youth Program included a session on the medical advice regarding COVID-19 and was attended by 29 young people (6W; 23M) | |
| People reached via visual media | 100,651 ¹ | 16,800 | 16% target |
| People reached via HOPE Chanel | 80% of population | Estimated 80% of population (indirect beneficiaries) | |

INDICATORS

| Indicator | Total | Male | Female | Further disaggregation |
|--|--------|-------|--------|---------------------------|
| FWC and SDA: Number of people reached through one-way messaging on COVID-19 prevention and access to services (AHP H.08) | 16,800 | 8,409 | 8,391 | - |

RESULTS DISCUSSION

The project reached a large proportion of the population of Tonga through the multimedia campaign. Further, it is likely that people would have received messages through multiple avenues, this saturation of messages resulting in a stronger resonance of the information.

It is estimated that the media campaign by the FWC reached 16,800 people across Tonga. This reach is calculated based on 73% of the population (2020 data) having access to a television and 25% of those watching the program. The FWC of Tonga has been allocated time twice a month for 6 months with Tonga Broadcasting Commission (August 2021 - Jan 2022) and will focus on COVID-19 - Bible Study, sermon, panel discussion, 12 television programs, 12 radio sessions and 5 Facebook posts. The first took place on 6th August 2021. The estimated listenership is conservative, as it is expected that a greater number of people will have heard at least one of the programs by January 2022. As the programs will be livestreamed, it will be

¹ Tonga Census 2016: <u>https://tongastats.gov.to/census/</u>

possible for Tongan nationals living in Fiji, New Zealand, Australia and elsewhere in the world to also hear these messages.

OUTCOME 2: Affected Community Members Have Improved Wash Facilities and Information To Improve Hygiene And Health Post-Disaster, And Reduce The Spread Of Covid-19

Output 2.1: Provision and installation of 28 water tanks to accessible locations enabling community access to potable water in 'Eua and Tongatapu

TARGETS

| Target | Target Number | Actual Achieved | Rating |
|--|------------------|--|------------------|
| FWC: 10,000 litre tanks and improved guttering to vulnerable households | 11 | 10 x 10,000 litre tanks 12 x 5,000 litre tanks <i>Total reached: 992</i> | Exceeded 200% |
| TNCC: Water tanks provided to churches as central community location | 28 | 23 x 10,000 litre tanks Total reached: 434 households, 2,059 individuals | 82% target |

INDICATORS

| Indicator | Total | Male | Female | Further disaggregation |
|---|-------|-------|--------|--|
| FWC: Number of people with household access to improved drinking water sources (AHP W.01) | 992 | 393 | 599 | 69 of those are PWD |
| TNCC: Number of people with household access to improved drinking water sources (AHP W.01) | 2,059 | 1,158 | 901 | Elderly M: 84 Elderly W: 87 Adult M: 796 Adult W: 573 Child M: 271 Child G: 227 PLWD M: 7 PLWD M: 7 |

RESULTS DISCUSSION

The project provided 45 water tanks across 26 communities (FWC 22; TNC 4), reaching a total of 5,155 people (FWC: 3,096; TNCC 2,059); vastly exceeding targets. Further, project partners conducted a large amount of community consultation both before and after installations. Community members were central in identifying opportunities to target vulnerable community members in the WASH installation sand also gave strong reports of satisfaction with project activities. These project activities have been successful in supporting communities to recover from the impacts of TC Harold while also improving COVID-19 preparedness by increasing access to improved water sources.

22 Water tanks provided by FWC (10 x 10,000L and 12 x 5,000L) in 22 locations were installed in both communal locations and to households of people identified as particularly vulnerable. The team conducted preliminary assessments to determine which families and communities would receive water tanks, prioritising those affected by disability, extreme hardship and Tropical Cyclone Harold; ensuring also that there were no double-ups with Government-sponsored WASH installation.

For example, in the Kolomotu'a District, the FWCT has supported a widow and her son and his family. This household is surrounded by five other families and the location of the water tank was selected so that these families can all access the water. The widow said, "*These families are so happy when they see the water tank, knowing that we can all access drinking water. We have improved so much, in washing facilities and health awareness. We feel much safer if Covid-19 comes to Tonga. Express our sincere thanks to the people who help us.*"

In another example, the project provided a water tank to a family who have cared for a 37-year-old paralysed man since he was born. This man is not related to their family, and is unable to walk, move or feed himself. Every day, the family would walk hundreds of metres with bottles and buckets to collect water. They said, *"When it's heavy rain, we walk through the mud and water, wishing that one day we might get a water tank to collect the water for drinking and solve the problem of walking that distance".* The installation of a WASH tank has turned this wish into a reality and made the care duties of this family easier. They said, *"It is a huge improvement for the families in Halamaui and we thank you for this project and UnitingWorld and partners."*

The WASH tanks have also positively impacted a small community in the isolated bush area on the southern side of Tongatapu. This community is made up of approximately 55 people, including children and people with disabilities. The closest water supply for these people is 1 ½ kilometres away in a nearby village. A spokesperson said, *"Today, we have solved the problem of walking and driving a long distance to get the water, and we thank God for this helping hand of UnitingWorld to reach us."*

Community members have reported that *"we feel much safer if Covid-19 comes to Tonga."* Through limiting extended periods of time outside collecting water and improving access to hygiene, WASH facilities serve as a beneficial precautionary measure for preventing the spread of Covid-19 in Tonga.

23 Water tanks provided by TNCC (23 x 10,000 litres) in six locations, were provided to churches as communal locations for multiple households to access. Alongside provision of these tanks TNCC conducted interactive COVID-19 sessions. TNCC conducted post distribution surveys with a large number of community members (over 450) and interviews with 9 project participants selected at random, with a strong representation of people living with disabilities.

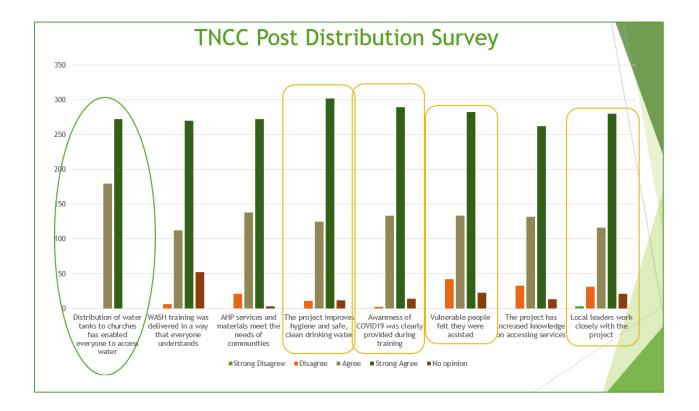
Those interviewed all reported very positively about their improved access, as well as location of the tanks, stating that it is not easy to ask households to use their water, but that all are welcome to access water located near church buildings.

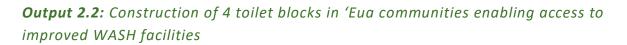
Elisi Fe'ao, 31YO single mother who also experiences Seizures, Ohonua, 'Eua

"This is a great idea of supplying the water tanks to these churches in our community as a benefit for every home that close by to those churches. Even if they are a church member or not, they can get water from these churches. I stay close to FCT and it will easy for me to get water from that church than going to next door neighbour because you don't know if they would like it or not. I think this is the best location for the water tanks is the churches for anyone can freely access to water."

Survey results show high levels of satisfaction with the project. The areas of highest satisfaction include:

- The project improved hygiene and safe, clean drinking water
- Awareness of COVID19 was clearly provided during training
- Distribution of water tanks to churches has enabled everyone to access water
- Local leaders work closely with the project
- Vulnerable people were targeted in the distribution





TARGETS

| Target | Target Number | Actual Achieved | Rating |
|--------------------------------|------------------|-----------------|------------|
| Household toilet facilities | 4 | 3 | 75% target |

INDICATORS

| Indicator | Total | Male | Female | Further disaggregation |
|---|-------|------|--------|---|
| Number of people with household access to improved sanitation facilities (W.09) | 18 | - | - | 9 Adults (including 2 elderly) 10 Children |

RESULTS DISCUSSION

The 3 WASH facilities include a toilet, shower, hand wash basin and septic tank. In order to ensure the most vulnerable families were reached a community assessment was undertaken, where the local community collaboratively determined those most in need. The families selected were identified both due to their vulnerability and their lack of pre-existing sanitation facilities. The combined impact of vulnerability and limited access were considered to determine those most in need, and these families were prioritised. The original planned target of 4 was revised down to 3 due to the increasing cost of materials and labour, and that one of the communities was not able to provide labour as predicted. Original plans included a reliance on community support to implement the construction, however, it was challenging to gain commitment from the community in the construction process. This is a key learning moving forwards, as future budgets will need to account for full labour costs, rather than reliance on community contributions.

While overall this output was successful, with 3 out of the 4 planned sanitation facilities installed. There has also been significant learning for future project including:

- Full costing of labour (ensure community commitment if relying on this)
- Ensure resources planned for architectural drawings
- Ensure time allocated for planning permit (including land registration when required) from the Ministry of Infrastructure

Output 2.3: Health and hygiene promotion including COVID-19 preparedness

TARGETS

There were no targets for this output yet 6,638 individuals were reached through consultations.

INDICATORS

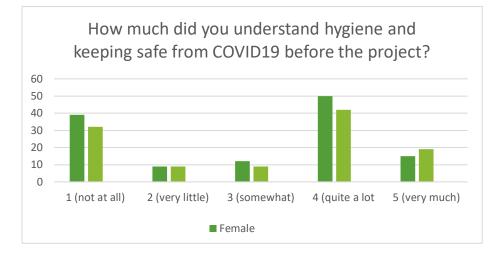
| Indicator | Total | Male | Female | Further |
|-----------|-------|------|--------|----------------|
| | | | | disaggregation |

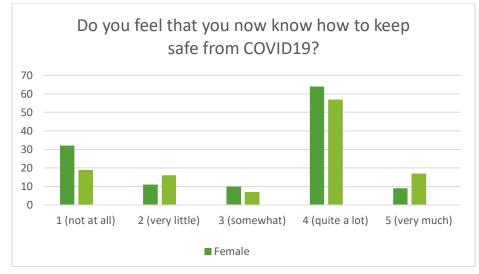
| Number of people participating in interactive events or | 6,638 | - | - | - | |
|---|-------|---|---|---|--|
| sessions related to COVID-19 public health measures and | | | | | |
| prevention (H.09) | | | | | |
| | | | | | |

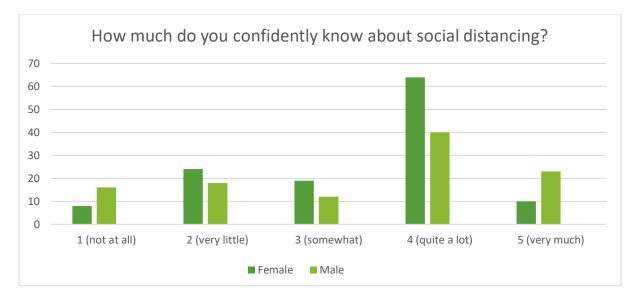
RESULTS DISCUSSION

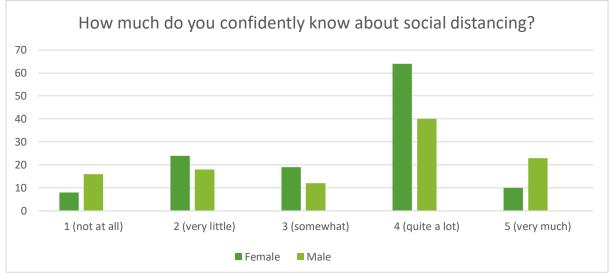
TNCC conducted interactive COVID-19 sessions alongside provision of water tanks under Output 2.1, these sessions reached a total of 6,638 people. TNCC conducted a follow up survey to identify impact of the sessions. Survey results show:

- Overall, confidence in knowledge on hygiene and C19 safety
- A decrease in those who are unsure, and an increase in those who are confident, in their knowledge of hygiene and ways to keep safe from C19
- Confidence in understanding of handwashing
- Confidence in understanding of social distancing









OUTCOME 3: Affected Community Members Have Increased Food Security

Output 3.1: Rehabilitated community gardens being used by 700 households to improve access to fresh produce, improving food security.

TARGETS

| Target | Target | Actual Achieved | Rating |
|--|--------|-----------------|--------|
| Households provided with rehabilitated community gardens | 700 | 415 | 59% |

INDICATORS

| Ir | ndicator | Total | Male | Female | Further disaggregation |
|----|--|-------|------|--------|---------------------------|
| | Number of community members reporting improved access o sufficient food as a result of increased garden yields | 2,286 | - | - | - |

RESULTS DISCUSSION

Through a series of discussions and consultations in Vava'u, Ha'apai, Eua and Niuatoputapu and Niuafo'ou, it was concluded that the need for fencing to increase food security was most significant for communities. Therefore, the activity focus shifted from garden restoration and procurement of machinery to a more specific focus on the construction of fences. The fence construction improved food security, garden maintenance and pest control. While the specific activities of this outcome shifted somewhat, the results overall were positive. It was reported that there was some lag in the logistics due to cargo and shipping challenges, but the fencing rolls and materials were eventually distributed and improved food security was reported for 2,286 people.

Unfortunately, insufficient information on results was presented at the workshop for participants to consider rating of progress against this outcome, however results indicate that overall, the activity was successful and community members felt that the fencing construction significantly improved their food security.

APPENDIX 1: EVALUATION PLAN & EVALUATION TEAM

EVALUATION PLAN

The evaluation was planned to be collaborative, with data gathering undertaken by project teams, and joint analysis through collaborative workshops, each with support from Australian counterparts in synthesis and facilitation.

| Steps 1 – 5 | Activities | Who & Where | When |
|--|---|---|--------------------|
| Step 1 Initial Data Gathering & Analysis: | Project teams gather all monitoring data Project teams conduct initial (high level) trend analysis | Independent work – project teams with CAN DO member support | 15 – 30 June |

| What data do we have? | | | |
|---|--|--|----------------|
| Step 2 Workshop #1 - Collaborative inquiry: what does the data tell us? | Data Presentation: Project teams present data & analysis. Talanoa: After each project presentation, the relevant indicators/monitoring questions are presented. Each of the partner teams then has the opportunity to share reflection and/or ask question of the presentation – based on the data/insights just shared. Identify Deeper Insights: Project teams identify 1 or 2 actions to gather additional insights into their existing project data. | All: Sense Making Workshop #1 | 7 July |
| Step 3 Gather additional data/insights. | Project teams follow up on additional actions identified in the workshop. Analysis of additional data/insights conducted with support of CAN DO member. Additional material shared with CAN DO / CU to prepare for Synthesis workshop. Partnership & Collaboration survey prepared by CAN DO members and shared for local partners to complete. | Local partners, with support of CAN DO member. | 8 – 23 July |
| Step 4 Workshop #2 - Collaborative synthesis. | Synthesis: CAN DO/CU present of high level data synthesis based on data previous gathered/shared, and new insights: Incorporated into this - each project team presents on their additional insights/analysis. Evaluative Judgement: CAN DO/CU presents relevant KEQ alongside the relevant data. Through breakout rooms, each of the evaluation teams (with support of CAN DO member) provide a rating on each of the KEQ. | CAN DO CU/Members prepare workshop. All participate. | August |
| Step 5 Report write- up | Combine data synthesis with workshop discussion and insights | Led by CAN DO CU with input and revisions from full evaluation team | August |

EVALUATION TEAM

As an internal evaluation, the team consists of each of the Tonga project teams, CAN DO member agencies, and technical evaluation input from the Australian based CAN DO Coordination Unit.

| Tonga Project Teams | |
|---------------------------------------|---------------------------------------|
| Tonga National Council of Churches | Alisi Ituvai Ioane |
| Seventh Day Adventist Church in Tonga | Tevita Latu |
| Free Wesleyan Church of Tonga | Rev Ikani Tolu, DRCN Trainer |
| | Rev Mosese Holi, Project Coordinator |
| Caritas Tonga | Suliana |
| CAN DO Member Agencies | |
| Act for Peace | Will Gray; Disaster and Emergencies |
| | Program Coordinator |
| Uniting World | Aletia Dundas; International Programs |
| | Manager |
| Caritas Australia | Damaris Pfendt; Humanitarian Program |
| | Coordinator |
| CAN DO Coordination Unit | Grace Asten; DMEL Coordinator |

APPENDIX 2: BENEFICIARY COUNT

| | Category | Male | Female | Other | Total |
|------------------------------------|-----------------------------|--------|--------|-------|--------|
| Actual # people reached to date | Adult without disability | 10,213 | 10,168 | 84 | 20,465 |
| (direct beneficiaries) | Child without disability | 1240 | 1196 | 14 | 2450 |
| cumulative for entire project | Adult with disability | 67 | 73 | 2 | 142 |
| | Child with disability | 44 | 47 | 106 | 197 |
| | Total | 11,564 | 11,484 | 206 | 23,254 |
| | Reached as a % of targeted | 118% | 117% | 200% | 119% |

APPENDIX 3: COLLABORATION & PARTNERSHIP SURVEY

The Partnership & Collaboration Survey was prepared by Australian CAN DO members for local partners. All answers were anonymous. While a small sample (4 respondents), it is possible that it is fully representative of all four Tongan partners. Because of the small sample, responses have been summarised rather than included verbatim, in order to deidentify responses.

Q1: What are the top three things you have you learned about collaboration through the course of this projects implementation?

- Acknowledgement of the positive and challenging aspects/areas of improvement
- Importance of ongoing partnership building
- Communication with the right people
- Importance of context and localisation of response programs
- Some need/interest in refocusing more on local context and considering redesign
- More collaboration with end users
- Good guidance from Australian partners
- The significance of comms support to be able to tell our story and share successful practice and learning with the wider international community

Q2: How well do you think this project has served the community?

| Scale of 1 – 5 | Number of Responses |
|--|------------------------|
| 1. Unsatisfactory / Did not serve the community at all | |
| 2. Poor / Somewhat served the community | |
| 3. Average / Was satisfactory in serving the community | |
| 4. Good / Was good in serving the community | 2 |
| 5. Excellent / Was excellent in serving the community | 2 |

Q3: Who led the majority of decision making in the project?

| Tongan Partners | 4 |
|---------------------|---|
| Australian Partners | 0 |

Respondents acknowledged that Tongan partners were the ones leading in design/recommendation of project activities and implementation.

"We are grateful for the spirit of partnership from the Australian partners particularly in facilitating the Tongan partners to exercise local autonomy with project planning design implementation and evaluation for the trust and platform presented for Tongan partners to engage the Tongan context and localize the response for the suitability of our communities and their needs"

Q4: In future projects, how could we build stronger leadership of Tongan partners?

- Foundations have been set as well as valuable learnings
- Clarity on roles and understanding of activities would improve future work together
- Importance of common values and open communication

Q5: What knowledge and/or skills would equip you to respond to future emergencies?

- Training on templates
- Financial understanding

- Management skills
- Training in relation to specific project activities

Q6: What would you do differently in future projects?

- Increase project reach
- Work closely with Australian partners
- Apply lessons learned
- Draw more on each other's strengths (WASH, youth engagement)

Q7: How would you like Australian partners to support possible future projects?

- More frequent communication including virtual meetings.
- Support in specific project activities, eg: logistics, WASH, youth engagement
- Support in general project management: training in templates, communication, procurement.

Q8: Did you find that the needs of the community changed over the course of the project delivery?

All respondents answered: Yes

- Increased knowledge in COVID and sense of urgency for preparedness
- Increased community participation over course of the project
- Sense of ownership by the community and increased engagement over the course of the project but that activities were limited and more support was required.