PARTICIPANTS BASED SURVEY (PaBS) 2020
FINAL REPORT

CARE BANGLADESH
Strengthening Household Ability to Respond to Development Opportunities III
SHOUHARDO III

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DMA Team

LIST OF ACRONYMS

ANC	:	Ante-Natal Care
BHA	:	Bureau of Humanitarian Assistance
COG	:	Core Operational Group
CSI	:	Coping Strategy Index
DMA	:	Data Management Aid
EKATA	:	Empowering Knowledge and Transformative Action
FFP	:	Food for Peace
FtF	:	Feed the Future
FY	:	Fiscal Year
GBV	:	Gender Base Violence
GoB	:	Government of Bangladesh
IGA	:	Income Generating Activity
M&E	:	Monitoring and Evaluation
MCHN	:	Mother and Child Health and Nutrition
MDD	:	Minimum Dietary Diversity
MMF	:	Minimum Meal Frequency
NGO	:	Non-Government Organization
PaBS	:	Participants Based Survey
PEP	:	Poor and Extreme Poor
PLW	:	Pregnant and Lactating Women
SHOUHARDO III	:	Strengthening Household Ability to Respond to Development Opportunities III
USG	:	United States Government

Executive Summary:

Cooperative for Assistance and Relief Everywhere (CARE) implements the Strengthening Household Ability to Respond to Developing Opportunities (SHOUHARDO) III Program. The goal of the program is to ensure improved gender equitable food and nutrition security and resilience of the vulnerable people living in the northern regions in Bangladesh. The program is funded by the United States Agency for International Development (USAID) Bureau of Humanitarian Assistance (BHA). The program has completed its five years of implementation in 2020. This year sets an important milestone for the program as it was initially funded for five years. However, the SHOUHARDO III program received a two years extension from USAID that will allow the program to sustain the results in the targeted communities.

The first COVID-19 case was confirmed to have spread in Bangladesh in March 2020. Since then, the pandemic has spread day by day over the whole nation. The government of Bangladesh issued a ban on people's movement and transportation for several months to prevent widespread transmission. In addition, the recent flash flood in the SHOUHARDO III program implementing areas was another reason that the Participants Based Survey (PaBS) could not be carried out in a timely manner. The survey modality was heavily dependent on the COVID-19 and flash flood situation in Bangladesh. The survey data collection took into consideration the safety measures and precautions considering the pandemic. DMA applied a 'do no harm approach' while collecting data and the enumerators took necessary precautions, for example wearing masks and keeping social distance while collecting the data physically.

The PaBS 2020 is supported by the Monitoring and Evaluation (M&E) system of the SHOUHARO III program. The survey was conducted in the program implementing areas in Char and Haor regions and targeted Poor and Extreme Poor (PEP) households that are program participants. The PaBS is crucial to gain an accumulated understanding of the progress and major outcomes, which eventually will help the overall program management. The survey questionnaire was revised in this reporting year. A residential training was conducted for 30 enumerators and supervisors who were engaged in the data collection process. One of the key highlights of this year's PaBS was an improved training for the enumerators as the technical staff of the program attended the enumerators' training to clarify technical questions in the survey questionnaire.

Four major sampling frames were determined for mixed program interventions and indicators, which included i) Value chain beneficiaries, ii) Agriculture-other COG, iii) Off-Farm IGA, and iv) Mothers of 6-23 months children (MCHN) in the PaBS 2020. There were changes made in the survey indicators this year considering the current context. The BHA suggested that the PaBS's focus should be on crucial indicators, and therefore identified 36 indicators to be measured through this year's survey. Besides, 11 indicators were identified as less crucial and were dropped later. The survey tool was tested with the respondents from all sampling frames. The data collection process took place from 17 September to 1 October 2020. There were two interconnected yet separate services, one was the COG survey and the other was the MCHN survey. The MCHN survey was conducted solely by female enumerators. The analysis was done using both weighted and non-weighted data, and finally, weighted data were used as per the BHA guideline. The total target sample for the PaBS in this fiscal year was 1,050 participants.

From the findings, it was observed that the program achieved its targets in the majority of its outcome areas. However, the program may need to review its implementation in a few areas like, handwashing knowledge and reducing gender-based violence to gain better results.

More particularly, the survey findings suggested that this year the access of participant households to market significantly increased. The survey results also showed that the number of children in the

program participating households who received minimum dietary diversity and minimum meal frequency significantly increased. The program interventions on resilience capacities led to some great results as the Coping Strategy Index (CSI) score significantly increased. A significantly increased number of participants reported being satisfied with the services that were provided by the local government more particularly the Union Parishad (UP). One of the notable findings in this year was a significant increase in the mean age at marriage among women aged from 15 to 49 years.

The survey findings pinpointed some specific areas where the program's performance was not up to the mark, like - decreased food production in the participating households and reduced number of live births that received at least for antenatal care (ANC) visits during pregnancy. Also, the percentage of households that had access to an improved sanitation facility significantly decreased to 65.7% in FY20. One of the result areas that the program should be concerned about was the increased number of participants responding that they knew either a neighbor or a friend who had experienced domestic violence in this reporting year. The number significantly increased from 39.2% in FY19 to 90.1% in FY20. This result needs to be interpreted carefully as the definition of VAW was reviewed and expanded to include emotional oppression this year. Moreover, a significantly increasing number of women especially married women between 15 to 49 years needed to seek permission to visit a location 42% to 61.1% in the current year.

The p-value was used to examine whether the statistically significant change (increase/decrease) was observed or not for an indicator in the current survey compared to the previous year's survey. The p-value<0.05 indicated that the change occurred at a 5% level of significance, whereas the p-value<0.10 reveals the fact that the change was observed at a 10% level of significance. The summary findings are presented in Table 1 below:

Table 1 Summary findings including P-value

Ind. #	Indicator Description	Result FY19	Target FY20	Weighted Result FY20	% of Target Achieved	p-value	Remarks
			Purpose 1				
Custom 5	Percentage (%) of beneficiary households with increased food production	78.7	83	61.4	74%	<0.001	Decreased significantly
Custom 12	% of poor & extreme poor (PEP) households accessing markets	82	83	92.1	111%	<0.001	increased significantly
			Purpose 2				
Custom 27	Custom: Prevalence of children 6–23 months receiving a minimum dietary diversity	59	65	70.5	108%	<0.001	increased significantly
Custom 28	Custom: Prevalence of children 6–23 months receiving a minimum meal frequency	49.9	55	67.2	122%	<0.001	increased significantly
M24	FFP-M24(53): Number of live births receiving at least four antenatal care (ANC) visits during pregnancy	64.3%	8000	48.7%		0.006	Decreased significantly
Custom 31	Custom: Percent of mothers who feel it is important to wash hands at five critical times	15.7	40	27.7	69%	<0.001	increased significantly
			Purpose 3				
Custom 43	Custom: Average Coping Strategy Index of the targeted households	67.03	65	93.15	70%	<0.001	increased significantly

Custom 47	Custom: Percentage of household reporting receiving risk and early warning information	84.2	87	93	107%	<0.001	increased significantly
Purpose 4							
Custom 59	Percentage of poor & extreme poor women accessing community level platforms for women empowerment	36.7	70	96.1	137%	<0.001	increased significantly
Custom 61	Custom: Percentage of respondents who know a neighbor or friend who has experienced domestic violence (includes: child marriage, physical abuse, sexual harassment, emotional oppression) in the last month	39.2	25	90.1	28%	<0.001	increased significantly
Custom 63	Custom: Percentage of program participants aware of the cost and consequences of Gender-Based Violence	61.1	75	67.9	91%	<0.001	increased significantly
Purpose 5							
Custom 71	Custom: Percentage of respondents who are satisfied with the overall services provided by local govt. (Union Parishad).	56.7	62	57.2	92%	<0.001	increased significantly
M36	FFP-M36(TBD-27): Index of social capital at the household level	55.17	55	74.66	136%	<0.001	increased significantly
EMPP indicator							
FFP 46	Percent of physically improved sanitation facilities with feces visibly present on the floor, wall, or area immediately surrounding the facility	36.1	Dropped but use in EMPP	19.1		<0.001	Decreased significantly
	Percent of households using an improved sanitation facility (FFP 41)	68.2		65.7		<0.001	Decreased significantly
Baseline and Endline Custom Indicators							
	Percent of married women aged 15-49 who need to seek permission to visit a certain location	42		61.1		<0.001	increased significantly
	Percent of married women aged 15-49 whose husbands help with household tasks.	65.4		70.3		<0.001	increased significantly
SHOUHARDO III S3X indicator							
Health, Nutrition & Women Empowerment							
Custom 100	Custom: Mean age of marriage among women aged 15-49	15.53	16	15.89	99%	<0.001	increased significantly
DRR							
M38	FFP-M38(TBD-29): Number of participants who reported increased access to targeted public services	69.8%	120250	74.9%		0.019	increased significantly
WASH							
Custom 121	Custom: Percentage of Lactating Mother practicing hygiene behavior practices		60	23.8	40%	<0.001	increased significantly

INTRODUCTION

Background

Bangladesh is globally recognized for its unique journey for addressing poverty and accelerating economic growth. Behind this rosy picture, however, lies a sorry state: Bangladesh is still a home for around 40 million poor and 21 million extreme poor according to 2016 data (HIES 2016)[1]. Cooperative for Assistance and Relief Everywhere (CARE) has been implementing the Strengthening Household Ability to Respond to Development Opportunities (SHOUHARDO) III funded by the United States Agency for International Development (USAID) and the Government of Bangladesh (GoB) since September 2015. The program goal is to achieve improved gender equitable food and nutrition security and resilience of the vulnerable people living in the Char and Haor in Bangladesh by 2020. The program applied an integrated model for reducing child malnutrition while contributing to the household livelihood security and women's empowerment. The program is implemented in the Char and the Haor areas, reaching eight districts (Sirajganj, Kurigram, Gaibandha, Jamalpur, Kishoreganj, Netrokona, Habiganj, and Sunamganj), 23 Upazilas, and 115 unions of Bangladesh. Focused on the PEP, irrespective of their relative geographic inaccessibility, SHOUHARDO III places the empowerment of these people at the center of its intervention. More specifically, the program delivers an integrated set of services in the areas of agriculture and livelihoods, health, hygiene, and nutrition, and disaster and climate risk management with a crosscutting emphasis on gender equality, good governance, and youth. The program has already completed its five years of implementation in 2020.

The program is implemented through six national Partner Non-Governmental Organizations (PNGOs) that receive technical and operational guidance from CARE. The program partnered with the GoB through the Program Advisory and Coordinating Committees (PACC) at multiple tiers. The program focuses on ensuring the availability, access, utilization, and stability of food insecurity, as well as addressing the underlying causes that include social injustice, discrimination, lack of participation and

[1] https://www.thedailystar.net/opinion/news/poverty-bangladesh-where-focus-and-how-1815082, cited on 9 October 2020.

voice, and heightened vulnerability to natural disasters and climate change. To achieve this goal, the program has set five purposes:

In the Fiscal Year (FY) 20, the SHOUHARDO III program contracted Data Management Aid[2] (DMA), a private consultancy firm that provides services related to field-based research, to carry out the Participants Based Survey (PaBS) in the program implementing areas. In doing so, it targeted Poor and Extreme Poor (PEP) households that are program participants. The PaBS is typically used in the context of project monitoring to ensure that project implementation is rolling out as expected and that project interventions are on track for achieving their intended outcomes and targets in the participant population3. The results of this monitoring exercise have been typically used to inform decisions on program strategies. The program takes necessary action and course correction on areas that are not on track according to the monitoring data. It collects data periodically in support of the annual monitoring indicators. This year too, the PaBS collected data on the selected annual monitoring indicators.
The program completed its 5th year and conducted an annual participant-based survey in September 2020. The context of this reporting year was different and complex compared to the previous years due to the COVID-19 pandemic. The coronavirus was first confirmed to have spread to Bangladesh in March 2020. Since then, the pandemic spread day by day in the entire country. The government of Bangladesh issued a ban on people's movement and transportation for several months to prevent widespread transmission. In addition, the recent flash flood in the SHOUHARDO III program areas was another concern while conducting the PaBS in a timely manner. According to NASA Earth Observatory, since early June 2020, monsoon-related floods have devastated millions of people in South and East Asia. One of the most severely affected countries has been Bangladesh, where at least a quarter of the country was inundated. Reportedly more than four million people have been affected and at least 100 had died as of July 28. Monsoon rains typically cause some level of flooding, but according to many, this flooding may be the worst in a decade and the longest-lasting since 1988. As of July 31, the Bangladesh Flood Forecasting and Warning Centre reported water levels along the Jamuna River were at or above 'danger level'. Almost a million homes were inundated, and more than 1,500 square kilometers (600 square miles) of farmland were damaged across the country. Several areas are also isolated due to flooded roads. Many flood protection structures, such as embankments and dykes, were already damaged from monsoon floods in recent years; the typical recovery cycle is usually three to five years. The country is also recovering from Cyclone Amphan, which hit the country's coast in May 2020. The COVID-19 pandemic has constrained response efforts[4] related to flood recovery. The devastating floods have damaged various crops including Aus, Aman, jute, and vegetables worth in the country. The floods submerged some 159,000 hectares of agricultural land in 37 districts including Gaibandha, Kurigram, Sirajganj, Sunamganj, Jamalpur, Netrokona[5] of the country in three phases which affected a total of 12,72,151 farmers, according to the Ministry of Agriculture of Bangladesh[6].

[2] http://www.dmabd.com/, cited on 10 October 2020.
[3] https://www.fantaproject.org/monitoring-and-evaluation/sampling-guide-participant-based-survey-feed-the-future-annual-monitoring, cited on 2 October 2019
[4] https://earthobservatory.nasa.gov/images/147057/intense-flooding-in-bangladesh#:~:text=Since%20early%20June%202020%2C%20monsoon,of%20the%20country%20was%20inundated.&text=The%20image%20below%20shows%20the%20flooding%20on%20July%2025%20in%20natural%20color., cited on 1 October 2020.
[5] https://bdnews24.com/bangladesh/2020/07/20/floods-destroyed-crops-worth-tk-3.49-billion-in-bangladesh-minister#:~:text=The%20government%20has%20estimated%20crop,vegetables%2C%20jute%20and%20other%20crops.&text=A%20total%20of%2041%2C918%20hectares,loss%20of%20Tk%203.49%20billion., cited on 29 September 2020.
[6] https://www.dhakatribune.com/bangladesh/2020/08/19/flood-costs-bangladesh-crops-worth-1-323c, cited on 29 September 2020.

The survey modality was heavily influenced by the COVID-19 and flash flood situation in Bangladesh. CARE intended to conduct face-to-face interviews maintaining the necessary social distancing protocol for COVID-19 and adhering 'do no harm' policies, however, was also ready to make necessary adjustment (e.g., remote data collection) in the process to ensure the safety of the participants as well as the enumerators. In the first year i.e. in 2016, a Beneficiary Based Survey was commissioned to generate/set base values and helped develop targets that the program can compare its progress against in the out-year targets. Thus, the first year BBSS was primarily considered as the baseline of the annual monitoring indicators. In 2017, 2018, and 2019 the Annual Monitoring survey (titled as BBS 2017 and 2018; PaBS in 2019) carried out to ascertain progress against the target of FY17, FY18, and FY19 respectively. Similarly, the 2020 annual monitoring survey (PaBS) was conducted to measure the progress of the annual monitoring indicators for FY2020 targets. The annual monitoring survey results were only compared to the targets for the respective years.

SHOUHARDO III has developed a Monitoring and Evaluation (M&E) plan to track the progress and outcome of the program regularly and periodically. Out of 101 Annual monitoring indicators, 47 annual monitoring indicators were measured by conducting a Participants Based Survey (PaBS) annually. These 47 indicators were monitored each year to generate data for annual reporting to BHA/USAID and to provide timely information for program management decisions. Considering the current context and advice from the BHA M&E, the Participants Based Survey indicators were reviewed based on the current year's field activities, required interview time, and cost-benefit analysis of indicators for identifying crucial and less crucial indicators for the upcoming survey. The program intended to measure 36 crucial indicators in the current PaBS survey. Out of the total number of initial PaBS indicators, 11 indicators were identified as less crucial and the current PaBS did not collect data on those.

Objective

The PaBS 2020 aimed to compare changes in indicators set by the SHOUHARDO III program over a period of 12 months, starting from October 2019 to September 2020. This report offers a detailed overview of the progress on the impact and outcomes indicators of the program. The data was collected to foster the monitoring of the program activities implemented in the last one year and evaluation of the program at various stages. The PaBS results are expected to help the SHOUHARDO III program not only to assess its outcomes but also help to identify areas of future emphasis for the program.

Participants Based Survey Methodology

SHOUHARDO III developed a five-year Monitoring and Evaluation (M&E) plan to track the progress and outcome of the program. The Feed the Future (FtF) PaBS sampling guideline[7] was used to develop the sampling strategy for PaBS 2020 of the SHOUHARDO III program. Following are the Annual Monitoring Indicators (Table 2) that were assessed through the 2020 PaBS:

Table 2 Indicators for Annual Monitoring

SL	Indicator	Sampling frame population for FY20	Remarks
Indicators with TOTAL Values			
1	**FFP-M15 (TBD-11):** Yield of targeted agricultural commodities among program participants with USG assistance (RiA)	Total 149,157 (15,419 Maize, 6,596 Chili, 4,105 Sweet Gourd, 95,232 Goat and 10,602 Duck, Agri-Others- 17,203)	**Crucial**
2	**FFP-M14(27):** Number of farmers who practiced value chain activities with USG assistance	Total 131,954 VC (15,419 Maize, 6,596 Chili, 4,105 Sweet Gourd, 95,232 Goat and 10,602 Duck)	**Crucial**

[7] https://www.fantaproject.org/sites/default/files/resources/Sampling-Guide-Participant-Based-Surveys-Sep2018_0.pdf

SL	Indicator	Sampling frame population for FY20	Remarks
3	**FFP-M9 (TBD-8):** Number of hectares under improved management practices or technologies with USG assistance (RiA)	Total 43,323 (15,419 Maize, 6,596 Chili, 4,105 Sweet Gourd, Agri-Others COG - 17,203)	**Crucial**
4	**FFP-M16 (TBD-12):** Number of individuals in the agriculture system who have applied improved management practices or technologies with USG assistance (RiA)	Total 149,157 (15,419 Maize, 6,596 Chili, 4,105 Sweet Gourd, 95,232 Goat and 10,602 Duck, Agri-Others- 17,203)	**Crucial**
5	**FFP-M33 (TBD-24):** Value of annual sales of producers and firms receiving USG assistance (RiA)	Total 149,157 (15,419 Maize, 6,596 Chili, 4,105 Sweet Gourd, 95,232 Goat and 10,602 Duck, Agri-Others- 17,203)	**Crucial**
6	**FFP-M24(53):** Number of live births receiving at least four antenatal care (ANC) visits during pregnancy	16,310 Mothers with children 6-23 Month age	**Crucial**
7	**FFP-M11(77):** Number of people using climate information or implementing risk-reducing actions to improve resilience to climate change as supported by USG assistance (RiA)	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
8	**FFP-M38(TBD-29):** Number of participants who reported increased access to targeted public services	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
Indicators with <u>PERCENT</u> Values for COG & Other Beneficiaries			
9	**Custom:** Percentage (%) of beneficiary households with increased food production	149,157 (131,954 VC+17,203 Agri-Others COG)	**Crucial**
10	**Custom:** Percentage of farmers received support from GoB institutions/ public services	149,157 (131,954 VC+17,203 Agri-Others COG)	**Crucial**
11	**Custom:** % of poor & extreme poor (PEP) households accessing markets	149,157 (131,954 VC+17,203 Agri-Others COG)	**Crucial**
12	**Custom:** Percent of individuals income source increased than previous with project assistance	164,765 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm)	**Crucial**
13	**Custom:** % of households reporting understanding of elements of disaster preparedness in project defined criteria	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
14	**Custom:** Percentage of household reporting receiving risk and early warning information	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
15	**Custom:** % of households report that health, gender, and disaster preparedness by actors build on each other are well-coordinated and focused on the most critical needs.	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Less crucial**
16	**Custom:** Percentage of eligible project participants who participate in government safety nets	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Less crucial**
17	**Custom:** Percentage of adolescent girls and female youth (15-25) who make decisions alone about the use of self-earned cash	7,557 adolescent girls and female youth	**Less crucial**

SL	Indicator	Sampling frame population for FY20	Remarks
18	**Custom:** Percentage of poor & extreme poor women accessing community level platforms for women empowerment	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
19	**Custom:** Percentage of poor & extreme poor (PEP) women actively participating in community level organizations	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
20	**Custom:** % of respondent can identify and explain issues of women and girls' rights	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Less crucial**
21	**Custom:** Percentage of respondents who know a neighbor or friend who has experienced domestic violence (includes child marriage, physical abuse, sexual harassment, emotional oppression) in the last month	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
22	**Custom:** Percentage of Men & adolescent boys who report they do not support gender-based violence (including sexual harassment)	72,054 (6,924 adolescent boys+ 56,130 Men from COG survey)	**Less crucial**
23	**Custom:** Percentage of program participants aware of cost and consequences of Gender-Based Violence	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
24	**Custom:** Percentage of respondents who are satisfied with the overall services provided by local govt. (Union Parishad).	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
25	**Custom:** Percentage of producers who used improved inputs during the past 12 months	Total 43,323 (15,419 Maize, 6,596 Chili, 4,105 Sweet Gourd, Agri-Others COG - 17,203)	**Crucial**
26	**Custom:** Percentage of farmers who reported to get market information in the last 12 months	149,157 (131,954 VC+17,203 Agri-Others COG)	**Crucial**
27	**Custom:** Percentage of PEP who reported improved pro-poor financial products in past 12 months	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Less crucial**
28	**Custom:** Percentage of HHs using health and nutrition services in past 12 month	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
Indicator with PERCENT Values for MCHN			
29	**Custom:** % of pregnant and lactating women taking iron supplements in the last 7 days	16,310 Mothers with children 6-23 month	**Less crucial**
30	**Custom:** % of adolescent girls who supplemented with IFA (Iron Folic Acid) in 6 months in the reporting year	7,557 adolescent girls and female youth	**Less crucial**

SL	Indicator	Sampling frame population for FY20	Remarks
31	**Custom:** Percentage of Mother-who received pregnancy care support (day-time rest, extra food) during the pregnancy period	16,310 Mothers with children 6-23 month	**Crucial**
32	**Custom:** % prevalence of diarrhea for children between 6-23 months of age (Percentage of children under age two who had diarrhea in the prior two weeks)	16,310 Mothers with children 6-23 months	**Crucial**
33	**Custom:** Percentage of people received health and nutrition services from private sector	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Less crucial**
34	**Custom:** Percentage of households satisfied on Community Clinic services	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
35	**Custom:** Prevalence of children 6–23 months receiving a minimum dietary diversity	16,310 Mothers with children 6-23 month	**Crucial**
36	**Custom:** Prevalence of children 6–23 months receiving a minimum meal frequency	16,310 Mothers with children 6-23 months	**Crucial**
37	**M 4 (TBD 5):** Percent of households with soap and water at a handwashing station on-premises (RiA)	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
38	**Custom:** Percentage of people in target areas with access to improved sanitation facilities	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
39	**Custom:** % of children immunized against 8 diseases under GoB protocol by 12 months of age	16,310 Mothers with children 6-23 months	**Less crucial**
40	**Custom:** % of PEPs HHs received health and nutrition services from community level health facilities	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Less crucial**
41	**Custom:** Percent of mothers who feel it is important to wash hands at five critical times	16,310 Mothers with children 6-23 month	**Crucial**
42	**Custom:** Percentage of Lactating Mother practicing hygiene behavior practices	16,310 Mothers with children 6-23 months	**Crucial**
Indicators with <u>MEAN</u> Values for all Beneficiary Households			
43	**Custom:** Average Coping Strategy Index of the targeted households	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
44	**FFP-M36(TBD-27):** Index of social capital at the household level	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
45	**Custom:** Mean decision-making score (Index) for woman in household level	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+	**Crucial**

SL	Indicator	Sampling frame population for FY20	Remarks
		16,310 Mothers with children 6-23 months)	
Indicators with MEAN Values for Women & MCHN participant			
46	**Custom:** Women's Dietary Diversity Score (WDDS)	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**
47	**Custom:** Mean age of marriage among women aged 15-49	173,455 (131,954 VC+17,203 Agri-Others COG + 15,608 IGA-Off Farm+ 16,310 Mothers with children 6-23 months)	**Crucial**

Out of a total of 47 annual monitoring indicators, 11 (15 to 17, 20, 22, 27, 29, 30, 33, 39, and 40) were identified as "less crucial" and were excluded from this year's PaBS. A total of ten (1 to 8, 37, and 44) FFP indicators were identified as critical for BHA's annual results reporting. These ten indicators are also critical for Feed the Future (FtF) annual monitoring. Therefore, the Feed the Future BBSS sampling guideline[8] was used to develop the PaBS sampling strategy for SHOUHARDO III program annual monitoring survey, particularly for these ten indicators. Sample weighting and data analysis were done following the FtF BBS guideline.

The survey used a structured questionnaire which was earlier approved by Food For Peace (FFP) in 2017 and revised in 2020. The survey (PaBS) was conducted by DMA, a renowned third-party survey firm, coordinated by SHOUHARDO III M&E staff. The primary audience of the survey report includes the SHOUHARDO III Program, as well as USAID and CARE program partners. The key use of the survey report is intended in operational planning, improvement of decision making, and at the same time for annual regulatory program reporting internally, to USAID and Government of Bangladesh (GOB). CARE aims at making extensive use of findings from the survey to document and disseminate program performance against output, outcome, and higher-level indicators and major success at length. The survey results will also be used as complementary data for Baseline as well as later as Performance Evaluations of the Food for Peace funded Development Food Security Activities (DFSA) in Bangladesh.

Survey Design/Sampling Plan

The 47 annual monitoring indicators are representative of several individuals and combined sampling frames. Some of the indicators are measured as total values; some are with percent values (proportions of the sample) and some with mean values. Hence, the decision on the sampling frame and sample size estimation process considered the indicator types and their representativeness. The following sections have a detailed discussion on deciding the sampling frames, final sample size, and sampling methodology for 2020 PaBS.

Sampling Frame of the PaBS

SHOHARDO III intends to work with 164,765 households of Core Operational Group (COG) for all activities, through different subgroups over the LOA. The project anticipates reaching all targeted 164,765 COG beneficiaries in 2020. The COG includes 131,954 value chain farmers, 17,203 other farmers (IGA-on Farm, CHD, Fisheries, and FC), and 15,608 IGA-Off Farm beneficiaries. 16,310 MCHN beneficiaries

[8]Sampling Guide for Beneficiary-Based Surveys in Support of Data Collection for Selected Feed the Future Agricultural Annual Monitoring Indicators by Diana Maria Stukel and Gregg Friedman, February 2016.

overlapped 4.6 percent with the COG beneficiaries. Other farmers and IGA-off farm beneficiaries are mutually exclusive with each other and the value chain beneficiaries but they have very little overlapping with MCHN beneficiaries (.63% off-farm beneficiaries, .24% other farmers, and 3.76% value chain farmers).

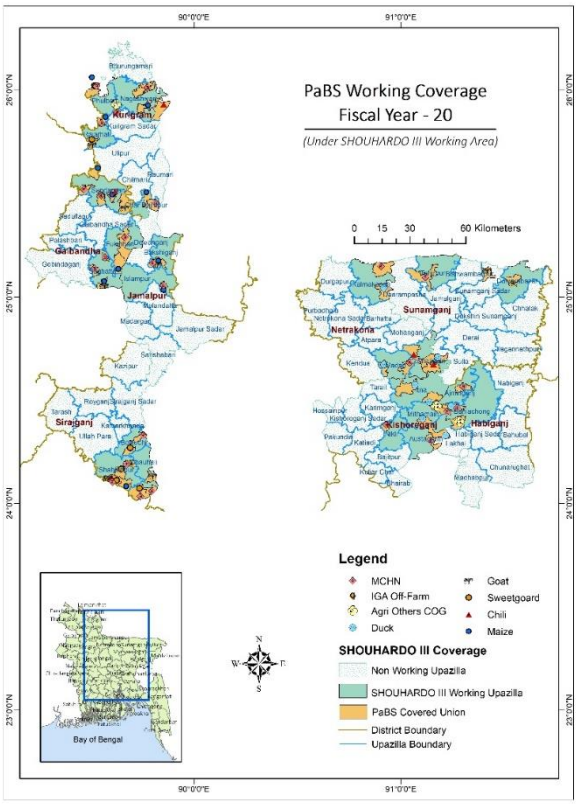


Image 1 PaBS Working Area Coverage

Given the relative mix of programming activities and the indicators selected to monitor program progress, four major sampling frames: i) Value chain beneficiaries, ii) Agri-other COG, iii) Off-Farm IGA iv) mothers of children 6-23 month of age (MCHN) were sufficient to capture the information necessary to track all annual monitoring indicators Table 2. The program has almost completed all main activities and there will be no chance to increase the number of beneficiaries. Therefore, FY20 actual values will be considered for sampling frames for the sample size estimation and sampling.

Image 1 identifies the areas from which the PaBS data was collected. It contains the location of the sampling population at a glance.

Estimation of Sample Size

The sample for the annual survey was randomly drawn from separate lists of value chain farmers for each commodity, (Maize, chili, sweet-gourd, goat, and duck), Agri-Others COG, Off-farm IGA farmers, and MCHN beneficiaries. Independent samples were drawn from separate sampling frames, one for each value chain commodity, Off-farm IGA farmers, MCHN beneficiaries, and Agri-Others COG beneficiaries based on the indicator types. A two-stage cluster sampling procedure was applied to select the sampling units, where the clusters were the program villages will be selected using the Probability Proportional to the Size (PPS) method. For PPS selection, the 'size' of the cluster was the total number of beneficiaries from the four sampling frames (value chain, Agri-Others COG, Off-farm IGA, and MCHN) within that cluster.

The indicators were estimated for totals, percent values (proportions), and mean values. Therefore, the following are the three different sample size estimation formulas that have been used to estimate the minimum required samples for indicators with totals, proportions, and mean values:

A. ***Sample Estimation formula for the indicators (M33, M9, M16, M24, M11, and M38) with <u>TOTAL</u> value[9]:***

$$n = \frac{N^2 \times Z^2 \times S^2}{MOE^2}$$

[9] Sampling Guide for Beneficiary-Based Surveys in Support of Data Collection for Selected Feed the Future Agricultural Annual Monitoring Indicators by Diana Maria Stukel and Gregg Friedman, February 2016.

Where,

Z = critical value from the normal probability distribution (95% confidence level: 1.96)

N = total number of the beneficiary in the respective sampling frame

S = standard deviation of the distribution of beneficiary data (approximation: [$indicator_{max} - indicator_{min}$]/ 6)

MOE = margin of error (p * target value of indicator)

p = Acceptable percentage of error 7.5%[10] for all indicators

B. ***Sample size estimation formula for the indicators (custom indicators 9 to 42 and M4) with <u>PERCENT</u> value:***

$$n = \frac{z_\alpha^2 \times p(1-p)}{\varepsilon^2}$$

Where,

Z_α = is the critical value for normal probability distribution at 95% confidence level = 1.96

P = Proportion of population with the desired attribute

ε = Maximum desired sampling error (margin of error) = 7.5% = 0.075

C. ***Sample size estimation formula for the indicators (custom indicators 43 to 47 and M36) with <u>MEAN</u>[11] value:***

$$n = \frac{z_\alpha^2 \times CV^2}{\varepsilon^2}$$

Where,

Z_α = is the critical value for normal probability distribution at 95% confidence level = 1.96

CV = Coefficient of variation = 0.5 (consider standard normal distribution and assuming that the standard deviation is 50% of the mean)

ε = Maximum desired sampling error (margin of error) = 7.5% = 0.075

Using the above three formulas and parameters the minimum required samples for the 2020 PaBS indicators are given in **Table 2**.

Since the sample frame remains the same as in 2019, the total sample did not exceed the FY19 sample size. The estimated sample size was computed to be representative to estimate the 36 crucial indicators for Round-5 PaBS. The sampling frames were defined separately for each crucial indicator and remain the same for 2020 PaBS. The alternative strategy of applying a combined sampling frame would be more complicated for the sampling of representative samples to estimate indicators values accurately. Also, applying a combined sampling frame required inflating the sample size to ensure an adequate number of samples for each of the intervention categories. Under the combined sampling strategy, the total required sample size were much larger, possibly double, that of the sampling strategy stratified by intervention category. Thus, applying the stratified sampling strategy was less expensive, because smaller sample size was required. Besides, the same indicator analysis syntax and sampling weights for 2019 PaBS were used for 2020 PaBS analyses with less effort. Excluding the 11 non-crucial indicators reduced the length of the questionnaire and the interview time. For these reasons, the 2020 PaBS is proposed to be conducted with the same sample size and sampling strategy that was used in the 2019 PaBS.

Table 3 Sample size for 2020 SHOUHARDO III PaBS

Survey	Sampling Frame	Population	Sample Size	Sample per cluster	No. of clusters
1. COG Beneficiary Survey	A. Value Chain Sampling Frame: 1. Maize	15,419	156 ≈165	15	11

[10] FTF BBSS guideline suggests acceptable percentage error might be considered up to 10% for annual monitoring surveys. But enough sample size is important to get accurate estimates of the indicators. Therefore, 7.5% acceptable percentage error is considered for all indicators.

[11] Department of Statistics, Western Michigan University: http://www.stat.wmich.edu/s216/book/node80.html

	2. Chili	6,596	65 ≈75	15	5
	3. Sweet Gourd	4,105	100 ≈ 105	15	7
	4. Goat	95,232	114 ≈ 120	15	8
	5. Duck	10,602	120 ≈ 120	15	8
	Total of VC	***131,954***		***15***	***39***
	B. Other Agriculture	17,203	41 ≈ 45	15	3
	C. Off-farm IGAs	15,608	29 ≈ 30	15	2
Total for COG		***157,145***[12]		***15***	***44***
2. MCHN Beneficiary Survey	D. MCHN (mother of children 6-23 months)	16,310	380 ≈ 390	15	26
TOTAL SAMPLE SIZE		**173,455**	**1,050**[13]		

Sampling procedure

DMA followed the process of selecting sample clusters and survey respondents which has been defined in 9.4.1 section of FANTA Sampling Guide for Beneficiary-Based Surveys- Diana Maria Stukel Gregg Friedman, February 2016.

The general steps of the Sampling Units (beneficiaries) selection and data collection process were:

Selection of Clusters: Select clusters for COG beneficiary and clusters for MCHN beneficiary (mother with children 6-23 months) survey sampling frames, using Probability Proportional to the Size (PPS) procedure.

Selection of Survey respondents: Survey respondents were selected before fieldwork using the method of fractional interval systematic sampling from a comprehensive list of beneficiaries using one of two variants of an equal probability method: In each selected cluster, the beneficiary will be drawn randomly from the respective sampling frame.

The FY2020 PaBS sampling frame was constructed from the Program MIS database system. The MIS database has been designed to identify households by beneficiary types (COG, MCHN being the most dominant) with unique identifiers both for households and individuals in those households. DMA (with the support from a statistician and the Senior Team Leader - Monitoring and Evaluation of the SHOUHARDO III program) prepared the sampling plan and sampling frame. DMA deployed several survey teams in line with the field data collection schedule and number of survey locations. Movement from one district to another should also be considered during the survey planning. The M&E team monitored the data collection process and conduct a data quality assessment throughout the survey period.

The primary selection unit was the beneficiary. This survey had four sampling frames Value Chain Farmers, Agri-Others COG, Off-farm IGA, and Mother with Children 6-23 Month Age, the survey team provided skip logic in the questionnaire for each of these groups where specific modules don't apply. Further sufficient training and guidance to enumerators on the morning of surveys were provided to ensure that there is clear instruction on the sample frame and modules applicable for each household they visited.

[12] 4.625% overlapped beneficiaries of MCHN sampling frame is eliminated

[13] This total sample size is still under negating process with USAID/BHA, it can be increased based on the suggestion of BHA M&E advisor, thus contractor is expected to have a contingency plan so that, 20% increased of overall sample size can be accommodate in the PaBS survey within the proposed resource planning as agreed both CARE and contractor

SHOUHARDO III does not consider the household as a sampling unit. Instead, the individual beneficiary is considered a sampling unit as well as the respondent of the PaBS survey. In the PaBS, some indicators designed to measure household information as a whole, in that case, survey questions have been designed to capture information of entire household status through the responses of sampled beneficiary respondents.

Sampling Weights & the Treatment of Non-Response

Sampling weights were included in the data file. The formulae used to calculate the sampling weights were included as part of a data dictionary document. DMA ensured that standard procedures in developing sampling weights were followed according to FANTA guidelines. Note that a household non-response adjustment was made to the sampling weights as part of the final weighting system and description of how the outlier was addressed.

Survey Questionnaire

Survey Tools and Survey Questionnaire

A structured questionnaire was used based on the Participants Based Survey (PaBS) indicators (Table 2) and other Environment Monitoring and Mitigation Plan (EMMP) Indicators and other information required as per CARE and FFP requirements. In 2017, a questionnaire was used for BBS (approved by FFP), and the same instrument was used for the 2019 questionnaire. DMA worked with the SHOUHARDO III team on revising and updating the questionnaire/outline following the Feed the Future[14] and FFP guidelines and shared with the surveyor for finalization (if needed).

Translation of Questionnaire

The questionnaire form was translated into Bangla by the surveyor. The system allowed the enumerators to use either language at any time on the mobile/tablet data collection device.

Adapting the questionnaire to the local context and if additional questions were added to the instrument. Translating the approved questionnaire instrument and manual from English into Bangla and then retranslating the questionnaire from Bangla to English with a second translator to ensure it is accurately translated in Bangla. Necessary changes to the Bangla questionnaire were made based on the re-translation. Final Bangla and corresponding English questionnaires and manuals were reviewed and approved by CARE. The final version of the questionnaire has also been shared with BHA for their input**.**

Pre-Testing and Finalization of Questionnaire

After receiving requested approval, the questionnaire was tested at the field by the surveyor with the oversight of CARE M&E staff to ensure that the questionnaire is refined and adequately contextualized.

Data Management and Analysis

The preferred mode of data collection is through smartphones and/or tablets. Data were uploaded to the central server online and/or offline (with synchronization functionalities) and the dataset was converted into an SPSS database for data management and analysis. Validated data were accumulated in the main SPSS database daily.

During the analysis, sampling weights were included in the data file. The formulas used to calculate the sampling weights were also included as part of a data dictionary document. DMA ensured that standard

[14] Feed the Future Agricultural Indicators Guide Guidance on the collection and use of data for selected Feed the Future agricultural indicators Suzanne Nelson Anne Swindale September 2013

procedures in developing sampling weights followed the FANTA guideline. Besides, households' non-response adjustment was made to the sampling weights as part of the final weighting system. The description of how the outliers were addressed is given in this report. In summary, the below steps were followed for each of the sampling frames to select the survey cluster:

Step 1: Listed the primary sampling units and their population sizes (a).

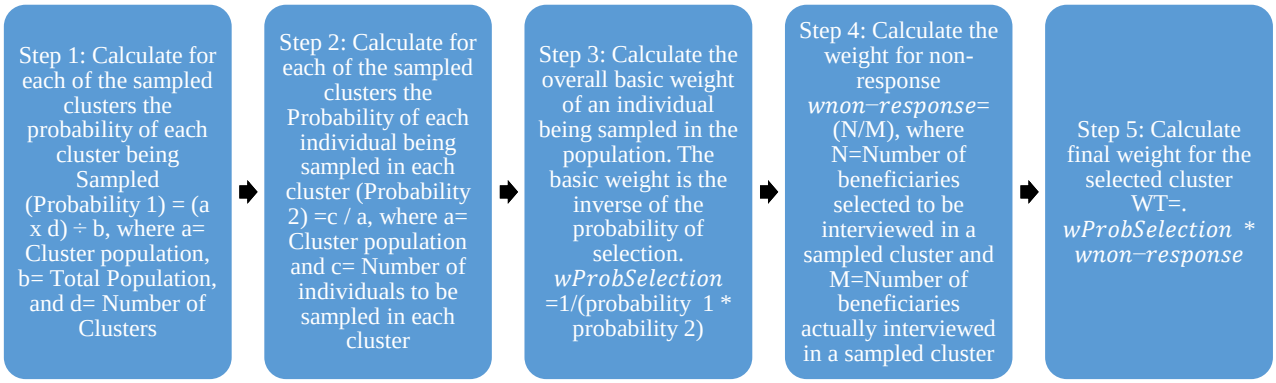
Step 2: Calculated the cumulative sum of the population sizes and Total Population (b).

Step 3: Divided the total population by the number of clusters (decided earlier for each of the sampling frames) to be sampled, to get the Sampling Interval (SI).

Step 4: Choose a random number between 1 and the SI for Random Start (RS) using excel command=rand()*SI.

Step 5: Calculated the following series: RS; RS + SI; RS + 2SI; …. RS+(d-1)*SI to get the required number of clusters for each sapling frame.

Before analyzing the data, weighting factors for each of the clusters were generated as per the PaBS sampling guide[15]. The summary of the steps followed is given below:



Data were analyzed using SPSS and the weighting factors were applied using SPSS syntax shown below.

Compute wt=1.

if (frame=1 and cluster=3) wt=3.45.

…….

if (frame=5 and cluster=90) wt=226.13.

WEIGHT BY wt.

Data Quality Assurance

There were six data collection teams where each team was comprised of five enumerators and one supervisor/quality controlled officer from the contracted surveyed firm. The team supervisors were

[15] Ibid

mainly responsible for monitoring data collection and quality controlled. These field supervisors reviewed data from the mobile device daily to ensure data quality. The supervisors utilized additional data quality monitoring controls. Besides third party quality control, the SHOUHARDO III M&E team remotely monitored data consistency throughout the data collection process.

Field supervisors regularly collected all mobile devices from the interviewers and review all household interview records, question by question. Cross-referencing of re-interview records with the original records collected by the enumerators happened at that time. Finally, field supervisors uploaded finalized data to the cloud server through a secure transmission.

If the SHOUHARDO III M&E team found any inconsistency of data for a particular enumerator or cluster, they immediately informed the data collection team so that they can make necessary corrections during data collection. This ensured data quality instantly from a different level of quality checking, not just depending on the team supervisors. Feedback was also provided to the field teams to support data quality.

Study Design Limitations

Despite ensuring data quality and maintaining an appropriate data management process, there were some limitations in the survey design that are mentioned below:

- The COVID-19 pandemic and post-flood data collection may have influenced results in some of the technical areas, for example, vegetable production.
- Influence and effects of other NGO program interventions in the study area
- The complexity of sample design and weighting
- Validity and reliability of self-reported data

FINDINGS

The PaBS survey was first conducted in 2016 (was called Beneficiary Based Survey) to generate base values and set targets that the program can compare its progress within the following year's targets. In 2017, 2018, and 2019 the Annual Monitoring survey (titled as BBS 2017 and 2018; PaBS in 2019) determined the program's progress against the targets of FY17, FY18, and FY19 respectively. Similarly, the 2020 Annual monitoring survey (PaBS) measured the progress of the annual monitoring indicators for FY2020 targets. The annual monitoring survey information compared achievement with the respective year's target. Comparative analysis was done for Baseline (Year 1), Year 4, and Year 5 results.

1. Agriculture and Livelihood

The program built capacities of targeted PEP households to increase their agricultural production and incomes, apply modern agricultural technologies, enhance purchasing capacities, and accessibility to the market. It facilitated linkages between participants and relevant government offices and private sector service providers, to increase community access to services such as training and obtaining quality inputs. The survey results showed that the program made significant progress in achieving its target for FY20.

1.1 The yield of targeted agricultural commodities among program participants with USG assistance: Bangladesh's rice, wheat, and corn production were expected to increase due to good weather and increased plantings, according to an April 19 Global Agricultural Information Network report from the US Department of Agriculture (USDA). Rice production for the 2020-21 marketing year is expected to rise to 36.3 million tonnes in Bangladesh as further cultivation of hybrid and high yield variety

plantings increase. The country is expected to import 200,000 tonnes of rice in the 2020-21 marketing year to ease food security tensions brought on by the COVID-19 pandemic, the USDA said[16].

This indicator measured the yield of the field crop and livestock. Yield is a measure of the total output of production of an agricultural commodity (crop, fish, milk, eggs, live animal offtake) divided by the total number of units in production (hectares planted of crops, area in hectares for pond aquaculture, cubic meters of the cage for cage aquaculture, the total number of animals in the herd/flock during the reporting year for live animals, the total number of producing cows or hens during the reporting year for dairy or eggs). Yield per hectare, per animal, and a cubic meter of the cage is a measure of productivity from that farm, fisheries, or livestock intervention from USG-assisted producers.

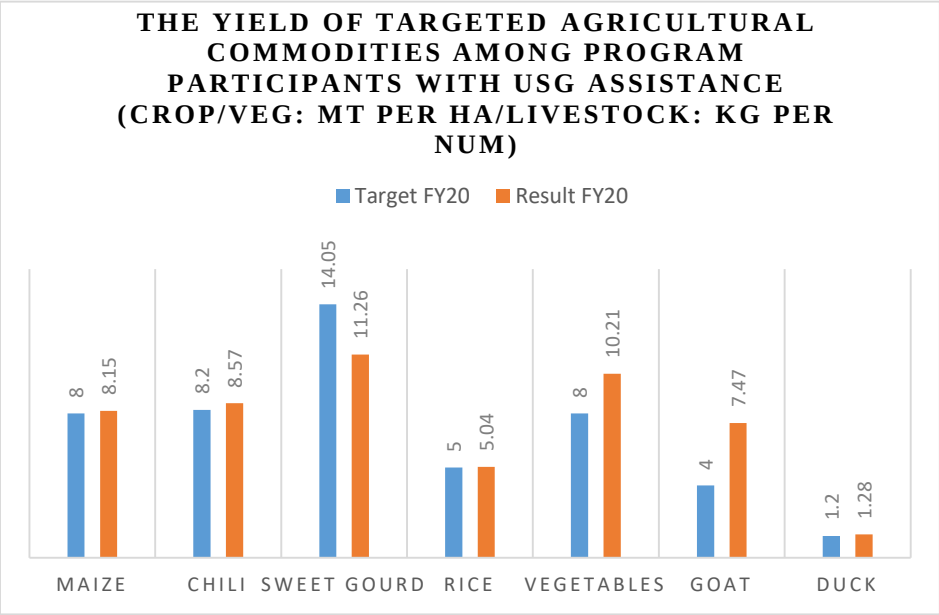


Figure 1 The yield of targeted agricultural commodities

Figure 1 contains the yield of the field crops and livestock produced and reared by the program participants in the fiscal year 2020. As it can be seen that among the field crops, the highest achievement [128%] in yield was recorded for vegetables at 10.21 Metric Tonnes (MT) per Hectare (Ha) in response to the target of 8 MT per Ha. The second highest in the list was secured by a 105 percent achievement in the yield of chili; nearly 8.5 MT per hectare against the target of 8. The yield achieved by the goat farmers, a 187 percent achievement. The target was 4 kilograms (kg) per number whereas the achievement was almost 7.50.

[16] https://www.world-grain.com/articles/13611-bangladesh-grain-output-to-jump-in-2020-21, cited on 9 October 2020.

1.2 Value of annual sales of producers and firms receiving USG assistance: This indicator measures the value in U.S. dollars of the total amount of sales of products and services by USG-assisted producers and firms during the reporting year within USG-supported agricultural commodity value chains or markets. This indicator also collects additional data points on the value of sales in the local currency, the number of activity participants, including the number of producers and the number of assisted private sector firms, and, if applicable, the volume of sales (preferably in metric tons) for agricultural commodities (i.e. seed; food, non-food and feed crops; livestock and livestock products; fish).

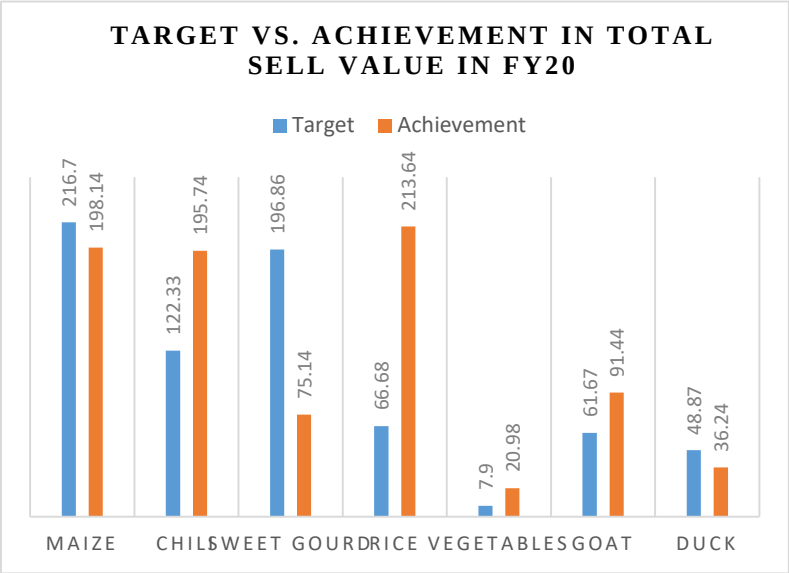


Figure 2 Target vs. Achievement in total sell value in FY20

Figure 2 displays the target and achievement of the total value of annual sales (of field crop and livestock) of producers and firms who received US government assistance in FY20. It suggests that the achievement exceeded the targeted annual value in the sales of chili, rice, vegetables, and goat. It also indicates the opposite of maize, sweet gourd, and duck. It is remarkable to spot that the targeted annual sales value of chili was US$122.93 when the acquired value was US$195.74. Similarly, an overreached achievement of US$213 was noted for the annual sales value of rice while the target was only US$66.68. The sales value for goat hit at US$91.44 while the intended target was US$61.67.

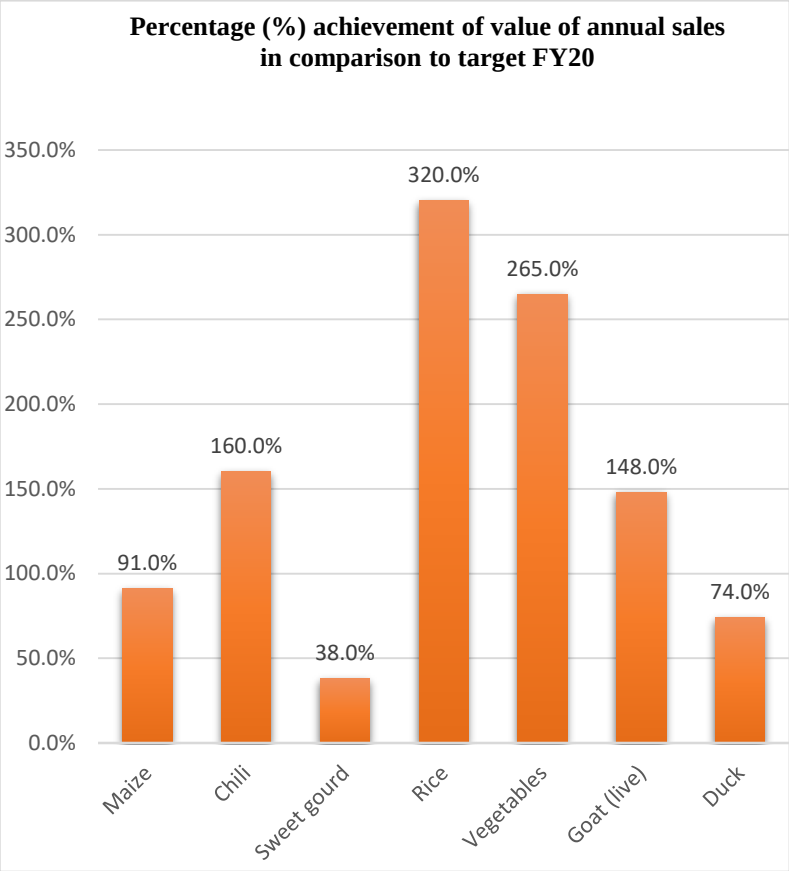


Figure 3 Percentage (%) achievement of value of annual sales in comparison to target FY20

Figure 3 presents the achievement of the value of annual sales in comparison to the target of FY20. The achievement compared to the target for the annual sale of rice was 320 percent; the second highest was for vegetables at 265 percent, followed by chili at 160 percent, and goat at 148 percent.

1.3 The number of farmers who practices the value chain activities with USG assistance:

Agriculture in Bangladesh is characterized by small, rice-dominated farms, which have greatly contributed to increasing food self-sufficiency over the last 30 years. However, this self-sufficiency is continuously threatened by an increasing population and stagnating yields. At the heart of the problem is the 'yield gap', the difference between the amounts produced and the production potential, which remains largely as farmers fail to maximize the use of land. Weak technology carries much of the blame. Farmers lack the machinery and information systems to store their products postharvest or to process them into high-value commodities such as fruit juice and jam. Lack of crop diversification, deteriorating and declining cultivable land, as well as poor linkages to markets, also play a crucial part[17]. As a result, a lot of sales potential is lost. Transformational changes are evident in the economic structure as the share of agriculture to GDP is 13.3 percent in 2019[18]. Bangladesh needs to increase the sectoral growth rate of GDP in agriculture and the average growth elasticity of agriculture. In this case, continuous innovation of technology is required to increase agricultural productivity.

[17] https://www.worldbank.org/en/news/feature/2014/06/23/pairing-agriculture-with-technology-in-bangladesh, cited 10 October 2020

[18] https://sustainabledevelopment.un.org/content/documents/26302VNR_2020_Bangladesh_Report.pdf, cited 11 October 2020.

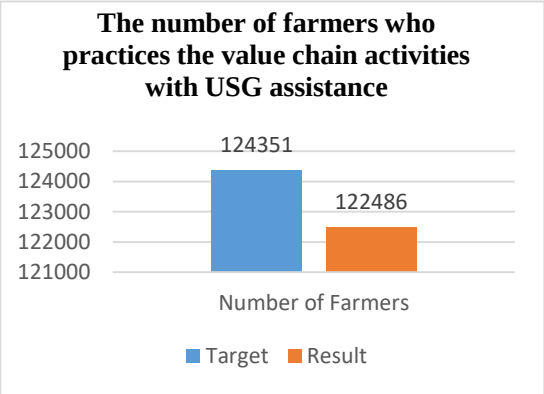


Figure 4 The number of farmers who practices the value chain activities with USG assistance

This indicator counts farmers as a value chain participant if his/her primary purpose of the activity is to enhance the commercial value of a commodity to sell to/in the market. Farmers, including herders and fishers, are: 1) men and women who have access to a plot of land regardless of land ownership and about which they make decisions on any one or more of the following: what will be grown, how it will be grown, or how to dispose of the harvest; AND/OR 2) men and women who have animals and/or aquaculture products over which they have decision-making power. For this indicator, an adult member of the household who does farm work but does not have decision-making responsibility for the plot OR animals would not be considered a "farmer." For instance, a woman or man working on a plot/land who does not make decisions on any one or more of the following: what will be grown, how it will be grown, or how to dispose of the harvest would not be interviewed. **Figure 4** depicts the number of farmers that practiced value chain activities. The targeted number in FY20 was 124,351 and the achievement was 122,486. The program achieved 99 percent of its target.

Figure 5 shows the types of value chain activities and the extent to which they were practiced. It suggests that the program participants practiced almost all the value chain activities. The most common practices were using improved inputs and post-harvest handling. A total of 120,745 farmers used improved inputs against a target of 124,351, and 78,092 farmers did post-harvest handling against a target of 77,000. The lowest was noticed for value-added processing as only 17,533 farmers out of 99,500 targeted farmers practiced it.

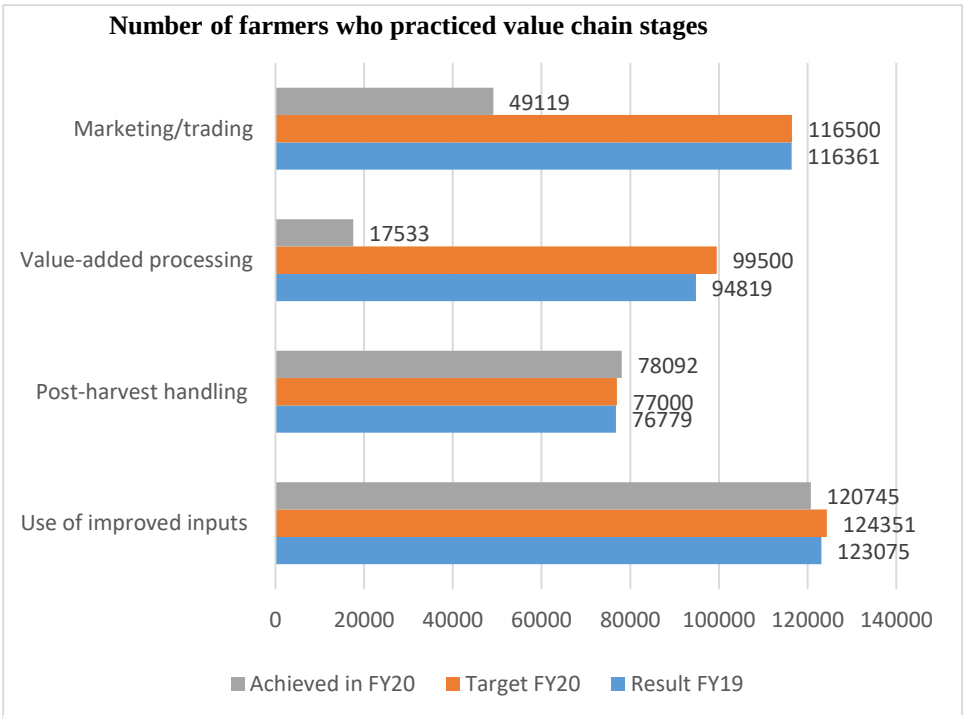


Figure 5 Number of farmers who practiced value chain stages

1.4 The number of hectares under improved management practices or technologies with USG assistance:

Agriculture has remained a powerful driver of poverty reduction in Bangladesh. The Seventh Five-Year Plan (2016-20) of Bangladesh[19] aimed at ensuring food and nutritional security, sustainable intensification, and

[19] https://www.unicef.org/bangladesh/sites/unicef.org.bangladesh/files/2018-10/7th_FYP_18_02_2016.pdf

diversification of climate-resilient agricultural production with increased commercialization and livelihood improvement through technological innovations.

This indicator measured the area in hectares where USG-promoted improved management practices or technologies were applied during the reporting year to areas managed or cultivated by producers participating in a USG-funded activity. Management practices counted are agriculture-related, land- or water-based management practices and technologies in sectors such as the cultivation of food or fiber, aquaculture, fisheries, and livestock management, including those that address climate change adaptation and mitigation. Improved management practices or technologies are those promoted by the implementing partner as a way to increase producer's productivity and resilience. In this Reporting year, the achievement compared to the target (3949.23 hectares) was 90 percent. In FY19 the number of hectares under improved management practices and technologies with US government assistance was 3,949 which increased to 13,051 hectares in this fiscal year.

1.5 The number of individuals in the agriculture system who have applied improved management practices or technologies with USG assistance:

With increasing population, agriculture has faced a formidable challenge to provide sustenance for the fast-growing population, in which Bangladesh has appeared as a success case. At present, however, water availability in Bangladesh is a major challenge for agriculture production which in turn threatens the sustainability of this sector. Due to excessive monsoon rainfall and water flow from upstream, river erosion has accelerated as waves and tides erode old lands while silt and other sediments deposited in water bodies which causes flood in low-lying areas every year.[20]

This indicator assessed the absolute number of direct participants farmers, ranchers, and other primary sector producers (of food and non-food crops, livestock products, wild fisheries, aquaculture, agroforestry, and natural resource-based products), just as individual processors (not firms), rural entrepreneurs, merchants, and natural resource managers who applied advanced technologies or management practices because of USG assistance during the reporting year. The SHOUHARDO III program achieved 99.2 (362 out of 365) percent of its target in FY20. The survey result suggested that despite the COVID-19 pandemic and severe flash flood, the program's achievement in terms of the number of individuals who applied improved management practices and technologies with the US government was impressive.

1.6 Percentage (%) of beneficiary households with increased food production:

Nutrition-sensitive food systems encompass interconnected issues ranging from food production, food access, and distribution to food utilization, nutrition, and the health status of individuals. Food production in Bangladesh is still largely focused on a single crop, namely rice.[21] This indicator measured the percentage of participating households that demonstrated an increased level of household food production through agriculture. The measurement covered homestead vegetable production, cereals, fish, poultry, and livestock production.

[20] http://www.usshamunnaybd.org/wp-content/uploads/2015/11/Policy-Brief-October-Issue-1_Final.pdf, cited on 11 October 2020.
[21] https://www.sciencedirect.com/science/article/pii/S235251342030538X, cited on 13 October 2020.

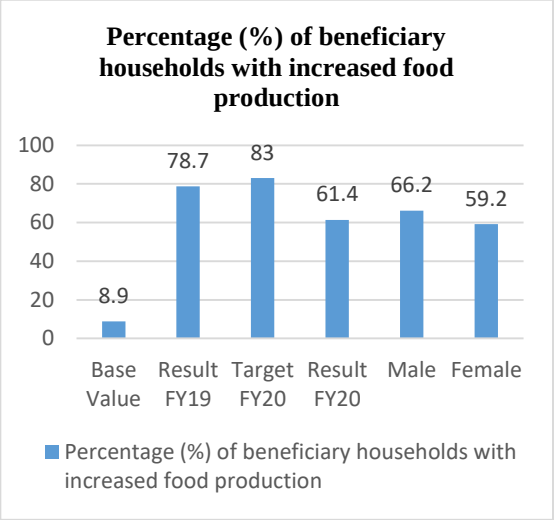


Figure 6 Percentage (%) of beneficiary households with increased food production

Figure 6 illustrates the trend of beneficiary households that had increased food production in the last five years. In FY20 the percentage of beneficiary households with increased food production was 61.4 (434 out of 660) against a target of 83 percent. About 66 percent of male respondents reported increased food production compared to 59 percent of female. The percentage of households with increased food production significantly decreased ($p < .001$) this year from 78.7 percent in the last fiscal year.

1.7 Percentage (%) of poor & extreme poor (PEP) households accessing markets: The poor are often excluded from markets in remote areas, undermining their economic activities. Increasing information and voice can address exclusion at the household, community, and national level[22]. The program provided training on different agricultural technologies and facilitate linkage with input and output markets. At the end of each fiscal year, participants are asked to know whether they have market access.

Figure 7 illustrates the percentage of poor and extreme poor households that had access to markets in FY16, FY19, and FY20. The base value was 42.8 percent which increased to 82 percent in FY19. The percentage of such households significantly increased ($p < .001$) to 92.1 percent in FY20 from 82 percent in FY19. The target for this year was 83 percent whereas the achievement was 92.1 percent. For male respondents, the percentage was 92.4 whereas for the female respondents it was 91.9 percent. A significant increase was noticed in this year's result compared to the previous year.

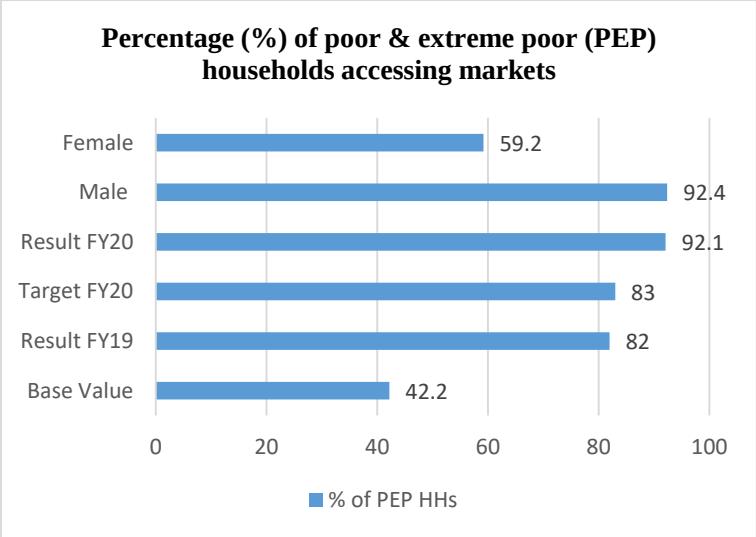


Figure 7Percentage (%) of poor & extreme poor (PEP) households accessing markets

2. Maternal and Child Health and Nutrition: SHOUHARDO III program works to improve access to and utilization of nutritious foods among program participants, to increase access to Health, Hygiene and Nutrition (HHN) services, and to improve WASH behaviors and related services to reduce water-borne diseases. To achieve these outcomes, the SHOUHARDO III program facilitated social and behavioral change promotion activities among participants through

[22] https://www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/2342.pdf, cited on 15 October 2020.

Growth Monitoring Promotion (GMP), courtyard sessions with different groups, counseling with adolescent girls, and PLW.

2.1 Percentage of pregnant women who received pregnancy care support (day-time rest, extra food) during pregnancy period:

An important concern in the health sector of Bangladesh is maternal nutrition, as measures indicate that around 50% of Bangladeshi women suffer from chronic energy deficiency. Low birth weight incidence is estimated at 45%, and micronutrient deficiencies are common. Over 43% of pregnant women are iodine deficient and more than 2.7% develop night blindness during pregnancy[23]. Anaemia in pregnancy contributes to intrauterine growth retardation leading to low birth weight babies and increased MMR.

The SHOUHARDO III program organized courtyard session, counseling with PLWs and their in-laws as well as worked with local government facilities under the Ministry of Health and Family Welfare to ensure that they have access to health care services. This indicator measured the proportion of pregnant women who are provided additional food and day-time rest throughout their pregnancy period. This extra food and day-time rest are ensured through themselves or other members of the households. If pregnant women take more food or more day time rest during pregnancy as **usual** they do, they will be considered as receiving pregnancy care support. The survey results revealed that the program achieved 103 percent of its target as the percentage of pregnant women who received pregnancy care support during the pregnancy period was 66.9 (261 out of 390) percent compared to the target of 65 percent.

2.2 Percentage (%) prevalence of diarrhea for children between 6-23 months of age: Diarrhoeal disease kills around 500,000 children a year globally and is responsible for 6 percent of childhood deaths in Bangladesh[24]. Diarrheal illnesses affect weight as well as height gains (leading to stunting) of children, with the most dramatic effects observed in cases of recurrent illnesses. The program raised awareness of mothers to prevent diarrhea among infants and young children. This indicator measured the prevalence of diarrhea for children 6-23 months of age. In other words, this indicator measures the proportion of children 6-23 months of age who are prevailing diarrhea (passage of loose stool containing more water more than three times per day) within two weeks during the survey.

Figure 8 portrays the changes in the prevalence of diarrhea for children between 6 to 23 months of age since the baseline. In the fiscal year 2016, the percentage of children of 6 to 23 months who had diarrhea (within the last 2 weeks of the survey) was 19.9 percent. The program interventions led to a sharp reduction in the prevalence of diarrhea among children.

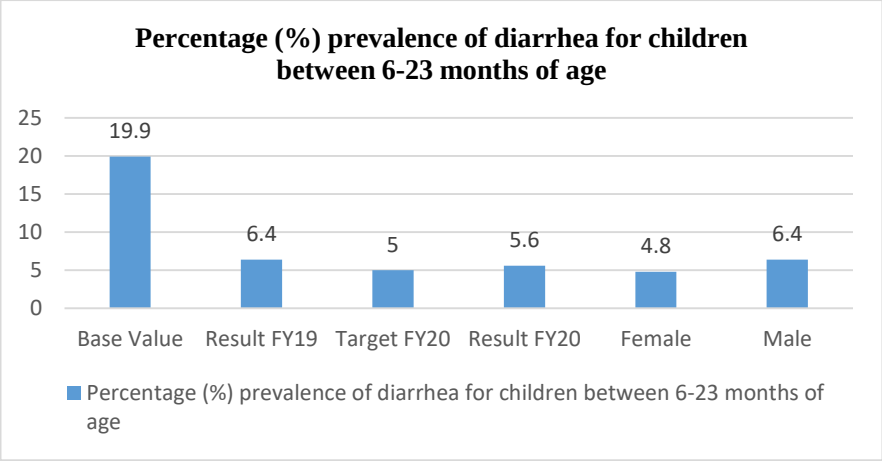


Figure 8 Percentage (%) prevalence of diarrhea for children between 6-23 months of age

[23] https://assets.publishing.service.gov.uk/media/57a08cf4ed915d622c0016a7/02-03_bangladesh.pdf, cited on 14 October 2020.
[24] https://www.icddrb.org/dmdocuments/icddrb_annual_report_2017.pdf

The graph suggests that this year suggested that 5.6% (22 out of 390) children between the ages of 6 to 23 months had diarrhea compared to the target of 5 percent. The program achieved 89 percent of its target and had better results compared to 6.4 percent in FY19. The prevalence of diarrhea was higher among boys (6.4%) compared to the girls (4.8%).

2.3 Prevalence of children 6–23 months receiving a minimum dietary diversity: In Bangladesh, 70 percent of the diet intake comprises cereals, and inadequate protein and micronutrient intake which intensifies undernutrition[25]. Nevertheless, Bangladesh has made some progress in reducing the proportion of stunted children, which declined from 36.1 percent in 2014 to 30.8 percent in 2017 (BDHS 2014 and 2017). Again the proportion of wasted children was 14.3 percent in 2014, which has declined to 8.4 percent in 2017.[26] MDD is defined as four or more, out of seven food groups including grains, legumes, dairy products (only for non-breast-fed children), fleshy foods, eggs, vitamin-A, fruits, and vegetables for children aged 6-23 months.

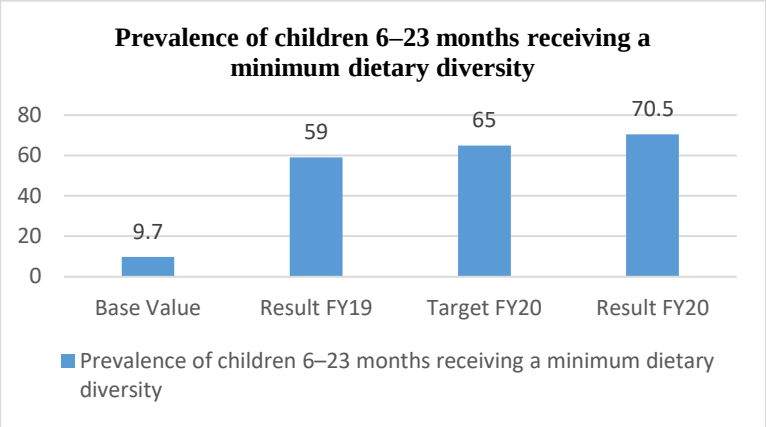


Figure 9 Prevalence of children 6–23 months receiving a minimum dietary diversity

The PaBS findings suggested that in FY20 the percentage of children who received a minimum dietary diversity between the age of 6 to 23 months was 70.5 (275 out of 390) percent against the target of 65 percent, therefore, it was a 122 percent achievement. It significantly increased ($p < .001$) from 59 percent in FY19.

Figure 9 illustrates the trend of improved dietary diversity since FY16. The program interventions resulted in almost eight times better results between the baseline and this year, it increased from 9.7percent in 2018 to 70.5 percent in 2020. The survey findings suggested that shows the girls (75.4%) received better diets compared to the boys (66%).

2.4 Prevalence of children 6–23 months receiving a minimum meal frequency: Infant and young child feeding (IYCF) practice is a highly concerning global public health issue for its extensive role in child development, growth, and survival. Childhood malnutrition appears as a public health threat in both low-income and lower-middle-income countries (LMICs) including Bangladesh[27]. Proper IYCF practices are crucial for improving nutritional status and health, particularly for young children aged 0–23 months as nutritional status could be directly affected by the IYCF practices.

This indicator measures the percentage of children 6–23 months of age who receive a minimum meal frequency, apart from breast milk. This indicator measures the minimum feeding frequency and minimum dietary diversity, as appropriate for various age groups. If a child meets the minimum feeding frequency for his or her age group and breastfeeding status, then the child is considered to be receiving a minimum meal frequency. Minimum meal frequency for breastfed children is defined as two or more feedings of

[25] https://www.usaid.gov/sites/default/files/documents/1864/Bangladesh-Nutrition-Profile-Mar2018-508.pdf, cited on 12 October 2020.
[26] https://sustainabledevelopment.un.org/content/documents/26302VNR_2020_Bangladesh_Report.pdf, cited on 12 October 2020.
[27] https://pubmed.ncbi.nlm.nih.gov/31159554/, cited on 16 October.

solid, semi-solid, or soft food for children 6–8 months and three or more feedings of solid, semi-solid, or soft food for children 9–23 months. And minimum meal frequency for non-breastfed children is defined as four or more feedings of solid, semi-solid, soft food, or milk feeds for children 6–23 months, with at least two of these feedings being milk feeds.

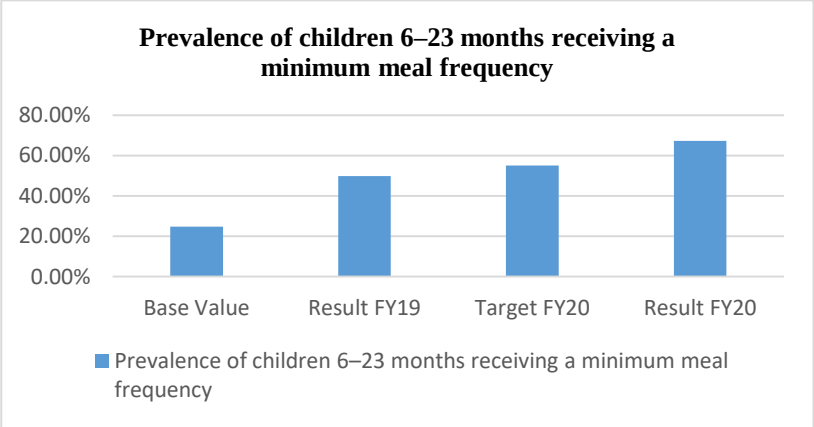


Figure 10 Prevalence of children 6–23 months receiving a minimum meal frequency

Figure 10 shows the changes in minimum meal frequency between FY16 and FY20. It is indicative of steady growth in minimum meal frequency for children between the ages of 6-23 months. In FY16 the percentage of children in the given age that received the minimum meal frequency was 24.8 percent and in FY19 it was 55 percent which significantly increased ($p < .001$) to 67.2 (262 out of 390) percent in FY20. The survey findings suggested that about 62.6 percent of boys compared to 72.2 percent of girls received minimum meal frequency.

2.5 The number of live births receiving at least four antenatal care (ANC) visits during pregnancy: The Maternal Mortality Ratio (MMR) in Bangladesh decreased from 181 per 100,000 live births in 2015 to 169 in 2018.[28]Increased awareness and antenatal care for pregnant mothers have led to such progress. Antenatal care (ANC) has long been considered a critical component of the continuum of care during pregnancy, with the potential to contribute to the survival and thriving of women and newborns. Although ANC utilization has increased over the past decades, adequate coverage and content of ANC contacts have fallen under increased scrutiny.[29] WHO recommends a minimum of four antenatal visits which allow women to be screened during their pregnancies for pre-existing conditions and potential complications, allow for initiation of timely and appropriate treatment, and provide a platform for women to receive counseling, which can support them to protect their health and that of their baby throughout the antenatal, birth and postnatal periods. In Bangladesh, almost three in every four (71%)[30] women receive at least one antenatal care (ANC) visit from a medically trained provider in rural areas. The program raised awareness on the benefits of antenatal care visits among pregnant mothers and their family members including their mother-in-law and husband.

This indicator measured the number of women ages 15 to 49 supported by a BHA who, after attending antenatal care (ANC) four or more times, delivered a live child during the reporting year. To be counted, the ANC received should be provided by skilled health personnel. Skilled health personnel refers to a doctor, nurse, midwife, skilled birth attendant, or clinical officer. The PaBS findings in FY20 found that 48.7 percent (38 out 78) of live births received at least four antenatal visits during the pregnancy period which decreased significantly ($p= .006$) from 64.3 percent in FY19. The number of such births was 7.40 percent in the baseline.

[28] https://sustainabledevelopment.un.org/content/documents/26302VNR_2020_Bangladesh_Report.pdf, cited on 15 October 2020.
[29] https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0205149, cited on 11 October 2020.
[30] https://reliefweb.int/sites/reliefweb.int/files/resources/TR-17-218%20BMMS%202016%20Preliminary%20Report.pdf

2.6 Percentage of people in target areas with access to improved sanitation facilities: Bangladesh has made considerable progress in coverage of water and sanitation services. However, hygiene services warrant much more attention. The mortality rate attributed to exposure to unsafe WASH services per 100,000 population is estimated at 11.9 in 2016[31]. This indicator defines the access to an improved sanitation facility as a flush or pour/flush facility connected to a piped sewer system, septic system, or pit latrine; or a pit latrine with a slab; or a composting toilet; or a ventilated improved pit latrine either single or double pit. If people have access to improved and hygienic latrines (pit latrines with cement liner and water seal/Sato pan and locally innovated hygienic latrines) those are considered as well. In this fiscal year, the percentage of surveyed respondents in the target areas that had access to improved sanitation facilities was 65.7 (698 out of 1050) against a target of 75 percent.

2.7 Percent of mothers who feel it is important to wash hands at five critical times: The Multiple Indicator Cluster Survey (MICS) conducted in 2019 by the Bangladesh Bureau of Statistics (BBS) found that nationally 84.6 percent of people have access to safely managed sanitation services (urban: 90.6 percent & rural: 82.9 percent). The same survey report reveals that nationally 74.8 percent of the population used hand-washing facilities with soap and water, which is 87 percent in urban and 71.4 percent in rural[32]. This indicator measured the proportion of the mothers or caregivers of children 6-23 months of age who can identify the five critical handwashing times. It is expected that almost all of them practice handwashing properly at five critical times (defined by the SHOUHARDO III project). Before eating, before breastfeeding or feeding a child, before cooking or preparing food, after defecation/urination, and after cleaning a child that has defecated/changing a child's diaper.

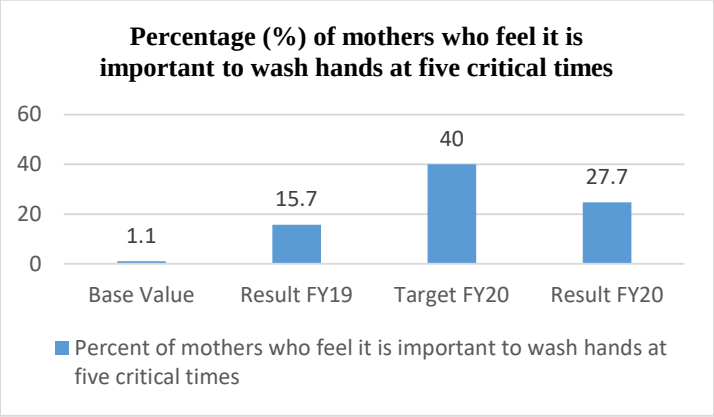


Figure 11 Percentage (%) of mothers who feel it is important to wash hands at five critical times

Figure 11 on the left side, shows that only 27.7 (108 out of 390) percent of mothers felt that it was important to wash hands at five critical times whereas the target was 40 percent. It is noteworthy that the percentage of such mothers significantly increased ($p < .001$) from the previous year (15.7%).

2.8 Women's Dietary Diversity Score (WDDS): In Bangladesh, 54% of women of reproductive age (10–49 years old) consume inadequately diverse diets. Dietary diversity has a consistently positive relationship with micronutrient adequacy cross-nationally and within Bangladesh. A majority of women of reproductive age in Bangladesh are, therefore, likely to be consuming inadequate amounts of micronutrients, putting them at risk of deficiency and associated adverse health outcomes for themselves and their offspring.[33]This indicator aims to measure the micronutrient adequacy of the diet and reports the mean number of food groups consumed in the previous day by women of reproductive age (15–49 years). To calculate this indicator, fourteen food groups are used including - grains, roots, and tubers; legumes

[31] https://sustainabledevelopment.un.org/content/documents/26302VNR_2020_Bangladesh_Report.pdf, cited on 20 October 2020.
[32] https://www.unicef.org/bangladesh/media/3281/file/Bangladesh%202019%20MICS%20Report_English.pdf, cited 21 October 2020.
[33] https://onlinelibrary.wiley.com/doi/full/10.1111/mcn.12489, cited on 22 October 2020.

and nuts; dairy products (milk, yogurt, or cheese); organ meat; eggs; flesh foods, and other misc. small animal protein; vitamin A-rich dark green leafy vegetables; other vitamin A-rich vegetables and fruits; other fruits and vegetables. The survey revealed that the WDDS score in this fiscal year was 6.22 (N=390) though the target was 4.4; therefore, the program has 141 percent achievement.

2.9 Percentage of HHs using health and nutrition services in the past 12 months: One of the most important outcomes of the program is 'Access to Health Service' by poor community people. To ensure this, the program has been working with both service providers and community people. SHOUHARDO III communities are using existing government health facilities: Community Clinic (CC) at the village level, Union Health and Family Welfare Center (UH&FWC) at the union level, and Upazila Health Complex (UHC) at the Upazila level. Besides, they are receiving services from different NGOs, Village Doctors, Drug sellers, and BRAC Sasthya Karmi. Recently, SHOUHARDO III initiated to develop or make functional some local-level service providers: Growth Monitoring Promoters, Private Community Skilled Birth Attendants (PCSBAs), and Blue Star Providers (BSPs). So, different categories of health service providers are available across the SHOUHARDO III communities. It creates an opportunity for the community people to go to any of the facilities either public or private for receiving health or nutrition services. This indicator measured what percentage of households receive health or nutrition services both from private and public services in the past 12 months. In this reporting year, nearly 62.7 (752 out of 1050) percent of households received health and nutrition services from both the public and private service providers compared to the target of 50 percent. The program's achievement was 125 percent in this reporting year.

3. Resilience and Shocks: SHOUHARDO III worked to provide technical support to participants for shock preparedness and resilience capacity building. Specific messages emphasized the risks to women, adolescents, the elderly, children, and persons with disabilities during disasters, and how those risks can be reduced with a focus on household and community level preparedness.

3.1 Average Coping Strategy Index of the targeted households: Along with the COVID-19 pandemic, the seasonal natural disasters from cyclones, tidal floods, flash floods, and landslides of monsoon seasons further aggravated the humanitarian needs of the most vulnerable groups in Bangladesh[34]. In the time of the flooding, rural people in Bangladesh suffer from the lingering effects of labor market disruption and income deficiency. A major proportion of households are found to borrow money or resources from informal sources, such as nearby shops or the pharmacy, friends or relatives, or local money lenders, to buy food items and other essentials. A study suggested that households initiate coping with borrowing money after the realization of floods and gradually lead to coping with savings and selling assets as the duration of flood increases.[35]

The CSI determines a household's ability to manage and cope with food shortages, and how consumption patterns change at these times. Examples of coping strategies can include reducing the quantity of food households consume, collecting wild food, and/or reducing the frequency of meals. The CSI of the sample households was calculated by multiplying the frequency of coping strategies used in the last 30 days with their respective severity weights. The sum of the scores was then used to determine the CSI. The higher the CSI, the more food insecure a household was. The survey results found that this year the CSI score was 93.15 against the target of 65. The CSI score significantly increased ($p < .001$) from 67.03 in FY19. It seemed that the unprecedented shocks like the COVID pandemic and the flood combined took a strain on the respondent households. While the male respondents reported having a

[34] https://link.springer.com/article/10.1007/s10668-020-00867-y, cited on 22 October 2020.
[35] https://www.researchgate.net/publication/257632901_Coping_strategies_with_floods_in_Bangladesh_An_empirical_study, cited on 24 October.

better score at 77.11, female respondents seemed to have suffered as their CSI score was 99.15. The CSI score this year was much lower than FY19 but also the baseline score (163.13).

3.2 The number of people using climate information or implementing risk-reducing actions to improve resilience to climate change as supported by USG assistance: Bangladesh is prone to natural disasters. Therefore, access to early warning information is crucial for people living in areas where disasters are likely to be the worst. Climate information is important in the identification, assessment, and management of climate risks to improve resilience and can serve a variety of sectors such as agriculture, livestock, health, or natural resource, or urban management. The program strengthened the resilience of beneficiaries to adapt/implement climate-smart improved management/technologies in agriculture, water, health, and Disaster Risk Reduction (DRR). The indicator measured any adjustments and a new approach to the management of resources or implementation of actions that responds to climate change risks and increases resilience. Results from the PaBS 2020 found that about 49 (475 out of 883) percent of respondents used climate information and took risk-reducing actions to improve resilience to climate change with US government assistance. The number was lower compared to 58.6 percent in FY19.

3.3 Percentage (%) of households reporting understanding of elements of disaster preparedness in the project defined criteria: This indicator counted the percentage of the beneficiaries with the awareness of the local hazards that may cause disasters, as well as how to get prepared and be able to respond to that disasters/shocks. It includes -1. Households level contingency plan, 2. Understanding about the safer place during disaster 3. Storing of dry food 4. Storing of essential nonfoods- like a candle, matchbox, fuelwood, moveable stove, etc. 5. Savings/ reserve money as the elements of disaster preparedness.

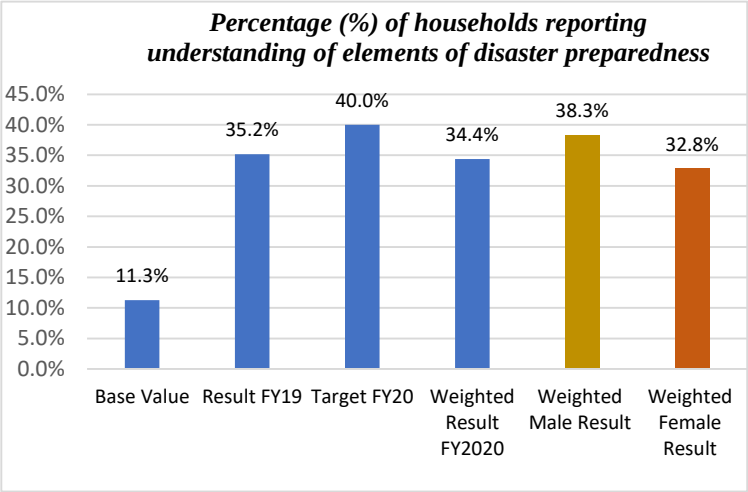


Figure 12 Percentage (%) of households reporting understanding of elements of disaster preparedness

Figure 12 illustrates the changes in the percentage of households that reported an understanding of elements of disaster preparedness from the baseline till FY20. In this reporting year, 34.4 (406 out of 1050) percent of households shared that they had an understanding of disaster preparedness compared to the target of 40 percent. The number of households with such an understanding slightly decreased from 35.2 percent FY19 to 34.4 percent in this reporting year. However, compared to the base value the number of such households increased by three times.

3.4 Percentage of household reporting receiving risk and early warning information: This indicator measured the percentage of households receiving risk and early warning information generated by the Bangladesh Meteorological Department (BMD) and Flood Forecasting and Warning Center (FFWC) by various means like Disaster Volunteers, Union Disaster Management Committee members, VDC member, print or electronic media, email, SMS, and IVR calling to 10941 of BMD/FFWC. Risk and early warning information include heavy rain, severe cold, flood early warning, etc.

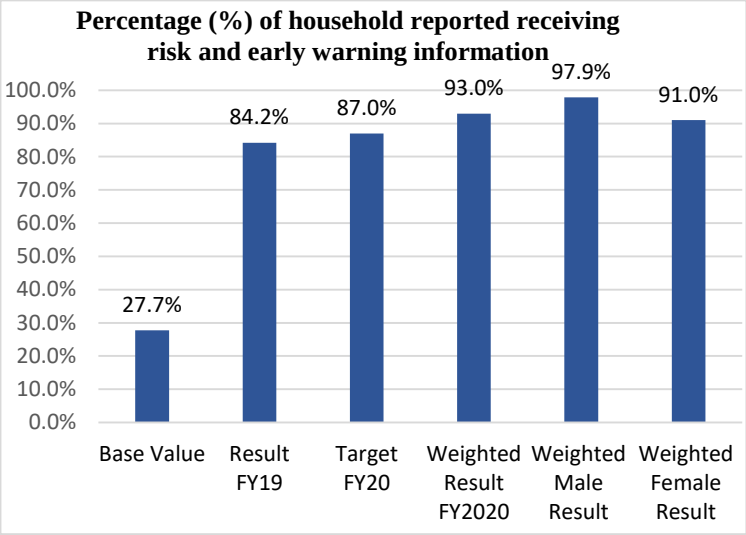


Figure 13 Percentage (%) of household reported receiving risk and early warning information

Figure 13 shows the percentage of households that reported receiving risk and early warning information in FY20 was 93 (962 out of 1050) percent whereas the target was 87 percent. It was a 107 percent achievement for the SHOUHARDO III program in this fiscal year. Around 97.9 percent of male respondents reported receiving such information compared to 91 percent of female respondents. The survey findings suggested that the number of households receiving early warning information significantly increased ($p < .001$) from 84.2 percent in FY19.

4. Women Empowerment: Women empowerment is at the core of SHOUHARDO III's interventions. It is a cross-cutting emphasis that the program aims to maintain in all of its purpose areas. The program mobilized girls and women through EKATA, couple's dialogues, and various lobbying with government agencies to End Violence against Women (EVAW).

4.1 Mean decision-making score (Index) for the woman at household level: In Bangladesh, women's decision-making capacity is often poorer compared to that of men – this is supported by the patriarchal culture as well as social, political, and legal institutions. This indicator provides the information about women's decision choosing between a number of options and women's participation at household level decision making, which includes being involved in spending money that has earned by herself, selling produced crops, buying small food items, groceries, toiletries, buying clothes for herself and children, buying or selling major household assets (land, livestock), buying or selling jewelry, use of loans or savings, expenses of her children's education, expenses for her children's marriage, medical expenses for herself or children, expenses for family planning (contraceptives), to move to shelter during the time of the disaster, active participation and involvement in *salish* (local arbitration) decision making, investment of credit funds/ savings, childcare, continued education of children (boys & girls), involvement in NGOs activity.

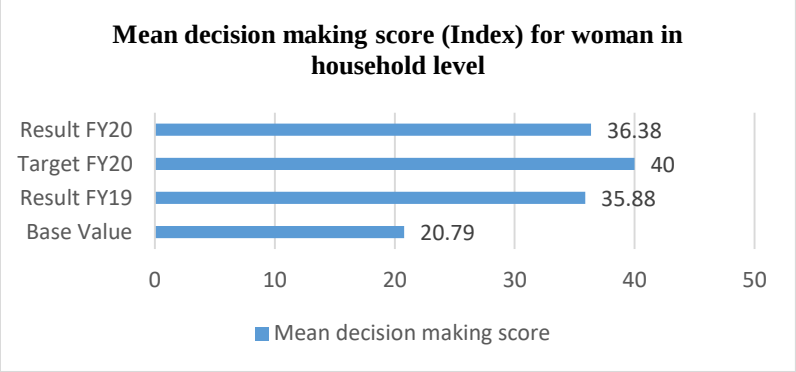


Figure 14 Mean decision making score (Index) for woman in household level

Figure 14 displays the changes in mean decision making score for women in the household since the baseline in 2016. It suggests that the score increased from 20.79 FY16 to 36.38 FY20. The targeted score for this fiscal year was 40 hence the achievement was 91 percent.

4.2 Percentage of poor & extreme poor women accessing community level platforms for women empowerment: This indicator measured the extent of women's access to community platforms i.e. Village Development Committee (VDC), Empowering Knowledge and Transformative Action (EKATA), Ending Violence Against Women (EVAW) Forum or any other local institution as a community level platform.

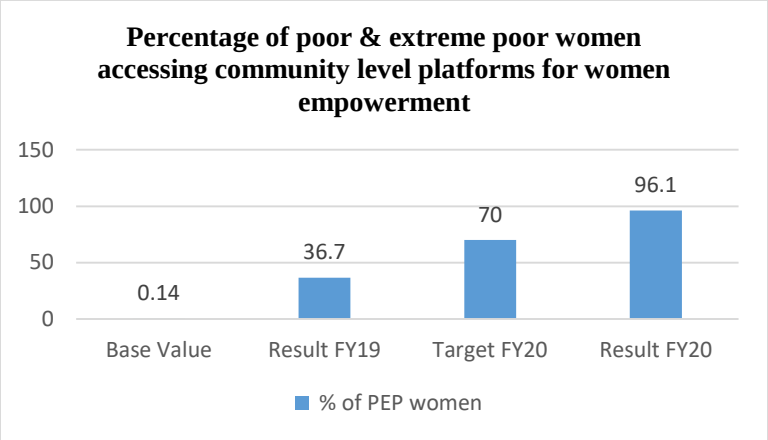


Figure 15 Percentage of poor & extreme poor women accessing community level platforms for women empowerment

Figure 15 shows the trend of poor and extreme poor women accessing community level platforms for women empowerment since FY16. The survey results suggested that the percentage of poor and extreme poor women significantly increased ($p < .001$) from 36.70 percent in FY19 to 96.1 percent in FY20. It increased to a greater extent from 0.14 percent in fy16 to 96.1 (1024 out of 1046) percent in FY20. It was a 137 percent achievement in this reporting year.

4.3 Percentage of respondents who know a neighbor or friend who has experienced domestic violence (includes: child marriage, physical abuse, sexual harassment, emotional oppression) in the last month: The COVID-19 pandemic has led to a rise in gender-based violence globally as well as in Bangladesh. Women and girls in Bangladesh are facing increased domestic violence during the Covid-19 pandemic, highlighting long-term systemic barriers to legal recourse, protection, and social services[36]. Some experts say a lack of social activities and financial pressures are increasing rifts within families.[37] This indicator measured the extent of Gender-Based Violence (GBV) at the community level. It measured the information of participants about domestic violence (child marriage, physical abuse, sexual harassment, emotional oppression.) that occur with his/her neighbor in the last 12 months. It is important to note that the definition of this indicator was revised and expanded by including emotional oppression in this reporting year.

[36] https://www.hrw.org/news/2020/10/29/bangladesh-pivotal-moment-stop-violence-against-women, cited on 20 October 2020.
[37] https://www.dw.com/en/covid-19-lockdown-increases-domestic-violence-in-bangladesh/a-53411507, cited on 19 October 2020.

Figure 16 represents the percentage of respondents that knew of a neighbor or friend who had experienced domestic violence (in the last month of survey data collection) from FY16 to FY20. In the fiscal year 2016, this percentage was 48.38 which had further reduced to 39.2 percent in FY19. Nevertheless, the survey findings suggested that in FY20 the percentage of respondents reporting such kind of violence significantly increased ($p < .001$) to 90.1 percent (957 out of 1050) respondents from 39.2 percent in FY19. Around 84.6 percent of male respondents reported such incidents compared to 92.4 percent of female respondents.

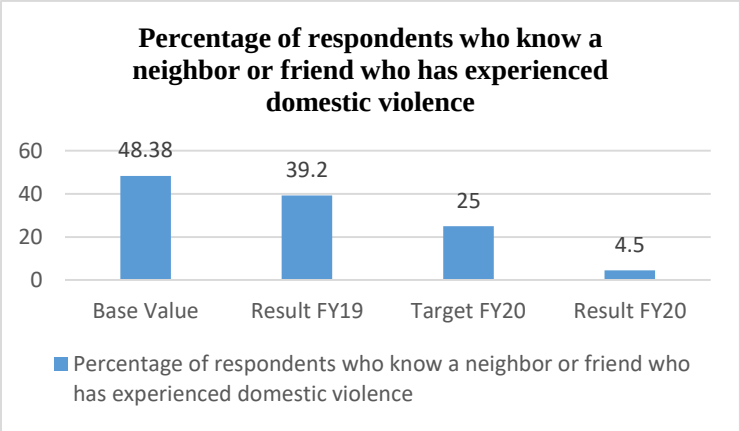


Figure 16 Percentage of respondents who know a neighbor or friend who has experienced domestic violence

4.4 Percentage of program participants aware of cost and consequences of Gender-Based Violence: This indicator refers to community participants' knowledge (gained through the different program supported platforms, such as EKATA, VSLA, and FFBS) on both the costs and consequences of violence against women. Costs of violence generally analyze in three categories: economic/financial costs, physical costs (e.g. permanent disability), and time costs (e.g. time spent at arbitration or for medical treatment and recovery). This indicator especially emphasizes the analysis of financial costs and consequences of violence that pertain to women. Financial costs include doctor's fees, the cost for medical tests, cost for medicine, transportation cost, lodging and food involved in travel, bribes for *shalishkars* (local arbitrators), fines lodged against perpetrators, entertainment and food cost for relatives who come to support the victim or perpetrator, loss of wages for the time spent in treatment and adjudication and loss of working capacity in case of permanent injury.

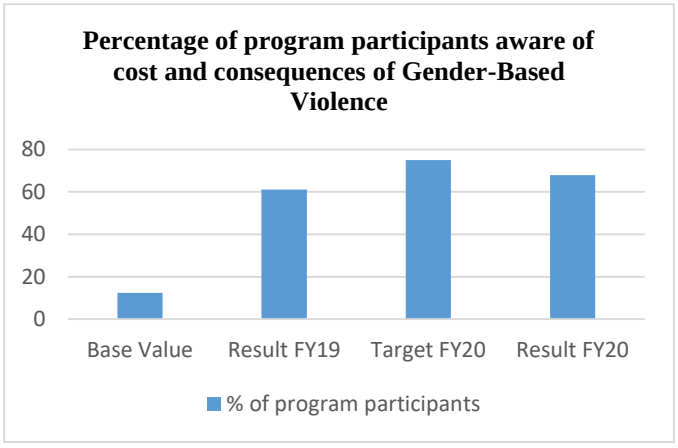


Figure 17 Percentage of program participants aware of cost and consequences of Gender-Based Violence

Figure 17, on the left side, illustrates the percentage of program participants that were aware of the cost and consequences of gender-based violence. The target for this reporting year was 75 percent whereas the achievement was 67.9 percent (729 out of 1050). Nearly 71 percent of males reported having such an understanding in comparison to 66.7 percent of female respondents. The survey results suggested that the number of participants that had such awareness significantly increased ($p < .001$) from 61.1percent in FY19 to 67.9 percent.

5. Governance: SHOUHARDO III program mobilized participants to raise awareness of and methods of obtaining their rights. It engages with the main public service providers in the communities, to enhance the provision of public services in the program communities.

5.1 Percentage of respondents who are satisfied with overall services provided by the local govt. (Union Parishad): This indicator measured the level of the satisfaction of the community people about the overall services provided by the local government (Union Parishad) in the last 12 months. According to the PaBS 2020 results, about 57.2 percent (686 out of 1050) respondents reported that they were satisfied with overall services provided by the local government whereas the target was 62 percent. It was a 92 percent achievement for the program; nearly 60 percent of male respondents shared their satisfaction in comparison to 56.1 percent female respondents. The survey results suggested that the percentage of such respondents significantly increased ($p < .001$) from 56.7 percent in the last reporting year.

5.2 Index of social capital at the household level: The indicator measured the ability of participant households in the target area to draw on social networks to get support to reduce the impact of shocks and stresses on their households. It measures both the degree of bonding among households within their communities and the degree of bridging between households in the area to households outside their community. If the household responses indicate that they have reciprocal, mutually reinforcing, relationships through which they could receive and provide support during times of need, they are considered to have social capital. The indicator is constructed from two sub-indices: one measuring bonding social capital and one measuring bridging social capital. According to the survey findings, the social capital index score was 74.66 against the target of 55. The program had a 136 percent achievement in this reporting year. The social capital index score significantly increased ($p < .001$) from 55.17 in FY19.

5.3 Percentage of households satisfied with Community Clinic services: SHOUHARDO III program has been working in 947 villages. So, participants are village-based and receive health services from community-based health facilities. Community-based facilities are Union Health & Welfare Center (UH&FWC), Community Clinic, satellite Clinic led by government and some NGO led. Besides, some local service providers and BRAC shasthya Karmi and Shebika also provide health services to those poor community people. Among all facilities, Community Clinic is a relatively popular and more acceptable and almost door-stop support for communities. The program mobilizes the community for Community Clinic services and on the other hand, continues advocacy with MoH&FW for strengthening Community Clinic services for poor people. As the community becomes aware of community clinic services, they can understand the service quality that they expect and accordingly become satisfied or not. This indicator measured the proportion of service users who were satisfied to receive services from community clinics among the number of service users receiving services from the community clinic. According to the PaBS 2020 results, 60 percent of respondents were satisfied with the community clinic services in response to a target of 60 percent.

6. Environmental Monitoring and Mitigation Plan (EMMP) Indicators

6.1 Percent of physically improved sanitation facilities with feces visibly present on the floor, wall, or area immediately surrounding the facility: In this reporting year the percentage of respondent households that had sanitation facilities with feces visible on the floor, wall, and immediately surrounding facility was 19.1 percent (137 out of 698) which significantly decreased ($p < .001$) than 36.1 percent in FY19. Looking into the baseline value it is evident that the program intervention was successful in reducing the number of such facilities in the program implementing areas. Further specifications suggested that for the male households it was 17.7 percent compared to19.8 percent for the female households.

6.2 Percent of IGA participants practiced safe management of waste materials and pesticides using Mission/Bangladesh PERSUAP permitted pesticides: This indicator measured the level of awareness received by IGA participants managing waste (from their selected IGA) and using pesticides. Waste management included cleaning and washing livestock rearing corner and its surrounding, discharging cow dung, a periodical checkup of common diseases with the Government of Bangladesh, and Mission/Bangladesh PERSUAP permitted medicines. In FY 20 the percentage of households that practiced safe management of waste materials and pesticides using mission/Bangladesh PERSUAP permitted pesticides was 83.3 percent (5 out of 30) which was significantly higher than 60 percent in the last fiscal year.

6.3 Percent of households using an improved sanitation facility (FFP 41): An access to an improved sanitation facility is defined as a flush or pour/flush facility connected to a piped sewer system, septic system, or pit latrine; or a pit latrine with a slab; or a composting toilet; or a ventilated improved pit latrine either single or double pit. If people have access to improved and hygienic latrines (pit latrines with cement liner and water seal/Sato pan and locally innovated hygienic latrines) those are considered as well. According to the BABSS 2020 results, the percentage of households that used an improved sanitation facility was 65.7 percent (698 out of 1050) which significantly decreased ($p < .001$) from 68.2 percent in the last reporting year. As can be seen, households with improved sanitation facilities decreased in this reporting year.

6.4 Percent of households using an improved drinking water source (FFP 40): In Bangladesh, five million people lack access to safe drinking water[38]. The SHOUHARDO III program raised awareness on the benefits of drinking safe water and the demerits of the opposite. In the fiscal year FY20, the program interventions were successful in ensuring safe drinking water for almost all households. The survey findings suggested that 99.7 percent (1049 out of 1050) responding households used improved drinking water sources compared to 99.9 percent in the last fiscal year.

6.5 Percent of mothers prepare food that doesn't report increased exposure to smoke because of preparing USG donated commodities: This indicator assessed the extent of cooking of supplementary feeding commodities by the mothers using improved cooking stove through encouraging and awareness-building sessions with the mother groups. The PaBS findings in FY20 suggested that only 2.6 percent (10 out of 390) mothers prepared food that did not involve increased exposure to smoke because of US government donated commodities. It's slightly reduced from 4 percent in FY19.

7. Baseline/Endline Indicators:

7.1 Percent of married women aged 15-49 who need to seek permission to visit a certain location: It is heartening that Bangladesh has achieved commendable successes in numerous dimensions of gender parity over the years, thereby widening the economic opportunities for women. However, barriers to flourishing women's economic empowerment include patriarchal norms that limit women's mobility and hinder access to market networks and financial institutions. [39]This indicator measured the extent of women's mobility, a result of equitable gender norms and as a sign of increased empowerment. Gender equitable norms and women's empowerment can be defined as a function of relative physical mobility, ability to make various purchases on her own, and economic security. Findings from this year's survey revealed that about 61.1 percent (674 out of 1048) married women between 15 to 49 years of age needed to seek permission to visit site locations which significantly increased ($p < .001$) from 42 percent

[38] https://water.org/our-impact/where-we-work/bangladesh/, cited in 7 October 2020.
[39] https://thefinancialexpress.com.bd/views/empowering-women-economically-1596641307, cited on 17 October 2020.

in the last reporting year. However, the findings suggested that the number of married women who need to seek permission reduced from 72 percent in the fiscal year 2016 to 61 percent in this reporting year.

7.2 Percent of married women aged 15-49 whose husbands help with household tasks: According to the Global Gender Gap ratio report 2020 Bangladesh closed 72.6% of its overall gender gap and obtained ranked 50th[40] out of 153 countries globally. The country is making its journey to achieve gender equality. The SHOUHARDO III program also intervened in its targeting area to trigger women empowerment and achieve equality between men and women. This indicator measured the degree to which women are empowered in their household and the degree of inequality between women and men within the household workload distribution. The survey considered cooking, gathering of water/firewood for the house, cleaning, childcare, selling produce or going to market, homestead gardening, and homestead poultry rearing as essential household tasks where the husband can take part. In SHOUHARDO III program implementing areas, the percentage of married women between the age of 15 to 49 who reported that they received assistance with the household tasks from their husbands was 70.3 percent (811 out 1050) in FY 20 which significantly increased ($p < .001$) compared to 65.4 percent in FY19; it also increased from 36.9 percent in FY16.

7.3 Changes made in agricultural practices based on the climate information: The results obtained from the survey revealed that the percentage of households that made changes in their agricultural practices decreased in the current reporting year when compared to the percentage of households from the last fiscal year. About 48.8 percent (475 out of 888) households change their agricultural practices using climate information compared to 58.6 percent of households in the last fiscal year. Nearly 69 percent of male households made such changes in comparison to only 39.1 percent of female households in this reporting year.

8. SHOUHARDO III S3X indicator

8.1 Percentage of farmers who reported to get market information in the last 12 months: The program targeted to reach out to 60 percent of farmers to get market information in the last 12 months. Against that target, nearly 85.2 percent of farmers had accessed market information in a given period. Around 88 percent of male farmers and 84 percent of female farmers could access such information.

8.2 Mean number of income sources (farm and off-farm) for households in project areas: In the current reporting year according to the survey findings, the main number of income sources for program participants and households in the project implementing areas was 2.74. The end line target for the program evaluation in terms of the main number of income sources for participating households is 2.76. The survey results, therefore, suggested that the program nearly achieved its endline target.

8.3 Mean age of marriage among women aged 15-49: According to UNICEF, Bangladesh has the fourth highest prevalence rate of child marriage in the world, and the second-highest number of absolute child brides – 4,451,000. Nearly 59 percent of girls in Bangladesh are married before their 18th birthday and 22 percent are married before the age of 15. The median age at first marriage is 15 in the Rangpur division.[41] This indicator refers to the lowest age of marriage for women aged 15-49. According to the survey findings, the mean age of marriage in FY 20 is clear for women (N -1046) between the age of 15 and 49 years old was 15.89 years of age and the target was 16. The mean age of marriage for women of the given age significantly increased ($p < .001$) from 15.53 in the fiscal year FY19. This

[40] https://www.bd.undp.org/content/bangladesh/en/home/presscenter/articles/2020/08/31/covid-19--a-step-back-for-womens-empowerment-in-bangladesh--.html, cited on 8 October 2020.
[41] https://www.girlsnotbrides.org/child-marriage/bangladesh/ cited on 8 October 2020.

reporting year the program had a 99 percent achievement compared to the target. This reporting year the program had a 99 percent achievement compared to the target.

8.4 Number of participants who reported increased access to targeted public services: In public services, Bangladesh ranked 16th from the bottom among 158 countries worldwide, reveals the Commitment to Reducing Inequality (CRI) Index 2020 – a global ranking of governments based on what they are doing to tackle the gap between the rich and poor[42]. This indicator collected the base value on the progress in participants' access to targeted public services. FFP activities with social accountability interventions typically work with both service providers and activity participants. The survey findings showed that nearly 75 percent (760 out of 1050) of the respondents reported increased access to target at public services which significantly increased (p=.019) from 70 percent in the last reporting year. The highest number of respondents received services in the areas of nutrition and veterinary health. Of the 74.9 percent, 54.4 percent reported increased access to nutrition-related public services, and 31 percent reported receiving such services for veterinary health.

8.5 Percentage of Lactating Mother practicing hygiene behavior practices: In Bangladesh, the proportion of the population living in households with access to basic hygiene facilities is 59.1 percent[43]. A study conducted in the context of Habiganj found that most mothers and other caregivers usually wash their hands if they are involved in cooking, sweeping, cutting vegetables or fish, or when hands are 'visibly dirty' (this refers to contact with mud, sand, dust, oily substances, soot, cooking spices, biomass fuel, and if there is contact with own feces, child and animal feces)[44].

This indicator measured the proportion of the lactating mother who identified and practiced the hygiene behaviors (defined by the SHOUHARDO III project). The project defined hygiene behaviors for females involved safely disposing of the child's faces, washing hands after anal washing of children, washing hands before food preparation, after using latrines, using menstrual hygiene management kits during menstruation. The Survey results revealed that against the target of 60 percent, only 23.8 percent (93 out of 390) lactating mothers were found to practice hygiene behavior practices. However, it significantly increased ($p < .001$) than only 11 percent of pregnant mothers demonstrating such practices in the last fiscal year compared to this year's result. This year the program had a 40 percent achievement of its target.

8.6 Percent of households with soap and water at a handwashing station on-premises: A handwashing station is a location where household members go to wash their hands. In some instances, these are permanent fixtures (e.g., cement sink), while in others the handwashing devices can be moved for the family's convenience (e.g., tippy taps). The measurement takes place via observation during the household visit, and both soap and water must be available at the station. The cleansing product must be at the handwashing station or reachable by hand when standing in front of it. A "commonly used" handwashing station, including water and soap, is one that can be readily observed by the enumerator during the household visit, and where study participants indicate that family members generally wash their hands. During the survey, it was observed that around 55.6 percent (635 out of 1050) households had soap and water at the handwashing station on the household premises where the target was 28 percent only. The program interventions lead to significant achievements of handwashing facilities available in the household devices, therefore, this year's achievement is 199 percent.

[42] https://tbsnews.net/bangladesh/poor-public-services-hold-bangladesh-back-reducing-inequality-report-143227, cited on 9 October 2020.
[43] https://sustainabledevelopment.un.org/content/documents/26302VNR_2020_Bangladesh_Report.pdf, cited on 14 October 2020.
[44] https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-018-5365-1, cited on 16 October 2020.

RECOMMENDATION

This reporting year sets an important milestone for the SHOUHARDO III program as it was initially meant to phase out in FY2020. The PaBS 2020 results are reflective of the program's great progress. The results are to be translated in the context of the COVID-19 pandemic and severe flash floods in the program implementing areas. While millions of people in the country suffered to a great extent, the program participants were able to cope with these shocks and retain their socio-economic position. Except for a few result areas, the program's progress can be identified as impressive. However, the program can use the survey findings to review some of its intervention areas. Following are some specific recommendations that the program may consider going forward:

- It is indeed exciting for the program to learn about its 'great' results in several technical areas. The next step, for the program, carefully identifies areas where it may not need to intervene any longer. The program may consider such result areas as fully achieved and redundant for further interventions, for example – access to safe drinking water for program participants.

- It is applauding to see the SHOUHARDO III program to have achieved a significant percentage of its target in almost all the technical areas. The program now needs to set and implement an appropriate strategy to sustain results. One of the ways can be to collaborate with other service providers, recognize their contribution, and 'hand over' responsibilities where possible.

- One of the downgrading results this year was the significantly higher prevalence of gender-based violence. Although this could have been triggered by the COVID-19 pandemic, as suggested by many reports and evidence from Bangladesh and many other countries, the program will need to review its strategy to leave an impact in this area. It should become one of the priority areas in programming in the remaining years of the program. One of the strategies can be to strengthen collaboration with service providers working to address gender-based violence including legal aid and psychosocial counseling providers. Although, more efforts should be triggered to the prevention of gender-based violence by raising awareness, creating more employment opportunities for women, and facilitate dialogues to ensure mental well-being and equitable relationships between men and women within households.

- Nutritional practices (MMF, MDD) of children are encouraging, the program may want to see the nutritional status of the child i.e. stunting/wasting before the end line evaluation. The program may carry out a further qualitative study to explore this. The study may also look into the handwashing behaviors of the participating households.

- Given that the program's performance was not up to the mark in FY20 in some of the indicators, it may remain conservative while setting in the next fiscal year. This may require to organize a review workshop for the program staff and critically review target vs achievement in FY20.

CONCLUSION

From the results attained from the PBS 2020 was evident that the SHOUHARDO III interventions have already achieved its intended outcomes in the lives of the targeted participants. More particularly, the

survey findings suggested that this year the access of participating households to the market significantly increased. The survey results also showed that the number of children in the program participant households who received minimum dietary diversity and minimum mail frequency significantly increased. The program interventions related to resilience capacities led to some great results of the Coping Strategy Index (CSI) score. A significantly increased number of participants reported being satisfied with the services that were provided by the local government more particularly the union pressured. One of the impressive findings of this year was a significant increase in the mean age of marriage among women aged from 15 to 49 years.

The survey findings pinpointed some specific areas where the performance of the program was not up to the mark in this reporting year. A couple of them included decreased food production in the participating households and a reduced number of live births that received at least four antenatal care/ANC visits during pregnancy. Also, the percentage of households that had access to an improved sanitation facility significantly decreased (from 68.2% in FY19 to 65.7% in FY20). One of the depressing results in this reporting year was the increased number of participants responding that knew either a neighbor or a friend who had experienced domestic violence. The number significantly increased from 39.2% in FY19 to 90.1% in FY20. Moreover, a significantly increasing number of women (especially married women) between 15 to 49 years needed to seek permission to visit a location in the current year (from 42% to 61.1%).

As the findings suggested, in FY20 despite the COVID-19 pandemic and prolonged flood the program was able to make a positive impact on the participants' lives and livelihoods. However, it is critical for the program to make an effort and ensure that the results are sustainable. One of the areas where the program needs to put extra efforts to generate positive results includes reducing the prevalence of gender-based violence. Given that GBV is related to other result areas, not being reduced it can severely affect several other results and impact areas. The program must also take into consideration the knowledge of handwashing, as well as the use of risk and climate change information among program participants for further emphasis.