Responsible Mica Initiative

Community Empowerment Program
Impact assessment report

July 2024

improve

EXECUTIVE SUMMARY: CEP's MAIN IMPACT

Social security

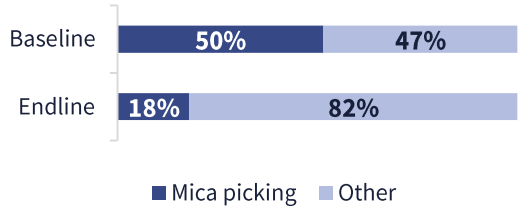
Regarding social security, analyses allow us to draw two main conclusions.

- **97% of households had been linked to at least one more form of social security** over the last three years.
- The more **social security linkages** they had made, the more likely they were to state that it **had helped them reduce spending**.

Livelihood

About livelihood, the CEP first impact noticed by this study is the **decrease of households depending on mica picking as a primary source of income** (18% at endline, compared to 50% before the program).

Mica picking from baseline to endline



Moreover, primary incomes have objectively increased between, baseline and endline in average and 89% of households perceived an improvement in their financial situation.
72% of households that received assets agree that their income has increased and 36% that their expenditure has decreased. In addition, more than half of those who have taken training consider that it will be useful to them (53%) and that learning a new skill gave them a feeling of accomplishment (52%).

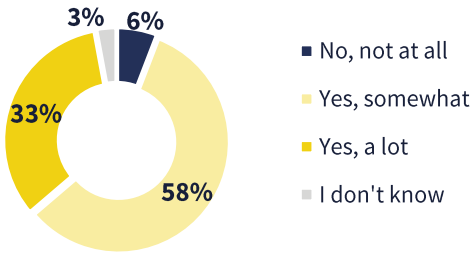
Health and nutrition

Regarding health, the study allows us to affirm the existence of **positive relationships:**

- Adopting more preventive health practices is associated with attending a higher number of different camps.
- Adopting healthy behaviours and access to correct ANC and PNC were significantly associated with lower incidence of health problems.

Moreover, nutrition camps have had a positive impact on children's nutrition grade.

Figure 55. Households who felt the nutrition camp helped them improve their children's nutrition grade (N=171)



Education

Concerning education, enrolment in school was high at 85%. 95% of children and 96% of parents state the school is better than before the program. 37 out of 38, parents of children who benefited from Balwadi activities consider their child has improved their basic alphanumeric skills through the Balwadi activities.
Finally, by comparing literacy and numeracy levels in the CEP sample with the national average (ASER report), **the program was efficient in reducing the gap between CEP children and regional or national averages**, especially in the highest grades.

When considering endline impacts, child labour rate is 5 to 7% (vs 5.6% in the Asia and Pacific region), but Bal Manch seems to help children advocate for their rights.
Households are pessimistic about their resilience in facing difficult situations, but those who received (more) trainings from the CEP have a higher primary income, which makes them feel more resilient.
Lastly, households who saw a greater improvement in their health and in their social security coverage have a higher life satisfaction.

RESPONSIBLE MICA INITIATIVE

BJSAM Consortium :
-Bhartiya Jan Utthan Parishad
-Samajik Parivartan Sansthan
-Abhivyakti Foundation
-Samarpan

improve

Table des matières

Introduction

Context

India is the world's largest source of mica, a mineral that is used in a wide range of industries. It is mined extensively in India's east states of Jharkhand and Bihar where a variety of factors contribute to poor working conditions including the use of child labor. The region is poor, and families face financial pressure to bring their children with them to collect mica. The mica workforce lives in villages that are largely dependent on mica and offer little access to education, health care and government services. The region and the mica industry in particular lack enforcement of laws and regulations needed to provide enforceable oversight of the industry. There is no mechanism to incentivize the adoption of workplace and labor standards or to prevent illegally mined mica from entering the global mica supply chain.

Responsible Mica Initiative

The Responsible Mica Initiative (RMI) aims to engage multiple stakeholders under a Coalition for Action to contribute to the establishment of a fair, responsible and sustainable mica supply chain in Bihar & Jharkhand that is free of child labor and provides responsible working conditions. Adopting a holistic approach, RMI implements three program pillars simultaneously:

1. Mapping and workplace standards

RMI members must map the source of mica in their products to exporters, processors and mines in India. Each member's supply chain participant must then adopt workplace environment, health, safety and fair labour practices that include a prohibition on the use of child labour.

2. Community empowerment

Villages that provide the workforce for mica mines and processors are empowered to access improved educational resources for children, better health care, alternative means of livelihood to reduce economic dependency on mica, and government social programs.

3. Legal frameworks

RMI encourages the creation of laws and regulations and related enforcement mechanisms that will govern all aspects of the mica industry and establish a responsible and sustainable mica supply chain.

To effectively implement its three program pillars, the Responsible Mica Initiative works with multiple stakeholders from a variety of disciplines and organisations who bring their expertise and commitment to address the mica challenge.

Study scope: Community Empowerment Program

At the heart of RMI's approach, the Community Empowerment Program (CEP) is a 3-year program already implemented in 130 villages, 50 of which (those supported in 2022-2024 by the BJSAM consortium) will be included in the scope of this evaluation project. The CEP employs a holistic approach, aiming to improve working conditions and eradicate child labour by improving four key components: enhanced livelihood, raised nutrition and health standards, improved access to quality education and improved access to government services. Evaluation of program impacts on these four components will form the basis of the current study.

NGO members of the BJSAM consortium:

- Bhartiya Jan Utthan Parishad
- Samajik Parivartan Sansthan
- Abhivyakti Foundation
- Samarpan

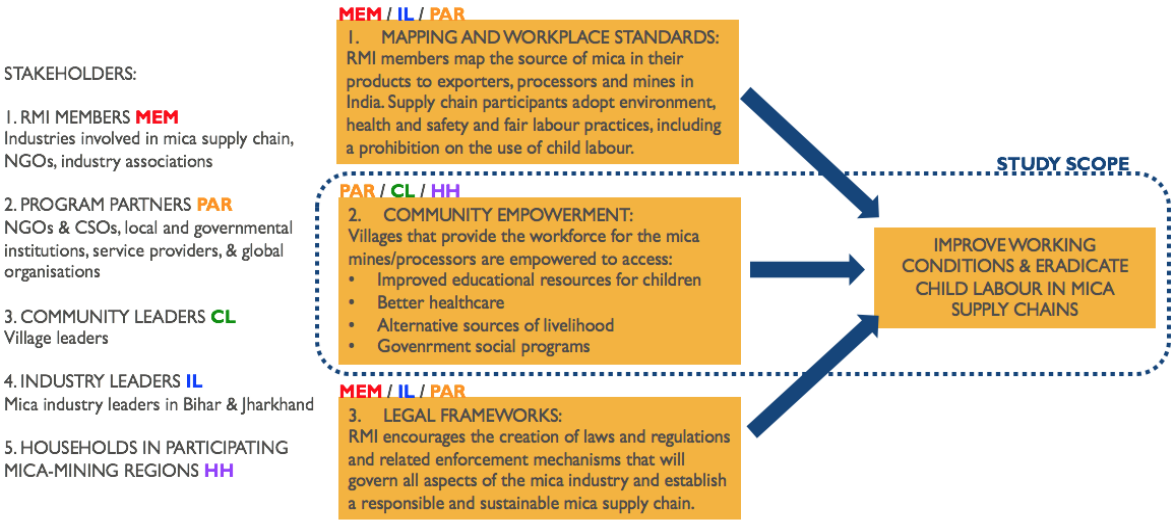
Key Evaluation Questions

Effectiveness: How effective is CEP in terms of meeting pre-specified objectives?

Impact: How impactful is CEP in terms of creating positive changes that contribute to higher level development objectives? How does impact differ by sub-category (village, socio-demographic group) and what mechanisms drive this impact? Can we be sure that observed impacts are due to the CEP?

Relevance: How relevant and significant is CEP in terms of local requirements and priorities with respect to mica mining conditions and the eradication of child labour?

Sustainability: How sustainable are program activities and impacts, in terms of their likelihood to continue after external support is withdrawn?



The evaluator: Improve

Created 15 years ago, Improve is a social enterprise whose mission is to guide actors towards the social good.

Whatever the stage of development or the size of a project, Improve guides organisations in achieving their social mission by providing expertise in impact evaluation. Using a range of quantitative and qualitative evaluation methods in addition to cost-benefit analysis, Improve adapts its approach depending on the needs of the organisation. Improve's three main approaches are: impact evaluation consulting and implementation, impact evaluation coaching, and made-to-measure training.

Improve has worked with more than 200 organisations, including investment funds, foundations, businesses and charities.

Field data collection partners: Anahat For Change Foundation

Anahat For Change Foundation is a youth-led and youth-run not-for-profit organization working in the space of women empowerment through skill building and livelihood generation with sustainability at its core. They work with urban and rural communities on awareness regarding personal safety education programs, sexual reproductive health rights, menstrual health and hygiene and capacity development by engaging local partners and community leaders. Their vision is to create a society where women and girls enjoy equal rights and entitlements. Their mission is to create an enabling environment for women and girls by equipping the society with knowledge, life skills and capacity development.
Anahat were responsible for the data collection phase of the current study, in close collaboration with Improve.

Anahat For Change Foundation

Methods

Scoping and planning phase

The scoping and planning phase was carried out in 2021 as part of the evaluation of the CEP project set in a different group of 40 villages in the same region (supported by the BJSAM consortium as well). The present evaluation replicated the methods of the first one. The scoping and planning phase was mostly centred around the construction of a Theory of Change (ToC).

The Theory of Change

Our expertise relies on the « **Theory of Change** » (ToC).

The ToC is a strategic tool that visually represents the expected social change process according to the viewpoint of a specific stakeholder. It starts by specifying all the activities that make up the program, lists the impacts these engender, and finally hypothesizes how these impacts contribute to the social mission statement. Once finalized, the map offers **a clear snapshot of all identified and potentially measurable impacts** of the activities proposed by the program. It also allows for specific hypotheses to be formulated, that will be tested in the evaluation.

This mapping traces the path of our reasoning at a specific time, and can therefore be adjusted according to the scope of the study and the evolution of the program.

Theory of Change of the CEP

During the evaluation of the CEP implemented by in 2021, RMI had first formulated a social mission statement for the CEP; this forms the focal point of the ToC, towards which all activities and impacts are directed. Then two interactive online workshops had been held with members of the RMI team, in order to establish all the different activities that make up the CEP, and the impacts they are presumed to engender. The resulting information from these workshops had been used by Improve to create a comprehensive ToC, outlining all CEP activities relating to the 4 different pillars of activity, and short-term and long-term impacts, in addition to long-term generic impacts. More information retrieved from CEP documentation sent by RMI (baseline study report, quarterly reports, monitoring documents, etc.) and from four interviews with program directors had also fed into the construction of this ToC.

Although the actions implemented by the BJSAM consortium in this third edition of the CEP have differed slightly from those put in place in the first edition, the general framework remained the same, thus the same ToC could be used in the present evaluation (see in the Annex)

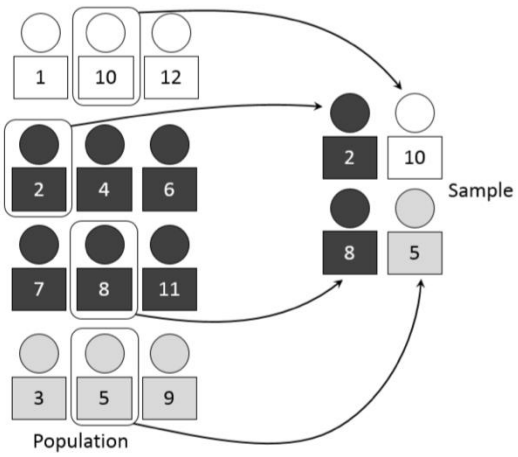
Battery of indicators

The battery of indicators results from the theory of change and is a document that provides a detailed account of all indicators that will be measured as part of the study. As such, this document can be considered an operationalisation of the ToC (or parts of the ToC) and is used to later construct the questionnaires and interview guides. This second evaluation used the same battery of indicators created the previous year.

Data collection methods: Questionnaires

Participants

Main impact questionnaire: Planned participants were 250 household (HH) heads in the 50 villages participating in the CEP, who responded on behalf of the entire household for indicators concerning impacts of the CEP in terms of education, livelihood, health and Social security. This sample of 250 households (out of a total population of 4673) was selected to give a 6% margin of error, with 95% confidence interval. This means that, for example, if in the sample of 250 HH, we find 20% are engaging in some form of child labour, we can be sure with 95% certainty (95% confidence interval) that the true rate of child labour in the larger population is 14-26% (6% margin of error). Selection of households followed a stratified random sampling procedure, which ensures proportional representation of all sub-groups in the final sample, see diagram below:



In this case, random selection of households to take part in the study was stratified by village, as well as by receipt of aid (in a financial form, or in kind), such that each village would be proportionately represented in the final sample, and similarly with the group of aid-recipient households.
However, to ensure having enough families with children in the sample to carry out relevant analyses about the impacts of the CEP on children, it was decided to over-represent these households in the sample. Hence, out of 250 HH in the sample, 200 have at least one member aged 6-14.
Random selection of households was carried out by assigning each one a random number following a uniform distribution law.

With a total of 250 households effectively surveyed, the margin of error is 6.02%, which ensures that the sample of households is large enough to be sufficiently representative of the population from which it was drawn. The stratified sampling procedure was a success - all villages are represented by a proportionate number of households. In four villages, the number of households effectively surveyed is not exactly what was planned, but these slight changes do not affect sample representativity (see Table A in the annex).
Concerning stratification by receipt of aid, 315 households (6.7%) from the population of 4673 were reported by RMI to have received asset support.

Literacy and numeracy testing: Participants were all household children aged 6-14 years (this is the age group targeted by the education pillar of the CEP), resident in the households randomly selected to take part in the study.

Material

The present evaluation uses the same questionnaires created for the 2021 evaluation. Only the main impact questionnaire had a few questions and answering options added or removed, as agreed on during an online workshop with members from the RMI team, the BJSAM operational partners and the Anahat team, such that it captures better the effects of this third edition CEP's actions and answers some specific questions they had about the program's impact.

Main impact questionnaire: An online questionnaire had been created using SurveyCTO software, which allows for data to be collected in an offline mode, which is useful in contexts where internet access/quality cannot be guaranteed.
The questionnaire was created for the 2021 evaluation in English and translated into Hindi, following three steps – forward translation, back translation and reconciliation, and was then tested with a few households[1]. The changes brought to the questionnaire in the present evaluation did not go through the same process of three steps translation and field testing, as they were marginal.

Literacy and numeracy testing: Literacy and numeracy testing was carried out using the ASER Centre tools for testing reading and math level. The ASER Centre is an autonomous assessment, survey, evaluation and research unit within the Pratham network that provides tools for rigorous assessment of outcomes and processes in education and other social sectors[i]. The tools consist of simple visual aids in Hindi that allow the tester to quickly and simply assess the reading and math level of children. The tools have been tested and found to have a good level of test-retest reliability, inter-rater reliability, concurrent validity and convergent-discriminant validity[ii]. Data resulting from these tests were entered in a separate online survey that also contained information about the child being tested (age, sex, school grade) and responses to simple questions concerning their perceptions of the school.

[11] For more detail, see the impact evaluation report for the CEP implemented by the CESAM consortium.

Procedure

All Anahat investigators followed procedural guidelines created by Improve and Anahat. Investigators worked in mixed-sex pairs and were accompanied by a village volunteer when possible. Households had been warned in advance that they would be required to take part in the study and information on the nature and aims of the questionnaire were provided. If a household was absent on the day of testing, the next chronological household by household ID was selected for questioning, to prevent bias in selection of households. On arrival in the household, after introductions one of the investigators explained to households the aims of the study, what could be expected during testing, and it was explained that they were free to terminate the session at any time and/or not respond to questions if they wished. Once they had given their consent, one investigator proceeded to administer the questionnaire to the household head. Meanwhile, the second investigator administered the literacy and numeracy tests to any eligible household children. Administration of the questionnaire plus literacy and numeracy testing generally took no more than 30 minutes. At the end of each day, investigators uploaded completed questionnaires and translated qualitative responses into English.

Data collection methods: Interviews

Participants

Planned participants were 6 community leaders, 6 teachers and 6 Anganwadi Centres (AWC) workers in the participating villages, randomly selected from a list of eligible potential participants provided by RMI. It was estimated that 18 participants would give sufficient information to reach information saturation.

Materials

Written interview guides were created during the previous CEP impact evaluation for each interviewee type (community leader, teacher, AWC worker), with an introductory text explaining the aims of the study and what could be expected of the interview. These were created in English and translated into Hindi by the Y-East team. The same guides were used for this evaluation's interviews.

Procedure

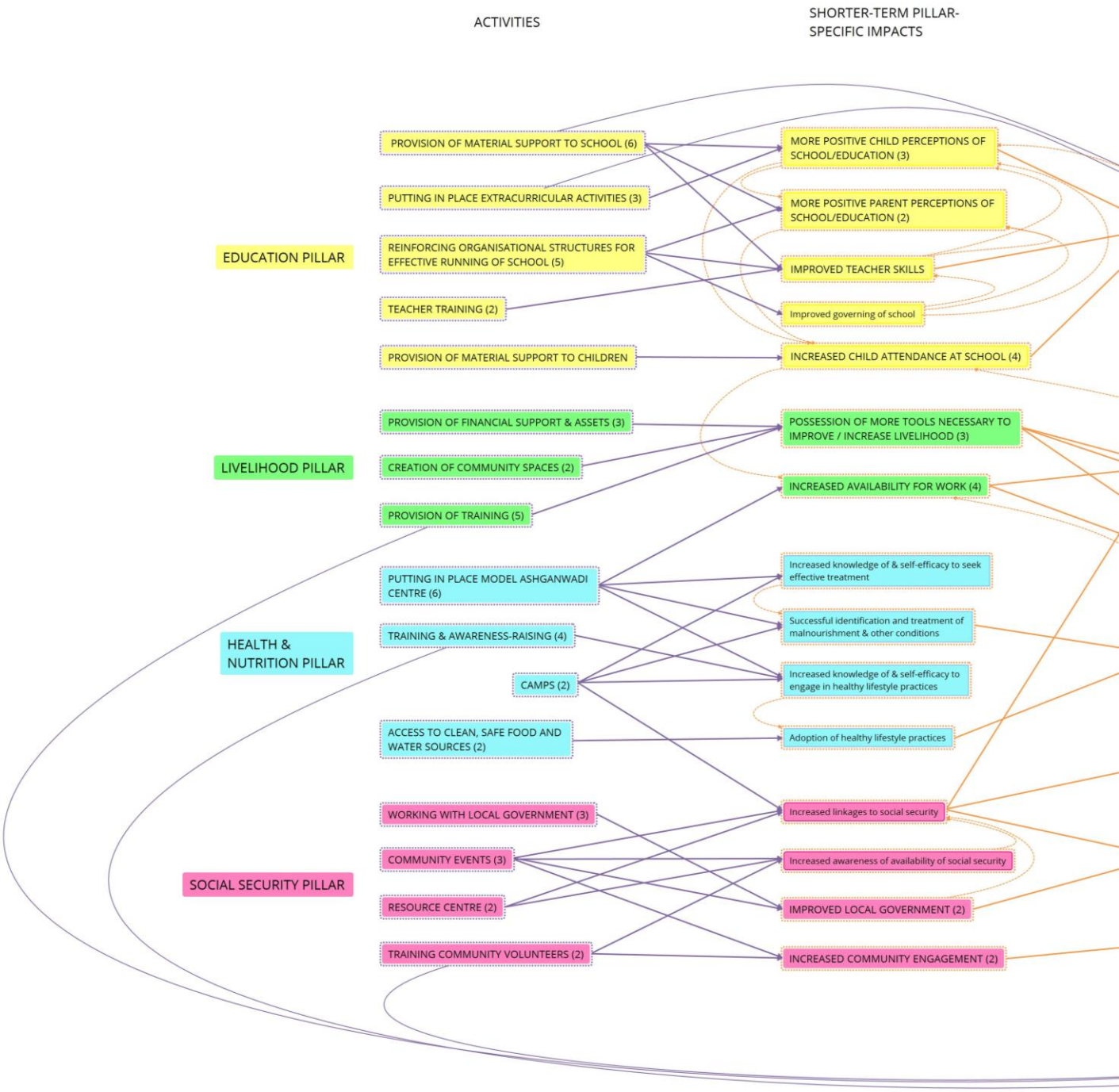
The interviews were semi-structured, which means interviewers used the interview guides to cover certain themes in the interview but were relatively free in terms of how they questioned the interviewee and could cover additional topics if the interviewee had more to say.

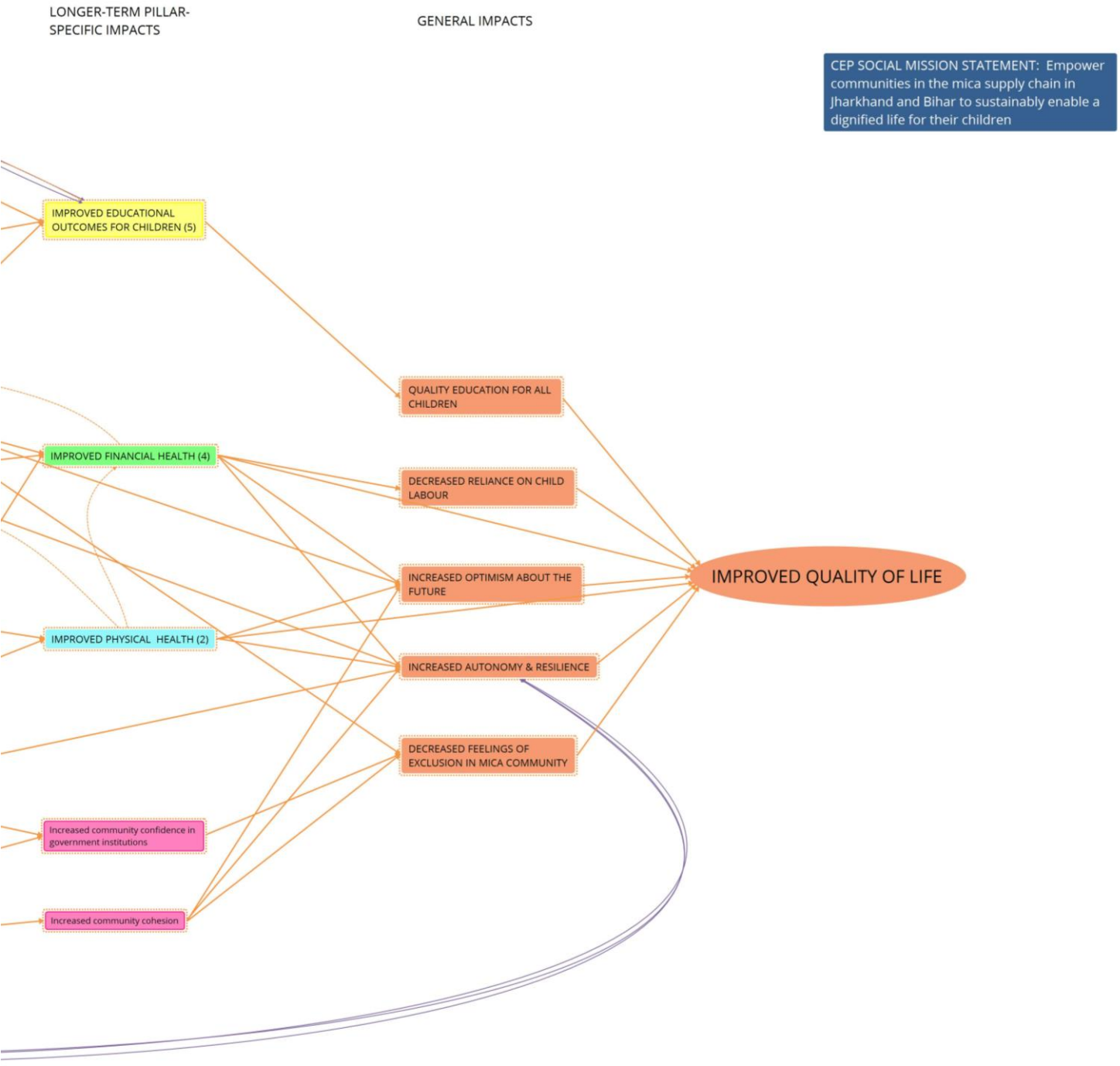
Interviews were conducted outdoors to maintain hygiene standards but in a secluded place to ensure privacy for the interviewees. They were conducted in pairs with one person asking questions and the other recording any notes. All interviews were recorded with the permission of the interviewee, and later transcribed and translated into English. Interviews with community leaders covered more themes and so were scheduled to take 45 minutes. Interviews with teachers and AWC workers covered fewer themes and were scheduled to take 15 minutes.

Data collection methods: Monitoring and evaluation (M&E) data and financial data

This report contains an analysis of the M&E and budgetary data, both of which were collected by the RMI team on a quarterly basis throughout the course of the project. This data was provided to Improve for analysis at project end.

Theory of Change of the Community Empowerment Program




LONGER-TERM PILLAR-SPECIFIC IMPACTS
GENERAL IMPACTS
CEP SOCIAL MISSION STATEMENT: Empower communities in the mica supply chain in Jharkhand and Bihar to sustainably enable a dignified life for their children
IMPROVED EDUCATIONAL OUTCOMES FOR CHILDREN (5)
IMPROVED FINANCIAL HEALTH (4)
IMPROVED PHYSICAL HEALTH (2)
Increased community confidence in government institutions
Increased community cohesion
QUALITY EDUCATION FOR ALL CHILDREN
DECREASED RELIANCE ON CHILD LABOUR
INCREASED OPTIMISM ABOUT THE FUTURE
INCREASED AUTONOMY & RESILIENCE
DECREASED FEELINGS OF EXCLUSION IN MICA COMMUNITY
IMPROVED QUALITY OF LIFE

Results

Monitoring & evaluation

In this section CEP effectiveness is assessed, in terms of the extent to which pre-determined objectives set for each KPI were achieved at endline. We will therefore focus on the target achievement of each pillar KPIs.

Table 1 – Summary of KPI target achievement

KPI	KPI Description	Target number	Unit of measurement	Achieved Number	% of target
LIVELIHOOD					
Vocational training for local youth					
KPI 1.1	Number of trainings carried out	50	Trainings	44	88%
Kitchen garden support					
KPI 1.2	Number of kitchen garden installed	1000	Kitchen gardens	1014	101%
Setting up Community Facility Centres (CFC)					
KPI 1.4	Number of CFC installed	10	CFC	10	100%
Asset building support based on graduation model					
KPI 1.6	Number of units (assets) distributed (farm and non-farm)	300	Individuals	414	**138%**
Medical camps for Livestock					
KPI 1.8	Number of medical camps for livestock organized	45	Camp	45	100%
Total Livelihood					**105%**
HEALTH AND NUTRITION					
Health camps					
KPI 2.2	Number of health camps organized	45	Camps	45	100%
Screening of SAM/MAM children and refer them to NRC[2]					
KPI 2.5.1	Number of SAM children identified	*No target*	Individuals	183	*N/A*
KPI 2.5.2	Number of SAM children referred to NRC	*No target*	Individuals	76[3]	*N/A*
KPI 2.5.3	Number of MAM children identified	*No target*	Individuals	617	*N/A*
Nutritional camps					
KPI 2.6.1	Number of nutritional camps organized	45	Camps	45	100%
KPI 2.6.2	Number of children who attended nutritional camps	*No target*	Individuals	1047	*N/A*
Community based safe drinking water facility services					
KPI 2.7	Number of safe drinking water facilities installed	10	Facilities	10	100%
Operation and Maintenance of Drinking water and sanitation facilities to maintain proper hygiene					
KPI 2.8	Number of drinking water facilities repaired and improved	50	Villages	48	96%
Modelling of AWC					

[2] SAM = Severe Acute Malnutrition; MAM = Moderate Acute Nutrition; NRC = Nutrition Rehabilitation Centre. NRCs take charge of SAM children, but not of MAM children.

[3] When a SAM child is identified, parents are offered to take them to a NRC. Here, 76 parents (42% of SAM children) agreed to it. In case of refusal, the CEP would still implement monitoring of the children, at home.

KPI 2.12	Number of AWCs where intervention was completed	27	AWC	27	100%
Immunization support					
KPI 2.14	Number of children identified as ones who received a full immunization in the project areas	*No target*	Individuals	3156	*N/A*
Total Health and Nutrition					**100%**
RIGHTS AND ENTITLEMENTS					
Linkage with NLM/Jeevika					
KPI 3.1	Number of persons linked with NLM/Jeevika[4]	750	Individuals	1044	**139%**
Linkage with Financial Institutions					
KPI 3.2	Number of people open their bank account with any of the financial institution	835	Individuals	1219	**146%**
Organising Social Entitlement camp & linked beneficiaries with different govt. schemes.					
KPI 3.5	Number of camps organized for Social entitlement schemes	75	Camps	80	107%
Linking with Social Entitlement Scheme					
KPI 3.6	Number of people enrolled in social entitlement schemes	9500	Households	11822[5]	**124%**
Total Rights and Entitlements					**129%**
Education					
Balwadi Centres in villages where pre schooling facilities not available					
KPI 4.1	Number of Balwadi established	10	Centres	17	**170%**
KPI 4.1.2	Number of Children enrolled in Balwadi Centre established	*No target*	Individuals	630	*N/A*
Scholarship Support to Needy Children					
KPI 4.2	Number of at-risk children provided with a scholarship support	150	Students	137	91%
Promotional support to Bal Manch to increase child participation and Peer learning and monitoring					
KPI 4.3	Number of Bal Manch formed in the project area	50	Bal Manch	50	100%
Capacity Building of School Management Committee (SMC) members					
KPI 4.6	Number of trainings carried out	30	Trainings	30	100%
Establishment of Community library-5 Each partner					
KPI 4.7	Number of community library established	25	Libraries	25	100%

[4] NLM (National Rural Livelihood Scheme) or Jeevika is a government scheme aimed at the social and economic empowerment of the rural poor. Under these schemes, self-help groups (SHGs) of women are formed. These groups hold regular meetings, save collectively, and receive a revolving fund of Rs. 15,000 based on their savings performance. Additionally, loans are provided for women's business ideas within the SHGs. Thus, this will be the way for the linkages with the credit for the households.

[5] During the implementation period, 9157 individuals were linked to social schemes via social entitlement camps and 2665 via resource centres.

School Library					
KPI 4.9	Number of school library setup or upgraded	50	Schools	41	82%
KPI 4.9.2	Number of children and community members participating in community library	*No target*	Individuals	3867	*N/A*
Orientation of teachers at school level-through Education trainer					
KPI 4.11	Number of demonstration sessions conducted in all schools of the project area	100	Trainings	101	101%
Provision of teaching learning materials (books, math kits etc.) to support classroom processes					
KPI 4.12	Number of schools have received TLM (language & math kit), books	41	Schools	41	100%
Provision of sport materials to support school environment and creating avenues for children					
KPI 4.13	Number of schools have received sports material	41	Schools	41	100%
Total Eduction					**105%**
ADVOCACY					
Development of child ambassadors and PRI ambassadors					
KPI 5.1	Number of training session(s) organized for potential children during the quarter	4	Trainings	4	100%
Quarterly Disseminations of project level activities with Block, District and State level officials					
KPI 5.2	Number of dissemination workshop organised	30	Months	6	20%
Organize Block level Interface meeting with community to strengthen their relationship and to echo their voice					
KPI 5.3	Number of interface meeting organized	30	Months	4	13%
Organize Multi stakeholder event to improve advocacy networking					
KPI 5.4	Number of Multistakeholder event organised	30	Months	4	13%
Total Advocacy					**37%**

General comments

For more detail on the evolution of KPIs over time, please refer to the next section, in the "Financial data regarding target achievement" analyses

- **For Livelihood, targets were reached** or surpassed for all activities, except vocational training.
- **For Health and nutrition, all of the targets analysed were reached** as well. Performance for the modelling of Anganwadi centres was of 100% after a revision of target due to circumstances in the project areas[6].
- **For Rights and Entitlements, all four KPIs were achieved, with three of them largely exceeding expectations**. The good number of households linked to social security schemes is a direct result of the social entitlement camps and resource centres.
- **The Education section** contained the most KPIs (9) and the targets for **eight of them were reached or very nearly surpassed**. The only not-reached KPI was the upgrading or setting up of school libraries. It would be helpful to understand which difficulties (such as the relationship between project implementing partners and local schools) could have affected performance for this KPI.
- **For Advocacy, only one target seems to be met**. The NGO partners gave two explanations. First one is that circumstances on the ground could made it difficult to organise the meetings and workshops with the expected frequency. Second one, the most important, is that a lot more work was conducted, but does not show up in the numeric KPIs since informal meetings at block or district levels were too difficult to report (no photos, no signed minutes).

[6] The CEP was designed to improve already existing AWCs, not to build some in villages that were lacking them completely. The initial target of modelling 50 AWCs was revised after the first field visits confirmed only 26 villages already had an Anganwadi centre.

Results
Financial data

In this section, we present an analysis of financial information relating to the CEP. First, we expose overall program expenditure by pillar. We then explore how expenditure relates to budget, and finally compare financial information to achievement of KPI targets.

Note: to present concise and clear charts, we set together the following spending categories from budget reports:

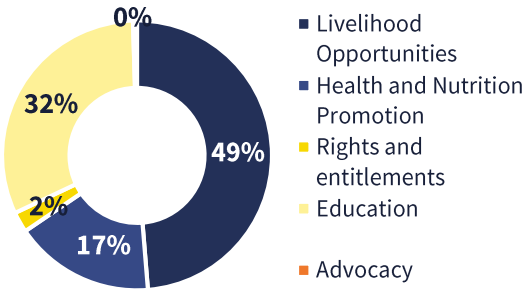
1) Costs with activities related to one of the five pillars in the program were grouped under the "Total project implementation" category.
2) Expenditure for evidence generation, monitoring and evaluation are put together in the "Monitoring and evaluation" category.
3) Costs with partner's personnel, travel, equipment, office supplies and audit are included in the "Personnel and other project costs – Partner"
4) Costs with personnel, travel, equipment, office supplies and audit for the project's main unit (PMU) are included in the "Personnel and other project costs –PMU"

Expenditure

Project implementation expenditure by pillar

If we break down the total project implementation spending by pillar, Livelihood is the highest-cost pillar, with total costs of 14.24 million INR (49%) over the course of the program, as shown on Figure 1. Activities in the Education pillar cost 9.22 million INR (32%), while costs in the Health and Nutrition pillar amounted to 4.91 million INR (17%) and in the Rights and Entitlements pillar, to 721 thousand INR (2%). The Advocacy pillar generated 140 thousand INR in expenses (0%).

Figure 1. Project implementation expenditure by category

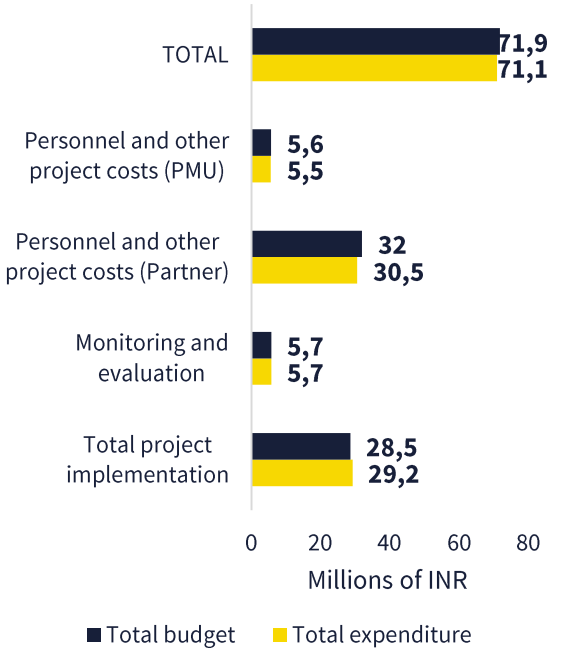


Expenditure relative to budget

Overall expenditure relative to budget

Overall, for the three years of program, expenditure was slightly below (855 thousand INR) budget, as shown on the Figure 2 below.

Figure 2. Total expenditure relative to total budget



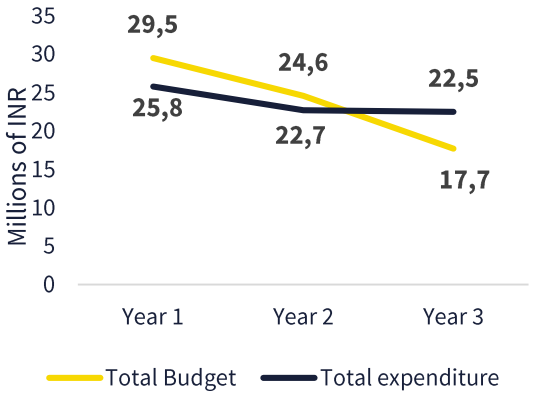
Exploring expenditure relative to budget, it appears that in the organisational categories except monitoring budget was slightly underspent, at the benefit of the project implementation, where expenditure was 668,000 INR over budget. As previously mentioned, it includes expenses related to activities in each project pillar. Expenditure under this category was heterogenous, as the Livelihood and Education pillars have overspent respectively 2.03 million INR (+16%) and 476 thousand INR at the end of the program. However, this was counterbalanced by expenses in the Health & Nutrition and Rights & Entitlements pillars, for which there were respectively 1.78 million INR (-27%) and 65,000 INR left unspent at the end of Year 3.

Operational costs regarding personnel and other project costs for PMU and expenditure with monitoring & evaluation remained relatively close to the initial budget.

Further explanations from the operating partners revealed that in the Health pillar, the activity of supporting local production units of sanitary napkins quickly appeared unsatisfying because of the poor condition of the production units. It was thus decided early on to not implement this activity. The funds were reallocated to providing households with assets for income diversification, in the Livelihood pillar.

Expenditure relative to budget over time was explored as shown in the line chart below (Figure 3). The budget indicates that spending was intended to peak during the first year and gradually reduce in the following years, which did not occur.

Figure 3. Expenditure relative to budget by year, on all five pillars



During the first year, expenditure was 4.3 million INR under budget and this trend was less prominent during the second year, where there was a total of 1.9 million INR left unspent. In the final year, expenditure exceeded budget considerably, with a total of 4.8 million INR underspent.

For the first year, this gap can be explained by the fact that all the program pillars and costs with personnel and administrative were underspent. In particular, it could be identified that costs with partner's personnel and other project costs was well under budget, finishing Year 1 with an amount of 1.1 million INR left unspent[7].

During the second year, the Livelihood pillar presented an overspending of 369.5 thousand INR (+11%). However, since all the other sections had amounts left unspent, in particular the 1.95 million INR (-48%) for the Health & Nutrition pillar – due to cancelling the sanitary napkin production support, expenses for Year 2 remained slightly under what was budgeted.

Finally, during the last year of the program, all spending categories had over expenses, except personal and project costs with partners, which reflects that overall expenses went relatively over budget. In particular, the Livelihood and Health & Nutrition pillars had the biggest amounts of overspending: 2.08 million INR (+195%) and 1.14 million INR (+130%), respectively.

Overall, spending was always under or well under budget, except at the end of the program (Year 3) where it slightly exceeds it.

Financial data relative to target achievement

In order to investigate the efficiency of the CEP, we considered patterns of cumulative budget and expenditure over time alongside efficacy (attaining of selected KPI targets - averaged across all KPIs in a pillar). This gives an idea of which parts of the program are efficient, in that they achieve targets with relatively little spending. This also gives an idea of whether targets and budgets have been set at an appropriate level. For example, if targets are achieved despite spending being well under budget, this could indicate that i) targets are too low, ii) costs were overestimated or iii) volume of activity needed to reach target was overestimated.

It is important to notice that this analysis does not consider the entire budget for each pillar, but only the budget for the specific KPIs selected. KPIs to which no budget was directed are not included in the analysis, even though they appear in the table KPI achievements table in the previous section.

Livelihood

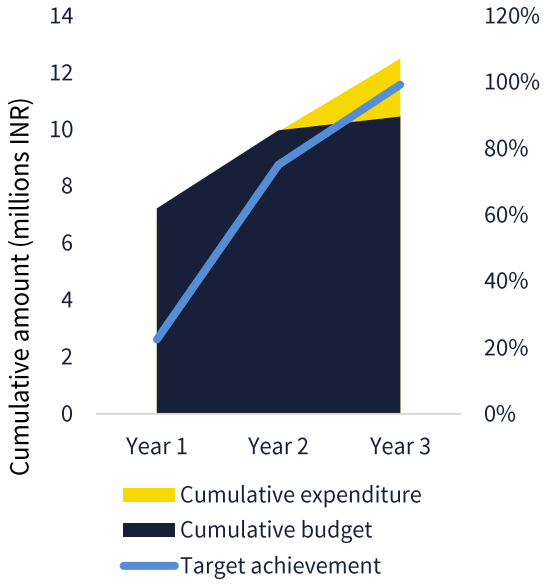
KPIs included in the analysis for Livelihood pillar are the following:

[7] Which was due to the program starting with a 20-day delay, according to the operating partners

KPI 1.1: Number of vocational trainings for local youth carried out
KPI 1.2: Number of kitchen gardens installed
KPI 1.4: Number of Community Facility Centres (CFC) installed
KPI 1.6: Number of units (assets) distributed (farm and non-farm)
KPI 1.8: Number of medical camps for livestock organized

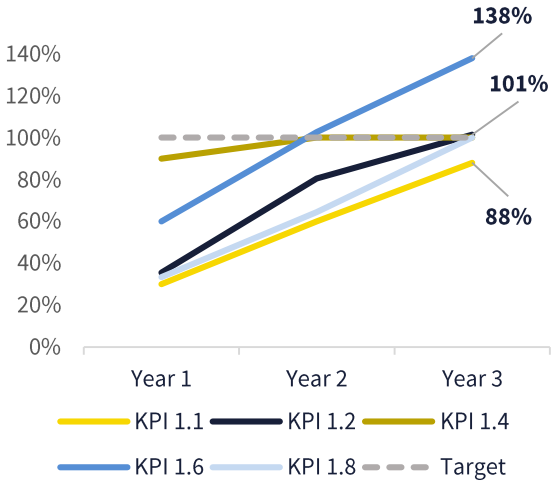
The light blue line in the diagram below (Figure 4) represents the cumulated average target achievement of Livelihood KPIs enumerated above. This diagram shows that Livelihood expenditure closely followed budget in the first year of program. Expenditure exceeds budget from Year 2 onwards, especially in Year 3 (2 million INR of overspending, for KPI 1.6 exclusively).

Figure 4. Budget and expenditure relative to target achievement (Livelihood)



For KPIs 1.2, 1.4, 1.6 and 1.8, efficiency followed expenditure and was strong since the cumulative average target achievement nearly reaches 100% (Figure 5). Note that for KPI 1.4, target was achieved at Year 2, since all the 10 CFCs had been installed before the end of that year. For KPI 1.6 (asset provision), the implementing partners explained that although KPI 1.6 reached its target by the end of Year 2, an additional 2 million INR were spent in Year 3 for this KPI (redirected from the cancelled activity of supporting sanitary napkin production in the Health pillar), since additional needs from the households were noted, which is reflected in the strong overachievement of the target, at 138%.

Figure 5. Achievement of KPI targets (Livelihood)



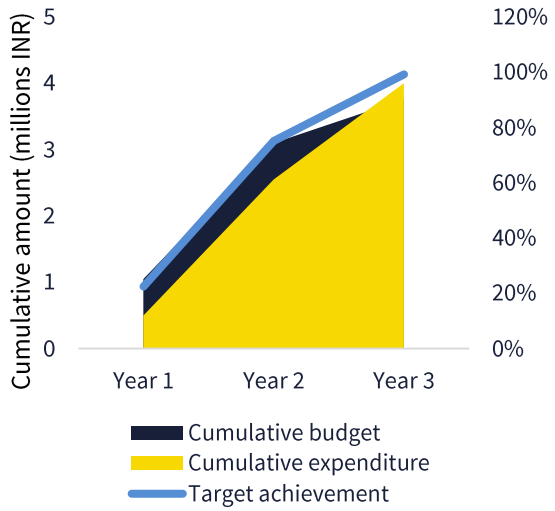
On the other hand, efficiency was less visible for KPIs 1.1 (vocational training): although expenditure followed budget, final target achievement only reached 88%, which could be due to an underestimation of costs.

Health and nutrition

KPIs included in the analysis:

KPI 2.2: Number of health camps organized
KPI 2.6: Number of nutritional camps organized
KPI 2.7: Number of safe drinking water facilities installed
KPI 2.8: Number of drinking water facilities repaired and improved
KPI 2.12: Number of AWCs where intervention was completed

Figure 6. Budget and expenditure relative to target achievement (Health and nutrition)



Note that all the selected KPIs in this analysis were reached, especially because initial targets were redefined once the project had already started to accurately match conditions in the villages[8].

As shown in Figure 6, globally Health and Nutrition spending was delayed compared to budget planning (only 50% of dedicated budget was spent on Year 1), but in the end, spending ended up exceeding budget slightly[9].

The trajectory of target achievement followed the spending trajectory, reaching 99% of cumulated target achievement for the selected KPIs (Figure 7). Performance for this pillar would be even bigger if we included non-budgeted activities such as the screening of severe acute malnutrition (SAM) children, where 183 children were identified. This is a result worth mentioning, especially considering that nutritional camps are an important part of this pillar.

The lag in expenditure appears to be due to KPIs 2.7 and 2.12, which is curious since these two KPIs were the most advanced by the end of Year 2. The modelling of Anganwadi Centres (AWCs) may have indeed been completed early, but in Year 3 there were still Village Health, Sanitation and Nutrition Days (VHSNDs) organized, and they were included in the budget for this KPI. For clean water facilities, it could be that target was first achieved in terms of setting up the facilities, but more budget was necessary in the last year to perform water quality checks.

Figure 7. Achievement of KPI targets (Health and Nutrition)

The total target of nutritional camps and of health camps was only reached during the third year of project, although expenditure followed budget each year, signalling the importance of having a long project to achieve considerable impact. In total, 4,543 individuals attended health camps in the three years of program and 1,047 children participated in nutritional camps.

Rights and entitlements

KPIs included in the analysis:

KPI 3.5: Number of camps organized for Social entitlement schemes

For Rights and Entitlements, only one KPI was analysed, since all the remaining KPIs previously selected for this pillar concerned non-budgeted activities.

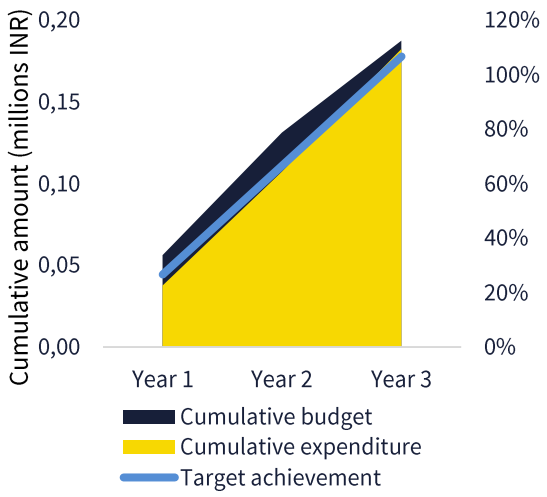
As shown in Figure 8, expenses for this KPI remained below budget throughout the three years of program, but KPI followed an ascending

[8] Initial target for KPI 2.12 was of 50 AWC, but according to information provided by BJUP, the practical implementation led to a revised target that more accurately reflected the on-ground reality, were there were only 26 AWC available.

[9] This seems to contradict the underspending observed in the Health & Nutrition pillar overall, when we analysed expenditure relative to budget earlier on. Giving it a closer look, it appears that the underspending in the Health & Nutrition pillar is due to activities around production and promotion of sanitary napkins, for which there was almost no expenditure, with KPI achievement remaining at 0%.

trajectory reaching 107% by the end of Year 3. It could be that the activity was a little overbudgeted; operating partners explained that some of the camps were organised / subsidised by the government, hence the savings.

Figure 8. Budget and expenditure relative to target achievement (Rights and entitlements)



Eighty social entitlement camps were organized, five more than what was previously target for this activity. A direct consequence of this overachievement is the performance indicators for individuals linked to NLM/Jeevinka and the amount of individuals linked to financial institutions, both well beyond 130%.

Performance for KPI 3.6, regarding the number of people enrolled in social entitlement schemes, largely exceeded expectations (124%). 77% of these individuals were linked to a social entitlement scheme during the social camps, while the other 23% were enrolled thanks to one of the resource centres established by the CEP program.

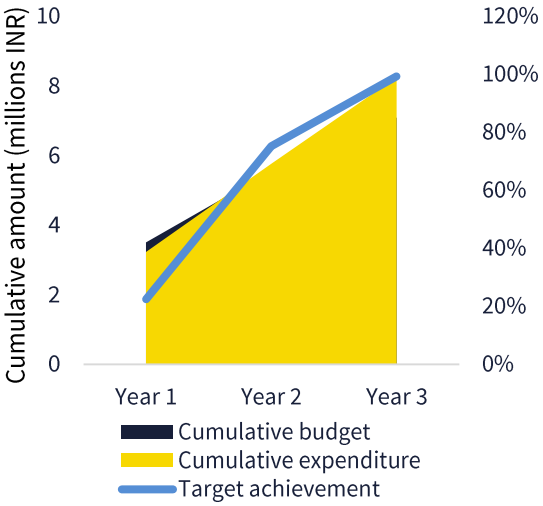
Education

KPIs included in the analysis:

KPI 4.1: Number of Bal Wadi established
KPI 4.2: Number of at-risk children provided with a scholarship support
KPI 4.3: Promotional support to Bal Manch to increase child participation and Peer learning and monitoring
KPI 4.6: Number of Capacity Building of School Management Committee (SMC) members trainings carried out
KPI 4.7: Number of community libraries installed
KPI 4.9: Number of school libraries set up or upgraded
KPI 4.11: Number of demonstration sessions conducted in all schools of the project area
KPI 4.12: Number of schools have received Teaching and Learning Material (TLM: language & math kit), books
KPI 4.13: Number of schools have received sports material

As shown in Figure 9, expenses remained relatively close to budget during the first two years of program, surpassing it in nearly 1 million INR in Year 3.

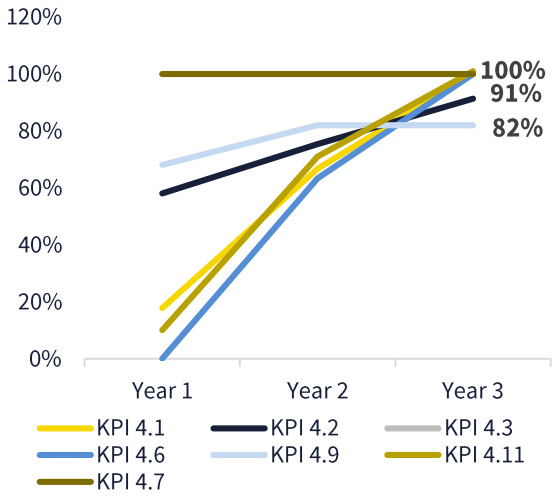
Figure 9. Budget and expenditure relative to target achievement (Education)



Final cumulated KPI achievement for this selected analysis is of 107%, even though two of the KPIs in this pillar were not achieved, school libraries and scholarship support (Figure 10)[10].

Figure 10. Achievement of KPI targets (Education)

[10] KPIs 4.3 and 4.7 have the exact same trajectories, which is why KPI 4.3 is invisible on the graph.



Balwadi activities were implemented at 70% over the initial target, while budget was overspent by 24%, which signals that extra budget was reallocated to this activity as to enable overperformance.
Scholarship support to needy children supported 91% of the planned 150 students while spending 93% of the budget. It could be that the initial target was overestimated, thus the remaining budget was reallocated accordingly.

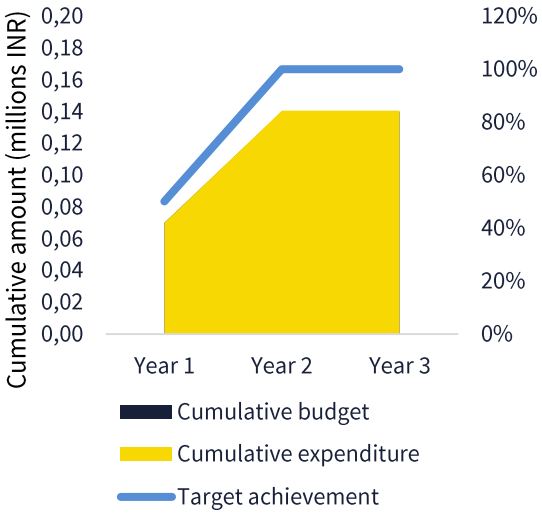
Advocacy

KPI included in this analysis:

KPI 5.1: Number of training session(s) organized for potential children during the quarter

For this pillar, our analysis includes the only KPI in the Advocacy pillar for which budget was allocated.

Figure 11. Budget and expenditure relative to target achievement (Advocacy)



It is also the only KPI for the advocacy pillar where target was achieved, due to circumstances on the ground that led project implementors to organise less sessions with stakeholders than initially planned. As can be seen in Figure 11, expenses for this pillar closely followed budget, indicating that projections corresponded well to the reality.

Conclusions

Expenditure during CEP

- **More than 71 million INR were spent** for the CEP, mostly for the implementation of the project's four pillars. Among the pillars, nearly half of spending was made on Livelihood, and a third on Education.

- Logically, the main expenditure item has driven the evolution of total spending over the three years. Indeed, **most variations can be explained by project implementation expenditure**: it remained under budgeted during the first two years of program, exceeding it for a bit in the final and third year.

- However, the cumulated result is positive, as **the project finished Year 3 with 855 thousand INR underspent**, mainly due to underspending in the "Partners and other project costs" category, at the benefit of program activities targeting the local population directly.

Expenditure related to budget

- The **evolutions described in expenditure are mostly conform to what was predicted in the budget**. Indeed, spending followed budget tightly, except for two pillars in the project implementation category**.**

- In detail, it appears that **discrepancies between expenditure and budget occur on specific spending items** only, such as personnel and operational costs. Similarly, spending was almost equal to budget **in the Health and Nutrition and Rights and Entitlements pillars but well over budget in the Livelihood and Education pillars**.

Financial data relative to target achievement

- In the Livelihood pillar, **vocational training for youth** underperformed (88%) despite spending following budget. **Asset support** overperformed greatly (138%) thanks to extra spending (140% of initial budget) allowed by budget reallocation.

- In the Education pillar, **Balwadi activities were implemented at 70% over the initial target**, while budget was overspent by 24%, which signals that extra budget was reallocated to this activity as to enable overperformance. **Scholarship support to needy children supported 91% of the planned 150 students while spending 93% of the budget**. It could be that the initial target was overestimated, thus the remaining budget was reallocated accordingly.

Results

Qualitative interviews

As presentd in the methods section, qualitative data collection has consisted of 18 semi-structured interviews with various stakeholders of the CEP. Interviewees have been questioned on perceived uptake and implementation of the program in order to complement the monitoring data on CEP effectiveness and gain a deeper understanding of any difficulties in uptake and implementation, thereby explaining gaps in effectiveness. They have been interviewed on relevance of CEP activities to broader development objectives in addition to local contextual relevance. Finally, they have been questioned on perceived sustainability of the program activities. This section will therefore present what the various stakeholders said during the qualitative interviews.

Community leaders

Six interviews were conducted in total: one with a mukhiya (leader in charge of several villages), three with ward members (in charge of one village), one with a ward sadasy and one with a panchayat samiti.
Despite the variety of their profiles, most community leaders explain that their role is to help the villagers.

> *"I have been doing social service work for 20 years"*

Other community leaders also claim to have representation and administrative missions.

> *"If they tell me to hold a meeting and to call everyone, I call all the villagers. I participate in whatever is discussed in the meeting."*

Involvement in the planning and implementation of the CEP activities

Communities and leaders have been involved in the planning and implementation of the CEP activities by assisting in the implementation and monitoring.

> *"Whenever they ask for support, I provide support."*

> *"I always assist the organization when they ask for it."*

> *"We have been associated with this program since long and whenever there is a meeting, we go to."*

The response from one of the leaders reflects the fact that he appreciated being involved:

> *"Every time someone from this organization called, I responded right away. If they asked me to gather people to organize a program in the community, I would do so. And I would like to remain associated with them in future also"*

Leaders also have a right of validation, their agreement is regularly required

> *Whenever something has to be done in this village, these people ask me, I also make the villagers aware*

About their relationship with the other program stakeholders, three of them mention their role in organizing meetings in their answers.

> *"I meet with government institutions like panchayats and schools, and they invite me to their monthly meetings. I feel like I ought to go there when they call. Or we'll need to give them a call when we set up a meeting. Meeting with them more often and staying in contact with them will be beneficial."*

They also emphasized their role as intermediaries, essential to maintain good relations with stakeholders.

> *"We have a very good relationship; we hold meetings together"*

> *"There is excellent contact with stakeholders."*

Relevance of the program in terms of responding to the needs of the mica supply chain community in your village

About problems facing villages, two community leaders from Koderma district mention lack of education and poverty.

> *"The village's issue is that there are some poor roads. Since the school is located outside of the village, kids have trouble getting there."*

Another community leader stresses the link between lack of education and the poverty experienced by villagers.

> *"Here, the majority of people are poor and face educational challenges."*

A ward sadasy also mentioned poverty issues among the problems they encounter.

"In addition to unemployment, the community faces water-related issues."

However, the people interviewed generally found that the CEP met their needs.
Leaders were asked about the program's ability to meet their needs. Most of the leaders responded favourably to this question. Indeed, 3 leaders mentioned that the program had helped to combat poverty by reducing unemployment and supporting the creation of businesses.

"People were employed, trained, and made aware of through this organization."

"As a result of this program, some adults are currently running their own businesses"

The community leaders were able to see the benefits of the program for the local people's finances. One of the leaders stresses the relevance of the program regarding diversifying sources of income

"People will have to provide separate income source"

One of the problems raised was access to water. Once again, the leaders feel that the program has met this need.

"Water tank was also set up in the fields."

The question of schooling for children is also one of the challenges to which the program has responded.

"The children in the school had access to play equipment, and they took part in the setup of Bal Manch."

"Some kids are attending school."

In most villages, mica picking is prevalent for adults and children alike, for lack of proper access to education. This is why leaders of these villages have particularly appreciated what the program has done to diversify means of livelihood and to increase attendance at school.
However, a ward sadasy considers that the mica program doesn't respond to the needs of his village. According to him, collecting mica seems to be the only solution to unemployment and poverty.

"The community here are unemployed, so they collect mica & earn. I believe Mica ought to receive some assistance."

Activities perceived to be most effective

Village chiefs were not sensitive to the same actions, and several activities were mentioned. Nonetheless, all kinds of facilities were cited by most of the community leaders.
One of them underlines the benefits of the sewing machines received by girls:

"The village girls got daily income because of the sewing machine given to them. They will also get training in making incense sticks. There has been a lot of change."

Another highlights the comfort provided by facilities.

"Chairs and utensils were given for the community program. Earlier, we used to eat food sitting down in any marriage ceremony, but now everything has been arranged."

One of the leaders found that what had been the most effective was the help provided for business.

"They offered someone a grocery shop and some pigs for farming. I consistently assert that our village's residents have received facilities from this organization, and we are all quite pleased about it."

When asked if they thought the CEP had contributed to the diversification of means of livelihood, most of the leaders agreed that the CEP had contributed through the training it provided and the goods it brought:

"The organization has provided training, such as beautician and tailoring."

Among the responses, two interviewees mentioned the work carried out on the school.

"The biggest thing is for children to get knowledge; the most important thing is that kids learn and grow up with information."

"They have done a great job at [our village's school."

Children using school tools

Another element that came up repeatedly was the better access to safe drinking water.

> *"They constructed a drinking water tank"*
>
> *"The installation of the water tanks was done expertly."*

Impact of CEP on the running of local government and institutions.

Almost all village leaders interviewed agreed that the program has improved situation or has made it possible to solve problems.

> *"Earlier there was a problem of water, now the government has solved everything in 3 years."*

It has also improved relations with the authorities through more frequent meetings, in particular:

> *"Following this organization's participation, the local authorities made more frequent visits to the villages"*
>
> *"We meet with government officials at their offices through the organization and complete the pending task"*

However, two interviewees have responded CEP activities do not have changed awareness in local government of the issues faced by mica supply chain workers. One even thinks that governments are not concerned by these issues.

> *"No, the government has nothing to do with it."*

Relevance of the CEP to contribute towards a dignified life for the children of mica communities

Community leaders almost all agree that the program has contributed to a dignified life for children in the mica supply chain, especially by bringing children back to school.

First, thanks to the program, school attendance has increased a lot, as well as the quality of the education provided.

> *"Children used to gather mica when it was a laborious task, but in the last three years, they have shown an interest in education, as well as attending school"*
>
> *"These days, kids attend school and teachers come too."*

Moreover, the program has enabled children to take part in sporting activities.

> *"There is change, now the children here are going outside for sports."*

When we asked leaders why children would be most likely to stay in school, three elements came to their mind, which echo the intentions and actions of the program.
First, the importance of making school more enjoyable by enhancing facilities and teaching environment, and arousing the interest of young people about studying.

> *"Now the children go to school, they are excited because of the play material and books they have got."*
>
> *"The kids here have received scholarships, and the school has access to potable water. As a result, more kids are enrolled in school."*
>
> *"The child's interest will have to be increased"*
>
> *"Something will have to be done to get children interested in studying. Teachers should also be a little nicer."*

Pupils drawing

Second, the leaders focus on raising parent's and children's awareness of the importance of school and its assets.

> *"Kids who flee from school should know about the importance of education and there has to be a purpose behind their interest."*

> *"The value of education and schools in the community should be explained to kids and their parents."*

Finally, one leader emphasised the importance of acting jointly on several dimensions of families' schooling choices, which corresponds to the CEP's holistic perspective.

> *"For as long as people lack education, they will continue to select Mica. For this reason, it is necessary to set up a job opportunity for the guardians."*

Sustainability of program activities

With regard to income diversification, although the leaders were able to see the effects of the program on their community, they believe that training and material support are essential to help people diversify their income even further, and to broaden the beneficiary base.

> *« It would be nice to get some training »*

> *« They should receive training and supplies, such as a sewing machine, for this. »*

> *« Business opportunities may be given. Or some training must be given. But first of all, we need money too »*

Villagers benefiting advanced training on agriculture and livestock

Village leaders are optimistic about maintaining activities after the end of the program. However, they do not all agree concerning the difficulty to keep these activities in place after the end. Indeed, for some community leaders, because people are now aware of the challenges, it will last without too much effort.

> *"Why will it not remain? it will stay well in its place."*

> *"Whatever has changed will remain, because everyone has become aware."*

> *"If someone learns something valuable, retains it, then we will all remember it and carry on with the excellent work."*

Awareness-raising is indeed essential if activities are to be sustained over time. However, other community leaders would rather stress out that maintaining these activities will require a certain commitment from the community:

> *"It won't be easy, but whatever changes have taken place, they will remain."*

> *"Yes, we have to keep the activities continuing."*

This is why many agree on the importance of extending this program and continuing it.

> *"Continue to help us, there is still work to be done."*

> *"This program shouldn't be discontinued, in my opinion. Continue to communicate with us."*

Sustainability of the impacts

When we asked community leaders about the factors that make healthy lifestyle changes sustainable over time, a number of different factors were mentioned.
Among those factors, the need for villagers to be warned came up several times. First of all, testimonies show that people lack knowledge about health.

> *"People have to be aware about health."*

> *"There should be weekly doctor checkups, people should be aware."*

> *"Everyone will have to stay safe; people will have to be aware about their health."*

According to community leaders, CEP have contributed to this through the setting up of various camps.

> *"Health camps are organized from time to time and vaccination is also done. They are making people aware like this."*

> *"They raise awareness during the sessions. Additionally, in the unfortunate circumstance somebody is hurt, the organization also transports them to the hospital."*

> *"There have been meetings, health camps, awareness campaigns"*

Residents benefiting from one of the health camps

In addition to the need to be informed, one of the community leaders mentions the need of nearby infrastructure.

> *"There is no hospital nearby. It would be great if it will be available nearby."*

One of the leaders believes that the government needs to get involved if the changes.

> *"Government will have to take some steps."*

Recommendation and best memory

Few leaders were able to offer recommendations for CEP activities.
One community leader expresses a long-term desire to extend the program for future generations.

> *"The changes should be such that the next generation also get benefits"*

Another recommendation concerns the extension of the program to benefit a larger number of employees.

> *"Not everyone has access to the facilities, though. It is also appropriate to reach out to those who haven't been reached yet."*

Finally, one chief would appreciate seeing more jobs created.

> *"If there was also some job, it would be beneficial."*

About the program, the only recommendation made by the leaders concern its extension They encourage the program to be extended to villages that have not yet benefited from it.

> *"It would be good if this program covers all villages."*

> *"Still all the villagers have not received help. The program should intervene in unreachable places"*

Concerning the best memories, the overall feeling was positive, although not everyone described a particular moment, and some only expressed satisfaction.

> *« People are made aware and it feels best. »*

> *« Whatever work has been done is all good. everyone will remember. »*

Community leaders have been marked by different moments: one of them appreciate the proximity with the population.

> *"The aspect that I remember the most is how they called every household in the area and raised awareness; that was my favourite part"*

Another was delighted to see the effectiveness of the program in the life of a child.

“The nicest part was when they helped a child get admitted to the hospital.”

One of the leaders emphasizes the informational aspect of the program.

“Now that the village's resource centre has been opened, earlier people had to ask how Aadhaar cards are made.”

Village women with cards

Another leader emphasized the program's material contribution and thanked the program for everything it has brought to his village.

“Chairs and utensils were given for the community program. Earlier, we used to eat food sitting down in any marriage ceremony […] We are very grateful to the organization, for transforming this village from hell to heaven. Whatever the organization has done to promote the livelihood of villagers, I will remember it.”

Finally, one of the leaders told us about the emotion of seeing a child given quality health care. This testimonial underlines the strength of the program's health-related aspects.

“It felt best when the village's child was admitted to the hospital.”

Teachers

Seven teachers from four districts (Jamui, Giridih, Nawada and Korderma) were interviewed in semi-directive sessions. All the children in the schools concerned are associated with Bal Manch, and a school management committee have been set up in all the schools where these teachers work.
Some of the interviewees are teachers, others are headteachers, so their role in the school varies. Indeed, some speak of their role in teaching, while others mention administrative and supervisory missions.

Effectiveness of the program

When we asked teachers what the program had done for their school, most of them talked about the goods they had received. More specifically, three teachers told us about the books and games provided for children:

> *"There were books donated to the library and toys for children. TLM kit was provided."*

> *"There were plenty of toys for the kids to play with. Notebook and book to read provided. Kids use the asset for play and go to school every day."*

In addition to games and books, several teachers reported having benefited from teaching tools such as teaching and learning material (TLM).

> *"The kid-friendly TLM & game material is available at my school. Additionally, they provided the child access to a lot of amenities."*

Children with books received through the program

Pupils' comfort was mentioned by one of the teachers, who recalled that his school had benefited from improved access to clean water, a point also emphasised by heads of household:

> *"Children drink clean water from a water pump and tank, given from the organization"*

Student comfort is also ensured by the tools available to teachers:

> *"Yes, the school has a lot of stuff. Like we have got TLM material, carpet, almirah etc. scholarships are also given to many children. Even though the glass of the cupboard is broken, the books are kept."*

In addition to the hardware, some teachers have also received training. This training enabled one of the teachers to get to grips with the new tools:

> *"I get training, such as training for TLM management "*

Sustainability of change

Generally speaking, teachers are rather optimistic about the sustainability of changes over time. However, they are not unequivocal about how this will happen. For some, it's clear that the changes will last.

> *"Why won't this change remain for a long time? Currently, everything is running smoothly. Even without the roots, it will still operate."*

> *"This change will definitely remain with time, why won't it?"*

For others, the future is hard to foresee, and even if they want it to continue, they are aware that things may be slightly different, or that it will require some effort:

> *"Under supervision, work is completed in a different way. And it would have been different in the absence of supervision."*

> *"Though it's hard to predict what will happen in the future, kids are starting to attend school now instead of earlier. However, the way the kids are showing up right now, it appears like they won't stop."*

Impact on teachers

Three teachers consider that the program has had an impact on the way they work. In addition to the material aspect, one of the teachers commented on student management.

> *"I have learned a lot; I have also learned about how to manage classes.*

Another feels that the quality of his lessons has improved as a result of training:

> *"Indeed, we provide superior instruction to the child."*

However, one headmaster shades the role of the program insofar as, in his opinion, several parameters come into play and their practices evolve as follows.

> *"Numerous factors have influenced this. It's not as though none of the activities had an effect. They convene at the school. We receive guidelines for doing the proper work."*

Teacher training

Impact on the children's attendance at school

According to feedback from the teachers, the impact of the program on the children has mainly been in terms of their attendance at school.
For some teachers, the increase in school attendance is partly due to the materials made available.

> *"Due to the availability of books and sports equipment, more children are coming to school, earlier there were not many children enrolled in my school. Currently there are 350 students."*

> *"Before the program, this teacher's school was attended by just 60 children, compared with over 300 today.*

> *"The presence of students in educational institutions has also increased as a result of the availability of Technology-aided Learning Materials (TLM)"*

> *"The kids attend school regularly because of the books and games that are provided to them."*

In order to make the school more attractive to young people, one of the teachers has put in place a teaching model that assigns a role to each student.

> *"There is also a Children's Parliament in the school. In which there is a Prime Minister. Everyone has different roles."*

However, one of the teachers nuances the general discourse. Some parents continue to take their children to mica picking. In such cases, the teacher's position is a delicate one, since parents don't listen to teachers:

> *"Children attend school, but often they are accompanied by their parents to Mica. We don't comment on their parents' decision to take them away. When we advise someone to go to school, they refuse to do so."*

However, this same teacher points out that the program kept the children busy when they weren't collecting mica.

> *"Children are now attending school instead of going to the forest."*

Impact on children's learning

All the teachers agree that the students have progressed since the program was set up.
Redundant elements include children's learning speed, which has increased in part thanks to the tools put in place.

> *"Children used to learn earlier also, now they are learning better with TLM. Children possess the ability to both read and write proficiently"*

Regular attendance at school enables students to learn more.

> *"Children are learning more than ever"*

"Indeed, there has been a shift in how kids learn as well. Kids' learning outcomes are getting better

This learning process has enabled students to acquire skills that the teachers emphasized in this interview.

"There is a high level of proficiency in both reading and writing in children."

"Children are attending school regularly, which improves their academic performance."

Recommendations and best memories

As far as teachers' recommendations concerning the program are concerned, most of them had nothing to complain about, which reflects their satisfaction with the program.

"What can I suggest? As it's going on, let it go well."

This person's best memory relates to the comfort of the students.

"Placing a water tank in the school seemed like the best idea; children also attend school."

Another teacher highlights the benefits of sports equipment for students:

"What is going on is much better, children are also getting physical development and learning through sports. Constructing a small ground field in front of the school could lead to further development. The individuals involved are highly competent and the program itself is excellent."

Students celebrating a sporting victory

His best memory is about school attendance thanks to the program.

"Dropout rates have become increasingly prevalent. However, since the implementation of the program, there has been a noticeable decline in dropout numbers, accompanied by a significant increase in student enrolment within the school. »

Another teacher mentions the equipment, particularly the teaching tools.

"The child's books and TLM are both excellent. The present elevated level of school participation is high due to this."

He does not have recommendation to improve mica program.

"Regarding this, I have nothing to say. The program should carry on exactly as it had."

One of the people interviewed, the president of a school, would like to benefit from more equipment.

"Whatever is going on is going very well, it will be even better for the children if they get more books."

He's very enthusiastic about the future of young people.

"I recall all of the outstanding work they perform, but what matters most is that the child's future is improving."

This school president is not the only one to make a recommendation on equipment. Indeed, one headmaster said:

"They did excellent work. As such, there is no proposal. The elder kids should receive computer education; that would be preferable"

His best memory is not of the school, but of village life in general.

"Anything done for the benefit of society is positive. There are usually chairs accessible; they are very helpful for village marriages as well as for the elections also. The advantage to the locals was substantial. I really enjoy it. This organization has done such work that no one has done till date. The transformation that has taken place is visible to all."

Finally, for one of the teachers, his best memory concerns raising awareness among families:

"Children and their parents are becoming aware, it is the best memory and best part of the program."

AWC workers

Five interviews were conducted with AWC workers, three sevika, one ranju devi and three sahayika. They are from 4 districts: Nawada, Giridih, Tisri and Jamui.

Their missions are numerous and include patient monitoring and follow-up.

> *"Recording the attendance of the children who come and arranging for them to sit before the assistant comes to clean is my responsibility."*

They also support local communities by offering them commodities.

> *"We provide supplementary nutrition,"*

> *"Getting water, cleaning, and preparing khichdi, feeding the kids and making contact with the kids."*

AWC centres also have sanitary missions.

> *"We provide […] immunisation, health check-ups, and referral services to children below 6 years of age as well as expecting and nursing mothers"*

At the same time, some centres offer educational support.

> *"Here, games serve as a means of education for kids"*

> *"(The centre) offers non-formal pre-school education to children Afterward, keep track of the register, and then teach the children alphabets and numbers."*

children following a course at a Balwadi centre

Difficulties encountered by AWC

At the start of the program, Angandwadi Centres were facing road access problems,

> *"The roads in my village are problematic, making it hard to travel anywhere"*

water issues…

> *"The centre is plagued by major water-related issues. Water needs to be carried from far away."*

> *"(My centre) is now experiencing a lot of water-related issues. To get water, one must travel a great distance."*

or infrastructure problems.

> *"The centre's main issue is that it doesn't have any structures of its own. There aren't bathrooms or a functional kitchen, which are necessities."*

> *"The building itself is not without issues. Although the centre is on its own property, it lacks a structure of its own."*

Activities of the CEP

Each AWC worker mentions the program's material contribution to the centre, most centres received furniture.

> *"This program gave broom and bucket, can't remember much more at the moment.*

> *"The organization gave me chairs, a mop, and a broom. Additionally, carpet is provided."*

The program has also improved the aesthetics of the centres to make them more welcoming to the public.

> *"All of the posters that are shown were provided by the organization"*

> *"Along with painting the workplace, carpet was provided."*

Finally, the program has provided health support to the centres, in particular by enabling them to support women's health and vaccination campaigns.

> *"Women were summoned and trained on hygiene."*

> *« The teenagers received sanitary napkins. »*

Young girls receiving sanitary protection

> *"(We) offer more varied services and more visitors to the AWC. More vaccinations are taking place than ever before, and iron tablets are also being distributed."*
>
> *"I additionally receive vaccinations as well. […] In the past, no one came to get vaccinated; now everyone comes at this time.*

Sustainability of impacts

With regard to maintaining the effects of the program in the future, not everyone agrees. 2 AWC workers are confident about the sustainability of the program.

> *"Why won't it stay. It will obviously last"*

One of them specifies that sustainability is notably due to the awareness raised among populations.

> *"Over the past three years, I have witnessed a lot of changes. Everyone is becoming more aware. Children who dropped out have begun attending school. To my understanding, these changes will persist for many years to come"*

We notice that the teachers, AWC workers and leaders are largely optimistic about the fact that the actions will last over time whatever the actions.

However, one of the AWC workers seems to consider that the situation is not complete enough for the changes to continue.

> *"The state of transition must continue. People will advance if there is change."*

Impact on the health of the local community

According to AWC workers, the impact on the health of the community is broad, different elements of responses were given. Firstly, the nutritional aspect.

> *"Nutritious food is provided, and nutrition camps have been organized. This has had a very positive impact on the health of children"*
>
> *"Camps and training have been conducted on nutrition. »*

Women and children in a nutrition camp

In addition to this, the program had a significant impact on villagers' demand for immunization.

> *"There have been more health camps and vaccinations than before. »*
>
> *« People did become highly conscious. Individuals who previously avoided vaccinations have begun to appear in significant numbers. »*

One of the workers sheds lights on the link between the cleanliness of the premises and the state of health of the population.

> *"The entire area is clearer than it was previously, and it has a directly positive impact on the health of the villagers."*

Finally, one worker highlights the effect of the program on fighting child marriages.

> *"We also prohibit child marriage. There are more changes happening than ever before."*

Recommendation & best memories

The AWC workers have not made any recommendation on the program other than to

continue to provide it, and they mainly thanked the program.

> *"The program provides a variety of things to my centre, for which I am very grateful to the program."*

> *"There is no such recommendation. The program should run smoothly as it is going on. I want to express my gratitude to you too. Thanks to you, you have made many positive changes in our villages. Keep working like this. Please visit again."*

> *"Things are going well; the program should continue further."*

As in all the interviews, the interviewees' best memories include the fact that people are aware and informed.

> *"The best is, villagers have become aware, more children have started going to school than before and there is less child marriage in the village. »*

In this testimony we find the subject of child marriage, which is seen as a key feature of the program by this worker in the Giridih district.

Vaccines were also seen as significant elements, several people mentioned them when asked about their best memories.

> *« The centre looks better than before and the children have been properly vaccinated. The facilities available to children seem to be the best. »*

> *« The work of vaccination has been the best so far. »*

Conclusions

About the effectiveness of the program: feedback from community leaders, teachers and AWC workers is good and the results of the program are highlighted by the various stakeholders. As far as the few improvements are concerned, they are aimed in particular at continuing the program or extending it.

About relevance of the program: the various actions carried out in the villages, AWCs and schools seem to meet the needs described by the various stakeholders. The main issues are schooling for children, poverty and access to water, the latest being presented as an important factor to encourage student enrolment and attendance.

About sustainability of the program: all the stakeholders are optimistic about the sustainability of the program, although there are differences of opinion about the difficulties in implementing it, especially when it comes to keeping the involvement of the local population. Community leaders are the most sceptical about the sustainability of the program's effects.

Results

Impacts

Sample description

Respondents: household heads

The 219 household heads questioned were predominantly female (Figure 12) and aged between 18 and 80 years, with an average age of 42 years for female household heads, vs a mean of 37 years for male household heads (Figure 13)[11].

Figure12. Sex distribution of household heads (N=219)

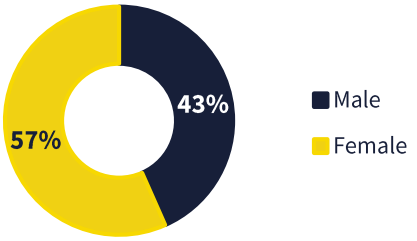
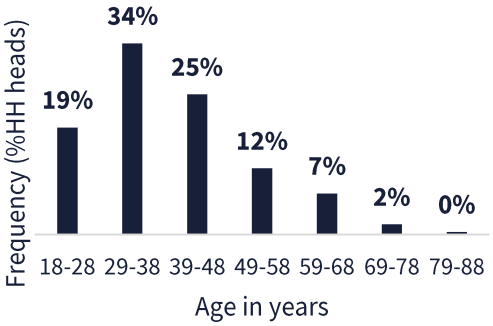


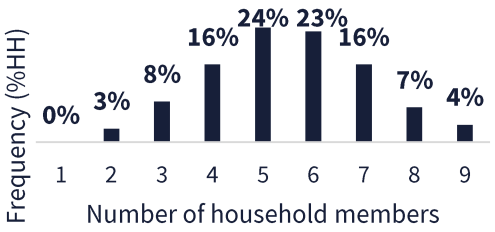
Figure13. Age distribution of household heads (N=219)



Households

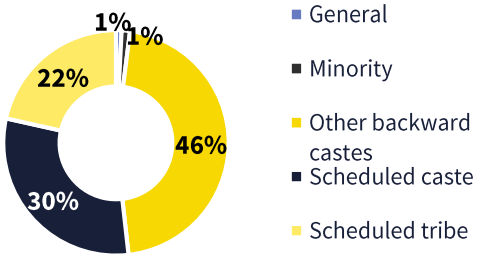
Household size varied from 1 to 9 members (Figure 14), with a mean of 5.4 persons per household, which is a rather large number and above the average 4.5 household size in rural India, but close to the average household size in Jharkhand (5.3 members), according to the NFH survey from 2019-21[iii].

Figure 14. Size distribution of households (N=250)



The largest proportion of sample households were other backward caste (46%), followed by scheduled caste (30%), scheduled tribe (22%), general (1%) and minority (1%), as shown in Figure 15.

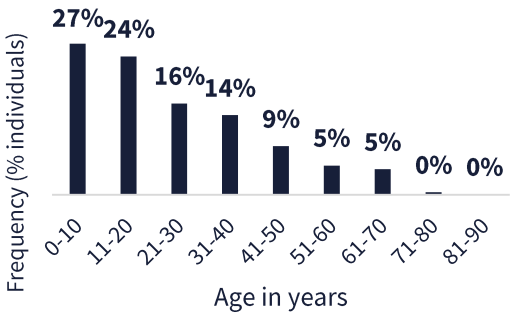
Figure 15. Caste distribution of households (N=250)



Individuals

There was a total of 1379 household members reported to be living in the 250 households, 50% of whom were female and 50% male, with a mean age of 25 years (min. = 0 years, max. = 85 years). The sample is predominantly young in age (Figure 16), which shows that the large size of households is due to a high number of children per household (more than half of the have 3 or more children).

Figure 16. Age distribution of individual HH members (N=1379)



[11] A total of 250 household heads were surveyed, but the information about age and sex was missing for 32 of them.

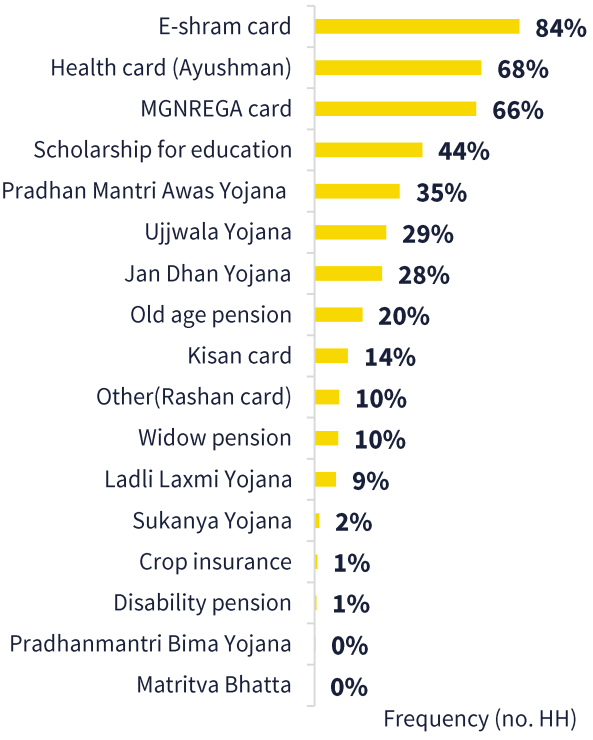
Impact: Social security

In this section, we explore how many households have made social security linkages in the past 3 years, and whether this has reduced household spending. We also analyze how many have become more involved in community activities.

1. Increased linkages to social security

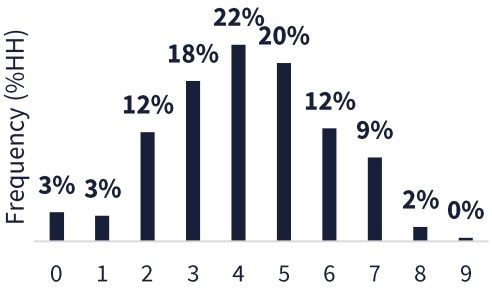
In order to assess the number of social security linkages, household heads were asked if they or anyone in their household had signed up for different forms of social security in the last three years. As displayed in Figure 17, the greatest number of households had signed up for the E-shram card (209 HH or 84%), the Ayushman card (170 HH or 68%) and the MGNREGA job card (165 HH or 66%). In the "other" category, 25 households (10%) mentioned the Rashan card.

Figure17. Proportion of households linked to various social security schemes (N=250)



97% of households signed up for at least one scheme of social security (Figure 18). 8 households had not signed up for any social security schemes in the last three years, and 7 households had only signed up for one scheme, which represent around 3% of households in both cases. Most had signed up for 4 (54 HH, or 22%), 5 (49 HH, or 20%) or 3 different schemes (44 HH, or 18%).

Figure 18. Number of different types of social security per household (N=250)



The number of new social security linkages made differed significantly by state[12], with more new social linkages per household made in Bihar (4.6 on average) than in Jharkhand (3.9 on average). There was also a significant difference by caste[13], with most new linkages made in scheduled caste households (4.6 per HH on average), followed by other backward castes households (4 per HH) and then by other Scheduled tribe (3.8 per HH).

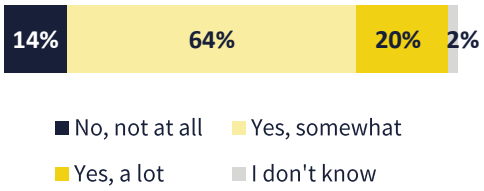
Although there was no question in the survey to link these results with CEP activities, it is worth noting that over the three years during which the program has been running on a population of about 22,000 people, activities on this matter have been carried with great diligence, and the initial objectives have been achieved:

- 20 resource centres have been set up, as planned.
- 80 entitlement scheme camps were organised, exceeding the initial target of 75, with more than 6000 people attending.
- About 9200 people were identified as eligible to entitlement schemes (in 7200 households), and almost all of them were enrolled in a scheme.

[12] Anova, significant at the 1% threshold
[13] Anova, significant at the 5% threshold

In the survey, all those households where at least one member had been linked up with a social security scheme (*N* = 243) were asked if the social security had helped reduce household spending. Although 14% did not see any effect, 64% said it had helped a bit and 20% said it had reduced spending a lot (Figure 19). The program's impact on expenditure is therefore substantial.

Figure 19. Reduced household spending as a result of social security (N=243)

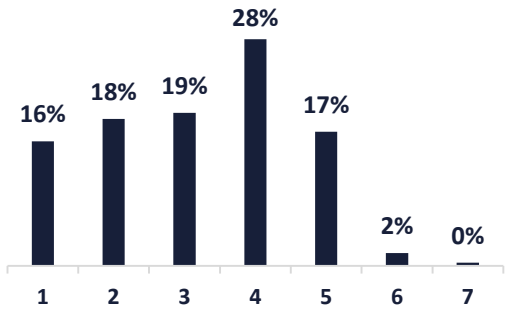


The more social security linkages had been made in the household, the more likely respondents were to state that the linkages had reduced household spending [14].

2. Increased community engagement

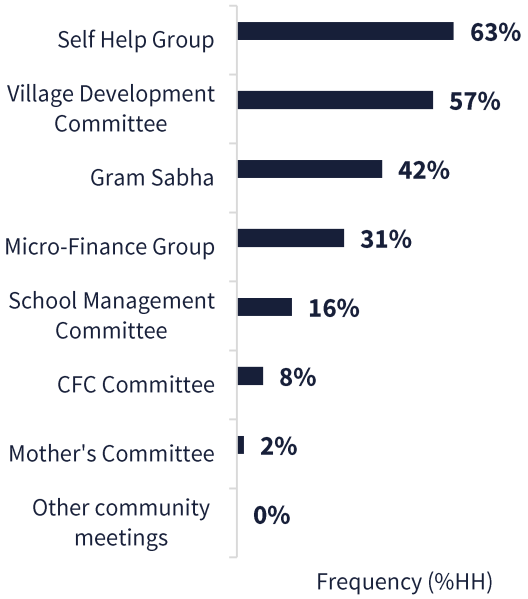
Respondents were asked if they had become more involved in various community activities over the last three years. **84% of households had become more involved with at least one kind of community activity.**

Figure 20. Number of community activities the HH has become more involved in (N=250)



As can be seen in Figure 21, almost two thirds of households had become more involved in self-help groups (158 HH or 63%) and over half in Village Development Committees (143 HH or 57%). 42% (or 106 HH) had become more involved in the Gram Sabha meetings, and a third (78 HH of 31%) in micro finance groups.

Figure 21. Activities households have become more involved in (N=212)



Conclusions

- 97% of households were linked to at least one more form of social security over the last three years.
- 84% of linked households stated that the social security they had signed up for had reduced household spending. Furthermore, the more social security linkages they had made, the more likely they were to say that it had helped them reduce spending.
- Community involvement has increased in the last 3 years, with a large proportion of households becoming more involved with the community, in particular Self-Help Group and Village Development Committee.

[14] Correlation, significant at the 5% threshold

Impact: Livelihood

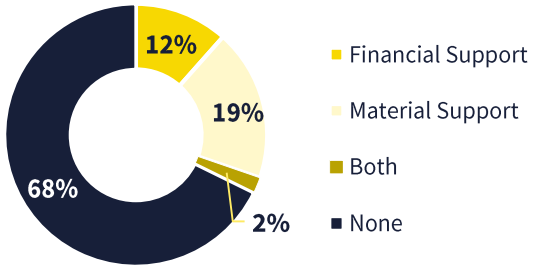
In this section we first look at assets and training received from CEP, and how they impacted households. Secondly, we analyze whether households appear to have diversified their means of livelihood, reducing their dependence on mica. Finally, we delve into the impact of the program on financial health, in terms of income, perceived financial situation and income stability.

1. Possession of tools necessary to improve/ increase livelihood

Financial & in-kind support

Household heads were asked if they, or anyone else in their household, had received financial or in-kind support from the CEP (not including in-kind support specifically for school). As displayed in Figure 22, 47 households out of 250 (19%) confirmed they had received material support only, while 29 households (12%) said they had received financial support only. 5 households (2%) reported getting both kinds of support.

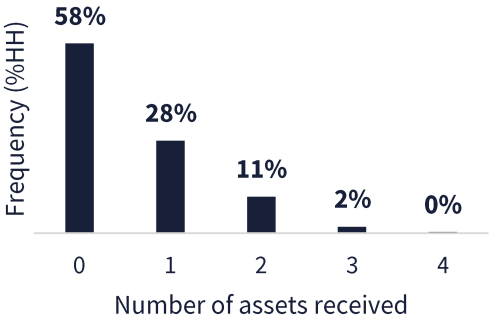
Figure 22. Receipt of CEP material & financial support for livelihood (N=250)



Assets

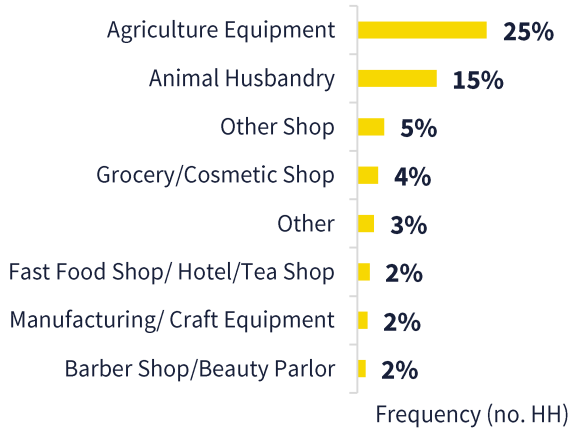
Household heads were asked if they had received asset help from CEP in the past 3 years. 146 households didn't get anything but the rest received some form of asset help[15]. Most were provided with one type (71 HH) or two different types of assets (28 HH), as can be seen in Figure 23.

Figure 25. Number of assets received (N=250)



In total, 146 different forms of asset were distributed to villagers in 105 households. As shown below in Figure 24, agricultural equipment was the resource most frequently given out. Following that, animal husbandry was most frequently distributed, followed by shops (cloth, footwear, fruits, vegetables, and others) and grocery and cosmetic shops. In the "other" category, people listed money for making butter, seeds and sanitary pads and gas stove.

Figure24. Type of assets received (N = 105)



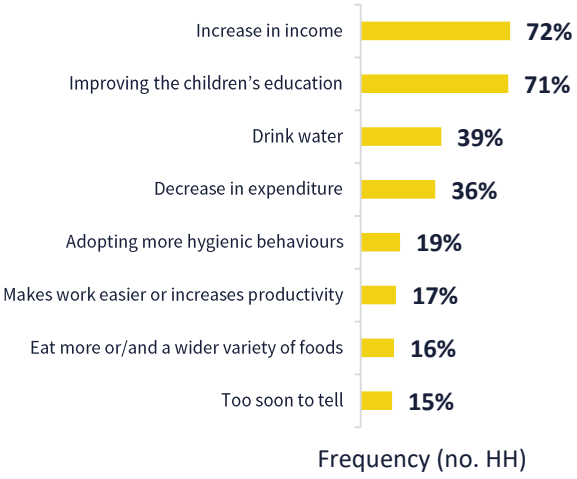
The 105 assets-recipient households were asked how these had supported their daily life. Apart from 16 respondents saying it was too soon to tell, the majority of the sub-sample noticed a financial benefit, whether it was an **increase in income** (72%) or a **decrease in expenditure** (36%). 71% respondents declared an **improvement in their**

[15] This figure contradicts the M&E data, where operating partners noted to have distributed assets to 6% of the households. It could be that when answering the endline survey, households also considered the seeds received for kitchen gardens as assets in the "agricultural equipment" category. The following analyses about the impact of assets distributed by the program rely on the endline survey answers, including the seeds for kitchen garden.

children's education, while 17% said the assets received **made work easier and increased their productivity**. Households also highlighted a positive effect of the assets on their health habits: it helped them **drink water** (39%), **adopt more hygienic behaviours** (19%) and have a **more diversified diet** (16%). No other type of impact was cited (Figure 25)

These results show **households have a positive perception of the part played by assets offered by CEP in increasing their quality of life.** They believe these assets help improve their financial situation and help them acquire healthier habits.

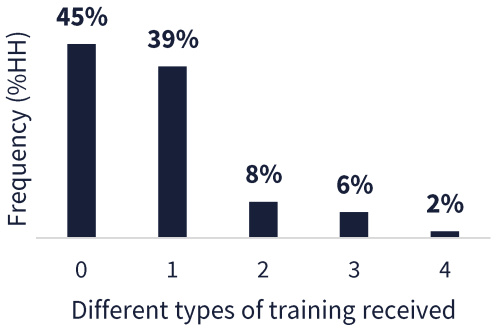
Figure 25: Impact of assets in daily life of households (N=105)



Training

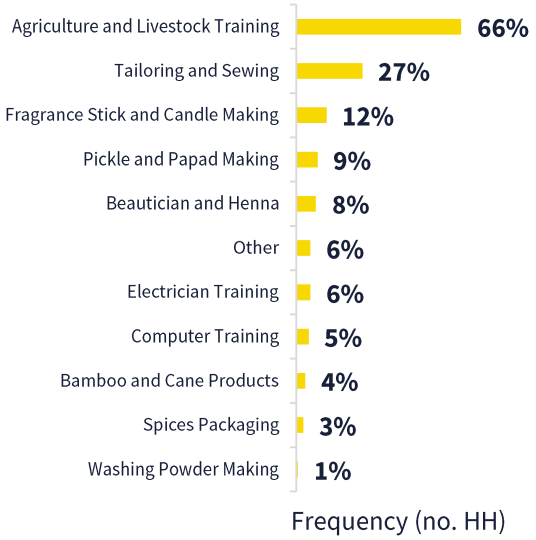
Household heads were asked if they or any member of their household had received training as part of the CEP. While 112 households (45%) said they had received no training, 99 (39%) had benefited from one form of training, and the remaining 40 households (16%) had members go through between 2 and 4 different types of training (Figure 26).

Figure 26. Receipt of CEP training (N=139)



The distribution of trainings received is shown in Figure 27. Agriculture and livestock training was by far the most frequently taken, followed by tailoring and sewing training, and fragrance and stick candle making. In the "other" category, eight households indicated they received some sort of training on financial awareness (3 HH), cake making (2 HH) and health awareness (1 HH).

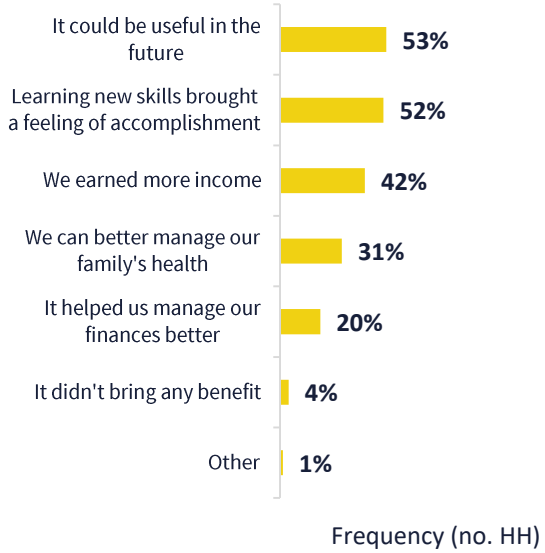
Figure 27. Types of training received (N=139)



The 139 training-recipient households also indicated how the training has benefited them (Figure 28). 74 respondents (53%) said the training could be **useful to them in the future**, while 72 (52%) declared learning a new skill **gave them a feeling of accomplishment**. The effect on yielding more income comes third (42%), which is quite less than the perceived effect of assets on income increase (see above), whilst 26 respondents (20%) estimate they can **manage their finances better**. Trainings also had beneficial effects on health, with 43 households (31%) indicating that they are now more **capable of managing their families' health**. Six

households said the trainings did not bring any benefit and two households indicated another type of benefit without specifying it.
43 respondents (31%) indicated that at least one more member of their household had become an income earner thanks to the trainings they received.

Figure 28: Impact of trainings on livelihood (N=139)

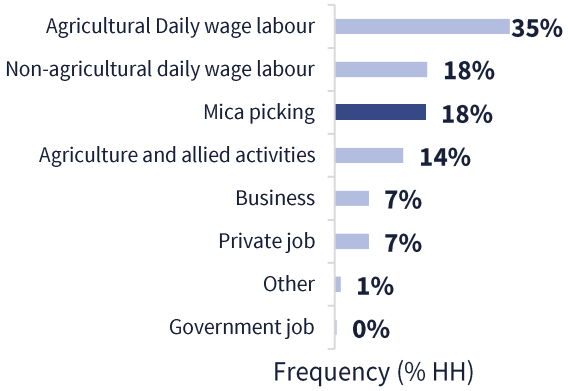


2. Livelihood diversification

Primary means of livelihood

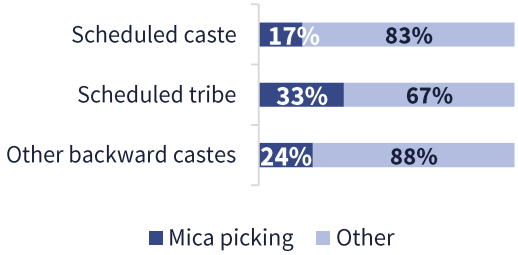
When asked about their primary source of income, households would rely primarily on daily wage labour (53%), whether agricultural or not (Figure 29). **Mica picking is indicated only by 45 households (18%) as their primary source of living**, making it the third most common primary source among the sample, but still a pretty low share of the households. In the "other" category, one person cited driver and another mentioned clothes stitching.

Figure 29. Primary means of livelihood (N=250)



In order to further explore the factors associated with mica picking, new categories were created to represent mica picking (18%) and all other jobs (82%). There was no significant relationship between mica picking and state[16]but there was with caste[17], such that mica picking was most prevalent as a primary means of livelihood among scheduled tribe households, followed by other backward castes, and ultimately scheduled caste households, as illustrated in Figure 30.

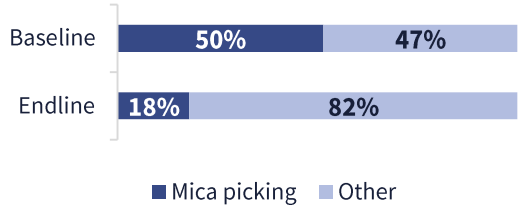
Figure 30. Mica picking by caste (N=246)



Using data from the baseline study conducted before CEP intervened, the evolution of mica picking as primary means of livelihood can be explored for each household (Figure 31). At baseline, among the same 250 households who were surveyed in the endline, 125 (50%) stated that mica picking was their primary source of livelihood, compared to 45 out of 250 (18%) at endline.

[16] Welch test, non-significant.
[17] Chi2 test, significant at the 5% threshold.

Figure 31. Mica picking from baseline to endline (N=250)



This reduction in the proportion of households engaging in mica picking as their primary means of livelihood is statistically significant[18]. **This appears like a key result, showing that the proportion of households for whom mica was the primary means of livelihood was divided by 3 over the course of the program.**

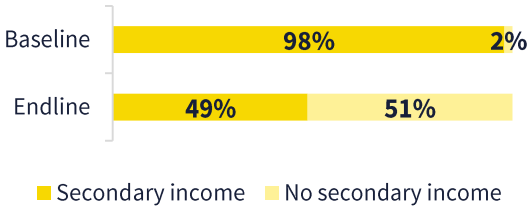
We further analysed whether receipt of training or assets impacted having mica picking as a primary source of income in our endline sample. Analysis shows that having mica picking as primary revenue is negatively associated with receiving at least one form of asset, as well as participating in at least one training offered by CEP, when controlling by the initial total income of the household (the sum of primary and secondary income at baseline)[19]. This could mean that **provision of assets and trainings had a positive effect on decreasing mica dependency, but not for the most disadvantaged households.** It could be that better-off households have access to more resources, apart from those offered by CEP, to help put into practice what they learned during trainings and to enhance the aggregated value of the assets received.

Secondary means of livelihood

115 households (46% of the sample) reported that they had a secondary means of livelihood. For 23 households (17%) this secondary means was mica picking, for 33 households (24%) it was agricultural and allied activities and for 27 households (20%) It was non-agricultural daily wage labour. Fifteen households said they have business as a secondary source of living, while six mentioned some kind of private job.

Attempting to compare the proportion of households having a secondary means of income at endline with the baseline rate led to a surprising result (Figure 32): nearly 100% of households were reported as earning a second income at baseline, which would mean half of the beneficiaries from the program had a second income before and lost it by the end of the program.

Figure 32. Evolution of households having a secondary means of income over time (N=202)



This result is difficult to interpret. In the last CEP evaluation (led in 2022 in the same regions) there was a similar effect of a steep decrease in the number of households with a secondary income; the evaluator had then concluded to a measurement error, which led to adapting the endline questionnaire in the present evaluation to better match the baseline questionnaire and avoid such error. Observing a similar result despite this correction makes it more robust and leads us to look into other interpretations.
It could be that in the absence of the CEP, many more households would have lost their secondary income, and the program helped to mitigate a negative shock that happened because of external factors (economical, political, etc.). Unfortunately, we are not able to explore this hypothesis in more detail with the data collected in this evaluation, but this topic should be investigated more thoroughly in a subsequent evaluation.

Despite this pending question, it is reassuring to see that whether they were able to keep a secondary source of income or not, households still saw an increase on average in their total income (primary + secondary) over the course of the program, even though this average increase is higher for households who kept a second income (from 4800 to 9300 INR, vs from 5000 to 7500 INR), and even though the share of households who saw a decrease in their total income is higher among those who lost their secondary income (25%, vs 18%).

[18] Chi2 test, significant at the 1% threshold.
[19] Logit regression, significant at the 1% threshold

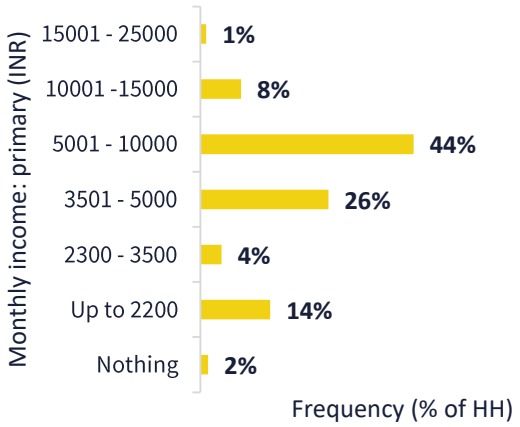
To investigate the contribution of the CEP to income diversification, we looked at whether receipt of assets or training had helped households to generate a secondary income. However, no significant relation was found between CEP activities and the chances of having a second income at the end of the program[20].
There was also no difference in the prevalence of a secondary source of income between states[21].

3. Improved financial health

Increased income from primary means of livelihood

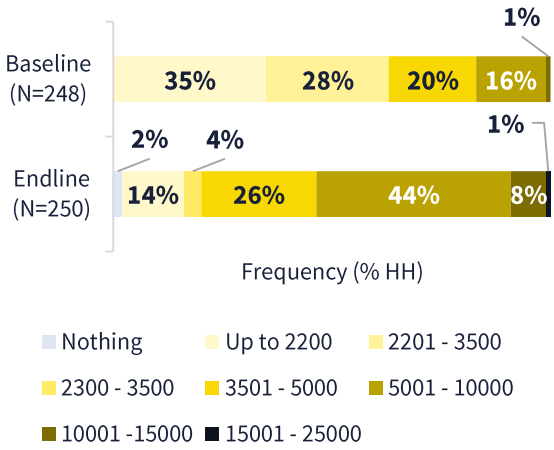
The mean income from primary means of income was 6443 INR per month, with a minimum of 0 and a maximum of 25000 INR (Figure 33)

Figure 33. Income from primary means of livelihood (N=250)



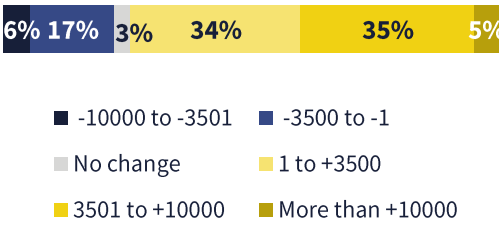
We tested whether primary monthly income differed according to state or caste, but no significant difference was found[22].
In order to assess how income had changed over time, we compared the endline data with baseline data for the 250 households in our study sample (Figure 34).

Figure 34. Primary monthly income at baseline and endline



Primary income appears to have increased greatly between baseline and endline on average[23]. At baseline, the mean income from primary means of income was 3,538 INR per month, with a minimum of 500 and a maximum of 12,000 INR. In fact, for 73% of households, primary monthly income increased at endline (Figure 35), with 40% of households seeing a rise of more than 3,500 INR. On the other hand, 23% households experienced some level of decrease in their monthly income.

Figure 35: Evolution of primary income (N=248)



In order to find evidence for the direct impact of the CEP on income, we explored the relationship between income at endline and receipt of assets and training. **Households with at least one member who had participated in a training from the CEP had a higher income at endline compared to those who did not (6845 INR vs 5943 INR on average, and the effect was also stronger depending on the number of**

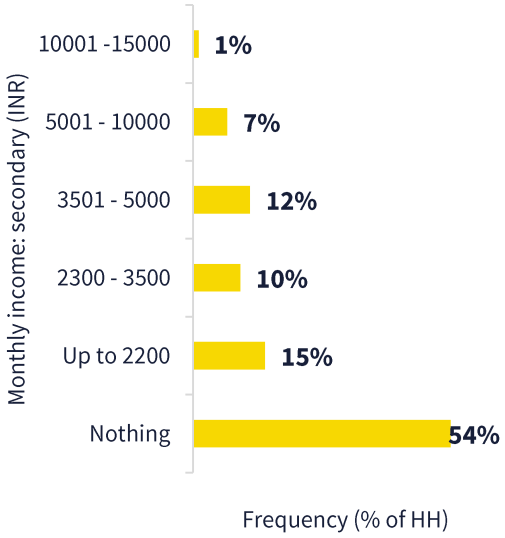
[20] Logit regressions and Khi2, non-significant at the 10% threshold
[21] Khi2, non-significant at the 10%.
[22] ANOVAs, non-significant at the 10% threshold.
[23] T-test, significant at the 1% threshold.

household members trained[24]. There was no significant relationship, however between income at endline and receipt of assets[25].

Increased income from secondary means of livelihood

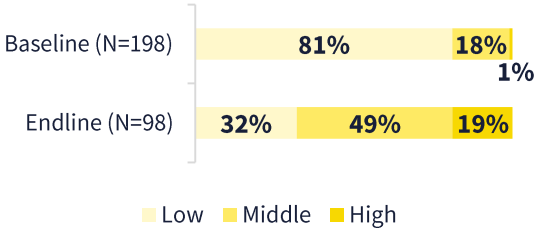
Households were asked to specify the monthly amount of their secondary income. The distribution is shown below in Figure 36 for the 115 households who mentioned having one:

Figure 36. Income from secondary means of livelihood (N=115)



In order to assess how income from secondary means of livelihood had changed over time, we compared the endline data with baseline data, for 97 households who were able to estimate their income at both times. (Figure 37). In this sub-sample, **the mean secondary income increased from 1555 to 4191 INR per month between the beginning and the end of the program**.

Figure 37. Secondary income at baseline and endline



In order to assess whether secondary income at endline was impacted by the activities of CEP, we explored the relationship between receipt of assets or training and level of income from secondary means of livelihood. However, there was no significant relationship with any of the two CEP actions[26], even when controlling by the level of total income at baseline level.

Bridging the gap with basic living income

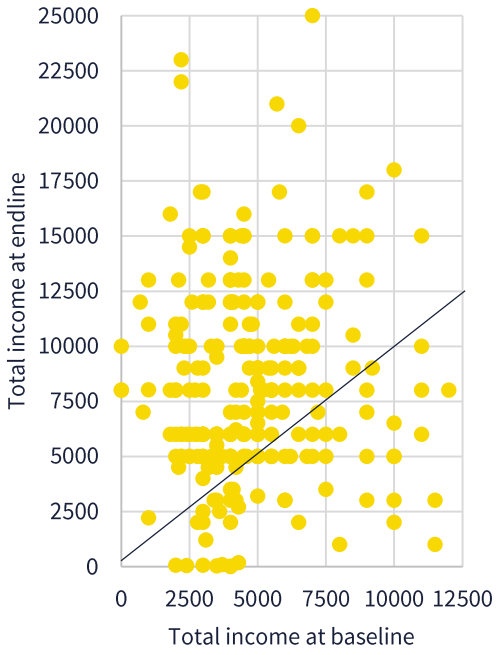
Basic living income in the considered regions was estimated by RMI to amount 15,000 INR in 2021 and 18,000 INR in 2024, taking inflation into account. A goal of the CEP being to bring households closer to earning the basic living income, we calculated a total income by adding primary and secondary ones, and analysing its evolution over time.

The mean total monthly income at baseline was of 4,833 INR, with a maximum value of 18,000 INR and a minimum of zero. Only one household was above the basic living income. At endline, mean total income reached 8,443 INR per month, with a maximum value of 50,000 and a minimum of zero, and seven households were above the basic living income.

Delving deeper into how the incomes changed over time, we noticed a higher number of households whose total monthly income increased significantly at endline. The graph below illustrates this evolution, where each yellow dot represents one of the 250 households analysed. Households above the diagonal are the ones that have increased their income, while household under the diagonal saw a decrease.

[24] ANOVA and linear regression, significant at the 5% threshold
[25] ANOVA and linear regression, non-significant at the 10% threshold.
[26] ANOVAs and multiple linear regressions, non-significant at the 10% threshold

Figure 38. Evolution of total income (primary + secondary), from baseline to endline (N=250)



This is an extremely positive result, showing how project areas are one step closer to bridging the gap between revenue levels and basic living income. However, there is still a long way to go, since the initial income levels for these households was very low.

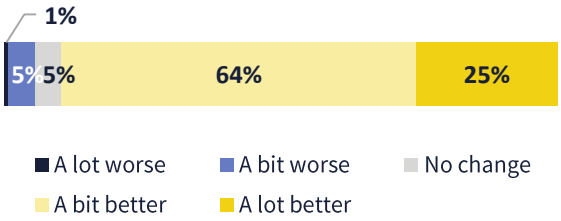
Income stability

Household heads were asked if their income remained stable throughout the year. Only 6 households out of 250 (2%) reported that their income was stable. 159 households (63%) said their income changed depending on the weather and 86 (34%) said it varied based on how much work was available. The very low proportion of households saying their income is stable throughout the year highlights the precarious financial situation in which they find themselves. It also emphasizes the relevance of the CEP action on income diversification, in order to smooth out earnings around the year.

Subjective financial situation

When households were asked about their financial situation now compared to three years ago, almost all household heads responded positively, with 161 households (64%) saying it had improved a bit and 64 households (25%) saying it had improved a lot (Figure 39).

Figure 39. Perceived improvement to financial situation (N=250)



Respondents were asked to elaborate on this topic. Households who perceived a deterioration of their financial situation put the blame on the **health issues** (6 HH), a **lack of work** (5 HH) or **inflation rising** (4 HH). Some households also mentioned causes such as not getting paid or having to repay a loan.

On the other hand, the majority of households who appreciated a progress in their financial situation linked it with **being able to make savings** (196 HH, or 87%). This could be related to attendance of **classes on financial literacy proposed by the CEP program**. In the three years of the program, 45 financial literacy sessions were organized, totalling 1745 participants. Unfortunately, as the questionnaire does not include a question on participation in these activities, we cannot delve deeper into this hypothesis.

Nearly half of the households also mentioned **cutting expenses on food** (99 HH, or 44%) as a reason for their better financial situation. Further analysis shows **a positive relation between households having grown a kitchen garden and perceiving a better financial situation due to spending cuts on foods**[27], which points towards another direct positive impact of the CEP program (this is not a clear cause-effect link, but still an encouraging hint).

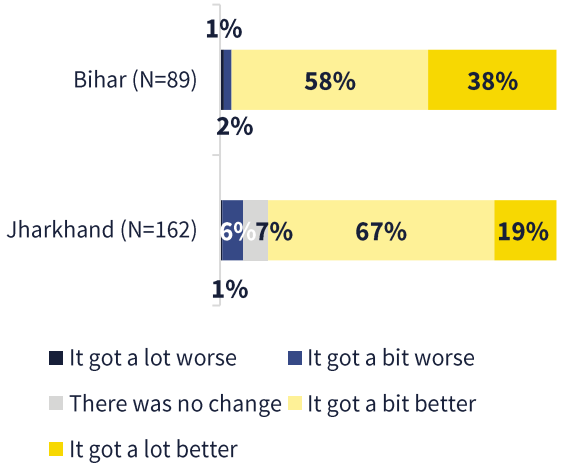
Other reasons cited were having **more work available** (92 HH, or 41%) or **reducing their dependency on lenders** (78 HH, or 35%). Getting

[27] Chi2, significant at the 5% threshold.

help from the CEP, either by receipt of an asset or participation in a training, was mentioned by 32% of respondents (73 HH), while fifty-six households (25%) cited the fact of having a family member moving to another city for work.

Perceived financial situation differs by state, with households in Bihar being generally more optimistic than in Jharkhand[28].

Figure 40. Perceived improvement to financial situation by state

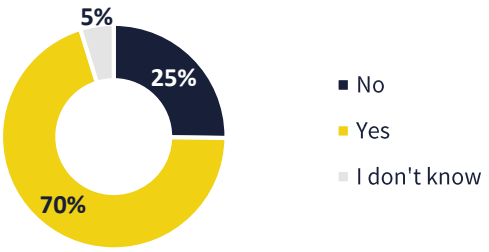


Higher level of total income and higher increase of total income over time is not associated with feeling an improvement in financial situation, even when controlling with the baseline level of total income[29]. We thus gave a closer look at elements that could make someone feel more comfortable about their financial situation: a better potential resilience to a financial shock thanks to owning assets given by the CEP or by having a second means of income. Statistical analysis shows **a weak relation between a better perception of their financial situation and having received at least one asset, as well with having received at least one training in the household from the CEP**[30], but there was no relation with having a secondary income[31].

6. Sustainability of impacts

Respondents were asked if they or other members of their family had tried to improve the way they earn money, or find other ways of earning money, in the last three years. More than two thirds (175 HH or 70%) said they had made changes, as shown in Figure 41).

Figure 41. Households who made changes to diversify their livelihood in the last 3 years (N=250)



The 63 households who hadn't made any change were asked why. The most cited reason was a **lack of resources** (46 HH, or 73%), **lack of education** or skills, (38 HH, or 60%) and **insufficient knowledge about other options** (26 HH, or 41%). Seven households also mentioned **health issues** or death of a family member (11%), or **not wanting make a change** (4 HH, or 6%).
Those who stated they had made changes were asked if they would keep up the changes in the following year. All households responded positively.

This suggests that, even though it may be difficult to make changes initially, once they have been made the villagers see the value in changing and intend to stick with it.

[28] ANOVA, significant at the 1% threshold.
[29] Linear regression, non-significant at the 10% threshold.
[30] ANOVAs, significant at the 10% threshold.
[31] ANOVA, non-significant at the 10% threshold.

Conclusions

- 30% of households received financial or in-kind support from the program. 42% say they were granted one or more assets (probably including seeds for kitchen gardens, which is not considered an asset by the operating partners), and among them 80% found it beneficial. Finally, 55% of households had one or more members go through a training, which 94% of them said was useful.

- 18% of households depended on mica picking as a primary source of income at endline, compared to 53% before the program.

- Households who were initially in a better financial situation profited more from the trainings and assets offered by the CEP than other households when it comes to reducing dependency on mica picking.

- 36% of households who benefited from a training declared the training had helped a household member get a paid job.

- On average, households have better primary income levels at endline, and this income was also higher among households who participated in at least one training.

- Households have better total income levels on average at endline (8,400 INR) compared to baseline (4,800 INR), which signals a very positive effect of CEP in helping program areas move towards better basic income levels (15,000 INR in 2021 vs 18,000 INR in 2024).

- According to households' opinion, their income increase was primarily due to being able to spend cuts on food expenditure and to make savings.

- 70% of households have made changes to improve their income, and all of them intend to continue after the program.

Impact: Health

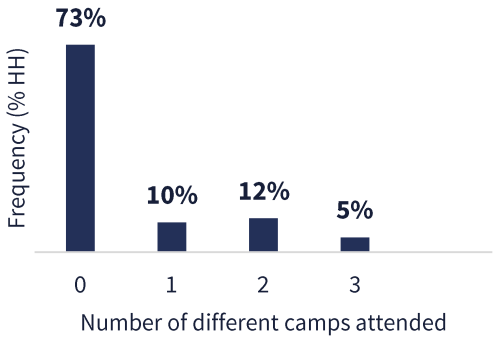
In this section we analyze the impact of the program on preventive health and curative health behaviors. We then investigate whether the program has had positive impacts on physical health.

1. Participation in CEP health-related camps

The CEP has set up different village-level activities to tackle different health issues: health camps, vaccination camps, nutrition camps, and Village Health, Sanitation & Nutrition Days (VHSND). VHSND in particular provided vaccine services, routine check-ups and post-natal check-ups for women.

Household heads were asked if they had accessed these four types of camps during the last 6 months. As shown in Figure 42, there are some disparities among households about the number of different camps attended: a very large majority have not attended any of these camps (73%) in the last 6 months, while 5% (13 HH) of households have attended 3 camps.

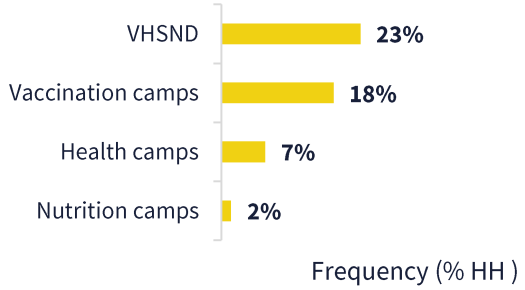
Figure 42. Number of different camps attended in the last 6 months (N=250)



The number of different camps attended was significantly higher in Bihar (0.66) than in Jharkhand (0.4)[32]. With regards to the participation in different camps by caste, other backward castes members participated in significantly fewer camps than other households. Conversely, members of scheduled castes participated in significantly more camps than other households.[33]

Village Health, Sanitation & Nutrition Days had the highest rate of attendance, 23% of respondents having participated in them in the last 6 months. 18% of the households attended a vaccination camp. Nutrition camps and health camps exhibit a very low visitor rate[34] (Figure 43).

Figure 43. Visitor rate by type of camp in the last 6 months (N=125)



2. Increased healthy lifestyle practices

Preventive health behaviors

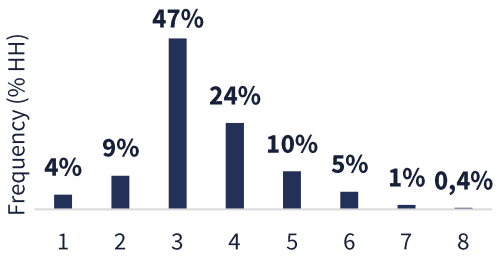
We asked household heads what health changes they or members of their household had made over the last three years, and results were quite positive**. Each household had at least adopted one preventive health behaviour**. Out of the 251 responding households, only 10 answered that they had made only one change. Almost half of respondents reported that they had made changes in 3 specified domains (47%), and 17% of the sample had allegedly adopted 5 or more preventive health behaviors (Figure 44).

[32] T-test, significant at the 5% threshold

[33] Welch test, OBC vs others & SC vs others significant at the 5% threshold; ST vs others no significant at the 10% threshold

[34] which makes it highly complicated to further analyse the link between attending these camps and expected health impacts for households.

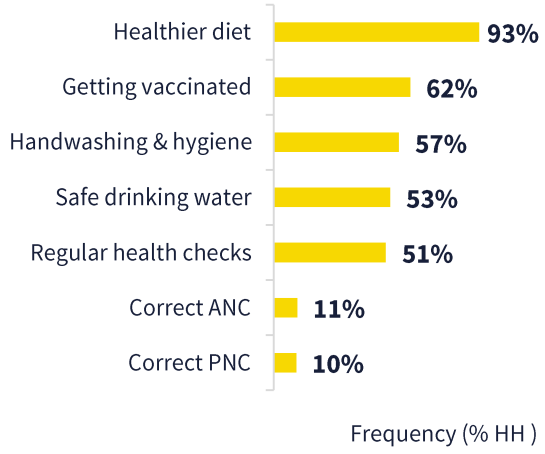
Figure 44. Number of different health behaviour changes made by households (N=250)



As can be seen in the Figure 45 below, eating a healthier diet is the change most households have adopted (93% of HH). The vast majority were also vaccinated (62% of HH). Over half of households reported adopting handwashing, drinking safe water ad getting regular health checks.

Accessing the correct antenatal and postnatal care (ANC and PNC) was also mentioned by around 10% of the sample, but this lower proportion is understandable given these behaviors were only applicable to a smaller subset of the sample with pregnant or breastfeeding household members.

Figure 45. Percentage of households who made changes in the last 3 years to each health behaviour (N=847)



In order to assess whether changes to preventive health behaviors were due to the actions of CEP, we examined the link between these and CEP activities put in place (health camps, nutrition camps, vaccination camps, VHSND camps, modelled Anganwadi centres with improved services).

We first found that **adopting more preventive health practices is associated with attending a higher number of different camps**[35]. We then went into the detail of the different behaviors and camps.

Participation in the health camp is not significantly linked to the fact of getting regular health checks[36]. **Health checks were more prevalent among households attending VHSND** (75%) than among households not attending (42%)[37].
There was no statistical link between health camp participation and drinking water from safe sources, but **health camp participants are significantly more likely to adopt handwashing than non-participants** (100% of the 18 participants, vs 53% of non-participants)[38].

Moreover, **getting vaccinated is positively associated with participation in vaccination camps** (80% vs 58%) **or in VHSND** (91% vs 53%)[39].

We then looked at the activities potentially influencing access to correct ANC and PNC. People who attend VHSND camps also benefit more (23%) from a correct ante-natal care than those who don't[40](7%), but there is no such difference with post-natal care[41] .

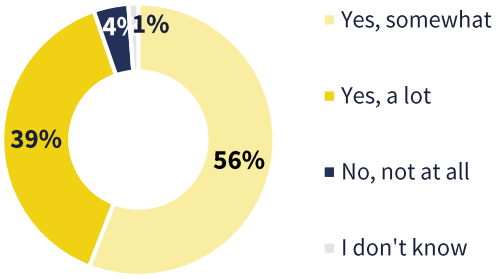
The other key feature of the program to increase access to ANC and PNC was to model Anganwadi Centres with improved services. There was enough variation across villages in the implementation of this action, making it possible to assess how different "doses" of AWC modelling affected the degree of impact on ANC and PNC access. Each village was coded as either having

[35] Pearson correlation, significant at the 5% threshold
[36] Khi2, no significant at the 10% threshold
[37] Khi2, significant at the 5% threshold
[38] Khi2, significant at the 1% threshold
[39] Khi2, significant at the 5% threshold
[40] Khi2, significant at the 1% threshold
[41] Khi2, no significant at the 10% threshold

had ANC services improved due to the actions of CEP or not[iv]. We were interested in whether a change in AWC service quality led to households seeking more ANC and PNC services. However, analysis don't show any link between living in a village with AWC modelled by the CEP and getting access to ANC or PNC[42].

We looked at factors which could have played a role in improving households' diets. Households who participated in a nutrition camp were asked directly if they felt this had helped them improve their feeding practices, and 95% answered positively ("Yes, somewhat" or "Yes, a lot", in Figure 46).

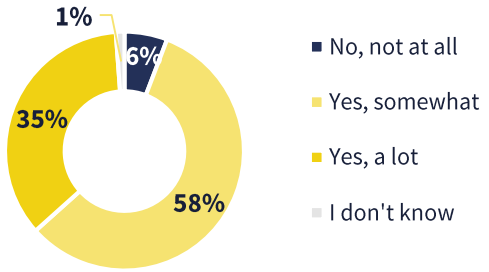
Figure 46. Households who felt the nutrition camp helped them improve their feeding practices (N=170)



A last CEP food-related action that we explored was helping households to grow kitchen gardens. Out of the 251 surveyed household, 201 (82%) grew a kitchen garden in the last 3 years. **This action being so widespread, along with the adoption of better diet by an almost unanimous 93% of our sample are impressive results**. But ironically, they make it impossible to formally assess a link between both via statistical analysis.

Households who participated in a nutrition camp were also asked if they felt it had helped them improve their child care practices, and 93% answered positively (Figure 47).

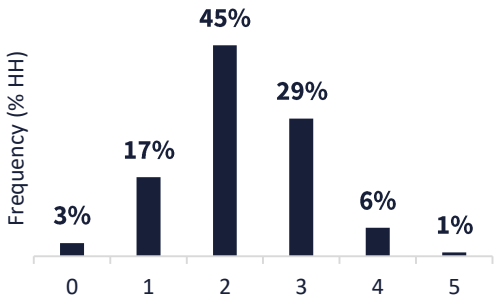
Figure 47. Households who felt the nutrition camp helped them improve their child care practices (N=172)



Curative Health

Households were asked if they would know where to access healthcare if a household member were to fall ill tomorrow. Out of 251 household heads, 247 responded positively. They were then asked which types of curative health services they had accessed in the last semester. Note that Figure 48 below does not display the number of medical consultations *per se*.

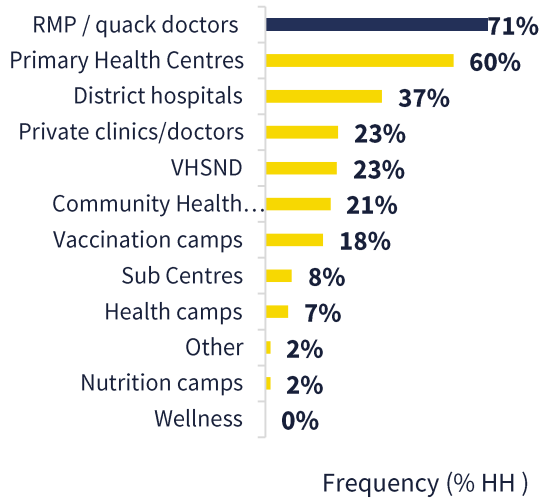
Figure 48. Number of different healthcare services used in last 6 months (N=250)



They gave the detail of what type of healthcare they had accessed in the last 6 months (Figure 49).

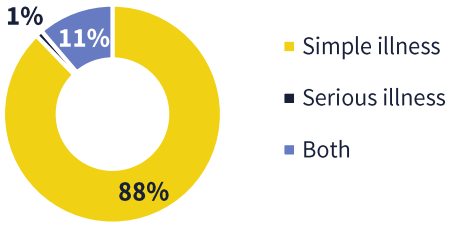
[42] Khi2, no significant at the 10% threshold

Figure 49. Access to different healthcare services in last 6 months (N=680)



We were particularly interested in households accessing quack doctors or rural medical practitioners (RMP), as these are unregistered, unqualified medical practitioners who do not follow any scientific method of diagnosis; low access in comparison to other services is therefore desirable, at least for serious health issues. In fact, quack doctors were cited the most, more than health centres or district clinics. However, other primary health centres are also quite mentioned (60%), revealing that those who cite quack doctors also visit more official health services. Considering this, households were asked for what type of health problems they consulted quack doctors. 88% said it was only for "simple health problems (little cough or fever)", whereas 12% consulted them also for "serious health problems". Consequently, households are more likely to consult quack doctors for simple health issues (Figure 50).

Figure 50. Motives of households for consulting a RMP / Quack doctor? (N=177)



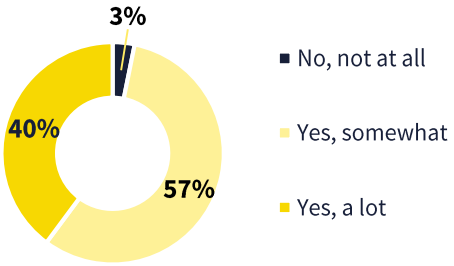
Use of quack doctor services in the last six months differs significantly by state[43] (81% of Bihar residents vs 65% of Jharkhand households), but not by caste[44].

In order to directly link curative health behaviours with CEP activities, we looked at whether accessing quack doctors was lower in villages with a modelled AWC - if good basic healthcare is available in the AWC then villagers could rather seek this service than a quack doctor. But the analysis did not confirm this hypothesis: there is no significant linkage[45].

3. Improved physical health

Household heads were asked if they thought their families enjoyed a better health than three years before and, as shown in Figure 51, a vast majority (97%) answered positively.

Figure 51. Households who state their families enjoyed better health than 3 years ago (N=250)

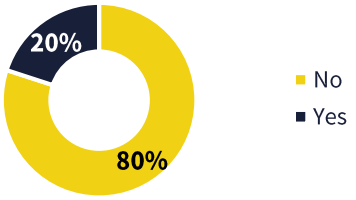


Perception of better health was higher among households who attended more types of health-related camps[46], and this effect was partially mediated by the adoption of more preventive health practices[47].

[43] Khi2, significant at the 5% threshold
[44] Khi2, no significant at the 10% threshold
[45] Khi2, no significant at the 10% threshold
[46] Spearman correlation, significant at the 5% threshold
[47] Sobel mediation, partially verified

We asked household heads to report on health problems of each household members over the last 30 days that meant they couldn't go to work (adults) or school (children), weren't eating or sleeping properly (infants) or were otherwise unable to go about their usual daily routine. Household heads reported that 107 out of 1313 individuals (8%) in the sample had experienced such a health problem in the last 30 days.

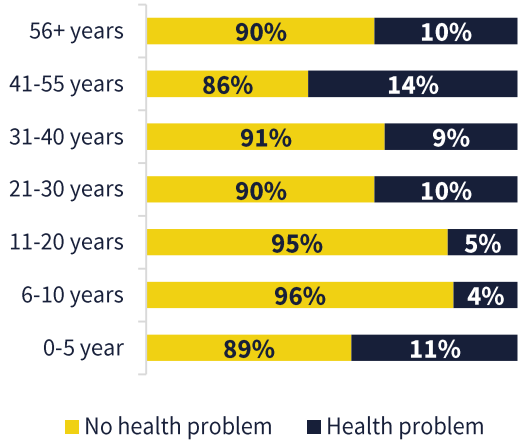
Figure 52. Incidence of disrupting health problem in the household, in last 30 days (N=250)



When asked about the detail of the health problems suffered by these household members, respondents talked about fever (42%), malaria (9%) and stomach pain (6%). Fever could last from one day to one month. Other less frequently cited symptoms were knee pain, blood pressure or loss of appetite.

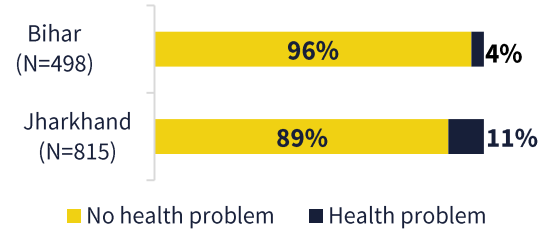
Incidence of health problems is not linked to gender[48], but it differs regarding age[49]. Figure 53 highlights that people aged 5 to 20 are the least likely to be ill (less than 5% reported health concerns) while people aged between 41 and 55 who are most likely to be ill (14%).

Figure 53. Incidence of health problems by age (N=1313)



There was no significant relation between the prevalence of health problems and caste of the household[50], but there was a difference by state[51] (Figure 54), such that there was less reporting of health problems in Bihar (4%) compared to Jharkhand (11%).

Figure 54. Incidence of health problems by state (N=1313)



Recall that households who had attended CEP health-related camps were more likely to report having made changes to a number of behaviours: getting regular health checks, getting vaccinated, handwashing and accessing the correct ANC. We assessed whether any of these health behaviours was associated with lower rates of household health problems. Indeed, **living in a household with access to safe drinking water, adoption of handwashing and access to correct ANC and PNC were significantly associated with lower incidence of health problems**[52]. Participating in

[48] Khi2, no significant at the 10% threshold
[49] Khi2, significant at the 5% threshold
[50] Khi2, no significant at the 10% threshold
[51] Khi2, significant at the 1% threshold
[52] Khi2, significant at the 1% threshold

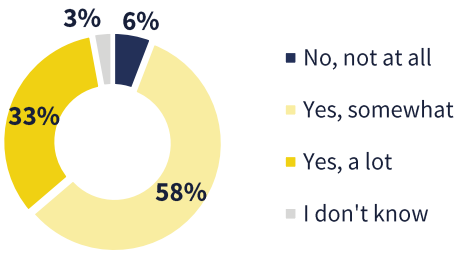
VHSND or in vaccination camps was also associated with less health problems[53].

However, a higher number of preventive health practices adopted was associated with a higher incidence of health problems[54]. This peculiar result could come from a selection effect: households who adopted more preventive practices would also be those who were less advanced in this matter (catching-up effect) and had more health issues to start with. We could not investigate this hypothesis any further.

Despite this global association between lower health problems and the adoption certain health practices, the direct relationship between incidence of health problems and CEP health-related camps is ambiguous: households who report more health problems in the last 30 days are also households who have attended more types of CEP health-related camps[55]. On the other hand, people in households who attended VHSND or vaccine camps report less health problems[56]. Being so, we cannot bring evidence to the relationships emphasised in the ToC from CEP health-promotion activities to less health problems reported through the adoption of preventive health practices.

Finally, another important outcome for the CEP was to restore undernourished children to normal grade. In order to get an idea of how the CEP may have contributed to this, households who participated in nutrition camps were asked if they felt this activity had helped them improve their children's nutrition grade, and almost all of them (91%) answered positively (Figure 55).

Figure 55. Households who felt the nutrition camp helped them improve their children's nutrition grade (N=171)



4. Sustainability of impact

At the question "Will you continue with these changes in the next year?", 99% of household have responded "Yes", 1% left have responded "I don't know", no one have responded "no".

[53] Khi2, significant at the 5% threshold
[54] Logit regression, significant at the 5% threshold
[55] Logit regression, significant at the 5% threshold
[56] Khi2, significant at the 1% threshold

Conclusions

- 27% of households participated in one or more health-related camps in the six months preceding the endline survey.
- 100% of households reported making changes to at least one health behaviour over the last three years, and more health behaviour changes were associated with more participation in CEP camps in the last six months, especially for regular health checks. For instance, health checks were more prevalent among households attending VHSND.
- Perception of better health was higher among households who attended more types of health-related camps, and this effect was partially mediated by the adoption of more preventive health practices.
- 94% of households who attended nutrition camps over the three years of the program consider that the camps enabled them to improve their child care practices.
- When health problems occurred, nearly three quarters of all households were likely to visit a quack doctor, but for 88% of them it was specifically when it comes to simple health problems.
- Virtually all households who made healthy lifestyle changes intend to keep it this way.

Impact: Education

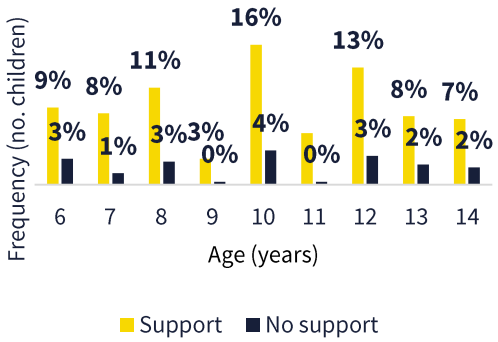
In this section we explore the impact of the program on perceptions of the school, on enrolment and attendance, and on literacy and numeracy.

1. Provision of material support and educational activities to children

In-kind support for school

There were 361 individual children aged between 6 and 14 years of age in 193 of the sampled households. Among them, 308 were enrolled in school when the survey took place. As displayed in Figure 56, of these 308 children, **250 (81%) received material support for school.** They were on average 10 years old, and 44% were female.

Figure 56. CEP in-kind school support, by age of the children (N=308)



Balwadi Centres

The program has put in place Balwadi Centres where pre-schooling facilities are not available, in 16 villages. The objectives were as follows:

- that young children acquire basic skills with numbers and letters;
- to be able to more easily direct children to the primary school in their neighbourhood from the age of 6;
- to prevent children from being present in mica mines (safety issue);
- to ensure that children are not familiar with collecting mica, and have less risk of starting to collect it when they "are old enough" to do so (around 5/6 years old);
- to give them better chances of schooling.

9 household heads (56% of HH with at least one child aged 3 to 7 in the 16 villages[57]) indicated that one or more children in the household had attended a Balwadi Centre in the three years of the program.

The lower the education level of the household head, the more likely they were to have children attending Balwadi[58]. This means **Balwadi Centres have efficiently targeted most vulnerable households**.

Bal Manch

The CEP has promoted Bal Manch, groups for play-based learning activities and artistic activities open to all children in a same village, aiming at increase their aspiration to education and learning.

130 household heads (67% of HH with school-age children) indicated that one or more children in the household attended a Bal Manch – this number could reach 246 children, representing 36%-68% of all children aged 6-14 in the sample.

Community libraries and school libraries

The CEP was able to put in place community libraries in 25 villages out of 50, as well as school libraries in all 41 supported schools. The goal was to have children engage more with books and reading materials and, in the end, improve their reading and writing skills.

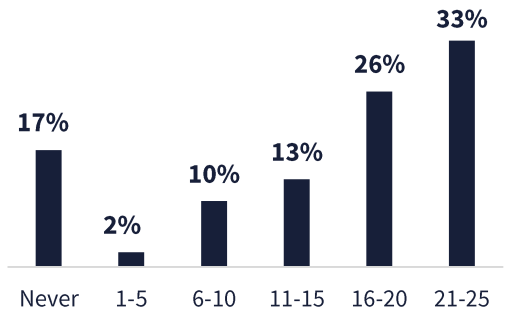
When asked how many times, on average, did their children visit the community library each month, households with children enrolled in CEP schools gave rather polarised answers: 17% did not see

[57] In reality, in the study sample there were 37 eligible children in these 16 villages, in 24 households. However, only 16 households out of the 24 were asked the questions about Balwadi centres. 9 households out of 16 (56%) had had at least one child attending Balwadi. However, more households from other villages were able to benefit from Balwadi centres, which is why the following impact analyses about Balwadi take into account the answers of up to 38 household heads instead of 16.

[58] Logit regression, significant at the 5% threshold

any visit of their children to the library, but 83% reported at least one visit per month, often with high frequencies (18 visits per month on average, which is more than once every two days).

Figure 57. Parents' perception of the monthly attendance to the community library by their children (N=94)



2. More positive perceptions of school and education

To assess changes to perceptions of the school, we examined survey responses from both parents and children. A child survey asked a few questions about their school perceptions alongside the literacy and numeracy tests.

Perceptions of changes to the school: Children's perspective

First, we analysed the children's responses. There were 152 children aged 6-14 in this sub-sample, 58 of whom (38%) were female, with a mean age of 10.2 years.

When asked if they had noticed any changes in their school over the last 3 years, a vast majority (134 children or 88%) answered they had indeed (Figure 58). Among them, the majority (95%) liked their school more because of it, while only 5 said they liked it less (Figure 59).

Figure 58. Children's perceptions of changes to their school in last 3 years (N=152)

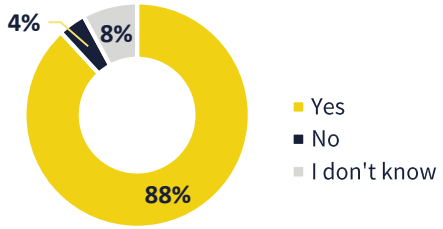
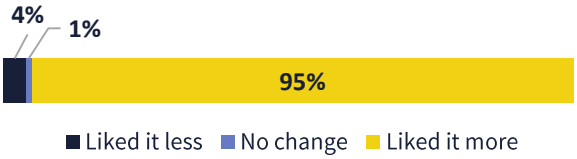


Figure 59. Valence of children's perceptions of school changes (N=134)

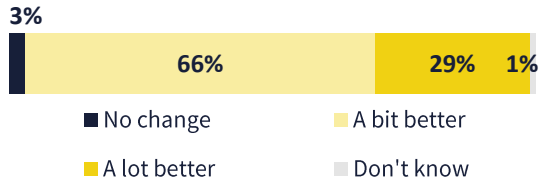


Those children who reported their school had changed for the better (*N* = 129) were asked what they liked most about their school. 77% cited **studying** as the thing they liked most about their school. A few **explicitly linked their interest in studying to their teachers or the benefits for their education**: *"Teachers behave well with us"*, and: *"Good for education"*. 19% also cited **playing sports** as their favourite thing. A few of them spoke about the **accommodation and hygiene** ("*School is very clean*"; "*Toilets are very good*").

Perceptions of changes to the school: Parents' perspective

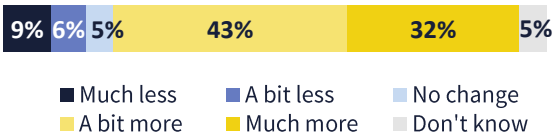
Among the 186 households with children enrolled in school, 95 (51%) had children enrolled in a school where CEP had intervened. They were asked their opinion on how the schools changed over the course of the CEP. The vast majority (96%) responded positively, stating that the school was a bit better or a lot better than before the program started, whereas none said it had changed negatively (Figure 60).

Figure 606. Parent perceptions of how school changed in last 3 years (N=95)



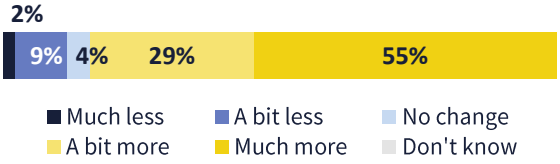
When asked if their children seemed to enjoy going to school more since the CEP made changes, 59 households (75%) responded positively, stating that their children enjoyed going a bit more or a lot more (Figure 61). On the other hand, 12 respondents (15%) said their children enjoyed going to school less.

Figure 61. Parent perceptions of children's increased enjoyment of school in last 3 years (N=79)



When asked if their children seemed more interested in their schoolwork, 80 households (84%) responded positively, stating that their children were a bit more or a lot more interested in their schoolwork, while only 11 (11%) answered negatively (Figure 62).

Figure 62. Parent perceptions of children's increased interest in schoolwork in last 3 years (N=95)

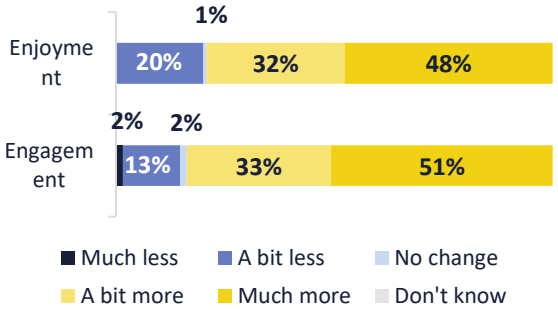


Households perceived positive changes to the school were significantly related to perceived increased enjoyment of school and perceived increased interest in schoolwork[59].

In order to assess whether changes to perceptions of the school were due to the actions of CEP, we need to examine data pertaining to CEP activities put in place in the 41 targeted schools. The CEP was highly successful in deploying most of the activities in all 41 schools (school library, SMC put in place and capacity-building offered, TLM and sports materials provided, print-rich environment, safe learning environment). However, without any or enough variation between the schools, we cannot assess how different "doses" of these activities affect the degree of impact.

The same two questions about enjoyment and interest regarding school were also asked when at least one child in the household attended Bal Manch, a village-level activity. Questions were stressing out if there was change in enjoyment or interest *due to* participation in Bal Manch. Households were 80% to point out a positive effect of Bal Manch activities on children enjoying school more, and 84% saw a positive effect of Bal Manch on children's interest in schoolwork (Figure 63).

Figure 63. Parent perceptions of children's increased school enjoyment and engagement in last 3 years, due to Bal Manch (N=130)



We were not able to compare the change in engagement and enjoyment between Bal Manch children with another group of children not benefitting from these actions, which makes it difficult to rigorously estimate how much of the change observed by parents in their children was effectively due to them. Despite this, **a large majority of parents have perceived positive changes in their children that they link with Bal Manch attendance, which is an encouraging result about the impact of CEP on school perceptions**.

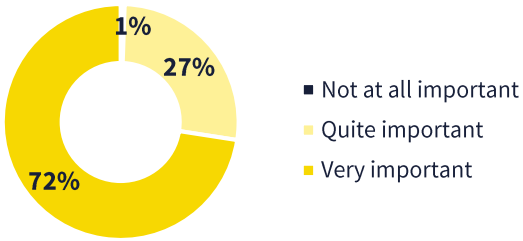
Perceptions of the importance of education

Among the 186 households with children enrolled in school, 185 answered positively on the importance of their children receiving a school

[59] Pearson correlations, significant at the 1% threshold

education. The last respondent stated that it wasn't important at all to them (Figure 64).

Figure 64. Parent perceptions of the importance of their children receiving a school education (N=186)



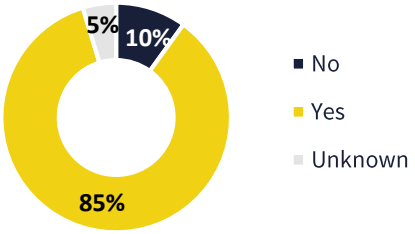
Parents were then asked the reasons why they thought school education was important (Figure 65). The most selected reasons were "So that my children can become smarter and gain knowledge" (92% of respondents) and "So that my children can gain autonomy" (83%), way ahead of the idea that education is an investment for future economic gains ("Finding a better job" and "Earning more money" were only selected by about half of the respondents).

3. Increased school enrolment and attendance

School enrolment

As part of the household questionnaire, household heads were asked to report the enrolment status of each of the children aged 6 to 14 in their household. In this sub-sample, 308 out of 361 children (85%) were enrolled in school (Figure 66).

Figure 66. Percentage of children aged 6-14 years enrolled in school (N=361)

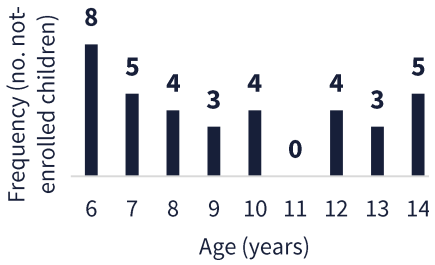


The 36 children not enrolled in school (18 girls and 18 boys) had a mean age of 9 years (Figure 67).

Enrolment rates did not differ by caste[60], but it did differ by state, with more children enrolled in Jharkhand than in Bihar[61].

Unfortunately, we couldn't explore the evolution of enrolment over the course of the program since comparable enrolment data were not available at baseline. However, consulting data at a national level (ASER report 2022[v]), enrolment rates appear to be of 98.4% for India overall. As such, **the enrolment rate of children within program reach is 10 to 15 points below the Indian average**.

Figure 67. Age distribution of out-of-school children (N=36)



With Balwadi Centres, a focus was put on encouraging enrolment rates for children turning six. **36 out of 38 households (95%) said they did enrol their child in elementary school following Balwadi, a great result for this activity**.

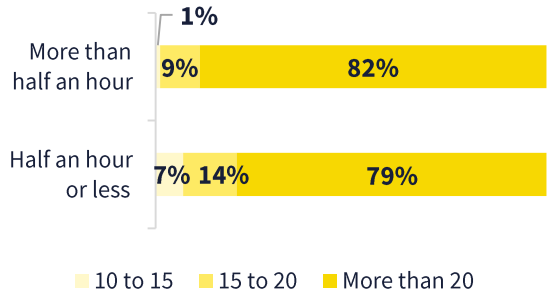
[60] Chi2 test, unsignificant at the 10% threshold
[61] Chi2 test, significant at the 5% threshold

School attendance

Household heads were asked to report how many days per month each of their children aged 6-14 was going to school before they closed for lockdown. **Of the 308 children enrolled in school, 254 (82%) were going into school at least 20 times per month**[62], 38 (12%) were going in 15-20 times a month, and 16 (5%) were going in 10-15 times a month.
Whether a child went to school more or less than 20 times per month did not differ by sex nor by caste[63], but it did differ by state, in favour of children in Jharkhand state[64].

To explore whether attendance was affected by distance to school, children were categorised into those who could travel to their school in half an hour or less (*N* = 212), and those who had to travel longer than this to get to school (*N* = 95). Attendance did differ by distance to school with, unsurprisingly, children being more likely to attend more times per month if they need half an hour or less to travel to school[65] (Figure 68).

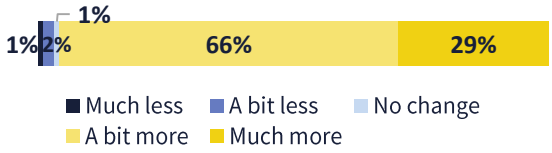
Figure 68. Monthly attendance at school (number of days) affected by time to travel from home to school (N=307)



We then explored whether attendance was affected by paid work. Household heads were asked how many hours of paid work each household member engaged in, including for children, and of all the children aged 6-14 years, 94% were not engaged in any paid work. Only 23 children were. Such low number is an encouraging result, but for this study, it did not allow to verify if attendance was associated with paid work.

Parents were also asked whether, since the program had made changes at the local school, all children in their household were staying longer in school *each day*. Of the 95 household heads with children aged 6-14 enrolled in CEP schools, 91 (95%) said their children were staying in school a bit longer or much longer each day, while only 4 respondents (5%) reported lower attendance for their children.

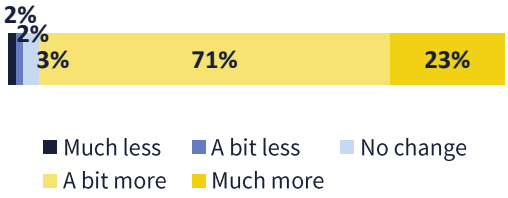
Figure 69. Increased attendance in school (hours per day; N=95)



Increased attendance at school each day was positively related to increased enjoyment and increased interest[66].

On the same note, households with at least a child participating in Bal Manch were asked if their children seemed to be staying in school longer each day *due to* Bal Manch activities (Figure 70).

Figure 70. Increased attendance in school (hours per day) due to attendance to a Bal Manch (N=130)



Again, regarding the opinions of parents on the effects of Bal Manch, increased attendance at

[62] In India, there is no mandatory minimum attendance requirement set on a monthly basis. However, the government targets a 75% attendance rate for the academic year. According to the Right to Education Act, primary schools (Classes 1 to 5) are required to have at least 200 days of schooling per year. This equates to an average of 20 to 24 school days per month. Therefore, to meet the 75% attendance target, students would need to attend approximately 18 to 20 days of school each month.
[63] Chi2 tests, unsignificant at the 10% threshold
[64] Chi2 test, significant at the 5% threshold
[65] Chi2 test, significant at the 5% threshold
[66] Pearson correlations, significant at the 1% threshold

school each day was positively related to increased enjoyment and increased interest[67].

Note that these results give tentative evidence for the relationships proposed in the Theory of Change, but direction of causality cannot be assured.

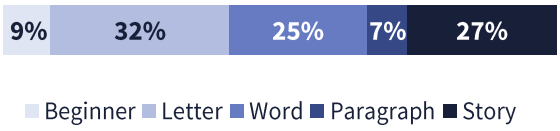
4. Improved educational outcomes for children

In order to assess literacy and numeracy levels, children of 6-14 years of age in sampled households were tested using the ASER reading and math testing tools. This allows children to be placed in one of 5 categories reflecting their level of proficiency.

Literacy

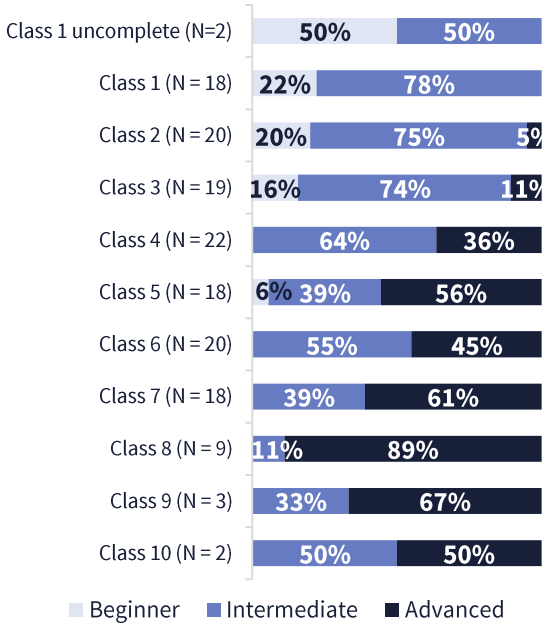
Of the 152 children tested, 13 children (9%) were categorised as beginners, which indicates that they could not recognise letters. A further 49 children (32%) were placed in the letter category, which describes children who can recognise letters but not whole words (Figure 71). Thirty-eight children (25%) could recognise single words but not a short phrase (word category). Eleven children (7%) were able to read a short paragraph (paragraph category). Finally, 41 children (27%) could read a short story (story category).

Figure 71. Literacy levels in CEP sample (N=152)



To simplify interpretation of results, in the diagrams that follow we collapsed the categories such that children who could recognise letters or words were designated intermediate and those who could read paragraphs or stories were designated advanced. The beginner category remained the same. In statistical analyses we used the 5 original categories. First, we explored the distribution of literacy levels by class. As expected, this shows reading level becoming more advanced as we move to the more advanced classes[68] (Figure 72).

Figure 72. Literacy levels by class (N=151)



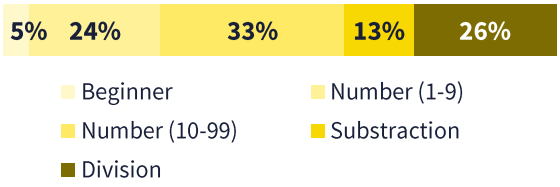
There was no significant relationship between sex and literacy level[69]. This result is valid for all children from surveyed households, since this sub-sample of 152 tested children has the same distribution by sex than the larger group of 308 children. Similarly, there was no significant link between literacy level and caste or state[70].

Numeracy

Of the 152 children tested, 7 (5%) were categorised as beginners, which indicates that they could not recognise numbers. A further 36 children (24%) were able to recognise only single-digit numbers and 50 (33%) could also recognise double-digit numbers. Nineteen children (13%) could carry out a long subtraction sum and a further 39 children (26%) could also carry out a long division sum (Figure 73).

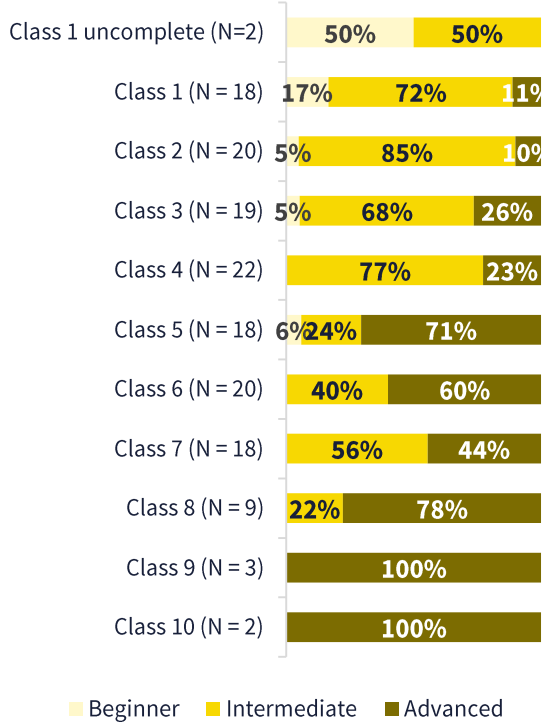
[67] Pearson correlations, significant at the 1% threshold
[68] Pearson correlations, significant at the 1% threshold
[69] ANOVA, unsignificant at the 10% threshold
[70] ANOVAs, unsignificant at the 10% threshold

Figure 73. Numeracy levels in CEP sample (N=151)



As with literacy, to simplify interpretations three categories were created, representing beginner, intermediate (able to recognise single- or double-digit numbers) and advanced (able to conduct long subtraction or long division sum). These categories were used for the diagrams below but analyses used the original 5 categories to explore the relationship between numeracy and class, sex, caste and district. Numeracy level is seen to increase through the classes[71] (Figure 74).

Figure 74. Numeracy levels by class (N=150)



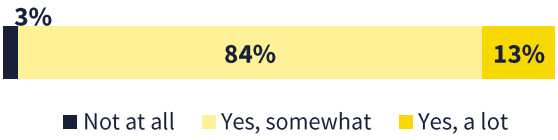
As with literacy, numeracy levels were not significantly associated with sex, caste nor state[72].

Link with CEP activities

We first explored the relation between literacy results and community libraries set up by the program. There is no statistical link between children's literacy levels and their monthly attendance rates to the community library, even when controlling by age[73]. But his could be because children with a lower attendance to the community library engage more in the school library, which we were not able to investigate.

Moreover, parents of children who benefited from Balwadi activities were asked if their child seemed to have improved their basic alphanumeric skills through the Balwadi activities, and 37 out of 38 said they did, at least a little.

Figure 75. Improvement of kids' alphanumeric skills through the Bal Wadi activities (N=38)



In order to compare the literacy and numeracy of the children in the CEP sample with another equivalent sample, we consulted the 2023 ASER report which provides their most recent literacy and numeracy test data (2022). Because all children entering Class 3 in India should be able to read a short text fluently and calculate a subtraction sum, ASER looks at the percentage of children in Class 3 who are at "story" level for literacy and at least "subtraction" level for numeracy. They tested children all over India, and the table below shows the percentages in the ASER sample for India as a whole, followed by the states of Jharkhand and Bihar. The comparative result for the CEP sample is shown in the bottom row (Table 2). Similarly, in Class 5 children should be able to read a story and calculate a division sum, so ASER looks at the percentage of children

[71] Pearson correlation, significant at the 1% threshold
[72] ANOVAs, unsignificant at the 10% threshold
[73] Linear regression, unsignificant at the 10% threshold

in Class 5 who are in the "story" and "division" categories. Finally, these same percentages are calculated at Class 8.

Table 2. Literacy & numeracy levels at Class 3, 5 and 8: ASER vs. CEP samples

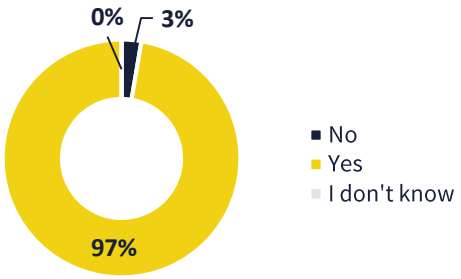
Class 3 (N = 19)		Class 5 (N = 18)		Class 8 (N = 9)	
Story	Subst.	Story	Divis.	Story	Divis.
INDIA					
21%	26%	43%	26%	70%	45%
JHARKHAND					
14%	23%	36%	25%	65%	45%
BIHAR					
20%	29%	42%	35%	71%	59%
CEP					
11%	**26%**	**56%**	**41%**	**67%**	**78%**

Over all, **children who benefited from the CEP follow a steady progress**, which is a very good result. It appears that in Class 3, they are below national and regional averages for literacy, but then in Class 5, they are way above national and regional average for reading and division sums, and in Class 8 they would be way above average for division sums. However, keep in mind that the CEP results rest on very low group numbers, which can cause percentages to vary easily. Therefore, the rates of all the CEP children's success to the ASER test may not be as spectacular than in this sub-sample, but we can infer **that the program was efficient in reducing the gap between CEP children and regional or national averages, especially in the highest grades**.

5. Sustainability of impacts

In order to assess whether educational impacts (in terms of increased school enrolment and attendance) would last in time, household heads were first asked if they had made more of an effort over the last 3 years to improve the education of their child than they usually would, and 181/186 households (97%) said they had.

Figure 76. Households who made changes to improve the education of their children (N=186)



Moreover, 100% of the parents said they would continue with their efforts over the next year.

Conclusions

- 84% of children and 85% of adults perceived positive changes to their schools in the last 3 years, and most parents perceived an improvement in their children enjoying school and engaging in schoolwork as a result of it.

- Bal Manch activities reached out children from two thirds of households and contributed to improve children's motivation regarding school, according to parents.

- Bal Wadi only reached out 56% of households with eligible children, but they efficiently targeted most vulnerable families, and appear to contribute to primary school enrolment afterwards (36 out of 38 cases).

- Parents almost all considered the education of their children to be important, mostly for developing capabilities (intelligence, autonomy), not as much with the perspective of better job and economic situation in the future.
- Enrolment in school was at 85%, which is quite high but still way below the national average (ASER report 2022) of 98.4%. It was higher in Jharkhand (92%) than in Bihar state (85%).

- 82% of children attended school 20 times per month or more (mandatory attendance in government schools being 18 to 20 days per month).

- Attendance was improved thanks to Bal Manch participation according to about 94% of parents. Higher attendance was linked with higher motivation.

General impacts

The following section explores the general impacts that are not specific to one pillar in particular. These are the impacts that form a bridge between the pillar-specific impacts and the social mission of the program. Here, we explore whether the program provided a quality education for all children, reduced child labour, increased resilience and improved life satisfaction.

1. Quality education for all children

All those parents who had children in CEP schools were asked what level of education they would like their male children and their female children to reach. At first view on Figure 77, it seems like aspirations are pretty close for boys and girls, but statistical analysis still signals higher aspirations for boys. A closer look reveals that although a majority of parents (80%) aspire to the same level of education for their sons and daughters, among those who have different aspirations according to gender, it is more often in favour of the boys (Figure 78).

Figure 77. Aspired level of education for female and male children

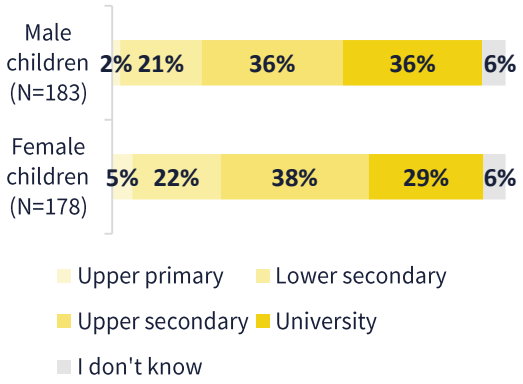
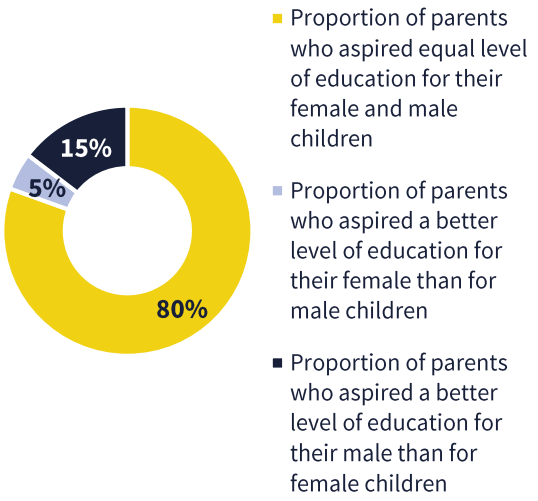


Figure 78: Parents' aspirations according to their children's gender (N=164)



Unfortunately, we do not have equivalent data to compare this to baseline levels, nor do we have data for activities that could be thought to directly influence this.

Comparing the actual level of education of household heads with that to which they aspire for their children shows two results: 1) parents' aspirations for their children is correlated to their own level of education[74], and 2) household heads want their children to have a better education than they did[75].

2. Child labour and child marriage

The International Labour Organisation (ILO) defines child labour according to the following specifications:

- Any child aged 5-11 years engaging in 1 hour of more paid work per week
- Any child aged 12-14 years engaging in 14 hours or more paid work per week
- Any child aged 15-17 years engaging in 43 hours or more paid work per week

In order to assess the amount of child labour occurring in the sample, we asked household heads to report how many hours per week each

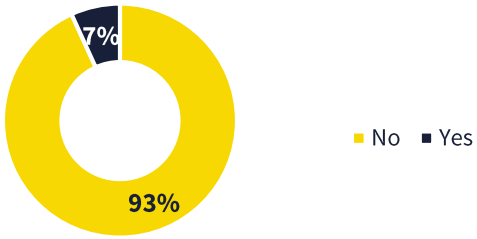
[74] Pearson correlation, significant at the 1% threshold

[75] ANOVA, significant at the 1% threshold

child engaged in paid work (along with their age and other information). **Out of the 502 children aged 5-17 years in our sample, 34 (7%) were engaging in an amount of paid work that would be defined as child labour** (Figure 79). Unfortunately, it was not possible to compare this figure with baseline data, since the baseline survey did not measure the weekly amount of paid work for each household member.

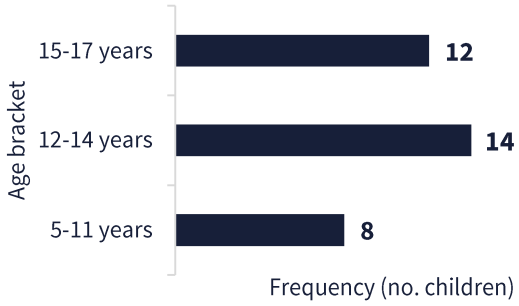
Seeing in the endline data that children were engaging in paid farming work seemed very odd to the NGO partners, who pointed out that usually, children work on farms to give a hand to their parents, which is to be considered as domestic work rather than paid work. **Without considering farm work**, out of the 502 children aged 5-17 years in our sample, **26 (5%)** were engaging in an amount of paid work that would be defined as child labour.[76]

Figure 79. Percentage of sample children engaged in child labour (N=502)



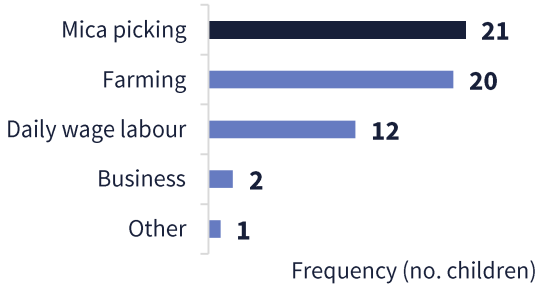
Of these 34 children, 16 (46%) were female, such that girls are not more or less likely to be working than boys[77], and the children were in the age brackets shown below in Figure 80. Children in the aged 5 to 12 are less likely to be involved in paid work than those aged 12 to 17.[78]

Figure 80. Age distribution of children engaged in child labour (N=34)



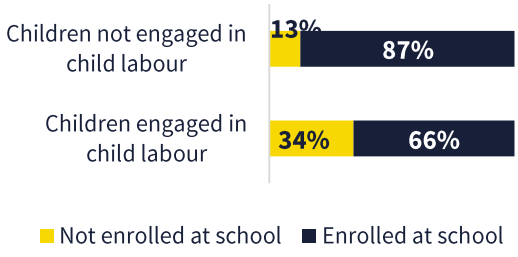
A majority of these children (19/34 or 60%) engaged in one sole type of paid work, but 15 others (40%) engaged in two or three different types of paid work. As can be seen in Figure 81, mica picking and farming are the most prevalent types of work among the children.

Figure 81. Type of work engaged in by child labourers (N=56)



34% of working children were not enrolled at school, whereas it was the case for only 13% of non-working children, so **school enrolment is negatively associated with being involved in paid work**[79].

Figure 82. Percentage of children engaged in child labour who were also enrolled at school (N=481)



[76] However, we still conducted the subsequent analyses including the children with farming work.
[77] Chi2 test, unsignificant at the 10% threshold
[78] Chi2 test, significant at the 1% threshold
[79] Chi2 test, significant at the 1% threshold

Incidence of child labour did not differ significantly by caste, but it **tended to differ by state[80] (10% of children in Bihar, vs 5% in Jharkhand)**.

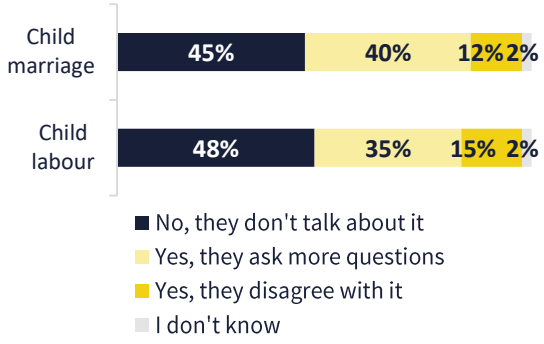
There was some clustering of child labour by household; the 34 children engaged in child labour were spread across 28 households. In six households, 2 children were engaged in child labour.

Households with at least one child engaged in child labour did not have significantly more members than those that did not[81], nor did they have a lower income from primary source of livelihood[82]. However, **families who rely primarily on mica picking are more likely to have a child involved in paid work**[83] (11% of these families have at least one child working, vs 6% for the others). This result highlights the relevance of the CEP program to bring households to diversify their sources of income, specifically to lower their reliance on mica picking.

The ILO report on global estimates of child labour for 2012-2020 (most recent data available) finds that in 2020, 4.7% of children aged 5-17 years worldwide to be engaged in child labour[vi]. The figure for the Asia and Pacific region is higher at 5.6% (which has decreased since 2016, when it was 7.4%). As such, **the percentage of children engaged in child labour in the present sample is higher than the ILO sample (7% vs 5.6%)**.

Furthermore, households with at least 1 child attending Bal Manch activities were asked if their children asked more questions or talked more about child labour at home, and the same question was asked about child marriage. **About half of the respondents answered they noticed a change in their children addressing these two topics** (Figure 83).

Figure 83. Prevalence of children who raise their voices at home about child labour and child marriage (N=122)



Interestingly, **children are more likely to raise their voice against child labour in the state of Bihar, where child labour is a little more prevalent than in the state of Jharkhand. This result reflects the importance of Bal Manch to help children to advocate for themselves**.

3. Resilience

In order to assess resilience, household heads were asked if they could deal with a series of potential unforeseen circumstances, as shown below:

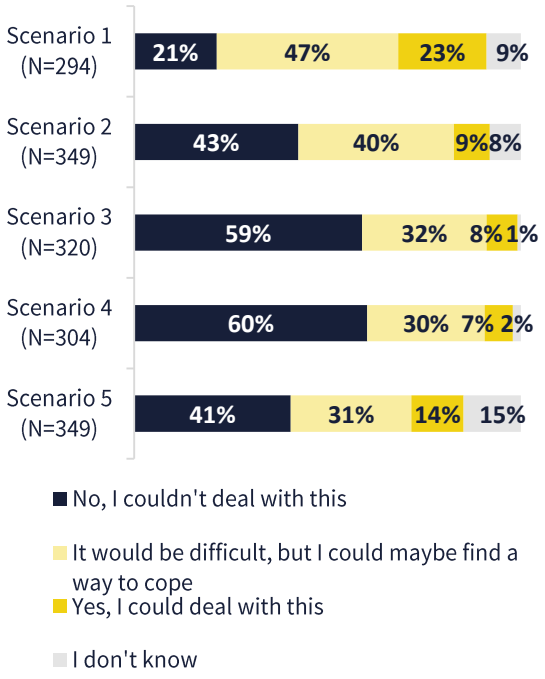
1. Arrival of a new family member who will stay with permanently and who you will need to support financially
2. Health problem of a household member necessitating a one-week stay in hospital
3. Damage to house from a storm
4. Death of livestock or failure of crop
5. One household member is no longer able to earn money

As displayed in Figure 84, **households over all don't feel confident about their resilience when facing these situations**. About 60% don't feel able to deal at all with a damage to their house because of a storm or with the death of livestock or the failure of a crop (this last point resonates with households strongly feeling their income being unstable because it relies on the weather). Furthermore, only about half of respondents feel they could cope with a household member needing hospital care and/or not being able to earn money any longer.

[80] Chi2 test, significant at the 10% threshold
[81] ANOVA, unsignificant at the 10% threshold
[82] ANOVA, unsignificant at the 10% threshold
[83] Chi2 test, significant at the 10% threshold

On the other hand, the arrival of a new family member to support financially could be confronted in some way by the greatest part of households (70%), although most often with difficulty.

Figure 84. Perceived ability to deal with unforeseen circumstances



In order to explore the factors that predicted resilience, we created a mean score for each household based on how well they thought they could deal with all 6 scenarios. Merely a third (32%) of respondents estimated on average that they would be able to cope, with or without difficulty, with 2 households saying they could deal with all the scenarios that applied to them. On the other hand, 34 households (or 14%) answered they couldn't confront at all any of the scenarios that applied to them.

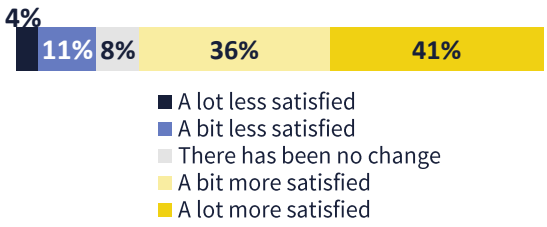
In the Theory of Change, an important predictor of resilience is financial health. Therefore, we tested whether income from primary means of livelihood and/or improvement in subjective financial situation predicted resilience scores. Households with a greater income from primary sources of livelihood felt more able to cope with the presented scenarios[84], while perceived change in financial situation was not associated with mean resilience[85]. In order to link this more directly with CEP activities, we looked at the CEP activity found to have an effect on primary income: trainings to other income-generating activities. In fact, **the more trainings households had received, the more confident they felt to deal with unpredicted issues[86], and this effect was partially mediated by a higher income from primary means of livelihood[87]**.

We also tested whether resilience was predicted by physical health, but the analysis showed no link with the incidence of health problems nor with the perception of one's family's health[88]. Similarly, resilience showed no relation with the number of linkages to social schemes in the household, nor with greater involvement from the household in community activities[89].

4. Quality of life

Respondents were informed that the CEP program had been running for 3 years and were asked how satisfied they were with their life now compared with 3 years ago. The majority (193 HH or 77%) responded positively (Figure 85).

Figure 85. Change in life satisfaction in the last 3 years (N=250)

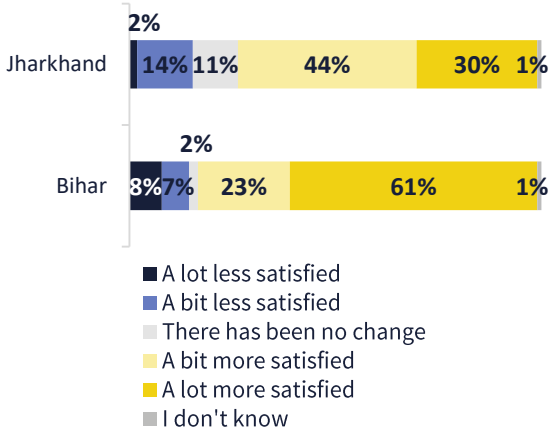


Life satisfaction increase did not differ by caste[90], but it did differ significantly by state[91], with Bihar households reporting more improvement in life

[84] Pearson correlation, significant at the 5% threshold
[85] Person correlation, not-significant at the 10% threshold
[86] Pearson correlation, significant at the 5% threshold
[87] Mediation analysis
[88] ANOVAs, unsignificant at the 10% threshold
[89] Pearson correlations, unsignificant at the 10% threshold
[90] ANOVA, unsignificant at the 10% threshold
[91] ANOVA, significant at the 5% threshold

satisfaction compared to Jharkhand households, especially in the district of Giridih (Figure 86).

Figure 86. Change in life satisfaction by district (N=250)



The Theory of Change proposes that various different impacts from the CEP program feed into quality of life: improved physical health, improved financial health, increased resilience, increased community cohesion. We explored whether these impacts predicted increased life satisfaction in the sample.

Improved physical health

Lower incidence of health problems in the household in the last month did predict increases in life satisfaction[92]. Life satisfaction was also significantly higher when a respondent perceived their household health had improved over the last 3 years[93]. We could even relate it to CEP health activities, since **higher life satisfaction was determined by the number of different camps attended[94], a relationship partially mediated by an increase in subjective health[95]**.

Improved financial health

Income from primary means of livelihood was not associated with increased life satisfaction, nor was the evolution of primary or total income from baseline to endline[96], but perceived change in financial situation was – **the more households saw their financial situation improve, the more satisfied they were about their lives[97]**.

In order to link this more directly with the program, we looked at the CEP activities found to have an effect on subjective financial situation: distribution of assets and trainings. However, the analysis showed no clear link between these activities and the level of life satisfaction[98].

Increased resilience

Surprisingly, more resilient households (those who felt better able to deal with unforeseen circumstances) did not report more significant gains in life satisfaction.

On the other hand, **households were more likely to be more satisfied about their lives compared to three years before when they were linked to more social schemes[99]**, a relation **partially mediated by respondents' perceptions of their financial situation[100]**.

Increased community cohesion

Recall that to assess community involvement, we asked household heads whether they or any other member of their household had become more involved in the last 3 years in a number of community events and meetings. **Those households who reported engaging in more types of community activity reported more gains in life satisfaction[101]**.

[92] Welch test, significant at the 1% threshold
[93] Welch test, significant at the 1% threshold
[94] Pearson correlation, significant at the 1% threshold
[95] Mediation analysis
[96] Pearson correlations, unsignificant at the 10% threshold
[97] Pearson correlation, significant at the 1% threshold
[98] ANOVAs and Pearson correlations, unsignificant at the 10% threshold
[99] Pearson correlation, significant at the 1% threshold
[100] Mediation analysis
[101] Pearson correlation, significant at the 1% threshold

Conclusions

- 5 to 7% of sample children were engaging in an amount of paid work that would be defined as child labour by ILO standards (vs 5.6% in the Asia and Pacific region), with a higher prevalence in Bihar than in Jharkhand (which echoes a similar difference in enrolment and attendance rates between both states). However, parents of Bal Manch children also report that more of them protest against child labour in Bihar than in Jharkhand.

- Households are not quite optimistic about their resilience, when considering how to cope with a varied set of scenarios, which echoes the feeling of instability regarding their income. This pessimistic view is mitigated by the CEP: households who received (more) trainings have a higher primary income, which makes them feel more resilient.

The life satisfaction measure was chosen to represent the concept of a dignified life, which is at the core of the social mission of the CEP. Thus, it is the most indirect impact hypothesised in the Theory of Change. In other words, this impact is at the very end of the social value chain of all of the activities of the CEP, which makes the relationships with these activities very thin and hard to detect. The fact that we were able to directly link the actions of different pillars of the CEP to life satisfaction, sometimes partially, highlights the power of the activities put in place by the CEP and the relevance of these activities to the broader goals of the program.

Several pillars of the CEP played a role in enhancing life satisfaction:

- Households who participated in more different types of CEP camps (health, vaccination, nutrition, VHSND) were more likely to assess an improvement in their health, and this led to higher life satisfaction.

- Households were more likely to be more satisfied about their lives when they were linked to more social schemes, a relation partially mediated by respondents' perceptions of their financial situation. Linking potential beneficiaries should thus remain an important action of the program.

- Households more involved in community activities felt more satisfied about their lives. Encouraging such involvement should thus remain an important action of the program

Recommendations

Strategic recommendations

Guarantee access to drinking water in schools and give children the means to work on computers

Teachers are grateful and satisfied with the program, which does not prevent them from pointing out a few areas for improvement to meet the needs of the schools. One of the teachers in particular suggests to give students access to a computer.

Several of the people interviewed agreed that children having access to clean water at school helps them to stay in school. It therefore seems essential to keep this action in the program's education pillar.

Developing the establishment of community libraries

Community libraries seem very popular among children, at least according to parents' perceptions, so we would advise to keep implementing this activity in future editions of the program, even if the present evaluation was not able to produce evidence on a link between community library attendance and educational outcomes.

Preparing community leaders for the post-program period

Among the three stakeholders interviewed, some people pointed out the difficulty of sustaining the program over time, particularly the community leaders, who were the most sceptical. The various training courses could prepare the different communities for the time when the program will no longer be in place.

Enabling more people to benefit from the program

When stakeholders were asked about recommendations for the program, one point emerges very often. The respondents would like the program to be extended to more villages and for everyone to be able to enjoy the same benefits. Therefore, it seems that there is more room in the targeted regions for subsequent editions of the CEP.

Guaranteeing AWCs better access to water and better infrastructure

Several AWC workers mentioned that they had difficulties accessing water and that their infrastructure was inadequate, but the program did not seem to meet these needs. According to the testimonies, the program's main actions focused on material support. Access to water and the adaptation of infrastructure could therefore be prioritised when supporting AWCs, in the same way that improving sanitary facilities and access to clean water in schools is beneficial to increase attendance. Admittedly, this would mean allocating even more budget to modelling AWCs, despite budget already being a bit overspent this time for this activity.

Promote income stability and investigate the profile of households that have not reduced their expenditure

63% of households say that their income depends a lot on weather conditions. If the program does not yet allow households to improve their resilience to weather episodes, it could be interesting to consider this element, especially since with global warming these episodes are likely to intensify or be more frequent.

When household were asked if the social security had helped reduce household spending 80% had a positive answer but almost 15% consider that they have not been able to reduce their expenditure. It would be interesting to know who these 15% are, and what their sources of income are, so that the program can help a greater majority of households to reduce their spending.

Promoting even more Balwadi centres in the villages where the CEP set them up

Balwadi activities appear to target efficiently most vulnerable families and to be greatly successful in their goal to improve enrolment in primary school when children come of age. The attendance of Balwadi activities is encouraging, but could be increased: 56% of the households with eligible

children in the 16 villages were Balwadi took place enrolled their children in Balwadi. Another 16 households from other villages[102] had their children benefit from the Balwadi activities. Hence, promotion of Balwadi activities could be reinforced at least in the villages where the CEP put them in place, to increase attendance even more.

Explaining the link between education and economic gains to parents

Parents are adamant on the importance of a school education for their children, which reflects the efforts of the program on raising awareness on this matter. A vast majority of them think primarily of the benefits of such education in terms of personal development and capabilities (becoming smarter and gaining autonomy), but only half of them make a connection between school education and economic gains in the future (through better job opportunities). Maybe it is that this is the reality of the local job markets, where higher education doesn't bring better opportunities. However, it also resonates strongly with the observation of one of the village leaders interviewed: "*For as long as people lack education, they will continue to select Mica. For this reason, it is necessary to set up a job opportunity for the guardians*". We therefore advise that in future awareness campaigns about the importance of school education, more emphasis be put on how school education can be seen as an investment for higher economic gains in the future. This could be a good argument to help fight child labour. Keeping the program's support to vocational training for youths could also go in this direction of showing the link between education and job opportunities.

Considering the differences between regions to achieve similar results across regions

School enrolment is quite different in Bihar (85%) and in Jharkhand (92%), and a similar difference is observed for monthly school attendance. This is reflected in the prevalence of child labour, amounting to 10% among Bihar children, vs 5% in Jharkhand. Therefore, in the pursuit of long-term impacts regarding child labour, a stronger support could be given in Bihar.

Informing children about their rights and the issue of child labour

One of the expected impacts of Bal Manch is to increase children's ability to advocate for their rights and question child labour and child marriage. Only half of the parents of Bal Manch children observe that their children raise more questions or oppose these problems more. It is already a good result, but it could be even better, maybe by intensifying Bal Manch activities about these problems.

Raising awareness of quack doctors' methods

71% of households had consulted an RMP/quack doctor in the 6 months prior to responding to the questionnaire, particularly for simple illness problems. Although this is a cultural practice, these practitioners are not qualified and do not use scientific methods. Thus, if this has not yet been done at the health camps, it might be appropriate to raise households' awareness of this and encourage them to turn to other structures, and if the program is already raising awareness, it is essential to continue and strengthen this awareness.

Methodological recommendations

Transmitting more accurate M&E and financial information

Overall, the M&E and financial data sent to Improve was very well structured, and very clear (a tremendous improvement compared to previous CEP evaluations). However, a few measurement errors in the data still complicated the analysis and interpretation. These errors were due to 1) initial targets being revised on the ground, but not

[102] Khijuri, Palmo, Bhurai, Khatpok, Ranadih, Dalpatdih, Gosain Mahri, Sirsia, Kodaibank, Chanako, Jarga, Bangadag, Beechli Tola, Baara

in the file, and 2) measurement units indicated in months (meaning in reality "X months of support to Y children/centres"), which made the initial targets appear as much higher than actually set, and with mediocre endline performance. Therefore, it would be great to check again the initial targets and the measurement units with the NGO partners one last time before sending the data to the evaluator.

Documenting meetings and decisions in greater detail in order to report the advocacy work carried out

Advocacy KPIs were too difficult to measure because of the high number of informal meetings, resulting in poor performance numbers. Another way of documenting the meetings and the decisions taken then should be thought of, since RMI members signalled great interest in understanding how and how much the advocacy actions can bring systemic changes. In this evaluation, a question could be added in the interview guide to village leaders about advocacy activities.

Clarifying the question about the role of stakeholders

In the interviews, stakeholders were unable to answer the question about the evolution of their role. This question is misunderstood or does not correspond to the feelings of the stakeholders, who mainly see changes in their environment but not in their role. So, this question could be clarified by questioning a particular practice.

Modifying the baseline questionnaire to obtain comparable data between baseline and endline on key expected impacts of the program

The rates of school enrolment, school attendance and child labour appear to be of primary interest for RMI members. If possible, it would be great to include a measure of these indicators in the baseline survey in order to compare baseline and endline rates.

- For school enrolment, the question is actually asked at baseline, but the data file only indicates if "at least one child" is not enrolled, not the exact number. It could be a simple coding error in the questionnaire, which should be corrected.
- School monthly attendance for each child, as well as weekly amount of paid work for each member of the household on each type of work (including children, but also adults, not to be too upfront about the topic of child labour) are not included in the baseline questionnaire at the moment. It would be a great addition to include them, although it could take more time to fill the survey. Indeed, it means a similar question, or set of questions, should be repeated for each child or each member of the household individually.

Carrying out checks to ensure the accuracy of changes between different databases

In baseline 50% of households depended on mica picking as a primary source of income, whereas at endline mica picking was the primary source of income for 18%, which means a division by 3 of the number of mica-depending households over the course of the program. Moreover, nearly 100% of households declared having a second source of income at baseline, but only 50% of them said so at endline. These are spectacular results, which is great for mica-picking dependency, but which could raise doubts about the validity of the data among sceptical readers, especially about the way data was collected. We already worked on this issue by changing the questions about income in the endline survey to better match the baseline questionnaire. In case of need, further steps could be to:

- Explore how the baseline questionnaires were administered: Do surveyors give the respondents extra time to gather their memories? Do they help them to estimate the amount of income? Who was interviewed in the household, was it a single person, or several people who could gather more information as a group? Subsequently, guidelines should be given to the endline surveyors to ensure similar surveying conditions.

- It could also be interesting to ask other questions in the endline questionnaire such as:
  - 'Was mica your primary income at the start of the program?' to check the consistency of the answers with the baseline.
  - 'Did you have a secondary income at the start of the program?' to check consistency.
  - 'Why do you no longer have this secondary income?' To understand whether this is something negative (loss of additional income) or positive (household members were able to focus on the main income and consolidate it).

We advise to investigate the discrepancy around asset support data, between the monitoring data and the endline survey. This year, the monitoring data reported 6.7% of households being asset recipients, but 42% of households declared they received one. There could be a difference in the definition of "asset" used between both sources.

Furthering research into the proportion of young people benefiting from the Bal Manch

If you want to explore more accurately the effects of Bal Manch, an idea would be to add a question in the roster part of the questionnaire so that it can be known for each child individually if they participated in Bal Manch activities. This would allow for a more precise estimation of the share of children who benefited from Bal Manch, and would make the statistical analysis more precise and robust as well concerning the impacts of Bal Manch on education-related impacts.

Clarifying the question about assets received from the CEP

A considerable number of households seem to have misunderstood the question "Did you receive any of the following assets from the CEP?", by including seeds for kitchen garden in the "Agricultural equipment" category. In an upcoming evaluation of the CEP, a precision should be added, such s "Agricultural equipment, excluding seeds".

Annexes

TABLE A - Distribution of households in the sample

District	Village	Village population	% of total population	Sample: target	Sample: actual	% of target reached
Giridih	Bhurai	129	3%	7	7	100%
Giridih	Domasar	39	1%	2	2	100%
Giridih	Gajwakura	56	1%	3	3	100%
Giridih	Gamhariatanr	66	1%	4	4	100%
Giridih	Keriabank	30	1%	2	2	100%
Giridih	Khijuri	228	5%	12	12	100%
Giridih	Khoto	126	3%	7	7	100%
Giridih	Nimadih	89	2%	5	5	100%
Giridih	Paisratanr	48	1%	3	3	100%
Giridih	Palmo	170	4%	9	10	111%
Giridih	Baghmari	30	1%	2	2	100%
Giridih	Dalpatdih	104	2%	6	6	100%
Giridih	Diwanjote	116	3%	6	6	100%
Giridih	Gosain mahri	75	2%	4	4	100%
Giridih	Karnpura	60	1%	3	3	100%
Giridih	Khatpok	232	5%	13	13	100%
Giridih	Kodaibank	127	3%	7	7	100%
Giridih	Ranadih	155	3%	8	8	100%
Giridih	Singho	278	6%	15	15	100%
Giridih	Sirsia	79	2%	7	4	57%
GIRIDIH TOTAL		2237	48%	125	123	98%
Koderma	Bangadag	74	2%	4	4	100%
Koderma	Bendi	209	5%	11	11	100%
Koderma	Bhitiya	72	2%	4	4	100%
Koderma	Biragada	40	1%	2	2	100%
Koderma	Chanako	51	1%	3	3	100%
Koderma	Chhatara	29	1%	2	2	100%
Koderma	Chorichattan	27	1%	1	1	100%
Koderma	Jarga	99	2%	5	5	100%
Koderma	Kumbhiyatari	112	2%	6	5	83%
Koderma	Sindri	20	0%	1	1	100%
KODERMA TOTAL		733	16%	39	38	98%
Nawada	Baara	88	2%	5	5	100%
Nawada	Beechli Tola	103	2%	6	6	100%
Nawada	Bhaur	91	2%	5	4	80%
Nawada	Bhusari	181	4%	10	11	110%
Nawada	Dudhi mati	26	1%	1	1	100%
Nawada	Hanumaan Nagar	46	1%	2	2	100%
Nawada	Kumharua	98	2%	5	5	100%
Nawada	Palanki	98	2%	5	5	100%
Nawada	Phulwariya Khurd	121	3%	7	7	100%
Nawada	Sabalpur Chorun	30	1%	2	2	100%
NAWADA TOTAL		882	19%	48	48	99%
Jamui	Chairaiya	63	1%	3	3	100%
Jamui	Chilka Khand	116	3%	6	6	100%
Jamui	Garhtand	101	2%	5	5	100%
Jamui	Kharik	113	2%	6	6	100%
Jamui	Lali lewar	80	2%	4	4	100%
Jamui	Mariyam Pahadi	60	1%	3	3	100%
Jamui	Paharpur	58	1%	3	3	100%
Jamui	Pani Chuan	36	1%	2	2	100%
Jamui	Taar Bank	71	2%	4	4	100%
Jamui	Tahkar	88	2%	5	5	100%
JAMUI TOTAL		786	17%	41	41	100%
GRAND TOTAL		4638	100%	253	250	99%

Notes

[i] http://www.asercentre.org

[ii] http://www.asercentre.org/p/113.html. Test-retest reliability is the extent to which the same results are achieved when the same test is given to the sample at different points in time. Inter-rater reliability assesses the extent to which a test gives the same results when administered by different people. Concurrent validity assesses the extent to which results of a new test compare to those from a well-established test assessing the same construct. Convergent-discriminant validity assesses the extent to which there is a stronger association among related constructs (e.g. reading tests) than among less related constructs (e.g. math test and reading test).

[iii] See https://www.mospi.gov.in/estimated-number-households-average-household-size-and-sex-ratio-no-female-1000-male-4

[iv] Villages were coded as not having an AWC, already having an AWC in place at program start but with no improvement brought by the CEP, and having an AWC improved due to the actions of CEP. Only households from the last two groups of villages were included in the analysis, since we were not interested in the effect of "having or not an AWC in the village" but in the impact of "having an improved AWC vs a basic AWC".

[v] Annual Status of Education Report(Rural), 2022, was retrieved from: https://asercentre.org/wp-content/uploads/2022/12/aserreport2022-1.pdf

[vi] Child Labour – Global Estimates 2020, Trends and the Road Forward. Retrieved from: https://www.ilo.org/wcmsp5/groups/public/---ed_norm/---ipec/documents/publication/wcms_797515.pdf