

Introduction

At the end of three years of implementation of its [Community Empowerment Program \(CEP\)](#) in 40 villages of the mica belt in India, the Responsible Mica Initiative (RMI) hired two independent agencies, [Im-Prove](#) (France) in collaboration with [Y-East](#) (India), to assess CEP effective impact for mica-dependent communities.

Four CSOs, organized under the *Bihar & Jharkhand Sustainable Action on Mica (BJSAM)* consortium, implemented CEP with the overall objective to bring a handholding support to mica-dependent communities toward their true empowerment. By addressing the root causes of child labor, CEP's comprehensive approach aims, among others, to provide trainings and assets to mica-dependent communities toward the development of additional sources of livelihood, to reinforce children engagement in high quality education activities, to provide medical services and strengthen health behaviors, and to improve the delivery of government services in the villages.

Assessing the true impact of its Community Empowerment Program has enabled RMI to identify areas for improvement and to ensure upcoming interventions will gain efficiency and vastly increase their impacts for mica-dependent communities.

The Context

India is the world's largest source of mica, a mineral that is used in a wide range of industries. The Responsible Mica Initiative 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. At the heart of RMI's approach, the Community Empowerment Program employs a holistic approach, aiming to improve working conditions and eradicate child labor by improving four key components: improved access to social security and other government services, enhanced livelihood, raised nutrition and health standards and improved access to quality education.



Methodology

Quarterly monitoring & evaluation documents and financial reports were provided by RMI.

354 household surveys were conducted with a representative sample of households (HH) at program end.

30 semi-structured interviews were conducted with community leaders, NGOs, teachers and Anganwadi center (AWC) workers at program end.

Where possible, **data at endline** were compared to comparative **data at baseline** to assess change over time. Dose-response analysis was used to assess attribution.



Interview with household heads in Ranigadar village

Monitoring & Evaluation Results

102% target achievement overall for **social security** component; **8266** social security linkages achieved, but linkages for health insurance lagged behind (64% of target).

194% target achievement for budgeted activities in the **livelihood** component; a total of **233** start-up grants were provided to HH most in need.

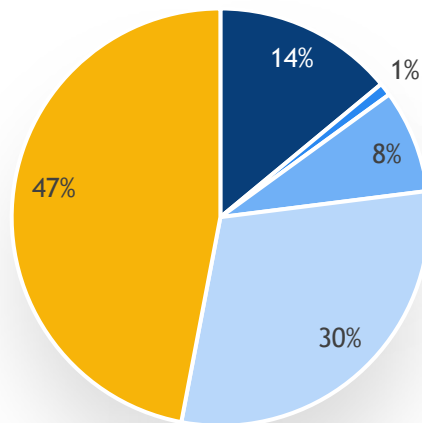
99% overall achievement of targets in the **health** component, including **26** health & nutrition camps, **20** modelled AWC, **203** malnourished children referred for treatment & **7** clean water facilities provided.

94% overall achievement of targets in the **education** component including **65** community/school libraries put in place and teaching & learning materials provided for **32** schools. To reinforce organizational structures, **30** student committees and **33** school management committees were put in place. Teachers in **33** schools were trained and **129** scholarship grants provided to children.

Financial results

Total expenditure was **36.6 million INR*** over the **25** months of the program (March 2019-April 2021).

*: Effective expenditure in EUR amounted to **480,000 EUR** over the period.



- Project management unit
- Recurring costs
- Administrative costs
- Operational costs (office rent, accountancy services, etc.)
- Project implementation (grants, scholarships, water pumps and other assets, etc.)



Y-East team

Impact results

On the whole, many of the impact results confirmed the relationships outlined in [RMI Theory of Change](#).

Social security

- CEP resource centres led to more social security linkages being made, and 64% of HH stated that the social security they signed up for had reduced household spending.
- 94% of HH had become more involved in community activities (e.g., self-help groups, gram panchayat meetings).

Livelihood

- 35% fewer HH listed mica picking as their primary means of livelihood at endline compared to baseline, due in part to CEP start-up grants.
- 23% more HH had a secondary income at endline than at baseline, and this was linked to receipt of CEP assets and training.
- Program activities appeared to have a buffering effect- although primary & secondary income decreased from baseline to endline overall (likely due to the Covid-19 pandemic), activities such as start-up grants and training were associated with higher incomes at endline.

Education

- Enrolment in school at endline in the whole population of children aged 6-14 years was high, at 96%.
- 49% more children were attending school full time at endline compared to baseline, but this was not linked to scholarship grants.
- Literacy and numeracy were compared to national and regional samples (ASER report 2018) and children in Class 3 were behind in literacy and numeracy, but by Class 8 they were performing on a level with national and regional samples. social security linkages.

Health

- CEP health and nutrition camps led to more changes to health behaviours, which in turn were associated with lower incidence of health problems. social security linkages.

General impact

- 8% of sample children were engaged in an amount of paid work commensurate with ILO definitions of child labour.
- 79% of HH were more satisfied with their life at endline than at baseline, and this was linked to CEP start-up grants, increased community involvement and increased social security linkages.



Interview with household head in Dudhpania village

Recommendations

Continue with activities that have proven impact in the current evaluation: resource centers, start-up grants, training & assets, health & nutrition camps, modelled AWCs.

Although impacts were less positive in the education component, this was mostly due to external circumstances (school closures) and methodological difficulties conducting the dose-response analysis. Given the centrality of education to the social mission of CEP, we recommend **continuing all education activities**.

Continue **monitoring child labor** closely; it is often found to increase in situations of fragility and crisis*.

Build sustainability into program activities from the outset. Ensure assets are durable and/or self-sustaining, train volunteers to continue monitoring activities.

*: https://www.ilo.org/global/publications/books/WCMS_575499/lang--en/index.htm



Literacy and numeracy test with a child in Lacchuraidih village