

PROVISION FOR POST PROJECT EVALUATIONS FOR THE UNITED NATIONS DEMOCRACY FUND Contract NO.PD:C0110/10

EVALUATION REPORT



UDF-MEX-08-279 – Civil society advocating for quality education and healthcare with equity in Mexico

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All errors and omissions remain the responsibility of the authors.

Disclaimer

The views expressed in this report are those of the evaluators. They do not represent those of UNDEF or of any of the institutions referred to in the report.

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Table of Contents

| I. EXECUTIVE SUMMARY | | | |
|----------------------|---|---------------------------------------|----|
| II. | INTRODUCTION AND DEVELOPMENT CONTEXT | | |
| | (i) | The project and evaluation objectives | 4 |
| | (ii) | Evaluation methodology | 4 |
| | (iii) | Development context | 5 |
| III. | PROJECT STRATEGY | | 7 |
| | (i) | Project approach and strategy | 7 |
| | (ii) | Logical framework | 9 |
| IV. | EVALUATION FINDINGS | | |
| | (i) | Relevance | 10 |
| | (ii) | Effectiveness | 11 |
| | (iii) | Efficiency | 13 |
| | (iv) | Impact | 15 |
| | (v) | Sustainability | 16 |
| | (vi) | UNDEF added value | 17 |
| v. | CONCLUSIONS1 | | |
| VI. | RECOMMENDATIONS 1 | | 19 |
| VII. | OVERALL ASSESSMENT AND CLOSING THOUGHTS | | 20 |
| VIII. | LIMITA | TIONS, CONSTRAINTS AND CAVEATS | 21 |
| IX. | ANNEX | ES | 22 |
| ANNE | X 1: EVA | LUATION QUESTIONS: | 22 |
| ANNE | X 2: DOC | UMENTS REVIEWED : | 23 |
| ANNE | X 3: PER | SONS INTERVIEWED | 25 |
| ANNE | X 4 : ACR | ONYMS | 27 |

I. Executive Summary

(i) Project Data

The *Civil Society Advocating for Quality Education and Healthcare with Equity in Mexico* project sought to strengthen the collective voice and action of civil society in the Mexican states of Chiapas, Hidalgo and Guerrero. The focus was on increasing the ability of local civil society organizations (CSOs) and women, indigenous groups and youth to demand equitable and quality public education and healthcare services through 1) strengthening the ability of CSOs to train, inform, and raise awareness of these rights, and 2) enabling their engagement to advocate for these services as a basic human right. The project was implemented by Oxfam México (formerly the Rostros y Voces organization) through subgrants to three CSOs: the Colectivo de Atención para la Salud Integral de la Familia in Chiapas (CIFAM), the Academia Hidalguense de Educación y Derechos Humanos (ACADERH) in Hidalgo, and Café, Mujer y Comunidad (CAMCO) in Guerrero.

This was a 405,000 USD project, funded by a UNDEF grant of 375,000 USD (of which 25,000 USD was used by UNDEF for monitoring and evaluation) with 30,000 USD from OXFAM Novib in co-financing. It was a two year project with a four month no-cost time extension (November 2009 -February 2012). According to the project document, its main activities were to:

- undertake a participatory diagnosis of the health and educational services;
- information and capacity building for civic actors on the right to these services and advocating for them;
- developing public agendas for action and information; and,
- monitoring international commitments made by the Government of Mexico on basic services.

(ii) Evaluation Findings

The project was implemented in general as described in the project document for activities at the state level. The three CSOs received sub-grants at the start of the project and each worked in networks within the 5 or more municipalities identified within their states. The anticipated work at the national level was not undertaken with the exception of the national diagnosis which was completed. The reasons for this are not clear to the evaluators as conflicting reasons were given, but it appears to be related to an Oxfam México capacity issue and/or to the conceptual view of the Oxfam México project team on how the project should be implemented. The lack of work at the national level did affect overall project performance and results.

The project objectives and activities were **relevant** given the poverty levels, the quality of services in the three states targeted by the project, and the lack of attention given to health and education as a basic human right. The women, youth and indigenous groups were among the most marginalized within these areas. The project was also directly relevant to the institutional mandate and vision of Oxfam México and their three CSO partners/subgrantees. Risks were identified for the project in terms of the politicization of local officials and the Mexican electoral campaigns. But programmatic activities did not appear to adequately account for these risks which Oxfam México credited for programmatic delays and reducing its effectiveness and impact, especially in Guerrero. This was also cited as one of the rationales for not implementing the national level activities. The project strategy of undertaking a local-level diagnosis of the problem, then providing training on the issues identified and developing an agenda for action proved to be an **effective.** The agenda provided a focus for the groups working in this area and allowed for the development of constructive discussions with local authorities on issues in the sector. Linking the provision of health and education to basic human rights was seen by participants as an effective approach as it increased the importance of the advocacy efforts and receptiveness of civil and political actors to the messages of the project. However, the diagnosis focused on the quality of health and education and lacked information on policy making, citizen interaction in that process and what needed to be addressed to strengthen their voice and advocacy efforts to improve services which was the intended outcome for the project. The cascade nature of the programme was a good means to reach larger numbers of persons however, the extremely decentralized nature of the project resulted in the project being implemented more as three separate efforts than one integrated programme which limited its effectiveness.

This degree of decentralization and separation between the CSO partners also affected the **efficiency** of the project as it did not take advantage of the expertise of the partners and resulted in duplicated efforts. Administrative support from Oxfam México did appear help ensure a smoother administration of the multi-level project, and most project participants felt there had been a good use of time and resources. The three sub-grantees used networks to help implement the activities which increased efficiency, but the lack of a formal agreement on their working relationships affected the project as not all had the same sense of project purpose or obligation to participate regularly.

The project reported on activities and outputs but lacked the performance indicators needed to assess **impact.** Anecdotal information suggests that the project did make a difference, particularly at grass-root levels, but the impact could have been greater had the project been implemented as one and included the national component. It appears that the relationships between the civil society groups and the local officials are better and more constructive now than they were at the start of the project and that some public officials are more receptive to their messages. Most project participants expressed a feeling of empowerment from the training and work on the agenda. In some cases, the evaluators heard of health and education issues being given more attention in local government planning and in several cases, the activities were reported to have resulted in improved services.

The grass-roots nature of the project means the knowledge and experiences of the project are likely to remain within the targeted communities. The CSO partners are still working on the issue of equitable services in their respective areas of focus and see the agenda created by the project as a long-term planning tool. Their main **sustainability** issue deals with the lack of financial resources which is a critical issue for most of the CSOs that participated in this project. There was **UNDEF value-added** to this project. Many of the participating CSOs felt the funding from a UN agency gave their organization and project more credibility and visibility with the government officials and increased their access and receptivity to their messages.

(iii) Conclusions

The project's focus and activities were relevant and important within the Mexican social and democratic context as it addressed issues of social equity and empowerment of marginalized populations. The use of local level CSOs was an effective approach to implement community-based activities, but the lack of an integrated programme between the states and with national efforts limited its usefulness and potential impact. The use of a diagnostic to develop training and an agenda for action was a good technique, but required more focus on issues of voice and civic participation which were the main objectives of the project. The project strengthened advocacy efforts for more equitable health and education services in its targeted areas in Chiapas, Hidalgo and Guerrero. In particular, it increased individual knowledge, capacity and leadership among participating CSOs and community members, strengthened their relations with local authorities on these issues and in some cases resulted in improved services. However, the extent of results is unknown due to the lack of outcome data. Changes are likely to be sustainable at the level of personal empowerment and relationships built with some public officials and the agenda provides CSOs with some of the key health and education issues to raise with officials in the future. UNDEF-funding provided significant value added as it provided a sense of neutrality and legitimacy to the rights-based discussions and to the CSOs that participated in the effort.

(iv) Recommendations

For similar projects in the future, the evaluators recommend that civic participation and advocacy projects be more firmly grounded in the democratic governance context. Civic participation is done in within the political context of a country and this aspect should be integrated into the project from the design stage on. A more robust civic education component would strengthen citizen understanding of their roles and responsibilities in a democratic system and the means by which they can hold the government accountable for its actions, including service delivery and policy making. The electoral process is a part of this process area and should be seen as a key opportunity to hold public debates on agenda items, gain candidate support for the agenda, and monitor their commitments once they take office. Projects should continue to promote local ownership but within an integrated framework that builds a cohesive, synergistic programme. This requires a more engaged programmatic role for UNDEF's grantee as well as more formalized relationships between sub-grantees and their partners. A results-based performance monitoring plan focused on achievement of outcomes should be used in addition to outputs to track project progress and measure its achievements. Finally during project implementation provide guidance to CSOs and participants on how they can continue their work in the equity sector so that they have an action plan already in place by the end of the project.

II. Introduction and development context

(i) The project and evaluation objectives

The Civil Society Advocating for Quality Education and Healthcare with Equity in Mexico project was a two-year USD 375,000 project implemented by Oxfam México. The project ran



from 1 November 2009 to 29 February 2012 which included a four month no-cost time extension. The project worked to strengthen the collective voice of civil society to demand quality and equitable education and healthcare services for women, indigenous people and youth in three of the poorest states in Mexico: Chiapas, Guerrero, and Hidalgo. It worked through three state-level Civil Societv Organisations (CSOs): Colectivo de Atención para la Salud Integral de la Familia (CIFAM) in Chiapas; Café, Mujer y Comunidad (CAMCO) in Guerrero. and Academia Hidalguense de Educación У Derechos Humanos (ACADERH) in Hidalgo. Each organization

undertook a diagnosis of the problems within their targeted municipalities, provided CSO and community-level training and used the agenda developed through their activities to advocate for more equitable services and policies for their communities.

UNDEF and Transtec have agreed on a framework governing the evaluation process, set out in the Operational Manual. According to the manual, the objective of the evaluation is to "undertake in-depth analysis of UNDEF-funded projects to gain a better understanding of what constitutes a successful project which will in turn help UNDEF devise future project strategies. Evaluations also assist stakeholders to determine whether projects have been implemented in accordance with the project document and whether anticipated project outputs have been achieved"¹.

(ii) Evaluation methodology

The evaluation took place in July 2012 with the field work in Mexico done 2-6 July, 2012. The UNDEF Round 2 evaluations are qualitative in nature and follow a standard set of evaluation questions that focus on the project's relevance, effectiveness, efficiency, impact, sustainability and any value added from UNDEF-funding (Annex 1). This is to allow meta-analysis for cluster evaluations at a later stage. This report follows that structure. The evaluators reviewed available documentation on the project and on the issue of equitable services in Mexico (Annex 2). Interviews were held with Oxfam México, its main partners, participants, government interlocutors, Oxfam Novib, the National Council for the Evaluation of Social Development Policy (CONEVAL), and other nongovernmental organizations (NGOs) working in the sector. The evaluators interviewed those in Mexico City and in Pachuca, Hidalgo in person, and the remainder by phone, skype, and e-mail (Annex 3).

¹ Operations Manual for the UNDEF-funded project evaluations, p. 3.

During the preparatory work, the evaluators identified several issues which they followed up during the field work in Mexico. These included:

- Ability of the project to reach its anticipated outcomes as it had ambitious goals and had not implemented most of the national level activities as anticipated in the project document.
- Extent the project leveraged existing data and efforts as each partner CSO did their own diagnosis of health care/education systems, and each developed their own curricula, manuals and training programmes raising questions of duplication of efforts.
- **Sustainability** issues and the degree of ownership in the programme that Oxfam México sought to build, and whether the agenda were adopted and resulted in sustainable changes for the intended beneficiaries.
- Value added from Oxfam México as the three CSO partners had already been active in the project areas according to the proposal, and the networking and national level work anticipated in the design was limited according to project reporting.
- Value added by UNDEF-funding as the project document suggested UNDEF funding would strengthen CSO advocacy efforts by legitimizing them in the eyes of the Mexican government.

(iii) Development context

The project grounded its design within the context of the Mexican government's commitment to provide essential services to all citizens, and in particular to the right to quality education and health care for marginalized groups. as guaranteed by the Mexican Constitution. The Constitution states that everyone has the right to free and compulsory basic education (preschool through secondary), access to health services and an adequate environment for their development and well being. The government has followed up on those commitments and expanded health and educational services as part of its social policy in recent years. This has earned Mexico a ranking of 57 out of the 187 countries in the United Nation Development Programme Human Development Index and places it in the high human development category². However, despite these improvements, the project diagnosis found that Mexicans still do not have universal access to public health services, education, infrastructure and housing assistance programmes. Also that the quality of these services varies considerably according to income, social status and location.³ Mexico bans all forms of discrimination, but social and economic discrimination has marginalized some populations, in particular indigenous people, many of which live in extreme poverty in rural areas. According to the National Council for the Evaluation of Social Development Policy (CONEVAL)⁴, 46.2% of Mexico's population lives in poverty, with more than 10% in extreme poverty. These numbers have increased in recent years due to the global economic crisis and its repercussions on the Mexican economy. Rural and poor populations are especially marginalized, and within those groups- women, youth and indigenous people.

The three states targeted by the project are among the poorest states in Mexico. In Chiapas, almost a third of the population lives in extreme poverty, 35% lack access to health services, and 48% are behind educationally. In Guerrero, 28% of the population lives in extreme poverty, almost 40% lack access to health services and 55% are behind educationally. In Hidalgo, 12% of the population lives in extreme poverty, 31% lack access to health services and almost 32% are behind educationally. Within these states, access to services varied between municipalities and within municipalities according to gender and population type.⁵

² UNDP, Human Development Index, 2011

³ Oxfam Mexico, Diagnóstico sobre la Situación de la Educación y la Salud en los estados de Chiapas, Hidalgo y Guerrero, p 6 ⁴ Unless otherwise noted, statistics in this section are from CONEVAL, Statistical Annex, Poverty 2010.

⁵ Diagnostic information from Oxfam Mexico, Diagnóstico sobre la Situación de la Educación y la Salud en los estados de Chiapas, Hidalgo y Guerrero, p 56 and 57

Hidalgo was found to by the diagnosis to have the best levels of human development among the three targeted states, but with problems in areas with high concentrations of indigenous populations, such as San Bartolo Tutotepec. Here nearly half the population was illiterate, and 77% of the adults had not completed basic education. A similar situation existed in the Copalillo municipality in Guerrero. Chiapas had the lowest indicators for human development in the municipality of Venustiano Carranza which had the highest proportion of indigenous population (21.6%). Some of the key issues found that related to the quality of education was the lack of infrastructure and inability of professional staff to meet the social and cultural diversity of the students. There were also issues related to the poor working conditions for teachers in rural areas, and to political issues related to the teachers union. In the health sector, the primary issues found were the right to live free of violence and to make informed decisions. Here some of the most serious health problems were linked to issues of maternal death, teen pregnancy, the increase in sexually transmitted diseases and uterine cancer, in addition to the problem of alcohol consumption and its impact on gender-based violence against girls and women.

The project's diagnosis also found that access to health and educational services were closely related to the ability of citizens to access other basic rights- such as food, housing, infrastructure, potable water, and employment. Among the key factors that helped ensure that their basic rights were met, was having citizens understand and demand their rights-through advocacy and civic participation. The government has also started to address these problems by including civic participation and outreach components into its social programmes and services. However, many Mexicans are unaware of these opportunities or understand the benefits of participating.

Surveying by CIVICUS of Mexican citizens, show a low level of trust (38%) in their political institutions. Most of those polled did not believe in political action, with only 3% saying they had participated in some type of political action, while 13% said they would never participate and 82% said they didn't know.⁶ In Mexico, the main form of political participation is voting, with turnout at around 59% and turnout is greater among higher income groups than those in the lower brackets.⁷

This project worked through CSOs and in addition to using them as implementers, intended to strengthen their understanding of the issues and ability to work effectively in this sector. There are an estimated 20,000 to 35,000 CSOs in Mexico with about 19,000 of these focused on helping others.⁸ Almost half of these focus on social support, with about 18% working on community development, 8% on health and the remainder working on other issues including education and human rights. Most CSOs are concentrated in the 20 most populous cities including Mexico City. The environment for civil society participation has improved significantly since the democratic transition, especially for issues of democratic development and human rights. Almost half the CSOs surveyed (42%) undertake advocacy work to influence implementation of a public policy, with about half of these petitioning the executive or legislature and only 17% doing so with public officials. Advocacy to strengthen civic participation and networking amongst CSOs to interact on these issues with authorities were seen as their strengths, while the scarcity of financial resources, and low levels of transparency, visibility and accountability seen as their primary weaknesses.

⁶ Civicus, A Snapshot of Civil Society in Mexico, 2011 p 35

⁷ OECD, Better Life Index Mexico, 2011

⁸ Statistics and information in this section on CSOs are from CIVICUS, A Snapshot of Civil Society in Mexico, 2011

III. Project strategy

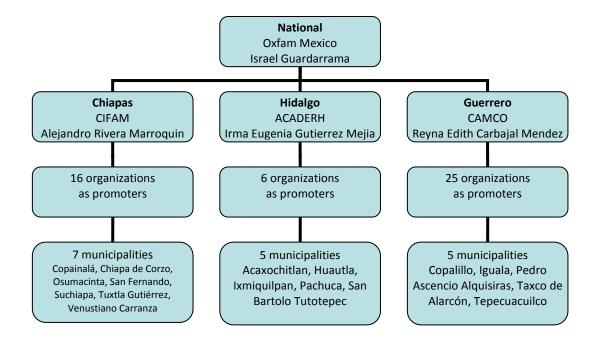
(i) Project approach and strategy

The "Civil Society Advocating for Quality Education and Healthcare with Equity in Mexico" Project sought to strengthen the collective action and voice of civil society in Mexico through: 1) participatory assessments and analysis of the quality of essential services at the national and state levels; 2) information-sharing and capacity building of civic actors to advocate for and monitor basic services as a human right; 3) formulating and promoting public agendas for more equitable services; and 4) monitoring progress of government commitments for equitable social services.

Oxfam México had been working in the sector of economic justice, active citizenship, equity and humanitarian action as Rostros y Voces, a Mexican partner of Oxfam Novib at the start of the project. It converted to a full member of the Oxfam confederation as Oxfam México early in project implementation during the project duration. The project intended to work at several levels. At the local level, it targeted the states of Chiapas, Guerrero, and Hidalgo and where Oxfam México had been working with local CSOs on similar issues for several years. At the state level it intended to work through advocacy and informational campaigns undertaken by multi-sector actors, and at the national level through consciousness-raising and advocacy efforts. The project also intended to participate in and learn best practices in fostering civic demand for essential services from global and regional initiatives, particularly in Latin America.

The local and state level activities were implemented through the three CSO partners: the Colectivo de Atención para la Salud Integral de la Familia in Chiapas (CIFAM), the Academia Hidalguense de Educación y Derechos Humanos (ACADERH) in Hidalgo, and Café, Mujer y Comunidad (CAMCO) in Guerrero. Each received subgrants of approximately USD 80,000 for this purpose. Oxfam intended to implement the national project activities itself, as well as to provide the general programmatic guidelines for its CSO partners, monitor their work and manage the overall administration of the grant.

The project was implemented in a decentralized manner, with programmatic details at the state levels largely decided by the CSO partners. This was a deliberate approach adopted by Oxfam México which felt this would increase local ownership for the project. The project started with Oxfam México hiring a consultant to undertake the baseline assessment of social conditions nationally and in the three targeted states and a national diagnostic study of essential services and needs. Each CSO partner hired its own consultants to undertake the state-level diagnostic studies and to develop the training curriculum and manuals for their state. Each CSO worked through their own networks created from existing relationships with local organizations and persons working in the sector. Representatives of these networks served as trainers ("promoters") and implementers of the activities at the community levels (Diagram 1). All of these third-tier organizations and persons participated pro-bono, with expenses covered by the CSO partners with their sub-grant funding.



The diagnosis studies on the quality of public health and education services were undertaken at the national and state level in the period February - April 2011. These assessments were used by the partner CSOs as a means to identify the critical issues within their areas and develop their agenda for action. As part of this process, a training programme was designed and implemented in each state to strengthen the ability of the participants in their networks and communities, and to develop and advocate for the agenda. The four modules in the training programme were:

- Civic participation for essential rights (*Participación ciudadana a favor de los derechos esenciales*).
- Public campaigns and media access (Campañas públicas y uso de medios).
- Advocacy and Lobbying (Incidencia política y cabildeo).
- Monitoring and evaluation of public services and policies (*Monitoreo y evaluación de los servicios y políticas públicas*)

The agenda for essential services provided the focus for the advocacy work and the basis for discussions with communities and local authorities. The project targeted women, youth and indigenous groups which were considered by Oxfam México as the most vulnerable groups within their targeted states. Each CSO had their own focus based on their institutional focus and experiences: all groups were targeted in Chiapas, while only women were targeted in Guerrero and only indigenous groups were the primary targets in Hidalgo.

The national level advocacy and networking with regional and global partners did not occur. Different reasons were given to the evaluators for not implementing this part of the design, but in general the project's objectives were ambitious and project staff felt working at the national level required more time, attention and resources than they had available.

(ii) Logical framework

| Project activities | Intended outputs | Medium-term impacts/outcome | Long-term development objective | | | | |
|---|--|---|--|--|--|--|--|
| PARTICIPATORY ASSESSMENTS AND COMPARATIVE ANALYSIS | | | | | | | |
| Develop 3 territorial & 1 national diagnostic analyses | 3 state & 1 national diagnostic analyses | Identification of needs & priorities in health/ ed sectors | More equitable services and increased access for marginalized groups | | | | |
| Comparative analysis of state-national problems | 1 comparative analysis to use as baseline | Better understanding & priorities in health/ ed sectors | Improved quality & transparency of state institutions & services | | | | |
| Training of local leaders and CSO representatives as trainers | 150 local leaders & CSO representatives trained as trainers, 75% female 4 outreach & capacity building manual developed per state | More knowledgeable, skilled & active CSOs advocating for & monitoring rights to education & health care,& on use of media for public information Strengthened voice of women, indigenous groups & youth | Increased civic participation & demand for equable serves More equitable services & increased access for marginalized groups | | | | |
| Local, regional & global networking | Inventory of contact & initiatives Participation in regional/global forums Funds raised for exchange visit | Increased networking and exchange of information among state/national/global actors working on equitable social service | Stronger civic demand for equitable essential services More effective CSO strategies | | | | |
| INFORMATION SHARING ANI | D CAPACITY BUILDING | | | | | | |
| Develop agendas | Agendas & priorities defined with beneficiaries in 3 states 1 national agenda defined | CSOs actively engage with government to enforce rights to education and health care | Increased demand for & more equitable services | | | | |
| Presentation agendas to local, state, national authorities | Consultations in 3 states & nationally on agendas 1 agency & 10 municipalities per state adopted proposals CSO monitoring of commitments | Government committed to address equity issues CSOs monitored implementation of new policies | More equitable social development policies Improved access to quality health & education services for marginalized groups | | | | |
| CREATION AND DISSEMINAT | TON OF PUBLIC AGENDA | | | | | | |
| Development of informational materials | Messages on heath & education a human right developed | More informed citizens on rights to heath & education | Increased demand for more equitable services | | | | |
| Awareness raising campaign in 3 states and nationally | 500 women, youth, indigenous people participated in mobilization activities in 15 municipalities Public awareness campaign implemented in 3 states & nationally | More aware citizens & policy makers on rights to heath & education | Increased demand for more equitable services State services are more equitable | | | | |
| MONITORING PROGRESS TOWARDS STATE COMMITMENTS | | | | | | | |
| Monitoring & analysis of progress made in 3 states | Quarterly progress reports Project results analyzed in internet forum 3 state & 1 national report on achievements | Project implemented as planned Factors of success and constraints identified | Use of lessons learned to strengthen similar projects Increased state compliance with social development commitments | | | | |

IV. Evaluation findings

(i) Relevance

The project objective and activities were appropriate and relevant to the level of CSO organization in Mexico and to the basic needs of marginalized women, youth and indigenous groups who were the intended beneficiaries. The three targeted states were among the poorest in Mexico and had some of the lowest levels of social services in the country. The project strategy of identifying and addressing health and education issues at the municipal level brought the project activities closer to the beneficiaries, giving it a more direct meaning in their everyday lives. The approach of strengthening these services for marginalized groups through training on their rights, advocacy for improved services and promoting civic participation to demand their rights also made it relevant from a democratic development perspective.

There was a good level of interest in the project expressed by most project participants and participating local officials. The project exceeded its targets concerning the number of participants and municipalities reached. Several participants attributed this to the inclusion of



"local leaders" into the project activities as promoters. They felt this gave credibility and increased relevance of the project activities. This reportedly attracted local media which recognized the importance of the messages, and which provided free coverage of events and air time for the public information campaigns.

The approach of starting with a participatory diagnosis of the problem which was then used to drive the training and develop an agenda for action seemed to be an effective technique to focus the work. However,

Project activities in Chiapas

for a civil society strengthening project, the diagnosis focused almost exclusively on health and education issues which diverted focus from the anticipated outcome of a stronger collective voice and ability to effect policy change.

The project's decentralized nature allowed the three CSO partners to adapt the project to their own local context during implementation. In some aspects, this increased the relevance for the participating CSOs as well their participants. For example, ACADERH in Hidalgo decided to target indigenous groups which comprised 25% of the local population and which were seen as the most disadvantaged group. ACADERH also noted the diversity of the indigenous groups and included this intercultural aspect in their agenda-- in particular advocating for three indigenous universities in the state rather than the one which was under discussion at the time. ACADERH as an institution worked routinely in networks, and continued that practice in this project by created a network of six organizations to help implement the activities. These NGOs were indigenous themselves which increased the relevance of ACADERH's relevance to its targeted populations. This is in contrast to Chiapas, where the CSO partner targeted youth but opened up the project to others who were interested, and worked with 16 organizations which provided representatives to serve as promoters, but which did not function as a network. In Guerrero, the CSO partner was a women's organization focusing on gender issues. Its project activities targeted women and it

worked with 25 CSOs that also worked primarily on gender and women's issues.

The project's objectives were also directly relevant to Oxfam México's institutional mandate and vision of strengthening civil society and enabling people to exercise their rights to create

a more equitable and democratic society. However, the extremely decentralized approach used for project implementation undermined the programmatic relevance of Oxfam México beyond providing the general outlines for the project and serving as a grant manager for the three CSOs.

The political risks faced by the advocacy elements of the project and the difficulties of working at the national level were not adequately identified in the design or addressed during implementation. The electoral



Project participants in Guerrero

process was blamed by Oxfam México and CAMCO for delays and difficulties in implementation. It apparently politicized the CSOs affiliated with the network in Guerrero and disrupted project coherence during large periods of time. In Hidalgo and Chiapas, project implementation did not appear to be affected by the political processes, but some promoters mentioned the need to "start over" when new officials came into office because they felt that each party had different agendas and would not necessarily continue the work started under a previous administration. The national level activities were a part of the design but were not fully implemented. This directly affected the relevance of Oxfam México and the effectiveness of the programme. For the CSO partners, beyond the provision of resources, Oxfam México's role was to build a project network (both within and beyond the project), develop the national agenda and advocate at the national policy level for policy changes that could support efforts at the state level. This would have integrated the efforts into a more synergistic programme and increased the relevance, effectiveness and sustainability of the efforts at the local level.

(ii) Effectiveness

Oxfam México met most of the intended outcomes as stated in the project document. The CSOs were the key actors in the project and provided information, training and awareness raising on the rights to education and healthcare. These CSOs interacted with government officials in the three targeted states to promote these rights and because of their efforts, more women, indigenous people and youth from marginalized communities in their targeted areas are more aware of their rights and better able to articulate them with officials. However, the extent of these relationships, interactions and results are unknown as they were not adequately captured in project reporting.

Most of this data in the diagnosis were available publically and were compiled by the consultants hired by the CSOs. CIFAM felt it already knew the issues and wanted to develop its agenda without the diagnosis. It did the diagnosis, but submitted the draft two months late, and the final document six months late. Doing the agenda did help to focus the work of the CSOs and gave them a solid basis for their discussions with communities and local officials. This led to constructive civic participation and dialogue with public officials.

Participants credited the rightsbased approach and UN funding with increasing the effectiveness of their messages with civil and political actors, a positive point for UNDEF value added. This helped to develop relationships with local government officials that did not appear to have existed before the For example. project. close relationships appear to have been developed in Hidalgo with the State Minister for Health, in Guerrero with the State Minister for Social Development, and in Chiapas with several state agencies. .



Public meeting in San Fernando, Chiapas

Oxfam México's decentralized

approach was intended to increase local ownership for the project by allowing its partners to work out their own implementation details based on the broad project lines it provided. The CSO partners and participants did appear to own most of the activities. In fact, very few of the participants/promoters interviewed knew of Oxfam México's involvement when asked during the evaluation.⁹ However, the project was delegated to the CSO partners to such an extent that it affected the effectiveness and coherence of the overall effort. The three CSO partners worked in almost complete isolation from each other, meeting together in only a few workshops organized by Oxfam México and in a National Meeting Forum held at the end of the project (February 2012). Each developed their own activity plans, training programme, training materials, advocacy campaigns and messages. There was no project branding to identify the efforts as a national movement to increase a collective civic voice towards common goals.

ACADERH, and CAFÉ worked in networks within their state, primarily with organizations or their representatives that they already knew and had worked with before. CIFAM opened the project up to those beyond its usual partners. The local CSOs and/ their representatives provided their time pro bono with the project covering their expenses, an effective and efficient approach. The networks included independent journalists and media organizations which was extremely useful as it helped to ensure good media coverage of activities and generous airtime for their messages. Since the local CSOs were also already working at the community levels, the cascade nature of the project made it easier for the project to reach the grass-roots. As most of these local CSOs were at a lower level of institutional development than the CSO partners, working on the project's agenda and activities did appear to have strengthened them programmatically, with the agenda providing them with a direction for future work in the sector. Project training appears to have given promoters and participants information that helped them to better understand their rights, and the skills to raise them more effectively with officials. The agenda articulated those demands and gave the specificity needed to discuss the issues constructively with local officials and to develop their public awareness campaigns.

⁹ Project materials and products were all clearly labeled with the logos of Oxfam Mexico, UNDEF and the local partners.

The lack of work at the national level anticipated in the project document reduced the effectiveness of the programme. In addition, the project did not take advantage of the internet or social media to develop a common platform for the project to connect the state networks and draw in supporters from other locations and sectors on project issues and action. Although many of the beneficiaries may not have had access to the internet, most of the participating CSOs did, as did local officials. and leveraging information technology would have been а programmatic and cost-effective way to deepen participation, create a shared sense of purpose and exchange information-- both among the national participants as well as with regional and global actors as anticipated in the project design.



(iii) Efficiency

Project participant in Huautla, Hidalgo

The original budget submitted by Oxfam México (USD 466,000 plus USD 200,000 counterpart in cash and in kind from Oxfam México) in its proposal to UNDEF was substantially higher than what was actually granted (USD 350,000¹⁰ plus USD 30,000 in counterpart funding from Oxfam Novib). Despite the reduced amount, the project activities and intended outputs remained the same. The main changes to the budget were reducing the staffing and travel line item amounts and increasing contractual services-- probably intended to compensate for the reduced number of project staff. According to Oxfam México,

Cifam agrace el apoyo de:



it had intended to hire an expert in advocacy and another for monitoring. The evaluation did find that these two areas were among the weakest for the project and that most of the work at the national level was not done. However, the link between the reduced amount of funding and staffing and this finding is not evident. Had more project persons been hired and dedicated to the advocacy component and monitoring, it is likely that those activities would have been much stronger. At the same time, a lot more

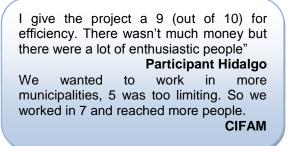
could have been done for advocacy and on the national efforts within the existing resources, so funding considerations were not the only factors in terms of project results.

Oxfam México and its three CSO partners felt there was a good use of time and resources. Oxfam México kept 40% of the grant funding to implement its part of the project and divided

¹⁰ Plus another USD 25,000 was retained by UNDEF for evaluation costs.

the remaining 60% equally among its three CSO partners. The Novib funding was used to help cover other Oxfam México project-related staff and administrative costs. They also felt that a two-year timeframe was needed to implement these types of activities. However, even though the project document was signed well in advance of the official start date of the project (signed end September 2009 for a 1 November 2009 project start date) they were unable to complete the project as scheduled and required a four-month no-cost time extension. Memoranda of Understanding (MOUs) with the three CSO partners were not signed until 5 February 2010 and the diagnostic reports not completed until 2011. Delays in delivery of reports also resulted in a delay in the delivery of UNDEF's second tranche of funding, which in turn delayed subsequent activities.

In Guerrero, project activities appear to have been implemented erratically. The reasons are unclear but the project coordinator was ill, which might account for some of the problems along with personality and partisan clashes reported within its network. This affected the efficiency and coherence of the activities. For example, a journalist interviewed was invited by CAMCO to cover the first two training sessions and taped the sessions which he



later broadcasted through his network of community radio stations. This was both an effective and efficient use of local interest and resources, but then the journalist said he never heard from the project again and was not even aware that they had developed an agenda.

Oxfam México did provide some basic administrative training and mentoring for its partners to help them with their funds management and reporting. By serving as a grant manager,

Oxfam México saved the partners from having to deal directly with a donor and its reporting requirements partners which most of the appreciated. The partner CSOs did not have a formal agreement with the CSOs they brought into their network to implement the help project. Although they were volunteers and many appeared to have worked diligently throughout the project. others were said to have lacked professionalism and their participation was unreliable.

CUANDO(5): NO SÓLO ENSEÑAN LOS DERECHOS HUMANOS, SINO QUE DIARIAMENTE LES ESTÁN SIENDO RESPETADOS POR MAESTROS (AS) Y TRABAJADORES DE LA INSTITUCIÓN. DECLAR AGON DE LOS DER ECHOS BUMANOS

Extract from the Hidalgo Manual

As noted, the approach of having each partner CSO develop their own programmes independently resulted in duplicated efforts especially in regards to capacity building and project products. The quality of work and focus varied considerably among the different CSO partners. The training material in Chiapas for example, was intended to result in a certificate, and was more academically focused. It included group exercise within the text and testing at the end. The three manuals in Hidalgo were geared towards a lower-educated indigenous audience and included use of graphics. Their handbook for public information campaigns was also translated into the Nahuatl language. The manual from Guerrero was made up more of texts from different laws and agreements. Reporting from the partners on their activities and achievements to Oxfam México also varied widely despite a common format

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provided. But in general, there was not enough regularity or specificity in reporting to allow for adequate performance monitoring. Some of the training materials and guidance were also provided very late in the process which limited their use by partner CSOs for this project, such as the advocacy manual and indicator guidance which were published in 2012.

(iv) Impact

The project did have an impact for some participants and participating CSOs. But the lack of adequate data on project results makes it difficult to identify or to assess the extent of results.. Oxfam México did make an initial effort to develop a baseline for this project, but these were macro-level indicators on social conditions that were unlikely to capture results at the level of this project. This baseline also did not include information on the level of civic engagement to improve services, the citizens' attitudes towards participation and advocacy, their level of knowledge on their rights for services or on how to address their demands to government. The baseline was also not repeated at the end of the project, making it impossible to measure change. Reporting was primarily on activities and outputs and was not detailed enough to extrapolate impact. To measure impact, indicators needed to be more focused on achievement of the intended outcomes of increased civic awareness and collective voice for equitable services and any policy changes resulting from the increased demand. Oxfam México did issue an indicators guide that provided guidance on the different indicators, such as the UNDP Human Development Index, that could be used to measure progress, but this was produced at the end of the project (February 2012) so its use by project partners will be for future projects.

In the interviews, the three CSO partners felt they had been strengthened by participating in the project as working on an agenda gave their work more focus and the funding allowed them to continue their work in the sector. It seemed evident that the process of developing an agenda and the participatory manner in which it was done had helped to them to think more strategically about the issues of equitable public services and the needs in their communities. Those who took the training also thought it was empowering as they felt it provided them with skills to interact with public officials that they could replicate for other community needs in the future.

CSO partners felt the project, agenda and UN funding gave their organization more visibility and access to public officials and increased official receptivity to hear their issues and proposals. This led to more productive discussions and in turn increased perceptions of the CSOs' legitimacy and ability to effectively represent the interests of their constituencies. In some cases, the evaluators heard of health and education issues being given more attention by local government planning officials and in a few cases to specific action, such as the cancer screening brought to the municipality of San Fernando as noted below.

Some of the examples provided to or noted by the evaluators included:

- Increased sense of institutional legitimacy and empowerment by the CSOs which had a positive effect in the relations with government, ability to defend citizen rights and articulate the interests of marginalized groups.
- Strengthened ability for the three partner CSOs in terms of financial and programmatic reporting.
- Participation by state officials in project activities in all three states. According to accounts this was a significant change as these organizations had had difficulty in the past getting official attention. In some cases, this contact has continued after the end of the project. The official participation also gave the agenda items more visibility.
- Introduction of the concept of three intercultural universities to state education officials within the state of Hidalgo rather than one to better reflect the diversity of indigenous

groups in the state, specifically for the indigenous regions of Nahuatl, Otomi and Tephua. This type of discussion had been held at the national level before, but reportedly not within the state. The indigenous network Hñahnu felt they had obtained a state promise to develop these three universities and that this provided needed recognition from local authorities that the indigenous groups were homogenous and each had their own languages, cultures and needs.

- Changed perceptions of health and education as a fundamental human right reported by the CSOs for project participants and beneficiaries of the training and advocacy campaigns. This outcome seems likely to the evaluators, however, cannot be independently validate due to the lack of data on perceptions.
- Inclusion of a Guerrero agenda item on gender into a state plan entitled "100 puntos para el avance de las mujeres de Guerrero" (100 points for the advancement of women in Guerrero).
- Inclusion of health issues into the municipal agenda in Yahualixo in Hidalgo after project participants question the lack of attention to health issues in municipal planning.
- Inclusion of a Chiapas agenda item on education into a recent agreement CIFAM signed with the State



Participants and youth from Hidalgo whose advocacy led to the creation of a community library

Human Rights Committee to work on education issues.

- Creation of a youth group within the Hidalgo indigenous network "Hñahnu" that is active on equity issues. They felt their town needed a library and advocated for one. This resulted in local officials creating a small library for their community.
- Improved health services and cancer screening for a San Fernando municipality in Chiapas after the project drew attention of health officials to high incidents of mother mortality and cancer in the locality. The health department sent a team into the town to provide screening for the local women and to provide treatment.

(v) Sustainability

Without knowing the extent of the project results, it is difficult to assess issues of sustainability. However, as the project worked at the local level with local CSO and community members it is likely that the knowledge and skills resulting from the project activities will remain with them and within those communities. Increased knowledge and skills

and participating in a project such as this are empowering, which is usually a significant enough change that it makes a lasting impact. The skills learned for this project should serve the participants as they continue their volunteer work and other community involvement. New practices and policies adopted by local officials are also likely to remain, as once an item such as health care has been included in a municipal agenda, it is unlikely to be removed. This

I joined the project last year and saw it was a productive partnership. I brought my friends and 13 of us created a youth group to help support project objectives.

Indigenous youth, Hidalgo

The training program was good, and we have a better understanding of issues. But nothing came of it as we never used it.

Participant Guerrero

contributes to the consolidation of democracy and improved governance in a country context such as Mexico, where the level of public attention on access to public services for marginalized groups and more participatory decision making is still uneven. The strengthening of the three CSO partners through their implementation of the project is likely to be sustained, especially with CIFAM and ACADERH. The evaluation found both organizations still discussing issues of equitable services in their states and how to work with the government and communities for reforms. They recognized that the agenda provided them with a strategic planning tool for future work in the sector, but seemed unsure of next steps. The post-project situation for CAMCO was less clear. The project developed a number

of products that still remain and will be useful for the NGOs in their future work. These include the diagnostic reports on the health and education sector, the different sets of training manuals and materials, and the guidance manuals done by Oxfam México for indicators and advocacy.

The UN funding opened doors. It gave us more visibility. This is very important for a project trying to do public reform in the human rights sector. I give UNDEF a 10.

CIFAM

The CSOs' main sustainability issue is the lack of financial resources which is a critical constraint for many local CSOs. They saw the agenda as a useful means to raise funds to continue although none appeared to have started that process as of the time of the evaluation. At the same time, in speaking to Transparency Mexico and CONEVAL which are

Apuntes para la incidencia y cabildeo



A manera de manual Para el promotor comunitario



working in the social development sector, both felt funds were available, and/or other programmes that CSOs such as these could work with. As an example, they pointed to the Instituto Nacional de Desarrollo Social (Indesol) which provides government funding CSOs social to for development and other projects. Transparency Mexico has also mapped 1,164 social programmes so far at the federal and local levels in the directory it is developing with the Secretary of Social Development and the United Nations Development Programme. All of these government projects have components that require civic participation.

The electoral process (campaign and change of officials following election of a new government) was cited by both CAMCO and Oxfam México as a constraint to more sustainable results. CIFAM and ACADERH did not feel that this was a significant factor, although ACADERH mentioned the need to sensitize any new officials that took

office. This is indicative of the need to institutionalize the gains made by the project so they are not dependent on personal relations and will continue regardless of who is in office.

(vi) UNDEF added value

There was widely recognized UNDEF-added value to this project. Oxfam México and the main CSO partners felt that funding from a UN agency gave their organizations and project activities more credibility and visibility with the government officials. It increased their access to public officials and the receptivity of that official to project messages and work. Advocating against social discrimination, especially in regards to indigenous rights, is a sensitive issue in

Mexico, and all felt that having a UN flag attached to the effort helped to present it as a non-political and neutral endeavour.

V. Conclusions

Based on the evaluation findings, the team concludes:

(i) The project's focus and activities as designed were relevant and *important given the social and democratic context with Mexico*. It addressed issues of social equity and the marginalization of large segments of society (women, youth and indigenous groups) within the three targeted states. However, it did not adequately factor in the political context and how this affected a civic participation/advocacy project. This reduced its relevance at the national level and within Guerrero and limited its potential impact. This conclusion follows from findings (i), (ii), and (iv).

(ii) The use of state- and local-level CSOs to implement the state-level activities was an effective approach for a community-based project as it used organizations with local networks and that knew the local context. However, the lack of synergistic programming between the partners and with efforts at the national level limited the usefulness of this approach as it resulted in duplicated efforts, inconsistent programming, and isolated activities. The relationship between the CSO partners and their networks of CSO promoters that participated in project implementation should have been formalized and used as an opportunity for institutional strengthening. The lack of activities at the national level was also a lost opportunity to build wider support for the changes advocated at the state levels. This conclusion follows from findings (i), (ii), (iii) and (iv).

(iii) The use of a diagnostic to develop a training programme and agenda for advocacy was a good programmatic technique, but required more focus on the main of objective of strengthening the collective voice and action of civil society. This diagnosis gave the project the statistical data from which it could select the most affected municipalities in terms of service delivery, but this drew focus of the participants to the two sectors within which the project decided to work (health and education) rather than on its principal goal of strengthening civic voice and demand for more equitable services. This affected project coherence, effectiveness and impact. This conclusion follows from findings (ii) and (iv).

(iv) The project made a difference for individual participants and for some collective interests, but the extent is unknown due to the lack of outcome data. The project primarily tracked activities and outputs which is insufficient to determine outcomes. However, anecdotal information indicates that the project had a positive impact, especially for individual participants in terms of personal growth, improved relations between some CSOs and local officials, and in a few cases to policy changes. This conclusion follows from findings (ii), (iv), and (v)

(v) Project results are likely to be sustainable at the level of personal empowerment and relationships built with some public officials. The changes to public

policy reported to the evaluators, such as the inclusion of health in municipal planning, are also likely to be sustained. The agenda developed also provides CSOs and government with a roadmap for future action, but the project activities were not sustainable due to the financial conditions of the participating CSOs. The conclusion follows from findings (iv) and (v).

(vi) UNDEF-funding provided significant value added to this project.

The UN is respected in Mexico and in this case provided a sense of neutrality and legitimacy to the rights-based discussions and to the CSOs that participated in the effort. This conclusion follows from finding (vi).

VI. Recommendations

To strengthen similar projects in the future, the team recommends:

(i) Ground civic participation and advocacy projects more firmly in the democratic governance context. Civic participation and advocacy are done within the political and democratization context of a country and this aspect should be recognized and integrated into project design and implementation. A stronger civic education component could help participants understand their roles and responsibilities in a democratic system and the means by which they can hold the government accountable for its actions. This includes the issues of equitable service delivery and policy making. The electoral process is a part of the political process, and should be seen as an opportunity for public debate on agenda issues, obtaining candidate endorsements should be done for agenda items and following up on those commitments once they enter office. State and local governments work within the larger policy context set by the federal government and work at the national level should be done to support these lower-level state efforts. This recommendation follows from conclusions (i), (ii) and (iv).

(ii) Continue to build local ownership in projects but within an integrated framework that builds a cohesive, synergistic programme. In a project such as this, the UNDEF grant recipient should bring the different implementers together into one integrated programme, by designing activities together, producing joint products and branding the project to provide a rallying and unifying point for supporters and agents of change. It should also leverage the different institutional strengths of each of the partners to improve the project and its products. For example, CSOs could adapt the common materials according to their institutional expertise- such as using ACADERH to adapt training materials for indigenous groups or languages, CAMCO could strengthen the gender aspects and CIFAM could develop a certificated version. Certificates can be valuable for those working in the sector, especially in rural areas, as it demonstrate some level of knowledge or professional competence and gives participants a tangible sign of their participation. This recommendation follows from conclusions (ii), (iii) and (iv).

(iii) Use a results-based project performance monitoring plan to track progress made towards achievement of outcomes and to measure results. This should be used in addition to tracking activity outputs. Examples of performance indicators could

include: increased scores on a knowledge, attitude and practices survey of promoters/participants/officials at the end of the project compared to scores at the start of the project (or compared with a control group of non-participants); number/type of policy changes resulting from project activities and of persons affected by this change; and increase in services for the marginalized group by the end of the project. This recommendation follows from conclusions (iii), (iv), and (v).

(iv) Formalize relationships between subgrantees and their *implementers* with a written agreement that clearly articulates the roles and responsibilities of each, the project purpose, timelines, targets and performance indicator and reporting requirements even if this is only to be done verbally. This would strengthen the programme as well as the participating CSOs. This recommendation follows from conclusions (i), (ii) and (vi).

(v) Build a long term vision for work in the equity sector during the project so the project leaves an-after project strategic action plan with partner CSOs and participants so that they have a direction to continue their work after the end of the project. This would help maintain the momentum generated by the project and sustain some of the gains made. This recommendation follows from conclusion (iv).

VII. Overall assessment and closing thoughts

Overall, this project was a worthwhile use of UNDEF funding. It worked to empower marginalized groups and protect their rights which are important elements in a consolidating democracy. It implemented most of its planned activities and met and/or exceeded most of its anticipated outputs. It seemed to have made an impact despite the lack of indicators to measure it. It has beneficiaries still talking about the issues and waiting for new initiatives that can help to continue the work started. However, several issues affected its ability to make greater achievements. One was the uncertainty over its purpose. The project straddled different sectors with its outcomes stated in terms of democratic development and its activities funded by a democracy fund, but most of the activities and indicators were more indicative of a social development programme that and one usually funded by social development agencies such as UNICEF.

The other issue is the more hands-off programmatic role adopted by Oxfam Mexico. This raises the question as to the value added for a donor to go through an umbrella organization for a project such as this, especially when the sub-grantees appear relatively advanced and capable of running their own parts of the project with minimum supervision, albeit with some issues in some cases. The project design foresaw a much more active role for Oxfam Mexico, providing the networking and linkages between them and working at the national level in complementary activities, which is the valued added. But in practice, it only assumed a small portion of this.

This illustrates the importance of clearly thinking through and articulating a project's purpose before it is designed, of working as an integrated team during project implementation, and in providing the programmatic leadership and synergies to maximize project impact.

VIII. Limitations, constraints and caveats

The evaluation took place well after the end of the project and relied on project documents and interviews to make its assessments. Reporting tended to be general and lacked data on results. Interviews also provided some anecdotes that the team used to extrapolate findings. There was difficulty reaching the persons who participated in Guerrero. The contact information for all but the project coordinator was questionable. The team worked through nine persons listed on the contact sheet for Guerrero as project promoters or participants before finding one that knew the project or the CSO partner. The evaluators were also only able to reach a limited number of public officials who knew of the project in the three states which also made assessment of the advocacy and dialogue activities with these officials problematic. However, overall the information provided from the different sources and locations was consistent, which with all of the documents provided by Oxfam Mexico, which helped to validate the evaluation's findings.

IX. ANNEXES

Annex 1: Evaluation questions:

| | Annex T. Evaluation questions. | | |
|----------------------|--|--|--|
| DAC | Evaluation Question | Related sub-questions | |
| criterion | | | |
| Relevance | To what extent was the project, as designed and implemented, suited to context and needs at the beneficiary, local, and national levels? | Were the objectives of the project in line with the needs and priorities for democratic development, given the context? Should another project strategy have been preferred rather than the one implemented to better reflect those needs, priorities, and context? Why? Were risks appropriately identified by the projects? How appropriate are/were the strategies developed to deal with identified risks? Was the project overly risk-averse? | |
| Effectiveness | To what extent was the project, as implemented, able to achieve objectives and goals? | To what extent have the project's objectives been reached? To what extent was the project implemented as envisaged by the project document? If not, why not? Were the project activities adequate to make progress towards the project objectives? What has the project achieved? Where it failed to meet the outputs identified in the project document, why was this? | |
| Efficiency | To what extent was there a reasonable relationship between resources expended and project impacts? | Was there a reasonable relationship between project inputs and project outputs? Did institutional arrangements promote cost-effectiveness and accountability? Was the budget designed, and then implemented, in a way that enabled the project to meet its objectives? | |
| Impact | To what extent has the project put in place processes and procedures supporting the role of civil society in contributing to democratization, or to direct promotion of democracy? | To what extent has/have the realization of the project objective(s) and project outcomes had an impact on the specific problem the project aimed to address? Have the targeted beneficiaries experienced tangible impacts? Which were positive; which were negative? To what extent has the project caused changes and effects, positive and negative, foreseen and unforeseen, on democratization? Is the project likely to have a catalytic effect? How? Why? Examples? | |
| Sustainability | To what extent has the project, as designed and implemented, created what is likely to be a continuing impetus towards democratic development? | To what extent has the project established processes and systems that are likely to support continued impact? Are the involved parties willing and able to continue the project activities on their own (where applicable)? | |
| UNDEF value added | To what extent was UNDEF able to take advantage of its unique position and comparative advantage to achieve results that could not have been achieved had support come from other donors? | What was UNDEF able to accomplish, through the project, that could not as well have been achieved by alternative projects, other donors, or other stakeholders (Government, NGOs, etc). Did project design and implementing modalities exploit UNDEF's comparative advantage in the form of an explicit mandate to focus on democratization issues? | |

Annex 2: Documents Reviewed :

ACADERH. Agenda por la Educación y Salud con Calidad y Equidad para las Mujeres, Jóvenes e Indígenas en Hidalgo. Hidalgo, 2011

ACADERH Informe Final de Proyecto. Iniciativas Temáticas y Sectoriales. Hidalgo, octubre de 2011.

ACADERH. Informe de resultados de la Primera Escuela de Participación Ciudadana a Favor de los Derechos Esenciales. Hidalgo, junio de 2010.

ACADERH. Manuales para las Escuelas de Participación Ciudadana a Favor de los Derechos Escenciales. Hidalgo, 2010.

Amnesty International, Annual Report 2011, Mexico. <u>http://www.amnesty.org/en/region/mexico/report-2011</u>

Becerril Albarrán, Nahela. Diagnóstico sobre la Situación de la Educación y la Salud en los estados de Chiapas, Hidalgo y Guerrero. Oxfam México. Abril 2010.

Becerril Albarrán, Nahela. Guía práctica para seguimiento de indicadores en educación y salud. Oxfam México. Marzo 2012.

CAMCO. Agenda Preliminar: Educación y Salud con Calidad y Equidad para las Mujeres, Joóvenes e Indígenas en Guerrero. Guerrero, marzo 2011.

CAMCO. Informe Final de Proyecto. Iniciativas Temáticas y Sectoriales. Guerrero, octubre de 2011.

CAMCO. Manuales para las Escuelas de Participación Ciudadana a Favor de los Derechos Esenciales. Guerrero, 2010.

CAMCO "Producción Colectiva del Conocimiento - Taller de Reflexión y Análisis "El acceso de las mujeres a los servicios de salud y educación, en cinco municipios del estado de Guerrero". Junio 2010

CIFAM. Agenda para Incidencia a favor de la Salud y Educación con Calidad y Equidad. Chiapas. Undated

CIFAM. Diagnóstico Participativo para la Agenda de Incidencia a favor de la Salud y Educación con Calidad y Equidad en Chiapas. Chiapas, 2011

CIFAM. Informe Final de Proyecto. Iniciativas Temáticas y Sectoriales. Chiapas, octubre de 2011. CIFAM. Manuales para las Escuelas de Participación Ciudadana a Favor de los Derechos Esenciales. Chiapas, 2010.

CIFAM. Rueda de prensa para presentar campaña. Tuxtla Gutiérrez, Chiapas. 26 de mayo de 2010

CIVICUS, A Snapshot of Civil Society in Mexico, Analytical Report on the CIVICUS Civil Society Index, 2011 https://civicus.org/images/stories/csi/csi_phase2/mexico%20acr.pdf

CONEVAL, Anexo estadístico- Pobreza 2010, http://www.coneval.gob.mx/cmsconeval/rw/pages/medicion/Pobreza_2010/Anexo_estadistico.es.do

Forum on Universal Health Care Mexico City Political Declaration on Universal Health Care Coverage: Coverage, Sustaining Universal Health Coverage, Sharing Experience, and Promoting Progress, April 2012

http://www.who.int/healthsystems/topics/financing/MexicoCityPoliticalDeclarationUniversalHealthCover age.pdf

Freedom House, Freedom in the World, Country Report: Mexico, 2011, http://old.freedomhouse.org/template.cfm?page=22&country=8091&year=2011 Global Health Workforce Advocacy Initiative, Guiding Principles for National Health Workforce Strategies, <u>http://www.who.int/healthsystems/round9_6.pdf</u>

Herrera Gutiérrez, Tonatiuh. Las razones y los elementos, diagnóstico para la evaluación de la Educación y la Salud en el estado de Hidalgo, los casos de Acaxochitlan, Huautla, Yahualica, Zimapan, Ixmiquilpan y Pachuca. ACADERH, Hidalgo (without date)

Indesol, Our Mission, <u>http://www.indesol.gob.mx/en/web_indesol/Nuestra_Mision</u>

Monroy, Adriana. Diagnóstico de la calidad de los servicios públicos de salud y educación en cinco municipios de la Región Norte del estado de Guererero: Copalillo, Iguala de la Independencia, Pedro Ascencio de Alquisiras, Taxco de Alarcón y Tepecoacuilco. CAMCO, Guerrero (without date) OECD, Better Life Index, Mexico Civic Engagement, <u>http://www.oecdbetterlifeindex.org/topics/civic-engagement/</u>

OXFAM México. Incidencia de la Sociedad Civil a favor de la Educación y Salud con Calidad y Equidad. Chiapas, Hidalgo y Guerrero. Informe Público. México, 2012. OXFAM México. Memoria del Encuentro Nacional de Incidencia de la Sociedad Civil a favor de la Educación y Salud con Calidad y Equidad. México DF, 27-28 de febrero de 2012. Oxfam México, UDF-MEX-08-279, Proposal, Civil society advocating for quality education and healthcare with equity in Mexico, 2008 Oxfam México¹¹, UDF-MEX-08-279, Project Document Civil society advocating for quality education and healthcare with equity in Mexico, September 2009 Oxfam México, UDF-MEX-08-279, Mid-Term Report, Civil society advocating for quality education and healthcare with equity in Mexico, March 2011 Oxfam México, UDF-MEX-08-279, Project Extension Request Form, October 2011 Oxfam México, UDF-MEX-08-279, Milestone Financial Reporting Report, March 2011 Oxfam México, UDF-MEX-08-279, Milestone Financial Reporting Report, September 2011 Oxfam México, UNDEF y Oxfam México dan voz a la sociedad civil de Chiapas, Guerrero e Hidalgo, Comunicado de Prensa, 29 February 2012 http://www.oxfammexico.org/oxfam/descargas/comunicado oxfam undef.pdf OXFAM, Policy and Practices: Water, Health and Education, http://policy-practice.oxfam.org.uk/ourwork/water-health-education

Santibanez, Lucrecia; Vernez G., Razquin, P. Education in Mexico, Challenges and Opportunities, RAND Education, 2005

Transparency International, Corruption Perception Index 2011, http://cpi.transparency.org/cpi2011/in_detail/

Transparency Mexico, with UNDP, Iniciativa para el Fortaleximiento de la Institucionalidad de los Programas Sociales, <u>http://www.programassociales.org.mx/</u>

UNDP, Human Development Index, 2011, http://hdr.undp.org/en/statistics/

UNICEF, Indigenous adolescents push for recognition and equity in Mexico, <u>http://www.unicef.org/infobycountry/mexico_61007.html</u> UNICEF, Radio project gives a voice to indigenous children in Mexico, <u>http://www.unicef.org/infobycountry/mexico_47386.html</u>

UNESCO, Expanding equitable early childhood care and education is an urgent need, Education for All Global Monitoring Report, Policy Paper 03, April 2012

World Bank, Additional Financing for Mexico's Oportunidades Helps Millions Gain Access to Education, Health, 2010, http://www.worldbank.org/en/news/2010/11/10/additional-financing-mexicos-oportunidades-helps-millions-gain-access-education-health

¹¹ Formerly Rostros y Voces

Annex 3: Persons Interviewed

| 1 July 2012 | | | | |
|---|---|--|--|--|
| Arrival, international consultant | | | | |
| 2 July 2012 | | | | |
| Meetings with Oxfam México | | | | |
| Rebecca Berner | Institutional Funding Manager | | | |
| Israel Guadarrama | Project Coordinator | | | |
| Rodrigo Galindo Caldedras | Programme Division Manager | | | |
| Miriam Reyna | Administrative Manager | | | |
| - | / 2012 | | | |
| Travel to Pachuca, Hildalgo | | | | |
| Irma Eugenia Gutierrez Mejia | Project Coordinator, ACADERH | | | |
| Pablo Elias Vargas Gonzalez | President, ACADERH | | | |
| Reyna Torres | Project team member, ACADERH | | | |
| Marcela Hernandez | Project Promoter, Trainer, ACADERH | | | |
| Elvia Beltran Vileda, Ixmiquilpan municipality | Setas y Champinones | | | |
| Alejandro Rendon, Ixmiquilpan municipality | Red Indigena Hnahnu | | | |
| Silvano Hernandez Herndez, Yahualica municipality | Organizacion Nahual Campesina de la Huasteca | | | |
| Tanya Meza, ACADERH – « Desde abajo » | Member ACADERH, Independent journalist | | | |
| Alberto Rodriguez, ACADERH – « Desde abajo » | Member ACADERH, Independent journalist | | | |
| Pedro Luis Noble | Ministry of Health | | | |
| Diana Reyes | Ministry of Health assistant | | | |
| Return to Mexico City | | | | |
| 4 July | / 2012 | | | |
| Alejandro Rivera Marroquin | Director, CIFAM, Chiapas | | | |
| Guadalupe Coutino Pereyra | Project Coordinator, CIFAM, Chiapas | | | |
| Walter Roblero Lao | Administrative Officer, CIFAM, Chiapas | | | |
| Mireya Albores Herrera | Community Leader, Chiapa de Corzo, Chiapas | | | |
| Jaqueline Herandez Cruz | Community Leader, San Fernando, Chiapas | | | |
| Agustina Valencia Abarca | Beneficiary, Apaxtla de Castrejon, Guerrero | | | |
| Jose Luis Tenorio Bello | Fundacion Domi Bello Tenorio, Chiapas | | | |
| Ubali Guerrero Gonzalez | Mujeres Indigenas en Lucha, Copalillo, Guerrero | | | |
| Rufina de Salatiel | Beneficiary, Asociacion de Ejidatarias de Ixcapuzalco, Guerrero | | | |
| Luis Zacaria Quiroz | Organizacion Para El Desarrollo Integral de Los Pueblos Indigenas Campesinos Y Popular, Chipancingo, Guerrero | | | |
| 5 July 2012 | | | | |
| Rafael Reygadas | Autonomous Metropolitan University Professor | | | |
| Thania de la Garza Navarrete | General Director at National Council for Evaluation of Social Development Policies (CONEVAL) | | | |

| Paola Palacios | Programme Director, Transparency Mexico | | |
|--|---|--|--|
| Erika Lopez | Transparency Mexico | | |
| Monsterrat Hernandez | Transparency Mexico | | |
| Israel Balderrama | Project Director, Oxfam México | | |
| Mirian Reyna | Administration and Finance, Oxfam México | | |
| Rodrigo Galindo | Programme Division Director, Oxfam México | | |
| 6 July 2012 | | | |
| Theo Bouma | Oxfam Novib, Co-funder of Project | | |
| Reyna Edith Carbajal Medez | Director, Café, Mujeres y Comunidad (CAMCO), Guerrero | | |
| Eva Albavera | Project Coordinator, former CAMCO, Guerrero | | |
| Adriana Monrroy | Project Consultant (local diagnostic and training program) | | |
| Departure, international consultant | | | |
| 9 Ju | y 2012 | | |
| Silvia Romero | Ministry of Education, Guerrero | | |
| Liliana Valiente | Ministry of Social Development Assistant, Guerrero | | |
| Diana Reyes | Ministry of Health Assistant, Hidalgo | | |
| Lorena Marisa Pineda (by e-mail) | Beneficiary, Organización de la Mujer Taxqueña, Guerrero | | |
| Delfina Bartolo Carbajal (by e-mail) | Benificiary, Mujeres Campecinas de Tepecoacuilco, UGOCEN. | | |
| Yasmin Vilchis Garcia (by mail) | Benificiary, Colectivo Red Abierta, Chiapas | | |
| Coyolxauhqui Valencia Eligio (by mail) | Benificiary, Visión Mundial, Chiapas | | |
| | | | |

Annex 4 : Acronyms

| ACADERH | Academia Hidalguense de Educación y Derechos |
|---------|--|
| CAMCO | Café, Mujer y Comunidad, A.C. |
| CSO | Civil Society Organization |
| CONEVAL | Consejo Nacional de Evaluación de la Política de Desarrollo Social |
| CIFAM | Colectivo de Atención para la Salud Integral de la Familia, A.C. |
| NGO | Non-Governmental Organizaiton |
| UNDEF | United Nations Democracy Fund |
| | |