

**EVALUATION OF KEPA'S
DISABILITY ACTIVITIES OF THE VOLUNTEER
PROGRAMME AND PARTNERSHIP PROGRAMME
IN MOZAMBIQUE (1991-2001)**

Final Report

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Abbreviations

(Portuguese abbreviations are used in the report)

ACAMO	Mozambican Association of the Blind
ACRIDEME	Mozambican Association of Mentally Retarded Children
ADEMO	Mozambican Association of Disabled People
ADEMIMO	Mozambican Association of Disabled Military People
ADESU	Association of Disabled High Education Students
ADPP	Association of the People for the People
AJODEMO	Mozambican Association of Disabled Youth
ALEMO	Mozambican Association of People with Leper
AMOFAS	Mozambican Association of Relatives and Friends of Deaf People
ASUMO	Mozambican Association of the Deaf
CBR	Community Based Rehabilitation
COCAMO	Co-operation Canada Mozambique
CSO	Civil Society Organisation
DDE	District Directorate of Education
DDMCAS	District Directorate of Women and Social Action Co-ordination
DMCAS	Directorate of Women and Social Action Co-ordination
DPE	Provincial Directorate of Education
DPMCAS	Provincial Directorate of Women and Social Action Co-ordination
DW	Development Worker
FAD	Finnish Association of Deaf
FAMOD	Forum of Mozambican Associations of/for Disabled
FAMR	Finnish Association of Mental Retardation
FIDIDA	Finnish Disabled People's International Development Association
FIM	Finnish Markka
FNGO	Finnish Non Governmental Organisation
FVS	Finnish Volunteer Service
HI	Handicap International
ICCO	Dutch Inter Churches Organisation
INAS	National Institute of Social Action
INGO	International Non Governmental Organisation
KEPA	Service Centre for Development Co-operation
LSN	Landmines Survivors Network
MFA	Ministry of Foreign Affairs of Finland
MICAS	Ministry for Social Action Co-ordination
MINED	Ministry of Education
MISAU	Ministry of Health
MJD	Ministry of Youth and Sports
MNGO	Mozambican Non Governmental Organisations
MMCAS	Ministry of Women and Social Action Co-ordination
MOPH	Ministry of Public Works and Housing
MTrab	Ministry of Labour
MS	Danish Association for international Co-operation
NGO	Non Governmental Organisations
NOVIB	Dutch Oxfam
ORDENA	??
PARPA	Action Plan for the Reduction of Absolute Poverty
PwD	Persons with Disabilities
SEAS	Secretariat of State for Social Action
TA	Technical Assistance
UNICEF	United Nations Children's Fund
USD	United States Dollar
WRF	WorldRehabilitation Fund

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EXECUTIVE SUMMARY

Objectives and approach

The evaluation of the disability activities supported by the Service Centre for Development Co-operation (KEPA) in Mozambique is part of the ongoing discussion underway in KEPA on the development of the Partnership programmes in the south. As part of this discussion, KEPA decided to commission an evaluation on its disability activities under the Volunteer Programme (1991-97) and Partnership Programme (1997-2001) in Mozambique. The Volunteer Programme was evaluated in 1995 but no previous evaluation on KEPA's disability activities has been carried out.

The evaluation aims to assess the past and current performance of KEPA's disability activities in Mozambique. It analyses the changing context in which the cooperation has taken place, and KEPA's contribution to strengthening the civil society and the organisations of the disabled people in Mozambique. The evaluation assesses changes in the situation of the disabled, focusing on the realisation of their human rights and possibilities to participate in the societal life. It also assesses how KEPA's programme for the sector has contributed to these changes. The key questions to analyse are to what extent KEPA has been able to build institutional and management capacity of its partners and whether it has been cooperating with right partners and right strategies. Closely related are the questions of sustainability of the activities, gender considerations and socio-cultural dimensions of cooperation. After having assessed the past and current situation, the analysis then provides recommendations on the future cooperation.

The evaluation is based upon a review of key available documentation, interviews and meetings conducted in Mozambique and Finland, and visits to selected provinces and districts in

Mozambique. The approach has been to incorporate and bring forward as wide range of different viewpoints as possible. The underlying principle of the evaluation is that it is not only accountable "upwards" to KEPA but also "downwards", to the beneficiaries.

The evaluation was carried out between March and May 2002. The fieldwork in the provinces of Maputo, Nampula, Cabo Delgado and Sofala, and in the capital city of Maputo, was conducted during one month between the end of March and the end of April.

Support to the disability sector in 1991-2001

The Terms of Reference in Annex 1 provide an excellent summary of KEPA in Mozambique during the Finnish Volunteer Service 1991-1997 and the Partnership programme 1997-2001. It also contains a detailed description of the cooperation agreements with the partners in disability sector, Ministry for Coordination of Social Action, MICAS and Forum of Mozambican Associations of/for Disabled, FAMOD, for the years 1997, 2000 and 2001.

The expenditure for KEPA Mozambique has varied during the eleven years between 2,6 and 5 million FIM. It was at its peak in mid-90s when also the share of KEPA Mozambique expenditure of the total KEPA expenditure was around 22 - 25 percent. The budget has decreased steadily during the Partnership programme. Taking the counter value of FIM in American dollars (USD), the expenditure for 2001, 3.5 million FIM, was the lowest in the history of KEPA in Mozambique. In terms of USD, the expenditure for 2001 was barely half of that in 1995 and 1996.

KEPA's support to disability activities during the Volunteer programme were the volunteers posted in the social sector, either in the ministries or since 1995 also in one of the disability NGOs. They were a minority among the volunteers during the early years but the share of those working in the social sector grew towards the end of the Volunteer programme. During the Partnership programme, KEPA's development workers were mainly posted in the disability sector.

Altogether 14 people have served as technical assistance to the disability sector, 9 of them as volunteers and 5 as development workers. Besides this long term technical assistance, short term assistance has been also provided since 1996.

KEPA's support to disability activities has included direct financial support to MMCAS and FAMOD during the Partnership programme, along with the technical assistance that has continued up to the present. The total expenditure for the years 1997-2001, including technical assistance and direct financial support, was around 6 million FIM (1,04 million USD). Funding in 2001 was around 690 000 FIM (101 000 USD). KEPA's direct disability sector support has been roughly around 30 percent of the total KEPA Mozambique expenditures during the Partnership programme. As with the technical assistance, the financial assistance has been mainly for the activities at the central level.

The Finnish disability NGO's input to the disability activities has been crucial since almost the very beginning of KEPA's activities in Mozambique. It is almost impossible to assess the results of KEPA's disability activities separately from those of the Finnish disability NGOs. Although the assistance provided by the member organisations is not within the scope of the evaluation, the "disability programme" should not be interpreted to consist of only KEPA's support to disability activities. The Finnish disability NGOs have been central actors in the Finnish support to the development of the Mozambican disability sector.

Finnish Association on Mental Retardation, FAMR and Finnish Association of Deaf, FAD, began their support already in 1993 with small financial contributions which later on grew to be their own projects with fairly large budgets. FIDIDA began its support to the Mozambican disability sector during the Partnership programme, in 1999. Also ABILIS Foundation has been supporting small scale projects of the disabled since 1999. Other Finnish organisations have financed some disability activities through regional projects

or through international NGOs.

During the Volunteer programme, cooperation of the Finnish disability NGOs with KEPA was close and the volunteers served as a functional link to the Mozambican organisations. The Volunteer programme did not form a coherent programme even in the social sector but the activities of the volunteers in the disability field gradually turned it to be one with the involvement of the Finnish NGOs. Partnership programme in the disability sector was thus well on its way already before KEPA officially changed its strategy.

From the point of view of the Finnish disability NGOs this seems to have been the ideal role for KEPA. The organisations received the services they needed and could contribute their expertise in disability issues to KEPA which did not have it. In general, the relationship with KEPA has lately been weakened, according to the member organisations active in Mozambique. However, the question is not only of the services that KEPA's member organisations expect from KEPA. It is also a question of KEPA's role in the design, implementation and monitoring of the projects financed by its member organisations. At present there seems to be little room for dialogue between KEPA and its member organisations on the problems related to projects.

The total funding for the Mozambican disability sector for 1991-2001 can be estimated to have been roughly 21 million FIM. Around 60 percent of it has been financed by KEPA and the rest by the Finnish disability NGOs. The share of the Finnish disability NGOs in the total funding has increased steadily especially in 1999-2001 in relation to KEPA's funding. For example, in 2001 the total budget of the Finnish NGOs for the projects in the disability sector was around FIM 2 630 000 while KEPA's direct disability sector support was around 690 000 FIM.

KEPA's disability programme as such has not been evaluated but some of the previous evaluations carried out either on KEPA, on the bilateral development co-operation between Finland and Mozambique as a whole, or on culture in Finnish development cooperation have included observations on the support to the disability sector. FAD has carried out an internal evaluation of the Deafness programme and the Community Based Rehabilitation (CBR) programme has been evaluated. In general, the conclusions of these evaluations on KEPA's disability activities have been positive.

The changing Mozambican context

Mozambique has witnessed rapid and profound political, economic and social changes during the 11 years period that KEPA has been operating in the country. The context of the disability sector has changed with the emergence of the Mozambican disability NGOs on one hand, and weakening of the state institutes on the other. The civil society, however, is still very weak and highly dependent on donor support. This is also the case with the disability NGOs. They are weak in technical capacity, mainly urban-based and totally dependent on donor financing. The public sector suffers from complex procedures, low capacity, weak mechanism of control and accountability. Channels for the civil society to monitor the performance of public institutions are lacking which in part has created an environment favourable to incompetence and corruption. The Mozambican public sector in general, and the social sector in particular, are excessively dependent on external aid.

The Ministry for Women Affairs and Coordination of Social Action (MMCAS) has undergone notable changes during the last ten years. The State Secretariat for Social Affairs (SEAS) was separated from the Ministry of Health in 1991, the secretariat status was changed to ministry in 1995 when the Ministry for Coordination of Social Affairs (MICAS) was created and finally, in 1999, it became the Ministry for Women Affairs and Coordination of Social Affairs (MMCAS). The changes were to provide room for a stronger role in coordination and policy formulation but were not accompanied by significant increases in resources. This year MMCAS received 0.07 percent of the total state budget, around USD 750 000.

After two decades of highly centralised state administration, MMCAS, as the public sector in general, is in the process of redefining its role in a new complex context that includes private sector, civil society and political parties. This takes place in the midst of two ongoing reforms: administrative decentralisation process has begun and the public sector reform is underway. The objectives of the reforms are first, to deliver better public services and promote participation and democracy at local level and second, to make the state institutions more effective and efficient. Public sector reform has barely begun and has been largely centred on Maputo.

Civil society organisations are a recent phenomena in the history of Mozambique. Most of the around 500 civil society organisations that exist today are products of the 90's. Their origins are linked to the political and juridical changes in the country in early 90s and to the influx of donors in need for local partners which took place during the same period. The first disability NGO formed was ADEMO, Mozambican Association of the Deficient, established in 1989. It was followed few years later, in 1992, by ADEMIMO, Mozambican Association of Disabled Military People. ACAMO, Mozambican Association of the Blind was formed in the mid-90s. During the second half of the decade, a growing number of other groups split from the existing organisations and formed new associations. ACRIDEME (representing mentally retarded children), ASUMO (deaf), AMOFAS (relatives and friend of the Deaf), ADESU (disabled university students), AJODEMO (disabled youth) and Nhuvuku (theatre for the disabled) exist in Maputo and many others in the provinces. FAMOD, Forum of the Mozambican Associations of/for Disabled, was created in 1999 to represent all associations of the disabled.

Conclusions and lessons learnt

General

The general conclusion of the evaluation of KEPA's disability activities over the years 1991 - 2001 is a positive one. With relatively modest resources KEPA has been able to contribute significantly to the development of the disability sector in Mozambique. It has had an important role in the formulation of the national disability policy and has contributed concretely to the promotion of human rights of the disabled, especially those of the Deaf. These are results that KEPA can rightly be proud of.

However, on the Finnish side, KEPA alone does not deserve all the credit. One of the keys to success has been the involvement of the Finnish disability NGOs in the disability sector since almost from the start. The volunteers of the Finnish Volunteer programme provided the needed link to KEPA's member organisations and their involvement together with the input of the volunteers gradually turned the scattered activities into a programme. The Partnership programme did not significantly change what was already a reality in the disability sector before the new strategy was officially adopted.

If KEPA has scored the greatest success in the field of human rights and national policy formulation, less remarkable results are to be found in improvement of the economic situation of the disabled and development of the capacity of MMCAS. The number of direct beneficiaries of the CBR programme has been small, income generating activities have mostly not been successful and the capacity of MMCAS has not developed in the disability sector. The CBR programme and FAMOD are heavily dependent on donor financing. Sustainability of the activities is unlikely without continued outside support. Reasons for most failures are due to the circumstances beyond the scope of KEPA but not all.

The strength of KEPA in disability activities has been its long-term commitment and emphasis of human rights and close cooperation as well as good relationship with its partners, both governmental and non-governmental. It has proved that with relatively small resources over a long period of time one can have more impact than with massive resources during a short period. Compared to other donors in the sector, KEPA has been rather unique in this respect. Most of the other donors supporting the sector have been involved with vast amounts of resources for few years concentrating on physical rehabilitation of the disabled.

One of the main weaknesses of KEPA seems to be that it has not reflected enough its own role in strengthening the civil society, especially at the local level. Partly this can be explained with the amount of different activities it has been supporting in different provinces, each with its different political, economic, social and cultural characteristics. The question is, would concentration not have been more realistic given the financial and human resources?

Right partners and right strategies in the changing policy context?

KEPA's response to the changing Mozambican context in the disability sector has been to continue with the government as a partner and at the same time seek new partners from the civil society. On the government side, this has meant partnership with MMCAS, principally at the central level. KEPA has supported some Mozambican disability NGOs, mainly ADEMIMO, ASUMO and ACRIDEME but a more structured partnership with the disability organisations that later on formed FAMOD only commenced three years ago. In monetary terms, FAMOD is the most

important partner of KEPA presently.

In general, KEPA has been cooperating with the right partners in the disability sector. The government was the only alternative when the disability activities started and continues to be a relevant partner should one wish to reach the disabled at the community level. The national disability NGOs are a recent phenomena, still very weak and at present with limited capacity to reach the grassroots. The role of the disability NGOs has however been growing and their cooperation with MMCAS seems to function well. KEPA has been very wise in having government and civil society organisations as partners and on its part also eased the communication between the two.

Overall, KEPA's support to disability activities has been urban and Maputo centred. Justification for directing the overwhelming part of both KEPA's technical assistance and financial resources to the central level up to present is questionable. Maputo is an island of affluent human and financial resources in the midst of acute lack of them elsewhere, especially in the north. On its small part, KEPA has strengthened the existing inequality between the different parts of the country.

Leaving aside the central level bias, KEPA's strategy in its support to the disability activities has been basically a right one. KEPA has not had "its" disability programme but has been supporting the government CBR programme in the ministry and the activities of the emerging disability NGOs. The role of the technical assistance and KEPA itself has been important in the development of the CBR programme and in the creation of some of the disability NGOs and FAMOD. It can be argued that its role has been too central but, nevertheless, KEPA has never been alone in control of the activities nor made decisions alone. Partnership as a strategy existed already before the Partnership programme. However, government as a partner and the civil society as a partner are two very different types of partners for a forum of NGOs like KEPA. Somewhat surprisingly, its strategy to cooperate with the government and the civil society is the same.

Relevance

In general, KEPA's support to disability activities have been well in accordance with both the Mozambican development policies and KEPA's basic tasks and principles at various points of time.

KEPA's disability activities have been coherent with the Mozambican development policy especially in promoting the human rights of the disabled through the government programmes and supporting the creation of disability associations to advocate the rights of the disabled. However, KEPA's activities have not been relevant to reduction of regional disparities, one of the priorities of the Mozambican development policy. Most of the technical and financial support has been directed to the central level. Opening the KEPA office in Pemba was relevant in this respect but took place only in the late 90s while it could, and should, have been done earlier.

The objectives of KEPA's disability programme in Mozambique, promotion of equity, justice and human rights, poverty reduction, strengthening civil society and democracy are among the basic values of KEPA. The disability activities aim at promoting these values in very concrete terms from national advocacy level to activities at the grassroots. Some objectives have been met more successfully than the others have but the objectives themselves are coherent with KEPA's principles. KEPA's basic task, defined to be to encourage, support and organise the Finnish civil society to participate in actions that promote global responsibility through the Partnership programme, has concretised in the disability activities. Finnish disability organisations have been actively involved in the disability sector almost for ten years thus promoting global responsibility on their part. KEPA's own support to the disability sector has been coherent with its definition of partnership: long-term equal relationship, interaction and cooperation.

In practice, the disability programme does not seem to have been very relevant from the point of view of its contribution to the development policy dialogue between the north and the south. A question remains why the wealth of experience gained on practical implementation of human rights has not been better documented and used in KEPA's own work in Finland. It would have, and has, much to offer not only on promoting human rights of the marginalized groups of the society but also on advocacy and lobbying in general.

The relevance to the direct beneficiaries has principally been in activities that have promoted their human rights, dignity and self esteem. Benefits of the changing attitudes are relevant to far greater number of the disabled than those directly covered by the CBR programme which has been able to address the concrete needs of the beneficiaries in a very limited scale.

Yet two important questions remain. First, although there may be strong participation of the partners in defining and implementing the activities, does this also reflect the participation and needs the ultimate beneficiaries? It is difficult to find evidence in this point especially when the focus is on community based voluntary work or poverty reduction. Second, have the partners KEPA, MMCAS and FAMOD reached a shared understanding what concepts like strengthening democracy or promoting gender equity or partnership, for that matter, at different levels - mean? Evidence in practical implementation of the activities seems less clear.

Results and impacts

The extent to which the purpose of the disability programme has been achieved as a result of KEPA's activities, is difficult to quantify. In part because results of the advocacy work are overall not easily quantifiable, in part because the design of the disability programme has been, and continues to be, on a very general level. Objectives and beneficiaries are not clearly defined, nor are expected results and indicators to measure the achievements.

Nevertheless, progress towards one of the main objectives, that of promoting the human rights of the disabled, has been good. The human rights of the disabled have improved considerably during the last eleven years. From being despised, marginalized and hidden members of the society, they have become accepted to have the same rights as any other person. The self-esteem and respect of the disabled has grown. The Deaf have acquired a right to language. Access to education of the disabled has improved. Clearly, the disabled still face immense problems and they are still discriminated but nevertheless, there has been a notable change in the attitudes towards the rights of the disabled. Part of the credit belongs to KEPA's disability activities.

KEPA's support to the disability sector has contributed to the formulation and dissemination of the national disability policy. Although it is impossible to quantify KEPA's impact, it has been important, even fundamental according to some Mozambican stakeholders. The technical assistance had an input in the formulation of the policy and KEPA itself helped with facilitating meetings and workshops with the MMSAC and the disability NGOs. Perhaps KEPA's role in the national disability policy is one of the best examples of

unexpected results of its activities, or at least one that was not explicitly included in the plans.

KEPA's role have been even more central in the creation of FAMOD and some national disability NGOs, especially those in the area of deafness and mental retardation. They would not yet exist without the support of KEPA and the Finnish NGOs. Not only has the number of the national disability organisations increased but their role has also augmented. KEPA has thus on its part strengthened the civil society. Partnership with FAMOD has meant various types of support for capacity building, advocacy and networking. However, the results of these activities are still to materialise in practice although already now, after few years, FAMOD is a recognised partner for the government in disability issues at central level. At the provincial level, the weak development and poor resources of the member associations together with poor communication and transparency from the central level are major obstacles to the development of provincial nucleus.

However, the heavy financial dependency of the national disability NGOs and FAMOD on the donors raises the question to who are they accountable to and also, who do they represent in the present reality of Mozambican civil society? Another important question is the absorbing capacity of the still very weak national disability NGOs.

KEPA's programme has not only had impacts on the Mozambican society but on the Finnish society as well, small as they might be. Many returning volunteers have had an active role in the development of KEPA and in its member organisations aiming at broadening the ties between the two countries and increasing general knowledge of Mozambique, and the world outside Finland as a whole. Newspaper articles and books have been written on the Mozambican experiences. Families, friends and colleagues have formed new audiences for bridge-building between the two countries. Professional skills of the ex-volunteers and development workers have improved as a result of working in Mozambique. Several Finnish disability NGOs have started their own projects in Mozambique and on their part, strengthened global solidarity in Finland. They have been active members of KEPA and advocated for the disabled not only in KEPA but in the Ministry for Foreign Affairs (MFA) as well.

Efficiency

Evaluation of the efficiency of KEPA's disability activities is not included in the ToR of the evaluation. Assessing the cost-efficiency of the activities would indeed have been a difficult task due to the general level of programme design. Furthermore, the programme has been implemented during eleven years with different types of activities that have funding from various sources and no figures exist on the total costs of the programme.

Even though an assessment of the cost-efficiency is not within the scope of this evaluation, more attention should be given in the future to monitoring the efficiency of the programmes, especially as they are almost totally dependent of donor financing. That, in general, tends to have negative implications not only on sustainability but also on efficiency. NGOs activities should not be special cases where the standard requirements for project design do not apply. This is very much the case with the evaluation of KEPA's activities, too. The first evaluation on disability activities should not be carried out only once in eleven years

Sustainability

In the present reality of Mozambique, most of the donor supported projects have little chance of being financially sustainable, at least in the short term. This is particularly true of the social sector programmes in which the majority of the beneficiaries are very poor, as is the case with the CBR programme. The whole programme budget is financed by the donors with the exception of the salaries, which are covered by the state budget. The NGOs are even more dependent on donor financing which covers both activities and salaries of those working in FAMOD, or in the disability NGOs supported by the Finnish NGOs. Mozambican disability NGOs are not supported by the state and potential sources of financing are limited. Most of the activities, and probably some of the NGOs themselves, would not be sustained should the donor support end.

Some attempts have been made in the MMCAS to include a small budget for the CBR programme in the ministry's budget but so far without results. Fund raising and income generating activities are normally included in the plans of the disability NGOs but have received little attention. Instead, the NGOs try to broaden and diversify their sources of financing by seeking new partners.

Both, the CBR programme and the Finnish supported disability NGOs, are still dependent on one or two donors.

Such dependency is in contradiction with the principles of MFA according to which aid should not create long-term dependence of foreign public support, or on the Finnish partners. Realism of the principle in case of the activities with the poorest of the poor in one of the poorest countries of the world can be questioned but if the Mozambican reality is such that those wishing to support the social sector, or the civil society, cannot expect financial sustainability, then the fact should be openly acknowledged. Decision to support any activity in these circumstances requires careful consideration and genuinely participatory planning, implementing and monitoring practices.

The question of institutional sustainability is even more crucial than normally in programmes that face serious problems of financial sustainability. KEPA's technical assistance has been directed mainly to the central level of MMCAS for the whole period but there is little evidence of the development of its institutional capacity or of its present human resources. Not only have all counterparts of the volunteers and development workers left the ministry but there has been an almost total turn-over of the whole staff. At provincial level the staff has been more stable and it is possible to verify some development of human resources and institutional capacity. Some capacities are also sustained at the community level.

It is too early to evaluate the institutional or human resource capacity of the recently created Mozambican disability NGOs or FAMOD to promote the sustainability of the results. All of them are still organisationally very weak and lack experience in almost everything related to organisational work, from democratic decision making to administration and financial management, to name a few.

Advocacy for the human rights of the disabled has been carried out in a socially and culturally sustainable manner or else the achievements in this respect could not be as visible, widely felt and appreciated. On the other hand, failures in income generating activities and with CBR programme's activists show negative implications of bypassing prevailing values and ways of binding people together.

In general, plans and programmes of KEPA

or its partners have not accounted for gender diversity nor is data gender disaggregated. Yet, studies have shown that disability has different consequences for men and women, especially in rural areas. In designing the programme, too little attention has been given to women as caregivers and health care providers at household level, or to the special risks of sexual abuse that disabled women face. The main reason for lack of gender sensitivity in the disability programme may be the insufficient understanding of the concept and how it can be made operational. This seems true even of the departments of MMCAS which is responsible for Women Affairs.

One of the main strengths of KEPA has been the way it has cooperated with its partners. The partners have been in a position to participate in the policy discussions as well as in planning and monitoring of the Partnership programmes. However, if participation and ownership is understood to mean that beneficiaries at various levels are active agents of the development, and in the last instance, responsible for the programmes sustainability, then much work remains to be done. So far partners at the provincial and district level have not had much to say in the way KEPA's disability activities are planned and financed. Direct beneficiaries at grassroots have no voice in decision making or control over the programme.

The main recommendations are the following:

General

- All partnership programmes and possible future activities of KEPA in Mozambique need to be assessed from their contribution to improvement of the human rights situation. A more focused programme is needed to make a meaningful contribution to KEPA's strategic objective of improving human rights of the most vulnerable groups

- Experience gained from the work in Mozambique with the human rights in general, and with the disabled in particular, should be better utilised in the development policy dialogue in Finland

- The central level bias of KEPA's activities is not justifiable and KEPA should decentralise its activities in the northern province of Cabo Delgado, Nampula and possibly later on also to Niassa, if resources allow. Follow-up of the activities at district and commune level requires strengthening. Activities in Maputo need to be substantially reduced.

- KEPA should seriously reflect the staffing balance of its two offices in Mozambique and also consider the option of having the main field office in Pemba instead of Maputo

- In order to strengthen the civil society with adequate measures through right partnerships, greater effort is needed for KEPA to develop its own capacity to understand the context of its activities, the specific role of the civil society especially at the local level and the role KEPA can play in developing the civil society in Mozambique

- KEPA needs to pay more attention to mainstreaming gender in its programmes. An exercise of gender analysis and planning may be needed as an introduction to the issue for KEPA's own staff and partners. Gender specific indicators and gender disaggregated data should be used in a consistent manner

- More attention needs to be given to programme design, follow-up and evaluation and to training of the staff and partners on these matters. Concentrated efforts are needed to assess the efficiency and overall sustainability of the programmes in circumstances where financial sustainability is unlikely

- There is a need to find a common understanding between KEPA and its member organisations on KEPA's role in the design and supervision of the projects implemented by its member associations. The mandate of the liaison officer to intervene when he or she sees need for corrective actions desires clarification

Continuation of the disability programme

- Development of the disability sector in Mozambique is still in very initial stage and in great need of outside support. KEPA's added value in Mozambique has been in its long term commitment in the sector and emphasis on the human rights of the disabled. Disability activities with emphasis on human rights should have a high priority also in the future Partnership programmes of KEPA in Mozambique

- KEPA should continue to work with its present partners in the disability sector also in future but their present roles need to be redefined at central and provincial level. The rationale of having similar overall strategy for the partnership with the government and for a civil society

for a forum of NGOs like KEPA merits a serious reflection

- Partnership with MMCAS at the central level is in need of critical assessment and partnership with provincial and district directorates of MMCAS should be strengthened

- FAMOD should be KEPA's partner only at the central level and creation of its provincial nucleus should not be an object of direct support from KEPA before FAMOD at the central level is stronger and the civil society at provincial level is more developed

- KEPA needs to consider new partnerships with representatives of the civil society in the provincial and district levels depending on the assessment of the specific circumstances of the area. Opportunities of supporting a local organisation in activities that require collaboration with other organisations should be considered in order to promote better communication and relationships among the disability organisations

- Technical assistance is needed also in the future but the profile of it needs careful review. There is a need to have different types and forms of qualified technical assistance

- Possibilities to contract ex-volunteers and development workers for short term assignments and professionals that are themselves disabled should be studied

- Long term technical assistance to MMCAS should only be provided for the provincial and eventually district directorates. At the central level technical assistance should be only for specific objectives and be of short term

- Collecting and processing data more systematically, and having more written information on the achievements of the disability programme especially in the field of human rights would be useful both in Mozambique and in Finland

INTRODUCTION

1.1 Background

The evaluation of the disability activities supported by the Service Centre for Development Co-operation (KEPA) in Mozambique is part of the ongoing discussion underway in KEPA on the development of the Partnership programmes in the South. As part of this discussion, KEPA decided to commission an evaluation on its disability activities under the Volunteer Programme (1991-97) and Partnership Programme (1997-2001) in Mozambique. The Volunteer Programme was evaluated in 1995, but no previous evaluation on KEPA's disability activities has been carried out. KEPA's actions in Mozambique began in 1991 after an agreement was signed with the Mozambican government. An office was established in Maputo and volunteers posted to work in governmental organisations. Since the very beginning, one of the main sectors of KEPA's support has been the development of the Mozambican disability sector. Nine volunteers worked in the social sector during the Volunteer programme. At that time also some Finnish Non Governmental Organizations (FNGOs) of disabled persons started projects in the country. Support to the Mozambican disability sector was continued within KEPA's Partnership programme that gradually replaced the Volunteer programme. Co-operation agreements were agreed with the Ministry for Social Action Co-ordination (MICAS), to be transformed into the Ministry for Women and Social Action Co-ordination (MMCAS) and Forum of Mozambican Associations of/for Disabled (FAMOD). The Finnish dis-

ability NGOs, the Finnish Association of Mental Retardation (FAMR) and the Finnish Association of Deaf (FAD) continued their activities in the disability sector. More recently, the Finnish Disabled People's International Development Association (FIDIDA) and the ABILIS Foundation have started their support to Mozambican disability Non Governmental Organizations (NGOs).

1.2 Objectives and the scope of the evaluation

The evaluation assesses the past and current performance of the KEPA's disability activities in Mozambique. It analyses the changing context in which the cooperation has taken place and KEPA's contribution to strengthening the civil society and organisations of the disabled people in Mozambique. The evaluation assesses the changes in the situation of the disabled people, focusing on the realisation of their human rights and possibilities to participate in the societal life. It also assesses how KEPA's programme for the sector has contributed to these changes, and to what extent the changes have been reflected in KEPA's programme. After having assessed the past and current situation, the report provides recommendations on the future cooperation.

Weak institutional capacity is still a bottleneck of most governmental departments in Mozambique and even more so of the young NGO sector. One of the key questions thus to analyse is to what extent KEPA has been able to build up

institutional and management capacity of its partners in the governmental and non-governmental sector. Another question is whether KEPA has been cooperating with the right partners using the right strategies? Closely related is the question of the sustainability of the actions and partnership relations, gender considerations and socio-cultural dimensions of cooperation. The Terms of Reference (ToR) in Annex 1 specify further the issues to be studied.

Although the evaluation considers the entire history of KEPA's activities in the Mozambican disability sector over the past 10 years, the focus is on the period after 1997.

1.3 Approach and Methods of Data Collection

The evaluation is based upon a review of key available documentation, interviews and meetings conducted in Finland and Mozambique, and site visits to selected provinces in Mozambique. In undertaking the evaluation, interviews were first conducted in Finland with relevant Finnish stakeholders, mainly the representatives of the Finnish disability NGOs active in Mozambique, with KEPA Helsinki staff, ex-coordinators of KEPA Maputo, ex-volunteers and development workers. Background documentation was collected and reviewed. E-mail correspondence between the evaluators and with the KEPA Helsinki, Maputo and Pemba took place on urgent issues concerning the proposal for the timetable, initial interviews in Maputo, methodology, available documentation in Finland and Mozambique as well as some practical issues.

Based on the proposals of KEPA Maputo and Pemba, a detailed work plan for the field mission was elaborated once the evaluators finally met in Maputo. The approach was to incorporate and bring forward as wide range of different viewpoints as possible. Various stakeholders and beneficiaries do not necessarily have similar opinions of the issues to be assessed, thus the approach was to involve them in the different phases of the evaluation process to the extent possible within the given time framework. The underlying principle of the evaluation is that it is not only accountable "upwards", to KEPA but also "downwards", to the direct beneficiaries.

Consequently, during the field mission, a wide variety of stakeholders were contacted. Interviews were carried out with both governmental and

non-governmental partners of KEPA MMCAS, Ministry of Education (MINED) and FAMOD - at central and provincial levels, also at district level in case of MMCAS and MINED. At the provincial and district levels, meetings were also held with the directorates of health. Meetings were held with Mozambican disability NGOs, national and international development NGOs, KEPA Maputo and Pemba staff. Ex-counterparts of the volunteers and development workers, activists of the Community Based Rehabilitation (CBR) programme and representatives of economic sector were met. Micro-projects, other working places of the disabled as well as orthopaedic and physiotherapy centres were visited. School principals and teachers and disabled students were interviewed and the team even sat in the classroom to observe the teaching of mathematics in a class of deaf students and another that had integrated a deaf boy. An important part of the fieldwork was to meet with the direct beneficiaries, disabled people themselves, their parents, friends and neighbours. The discussions took place in people's homes or yards which offered a possibility to understand better the harsh circumstances in which majority of the disabled live.

The work was carried out in the provinces of Maputo, Nampula, Cabo Delgado and Sofala and in the capital city, Maputo. Besides the provincial capitals of Pemba, Nampula and Beira, the field mission included work in the rural districts of Chiúre in the province of Cabo Delgado, Monapo in the province of Nampula and Dondo in the province of Sofala. As support to disability sector has a longer history in some of these provinces and districts than in others, it was possible to see results of the programme in its different phases. KEPA's support to the CBR programme in Cabo Delgado was cut in 1999 which gave the team an opportunity to observe effects of a sudden donor withdrawal on the programme.

Several debriefing meetings on the preliminary conclusions of the evaluation were held both in Finland and in Mozambique. The draft report was commented by a great number of people and organisations. A summary of the comments and the team's response to them are in Annex 4. The time table for the evaluation is annexed to the Terms of Reference, Annex 1. The list of people contacted is provided in Annexes 2. The evaluation was carried out by Ms Satu Ojanperä, Finland and Ms Fernanda Farinha, Mozambique.

1.4 Problems and limitations

The ToR for the evaluation were quite ambitious given the geographical and thematic scope of the evaluation and the time that the team actually had for carrying it out. Originally the evaluation was planned to take place between February June 2002, with the field mission in March. In reality the evaluation commenced only in March, few weeks before the fieldwork in Mozambique. Due to time and funding constraints it was not possible to have both evaluators working together in the definition of the evaluation methodology in advance to the fieldwork. The interviews and fieldwork had to be carried out separately in Helsinki, Nampula and Sofala. This not only meant that half of the work was done individually by one team member but also required a great amount of briefing between the team members during the short period they were working together in the midst of an intense programme.

Ideally, the evaluation would have spread over the originally planned months. This would have allowed more time for analysing the data, report writing, translating and commenting. Just as ideally, the team would have started the preparations and planning together in Helsinki and worked together during the whole field mission in Mozambique. However, feedback meetings after fieldwork in each province and at the end of the field mission in Maputo, suggest that the team has succeeded to overcome most of the problems related to scarcity of time and separate work

One of the major difficulties was to try to assess the results of KEPA's disability activities separately from those of the Finnish disability NGOs and partners in the rapidly changing Mozambican environment where other donors and local actors are also involved. KEPA has not had "its" disability programme but has been supporting the CBR programme of the MMCAS and activities of the emerging local disability NGOs and FAMOD. These have also been supported by the Finnish disability NGOs and to an extent, by some other donors. The evaluation team has tried to concentrate on KEPA's activities but nevertheless, when the report refers to KEPA's disability programme, it should not be interpreted too literally as a programme nor to consist of only KEPA's disability activities.

Lack of basic facts was a major obstacle in trying to quantify the results and impacts of KEPA's support to the disability sector. No

baseline studies exist and overall, written documentation is scarce and incidental. Most of the information is in peoples' heads, some remembering better, some less well. The national, provincial and district statistics are very poor. KEPA's own archives are not very well organised. For an evaluation that covers 11 years this is a problem, especially as no previous evaluation has been carried out on the support to the disability sector.

The fieldwork was carried out in districts where CBR programme had been implemented with the support of KEPA. The team did not visit districts or communes where CBR programme activities were not implemented. Thus, there is no base for comparing different situations and conclusions on the impact of the CBR programme itself on the disability sector are difficult to draw. Additionally, with few exceptions, beneficiaries that the team met were chosen by Provincial or District Directorates of the Ministry of Women and Social Action Coordination (DPMCAS or DDMCAS). Consequently discussions were held mainly with those disabled beneficiaries that had been helped in one way or another, or were to be helped. In most of the cases, representatives of Social Action were also present during the interviews, at times against a specific wish from the team. Additionally, mainly the representatives of Social Actions or KEPA, who were all male, did the translation. This is usually considered to be a barrier to female participation. In general, people might have spoken more freely with independent translators, and female translators, although at times criticism voiced against Social Action even in presence of its officers was quite tough and open.

During the evaluation, seven different languages were used either in the documents or in the meetings. Written material was in Finnish, English and Portuguese. Interviews were carried out in Portuguese, English, Finnish, Macua, Maconde, Sena and Sign language. Translating was needed and there is a risk of distortion and or loss of information.

OVERVIEW OF THE SUPPORT TO DISABILITY SECTOR IN 1991 - 2001

2.1 KEPA's disability activities

The ToR in Annex 1 provide an excellent summary of KEPA in Mozambique during the Finnish Volunteer Service 1991-1997 and the Partnership programme 1997-2001. It also contains a detailed description of the cooperation agreements with the partners in disability sector, MICAS and FAMOD, for the years 1997-2000 and 2001.

The expenditure for KEPA Mozambique has varied during the eleven years between 2,6 and 5

million Finnish Marks (FIM). It was at its peak in mid-90s when also the share of KEPA Mozambique expenditure of the total KEPA expenditure was around 22-25 percent. The budget has decreased steadily during the Partnership programme. Expenditures of KEPA Mozambique of the total KEPA expenditure were 14 percent in 2001. Taking the counter value of FIM in American Dollars (USD), the expenditure for 2001, 3.5 million FIM, was the lowest in the history of KEPA in Mozambique. In terms of American dollars the expenditure for 2001 (512 thousand USD) was

Table 1:
Total Expenditure of KEPA, KEPA Mozambique and disability activities 1991-2001 (Million FIM)

Expenditure/year	1991	1992	1993	1994	1995	1996	1997	1999	2000	2001
KEPA Total Expenditures (million FIM)	23,2	26,7	25,4	20,7	20,4	25,4	25,4	29,9	26,6	25,8
KEPA-Moz Expenditures (million FIM)	2,6	4,5	4,6	3,4	4,5	5,0	4,0	3,8	4,0	3,5
Moz Expenditures % of total KEPA	11%	17%	18%	16%	22%	25%	16%	13%	15%	14%
Direct Disability activity funding (million FIM)	0,3	0,8	1,1	1,3	1,8	1,8	1,6	1,3	1,2	0,7
Disability activity fund % of the Moz budget	12%	18%	23%	39%	39%	35%	41%	35%	29%	20%

barely half of that in 1995 and 1996 (1,1 million USD). In terms of FIM it was around 69-76 % of the expenditure in 1995. However, it is relevant to consider the USD expenditure counter value, since the major share of the KEPA Mozambique budget is used in Mozambique, whose economy is heavily influenced by the American Dollar.

KEPA's main financial support to the disability sector has been given through volunteer or development worker technical assistance. In monetary terms, the main emphasis of the direct¹ disability sector support has been on technical assistance. During the period 1991-2001 around 88%, or about 2,2 million USD of all direct expenditure to the sector has been for volunteers or development workers (DWs). The direct funding of partners' activities, which was started around 1996-1997, has counted for only about 12% of the total funding, or around 300 thousand USD. This funding has been directed to MMCAS, MINED, FAMOD and individual disability associations. The total expenditure for the years 1991-2001, including technical assistance (TA) and direct financial support, was 13,1 million FIM (2,54 million USD). During the Partnership period 1997-2001 the direct disability expenditure, including TA, was around 6 million FIM (1,04 million USD). Funding in 2001 was around 690 000 FIM (101 000 USD).

In terms of division of support to government institutions and civil society organisations, 77% has gone to state institutions (MMCAS, MINED,

provincial directorates of MMCAS and special schools under MINED) and only 23% to civil society organisations (FAMOD and individual civil society organisations). This has to do with the relatively high cost of technical assistance which has mainly been posted in the government institutions. Table 5 in page 43 provides figures for postings of the volunteers and development workers in different institutions and organisations.

As with the technical assistance, the financial assistance has been largely for the activities at the central level, even though a part of the funds accounted for at central level has been used for supervision travelling and training events in the provinces. About 46% of all direct financial support has been given to MMCAS and MINED at central level. Of this the MINED share stands only for 1%.

The remaining support at field level has gone as follows :

- Maputo city and province field level (FAMOD, 29%)
- CBR programmes, individual associations)
- Sofala province 21%
- Northern provinces Cabo Delgado & Nampula 3%

Disability sector advisers were a minority among the volunteers during the early years but the share of the volunteers working in the social/disability sector grew towards the end of the Volunteer programme. During the Partnership programme, KEPA's development workers

Table 2: KEPA Volunteers and development workers in Mozambique 1991-2001

Year	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
Total Number of volunteers/ Development workers	13	17	19	20	14	13	9	6	5	5	Jan:5 July:3
Number of volunteers/ development workers in the social sector	2	3	4	5	6	5	6	4	4	3	2

² Technical assistance to the disability sector has consisted of altogether 14 people, 9 of them as volunteers and 5 as development workers. Besides this long term technical assistance, short term assistance has been also provided since 1996. Most of those that came for short term assignments had worked previously in the sector as volunteers.

¹ Direct support stands for financial or technical support in which has not been considered programme management and general administration costs.

² Including Finnish staff in KEPA Mozambique office

has mainly been posted in the disability sector. KEPA's technical assistance to the disability sector has varied between in average 1-5,6 development workers per year calculated in terms of 12 months working years. The peak period was in 1995-1996. The lowest figures were accounted for in 1991 (1 full work year) and in 2001 (1,3 full work years). When the number of KEPA's development workers started to decline, FAD employed one Tanzanian adviser for the Deaf Association in Mozambique, who was followed by two short term advisers in year 2001.

2.2 Finnish disability NGOs in Mozambique

The Finnish disability NGOs input to disability activities has been crucial since almost the very beginning of KEPA's activities in Mozambique. FAMR and FAD started their support already in 1993 with small financial contributions which later on grew to be their own projects with fairly large budgets. FIDIDA began its support to the Mozambican disability sector during the Partnership programme, in 1999. Also ABILIS Foundation has been supporting small-scale projects of the disabled since 1999. Other Finnish NGOs have financed some disability activities through regional projects or through International Non Governmental Organisations (INGOs).

Finnish NGO support to disability activities in Mozambique can be summarised as follows:

Finnish Association of the Deaf, FAD has been supporting MMCAS, and its predecessors, SEAS and MICAS, as well as groups of deaf people and at a later stage ASUMO, since 1993 in the area of the deafness. Presently it has three projects in Mozambique. Organisational Support Project started in 2000 with ASUMO as a partner and will continue until 2004. The objective is to increase the opportunities of the Deaf to take active part in the society and to lead independent life by strengthening ASUMO. The Dictionary Project (2001-2004) has also ASUMO as a partner and MMCAS as a cooperating partner. The overall objective is to launch research and development of the Mozambican national sign language which in turn is to support the recognition of sign language as the mother tongue and/ or first tongue of the Deaf and legal acceptance of sign language as the official language of the Deaf. The Deaf Education Development Project with MINED as a partner also commenced in 2001 and the first implemen-

tation phase is for 2001 - 2004. The objective is to improve the educational opportunities of the Deaf through improving teachers capacity in using sign language and through modified curricula for the schools and teacher training.

The total budget for these projects is 988 632 euros in 2000-2004. FAD has employed a Zambian sign language expert and an assistant for the Dictionary project and a Finnish Deaf education adviser for the Deaf Education Development Project. The total support of FAD between 1991 - 2001 has been 4 430 000 FIM

Finnish Association for Mentally Retarded, FAMR also commenced its support to the disability sector already in 1993 through small financial contributions to the CBR programme. Cooperation was to be finished in 1999 but FAMR decided to continue at least for the three year period 2000 - 2002. The objective of the present FINNREHAB Community Based Rehabilitation and Training for People with Intellectual Disability - project is to promote equal participation and integration of the disabled in society through strengthening the disability NGOs and training of people for the disability sector in Inhambane and Sofala. MMCAS and the Association of the Parents and Friends of Mozambican Mentally Retarded Children (ACRIDEME) are the partners. During the last years FAMR has shifted its support increasingly from the government to the NGO sector. The budget share of ACRIDEME was 63 percent in 2001 while the share of MMCAS was 37 percent. The budget for 2001 2002 is USD 74 600. The total support of FAMR between 1991- 2001 has been 2 470 000 FIM

Finnish Disabled People International Development Association, FIDIDA started its activities in Mozambique with project identification of the Capacity Building of Mozambican Organisations of Disabled People in 1998. The three-year project started in 1999. The objective is to promote equal opportunities of the disabled in society through strengthening the Mozambican disability NGOs institutionally for lobbying and advocacy. Training and study visits for international networking are important parts of the project. FAMOD has been the partner since its creation. The budget for 1999 2001 is FIM 825 000. The total support of FIDIDA between 1998-2001 has been 800 000 FIM

ABILIS Foundation finances small-scale projects with a budget limit of 10 000 USD. In 1999 it supported capacity building of the CBR-programme activists in Maputo, a publication for AJODEMO also in Maputo, rehabilitation of visually impaired women through ACAMO in Beira, fishing project through FAMOD in Beira, construction of headquarters to ADEMO in Pemba and three disabled students scholarship at Associação do Povo Para o Povo (ADPP) school in Cabo Delgado Pemba. University study grants were provided for a visually impaired student in South Africa. The total budget for these projects have been USD 43 664 in 1999-2001.

Other organisations have also had some activities in the Mozambican disability field. **UNIFEM and the Federation of the Physically Disabled** have supported the Mozambican disability sector through their regional projects.

UNIFEM has a regional training project for the disabled women and the Federation of the Physically Disabled is supporting fabrication of the wheelchairs. **UNICEF Finland** has supported the CBR-programme in Manica and Zambezia. **Tampere Social Institute** has assisted MMCAS in training and curriculum development.

The total funding for the Mozambican disability sector for 1991 -2001 can be estimated to have been roughly 21 million FIM. Around 60 percent of it has been financed by KEPA and the rest by the Finnish disability NGOs. The share of the Finnish disability NGOs in the total funding has increased quickly especially in 1999-2001 in relation to KEPA's funding. For example, in 2001 the total budget of the Finnish NGOs for the projects in the disability sector was around FIM 2 630 000 while KEPA's direct disability sector support was around FIM 690 000.

Table 3:

Estimate of the total disability sector funding by KEPA and the Finnish Disability organisations in 1991-2001

<i>Organisation</i>	<i>FIM</i>	<i>FIM</i>
KEPA 1991 -1996	7 020 000	
KEPA 1997 -2001	6 100 000	
KEPA total		13 120 000
FAD	4 430 000	
FAMR	2 470 000	
FIDIDA	885 000	
ABILIS	280 000	
FNGO total		8 005 000
Total		21 125 000

Note: the table is based on scattered information from MFA, the NGOs and KEPA. The figures especially during KEPA's Volunteer programme are rough estimates calculated on the basis of the number of volunteer months using the average costs of FIM 315 750 per volunteer year.

During the Volunteer programme, cooperation of the Finnish disability NGOs with KEPA was close and the volunteers served as a functional link to the Mozambican organisations. The Volunteer programme did not form a coherent programme even in the social sector but the activities of the volunteers in the disability field gradually turned it to be one with the involvement of the Finnish NGOs. Partnership programme in the disability sector was thus well on its way already before KEPA officially changed its strategy.

From the point of view of the FNGOs this seems to have been the ideal role for KEPA. The organisations received the services they needed and could contribute their expertise in disability issues to KEPA, which did not have it. KEPA's present role is found to be more problematic. The partnership programme as such is not questioned but the disability organisations do not agree with the trend to finish technical assistance. The administrative services of KEPA Helsinki and Maputo have been especially important for the smaller FNGOs that do not have resources to manage technical assistance that they continue to consider important part of the support to the disability sector.

In general, the relationship with KEPA has lately been weakened, according to the member organisations active in Mozambique. Some of them were rather frustrated with the present situation in KEPA. *"Where does KEPA define its priorities"*, *"Does commitment of the member organisations have any value for KEPA"* and *"Are the media-sexy issues the only ones worth KEPA's attention"* are some of the questions that were posed during the interviews with the Finnish disability NGOs.

The organisations feel they have to take more responsibility now for the administrative and even liaison services which KEPA provided earlier. They ask whether that is the role of the member organisations and whether they are strong enough for it. Without physical presence in Mozambique it is difficult to have sufficient contacts and cooperation with the partners.

Evaluation of the member organisations' projects is not part of this evaluation. Nevertheless, the design and implementation of some of the projects supported by the Finnish NGOs would have benefited from support and supervision. Thus the question is not only what services KEPA's member organisations wish to have from

KEPA. It is also a question of KEPA's role in the design, implementation and monitoring of the projects financed by its member organisations. At present there seems to be little room for dialogue between KEPA and its member organisations on the problems related to projects. If, for example, the KEPA liaison officer does not have mandate to intervene, when he or she sees need for corrective actions, one can ask what is the function of "liaising", or of the officer for that? Clearly, there is a need to find a common understanding between KEPA and its member organisations on these issues. The present situation is not conducive to the improvement of relations between KEPA and its member organisations nor to the development cooperation projects supported by the Finnish disability NGOs.

2.3 Previous evaluations and the Disability programme

KEPA's Disability programme as such has not been evaluated but some of the previous evaluations carried out either on KEPA, on the bilateral development co-operation between Finland and Mozambique as a whole or on culture in Finnish development cooperation have included observations on the disability programme. FAD has carried out an internal evaluation of the Deafness programme and the CBR programme has been evaluated³.

The major evaluation carried on KEPA so far, that of the Finnish Personnel as Volunteers in Development Cooperation, was commissioned by the Ministry for Foreign Affairs (MFA) in 1994. The evaluation was carried out in Mozambique, Nicaragua and Zambia in 1995. Overall, the results on the volunteers programme in Mozambique were evaluated more positive than in the older programme countries of Nicaragua and Zambia. Although the role of individual volunteers at national level was considered marginal, in specific areas, such as social work among the disabled, they were seen important for the development of the sector. The evaluation report quotes the KEPA field office which *"feels that a niche is found in the social sector, where the national capacity is considered very weak and Finnish Voluntary Service's (FVS) technical assistance to the development of various support mechanisms and training of personnel in the area of deafness and other disabilities is crucial for the development of national policies and practical inventions"*⁴. The host organisations considered the contribution

of the volunteers positively and the interaction between them and the field office was reported to be good and effective. To a varying degree, the volunteers and ex-volunteers felt that they had been able to contribute positively.

The evaluation acknowledges that the three countries differ substantially but the conclusions and recommendations are not presented separately for Mozambique, Nicaragua and Zambia. Consequently, somewhat at odds with the findings of the evaluation in Mozambique, the team ends up concluding that *“the FVS programme is of limited relevance and the present form of organisation detracts from potential benefits. On the other hand, the programme makes an appreciated contribution at the micro scale and it does provide a worthwhile experience for the volunteers. It is the view of the evaluation team that the purpose, objectives and modality of the volunteer of the volunteer programme need to be determined and agreed anew between FINNIDA and KEPA based on a shared analysis of the current situation.”*⁵

The thematic evaluation on cultural dimension in Finnish development cooperation carried out 1996-97 had Mozambique as one of its case studies. The KEPA Sign Language Project was among the projects assessed in Mozambique. *“It has substantially helped the integration of deaf people in general, and succeeded in making them participatory members of the civil society at large”* the evaluation team concludes and describes further how during the process of civic education for the first multi-party elections of 1994, SEAS organised, through the Sign Language project, a meeting for groups of deaf people. They started to designate signals for concepts like “vote, elections and candidate” for which no signs had previously existed. *“This was a major breakthrough. The deaf got into contact with the world and a subject very important to them. They were able to participate in an event everybody was talking about, and they could do that in the same way as any other citizen. The project had become involved in issues of civil rights”*⁶

The internal evaluation on the Deafness programme carried out by FAD in 1998 points out that one of the problems for evaluating the programme was the diversity of objectives for the CBR and the Deafness programme. The objectives had changed several times, and each partner the ministry, FAD and KEPA had somewhat differing objectives which overall have not been defined

clearly in terms of expected results. Additionally, no distinction has been made between long term and short term objectives. Nevertheless, the team observes that compared to the situation in the beginning of the programme, many positive changes could be verified. One could hardly speak of the deaf community in Mozambique when the programme started. Consequently the creation of the sign language was in the very beginning of its development one does not have a language if there is no community that uses the language. Two schools for the deaf existed, one in Beira, another in Maputo but they used the oral method. A great majority of the deaf of the country did not have access to these schools.

Improving and increasing special education as well as employment opportunities for the deaf continues to be a problem, according to the cited evaluation, but the programme has had positive results especially in the promotion of human rights. The consciousness of the society, MICAS, family members and the deaf themselves has increased on deafness and on the importance of the Sign language. The deaf groups have been strengthened and they have become more numerous, also their activities have intensified and increased activities. The programme has contributed towards the integration of the deaf in the society. The change, compared to the situation in the beginning of the programme when the status of the deaf was very low, is remarkable, the evaluation concludes.

The MMCAS commissioned an external evaluation on CBR programme which was carried out in the beginning of 1999. Three provinces Cabo Delgado, Zambézia, Inhambane and Maputo city were included in the fieldwork. Although the evaluation is only partly related to the KEPA's support to the CBR programme, its main conclusions are worth to summarise here.

One of the principal conclusions of the evaluation concerns society's attitudes: the programme has had a role in changing the attitudes towards the disabled, especially those towards disabled children. The role of the disability NGOs has been more in changing the attitudes towards adults. The team concludes that disabled children are being integrated at schools more than previously and that the programme has been able to reach the poorest of the poor. The programme was not yet community based and the communities are too poor to sustain a programme of this type without some help. It should also be recognised, the report

points out, that communities are not homogenous and consequently cannot all be treated alike. Furthermore, activists of the programme are not chosen by the communities but are considered to belong to Social Action. Their expectations to be compensated are not met nor is their supervision sufficient. The role of MMCAS in co-ordinating and innovating activities should be strengthened. Equally, financial management and supervision needs better control, transparency and monitoring, according to the evaluation.

Recently finalised evaluation of the Bilateral Development Cooperation Between Mozambique and Finland notes that one of the key areas of KEPA's support has been with physical disability, largely because of the influence of some Finnish member organisations of KEPA which were themselves focused on the disabled. In addition, this was an area within the social sector that received little support from other donors. According to the considerations on KEPA's activities, the evaluation concludes that the CBR programme has *"in particular led to interesting results in terms of reducing discrimination against the disabled and their integration into community life"*⁷. The strengthening of FAMOD, on its part, has permitted the organisation to develop its co-ordination work with its members and lobbying capacity, which improves its access to the media and the government institutions. One result of this increased lobbying capacity has been the approval in 1999 of the national policy for the disabled. *"KEPA's work in the area of disability has been of great value in both empowering the disabled and in making society more aware of their special needs."*

The evaluation also concludes that KEPA has maintained technical assistance in the department for disabled people in MMCAS because the ministry, like other organisations working in this area, lacks capacity to deal with specific technical issues related to elaborating policy for the disabled and that according to the staff of MMCAS, that has allowed for improvement in the quality of the performance which was very weak and poorly supported. According to the department, there is a real absence of people in Mozambique qualified to provide specific technical training for and with in respect to the disabled.

KEPA's weakness, according to the country programme evaluation, is in respect of its presence in the policy development area. This is seen to be related to the fact that the Mozambican civil

society is itself still searching for ways of contributing to policy development on one hand, and to the "timidity" of KEPA itself on the other. The results of its work are not disseminated well and consequently are not well known.

³ Rytönen, P, Mikkola, A and Gomes, F, 1998 Evaluation of the Deafness Program, April – July 1998, Colaco, J, Cassimo, F and Zinkin, P, Avaliação do Programa para Pessoas com Deficiência Baseado na Comunidade, para o Ministério da Coordenação da Acção Social, 1999

⁴ Evaluation of the Bilateral Development Cooperation Between Mozambique and Finland, 2002, p.100

⁵ Ibid.p.216

⁶ Vasko, V, Kjisk, H and Salo-Lee, L, Culture in Finnish Development Cooperation. 1998, p 54

⁷ Vasko, V, Kjisk, H and Salo-Lee, L, Culture in Finnish Development Cooperation. 1998, p 54 Evaluation of the Bilateral Development Cooperation Between Mozambique and Finland, 2002, p.100

THE MOZAMBICAN CONTEXT

Mozambique, in the Southern African region, has gone through a series of broad changes, both in the socio-political and in the economic arenas, during the past decades. It became an independent country in 1975, after a 10 years period of war against Portuguese rule. A socialist type of government, within a one-party system, highly centralised and bureaucratic, controlled much of political, cultural, social and economic life, during the first 15 years. The system provided little or no room for private and independent initiatives, which has hampered the development of the private sector in the economy and the growth of civil society in cultural, social and political life. From early 1980's, a civil war destroyed much of infrastructure, economy and community life, until a peace agreement was signed in 1992, after changes in the political and economic system were brought to law.

A new Constitution in 1990 and subsequent legislation provided the legal framework for multi-party parliamentary political system, independent media, civil society organizations and private intervention in economy. Between 1992 and 1995, around 4,5 million Mozambican refugees, living in neighbouring countries or internally displaced, returned to their communities, more than 90,000 soldiers were demobilised, general elections were carried out, a multi-party parliament established and private sector emerged in economy and other areas of social life.

Normalisation of political life during the first half of 1990's created the basis for development. The burden of civil war, inadequate policies, and

extremely poor levels of development, especially human development and social services, began to be addressed by government and other actors' programmes.

Dependence from international co-operation funding is high: 50% of government budget countrywide is still coming from foreign co-operation in 2002. In some sectors, support from the international community provides crucial funding: 92% of surgical and medical equipment in 1997 were funded by foreign aid; as were 44% of the total budget for the education sector nation-wide. The external debt relief has allowed Mozambique to begin to pay for activities that were before totally dependent on foreign aid (example; acquisition of medicines for the public health sector).

There is no tradition of Government supporting private non-profit sector activities, even those that address government development priorities. The implication is that, together with reducing its role in the direct provision of services, government has to learn how to work with NGOs. The same is true for civil society actors, which have to learn how to work in an environment where government is changing its role.

3.1 Disability and the disability sector

Little is known about the situation of persons with disabilities in Mozambique. The last census attempted to collect data on this, but final figures fall behind specialised international organisations estimates. The World Health Organisation esti-

Box 1:

MOZAMBIQUE, CHALLENGES REMAIN

Mozambique has a population around 17 million inhabitants, living mostly in rural areas (70%)⁸, 52% are women and around 45% younger than 15 years old. Administratively, the country is divided in 10 provinces and the capital city.

Mozambique is one of the poorest countries in the world - with a gross domestic product per capita of 204 American Dollars (1999), two in every three Mozambicans (around 70%) were living with less than 40 cents of a dollar a day, in 1997. Less than 10% of the economic active population has a formal employment⁹, and minimum monthly salary is around 26 American dollars in 2002, and has been decreasing during the last decade. The human development index for the country is 0.341 and was the 7th lowest in the world in 1998¹⁰.

Half of the Mozambican population has yet no access to modern health care and preventable infectious and parasitic diseases are widespread. Additionally, AIDS is spreading (12.9% countrywide) with higher HIV infection rates in the central region of the country. The epidemic is expected to shorten life expectancy in the next decade and to decrease qualified labour force. An estimated 17% of the teachers will die from AIDS in the next 10 years. Illiteracy is among the highest in Africa (around 61%) and 1,4 million children between 6 and 12 years have not had access to school this year¹¹. Only around 1% of the Mozambican population has any technical or high education levels¹². The public sector is still the largest provider of health and educational services, and often, the single provider in many rural areas.

Macro level indicators of economic growth have performed well starting middle 1990's. However, a very low departure point and a short period of economic growth have not yet provided visible results in the everyday life of common citizens, especially rural citizens. Inequity is a critical issue in the development of Mozambique, due to wide disparities based on gender, geographic region (south, centre and north) and place of residence, among others.

⁸ Data from the 1997 Census

⁹ Data from the 1997 Census

¹⁰ National Human Development Report 2000.

¹¹ Link. Informe Fim de Semana, 5-6 May 2002

¹² National Human Development Report 2000.

mates that between 7 and 10% of underdeveloped countries populations suffer from some disability, but the census counted only 288.663 citizens with disability, in the 1997 (which represents around 2% of the total population). A survey on children's situation in one northern district in Nampula province showed similar figures (2%) for children¹³. There is no reason to think that rates are lower in Mozambique than in other under-developed countries: long periods of war (1964-1974 and 1978-1992), disease pattern, very poor health care, traffic and other accidents would suggest high rates of disability in the country. Differences may be due to methods of data collection and poor training of interviewers: in the census individuals were asked to report whether they had any disability while methodology in the other study could not be assessed.

The census presents disability as a male, rural and adult feature. More men than women reported disability (54% of disabled persons are men, while men are 48% of the total population), as well as more residents in rural areas than in urban areas (82% of disabled persons live in rural areas, while rural citizens are 70% of the total population). Also, individuals younger than 15 years are 18% of the disabled (while they are 45% of the total population) and most disability is physical (77%). This pattern is generally compatible with information collected during the fieldwork: most disability is attributed to war and disease and physical disability is predominant. Women are more likely to be incapacitated for work than men: 13% of the disabled women and 11% of men did not work because of disability.

Incapacity for work is also higher in urban than in rural areas, according to the 1997 Census: 17% of urban and 12% of rural women cannot work due to disability and 15% of urban and 11% of rural men is in the same situation. These figures and patterns may suggest that better health care in urban areas promote immigration of disabled people to urban centres and allow more seriously disabled to survive, but also that work demands in urban areas are more difficult to meet for disabled people.

In policy terms, two main instruments provide the framework for programmes and activities: the Social Action Policy and the Policy on Persons with Disability. The Cabinet in 1998 approved the Social Action Policy, as the instrument to frame the intervention of the MICAS. It is a general document defining specific objectives, strategic

principles, priorities, and the roles of government and other actors in the field of social action, including the area of disability. Its potential to be effective is weak, especially because it is not linked to resources and specific programmes. In the area of disability, the Social Action Policy states that government promotes prevention programmes, public education to address prejudice against the disabled, access and integration in education, and training for and employment programmes for disabled persons, among other objectives.

The Policy on Persons with Disability was approved by the Cabinet in 1999 (Resolution NR 20/99, dated 23 of June 1999), and it is now being operationalised, through specific regulation. It establishes the intentions of government to lead society to understanding disability and to promote the social integration of persons with disability. Goals are defined for the areas of legislation, education, health, social action, employment, finances and taxes, urbanisation and building, transportation, culture, sports and recreation, and media. The document defines the roles of government and civil society, and establishes a co-ordination body widely representative, whose members had already been appointed but that is not yet fully operational. Responsibility is given to civil society organizations to lead the process of promoting and defending the rights of the disabled.

In terms of actors, three types of actors intervene in the disability sector: government, civil society organizations, specially associations of disabled persons, and international organisations, both international NGOs and foreign government and multilateral aid agencies.

3.2 Government

The MMCAS is the government main actor in the field of disability. This ministry has gone through a number of organisational changes. During the first 15 years after independence, the social action sector functioned within the Ministry of Health (MISAU), as a National Directorate for Social Action. In 1990, the National Directorate became the SEAS, reporting directly to the Cabinet. However, its functions remained similar to the previous phase: SEAS continued to implement programmes and ran a number of social welfare institutions, especially for childcare. In the second half of 1990's the institution became, first, MICAS (in 1994) and later, MMCAS (1999).

These changes intended to provide room for a policy role but were not accompanied by significant increase in resources. MMCAS goals are to play a role in the eradication of absolute poverty, to facilitate the emancipation of women, and to promote the integration of disenfranchised social groups in the process of development in order to guarantee social stability.

The MMCAS defines the disabled as a vulnerable group. Its responsibility is the co-ordination and promotion of assistance to the group, in order to enhance their well being, through improved living conditions and increased access to opportunities for the development of the individuals capacities. The government Action Plan for the Reduction of Absolute Poverty (PARPA) prioritises the defence of the rights of the targets groups and defines the establishment of associations of vulnerable groups as a measure for the above. Within MMCAS, the department of persons with disabilities, violence and other traumas is the technical body responsible for the disability sector. Presently, the department has a staff of 6 professionals.

The MMCAS, as most government ministries, is represented at the provincial level by provincial directorates, led by provincial directors, who are members of government in that particular province. Representation at the district level varies. In some districts, but not all, representations of the Ministry were established. In Cabo Delgado and Sofala, there are representations of the MMCAS in 8 of 17 districts and in 9 of 13 districts, respectively. It is at the level of district that most programmes are co-ordinated. In the provinces visited for the evaluation of KEPA, CBR programmes existed only in districts with a MMCAS representation. Number of staff in those representations vary in Chiúre there were three staff and in Dondo six. At the provincial level, the sector of "persons with disabilities, violence and other traumas" was composed by two professionals in Sofala, two in Cabo Delgado and in three in Nampula. Staff turnover at district and provincial levels is lower than in the central level.

Funding and human resources allocations to the social action sector have been extremely poor. The MMCAS has consistently received less than 1% of the total government budget and it is not expected to increase its share in the next few years. This raises serious questions: one is the sustainability of the disability programme in

the next few years; the other is the role of state in the provision of services to citizens, in this case, the poorest citizens. The MMCAS received 0.07% of the state total budget in 2002, around \$750,000: 66% were spent in personnel, 19% in maintenance and other services, 9% in transport and travel, and 6% in office supplies and similar. Thus, state funds are spent basically to keep institutions functioning. Programmes do not usually receive state funds and are totally dependent on international co-operation. Human resources are also insufficient and little qualified. There aren't university-trained personnel outside Maputo City, and most middle level staff (basic education plus three years of professional training) is working in the provincial capitals. At the district level most staff is trained at the basic level. INGOs working in social action activities need to define their own intervention in the disability sector within this context.

Other government departments play a role in the disability sector. The most relevant are MISAU and MINED, that have since long developed some activities in the area of disability. The first has a mandate in the area of physical rehabilitation of the disabled, carried out through hospitals and orthopaedic centres that provide auxiliary means and training for its use. The Ministry of Education has an overall responsibility to ensure education for all children. A pilot programme, "inclusive school"¹⁴, is addressing the needs of the disabled. This programme and the rehabilitation of four schools of special education and the building of three new ones are integrated in the PARPA.

Other ministries' concerns with disability are more recent and emerged from the approval of the policy on Persons with Disabilities. These are the Ministries of Labour (MTrab), Youth and Sports (MJD), Public Works (MOPH), and Transports for which the above Policy defines specific responsibilities and tasks, in order to ensure that the situation and interests of disabled persons are taken into account in programmes. However, most of these responsibilities were not yet put into the form of programmes in order to be implemented.

Government programme activities in the area of disability are only a few. The MMCAS develops the CBR programme in every province. The programme began in 1993, but it is yet far from reaching a significant number of persons with disabilities. Its target for 2001 was to attend

¹⁴ Inclusive school is a MINED programme aimed at promoting integration of marginalised children in regular schools

Table 4:
CBR Programme (1993-2001)¹⁵

<i>Provinces, CBR beginning data</i>	<i>Proportion of districts with activities</i>	<i>Number of trained activists</i>	<i>Number of disabled identified</i>	<i>Number of disabled attended'</i>
Cabo Delgado, 1993	3 out of 17	15	2046	401
Niassa, 1993	? out of 16	?	1586	988
Nampula, 1995	13 out of 21	49	1739	541
Zambézia, 1993	? out of 17	?	1827	886
Tete, 1995	? out of 13	18	503	361
Manica, 1995	? out of 10	10	695	144
Sofala, 1995	13 out of 13	?	332	?
Inhambane, 1995	14 out of 14	?	614	508
Gaza, 1993	? out of 12	?	1638	?
Prov. Maputo, 1995	7 out of 8	32	789	172
Maputo City, 1993	6 out of 6	80	2681	637

Sources: MMCAS for Niassa. Zambézia, Tete, Manica, Sofala, Inhambane e Gaza; Provincial Directorates for the other provinces.

¹⁵ Data in the table should be read with caution. Different sources, and same source at different moments, have provided different figures for the same indicator. Poor information system is clearly a problem within the CBR programme.

5.800 persons within the five-year government plan (2000-2004) that planned to target 33.500 persons for the whole period.

Two other programmes directed to disabled persons are carried out by MMCAS. The first is the System of Information, Reference and Transport, aiming at identifying physically disabled persons, providing transportation, accommodation and means for physical rehabilitation. The second is an institutional support programme to address the Ministry need to increase its capacity in the area of legislation and regulation. Finally, this ministry continues to administrate the existing four special education schools located in Maputo and Beira: two schools for the deaf, one

for the blind and one for children with mental retardation and learning problems.

As described above, the Ministry of Health conducts activities in the field of physical rehabilitation through health facilities, in particular orthopaedic centres and physical medicine and rehabilitation wards. There are on average one orthopaedic centre per province, usually in the capital city, where physical medicine and rehabilitation wards are also set. Disabled persons are required to travel and stay in the city during the rehabilitation phase, sometimes at their own expenses, which is not affordable for many¹⁶, besides other costs.

¹⁶ In Chiúre the evaluation team met an orphan teenager student with club feet that had gone to the capital city in January in order to obtain shoes and had to go back again because he did not get them. Because of his absence in Chiúre during school registration, he missed his place in the hostel for students and had to walk every day from his uncle's home to the distant secondary school.

The Ministry of Education implements the pilot experiment “inclusive schools” in a few schools in eight provinces (all, except Cabo Delgado, Niassa and Manica), to test approaches to the integration of children with diverse types of problems in regular schools. The programme includes a component of teachers training, and has been object of great demand from communities. No other government programmes in the area of disability were identified during the evaluation.

One constraint to government intervention, not particular to the disability sector, is the weak definition and implementation of its changed role. After two decades as the only and highly centralised actor in many areas, government is redefining its role in a more complex context that includes private sector, civil society organizations, and political parties. This process is part of the public sector reform, a government programme for the next 10 years, designed to address its many weaknesses. High centralisation, bureaucracy and inefficiency, widespread corruption, poorly qualified civil servants, weak accountability towards citizens and Mozambican organisations are government features frequently criticised by the public and Mozambican and international organisations. Main components of this reform are: rationalisation and decentralisation of services providing institutions and processes; improvement in the policy making and monitoring roles; professionalisation of civil servants; public finances management and accountability improvement; and good governance and anti-corruption measures. The first phase of the reform is underway (from 2001-2004) and consists of activities to create the conditions for the reform and pilot interventions in selected areas and themes. A few interventions of immediate impact are also part of the public sector reform, such as the establishment of patient’s offices and the posting of written information on the prices of services in all health facilities; the approval of ethic and deontologic codes for civil servants in leadership positions; and the definition of mechanisms for the public to present claims and receive answers at the permanent secretary offices, etc.

3.3 *Civil society*

Civil society is defined here as the sphere where citizens organise themselves, in a volunteer manner, to address problems important to them. It includes a large number of organizations: community based groups (networks of neighbours for mutual support in particular situations, etc.); religion-based groups; interest groups, such as women, disabled people demobilised soldiers associations; development and services providers organizations; professional and business associations and trade unions; human rights, civic and advocacy organizations; foundations; fora and networks of organisations; etc. Some tend to include in this list, organisations attached to political parties such as women and youth leagues. In Mozambique volunteer non-profit organisations have to register either as associations (membership organisations) or as foundations. To register as an association, the law requires a minimum of 10 members, a long bureaucratic process requiring documentation produced only in Maputo, and paying for process costs around 800 American dollars.

Civic society organisations (CSOs) are recent phenomena in the history of Mozambique. Estimates of the number of CSOs are around 500 without including unregistered community based organisations. Foundations are only three. Due to historical reasons, both before and during the first years of independence, these types of organisations were not allowed to exist or operate in a very difficult environment: their role was not recognised and they risked being accused of illegal political action. It is only with the political and juridical changes of the 1990’s that CSOs began to develop. Its origins are linked also to the large movement of international aid to Mozambique and the need for local partners in the process of development aid. This complex set up for the CSOs is one cause for some of the present difficulties these organisations face when establishing themselves as socially legitimate institutions, in particular when it comes to accountability. At this moment, NGO community tend to be that to donors and not so much to their members and beneficiaries.

Ideally, disabled persons associations are the most relevant actors in the area of disability within civil society, but other NGOs may play a role in providing services to and paying special attention to the needs of disabled within its beneficiaries. In Mozambique, associations of disabled people are

estimated to be around 20. Among other types of NGOs, only the Mozambican Red Cross carries out community programmes that include special attention to the disabled. Concerns with disability were not found among other NGOs, both international and Mozambican, that operating in the development field.

ADEMO, the Mozambican Association of the Disabled was the first disabled people organisation to be established in 1989¹⁷, and it is by far the most developed. Initially it intended to include and address the needs of all disabled, but soon members felt the need for more specialised organisations, and ADEMIMO, the Mozambican Association of the Military Disabled was the created in 1992. Both organisations claim a membership of large thousands of disabled individuals: ADEMO 65,000 and ADEMIMO 10,000. These were followed by ACAMO, the Mozambican Association of the Blind and Visually Impaired, founded by middle 1990's, presently claiming around 1,000 members.

During the decade's second half, a growing number of other members' groups split within ADEMO, as programmes began to address those groups, thus increasing awareness and the need for a particular space within the movement of disabled persons organisation. Presently, the following are other organisations of disabled persons, relatives or friends based in Maputo City, the groups they represent and stated membership: ACRIDEME (mentally retarded children, 60 members), ASUMO (deaf, 196), AMOFAS (deaf, relatives and friends, 362), ADESU (disabled university students, 65), AJODEMO (disabled youth, 700), AMAISD (social integration of the disabled, 50), Nlhuvuku (theatre for the disabled, 12). Other groups were found out during the fieldwork in the provinces, namely ALEMO (Leper) in Cabo Delgado, ORDENA (disabled reintegration) and ATAMI in Nampula, and the Association of Disabled Peasants in Dondo, Sofala province. This may mean that there are more organizations than those known in Maputo.

The need for a disabled persons associations union or forum has been discussed since the first split. An ADEMO's newsletter, dated back to 1994, brings the issue to the public and cites insistence from SAFOD and the need for international representation as a factor for a union. However, the idea did not become reality until late 1990's when KEPA and FIDIDA began supporting the organisations in the establishment of FAMOD. FAMOD started informally in 1998,

has pursues the following main objectives: to bring together and represent its members, to promote self sustainability of its member associations; to advocate disabled rights and interests; to make public statements on issues related to disabled people, in particular education and training of disabled people. The need for collective action to strengthen positions and attain common objectives is felt by disabled associations in various places, shown by the establishment of a Disabled Forum in Dondo District, in Sofala province, through the initiative of and led by the local representation of ADEMIMO.

In general, most associations are at the initial phase of their development, still struggling to define their role and internal organisation and functioning. For many members, their work in the association is the first experience in collective action. Frequently, members have little formal education due to not having had access to education when children. Most groups are not yet registered as associations and have no office or staff. KEPA, Finnish associations or the Finnish co-operation pay the only existing staff for some. Funding is scarce and directed exclusively, in many cases, to field activities. It is difficult for associations to get funds for core costs of the organisations, which do facilitate the establishment of these groups as CSOs. Fundraising capacity is poor in most organisations that have very little contacts outside their main funding or supporting agency.

FAMOD, the forum of Mozambican disabled associations suffers from the same problems as the other NGOs on the one hand, and of the problems specific to fora of NGOs on the other. FAMOD has been most successful in advocacy, in promoting exchange of experiences with foreign organisations, and in assisting and coaching member organisations in Maputo in solving their problems. However, there is a danger that FAMOD compromises the quality of its work in spreading to several provinces when it itself is still in the beginning of its organisational development. Dissemination of information and communication, key objectives for fora organisations, are still in very initial stages and capacity building activities have been carried out with resources from Maputo, and do not promote the use of locally available resources.

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Please note that these dates relate to the informal recognition of associations. Legal registration was usually completed a few years later for each organisation.

3.4 *International organisations*

A relatively small number of international organisations have been active in the field of disability in Mozambique. Funding, in particular after the end of the war and the normalisation of life, is also short and disperses. The evaluation team identified the following organizations, besides KEPA: Handicap International (HI), Power, Landmine Survivors Network (LSN), World Rehabilitation Fund (WRF), but was not able to collect much information regarding funding. Organisations are in transitional phase: the first two have changed types of activities and donors, and the last two are beginning its operations in Mozambique.

Handicap International began working in Mozambique fifteen years ago. During the first years it worked mostly in the field of physical rehabilitation, building and establishing orthopaedic centres, purchasing rehabilitation materials, and training professionals in the field. Additionally, HI gave some support to associations of the disabled, through funding and technical assistance. At the end of the war, it became involved in public education, including education of children about landmines and later, in institutional support to MISAU. In both areas, Mozambican institutions (MISAU and the Institute of Demining) took over HI programmes. For the future, HI intends to increase its support to disability CSOs, through its forum, and has no plans to support directly individual associations.

Power started its activities in Mozambique seven years ago, managing four orthopaedic centres in Beira, Maputo, Nampula and Quelimane. Later on these centres were handed over to MISAU. Power also implemented, in partnership with MMCAS, pilot projects to help disabled people's access to orthopaedic centres: district directorates provided money for transport costs to the transit centres and for food to disabled persons in 10 districts in Sofala and Zambézia. The project lasted 15 months and did not continue for lack of funding. Another activity was the support to an ADEMO vocational training centre in Malhangalene, Maputo. The plan is to have there a bakery school, carpentry and metal workshop, and possibly also a workshop to assemble and repair wheelchairs. A new project, with funding from the European Union (around 850,000 USD) for the next four years, is planned to start in May 2002. It intends to promote exchange visits between European disability organisations

(5) and Mozambican disability organisations (10-15), posting personnel in Mozambican organisations and sending Mozambicans to work for short period in European NGOs.

Other organizations with broader mandates play also a role in disability, mostly through funding programmes. UNICEF; several Save the Children organisations; Oxfam, organisations such as Novib, ICCO, Ibis; Trocaire, and COCAMO, are among these. MS has also provided support through technical assistance. Additionally government aid agencies, particularly the French, the Portuguese, the Irish and the Finnish Co-operations have supported disabled persons organisations and programmes for the disabled. A characteristic of the support of these agencies is that disability is not their main concern and support has been provided when related to major concerns of those organisations.

Finally, Finnish Associations in the disability field are a particular group of international organisations. As members of KEPA, they have been able to provide support to Mozambican associations in a more integrated way. In a number of cases, needs for support identified by KEPA workers have been the basis for posterior projects by FNGOs, that build on the previous work done by KEPA. FNGOs have promoted South-South co-operation, which included visits to other countries for exchange of experiences, and bringing experts from Southern countries to work in Mozambique. FIDIDA played a role in reducing the isolation of Mozambican associations within Southern Africa, through increasing co-operation between FAMOD and SAFOD. Most Finnish organizations working in disability in Mozambique are of the same nature than Mozambican associations, i.e., they are associations of disabled people in Finland. This is not true of the other international organizations operating in Mozambique and gives FNGOs a particular place in co-operation in the disability sector.

RELEVANCE OF THE DISABILITY ACTIVITIES

Relevance of KEPA's disability programme will be assessed regarding its coherence with the Mozambican development policies, the needs of the beneficiaries and the basic tasks and principles of KEPA.

4.1 Coherence to Mozambique's development policies

The main objective of development in Mozambique is the substantial reduction of absolute poverty. Low education levels of the economic active members of the households and lack of employment opportunities are amongst poverty determinants in Mozambique. Within this general objective, the present five years plan (2001-2004) defines the rapid and sustainable economic growth and the consolidation of peace, national unity, justice, and democracy as objectives as well. Particular concerns are the development of rural areas and to the reduction of regional (geographic) disparities. In the social action area, development programmes aim at the promotion of the vulnerable groups rights, in particular, the rights of children, women, people with disability and the elderly. Principal measures for this are education, information and dissemination of activities regarding the rights of those groups and the establishment of associations amongst people in the vulnerable groups.

KEPA's disability activities are coherent with Mozambican policy. It supports government activities to improve the rights of the disabled, promotes the establishment of associations amongst persons with disability and includes activities to reduce poverty, especially through funding micro-projects among disabled groups. Chapter 6 will show that the main impact of sup-

port given by KEPA to Mozambican partners is the increased awareness about and development of the human rights of the disabled, both among these and in the community at large. KEPA has supported activities to disseminate the rights of the disabled. It has funded the only two workshops carried out to disseminate the Policy on Persons with Disabilities and facilitated meetings among disabled persons associations, to discuss the issue and promote action on that. Additionally, KEPA provided support for a few studies on the situation of disabled people's human rights in Mozambique.

KEPA's role within civil society is also coherent with Mozambican development policy. It has promoted the establishment of ASUMO and ACRIDEME, among other associations of disabled persons, through its support to sign language creation and the rehabilitation of the mentally retarded. Additionally, KEPA has been a major supporter of FAMOD, in bringing together the efforts of individual associations of disabled people to advocate their rights and promote increased participation of the disabled in policy formulation and implementations and in development.

KEPA's direct role in poverty reduction has been weaker. Projects funded by Kefa are a few, small in scope and outreach, and have had little success. Nevertheless, the promotion of self-esteem and acceptance by community of disabled persons are an indirect factor for poverty reduction, in the sense that it creates an enabling environment for the disabled to get involved in development activities. Also, promoting access to education of disabled children and youth is a contribution to poverty reduction, as poor levels of education are among determinants of poverty.

There has been an effort to promote income-generating activities among disabled groups, both directly through funding initiatives, and indirectly by facilitating access to resources from other Finnish associations. KEPA has funded a small number of projects in 3 provinces and in the capital city between 1996 and 1999, aimed at increasing the economic status of households with disabled persons. No income generating projects were funded in 2000 and 2001. These projects were implemented both under the responsibility of Mozambican partners and Finnish development workers. However, as in many other projects to generate income, success has been low, and fieldwork suggest that especial expertise and further analysis of determinants of success and failure in these projects are needed if Kefa intends to improve intervention in this field.

Disability is not a priority in Mozambican development policies and programmes. Rapid economic growth has been a practical priority in development and disabled persons may not be the best competitors for that, especially considering the poor levels of formal education. However, if one looks at concerns regarding peace, justice, and democracy, then disability may be an important factor. Disabled persons constitute a large group in society, a proportion of disabilities was caused directly by war, and disabled persons are amongst to most disenfranchised groups in Mozambique.

Reduction of regional disparities is a priority in the development of Mozambique. KEPA began its work at the central level of what is now the MMCAS, in Maputo. Four years later it added Sofala and one year later Cabo Delgado to its areas of direct intervention. KEPA direct intervention in Nampula began only 8 years after it started activities in Mozambique. Indirect support to the above provinces began earlier, however, when the CBR programme started, and was directed at training DPMAS staff and activists and supervising fieldwork. Thus, most technical assistance was concentrated in Maputo and Sofala during the first five years. The evaluators consider that KEPA tried to address the issue of inequity in development and that it was relevant to open the Pemba office. However, it should have been able to move quicker to less developed provinces, due to its nature of CSO, as well as have resumed its work with DPMCAS in Cabo Delgado, as soon as problems that led to the programme interruption had been worked out.

4.2 *Relevance to the needs of the beneficiaries*

KEPA activity's beneficiaries are of two types: the Mozambican organizations and disabled citizens. This section addresses the relevance of KEPA intervention to the needs of the latter. KEPA's work with Mozambican organisations is discussed in chapter 6.

Needs of beneficiaries are various and no specific studies were done regarding this issue. They also relate closely to the seriousness of the disability. A study carried out on "The lives and visions of persons with disability in Mozambique"¹⁸ suggests that for a large number of disabled persons "*disability is not a determinant factor in the quality of life of disabled persons (and people) state they face the same problems other people living in rural areas face, poverty that hinders the life of most Mozambican population*"¹⁹. But the study also shows (and data from the census confirms it) that disabled living in small towns in rural areas (and urban areas), who need to have money to access food, face more difficulties to survive than disabled people living in more rural areas.

Regarding services, access to schools is denied to most disabled people, for a number of reasons: living in areas where there are not schools; being discriminated against by families; being overprotected to avoid risk of abuse from others; or lack of family resources to, for example, take personally the child to school. The situation is still worse for disabled girls and women.

Most disabled women interviewed in households never had been in school and many were not in literacy classes either. Access to health care and compensation materials are problem for most. Health care in rural areas is rare and little qualified to answer the particular needs of the disabled and compensation materials are scarce, expensive and take a long time to get. Poor health care impact negatively on the physical condition of disabled persons²⁰.

¹⁸ Save the Children Foundation, UK, and ADEMO, 2001.

¹⁹ *Ib* pp. 76 and 77

²⁰ *Ib*. p. 69.

Box 2:

TWO ENCOUNTERS WITH BENEFICIARIES

Most of the visits to discuss with the beneficiaries of the CBR programme were arranged by the local Social Action. At times the evaluation team improvised its programme and unexpectedly met people who turned out to be beneficiaries of the CBR programme. These are stories about two unplanned encounters. One took place in house of a farmer whom a Father from the nearby Catholic Mission in Monapo had helped to contact Social Action for a prostheses and another one in the secondary school which the team visited in Chiure.

Sr Amisse is in his fifties and comes across the field to his hut where the team walked after parking the car on the spot where the Father normally meets him. The small hut is falling apart. The mud walls have big holes and a thatched roof has seen better days. Sr Amisse greets the unexpected visitors with warmth. His was working in his field when he saw the visitors but even with more than ten years of experience with an amputated leg, it takes some time to get around, he apologises. The Father wants to know why he is not using the prostheses after all the trouble that one had in getting it. "Yes", says Sr Amisse, "*that really was something, that!. First I spent half a year waiting to get to Nampula and then two months there at the transit centre. My wife thought I had abandoned her all our savings went to that trip. But thank you Father for all your help*". But why is he not using the prostheses? Is it uncomfortable? Sr Amisse asks one of his children to fetch the prostheses from the hut. "*No, no it is quite comfortable and there were so many of us who had lost their leg stepping on a mine that they really knew how to teach us to use these*" says Sr Amisse, "*but the problem is that I have no shoes. I cannot use this without shoes because in no time it will be broken. I have no money to buy shoes. We do not even have enough money for food. Perhaps one day but Father, my children are also having problems*". It turns out that three of the four children are deaf. The representatives of Social Action are surprised: what! New disabled identified.

Sr Afonso is a 19 years old student in a secondary school, in the 8th class. He was born with club feet but can walk although walking to school takes two hours and is quite rough with his disabled feet. But he likes going to school and is proud of it. Other students and teachers treat him well and he has good marks. "*I would like to be a teacher or a nurse so that I could help people like me*" Sr Afonso tells when asked about his future plans. "*I was really lucky*", he continues, "*after my mother and father died I lived with my small brother in my uncle's house. I did not go to school. Then one day Sr Serafim (the CBR trained person from local ADEMO) from the Social Action came to my uncle's house. I was already 12 years old but he convinced my uncle to send me to school. And so I started and I like it very much. My only problem is that I don't have school material, paper and pens and the like*". Yes, he knows families that have disabled children who stay at home and do not go to school.

Finally, disabled persons face frequently rejection from society and families, who “*act in ways that prevent the self development of the disabled person*”²¹ and have little participation in the discussion of family and community issues²².

KEPA’s programme in Mozambique has addressed some of the above needs. It has provided technical support to MMCAS and provincial directorates that, through the CBR programme, has promoted disabled people’s self-esteem, access to compensation materials, and school for children. KEPA’s funding has been used in financing children’s school materials, transportation to the orthopaedic centres, support to activists that work at the community level, and capacity building of associations that promote disabled people participation in society.

4.3 Coherence with KEPA’s basic tasks and principles

In general, the disability programme has been well in accordance with the prevailing policies of KEPA at various points of time. The objectives of KEPA’s development work at the time of the Volunteer programme were broadly defined in the Programme of Aims and Action (1993) as follows: improve living conditions of the poorest especially through education, health and small-scale livelihood activities, increase popular participation, strengthen the status of women and handicapped, promote environmental conservation and increase resources of local cultures and broaden the contact and bridge-building between Finland, especially Finnish NGOs, and developing countries.

The task of the Volunteer programme was to promote these objectives. The volunteers working in the disability sector seem to have internalised the objectives quite well according to what they wrote in their final reports. Work in the sector started from almost zero and the volunteers were concerned about the need to develop the human resources and organisational capacities in the ministry, worried about the lack of Mozambican NGOs in the disability field and emphasised the human rights aspect. One of them crystallised her

work with the CBR programme: “*The objective is to integrate disabled people into society. This means their active participation in socio-economic activities, starting from communication within the family, in school, at work, in advocating their human rights and in the community in general.*”

The Volunteer programme was especially relevant to the objective of broadening the contact and bridge-building between Finnish NGOs and Mozambique. Of all the volunteers working in the different sectors, those in the disability sector have been most successful in getting Finnish NGOs involved in Mozambique. FAMR and FAD started their support to the disability activities already in early 90s and have continued their support to be later on joined by other Finnish disability NGOs.

In 1997 KEPA defined its basic task to be to encourage, support and organise the Finnish civil society to participate in actions that promote global responsibility. The main instrument was to be the Partnership programme through which KEPA would increase the awareness of global issues in Finnish society on one hand and on the other, strengthen the civil societies in the developing countries through their own field activities as well as through building co-operation networks between Finnish and Southern NGOs. Partnership was defined to mean a long-term equal relationship, interaction and co-operation between two or more partners. The basic values of KEPA were specified to include: sustainable development, environmental protection, justice, tolerance, equity, desire for peace, human rights and democracy.

Set against these principles, the disability programme continued to be relevant. A shift towards a partnership with the Mozambican NGO sector had started already earlier when the first volunteer was posted in ADEMIMO and KEPA Mozambique was actively cooperating with LINK, Forum of the National and International NGOs. Government continued to be another partner, basically as it was and still is a realistic choice for activities at community level. Nevertheless, the role of KEPA and the Finnish disability NGOs in the creation of the Mozambican disability organisations was central, especially in case of ASUMO, ACRIDEME and FAMOD. Whether these organisations are too much a creation of KEPA and the Finnish disability NGOs is altogether another matter but the aim to strengthen the civil society through the disability NGOs was coherent with KEPA policies.

²¹ *Ib.* p. 27

²² *Ib.* p. 67

Similarly, the disability programme within the Partnership programme is coherent with and relevant to KEPAs basic values. Human rights, justice and equity are specifically defined to be the objectives of both the CBR-programme and FAMOD. The aim of both is to increase tolerance in the society and in case of FAMOD, also among its member organisations. Democracy is expected to be strengthened with the growing role of the disability NGOs and a gradual shift of CBR programme to be also in reality community based.

KEPA's support to the disability sector has been coherent with KEPA's own definition of partnership: long-term equal relationship, interaction and co-operation between two or more partners. One might ask how equal a relationship even at best can be among partners in a situation where the other partner has all the financial and technical resources but at least the disability programme has filled the criteria of being long-term, both on KEPAs own and on the Finnish disability NGOs part. The disability programme can also be seen to be well in line with KEPA's Development Policy Strategy of 2000 and Strategic Plan for the years 2000-2005. In very concrete terms, it is aiming at strengthening democracy, promoting equity and reducing poverty. The objective is to implement disability activities both on micro level and national level. Work with disabled people at grassroots and advocacy at various levels of the government and society are seen to be two sides of the same programme. If some of these objectives have not been met, it does not diminish the relevance of the task itself.

In practice, the disability programme does not seem to have been very relevant from the point of view of its contribution to the development policy dialogue between north and south. One can only ask why the wealth of experience gained on practical implementation of human rights within the disability programme has not been better documented and better used in KEPA's own work in Finland? Promotion of human rights is among the basic values of KEPA and is also one of the important strategic goals of the Finnish development co-operation. There is overall little experience in Finland on concrete development cooperation in this difficult field. It is unfortunate that the potential contributions of KEPA's pioneering and long-term commitment to human rights of minority groups, in this case disabled people or linguistic minority as the deaf are often considered, have not been better taken advantage of in development policy dialogue. The problem is not the relevance of the programme in this respect. It would have had, and has, much to offer not only on human rights but on advocacy and lobbying in general.

RIGHT PARTNERS AND STRATEGIES?

This chapter assesses whether KEPA has made the right choices in term of partners and strategies since it began working in Mozambique, with specially attention to the period 1997-2001. The basis for the analysis are, on one hand, KEPA's goals and objectives, and on the other hand, Mozambique situation, as perceived by the evaluators through a wide range of contacts with informants, field visits and previous knowledge of Mozambique.

4.1 Right partners?

KEPA has had two types of partners in the disability sector: government, both at the central and provincial levels, and civil society groups, both individual associations and a forum of disabled CSOs.

²³Government was the main actor in the field of disability, when KEPA began working in Mozambique, and is still a very important one.

Table 5: KEPA's partners in the disability sector in Mozambique, from 1991 to 2001

<i>Partners</i>	<i>Period of time</i>	<i>Types of co-operation</i>	<i>Number of volunteers and DWs</i>
SEAS/MICAS/MMCAS	1991-present	TA & funding	10
Central level	1993-present	TA & funding	1
Maputo City Directorate	1996-present	Funding	2
Maputo Provincial Directorate	1995-2001	TA & funding	
	1999-present	Funding	
	1996-2000	Funding	
Sofala Provincial Directorate Nampula Prov. Directorate Cabo Delgado Prov. Directorate MINED Central level	1998-2002	TA & funding	1
Disabled People Assciations ADEMIMO ADEMO Namula	1995-1997	TA & funding	1
ACRIDEME	1997	Funding	
	1996-present	TA	
FAMOD	1998-present	Funding	

²³ This is the formal posting of volunteers and development workers, but it should be recognised that a number of them had supported technically other organisations. As an example, some DW in MMCAS provided assistance to the Maputo City Directorate of Social Action and to MNGOS, such as ASUMO, ACRIDEME, etc.

In 1991, programmes were limited to the physical rehabilitation of disabled persons, and education within four special schools, two in Maputo and two in Beira. Choosing government (SEAS) at the central level as a partner gave KEPA opportunities to: (i) influence the design of the first community based programme for the empowerment of disabled people; (ii) influence the definition of the policy on persons with disability; and (iii) promote openness within government for the role of CSOs in the field.

Later on, KEPA developed partnership at the level of implementation with provincial branches of MMCAS. This provided opportunities to assist the conversion of national programmes into direct benefits to communities. Very likely, the CBR programme would have remained on paper without external funding provided by organisations such as KEPA to the provincial directorates. Clearly, the inability to extend the programme further to new districts is, at least partially, related to lack of enough funding. On the other hand, KEPA gained with partnership at this level, because it was a unique opportunity to acquire practical knowledge for feedback into programming. KEPA support at the provincial level, including working at district and community levels, provided insights on the factors that influenced programmes, as well as knowledge about additional needs.

Government has some potential to reduce inequality, in the sense that government programmes tend to be implemented countrywide. KEPA partnership took long time to move to most peripheral areas and less developed provinces. A critical issue in working in less developed provinces in Mozambique are the operational costs: travelling costs are extremely high, recruitment of staff more difficult and goods and materials very expensive. On the other hand, insufficient supervision may lead to mismanagement of programmes, of which KEPA's problems in Cabo Delgado in 1999, were an example. KEPA tried to address this situation by opening an office in Pemba. Nevertheless, keeping concentration of technical assistance in Maputo and at the central level did not advance much the quest of equity.

At the time of the evaluation, levels of technical capacity in Maputo city and Maputo province seem to be adequate for the development of the CBR programme. At the central level and in Sofala province, local capacity seems to be still behind the current programme needs, but capacities built previously through TA have not been

maintained as they could have been. On the other hand, there is little room for an international organisation to influence factors that led to the present situation.

In the northern region (Nampula and Cabo Delgado), the evaluation team found out the greatest needs for TA, at the same time that it there seems to be room and political will to use and develop human resources through technical assistance.

Co-operation with the Ministry of Education began much later in the decade (1998) and consisted mostly of TA and funding to implement a few studies in order to assess the situation and design policy and programmes in the area of special education. At the time of this evaluation, MINED has not yet defined clearly its needs for KEPA co-operation.

In early 1990s the choice of government as a major partner was well justified by the little number of actors in civil society and by the role the government (the social action sector) played in the disability sector. The Mozambican context has however changed over the past 11 years. Basic instruments for action (law, plans, written programmes, trained personnel) are in place, which allows provincial departments of government to develop and improve its programmes, if more financial and human resources are available. Additionally, CSOs have emerged, in spite of being still institutionally weak, and communities are more aware of disabled human rights.

Government continues to be a key player in the area of disability, for policy and for implementation, but the main focus in government co-operation should have been shifted to the provincial level earlier, to convert the policies into extended benefits to communities. This is not to say that co-operation with central government is not needed anymore, but needs are different from what they were before, and are mostly in areas that will strengthen the new role of government. Technical assistance may be needed for areas such as monitoring of policies, organisations and maintenance of information systems, and development of other specialised areas in the field of disability (example: mental retardation).

KEPA support to civil society began through disabled NGOs in 1995. Co-operation at this stage, did not seem to have very structured objectives, and support seems to have been given in

a case by case basis. The first CSO to be supported was ADEMIMO, which received technical assistance and funding during two years. Due to instability within the organisation, assistance could hardly be effective. ADEMO in Nampula received funding and ACRIDEME in Maputo technical assistance from the development workers posted in the MMCAS and in ADEMIMO. By 1998, KEPA began a more structured and consistent partnership with what is now FAMOD. This forum of disabled people associations is the main formal partner of KEPA's disability programme in the civil society at the time of the evaluation. Through small projects and liaison services, KEPA develops other partnerships with civil society organisations. Additionally, a few other organisations stated that they get support from KEPA through facilitating discussions about issues of their concern, contacts and linkages, etc.

Partnership with FAMOD has been financial and directed at building institutional capacity. Funding has been used mostly for training of FAMOD and individual member associations on a number of topics; dissemination of information through a quarterly newsletter; establishment and supervision of provincial branches of the forum; representation at international level; commemoration of the disabled day; advocacy; and administration costs. This makes FAMOD highly dependent on KEPA support for functioning.

The evaluation showed that most individual organisations of disabled people are still weak and much in need of strengthening support. KEPA has a privileged position regarding the associations born from the awareness raising movement promoted by programmes supported by KEPA, particularly in the area of deafness and mental retardation. A genuine commitment was found out among deaf persons and families of the mentally retarded children, contacted during the evaluation, to advance their agenda. The starting point is very low in terms of competencies to put forward programmes, technical resources and funds, at the same time that members of these groups are amongst the poor in society, due to previous lack of access to education and opportunities. The strengthening of these organisations is crucial to the advancement of the disability agenda and the functioning of FAMOD. FAMOD will have difficulties in playing its role if the gap in the organisational development between its members continues wide. Aside from KEPA and FNGOs, little and scattered support has been given to the emergent disabled people associations.

4.2 *Right strategies?*

Main strategies of KEPA's work in Mozambique during the past 11 years have been: technical assistance (TA) through volunteers and development workers (DW); funding, usually small funding; and networking, both within Mozambique context and between Mozambique and Finland organizations. The evaluation showed also that KEPA provided additional support in technical and organisational matters through the direct assistance by KEPA's office personnel.

The choice of technical assistance in the beginning and its continuation after the end of the volunteer programme was a right choice. It fit the objective and corresponded to the Mozambique felt needs, where human resources development was and continues to be very poor. This fact had already been stated by the Evaluation of the Finnish Volunteer Services in 1995.

At the beginning of KEPA co-operation there was an absolute lack of qualified personnel in the disability sector. Providing these types of resources was critical to the development of the CBR programme, the start and development of the deaf programme, including the creation of a Sign language in Mozambique, and to success in raising awareness about disability. These successes would not have been possible without well-qualified experts and a long-term commitment to development by KEPA and FNGOs.

Most TA was provided to government and was highly concentrated at the central level of the MMCAS and in deafness (half of the postings were specialists in deafness). Most TA was carried out through medium-term contracts (2-years). Among CSOs, only ADEMIMO received TA formally. Other organisations have received short term technical assistance and staff in KEPA's offices provided also some technical support, both in Maputo and in Cabo Delgado. Most interviewees agreed that those volunteers and DWs were in general, well qualified and did a very good job. Even in places where technical assistance was provided sporadically, such as at district directorates' programmes, volunteers and DW are remembered. However, a few sources raised concerns about shortcomings, in particular communication problems and insufficient understanding of the Mozambican situation.

The technical assistance approach had two main constraints: its input in formal training was

negligible; and local partners were not always able to secure trained people in counterpart positions where the investment made would make better returns. The MMCAS trains its own professionals at the basic and middle levels, through Training Institutes in Maputo and Quelimane. The evaluation found out that TA provided to the disability sector was not used to add specialised capacity to the Training Institutes: development workers did not carry out, in a systematic way, training activities in those institutes, nor materials and programmes produced were included in course curricula. This could have increased TA sustainability and is considered by the evaluation team a missed opportunity. Reasons seem to have been too much departmentalism, poor planning, and insufficient language mastery among some volunteers and DWs.

The second constraint was the inability of local partners, particularly, at the central level of MMCAS, to secure trained on job staff in the disability sector. At the time of the evaluation, a significant number of ex-counterparts of DWs were not any more in the disability department and/or in the MMCAS, and a few had left the public sector to work in NGOs and private companies. In general, most sources considered that those who left the sector were still a resource for Mozambique and worth the investment, but the evaluation team did not find enough evidence that they (ex-counterparts and professionals trained through KEPA TA) were doing relevant interventions to promote disability rights and interests.

A critical issue in TA to government is its objectives. KEPA intervention related mainly with the technical contents of disability and the general management of projects. This was right in the beginning of the co-operation period but it is doubtful at a later stage. Mozambique is going through a major change in terms of defining the role of its government, and needs assistance in this area. From an omnipresent body during the first years of independence to an almost *laissez faire* role at present days, these changes does not seem to have been accompanied by KEPA TA to MMCAS. The present situation and needs are an example: the planning and programming capacity is quite poor, there is not an effective basic information system, co-operation with other actors and policy monitoring and evaluation are at initial stages. Doubts rise on whether KEPA has the profile, the funding, and the technical expertise as an CSO, to provide the necessary long term TA to the central level of the MMCAS. At provincial

level, social action sector still plays a implementation role, where TA from KEPA can be more adequate. KEPA or FNGOs expertise may be still important at the central level, even crucial, for short-term assistance in technical areas of disability, such as mental retardation, sign language, etc.

Most technical assistance to MNGOs has been provided informally or indirectly, through DWs posted in the MMCAS or in the Maputo City directorate, and through visits to the other provinces. The beneficiaries of this assistance were mainly the associations born from the work of the CBR programme, namely ASUMO and ACRIDEME. The only exception is ADEMIMO that had a volunteer working full time in organisational capacity building, between 1995 and 1997. Final report of this partnership suggests that posting a DW full time in one single organisation may be bad use of resources and frustrating for DWs. Even in the present day, the posting of DW in particular CSOs may be risky, if it is not a long-term (8-10 years) commitment. The Mozambican organisation may grow rapidly, in particular when it comes to provide services to beneficiaries, but risks to become "a giant with clay feet". Considering the above situation, KEPA could have tried other options, such as to post a DW in its office to assist a limited number of MNGOs. This would have allowed more attention to the civil society actors without the risks above mentioned, but would need careful planning and consultation with beneficiaries.

KEPA seems not to have considered sufficiently the influence that the nature of partners should have in the approaches to TA. KEPA is a civil society organisation and a foreign one: its partnership with the Mozambican government has to be different than the one with Mozambican civil society. This was not visible most times: tasks and approaches to government departments and CSOs were pretty much the same, especially at the provincial level. Too much concern about non interference in internal affairs and culture of partner organisations has led KEPA to miss a number of opportunities to influence positive developments within Mozambican NGOs. On one hand, KEPA official policy of respect and partnership is a value highly appreciated by Mozambican partners and "politically correct". On the other hand, that policy is to be implemented by real people in real situations, that need to be very "fluent" on how to put in practice those values.

This leads sometimes to situations where influence and interference is carried out, but not explicitly acknowledged because the KEPA's dogma on non interference does not favour the open discussion of the issue. These situations may be more frequent than expected, because most fieldwork is carried out by Mozambicans with little experience of civil society organising and democratic processes. On the other hand, Finnish personnel frequently does not have enough knowledge about Mozambique to be able to make decisions on what should be acceptable and what not. As an interviewee pointed out *"a weak point of KEPA's work is the respect for culture that is not culture accepting things that are not acceptable that are not acceptable in other places"* which is viewed as "patronising" and not conducive to development. Examples were given in the field of accountability. The issue seems to be an "old" issue in KEPA Mozambique and it is object of analysis by a Mozambican advisor, in 1997, who wrote: *"not always cultural traditions should seen as of equal value"; "Are corruption, lack of responsibility that we see and feel sometimes in our projects, cultural aspects out of any criticism?". .." as a consequence, the interaction dynamics (between KEPA and Mozambican partners) are very small, little advances happen in following the pace of the beneficiaries without intervening"*.

At the end, KEPA risks to promote poor sustainability when it does not use its knowledge about the outside world to influence local partners to more adequate / realistic directions. When KEPA or FNGOs accept project proposals that were not thoroughly analysed within MNGOs, leading later to implementation problems, KEPA and FNGOs are not helping organisations, its members and staff, to develop its potential and do risk to give the image that the above are normal and acceptable practices in civil society in other places in the world. The issue of balance between too much intervention that hinders self reliance and too little that promotes poor responsibility and accountability is one of the most difficult. KEPA policy and strategy are defined in very broad terms and need to be translated into operational terms to provide a basis for KEPA staff's work with partners. In order for KEPA to get more involved in civil society strengthening in Mozambique, reflection and definition of practical guidelines on these issues are required. And it is urgent because it relates to values that require a long time to clarify and internalise before they become real and converted in practice.

Small funding was another strategy of KEPA partnership programmes in Mozambique. Funds were smaller for individual government departments than for FAMOD, usually \$5,000 per year for provincial programmes. Provision of funding was accompanied by some training in financial management. The evaluation found out that the amount of funding was proportional to local partners' capacity of management and absorption in the beginning of the partnership. However, to improve impact and extend programmes to other districts, higher levels of funding are needed, as well as a more prominent involvement of KEPA (directly or through locally recruited TA²⁴). Funding partners activities should not be seen as a goal in itself, but as a means to improve the situation of the partner beneficiaries, which requires better design of programmes.

Small funds managed directly by DWs were very useful to answer the local needs, such as the sign language training in districts. Nevertheless, procedures were criticised by a few Mozambican partners, because they did not have any information on the amount, objectives and uses of those monies. When DWs leave, programmes stop for the lack of funding and Mozambican partners know too little about it to try to get similar support from other agencies. Similar criticism was made to the withdrawal of equipment and vehicles when the DW contract ends.

Finally, KEPA promotion of networking has been done throughout the 11 years period. KEPA played a very important role in stimulating networking within the community of Mozambican associations of the disabled, especially in Maputo. In other provinces, in particular in Cabo Delgado, the absence of programmes where individual organisations have to work together towards common goals as well as the different levels of organisational development amongst CSOs have created and maintained an environment of suspicion and lack of trust.

²⁴ KEPA made little use of locally recruited expertise to assist MNGOs. A number of local experts were used to carry out studies but not many to provide TA. There are not many local resources (organisations and experts) to provide assistance to NGOs, but KEPA should collect more information regarding this and analyse its potential for future work.

RESULTS AND IMPACTS

Results and impacts of KEPA's work in the disability sector during the past 11 years were difficult to assess due to, mainly, two factors. First, the definition of KEPA's objectives in Mozambique was quite general, with few appropriate indicators for results. KEPA's intervention was done through local partners, thus requiring analysis of the partners role for which information was not enough and / or available. Additionally, other factors could not be accounted for in the analysis for lack of information, making it difficult to assess if the results were due to KEPA's intervention or independent factors, such as changes in the socio-political environment, other international or local organisations' programmes, etc. The second factor is the absence of baseline data and very poor actual data for most of the programmes in the field of disability.

Increased awareness about and development of the human rights of the disabled people was found out to be the most visible impact of KEPA's works in Mozambique. Anecdotal evidence show changes overtime within the disabled community, among professionals, particularly in the social action and education sectors, and in society at large, between 1991 and 2001. A second impact of KEPA's partnership was an increasingly larger numbers of disabled persons associations and associations of disabled children's families. The evaluation did not find evidence of changes in the economic status of the disabled as a group, a stated objective of KEPA's work, but there wasn't either evidence of improved economic status of common citizens.

KEPA's work most visible results are the sign language for and improved visibility, self-esteem

and social acceptance of deaf people; the continuation of the CBR programme that provided for access to school for children with disabilities and compensation materials for the physically disabled; the establishment of FAMOD and increased networking among diverse types of organisations working in the field of disability, in the Maputo region; and some improvement in the capacity among staff and partners organizations, both in disability areas and in management.

6.1 Human rights of the disabled

The situation of the human rights in Mozambique has improved, in general, since early 1990's, as a result of a number of factors. The end of civil war and the formal establishment of a plural society created an enabling environment, but it was the pressure from civil society organizations that has been crucial to increase awareness and improve the overall situation. The struggle for human rights has been directed mostly to what are the traditional human rights (freedom of expression, press, movement, freedom from abuses and torture, etc). The human rights of the disabled, that are essentially social rights (access to education, health care, jobs, freedom from discrimination, etc.), haven't deserved much attention in the above process.

Improved awareness and development of the human rights of the disabled are the result of the work developed by several actors, in particular, the associations of disabled people, and the MMCAS and MINED. The evaluation's fieldwork suggests that it was the work carried out by the CBR programme at community level

Box 3:

MEETING WITH THE GROUP OF THE DEAF

The meeting takes place in the yard of Social Action where a traditional "palhota" has been constructed for the group of the Deaf that daily gathers there, studies and teaches around 20 deaf children. Six members of the group are actively discussing about the changes that have taken place in their life since they started in the group.

"I had so many difficulties before! I could not hear anything and stayed isolated at home where I had lots of problems with my parents and brothers. Yes, I am from Mossuril where I went to school until the third class. I didn't understand anything so then I just stayed at home. Everybody despised me. It was awful and "

Another one interrupts the lively gesticulation with his own, even livelier *"Of course it was awful! Me, I was totally marginalized, I ate what I found from the street and lived in rubbish. Of course life has changed since we started in this group. Now we have a language and can communicate! I have almost learnt to write. We are not discriminated as before. Now we are not much different from any other people. They respect us, even my family and neighbours respect me. My relationship with them have improved a lot but then my own behaviour has also changed. I have changed! Look at me: I am not dirty anymore, I come here every day to teach deaf children. I am a person with worth, everybody knows that"*

"Yes, yes", gesticulates another "we teach and we go to people's homes and mobilise deaf children to come here so that they need not have our fate. It is important work and when I leave in the morning I tell my children that father is going to work to teach. But then when I return, they ask why can't they buy this or that and I have to tell them that because father has no salary."

Heated gesticulation. A young girl wants to tell about the work she is doing with theatre to sensitise the community on the deafness. Everybody wants to tell about the work he or she is doing. The interpreter has hard time which brings up the topic of TV programmes that have interpretation in Sign language. Such a wonderful thing *"We understand almost everything. Translation to the Sign language in TV must continue also in the future. It is really important. We like it so much!" says one. Everybody agrees but then a young man wants to raise a point: "Why is the translator given a small space in the screen? He is so little in the corner and the face of the newsman who speaks is so big. Those who can hear do not need to see his big face. It is we who need to see well the translator!"*

that began the process of making disabled people, especially children, visible. Traditionally, disability at birth is considered a sign of wrong doing by parents, and families tend to hide away disabled children to avoid social criticism. As a result disabled children do not develop their capacities and become a burden to families, that usually count on their offspring to take care of them in old age, which reinforces the image of disabled as incapable of providing for themselves. The situation is somewhat different for people who become disabled at adult age, especially if the cause of disability is external, such as a traffic or war accident. In these cases little stigma is attached to the disabled person.

The CBR programme began to change this concept: volunteers and social action staff initiated a process of educating communities regarding disability and paying special attention to disabled persons when visiting communities. This has increased visibility and social status of and self-esteem among the disabled in their communities. Together with access to physical rehabilitation and compensation materials (in a few cases), as well as, to health care, and education for children, the efforts of the CBR programme began to make a difference in the lives of a number of the disabled and their families. Deaf people began to have the right to a common language that improved their communication. Deaf youth began to feel more confident to go out and participate in social events and in vocational training. A growing number of children are being integrated in schools, as shown in the following table:

The relevance of the inclusive programme schools is evident. The potential of this programme, run by Provincial Directorates of Education, to enhance disabled children's rights to education was not analysed during this evaluation, but should in future be further studied, for decision concerning KEPA's support at the local level in the two northern provinces.

In a number of places, through the CBR programme, disabled persons and disabled children's families began to meet both to get support from others in similar circumstances, and to develop their ideas and advance their interests. Most of these groups are still at a very initial stage of their development but they have the potential to constitute a focal point for future actions regarding disability. Other groups have shown more interest in formalising their status and became associations of disabled persons, such as ACRIDEME and ASUMO.

In parallel with the CBR programme, the associations of disabled persons, in particular ADEMO, the first established, carried out advocacy on behalf of their constituents, to promote the advancement of disabled's rights and increase availability of services. When new associations were established along the 1990's, a need for coordination within civil society became evident and KEPA played a direct role as facilitator. After 1998, KEPA's role has changed to support concerted efforts through FAMOD. The approval of the Policy on Persons with Disabilities the one result of the combined efforts of civil society groups.

Changes overtime regarding the situation of human rights of disabled people are shown through selected indicators, in table 7.

Table 6:

Number of disabled children registered for schools, in districts of Cabo Delgado, Nampula and Maputo City where the CBR programme is implemented (1997-2002)

<i>Province / Districts</i>	<i>1997</i>	<i>1998</i>	<i>1999</i>	<i>2000</i>	<i>2001</i>	<i>2002</i>
Cabo Delgado 2	21	37	20	53	40	21
Chiúre	4	7	6	19	22	7
Mocímboa da Praia	8	13	4	18	7	6
Pemba	9	17	10	16	11	8
Nampula	3	29	56	78	145	213
Nampula city	3	5	8	12	17	20
Monapo					2	6
Meconta				5	11	19
Mecuburi			5		10	14
Memba					5	7
Moma					5	8
Mogincual		2	4	6	8	18
Mogovolas					5	8
Angoche					3	7
Nacala Porto					6	9
Erati/Namapa				4	6	8
Laláua					2	5
Ribáué				2	3	4
Serra da Mesa School N/a ²⁵	N/a	22	39	49	62	78
Maputo City	12	16	20	25	27	

Source: Cabo Delgado, Nampula and Maputo city DPMCASs, 2002

²⁵ Serra Mesa is an inclusive school which explains the high figures.

Table 7:
**Situation regarding the human rights and the situation
of disabled persons in 1991 and 2001²⁶**

<i>Indicators</i>	<i>1991</i>	<i>2001</i>
Legislation	Constitution and common legislation (non specific)	Specific: <i>Policy on Persons with Disabilities</i> Regulation being prepared National Council on Disability appointed but not functioning
Actors		
Government	SEAS, MISAU	MMCAS, MISAU, MINED, MOPH., MTrab, MJD
Civil Society (*)	ADEMO	FAMOD, ADEMO, ADEMIMO, ACAMO; ASUMO, AMOFAS, ASMAID, ACRIDEME, AJODEMO, ADESU, <i>N'lhuvuku</i> and provincial associations like ORDENA and ALEMO
International (*) Organisations	HI, Red Cross International Committee	KEPA, HI, Power, LSN, WSF
Social Action	CBR beginnings ?? disabled people in INAS programmes	CBR in 10 provinces and more than 80 districts (<i>in 5 provinces with support from KEPA services</i>) ?? disabled people in INAS programmes More than 20 groups country-wide learning sign language
Education	4 special schools One general secondary school attends blind students in Beira ?? university trained disabled persons	4 special schools (<i>three received support from KEPA</i>) Inclusive schools in 5 provinces Three general secondary schools attend blind students in Beira Braille school exams for the blind ?? students at university, <i>including 2 blind and one deaf person</i>
Health	Orthopaedic Centres in ?? provinces under administration of International Organisations No community based physical rehabilitation	Orthopaedic Centres in 10 provinces and under the administration of MISAU Through CBR programme, a number of adults in communities are able to do physical rehabilitation exercises
Training and employment	No training of seriously disabled persons Few disabled persons employed in civil service	<i>3 blind students in training to become teachers in Sofala + 2 finished their training as teachers</i> Disabled persons employed in a number of jobs in civil service

²⁶ These studies are:

<i>Indicators</i>	<i>1991</i>	<i>2001</i>
Media / information	Little coverage of disability issues No information on the human rights of the disabled	More coverage of disability issues, including radio programmes Sign language in two main TV programmes broadcast nation-wide Four studies on disabled rights carried out, but little disseminated to the public.
Sports	Sports Preparation of the 1 st competition for disabled athletes	2 nd Disabled sports competition held in 2000 Committee on Sports for PwD (created in 1998) Large participation of disabled students in the 2001 School Games One blind athlete participated in the Pan African Games
Visibility	No participation of PwD in major public events No celebration of the International Day of the Disabled	Two disabled as members of Parliament, incl. a blind person Associations of the disabled invited by the Governor to a major conference on the development of Cabo Delgado Provincial celebration of the International Day of the Disabled
Self esteem	No information	<i>Strong feeling of worth among disabled people involved in collective action. Groups of deaf young people wanting to work for the others</i>
Community action	No information	Pressure from parents to expand inclusive schools Pressure from deaf children's parents in Dondo to continue training in sign language
<p><i>Source: interviewed persons and documentation analysed. Legend: Italic for activities or organisations supported by KEPA, including its liaison services(*) Organisations with its main focus on disability</i></p>		

All the people interviewed for the evaluation were unanimous to state that there is a change in society perceptions of the disabled, and most disabled persons said they felt more respected today than ten years ago. Comparing today's difficulties (poverty, no jobs, little education and health care), many of which are the result of more information and awareness of their own rights, to the previous situation, when disabled people lived more or less hidden in their homes, all the disabled said they would rather face present problems than go back to the old situation. The major reason was the feeling of worth as human beings.

Nevertheless, there is still much to do in the area of human rights. On two or three occasions, disabled children and youth complained about prejudice in the community that made their lives more difficult. Deaf youth said that other members of community know little about sign language and their gestures in sign language are sometimes interpreted as behaviour of mentally ill persons. Also, children who go to school with wheelchairs are sometimes verbally and physically abused by other young people, who try to steal, tease and make fun of them, without much reaction from watching adults.

6.2 Development of the Mozambican disability sector

It is the assessment of the evaluation team that KEPA had a relevant role in the process that led to the approval of the policy on persons with disability. Mozambican informants, including two national directors in MMCAS at the time, defined the role of KEPA as fundamental, in the sense that KEPA helped, in 1996, to put the policy issue on the table, after a few years in a dormant state. KEPA funded and facilitated meetings for this purpose and the volunteers in the ministry assisted the process. However, in the opinion of a previous KEPA co-ordinator, KEPA role was not significant. The role of KEPA in the dissemination of the policy was less controversial. KEPA funded and supported two regional workshops for the dissemination of the policy.

Additionally, KEPA has provided active expertise and support to the definition of plans and programmes in the disability sector, especially in deafness and mental retardation. A draft of a five-years National Plan for Intervention in Deafness Area was prepared in 2001, for the period 2002-2006. This plan, differently from other plans and programmes addresses inequality based on gender and attempts to mainstream gender.

Developments of human and organisational resources are other impacts of KEPA's intervention in Mozambique. Impacts in this area were difficult to measure because no specific objectives were defined for the capacity building activities and working documents and training programmes were not available.

Broadly, the evaluation team found out that human resources capacity has increased within the MMCAS regarding the understanding of disability issues and the carrying out of the CBR programmes. Additionally, human resources were more developed in technical terms where there had been technical assistance from KEPA development workers, as are the cases of the Maputo provincial and city directorates. Impacts on human resources development in the northern provinces are diverse: in Nampula, they were quite visible considering the input made, while in Cabo Delgado they were less visible, probably due to problems occurred in that province in the period of 1999-2001. In Sofala and at the central level of the Ministry, human resources development was more difficult to assess, due to changes in the sector's personnel.

At the district level, human resources capacity varied. In Dondo, where TA from KEPA was provided, the representative of the MMCAS was

knowledgeable about disability and the CBR programme, and relationships between the representation and disabled people and organizations seem to be quite good. A system decided locally was in place through which the local representation of MMCAS was responsible to provide disabled people with a declaration that would allow them to have free access to health care and medicines, as well as other benefits. In Special School Nr.3, for deaf children, in Beira, teachers appreciated highly the technical assistance received through KEPA, which, they said, improved their performance with deaf students.

MMCAS staff perceptions of their role and value seem also to have changed. It was reported to the team that the disability sector was, in its beginning, the place for disciplined personnel within the ministry. That image has changed with the development of specific programmes and with the training, the technical assistance and the funds received. Most staff met during the evaluation showed a real concern for disabled persons and disability and was working with very little rewards and in difficult conditions, especially at the district level.

At the level of organisational resources, the evaluation found out that visits to Finland for experience exchange had originated new ideas and expectations in participating organizations. Participants appreciated what they had learnt, and were critical of other methods used for the same purpose, such as bringing Finnish organisations and people to explain in Mozambique how things worked in Finland.

The establishment of FAMOD in Maputo was also a result of KEPA's and FNGOS's support to efforts of the associations in joining forces for common issues. FAMOD began in 1998 to strengthen member associations and promote the interest and rights of the disabled, and has now a membership of 10 associations of disabled people. KEPA played a fundamental role in the establishment of the forum, coaching the process, providing technical assistance, donating funds for core costs and activities, and allowing FAMOD to use KEPA office facilities, such as space, vehicle, communications, etc. KEPA has also advocated the interests of FAMOD before the local Finnish Embassy that is now, and for a period of three years, paying the salaries of the national co-ordinator.

Support from KEPA has enabled FAMOD in Maputo to be a well-known and broadly appreciated organisation. Some key persons interviewed stated, however, that FAMOD needed to be more assertive in the process of advocating the disabled human rights. A good example, may be the

Box 4:

FAMOD IN NAMPULA, TWO DIFFERENT VIEWS

FAMOD in Nampula was established in 2001 when representatives of FAMOD Maputo visited Nampula. Seven local associations are members of the forum and have also their representative in the board. However, until now it is unclear to them whether their provincial FAMOD is officially recognised or not. The activities have so far included joint celebration on the Day of the Disabled, 3rd of December 2001, and participation in the training course arranged by Cooperation Canada Mozambique (COCAMO) which has also provided each of the FAMOD's member organisations a micro credit. The only contact with FAMOD Maputo has been the original visit to create FAMOD in Nampula and 1000 USD financial support for the Day of the Disabled. The communication between the member organisations functions without great problems according to the chairman who himself is from ACAMO.

In the meeting with ADEMIMO (since 1993 in Nampula with district delegations in several districts), the chairman who is also working as an CBR programme activists for PDMCAS, considered FAMOD necessary. "FAMOD is like a father to the different disability organisations and represents all disabled people. It can help the organisations to fight for the development of its members and draw up a programme for the development of the associations themselves", the chairman said. For example, the Day of the Disabled was last year organised jointly. Other members present in the meeting did not express their views on FAMOD, even when asked to do so.

ADEMO was established in Nampula 1990 and has representation in almost all of the province's 22 districts. Present in the meeting with ADEMO was the secretary and the vice secretary. FAMOD was seen to be what ADEMO could and should have been. However, FAMOD exists because *"we can only do what KEPA and other INGOs of its kind want. FAMOD was not our wish but that of the donors"*. The role of FAMOD? Principally it was seen to be a middleman between the associations and the donors but could also have role in mobilising, training its members, and helping to have financing for micro projects of the member associations. The sustainability of FAMOD was not deemed to be great by the secretary of ADEMO. *"Here the NGOs.. here we form associations in order to escape from poverty, not to champion for some other objectives"*.

meeting convened this May to discuss disabled organisations strategies to address the challenges of World Bank programmes for disabled persons. The meeting was organised by Link, a forum of Mozambican and international organisations: FAMOD was a participant and not a promoter.

FAMOD has now focal points in six of the eleven provinces in Mozambique (Cabo Delgado, Nampula, Sofala, Inhambane, Gaza and the City of Maputo). Member associations vary in terms of membership size and are at different stages of development, thus making collaboration complex. Fieldwork showed that communication between the executive and focal points is poor and little transparent. Member associations at the provincial level, and in lesser degree in Maputo, have quite different expectations from those of the secretariat. Associations at provincial level expect FAMOD to assist in obtaining funding for the member associations while the secretariat is most concerned with policy issues, exchange of experiences with foreign similar organisations, and representation at the international level. However, the second statutory objective of FAMOD is promoting sustainability of member associations. These differences need to be addressed to avoid negative conflict within the disabled organisation community. Nevertheless, FAMOD has succeeded in improving co-ordination in some provinces (Maputo and Sofala), something that was difficult before. In Cabo Delgado, the evaluation team found out a complex situation, where FAMOD members reacted very negatively towards the role of one of its members, that has more resources, and for this reason was chosen by the executive as a bridge to the other members. Particularly in the Southern Africa region.

At the central level, FAMOD can play and is playing an important advocacy role, specially regarding the regulation of the policy on disability, through being a bridge between individual associations and government departments, and representing Mozambican disabled people associations in the international arena, particularly in the Southern Africa region.

At the community level, KEPA's partnership promoted the development of community's volunteers' skills in community work and disability. 112 activists were trained for the CBR

programme, in four of the five provinces where DPMCAS received support from KEPA. According to oral sources, the training of volunteers comprised the following issues: disability in general, identification of disabled people, physical rehabilitation techniques for specific conditions of disability, and case follow up with Social Action departments. The two or three persons trained at the national level by the MMCAS provided training at the provincial level, usually in one rural district. With support provided by KEPA, it was possible for the local partner to motivate, supervise, and train the activists.

In spite of this effort, an important percentage²⁷ of the trained activists gave up their work due to a number of factors, among which lack of payment was a critical one. Volunteers were chosen by Social Action and were not supposed to receive any payment. In a few cases they did receive money or material compensation by local decision. When rewards stopped, a number of activists stopped working. Lack of stimulus for working is further hampered by absence of supervision and moral support to volunteers. In Cabo Delgado, interruption of KEPA's funding had negative impacts in community work

a few activists were still there, but they were not doing anything since a while. The reason was that they were not receiving any guidance and supervision from the DDMCAS, whose staff could not travel, because they didn't have money to pay transportation and travel expenses.

Interviews with a few activists showed that they did have in fact some technical expertise for community work, but their autonomy was quite low in terms of initiative to solve problems without waiting for guidance from a state body. The issue of payment was raised by an evaluation carried out in 1999, but no decisions were yet made on this. In Cabo Delgado, the DPMCAS is now considering the possibility of training its staff in districts to do the activists' job, but concentrating efforts on professional staff will only reduce to outreach potential of the programme. Payment of community volunteers is a general problem in Mozambique and government hasn't been able to address it. The exception is volunteer teachers in literacy programmes that since last year are receiving a subsidy (23 USD/month) to carry out 2-3 hours classes 4-5 days a week, with monies from a government loan to the World Bank.

²⁷ It was not possible to get complete figures for this. In Cabo Delgado, only 5 out of 15 trained activists are still involved in the programme, but in Maputo City most of the trained activists continue their activities in spite of all difficulties. In Maputo City, 34 out of 80 trained activists continued their work at the time of the evaluation.

Another result at the community level was the learning by disabled persons and parents of how to work together with people in similar situations. The CBR programme, in particular in the area of deafness and mental retardation programme, succeeded in bringing together people and relatives of disabled persons to get training and discuss their problems. In a number of places visited during the evaluation, groups of the above were identified and met sometimes. As stated before, these groups are a fundamental resource in communities for disability programmes, but their needs as groups and as individuals have to be addressed. Most people interviewed in these groups were highly concerned with improving livelihood, through small businesses.

6.3 Contribution to the Finnish society

KEPA's programme has not only had impacts on the Mozambican society but also on the Finnish society. Small as they might be, they are not insignificant for a society that traditionally, or even presently, has so few contacts with Africa, or with the developing countries as a whole.

Adding together all the Finnish volunteers, development workers and KEPA's staff in Mozambique during the ten-year period, the number is less than 40 people and much less if only those that have been working with the disability sector are counted. Nevertheless, after returning to Finland, many have had an important role in the development of KEPA or its member associations. The Finland Mozambique Friendship Association can serve as an example.

The task of the association in Finland has been to develop cultural ties between the two countries and to increase general knowledge of Mozambique in Finland. It has published several books on Mozambique and held seminars and workshops on Mozambican development. In 1995 the association organised an exhibition of Mozambican art which was followed by a joint workshop of the Finnish and Mozambican artist one year later. This then led to the involvement of PAND (Artists for Peace) in Mozambique, which has been followed by active cultural co-operation between the two countries.

Finland Mozambique Association is a small NGO in which all activities are based on voluntary work. "KEPA's people" have played a significant role in that work. An ex-co-ordinator

and ex-volunteer of KEPA Mozambique have been chairmen of the association, a majority of the board members have been ex-volunteers or development workers. Ex-volunteers make up for a significant part of the association's small membership.

However, it is not only through KEPA nor the NGOs like Finland - Mozambique Friendship association that Mozambique has become better known in Finland. Those that worked in Mozambique have written articles to newspapers and letters to their families, friends and colleagues. After returning to Finland they have talked about their experiences at home, with friends, at work. The value of that should not be underestimated, as one ex-volunteer pointed out. Development policy dialogue needs to have many forms and audiences.

Improvement of the professional skills and capacities is another contribution of the Mozambican experience. "I was ten times better in my work when I returned", or, "the input in me as a volunteer has returned manifold to the Finnish society through what I learnt professionally in Mozambique" are comments that reflect feelings of many ex-volunteers. Professional capacities are seen to have improved generally in human relations and particularly in networking. Some ex-volunteers pointed out that they are better in organisational work now and many concluded that they can find new creative solutions for financial and other problems far better than before.

Several Finnish disability NGOs have started their own projects in Mozambique as a result of KEPA's disability programme. On their part, the Finnish disability NGOs have strengthened global solidarity in Finland. They have been active members of KEPA and have contributed to its development. The Finnish disability NGOs have also left their imprint on the Finnish development policy. It is hard to find a reference to one of the principal goals of the Finnish development cooperation, that of promoting human rights, democracy, equity and good governance, without having disabled people specifically mentioned. Obviously not all credit for this is due to the disability NGOs, or to the experiences they have gained from Mozambique, but surely some of it is.

SUSTAINABILITY OF THE ACTIVITIES

7.1 Economic and financial sustainability

Mozambique is one of the poorest and most aid-dependent countries in the world. Formal GDP per capita is USD 230, the state budget is 50 percent in deficit and the public sector is almost totally dependent on aid receipts. Financial resources to sustain any development cooperation programme in these circumstances are hard to come by. This is especially the case with social sector programmes, among them the CBR-programme. The budget of MMCAS for the programme has been 100 percent financed by donors with no local counterpart funds except the salaries of the staff working with programme. The situation is the same with the NGO partners. Their budgets are 100 percent financed by donors, principally KEPA and the Finnish NGOs. Even the salaries of coordinators and other staff are paid by either KEPA, the Finnish NGOs or by the Embassy from the Local Cooperation Funds. FAMOD and ACRIDEME have their offices in KEPA premises, ASUMO is renting a house with financial support from FAD.

The dependency of FAMOD and the Mozambican disability NGOs on the Finnish support is presently so great that assessing financial sustainability does not make much sense. Unlike in Finland, the Mozambican disability NGOs are not supported by the state²⁸ and the potential sources of financing are limited. KEPA, the Finnish disability NGOs, and the Mozambican partners to some extent are well aware of the problem. Activities, and probably some of the organisations themselves, would not be sustained should the assistance now be withdrawn. One of the planned objectives is to broaden and diversify the associations sources of revenues. This is mainly envisaged to take place through new partners other INGOs for the Mozambican partners and through new sources of finance for the Finnish NGOs. In the latter case, possibilities of making

project proposals for the financing of the European Union were considered but then the idea was abandoned, due to European Union own funding requirements.

FAMOD seems to be on the brink of having more diversified sources of financing through new donors. ACRIDEME and ASUMO have not been as fortunate. Fund raising and income generating activities by the associations themselves have received very little attention so far although most of them have included these activities in their plans. It is very unlikely that self-financing will be of much significance in the foreseeable future as long as for example FAMOD does not even have a nominal membership fee for the associations that have relatively big donor financed budgets. Another question is how big part of the activities should be directed to own fund raising and whether that is the main function of the disability NGOs. Perhaps one just needs to accept the fact that, in the Mozambican circumstances, those wishing to strengthen the civil society through national NGOs cannot expect financial sustainability in the activities they support.

If that is the case, then the fact should be openly acknowledged. It is contradiction with the principle of MFA according to which aid should not create long-term dependence of foreign public support or on the Finnish partners. Realism of the principle in case of the activities with the poorest of the poor in one of the poorest countries of the world can be questioned but decision to support any activity in these circumstances requires careful consideration and genuinely participatory planning, implementing and monitoring practices. The history of development cooperation contains enough examples of good intentions that in practice were not only unsustainable but also, at worst, harmful.

The same is true to a great extent with the government as a partner. Salaries of the people

²⁸ The exception is ADEMIMO that receives some money for current expenses

working in the ministry at central, provincial and district level with the CBR programme are paid from the state budget but otherwise the programme is totally dependent on the donor assistance. After eleven years it is still not included in the ministry's budget although since last year there has been some discussions on having a small budget for the programme in the budget. In Cabo Delgado an attempt was made to include to the provincial budget costs of expanding the programme to other districts and integrating disabled children into schools after KEPA withdraw its financial support. The fate of the proposal is yet to be decided but those working with the programme were not optimistic. However, financial sustainability is not only a problem of the CBR programme but of the whole social sector. Overall, MMCAS has limited resources and all its activities are very dependent on donor financing.

On the whole, KEPA's direct financial support for the disability programme has been modest. This seems to have been all for the best. The absorbing capacity of the partners has been, and still is, low due to the weakness of institutional capacity and human resource base. According to the previous national director of MMCAS "*if we would have had more resources, we could not have absorbed them*". Very few complaints of the insufficient financing were voiced during the evaluation, either because of a realistic assumption that KEPA would not be a source of increased resources, or because modest financing was all that could be handled. Only in some discussions with the disability NGOs, especially with ASUMO, the need to have more financing was taken up as a priority. Yet, the small group of people forming the central headquarters of ASUMO has been financed rather substantially through FAD.

6.2 Institutional capacity and human resources

The Mozambican disability NGOs have been actors in the disability sector only for few years. Consequently it is too early to evaluate their institutional or human resource capacity to promote the sustainability of the results. All of them are still organisationally very weak and lack experience in almost everything related to organisational work, from democratic decision making to administration and financial management, to name a few. The starting point of the organisations is very different. At one end is FAMOD with qualified and educated staff, at the other ASUMO whose board members can hardly read or write.

MMCAS has a longer history although as a ministry it is a young one. KEPA's technical assistance has been directed to a great extent to the central level for the whole period of 1991-2001, with few volunteers and later development workers posted also in the PDMCAS in Sofala. Unfortunately there is little evidence that KEPA's technical assistance would have contributed to the development of ministry's present human resources and institutional capacity. Not only all counterparts of the volunteers and development workers have left the ministry but there has been an almost a total overall turnover of the staff. The human resource situation is basically the same now as it was ten years ago with young inexperienced lower level officers in charge of the CBR programme and new directors heading the departments.

This does not signify that the technical assistance was merely used for gap filling and had no results on the development of Mozambican human resources in the disability sector. Ex-counterparts of the volunteers and development workers continue to work in the country, many in one way or another with the disability issues. All of those interviewed considered that they had learnt and benefited considerably from the technical assistance and many could use this in their new jobs.

Brain drain of capable people from the government is a reality in the present day Mozambique. The salaries and working conditions are far better in national and international NGOs, donor programmes, international agencies and private companies. To a large extent, the situation is a creation of the donors, KEPA and the Finnish NGOs on their small part among them. However, to change the trend is beyond any one donor, least a small one like KEPA. A question nevertheless remains why the technical assistance was continued to be posted at the central level when it was already obvious years ago that those trained would leave the ministry at first opportunity. Why not post the volunteers and development workers in the provinces where the staff turn over is even today limited?

Somewhat paradoxically, development of human resources, and to some extent institutional capacity, of MMCAS seems to have taken place in the provincial and district levels in spite of the fact that they have benefited very little of the technical assistance. Every short visit of the volunteers and later development workers is well recorded in people's minds and still years later receives credit.

The training courses, seminars, workshops and visits to other provinces are considered useful and important for the present work in the disability sector. People are rather motivated and with the limited resources at their disposal try to implement the CBR programme the best they can even in Cabo Delgado where funding has been totally cut.

Some capacities are sustained also at the community level. Parents of the disabled children know better how to take care of their children, share more their experiences with their neighbour and other parents of disabled children, teachers are less afraid to have disabled children in their classes, former volunteers of the programme have the knowledge and the skills and occasionally use them. It would not be reasonable to expect sustainable results at the community level from the programme that so far has not been firmly planted there. MMCAS, and even less the disability NGOs, have not had capacity for this. Nevertheless, some results of the work done are visible and apparently also sustainable.

7.3 Socio-cultural aspects

The disability programme has basically been a programme that advocates human rights of the socially and culturally marginalized groups. One might expect that it would be difficult to implement a programme of that nature in a country like Mozambique which is a diverse mosaic of different sub-cultures, values, religions, customs and beliefs. Yet, that is where the programme has scored its greatest success. Almost all the people met during the evaluation pointed out that the attitudes towards disabled peoples rights have changed over the last ten years as a result of the work carried out by various actors, principally the government through its CBR programme and the disability NGOs through their activities. The change could hardly have taken place if the social and cultural prerequisites were not there, or if the programme would not have been at least minimally sensitive to different cultural and social aspects.

Box 5 :

POPULAR CONCEPTIONS ON THE REASONS OF DISABILITY

Traditionally reasons for disability have varied from the will of god to beliefs that children are born disabled as a punishment of wrong doings of the wife or the husband, of broken promises, or as a result of fights with malicious neighbours or lovers who have used curses or because of other witchcraft. More modern explanations have also emerged: the evaluation team was told that a child was born disabled because the war wore down the pregnant mother who stumbled while escaping, or because of the cyclone Naja that hit the northern provinces in mid-90s.

Many of the explanations seem to serve social functions. For harmony's sake it is better that husbands do not have lovers while the wife is pregnant, or that neighbours do not fight. In reality the war or the cyclone can have had their effects because pregnant mothers were under nourished at that time.

The message of the disability programme has been that whatever the reason, disability is nothing to be ashamed of, disabled people have the same rights as any other person and that they have capacity to be useful members of the society given the chance. Disabled members of the society deserve respect and care. Anybody can be the next victim of ill fate. According to those working with the CBR programme, people accuse each other less now than before and accept more willingly that disability is one of the mysterious ways of god, or just pure bad luck. One concrete indicator of this are the cases of false accusations in tribunals. Now they are less common than previously at least in Nampula, according to the representatives of DPMCAS.

An example of the cultural sensitivity on the part of the programme is worth to record here. It is related to the way the programme has tried to integrate disabled children to school. In the Mozambican society, parents invest in the child that is most likely to be able to take care of them once they are old. Disabled children are the least likely candidates for that in a family that has many children and cannot afford to send them to school. Instead of trying to convince the parents to educate only their disabled child, the programme has helped also the other children of the family with school material or uniforms.

Failures in income generating activities show negative implications of trying to implement projects that are not well adapted to prevailing values and ways of binding people together. Hardly any micro-project has been sustainable. The reasons for the failures need to be assessed more carefully than what is possible here but it should be critically reflected whether financing only group activities is really socially and culturally sustainable in Mozambique. Better results have been obtained in the few cases that the projects have financed economic activities for individual families and yet almost all micro-projects financed through donors go to groups.

Similarly, the CBR programme continues to be based on the idea of voluntary activists at the grassroots even though this has proved not to function in reality. The period of voluntarism in Mozambique was more or less over at the time the CBR programme was formulated. All the supervision reports, appraisals and evaluations carried out over the years have pointed out to the problems created by not compensating the activists. Yet, KEPA continues to maintain that the activists should not be compensated. Alternative solutions are sought from engaging parents of disabled children to become activists in their communities and training the staff of Social Action. The findings from the field do not support optimism with this alternative. Parents of the disabled children also want to have some compensation for the work they do.

Clearly, it is difficult for KEPA to have a differing policy from that of the ministry but if it has been able to influence the National Disability Policy, compensation for the activists in the CBR programme should be a modest step in policy formulation, especially as there is pressure for that from the provincial directorates. As clearly, it would not be financially sustainable but which of the activities supported in the disability field can be claimed to be financially sustainable?

7.4 Gender

Gender has not received much consideration within the disability programme over the years. KEPA and Mozambican partners' plans and programmes do not account for gender diversity: objectives and results, when defined, are not presented disaggregated for gender. Nevertheless, the importance of the issue was well understood by the provincial director of Cabo Delgado who stated that income generating projects for the disabled are mostly based on choices of men who "*choose businesses that men usually do and not businesses that women do*". The statement of a man interviewed in Chiure that "*women do not come to these meetings they say they have no time to be seated so long*" further shows the need for gender sensitive analysis and interventions.

Gender analysis shows that disability costs are much higher among women and girls than among males. Several studies report that women tend to be abandoned by husbands when a disabled child is born. Misbehaviour as "cause" of illness is more likely to be attributed to women than to men: Additionally, disabled women are prone to be abused by men, who usually leave them with small children and pay nothing for their care. This is true of women in general, but disabled women face more difficulties in providing for their offspring than non-disabled ones. During fieldwork it was found out that many disabled women did not have a live-in husband, had several children from several fathers, and were living with their mothers and grandmothers.

One reason for lack of gender sensitivity within the disability programme, may be insufficient understanding of the concept and how it can be operationalised. This seems to be true both of KEPA and Mozambican partners, even of the MMCAS, who is responsible for Women affairs within government. Expressions such as "*Regarding gender, I'm more concerned with men, because there are very powerful women in disabled organisations and men are the ones who need empowerment*"; or attitudes of looking at gender as a quota to meet, miss the point and contribute to maintain stereotypes, disenfranchising women and enlarging the gap between men and women. In a number of situations it was clear that staff, both in partners organizations and in KEPA, had little understanding of the effect of having male translators or mostly male teams carrying out home visits to interview poor disabled illiterate rural women and girls.

In terms of human resources, professionals are predominantly male in the disability sector in Cabo Delgado and in Sofala. In Nampula there were two women and one man, while in Maputo City and province, staff is female. The impact of having exclusively or mostly one gender teams has not been analysed in the disability programme.

At the community level there seems to be more gender balanced teams, in particular in the locations visited. Also, women have benefited from wheelchairs and the evaluation team was told that having young children to care of is a criterion for priority in the provision of compensation means. Nevertheless, no analysis was found out during the evaluation on the role of women as caregivers and health care providers for the disabled at the household level and the impact of their role as CBR activists in their other social responsibilities. Nor was analysis done on the special risks of sexual abuse faced by disabled women, in spite of the concern raised by one study funded by KEPA, and a report on the sexual abuse of a deaf girl enrolled in the CBR programme in Maputo province. With the present HIV infection rates in Mozambique, sexual abuse is a twofold risk for disabled people, and disabled women in particular. Additionally, disabled women, being amongst the most poor citizens and having the full responsibility for their children upbringing may be at higher risk of becoming involved in prostitution.

During the evaluation, no special attention was paid to organising visits and meeting with women in timetable compatible with their several roles.

7.5 Participation and ownership

KEPA has not had its own disability programme in Mozambique. It has been supporting the CBR programme in the ministry and the activities of the emerging disability NGOs. The role of the volunteers and KEPA itself has been crucial in the development of the CBR programme and in the creation of the disability NGOs and FAMOD. It can be argued that the role has been too central and that the disability programme as it is today is KEPA's creation. Nevertheless, KEPA has never been alone in control of the programme nor made decisions alone.

One of the main strengths of KEPA is the way it has cooperated with its partners. According to the partners, they have been able to participate in the policy discussions as well as on planning and monitoring of the Partnership programme and disability programme. Discussions are judged to have been open and constructive even on difficult matters. KEPA's role has been valuable in exchange of information and experiences. Not only its financial support and networking with the Finnish NGOs but also its moral support is valued. Possibilities for participation have been better with KEPA than with other INGOS in the disability sector, according to the partners in Maputo.

One of the few negative aspects of KEPA mentioned in the discussions with KEPA's partners was the way articles on the Mozambican disability NGOs appear only in incomprehensible Finnish. *"We also would like to know what is written on us. Why are texts not translated?"* asked a coordinator of one association and thought that in general it would make more sense, and be cheaper, to have a Mozambican information officer. Texts can also be translated into Finnish.

Participation of the partners in decision making is centralised to a great extent to Maputo. People involved in the disability programme at the provincial and district level do not feel they have much to say in the way the partnership programme is planned or financed²⁹ The direct beneficiaries of the CBR programme at grassroots have no voice in decision making or control over the programme run by government. The provincial delegations of the disability NGOs and FAMOD have hardly any contact with, and even less control, over the parent organisation in Maputo. If participation and "ownership" is understood to mean that beneficiaries at various levels should be active agents of the development and, in the last instance, responsible for the programmes sustainability, then much work remains to be done. So far participation and "ownership" have been an almost exclusive domain of the central level actors. This, to an extent, is true also of KEPA itself. KEPA Maputo feels that decision making is centralised in Helsinki. KEPA Pemba feels that decision making is decentralised in Maputo and Helsinki.

²⁹ An example of this is the financing of CBR programme in Cabo Delgado. Even though the situation in PDMCAS is quite different from what it was when the decision to cut the USD 5000 from PDMCAS was made in 1999, the programme continues to be without financing now already for the third year. KEPA's unilateral decision has had negative consequences on the programme itself especially in Chiure where CBR activities had advanced well. There is little room for speaking of the partnership with the PDMCAS when the partner has no control over the decisions.

Box 6:

ACTIVIST IN THE CBR PROGRAMME

Sra Gracinda is a middle-aged women living with her husband and her daughter in Chiure in Cabo Delgado. The husband is a teacher and leaving for work when the team arrives. Sra Gracinda is taking care of her daughter's child who is playing in a very tidy yard. Sra Gracinda started as an activist in 1995 and even now considers herself as an activist although the programme has lately been very weak. How did she become an activist? *"Well, one day one man from Social Action appeared to my house and said that you have daughter who is deaf. So then I went to a meeting and become an activist".* There were other activists at that time and they all participated in a course. All the others have abandoned to be activists since there were no small incentives like capulanas anymore. She herself still does occasional work in her community like few months ago when she was collecting information of the orphans for the Social Action. But before she was really active *"I visited regularly parents of the disabled children and taught them how to take better care of their children. Yes, the families received me well but I don't know what they spoke after I had left I also participated in the course for Sign language. There was a man who came from Maputo to teach us and we had a very active group of the Deaf here. Now the group is dispersed and does not meet anymore".* Was her daughter in the group? *"Yes, that is why I went"* Sra Gracinda says and begins to tell how difficult it is for the disabled women to get married. Nobody wants to marry them. *"Like my daughter, she is not married".*

Cooperation with the Social Action was good. They worked well with the activists and the disabled. *"The biggest problem was that the families are so poor and we had nothing to give to them. It is hard. Many people think that we activists have all kind things but we just don't want to give them. It is not like that. We had nothing to give even to children we tried to get to school. No exercise-books, nothing. We spoke about this but to it did not help."* How to improve the Programme? *"Well, the Social Action needs to be strengthened and then the activists need to have some incentives to carry out the work in their communities. We have already spoken of this so many times".*

CONCLUSIONS

8.1 General conclusions

The general conclusion of the evaluation of KEPA's disability activities over the years 1991-2001 is a positive one. With relatively modest resources KEPA has been able to contribute significantly to the development of the disability sector in Mozambique. It has had an important role in the formulation of the national disability policy and has contributed concretely to the promotion of human rights of the disabled, especially those of the Deaf. These are results that KEPA can rightly be proud of.

However, on the Finnish side, KEPA alone does not deserve all the credit. One of the keys to success has been the involvement of the Finnish disability NGOs in the disability sector since almost from the start. The volunteers of the Finnish Volunteer programme provided the needed link to KEPA's member organisations and their involvement together with the input of the volunteers gradually turned the scattered activities into a programme. The Partnership programme did not significantly change what was already a reality in the disability sector before the new strategy was officially adopted.

If KEPA has scored the greatest success in the field of human rights and national policy formulation, less remarkable results are to be found in improvement of the economic situation of the disabled and development of the capacity of MMCAS. Income generating activities have mostly not been successful and development of

the capacity of MMCAS has been limited especially at the central level. The CBR programme and FAMOD are dependent on donor financing. Sustainability of the activities is unlikely without continued outside support. Reasons for most of these failures are due to the circumstances beyond the scope of KEPA but not all.

One of the main weaknesses of KEPA seems to be its capacity to understand fully the context of its activities and the specific role of the civil society especially at the local level. Partly this can be explained with the amount of different activities it has been supporting in different provinces, each with its different political, economic, social and cultural characteristics. The question is, would concentration not have been more realistic given the resources?

The strength of KEPA in disability activities has been its long-term commitment and emphasis of human rights and close cooperation with its partners, both governmental and non-governmental. It has proved that with relatively small resources over a long period of time one can have more impact than with massive resources during a short period. Compared to other donors in the sector, KEPA has been rather unique in this respect. Not that many donors have been involved in the disability sector to begin with and most of those supporting the sector have been involved with vast amounts of resources for few years concentrating on physical rehabilitation of the disabled.

8.2 Right partners and right strategies in the changing policy context?

Mozambique has witnessed rapid and profound political, economic and social changes during the ten years period that KEPA has been operating in the country. The context of the disability sector has changed with the emergence of the Mozambican disability NGOs on one hand and weakening of the state institutes and departments on the other. The civil society is however still very weak and only taking shape in the midst of donor influx to support the emerging national NGOs. This is also the case with the disability NGOs.

KEPA's response to the changing context of the disability sector has been to continue with the government as a partner and at the same time seek new partners from the civil society. On the government side, this has meant supporting MMCAS which itself has undergone notable changes during the last ten years. The partnership with the ministry has basically been restricted to the central level although some provincial directorates are nominally partners. KEPA has supported some Mozambican disability NGOs, principally ADEMIMO, ASUMO and ACRIDEME but a more structured partnership with the disability organisations that later on formed FAMOD only commenced three years ago. In monetary terms, FAMOD is the most important partner of KEPA presently.

In general, KEPA has been cooperating with the right partners in the disability sector. The government was the only alternative when the disability activities started and continues to be a relevant partner should one wish to reach the disabled at the community level. The national disability NGOs are a recent phenomena and still very weak with little possibilities of being real actors at the grassroots. The role of the disability NGOs has however been growing and their cooperation with MMCAS seems to function well. KEPA has been very wise in having government and civil society organisations as partners and on its part also eased the communication between the two.

Partnership relations have functioned in practice mainly at the central level. Overall, KEPA's support to disability activities has been urban, and Maputo centred. Justification for directing the overwhelming part of both KEPA's technical assistance and financial resources to the central level up to the present is questionable. Maputo

is an island of affluent human and financial resources in the midst of acute lack of them elsewhere, especially in the north. On its small part, KEPA has strengthened the existing inequality between the different parts of the country.

Leaving aside the central level bias, KEPA's strategy in its support to the disability activities has been basically a right one. KEPA has not had "its" disability programme but has been supporting the government's CBR programme and the activities of the emerging disability NGOs. The role of the technical assistance and KEPA itself has been important in the development of the CBR programme and in the creation of some of the disability NGOs and FAMOD. It can be argued that its role has been too central but, nevertheless, KEPA has never been alone in control of the activities nor made decisions alone. Partnership as a strategy existed already before the Partnership programme. However, government as a partner and the civil society as a partner are two very different types of partners for a forum of NGOs like KEPA. Somewhat surprisingly, its strategy to cooperate with the government and the civil society is the same.

8.3 Relevance

In general, KEPA's support to disability activities have been well in accordance with both the Mozambican development policies and KEPA's basic tasks and principles at various points of time.

The main objective of development in Mozambique is substantial reduction of absolute poverty. Within this general objective, rapid and sustainable economic growth, consolidation of peace, national unity, justice and democracy are the cornerstones of the development policy which emphasises development of rural areas and reduction of regional disparities. In the social sector, development programmes aim at promoting the rights of vulnerable groups, in particular, rights of the children, women, disabled and elderly people.

KEPA's disability activities have been coherent with the Mozambican development policy especially in promoting the human rights of the disabled through the government programmes and supporting the creation of disability associations to advocate the rights of the disabled. KEPA has also supported activities aiming at reducing pov-

erty although its direct role in this has been weak and success in most income generating activities has been low. Nevertheless, promotion of the self-esteem of the disabled and their acceptance in the society creates an enabling environment for the integration of the disabled in economic activities. Similarly, promoting access to education is a contribution to poverty reduction, as low educational levels are among the main determinants of poverty.

One of the priorities of the Mozambican development policy, that of the reduction of regional disparities, has not been given much weight within KEPA's disability activities. Most of the technical and financial support has been directed to the central level. Opening the KEPA office in Pemba was relevant from the point of view of reducing regional disparities, but it took place only in the late 90s while that could, and should, have been done earlier. The same applies to the allocation of KEPA's human and financial resources which even today have a heavy central bias.

The objectives of KEPA's disability programme in Mozambique, promotion of equity, justice and human rights, poverty reduction, strengthening civil society and democracy are among the basic values of KEPA. The disability activities aim at promoting these values in very concrete terms from national advocacy level to activities at the grassroots. Some objectives have been met more successfully than the others have but the objectives themselves are coherent with KEPA's principles. KEPA's basic task, defined to be to encourage, support and organise the Finnish civil society to participate in actions that promote global responsibility through the Partnership programme, has concretised in the disability activities. Finnish disability organisations have been actively involved in the disability sector almost for ten years thus promoting global responsibility on their part. KEPA's own support to the disability sector has been coherent with its definition of partnership: long-term equal relationship, interaction and cooperation. It can be questioned how equal a relationship even at best can be among partners when the other partner has all the financial resources but at least the disability programme has filled the criteria of being long-term.

In practice, the disability programme does not seem to have been very relevant from the point of view of its contribution to the development policy dialogue between the North and the South. A

question remains, why the wealth of experience gained on practical implementation of human rights has not been better documented and used in KEPA's own work in Finland. It would have, and has, much to offer not only on promoting human rights of the marginalized groups of the society but also on advocacy and lobbying in general.

The relevance to the direct beneficiaries has principally been in activities that have promoted their human rights, dignity and self esteem. Benefits of the changing attitudes are relevant to far greater number of the disabled than those directly covered by the CBR programme which has been able to address the concrete needs of the beneficiaries in a very limited scale.

Yet two important questions remain. First, although there may be strong participation of the partners in defining and implementing the activities, does this also reflect the participation and needs of the ultimate beneficiaries? It is difficult to find evidence in this point especially when the focus is on community based voluntary work or poverty reduction. Second, have the partners

KEPA, MMCAS and FAMOD reached a shared understanding what concepts like strengthening democracy or promoting gender equity or partnership, for that matter, at different levels - mean? Evidence in practical implementation of the activities seems less clear.

8.4 Results and impacts

The extent to which the purpose of the disability programme has been achieved as a result of KEPA's activities, is difficult to quantify. In part because results of the advocacy work are overall not easily quantifiable, in part because the design of the disability programme has been, and continues to be, on a very general level. Objectives and beneficiaries are not clearly defined, nor are expected results and indicators to measure the achievements.

The overall objective of the disability activities has been defined in various ways during the years but has included, in one way or the other, improving the quality of life and the human rights of the disabled and their integration in the society. The purpose, or the immediate objectives, have as well varied over the years. Improving human rights of the disabled is one among them where progress towards the objective has been at its

most effective. The human rights of the disabled have improved considerably during the last eleven years, according to all different stakeholders, including the disabled themselves or their parents. From being despised and marginalized members of the society, they have become accepted to have the same rights as any other person. The self-esteem and respect of the disabled has grown. The Deaf have acquired a right to language. Access to education of the disabled has improved. Clearly, the disabled still face immense problems and they are still discriminated but nevertheless, there has been a notable change in the attitudes towards the rights of the disabled. Part of the credit belongs to KEPA's disability activities.

KEPA's support to the disability sector is the contribution to the formulation and dissemination of the national disability policy has been important, even fundamental according to some Mozambican stakeholders. The technical assistance had an input in the formulation of the policy and KEPA itself helped with facilitating meetings and workshops with the MMCAS and the disability NGOs. Another donor, Handicap International, was also involved but its role is considered to have been that of the financier while KEPA's technical assistance had an important impact in the process itself. KEPA was also the first one to facilitate seminars in which the recently approved policy was divulged. Perhaps KEPA's role in the national disability policy is one of the best examples of unexpected results of its activities, or at least one that was not explicitly included in the plans.

KEPA's role have been even more central in the creation of FAMOD and some national disability NGOs, especially those in the area of deafness and mental retardation. They would not yet exist without the support of KEPA and the Finnish NGOs. Not only has the number of the national disability organisations increased but their role has also augmented. KEPA has thus on its part strengthened the civil society.

However, heavy financial dependency of the disability associations on the donors raises the question to who are they accountable to and also, who do they represent in the present reality of Mozambican civil society? Another important question is the absorbing capacity of the still very weak national disability NGOs: how effectively can organisations composed of a limited number of people who very often have lacked access to education and other opportunities, all of sudden

use large sums of money? For example, ASUMO at the central level is facing serious problems but at the provincial level the groups of the Deaf are highly committed and working actively to improve the situation of the Deaf. Paradoxically, they have received very little financial support while ASUMO at central level has been financed amply.

Partnership with FAMOD has meant various types of support for capacity building, advocacy and networking. However, the results of these activities are still to materialise in practice although already now, after few years, FAMOD is a recognised partner for the government in disability issues at central level. At the provincial level, the weak development and poor resources of the member associations together with poor communication and transparency from the central level are major obstacles for the development of the provincial nuclei.

KEPA's programme has not only had impacts on the Mozambican society but on the Finnish society as well, small as they might be. Many returning volunteers have had an active role in the development of KEPA and its member organisations aiming at broadening the ties between the two countries and increasing general knowledge of Mozambique, and the world outside Finland as a whole. Newspaper articles and books have been written on the Mozambican experiences. Families, friends and colleagues have formed new audiences for bridge-building between the two countries. Professional skills of the ex-volunteers and development workers have improved as a result of working in Mozambique. Several Finnish disability NGOs have started their own projects in Mozambique and on their part, strengthened global solidarity in Finland. They have been active members of KEPA and advocated for the disabled not only in KEPA but in MFA as well.

8.5 Efficiency

Evaluation of the efficiency of KEPA's disability activities is not included in the ToR of the evaluation. Assessing the cost-efficiency of the activities would indeed have been a difficult task due to the general level of programme design. Furthermore, the programme has been implemented during eleven years with different types of activities that have funding from various sources and no figures existed on the total costs of the programme.

Nevertheless, the evaluation team tried to compile budget information from various sources to have a rough estimate of the costs of the disability activities over the years and on their thematic and geographical distribution. According to these calculations, the disability sector has had Finnish funding roughly around 21 million FIM between 1991 and 2001. KEPA's contribution of this has been around 13 million FIM. Even though an assessment of the cost-efficiency is not within the scope of this evaluation, KEPA needs to give more attention to monitoring the efficiency of its programmes, especially as they are almost totally dependent of donor financing. That, in general, tends to have negative implications not only on sustainability but also on efficiency. NGOs activities should not be special cases where the standard requirements for project design do not apply. This is very much the case with the evaluation of KEPA's activities, too. The first evaluation on disability activities should not be carried out only once in 11 years.

8.6 Sustainability

Evaluating the financial sustainability of KEPA's disability activities is a somewhat theoretical exercise in the present reality of Mozambique where most of the donor supported projects have little chance of being financially sustainable, at least in the short term. This is particularly true of the social sector programmes in which the majority of the beneficiaries are very poor, as is the case with the CBR programme. The whole programme budget is financed by the donors. The salaries, however, are covered by the state budget. The NGOs are even more dependent on donor financing which covers both activities and salaries of those working in FAMOD, or in the disability NGOs supported by the Finnish NGOs. Mozambican disability NGOs are not supported by the state and potential sources of financing are limited. Most of the activities, and probably some of the NGOs themselves, would not be sustained should the donor support end.

Some attempts have been made in the MMCAS to include a small budget for the CBR programme in the ministry's budget but so far without results. Fund raising and income generating activities are normally included in the plans of the disability NGOs but have received little attention. Instead, the NGOs try to broaden and diversify their sources of financing by seeking new partners. Both, the CBR programme and most of

the Finnish supported disability NGOs, are still dependent on one or two donors.

If the Mozambican reality is such that those wishing to support the social sector or the civil society cannot expect financial sustainability, then the fact should be openly acknowledged. It is in contradiction with the principle of MFA according to which aid should not create long-term dependence of foreign public support, or on the Finnish partners. Realism of the principle in case of the activities with the poorest of the poor in one of the poorest countries of the world can be questioned but a decision to support any activity in these circumstances requires careful consideration and genuinely participatory planning, implementing and monitoring practices.

The question of institutional sustainability is even more crucial than normally in programmes that face serious problems of financial sustainability. Can KEPA's disability activities then be sustained institutionally and are they socially and culturally sustainable? KEPA's technical assistance has been directed mainly to the central level of MMCAS for the whole period but there is little evidence of the development of its institutional capacity or of its present human resources. Not only have all counterparts of the volunteers and development workers left the ministry but there has been an almost total turn-over of the whole staff. Brain drain of capable people from the government is another harsh reality of the present-day Mozambique especially at the central level with its concentration of donors that offer higher salaries, better working conditions and training possibilities. At provincial level opportunities are more limited and consequently at that level it was possible to verify some development of human resources and institutional capacity. Some capacities are also sustained at the community level.

It is too early to evaluate the institutional and human resource capacity of the recently created Mozambican disability NGOs or FAMOD to promote the sustainability of the results. All of them are still organisationally very weak and lack experience in almost everything related to organisational work, from democratic decision making to administration and financial management, to name a few.

Advocacy for the human rights of the disabled has been carried out in a socially and culturally sustainable manner or else the achievements in this respect could not be as visible, widely felt

and appreciated. On the other hand, failures in income generating activities and with CBR programme's activists show negative implications of bypassing prevailing values and ways of binding people together.

In general, plans and programmes of KEPA or its partners have not accounted for gender diversity nor is data gender disaggregated. Yet, several studies have concluded that the social and economic costs related to disability are higher for women than men: women tend to be abandoned when a disabled child is born and disabled women are often sexually abused by men who leave the women to take care of the child alone. Income generating activities are all too often designed for men. Within the disability programme, analysis have not been made on women as caregivers and health care providers at household level nor on the special risks of sexual abuse that disabled women face. The main reason for lack of gender sensitivity in the disability programme may be the insufficient understanding of the concept and how it can be made operational. This seems true even of MMCAS which is responsible for Women Affairs.

One of the main strengths of KEPA has been the way it has cooperated with its partners. The partners have been in a position to participate in the policy discussions as well as in planning and monitoring of the Partnership programmes. Participation in decision making has, however, been centralised to a great extent to Maputo. People involved in the KEPA's disability activities at the provincial and district level have not had much to say in the way the programme is planned or financed. The direct beneficiaries at grassroots have no voice in decision making or control over the programme. If participation and ownership is understood to mean that beneficiaries at various levels are active agents of the development, and in the last instance, responsible for the programmes sustainability, then much work remains to be done.

RECOMMENDATIONS

The recommendations can be divided in those on the continuation of the disability programme and KEPA's future role, recommendations on partners and finally, on future strategies in the sector.

Continuation of the disability programme and KEPA's future role

The evaluation team fully concurs with the strategic objective of KEPA in Mozambique: to improve human rights of the most vulnerable groups of the society. The disabled are poorest of the poor and marginalized members of the society. Equal opportunities to education, employment, justice and participation in societal and political life are yet far from being their lot.

Consequently, the evaluation team recommends that *KEPA should continue its support to the disability sector and maintain the human rights perspective of the disability programme.*

KEPA's support has achieved important results in eleven years which is a short time for a any development process and particularly for one that started almost from scratch and with so little money. Changing attitudes and values, like the ones with respect to the rights of the disabled, is a process that takes considerable time. The process is still a long way from being sustainable by itself. It is the view of the evaluation team that withdrawing from the disability sector now would be both incomprehensible and irresponsible. In contrast to many other sectors in Mozambique, the disability sector has even today very few donors. Being one of the few, KEPA, with its limited resources, has been able to add a particular value both on the development of the sector and of human rights in Mozambique. Within the sector, KEPA's value in comparison with the other donors, has been its

long-term commitment and partnership relations with Mozambican organisations. Clearly, should value added be an objective of KEPA's role to continue in the disability sector is one of the few available choices in Mozambique.

It is furthermore recommended that *to have a coherent programme, all partnerships programmes and possible future activities of KEPA in Mozambique should be assessed from their contribution to improvement of the human rights situation.* The focus is already on the human rights and that should be strengthened even further. In the view of the evaluation team, *experience gained from the work in Mozambique with the human rights in general, and with the disabled in particular, should be better utilised in the development policy dialogue in Finland.* So far very little has been done in this respect.

There is also a need to find a common understanding between KEPA and its member organisations on KEPA's role in the design and supervision of the projects implemented by its member associations. The mandate of the liaison officer to intervene when he or she sees need for corrective actions desires clarification

Future Partners in the disability sector

The evaluation team is of the opinion that *KEPA should continue to work with its present partners in the disability field also in the future. However, their roles should be redefined at central and provincial levels. Possible new partners need to be identified among the community based and local organisations and new partnerships developed at provincial level.*

Government, represented by MMCAS, continues to be a realistic actor for a national disability programme that aims to increase its outreach to the grassroots. The Mozambican disability are still too fragile, and too young for that. Very few have district representation. Nevertheless, their role has been growing and their increased involvement should be supported.

KEPA's support to MMCAS and FAMOD has been to a great extent centralised to central level. With FAMOD this is justifiable also in the future. It is recommended that *KEPA's support to FAMOD should focus at the central level of the organisation where it has an important role in advocacy, monitoring the government and the parliament as well as dissemination and exchange of information and experiences. In the view of the evaluation team, creation of FAMOD's provincial nucleus is premature, even risky, and should not be object of direct support from KEPA. Rather, KEPA needs to consider new partnerships with the representatives of the civil society depending on the specific circumstances of the area. Also, KEPA should consider opportunities of supporting a local organisation in activities that require collaboration with others, in order to promote better communication and relationships among organisations of the disabled.*

On the other hand, the objectives of the partnership with MMCAS at the central level need to be critically assessed. For the development of the disability programme *partnership with the provincial and district directorates of MMCAS should be strengthened.* The National Disability Policy can only become operational in the field

The evaluation team is somewhat concerned on the capacity of KEPA to strengthen the Mozambican civil society with its present understanding of that society. The Mozambican civil society is a complex context and to support it with adequate measures through right partnerships requires in depth analysis of both the general and local trends. It is therefore recommended that *KEPA should develop its own capacity to understand the context of its activities, the specific role of the civil society especially at the local level and the role that KEPA can play in developing civil society in Mozambique.* Recruitment of personal with expertise on civil society, use of advisory boards composed of local experts, commissioning studies, organising seminars and workshops etc are some examples of the ways.

Future strategies in the disability sector

One of the main recommendations concerns the decentralisation of KEPAs activities in Mozambique. *It is strongly recommended that KEPA concentrates its activities to the northern provinces of Cabo Delgado and Nampula, possibly later on also to Niassa if resources allow. The activities in Maputo should be substantially reduced.*

The evaluation team questions the KEPA's policy of concentrating a major part of its activities at the central level, year after year. Maputo has been and continues to be the most privileged part of the country where both the national and international resources are abundantly centralised even without the modest contribution of KEPA. The northern provinces, on the other hand, are among the poorest of the country. The human and financial resources are scarce in the north and consequently the need for support is far more acute than in Maputo. Yet few donors have programmes or projects in the northern provinces. From the point of view of the principles of KEPA and its strategic objectives, it would make more sense to have its head office in Pemba instead of Maputo. Even though a recommendation on that is not presented here, KEPA should seriously reflect the staffing balance of its two offices and also consider the advantages and disadvantages of having the main field office in Maputo.

One of the important results of central level work has been KEPA's contribution to the formulation of the National Disability Policy. Now the policy needs to be divulged and made operational and regulated. Consequently, KEPA should not only decentralise its activities from the central to provincial level but *to improve the follow-up of the disability programme in the district and community level.* A visit of the programme officer one or twice a year is not sufficient.

Taking all of the findings and conclusions together, the evaluation team recommends that *technical assistance should be included in the Partnership programmes also in the future. However, there is need to have different types and form of qualified technical assistance.* A question remains whether it is possible for KEPA to recruit the needed expertise.

The Mozambican partners are very clear in their assessment of the need of technical assistance also in the future. It is still seen crucial. Similarly, the Finnish disability NGOs and KEPA Maputo

consider that technical assistance continues to be needed in the present day Mozambique, and especially in the disability field. Clearly, there exists a common understanding on the need of technical assistance between the different actors which is not very common in development cooperation.

The evaluation team agrees on the overall need of the technical assistance in the disability sector. *It is recommended that long-term technical assistance to MMCAS will be posted only to provincial and eventually district directorates. At the central level, TA should be provided only for specific objectives and be of short term. Overall, the profile of technical assistance needs to be critically reflected.*

To sum up the expressed needs and expectations of the technical assistance in the disability sector: assistance is principally needed in management, information systems, planning and follow-up as well as in some specific disability issues. Short-term or long-term assistance is needed, depending on the situation. Technical assistance should be first and foremost professional but also fluent in Portuguese, familiar with the Mozambican disability sector and have right attitudes. Mozambican partners appreciate the short term consultancies of the ex-volunteers and development workers, because they already know the country, sector and language. The question is how realistic it is to expect that KEPA could recruit technical assistance of these qualifications? Perhaps one possibility worth studying is the use of ex-volunteers and development workers for short term assignment. In all technical assistance, possibilities to contract professionals that are themselves disabled need to be studied.

The evaluation team recommends that KEPA mainstreams gender in its programmes. Technical assistance may be needed to introduce the concepts and assist KEPA's staff and partners in mainstreaming gender in programmes. Due to present lack of gender disaggregated data, it is not possible to make gender analysis on the disability programme based on documents. It is recommended *that an exercise of gender analysis and planning is carried out as an introduction to the issue.* This would bring information for sensitisation and training, and help in developing gender indicators that could be used in a more consistent way in planning.

In the future it would be worth while for KEPA to *pay more attention to programme design and follow-up, and arrange if need be, training on these matters to its staff and partners.* The programmes of both KEPA and its partners could benefit from more concrete planning in terms of objectives, expected results, indicators to verify the results, activities and means to achieve them. Programme design on a very general level does not only pose difficulties for the evaluation of the programme but also for its routine follow-up. Clearly, it difficult to quantify results especially in the programmes of advocacy nature but that does not mean that the plans have to be very general as a whole. For example, instead of having "more districts are covered by the CBR programme in 2000" one should try to specify which districts are to be covered that year. Serious efforts are also needed to assess the efficiency and overall sustainability of the programmes. Likewise, monitoring and evaluation of the programmes need to be given more attention than what has been the case so far. Much remains also to be done in *collecting and processing data more systematically as well in producing more information for the Mozambican and the Finnish society of the achievements of the programme especially in the field of human rights.*

ANNEXES

ANNEX 1

EVALUATION OF KEPA'S DISABILITY ACTIVITIES OF THE VOLUNTEER PROGRAM (91-97) AND PARTNERSHIP PROGRAMME (97-01) IN MOZAMBIQUE TERMS OF REFERENCE 18.3.2002

1. Introduction

Kepa has supported Mozambique's disability sector already for 10 years. Some evaluations have been made during that time either concentrating on some specific questions or evaluation of Kepa's actions as a whole, but there is no overall evaluation about disability sectors' co-operation in Mozambique. The recommendations of this evaluation will be used in the future planning of Kepa's actions and the lessons learnt can be further used when implementing Kepa's strategic vision about resource centre.

2. Background

2.1 Kepa in general

Kepa (The Service Centre for Development Co-operation) is the umbrella organisation of Finnish non-governmental organisations working in the field of development co-operation or otherwise concerned with issues to do with developing countries and globalisation. It is ideologically and politically non-aligned and non-denominational.

When Kepa was founded in 1985, there were 56 participating organisations. Today the total has grown to over 200. All affiliated organisations do their own work independently, but under the umbrella of they can unite their forces.

The basic values underpinning our work are sustainable development, environmental protection, justice, tolerance, equality, and desire for peace, human rights and democracy.

2.2 Kepa in Mozambique 1991-97, Finnish Volunteer Service

2.2.1 General

Kepa's actions in Mozambique started in 1991 when an agreement was signed with the Mozambican government. Kepa established an office in Maputo and first volunteers were posted to work in Mozambican organisations. Since the NGO sector in Mozambique in 1991 was rather limited many of the Finnish volunteers ended up working in Mozambican government organisations and ministries. The main sectors in which Kepa started to work were: health, environment and social sector. Postings were physically situated in Maputo, Nampula and Pemba. One of the priorities the Mozambican government wanted to develop was the Secretariat for Social Affairs, which later became the new Ministry of Social Affairs (MICAS). Kepa's support was directed to the development of the disability department.

2.2.2 Social sector postings

Altogether 31 persons worked in Mozambique as volunteers during the years 1991-97 and eight (8) of them worked in the social sector. Three (3) volunteers worked in Ministry of Social Affairs with deaf issues and four (4) volunteers worked with special education and mental retardation issues, especially within the national CBR(ABC)-programme. One volunteer worked in Mozambican disability NGO (ADEMIMO). The postings were mainly in the Cabo Delgado, Nampula and Sofala provinces and in Maputo at the central level of the Ministry. For specification, see the annex 1, were the names, postings, duty stations and contract times and main tasks of the volunteers are presented.

2.2.3. Kepa co-operation with Finnish disability organisations

Even though this evaluation concentrates on Kepa's activities in disability sector, it is good to recognise that the disability sector in Mozambique is supported by various international donors, many of them with much bigger input than Kepa. For instance the support to the government's national disability programme, the ABC/CBR-programme of MICAS, is shared between various donors according to the provinces.

Some Finnish NGOs of disabled people got interested in Mozambique disability sector via Kepa volunteers, and started projects in Mozambique in mid-1990's. There was a need for financial resources to run activities in the areas of deafness and and ABC-work, as Kepa's volunteer programme did not provide them.

The Finnish Association on Mental Retardation (FAMR) and The Finnish Association of Deaf (FAD) have since 1993 had cooperation with their sister organisations in Mozambique and with MICAS. FIDIDA (Finnish Disabled people's International Development Association) joined in this work in 1998.

2.2.4 Shift from volunteer programme to partnership programme

In 1995 the Finnish Ministry for Foreign Affairs made an overall evaluation of Kepa's volunteer programme and in which the technical assistance at its present form was questioned (Evaluation of Finnish Personnel as Volunteers in Development Cooperation, Report 1995:3, Report of Evaluation Study, Ministry for Foreign Affairs, Helsinki). The evaluation launched a two-year renewal process in Kepa and it resulted in a shift of the whole set up of Kepa's field actions. Kepa's volunteer programme was gradually phased out and a new partnership programme was introduced, this included co-operation agreements with local organisations, liaison services and development policy activities. Technical assistance was maintained as one possible instrument but all the development workers (earlier called volunteers) were included in the co-operation agreements.

Kepa continued to support Mozambique's disability sector within the Partnership Programme. One of the main reasons was the need for a long-term commitment. Secondly, the Mozambican

counterpart organisations expressed their wish to have Finnish development workers in the future, too.

2.3 Partnership programme 1997-2001

2.3.1 Partnership programme

Through its Partnership Programme, Kepa aims at increasing awareness of global issues in the Finnish civil society and facilitating a better capacity for action by providing Finnish organisations with information and arranging training, campaigns and other services for them; strengthening civil societies in developing countries both through Kepa's own work in the field and by building up co-operation networks between Finnish NGOs and their counterparts in the South. The "Partnership" means here a long-term interaction and co-operation on a basis of equality.

In 1997 the Kepa Board approved a criteria to be used for the selection of the projects and partners. The Board revised these criteria in 1999. At the same time the maximum sum for the co-operation agreements was set at 600 000 FIM.

2.3.2 Co-operation agreements with MICAS and FAMOD (1997-2000)

The first proposal for co-operation agreements with MICAS and FAMOD for years 1997-2000 were presented to the Kepa board and approved in 1997.

2.3.2.1 Ministry of Social Affairs (MICAS) agreement:

The long-term objectives were the following:

- to integrate disabled people into society as valid and productive members
- to promote the human rights of the disabled people.

Immediate objectives were:

- increase the professional capacities of the staff in MICAS on central and provincial level (especially in deafness and mental retardation)
- to increase the coverage of the ABC-programme in the provincial/District level and
- to increase the role of the communities within the implementation and planning of the programme - to increase the knowledge and understanding on the situation and problems of the

disabled people in Mozambique

In addition to the immediate objectives also specific objectives were defined: - In the area of deafness: investigate and expand the use of sign language and strengthen the training of the interpreters of the sign language- in the area of mental retardation: integrate mentally retarded children to pre-schools and integrate mentally retarded adults to work or to other useful activities.

2.3.2.2 FAMOD agreement:

Long term objectives:

- social and economic integration of the disabled into the society
- to promote the human rights of the disabled

Immediate objectives:

- to train and develop the associations of/for the disabled people
- to increase the awareness about the human rights and the necessities of the disabled in the society
- to promote the co-operation between the associations, and between MICAS, MINED, MINT-RAB and MISAU.

The totale expenditure was 572 000 USD (3 433 400 FIM) totally during 1997-2000 under this agreement.

2.3.3 Co-operation agreements with FAMOD and MMCAS for 2001

The second co-operation agreements with the Ministry for Social Affairs, which meanwhile had been transformed into the Ministry for Women and Coordination of Social Action (MMCAS), and FAMOD were approved by the Kepa board in November 2000 for one year. The main objectives were: to improve the awareness and information about disability issues in the Mozambican society, improve the professional skills of those who work in the social sector and improve the function of local disability NGO's (specially in the area of deafness and mental retardation).

Kepa's financing for 2001 for the two partners was around 656 000 FIM, comprising monetary funding for FAMOD and funding in the form of two (2) development workers within the field of deafness for MMCAS. The development workers were placed in the Sofala province and in Maputo at central level.

2.4 Kepa strategy

Kepa formed a new strategy during 1999, which was approved in April 2000. According to that strategy Kepa has four main objectives a) to serve as a North-South resource centre for non-governmental organisations, b) to be a strong opinion leader in Finland c) to serve as an interest group and co-operation organisation for its member organisations.

Each of the three country offices formulated their own country strategies during 2001. The KEPA Mozambique country strategy states as among its strategic objectives the improvement of human rights of disfavoured groups, the enhancement of the efficiency and management of its partner organisations, and the promotion of activities against HIV/AIDS by the partners.

3. The scope of the evaluation

The findings of this evaluation will be used to plan Kepa's future co-operation. The MNGO's, the Mozambican Ministry for Women and Coordination of Social Action and Finnish disability NGOs are also expected to benefit from the results of this evaluation.

The evaluation report should bring out the context in which the cooperation with the Ministry of Social Affairs and FAMOD has taken place, and to what extent and how KEPA has contributed to strengthening the civil society in this particular case. It should analyse what have been the main traits of the development of the Mozambican state administration in general and the social affairs administration in particular. It should also analyse what has been the development of the Mozambican civil society in general and the organisation of the disabled people in particular in the 1990's.

The evaluation report should also assess the changes in the situation of the disabled people in Mozambique and in the Mozambican society, focusing on the realization of human rights of the disabled and their possibilities to participate in the societal life. It should analyse in what way KEPA's program for the sector has contributed to these changes and to what extent the changes have been reflected in KEPA's programme. This will be achieved through carrying out an overall analysis of the impact of Kepa financed actions and its performance in the co-operation with the

Mozambican disability sector.

There is no specific base-line study prior to the times of Volunteer Service, 1991-1997. The survey of the reports of the volunteers in the disabled sector in Mozambique and other relevant documents will serve as the baseline for the Partnership Programme period, 1997-2001. The findings of the overall evaluation of Kepa from the year 1995 (Evaluation of Finnish Personnel as Volunteers in Development Cooperation, Report 1995:3, Report of Evaluation Study, Ministry for Foreign Affairs of Finland) and the discussions related to it are useful to complement this information.

This emphasis will put the temporal focus of the evaluation to the period after 1997.

3.1 Issues to be studied

a. What has been and is the context of the disability sector in Mozambique? What actors are there, what have been and is the role of the different actors, in what way have these roles changed during the 10-year-period under assessment? What has been KEPA's and its member organisations' role and how has it changed?

b. How relevant and clear have the objectives of the co-operation between KEPA and its partners been during the various phases in relation to

- the needs of the beneficiary group
- the needs of the partner organisations
- KEPA's previous volunteer strategy
- KEPA's actual resource centre strategy?

g. The impact of the co-operation on the Mozambican disability NGOs' organisational development, to assess how Kepa's co-operation have supported the development of available resources (human and financial) of Mozambican disability sector and assess how the two above mentioned issues have changed the Mozambican disability sector's national relevance.

h. The impact of the co-operation on the development of national disability policies (MMCAS) and awareness raising

i. Kepa's role (form of co-operation) with the FNGOs and MNGOs, e.g. how well does the present Kepa model of co-operation contribute to the development of the disability sector and to the improvement of the situation of the disabled people

j. Overall sustainability of the actions:

both financial and human resources

k. How has the Kepa technical assistance (volunteers and later DWs) contributed to the development of the Mozambican human resources in the disability sector (both in the Mozambican disability NGOs and MUCAS)?

l. How have the Mozambican disability organisations' self-esteem and interest towards development policy questions such as human rights developed?

m. To what unexpected results and effects has the co-operation contributed?

4. Conclusions and recommendations

Based on the findings and analysis, the evaluation team will draw conclusions of the relevance, efficiency, effectiveness and sustainability of the actions under evaluation. The evaluators shall present:

- the major achievements of the co-operation, its strengths and weaknesses.
 - the main reasons for success and failures seen by various stakeholders
 - recommendations on different options regarding Kepa's future role within this sector and their foreseen implications
-

5. Lessons

The evaluator should present any policy, organisational and operational lessons that can be drawn from this evaluation in order to use this information in Kepa's overall planning process.

6. Required expertise

The evaluation team should consist of one international consultant with knowledge and understanding of Nordic disability sector policies and practices and one Mozambican consultant complementing the team with local knowledge of the situation in Mozambique.

In addition the evaluation team shall cover the following capabilities/expertise:

- in-depth knowledge of disability issues and policies in developing countries, particularly of community based disabled programmes.
- previous experience of evaluation work
- good knowledge of participatory methods

-
- good knowledge of organisational development of NGOs in Southern countries, preferably specific knowledge of Mozambique/ Southern Africa.
 - language skills of the team: Finnish, English and Portuguese.
-

7. Methodology and work plan

The consultants should prepare their own work plan, which however is expected to include at least the following elements:

Methodology:

- a briefing at the Kefa HKI office and after that a desk study phase,
- a joint meeting in Finland and interviews with previous development workers of KEPA in the disability sector in Mozambique, and with KEPA member organisations working within the disability sector in Mozambique
- interviews with KEPA present and previous Board Members and Mozambique desk officers
- a field phase in Mozambique where the consultant is expected to work in close collaboration with the Kefa Maputo and Pemba offices, MMCAS, Mozambican disability organisations and MINED and other relevant organisations. The field phase will include traveling to the two northern provinces of Cabo Delgado and Nam-pula and possibly also the Sofala province
- a debriefing both at the Kefa HKI and Mozambique offices of the main findings and end of the mission notes (see reporting), and possibly a debriefing with other interested parties (for example FNGOs in the disability sector, interested board members)
- preparation of the final report after the comments and then presentation of the findings to the Kefa board in mid-June 2002, at the latest.

Although there is no baseline data available, the consultants are encouraged to use interviews to collect information from those who started the co-operation.

Work plan:

- a total of about twelve person/weeks is planned for the evaluation, including about six person/weeks in the field. The services of the consultants would be spread over a period from February to June 2002. The field work is expected to take place in April 2002.

8. Administration and Reporting

Kefa's Programme Director will make the final decision and approval of the consultants and their budget proposals. In practical issues, the contact persons in Helsinki will be the programme officer in charge of Mozambique and a producer of the resource team, and in Mozambique the contact person will be the co-ordinator of the Kefa Maputo office.

The consultants within the framework of this evaluation will produce the following notes and reports, in the English language:

- inception note, at the beginning of the field phase, up-dating the evaluation methodology and the list of organisations (organisations to be visited, persons to be met etc.)
- end of the mission notes at the end of the field phase presenting in summarised way the main findings of the mission to be discussed during the debriefing meeting with the main co-operation organisations in Mozambique
- draft evaluation report including an executive summary by May 17th, 2002.
- final report including an executive summary by June 5th, 2002.

Annexes:

Finnish Volunteers in disability sector
Timetable of the evaluation

Abbreviations:

ABC/ CBR	Atendimento Baseado na Comunidade Community Based Rehabilitation
ADEMIMO	Associação dos Deficientes Militares de Mozambique Mozambican Association of Disabled Militars
FAD	Finnish Association of Deaf
FAMOD	Forum of Mozambican Associations of/for Disabled
FAMR	Finnish Association on Mental Retardation
FIDIDA	Finnish Disabled People's International Development Association
FIM	Finnish Mark, equiv. to 0,1682
FNGO	Finnish Non-Governmental Organisation
HKI	Helsinki
KEPA	Kehitysyhteistyön Palvelukeskus the Service Centre for Development Co-operation
MICAS	Ministério de Coordenação da Acção Social Ministry for Coordination of Social Action
MMCAS	Ministério da Mulher e Coordenação da Acção Social Ministry for Womens Affairs and Coordination of Social Action
MINED	Ministério de Educação Ministry of Education
MISAU	Ministério de Saúde Ministry of Health
MINTRAB	Ministério de Trabalho Ministry of Labour
MNGO	Mozambican Non-Governmental Organisation
NGO	Non-Governmental Organisation

*ANNEX 2:
Persons interviewed*

In Finland

Ms Tuija Halmari, Coordinator, FIDIDA
Ms Viveca Hedengren, Programme Officer for Mozambique and Tanzania, KEPA
Mr Risto Hämäläinen, Ex-Volunteer
Ms Inkeri Lahtinen, Development Co-operation Officer, FAD
Mr Matti Lahtinen, Programme Officer for Culture and Development
Ms Irmeli Leinos, Ex-Volunteer
Mr Ville Luukkanen, Programmes Director, KEPA
Ms Aila Mikkola, Ex-Volunteer
Ms Eija Mustonen, Project Adviser, Ex-programme Officer for Zambia and Mozambique, KEPA
Ms Sisko Rauhala, Secretary of Administration, FAMR
Ms Pirkko Rytönen, Ex-Coordinator KEPA Mozambique, Ex-Volunteer
Mr Kyösti Suonoja, Ex-Volunteer
Ms Laura Torvinen, Ex-Coordinator KEPA Maputo

A joint meeting with KEPA and the Finnish disability NGOs
Ms Tuija Halmari (FIDIDA), Ms Viveca Hedengren (KEPA Helsinki), Ms Taija Heinonen (ABILIS), Mr Risto Hämäläinen (Ex-volunteer), Mr Matti Lahtinen (KEPA Helsinki), Mr Pekka Mikkola (FAD), Ms Eija Mustonen (KEPA Helsinki), Mr Francisco Tembe (FAMOD), Ms Bodil Wickman (KEPA Mozambique)

**In Mozambique
In Cabo Delgado Province
Pemba city**

Mr. Afonso Alberto, Journalist, Social Communication Institute
Mr. Mussa Pussalo Ibraímo, 11 years old child with physical and mental disability
Ms. Barbara Kruspan, Assistant Co-ordinator, Helvetas Cabo Delgado
Mr. Torben K. Jensen, Advisor to ADEMO, MS

Ms. Ernestina Jorge, Responsible for the Health Programme, Central Office of Mozambique Red Cross

Mr. Graciano Langa, Director, DPMCAS, Cabo Delgado

Ms. Quinita Machude, 12 years old child with paraplegia

Ms. Julieta Artur Monteiro, Deputy Provincial Secretary, ADEMO

Mr. Severino Ngole, first and current Programme Officer in the Northern Region, Kepa

Mr. Frederico João, newly admitted Programme Officer for the Northern Region, Kepa

Mr Santos Atanásio Ngonda, Responsible for the Disability Sector and the ABC programme, DPMCAS, Cabo Delgado

Ms. Leonor Raquel Paulo, sister of a disabled school girl

Mr. Paulino Domingos Rocha, Head, Orthopaedic Centre

Mr. Afonso Sacume, Responsible for Special Education, DPE, Cabo Delgado

Group meetings:

Meeting at the Corte Certo Centre, St. Egidio Community

Ms. Marieta Omar, co-responsible for the centre

Ms. Teresinha Pedro, co-responsible for the centre

Deaf Young Women: Ms Filomena Domingos, Ms Quimalaca João, Ms Consolata Marcelino, Ms Alice Olímpia, Ms Sama Ramadane

Other Women training at the Centre: Ms Ana Paula Beca, Ms Helena Cassiano, Ms Maria Guilherme, Ms Ema Ismael, Ms Celina Maria Manuel, Ms Eulália Marques, Ms Zaina Nacuapa, Ms Ngamo Ntanzwiwa, Ms Rosalina Sidá, Ms Maria José Tupa

Other people at the meeting:

Mr. Somage Celestino, provincial secretary of ASUMO

Mr. Francisco Cazibure, deaf person

Meeting with FAMOD

Mr. Chamada Abibo, ALEMO

Mr. Pascoal Constantino, ADEMO (also from the nucleus of the Sports Association for People with Disability)

Mr. Pussalo Ibraímo, ACRIDEME

Mr. Torben Jensen, ADEMO

Ms. Julieta Monteiro, ADEMO

Mr. Saíde Moreira, ACAMO

Mr. Felix Zondane Pacamisso, ADEMIMO

Meeting with ADEMIMO

Mr. Vasco Bacar, president

Mr. Imamo Ché, finances department

Mr. Jorge João, executive secretary

Mr. Inácio Joaquim, administrative assistant

Ms. Filomena Nhamueze, women affairs

Mr. Felix Zondane Pacamisso, control

Mr. Arlindo Pedro, deputy executive secretary

Meeting with ASUMO

Mr. Mateus Casimiro

Mr. Francisco Cazibure

Mr. Somage Celestino, provincial secretary

Ms. Filomena Domingos

Ms. Quimalaca João

Ms. Consolata Marcelino

Mr. Bento Costa Nanhua

Ms. Alice Olímpio

Mr. Diamantino Olímpio, Sign Language

Translator, brother of a deaf woman

Ms. Sama Ramadane

Ms. Muassite Clara Rebocho

Mr. Saíde

Ms. Ságida Bano Suleman

Ms. Rosa Sozinha Simão, da AMOFAS

Chiúre District

Mr. Gonçalves Afido, District Secretary of ADEMO, person with paraplegia

Mr. João Afonso, 8th grade Student, Secondary General School of Chiure, person with clubfeet

Mr João Amisse, Representative, DDMCAS, Chiure

Mr. João Bacar, Administrative Assistant, DDMCAS, Chiure

Mr. Manuel Bacar, School Principal, Secondary General School of Chiure

Ms. Ana Lúcia Bartolomeu, Medical Assistant, in charge of the clinic for children, Chiure Health Centre

Mr. Eduardo Augusto Bernardo, Director, DDE, Chiure

Ms. Gracinda Rita Culete, Activist, mother of a deaf young woman, Micone Village

Ms. Joaquina Geba, Administrative Office, District Administration

Mr. Mahomed Latifo, Social Worker, DDMCAS, Chiure

Mr. Victor Bianco Macasse, Planning Officer, DDE, Chiure

Ms. Abina Mahando, mother of two children, person with paraplegia

Mr. Daniel Mueca, Medical Assistant, in charge

of general clinic for adults, Chiure Health Centre
Ms. Clarisse Eurico Nanjolo, 8th grade student,
Secondary General School of Chiure. Person
with monoplegia
Mr. Serafim Nauaito, activist, first responsible
for the ABC programme in the province of Cabo
Delgado, previous responsible of ADEMO in the
district, person with paraplegia
Ms. Gracinda Paulo, mother of three children,
person with paraplegia
Mr. Agostinho Sabonete, teacher, School of
Ncuareti

Meeting with persons with physical disability,
involved in a craft project, in Mahipa village
Mr Afonso Bernardo, person with monoplegia
Mr Silvestre Damião, activist, person with
paraplegia
Mr. Horácio Luís, person with monoplegia

In Nampula Province

District of Monapo

Mr Manuel Diamantino Amade, Responsible of
the Micro-project
Mr João Baptista Amisse, Disabled with an
amputated leg
Mr Amisse Assane, Representative of INAS in
Monapo
Mr Salimo Antumane, Disabled with an
amputated leg
Mr Daniel Hermínio Bento, Mayor, City Council
of Monapo Municipality
Father Cristof Evelin, Nurse, Mission of Natete
Ms Amina Jamal, Mother of five physically
disabled children
Ms Mufia Jamal, District Administrator
Mr João Horta, Father of five physically disabled
children
Ms Francisca Alface John, Physiotherapist,
Orthopaedic centre of Rio Monapo
Ms Esperanca Jorge, Physically disabled child
Mr Matias Magoma, Director, Social Affairs,
City Council of Monapo Municipality
Mr Fernando Paulino, Responsible of Meth-
odological Orientation, District Directorate of
MINED
Mr Adriano Rassão, Director, District Directorate
of the MMCAS
Ms Arminda Sualé, Grandmother of a physically
disabled child
Ms Lídia Sualé, Aunt of a physically disabled
child

Group discussions:

With beneficiaries in Carrapira:
Ms Maria de Fátima Agostinho, Mother of a
mentally retarded child
Ms Lauretina Bacar, Mother of a child with
cerebral paralyse
Mr Adriano Francisco, Disabled
Mr Tiago Joaquim, Disabled with paralyse
Ms Lúcia Nhatire, Activist of the CBR Pro-
gramme
Ms Anifa Macário, Daughter of a mother with
tetraplegia
Ms Margarida Sapatinha, Activist of the CBR
Programme
Ms Alzira Pilale, Mother of a paralysed child

With the District branch of ADEMO in Monapo:
Mr Joaquim Alfane, Member
Mr Domingos Amisse, Vice secretary, Monitor
of the ADEMO school
Mr Paulo António Amisse, Secretary
Mr Adelino Juma Assane, Chairman
Mr Paulo José, Sculptor
Mr Juma Serafim, Vice chairman

A joint meeting with representatives of the eco-
nomic enterprises of Monapo and the mayor

City of Nampula:
Ms Amélia Adriano, Mother of a blind child
Ms Ivete Alane, Ex-counterpart in MMCAS
Mr Lourenco Mesa Boene, Officer, Substitute of
the Director, PDMCAS
Ms Ilda Rabeca Brau, Officer, PDMCAS
Mr Lourenço Gino Cassimo, Father of a paralysed
child
Mr Mariano Cumaneque, Disabled with both
legs amputated, father of a deaf daughter
Ms Luisa Daimone, Mother of a paralysed child
Mr Manuel Domingos, Teacher, Inclusive school
of Serra de Mesa
Ms Aurora Gregorio, Gender Officer, Unit for
Development of Basic Education, UDEBA
Mr Diamantino Henriques, Head of the Depart-
ment of Coordination, PDMCAS
Ms Natália Luis, Blind child
Mr Marcos Mapinguissa, Deputy Director, Unit
for the Development of Basic Education, UDEBA
Mr Arlindo Muririua, Association for the Devel-
opment of Community Organisations, ADOC
Ms Maria Ângela Vicente de Oliveira, Officer,
Infant Education, PDMCAS
Mr Aleixo Segunda Salimo, Director, Inclusive
school of Serra de Mesa
Mr Samuel Sengo, Officer of the Programs,

Cooperation Canada
Mozambique, COCAMO
Mr Manuel Wataia, Officer, Infant Education,
PDMCAS

Group discussions

With the group of deaf gathering in the premises
of the MMCAS:

Ms Sheila Abubagar, Mr Gito Faustino, Mr
Leonel Francisco, Mr Agostinho Gino, Mr Satar
Lobo, Mr Chande Ossufo, Ms Alcina Valentina

With the Provincial Branch of ADEMIMO in
Nampula:

Mr Manguela Agostinho, Member, Mogovolas
district
Mr Rondino João António, Member, Mecuburi
district
Mr Martins Morola, member
Mr Vasco João Muquelimane, Programme officer
Mr Arlindo Papusseco, Member
Mr Celestino António Pequeninino, Financial
administrator
Mr Cassiano Vacareia, Chairman, Activist of
CBR Programme

With the Provincial Branch of ADEMO in
Nampula

Mr Ali Afito, vice secretary
Mr Romão Sissora, Secretary

With the FAMOD in Nampula:

Mr Ali Afito, vice secretary, ADEMO
Mr Mario Bacate, Member, ACAMO
Mr Paulo Jossias, Board member, Association
for the Integration of Disabled in Nampula,
ORDENA
Mr Óscar Mustafa Saiba, Chairman, ACAMO

In Sofala Province

Mr Inácio Alberto, Director and teacher,
Especial School #3
Ms. Eva Chaves Bila, Pedagogical director,
teacher, Especial School #3
Ms. Antónia Charre, Provincial Director,
DPMCAS
Mr. Alberto Cufa Manhacha, Social Worker,
Public Education Sector, DPMCAS
Ms. Maria Ermeciana Pedro, Sign Language
Interpreter
Mr. Lino Tomás Singano, Social Worker,
Mr. Evaristo Ráisse Vicente, Responsible for the

CBR programme, Disability Sector, DPMCAS

Group discussions:

With the Deaf:

Mr. Francisco Anselmo, deaf volunteer of sign
language, previously student in Especial School
#3

Ms. Farzana Juma, deaf volunteer of sign lan-
guage, previously student in Especial School #3

Ms. Elisabete Pereira, deaf volunteer of sign lan-
guage, previously in Especial School #3

Meeting with FAMOD members

Mr. Joaquim Augusto, President, ASUMO

Ms. Esperança João, Executive Secretary,
ACAMO

Mr. Salomão Kalinguere, Co-ordinator, FAMOD

Mr. José Mandava, AJODEMO

Ms. Catarina Maria Mavecane, ASUMO

Mr. Silvestre Mbesse, provincial co-ordinator,
ADEMIMO

Mr. Afonso Luís Mutisse, Administrator,
ACAMO

Ms. Maria de Fátima Sequeira, Responsible for
the literacy programme for women, ACAMO

Ms. Lúcia da Silva, responsible for the
ACRIDEME group

Dondo District

Ms. Maria Ermeciana Pedro, Sign Language
Interpreter

Ms. Julieta Cumbane, District Director,
DDMCAS

Mr. Evaristo Paulino Bonde, Executive Secretary,
ADEMIMO, responsible for the local forum of
disabled people

Mr. Pedro Sanfonda, President, Blind Co-opera-
tive,

Group discussions

Meeting with 34 disabled persons at the co-oper-
ative of the blind of Dondo

In Maputo

Ms. Lúcia Bucuane, Social Worker, responsible
for ABC programme, Maputo City DMCAS
Ms. Gitte Byg, MS advisor to the DPMCAS,
province of Maputo, in the fields of public edu-
cation, gender and development

Ms. Cilda Cossa, Director, Maputo City DMCAS
Mr. António Álvaro Francisco, National Director for Social Action, MMCAS
Mr. Fernando Gomes, previous responsible of the Deaf programme, MMCAS
Ms. Beatriz Xavier Guinda, Director, Especial Education School # 2, for the mentally retarded children and children with learning problems
Ms. Farida Gulamo, Ex-President of ADEMO, working for the MINED section of special education
Ms. Helina Helminen, Advisor, Kepa Mozambique
Mr. Howard Holley, Country Administrator, POWER
Ms. Rie Holmes, Co-ordinator of MS in Mozambique
Ms. Catija Ibraímo, Activist, Chamanculo D, Maputo city
Mr. Duarte Joaquim, Social Worker, previous National Director in the MMCAS
Mr. Luciano José, PwD, Violence and Trauma Department, MMCAS
Mr. Florêncio Machoco, Civil Society Project, Handicap International
Mr. Gil Manuel, Deputy Co-ordinator for information, Link
Mr. Castigo Filimone Massinga, Deputy Director for Human Resources, MMCAS
Ms. Cristina Margarida Matsinhe, Institutional Support Project, MMCAS
Mr. Isaú Menezes, Member of Parliament, Advisor to the Minister of Women and Social Action Co-ordination, a visually impaired person
Ms. Adelaide Nhantumbo, Social Worker, responsible for ABC programme, DPMCAS, Maputo Province
Ms. Ritva Parviainen, Fund for Local Cooperation, the Embassy of Finland
Ms. Marjaana Pekkola, previous co-ordinator of Kepa Mozambique
Ms. Argentina Simão, Training Department Head, MMCAS
Ms. Teresinha da Silva, Academic, previous National Director in the MMCAS and advisor to Kepa Mozambique
Mr. Francisco Tembe, Co-ordinator, FAMOD
Ms. Tarja Valtonen, Liaison officer, Kepa Mozambique
Ms. Bodil Wikman, Co-ordinator, Kepa Mozambique

Group discussions:

Meeting with ASUMO

Mr. José Fernando, in charge of Sign Language programme
Mr. Armando Jorge, Deputy General Secretary
Ms. Ana Júlia, secretary
Mr. Celso Linho Magumbe, previous General Secretary, in charge of Human Rights programme
Ms. Teresa Paulino Muianga, in charge of Women affairs
Ms. Leta Timbane, General Secretary
Mr. Jaime Thai, Sign Language Translator
Ms. Ester Tembe, Sign Language Translator

Meeting with FAMOD

Mr. Manuel Amisse, Deputy Executive Secretary, ADEMIMO
Ms. Olga Maria Augusto, FAMOD administrative secretary
Mr. Domingos Cambalame, Responsible for public relations
Mr. Pedro Miguel Francisco, Project Co-ordinator, ADEMO
Ms. Helina Helminen, Advisor, Kepa
Mr. Manuel Lázaro, President, ADESU
Mr. Justino João Januário, President, AJO-DEMO
Mr. João Magaia, Director, N'lhuvuko theatre group
Mr. Celso Magumbe, Responsible for human rights programme, ASUMO
Mr. Rogério Manjate, Co-ordinator, ACRIDEME
Mr. Cantola Alexandre Pondja, Secretary, AJO-DEMO
Ms. Leta Timbane, General Secretary, ASUMO
Mr. David Zavala, Deputy Director, N'lhuvuko theatre group
Mr. Jaime Thai, Sign Language Translator
Ms. Ester Tembe, Sign Language Translator

**ANNEX 3:
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ANNEX 4 :
Comments to the Draft Report
and the response of the team

Comments to the Draft report were asked by KEPA Helsinki and Mozambique from a great number of different stakeholders both in Finland and in Mozambique. The deadline for the comments was the 30th of May to be extended until 1st of June which was the ultimate deadline for the team to have any possibilities to take them into consideration. Unfortunately some comments arrived after that and the team could not include them in this summary of the comments and answers. Altogether 19 different stakeholders commented the draft. Only FIDIDA from Finland sent its comment, all the rest were from Mozambique. Considering the short time that especially the Portuguese speaking stakeholders had for the draft, the effort they took to organise themselves for comments truly deserves all the credit.

The team has decided to make a summary of the comments and respond to them individually. The comments from KEPA Mozambique are attached to this annex as are our response.

The comments were sent by the following organisations and individuals:

- Government departments: Provincial Directorate of the Women and Social Action Coordination of Nampula, Sofala and Maputo
- Mozambican Non Governmental Organisations: FAMOD (Tembe e Olga), FAMOD Pemba, ADESU, N'lhuvuko, AMOFAS, AJO-DEMO, ACAMO.
- Finnish Non Governmental Organisations: FIDIDA
- Key informants: Torben Jensen, ADEMO, Cabo Delgado, Marjaana Pekola, ex- coordinator of KEPA Mozambique, Francisco Tembe, previous Head of the Department for Disabled and Coordinator at MMCAS, Joaquim Duarte, previous National Director of MMCAS
- Finnish Embassy in Maputo: Ritva Parviainen
- KEPA Mozambique: staff in Maputo and in Pemba, Cabo Delgado

A -Government

Items

1 - They appreciated the report, and refer to it as being a profound, objective and transparent analysis.

2 - They made small corrections

- in Sofala the CBR is in 12 districts - this does not coincide with the information received there, in which it said that there were 4 districts without the programme

- KEPA started supporting the programme in Maputo in 1997

- the DPMCAS describes the activities developed by the programme

3 - In Nampula KEPA helped to expand the CBR to more districts - there are now 13, but the support was not sufficient to cover the whole province.

4 - They agree that the members' inexperience is a problem in terms of administration of the associations.

5 - Sofala agrees with the strategy of greater involvement of KEPA in the north of the country but they think that the provinces where KEPA is now working should not be abandoned. Reasons for this are: to increase the programmes sustainability and there are not many partners in the area of disability.

6 - Sofala suggests that material support like computers and vehicles be included - in the actual system when the co-operator (DW) stops working in the sector, the vehicle he has been using goes back to KEPA and the programme stops because of the lack of transport.

Answers

- *The observations of the item 2 were included.*

- *Item 5 - The main question is how to use the scarce resources of Kepa. If the north is prioritised, it means that there will not be the same resources for the south. On the other hand, it could be considered to continue on some financial support, where the things are running smoothly (city and province of Maputo) as long as not much other resources are needed like TA and KEPA's staff's time. It will be more difficult in the places where the things are not running smoothly because giving money would imply other type of assistance. Sofala is a problem in this respect - it is far away from all the offices and all kind of support will cost more*

- *Item 6 - This observation is due to not only the material goods but as well to the funds which are under the direct management of the DWs.*

When they go, everything is over. It was very clear in Dondo / Sofala that the absence of the DW meant that the sign language classes for the deaf young people were interrupted and this caused problems to the institutions and the community. But this shows that the DWs are not helping enough the Provincial Directorate to plan and organise their work in a more effective, efficient and sustainable way, for example, the Provincial Directorate of Sofala has cars to go to Dondo but not 2 or 3 times a week like the DW did. The question raised by the team is if it would not be possible to organise the work in another way, for example start education of sign language teachers in the districts or more concentrated language courses (example: one week of concentrated studying, it would be possible to arrange lodging and food for the teachers, there are international organisations that could help, later the course would continue, etc.) The same can be said about the sign language teaching in Chiúre, etc. Of course this kind of approach is more difficult to take when working with the government than with the NGOs but if KEPA wants to work with the government it has to face this as a challenge to be won.

B

Mozambican NGOs

FAMOD

Items

1 - Denies the support having been concentrated in the cities. In the provinces where KEPA supported CBR, the activities were developed in a great number of districts. The support to FAMOD created 6 provincial units.

2 - Sustainability is not a problem exclusive to the NGOs. Even the government depends on external support in order to perform its functions. They think that the sustainability in the medium term should be seen in technical terms (development of human resources); in financial terms it is a question of the long term.

3 - They agree that the associations in the basic level are weak, and this is why FAMOD has to work to make them stronger. The associations have an important role in transforming the attitudes of the society in what comes to disability.

4 - They make corrections: ADEMO was founded in 1989 and FAMOD in 1998. ADESU, N'lhuvuko and FAMOD need to be added to the table 7 in 2001. In the page 55 it should say the board (Conselho de Direcção) and not secre-

tariat, because it is the board that decides. There was no pressure from SAFOD to the creation of FAMOD, only a suggestion. The second objective in the statutes is to promote and develop efforts to the autosustainability of the associations and not engagement of funds. The FAMOD sees this objective as "arranging the known members and capacities in order to make them walk on their own feet".

5 - Considers normal that the representative of ADEMO in Nampula questions the sustainability of the FAMOD. Possibly he does not know the history of the FAMOD and KEPA and FAMOD reduces the supremacy of ADEMO.

6 - KEPA has a great meaning for the disabled people, their families and friends because of the work it has developed.

7 - It is important to include a perspective of gender.

8 - It is important to start thinking of fundraising activities for the disabled people.

Answers

- Item 1 - The main question is that the concentration of the support has been in the south, not in the cities. In general terms, (number of DW in TA and % of the total sum received by the Social Action) the south received much more than the north. The question is not even that the south has a lot of support, in fact, there are more international NGOs working in the north and in the centre than in the south, and there might be more non-governmental cooperation money there. The problem is factual, the north is poorer and less privileged (more discriminated) and the majority of the population lives there, about 35-40 % of the population live in Zambézia and Nampula. In Maputo and the south there is always someone to give you a technical advice - it is a question of networking. In the north this possibility does not exist.

- Item 4 - *The dates have been revised. What comes to the pressure from the SAFOD, it is very clear that there was insisting for a long time*

it is written in the Deficiente, n2, Year 1 1994, page 2, that the "SAFOD has been pressuring the countries of Southern Africa" and that the SAFOD "considered appropriate that Mozambique analyse the question so that the two associations could be privileged in the regional meetings"

- The main question, which is not dealt in the report nor in the comments in a very explicit manner, is the question of the FAMOD's strategy to strengthen the associations. The team thinks that strengthening of the associations takes place

principally through good cooperation of the members who should feel that the association is doing something useful to them. This is the work of the associations and FAMOD can do little in this matter, even for its own problems. Another aspect, and this has implications to the sustainability, is that the strengthening of the associations in the provinces has to have a strong component of local work and not be dependent on the support from Maputo, which only strengthens the idea that the solutions are in the capital / in the south, etc. In the provinces we found people waiting for someone to come from Maputo to explain how to open a bank account, people waiting for someone to come from Maputo to give a course on basic administration, etc, skills that the associations should learn from the other local associations and not wait for Maputo. In general, the associations are very closed up - why not use the Mozambican Red Cross to educate volunteers, Kulima to teach basic administration, ADOC, etc. There are local capacities that could be better benefited from. Another way would be that FAMOD central concentrates resources with LINK and other organisations so that their members in the provinces benefit from the courses arranged a little here and there.

N'lhuvuko

Items

1 - ADEMO founded in 1989 and ADEMIMO in 1992. The deaf can only study until the 5th class. Some NGOs have more than 2 sponsors.

2 - Marginalisation of the disabled continues. The government has not yet founded more special schools.

3 - The evaluations of the disability programme should be made every 5 years.

Answers

Item 1 has been taken into consideration and item 2 is included in the report. What comes to Item 3, it is an opinion that has its value but no arguments.

ADESU

Items:

1 - They acknowledge the positive role of KEPA in the sector.

2 - They deny that the Mozambican NGOs depend totally on the donations - ADESU is one

example of this, and they explain what they are doing by their own means.

3 - They disagree that KEPA support the emerging of associations (KEPA supports the strengthening of emerging associations) and that FAMOD would be created by KEPA and SAFOD. KEPA started to work in the commission that founded FAMOD and supported the process. The idea of FAMOD emerged when the Mozambican NGOs started to find out how their colleagues worked in other countries.

4 - They suggest that this type of evaluation covers more regions of the country.

Answers

There are many verbal testimonies given in the interviews made during the evaluation, and written testimonies, that point out the fundamental role of KEPA in the founding of FAMOD. The attempt to create an union existed before but it did not come true until KEPA came along and if KEPA left it now, it might disappear. We can revise the text to see if it is correct but this is the idea.

AMOS

Items

1 - They did not have much time to analyse the report.

2 - They make some suggestions. The dates of the foundation of the organisations: ADEMO 1989; ADEMIMO 1992 and FAMOD October 2000.

3 - In the conclusions and lessons learnt of the summary- 2nd paragraph and 1st phrase add: "but especially for the good will and need to develop the activities of the associations of the disabled in Mozambique". Right partners - in the 2nd frame of the 4th paragraph, add FAMOD to the emerging NGOs of the disabled.

4 - In the recommendations and about the continuation of the programme for the disabled (4th §) - KEPA should work with FAMOD in the central level and the creation of the units should be supported but under the responsibility of FAMOD, when it comes to a conclusion of its necessity, considering the development in the provinces and districts.

Answers

- *Item 2 has been taken to consideration.*

- *What comes to FAMOD, maybe the language could be less abrupt but the idea is basically what we wrote. Look up the answers to ADESU and FAMOD.*

AJODEMO

Items

1 - The telephone provided by KEPA is very important, as well as the support in TA and access to information by e-mail.

2 - The support from KEPA is necessary. It should continue to support the programme for the disabled.

3 - The Mozambican NGOs are weak and need help.

Answers

These commentaries have been included in the report.

ACAMO

Items

1 - The report is realistic.

2 - In the future KEPA should give special attention to direct partner programmes with the associations by financial resources, development of the skills and capacities for advocacy - they would like to see this point taken in the report.

Answers

These commentaries have been included in the report.

Finnish Non Governmental Organisations FIDIDA and Tuija Halmari

1 - The evaluation covered the essential questions. Even the relationship with the ministry is constructive.

2 - They agree that the government and the NGOs working in the sector should both be supported.

3 - Members of ADEMIMO were not members of ADEMO (p. 35, § 3), suggests a reformulation of the text.

4 KEPA's support to the FAMOD (p. 35, § 5, 3rd phrase) FIDIDA was the organisation that knew SAFOD. They think that KEPA did not know it, suggests that we substitute KEPA with FIDIDA or include both.

5 - Page 37 - it should be mentioned that the Finnish NGOs aimed to develop a south-south co-operation, by bringing people from the region to train or work in Mozambique and by arranging Mozambicans to visit other projects. They describe these forms of co-operation in the comments.

6 - Page 52, § 2 - It was FIDIDA and FAMR who organised the criticised visits. KEPA did not have budget to do this.

7 Page 52, § 3 - FIDIDA and Finnish NGOs participated of the processes of creation / development of FAMOD together with KEPA.

Answers

The commentaries of the items 4 to 7 were included in the report. About the item 3 and other details not mentioned in this summary - the fact that the people of the actual ADEMIMO were members of ADEMO was stated by the people themselves, and they were many. There are many other details in the comments that are not confirmed by other people interviewed or by documentation. An example: already in October 1993 the ADEMO / ADEMIMO had contacts with SAFOD (it is written in a bulletin of ADEMO from 1994)

Key informants

Marjaana Pekola

She has doubts about concentrating all TA in the provincial level. The TA has more impact when it comes from the central level. The evaluation report shows that the TA in the central level had some impact in the provinces. The people in the provinces are still waiting the orders from the ministries. Changing the attitudes and the working culture will take years. She thinks that there has to be TA in both levels because it would improve the information between the Ministry and the Provincial Directorate.

Answers

- We are not talking about only concentrating TA in the province level and in the north, but concentrating it in the medium term in these places and giving the central level more specific TA (for example, to help create a system of information, plan, etc.) but it will have to be well defined with easily measurable objectives and asked by the beneficiary. It is obvious that the assistance in the central level has not turned into an increase of capacity on this level (this is: the MMCAS, on the central level, does not seem to be any more capable of performing its governmental functions in the disability sector than 7-10 years ago). This is the fundamental question. In the province level, now that there is a policy for the disabled people, experience with CBR, more staff with training in social action, the conditions for the TA to have impact are better than in 10 years. Of course this TA should be able to help the DPMCAS to perform better their governmental functions but

even if it does not happen, the direct impact on the beneficiaries is bigger than if the intervention was made more peripherally.

- The reference to the working culture is a good example of the necessity of KEPA to define where it wants to go with its intervention. The report refers to this question of respect for the culture and it is a concrete case where it is necessary to take positions. Waiting for the orders from the superiors does not seem to be a practice that should be respected only because it is the local way.

Torben Jensen
Co-operator in ADEMO, Cabo Delgado

He agrees in general with the report. His commentaries are mainly on the fact that KEPA needs to work through the DW situated in Mozambican NGOs. Starting from this, collaboration with Social Action will take place but the DW does not have to become involved with the state administration. Working with the civil society can be a way of trying to set an example. About the question of too much intervention or very little and about the question of respect for the culture, he thinks that it is possible to be clear about the need for transparent leadership and accountancy. The agreements have to be very clear. He agrees in giving small funds over a long period of time and makes suggestions of how this process would be and how other financial means would be obtained.

Answers

- In general these are useful suggestions. Anyhow, the team has doubts about situating a full-time DW in a NGO, especially in the province, given the weak development of these, the DW would have a too strong an influence on the working process, which might create an artificial and not sustainable growth. These things only work if the agreement with the TA is for a long period of time, 10 years or more, because then it might be possible to create more sustainable routines and services which, even if not sustainable, would make the peoples lives better. For example, if it is possible, there should be education for the blind and the deaf for 10 years and this would have an impact on the lives of the students, their families, and it would set an example to the society. The expectations would grow and greater demand would be created, which is important. But maybe KEPA is not able to guarantee such an

agreement - then it would be preferable to have a DW who would give assistance to many different organisations, for example, situated in the office of KEPA in Pemba.

Embassy of Finland
Ritva Parviainen

1 Congratulates on the job.

2 Agrees that the impact on economic level is not visible (page 9, last paragraph)

Thinks that the only thing that KEPA could have done, given the constant budget cuts, was to send a DW with experience in micro-credits.

3 Page 15 does not consider sensible to have the main office in Pemba. Lots of international NGOs tried that and later discovered how hard it was. Asks why Pemba?

4 Thinks that KEPA in Helsinki should take into consideration the evaluations, not only this but also the one made in 1995. The social programme is good. At the time of the evaluation she was frustrated with the negative criticism she thought was unjustified.

5 Page 63

Thinks that HIV / AIDS needs to be given more attention especially among the disabled women. They are at more risk to be abused but also poorer which may lead to prostitution.

Answers

The comments are in line with the report, but it seems that it was not clear that we propose that the activities should be concentrated in the northern region

Cabo Delgado and Nampula, and would maybe later be expanded. The office in Pemba already exists, but there is only one person working there until now. We agree that it is necessary to keep a base in Maputo

there are lots of reasons for it, some even material. The aspects related to gender and HIV / AIDS were included. Maybe KEPA could give more attention to fundraising but this is a very complex matter, which would need its own resources, staff, money, programme and it is not clear if KEPA has the "expertise" and the needed resources.

KEPA MOZAMBIQUE PROGRAMME STAFF COMMENTS TO DRAFT OF KEPA' S DISABILITY PROGRAMME EVALUATION

Date: 06/06/02

Comments made by:

Bodil Wikman / Coordinator
Severino Ngole/ Programme Officer - South
Frederico Joao / Programme Officer
North
Pia Johanna Laine/ Information Officer

1. General comments

First of all our congratulations to the consultants that have done a very profound, systematic and constructive work! We agree in most respects with the presented analysis, conclusions and recommendations. We are in particular happy that the quality and impact of KEPA Mozambique's longstanding and in our opinion coherent work has been recognized and valued by the evaluators.

It is also good to find out that the consultants and the persons they have interviewed have in general terms ended up with the same conclusions with regards to the needs in the disability sector as the KEPA Mozambique staff and advisers, as well as the recognition of the human rights aspects of the work. For quite some time, KEPA Mozambique staff has felt that it has been quite alone in fighting for this programme's existence within KEPA and that there has been very little understanding of its true nature among other KEPA colleagues and non-disability member organizations.

2. Comments to the content, conclusions and recommendations

With regards to the conclusions and the recommendations of the report we have the following comments:

Page 55-68: Questioning the general tendency of directing of funding to the urban areas, cen-

tral level and Maputo for so long, opening up of Pemba Office at a late stage

We agree with the analysis that more focus should of the programme in the future be directed to the North and to the countryside, but we would like to present some probable factors influencing the way KEPA acted:

- The restructuring of the volunteer programme into a partnership programme took quite a long time (1995-1997). The restructuring period was an experimental phase and new models were tried, not all of them with success. More focus was given to the North and to civil society actors in the beginning of this period also in the disability sector, but most experiments in the northern and central provinces parts did not turn out well. This was a period when the new partnership strategy had yet not become definitive. It is only from year 1998

1999 that we can start to speak about a more coherent partnership approach.

- The work at policy level implies the need to work with the central organisations which have their headoffices in Maputo, both on the government and the civil society side

- Since KEPA Mozambique's total budget has been subject to substantial reduction since the middle of the 1990'ies it has not been very easy to expand activities. During the last two years (2000 and 2001) the attitude within the headquarter towards expanding or looking for new partners for the KEPA Mozambique disability sector has been clearly negative, since the headquarter has

been waiting for the present evaluation.

- No previous evaluations or external reviews were made of the programme, and there has thus been a tendency to continue with the partners and provinces that have functioned well and with whom the field office has had a good communication.

Page 52: Why was technical assistance continued to be posted at central level when it was already obvious years ago that those trained would leave the Ministry at first opportunity. Why not post volunteers and DWs in the provinces where staff turn over is even today limited?

The reasons are most probably the same as in the previous point. The policy formulation work, the support of lobbying of the central level civil society organisations with regards to the Ministry were facilitated with the presence of KEPA experts within the ministry at central level.

On the other hand it should be remembered that KEPA posted volunteers/development workers or other technical assistance at the provincial level from year 1995 in Sofala and during year 1997 in Cabo Delgado (advisor to ABC programme in Chiure district). The support to DPMCAS Sofala was terminated since the counterpart interest and support to the DWs was judged not to be sufficient. For the case of Chiure we do not know why it was terminated.

Page 10, 54, 58: Participation and needs of the ultimate beneficiaries in definitions of plans and activities is non-existent (no evidence)

We do not totally agree with this generalized conclusion. In this case one has perhaps to discriminate between the work at policy level and the work at implementation level (for ex CBR programmes).

For the case of the work at policy level the partners are both the civil society and the government: The civil society disability organisations (associations) are formed of the ultimate beneficiaries of the policy work or of people representing them. For example the deaf community is part of the ultimate beneficiaries, represented by ASUMO, part of FAMOD. ASUMO and other deaf participate in the work to improve the disability policies.

At the grass root level, KEPA works mainly through the government as a partner. The govern-

ment programmes are not made by the disabled, but for the disabled, and in the best case in collaboration with the disabled, as individuals and associations. Of course, in this case more emphasis on considering the opinions and inputs of the ultimate beneficiaries should be made.

Page 54, 60: Participation in decision making has been centralised to a great extent to Maputo. People involved at the provincial and district level have not had much to say in the way the programme is planned or financed.

This is not fully true. And it is not clear whether the report wants to state that the decision making has been centralised to KEPA's staff in Maputo, or KEPA's and partner's staff in Maputo.

First and foremost: the KEPA plans and programme have since the beginning of the programme been designed in close collaboration with the partners. This is one of the fundamental rules in the partnership approach, and probably one of the main factors for the relative success of the programme. So, it can at least not be said that KEPA's programme has been designed by the KEPA Maputo staff, with little involvement of partners.

With regards to the geographical origin of the designers of the programme, it can be said that the main programme design influencing agents reside or work in Maputo. But: KEPA has annually had programme review meetings, with participation also from the provinces. In particular the CBR programme representatives have participated. Due to budgetary constraints it has not been possible to include district level representation. For the future, it should perhaps be recommendable to arrange the programme review meetings in the provinces instead of in Maputo, even though this might imply higher costs.

The footnote on page 54: This is perhaps not the best example of centralised decision making to Maputo. The reason for not re-starting up with the Cabo Delgado programme also had to do with the negative attitudes at KEPA Headquarter towards expanding the programme before the present disability evaluation was made and the general cuts in budgets.

Page 51, 59. There is little evidence of the development of MMCAS' institutional capacity, due to total turnover of staff and brain drain.

It is true that there has been a considerable

brain drain from MMCAS, and that most of KEPA's DW counterparts have by now left the Ministry. But the conclusion that there has not been any development of MMCAS institutional capacity is perhaps not so straightforward. Some local counterparts stayed for a considerable time (up to ten or even more years) within the Ministry at central level working with KEPA, and they influenced the institutional capacity and the institutional memory of MMCAS in terms of policy formulation, more open attitudes towards civil society organisations, etc.

The brain drain issue is serious in Mozambique, not only in the government's social sector, but in particular in this sector due to the low priority it gets at policy level and in budgetary terms. If the MMCAS budget is only 0,7% of the state budget, the priority is definitely low. KEPA can not alone solve this problem, and for example to start paying extra salary or subsidies to government partner staff would be a very dangerous, distorting and non-sustainable solution.

But KEPA can together with other likeminded national and international organisations work to try to influence the priority which is given to the social sector in the country, and for mechanisms to reduce the brain drain. For example it could together with FAMOD, MS, Helpage, the Forum of Elderly people's associations, the Child Network, etc try to influence the government, the bilateral and multilateral donors (including IMF and the World Bank) to increase the Government budget to the social sector (which could influence working conditions for the MMCAS staff) and for better salaries for key policy producing staff within the MMCAS.

Page 62. It is recommended that FAMOD should be KEPA's partner only at the national level where it has its main functions of advocacy and coordination . creation of FAMOD's provincial nucleus is premature, even risky, and should not presently be supported.

We do *not agree* with this recommendation and think that it is in contradiction with the conclusion that KEPA should focus its work more on the northern provincial and district level, where poverty is greatest. Many of the disability associations at the provincial level are not yet mature, that is true. But this is not the case only for the disability associations, but in general for the Mozambican civil society organisations. The lack of access to information and educational and

training opportunities in the provinces in comparison to Maputo is considerable, which results in this big difference in maturity.

But the organisations at provincial level will take an even longer time to get mature if FAMOD and KEPA do not work actively with them. A regular contact, communication and formal and informal training activities (for civic and organisational education) are needed in order for the associations to become mature. FAMOD needs to have the means for this (that is money in their budget for this purpose).

The consultants mentioned, not in the report, but orally, that they recommend that direct financial support to the nucleus should not be given, but that money could be given for some specific project that will make the different disability associations work together and make realize the advantages of collaboration and joining forces. We agree that this could be an important form of supporting the disability work in the provinces, but also other work is needed.

Other ways to stimulate the organisational development process is improving the communications and circulation of information between FAMOD and its members and between the members themselves, and we think that should be one of the priorities for the FAMOD work in the future. It is also important that FAMOD works in an absolutely transparent way and does not consciously or unconsciously act in ways that can create cleavages or jealousy among the members. For example, it might be better to use a non-FAMOD member for the channeling of funds for FAMOD's events (disabled's week, other events), until the member organisations are sufficiently mature to collaborate with each other.

Page 53, 63. Gender aspects. There has been a lack of gender sensitivity in the programme.

We agree on this. In other KEPA programmes (for ex with UNAC) there has been more efforts to include gender aspects and analysis and account for gender diversity. Some gender focused activities of the partners have been funded, for example the investigation of FAMOD on the abuse of disabled women. More efforts to include gender awareness in the programme should be included, for example through an even closer collaboration with one of KEPA's other partners, FORUM Mulher and systematic use of existing findings.

The recent turnover of staff at KEPA Mz field office has naturally influenced the institutional memory in this sense.

One of the reasons for the lack of gender discrimination has to do with the difficulty in getting statistics from the ABC programme and MMCAS, in particular. Since about 1997 there has been continuous efforts to improve the collection of data with special forms and to instruct the responsible people on how to analyse the statistics. Sustainable results of these efforts have however not yet been achieved, and one should probably reflect on what has went wrong and what approach to use in the future.

In general the **lack of statistics, quantified summaries on number of beneficiaries, their gender and other characteristics, aggregated numbers on disbursed funds to partners, etc is remarkable**, both what comes to KEPA and to MMCAS and other partners. One of the main priorities for the future of the programme should in our opinion be to systematically start to collect and process data. Perhaps this could be one of the areas of short term specialized technical assistance for capacity building of MMCAS, and of KEPA programme staff as well.

Connected to this we also think that better filing systems should be established at KEPA Mz office in order to facilitate future monitoring of activities and the building up and exploration of an institutional memory. Some kind of regular external reviews of the programmes, for example every three years should be established in order to systematize and analyze experiences.

Page 62. KEPA is recommended to concentrate activities to the northern province of Cabo Delgado and Nampula, possibly later on Niassa. The activities in Maputo should be substantially reduced. It would make more sense to have the main field offices in Pemba instead of Maputo.

We agree on the need to focus more on the northern provinces with regards to the support to grass root levels (for ex. ABC programme). The question whether KEPA should expand to new provinces need to be seriously analyzed. To cover large geographical areas results in high costs and very high time use for programme monitoring and traveling in general. Perhaps it is more realistic to continue to cover only Cabo Delgado and Nampula, but extend the ABC programmes to more districts within these provinces.

With regards to inverting the staff balance between the office in Maputo and Pemba, one has to consider the following aspects before drawing far going conclusions:

- if the work of promoting policy formulation within the disability sector is to be continued, one needs to continue to work at the central level with MMCAS and FAMOD. One needs to remember that KEPA is not an implementing organisation, but works through partners.

- KEPA also works with other central forum organisations, whose head offices are in Maputo.

- The disability sector programme is not the only programme that KEPA Mz has, the liaison & information & general development policy activities probably require professional staff also in Maputo.

- However, with the development of the telecommunications and transport connections in Mozambique it gets all the time easier and meaningful to invest in the programme management and administration in the northern provinces. In any case it is indispensable for KEPA's main office in Mozambique to have functioning connections with the capital, KEPA's HQ in Finland and the rest of the world, considering the nature of KEPA and its work and objectives .

Page 63. Recommended that long-term technical assistance to MMCAS will be posted only to provincial and district directorates, not at central level, except for the exception of some specific short tem assignments.

We tend to agree, with the reservation that KEPA Mz needs to study the suitability of each province/district and experiences of other international NGOs who have previously implemented this kind of approach (MS, IBIS, SNV, etc) before making commitments and concrete plans.

Some more remarks on **technical assistance**: It can be discussed who should provide the technical assistance in the disability field in Mozambique, is it KEPA's role, the FNGO's, or some other like-minded, collaborating organisation would be more natural to do it in the future. Different options can be visualized in this respect, and should be studied (for example collaboration with DW providing organisations like MS).

However, as long as new mechanisms have yet not been created and put in practice, it is possible that KEPA continues to be the TA contracting and

supporting organisation. Out of experience we know that foreign people that come in the position of advisers or development workers need both moral and practical in country assistance to get going and to get into the Mozambican reality and systems. For example getting a work permit is quite a complicated process, that a newcomer is unlikely to succeed in without assistance from an experienced organisation or individual.

We would also like to see in the report a discussion on the possibility of using also other than Finnish or Nordic TA. For us, it is clear that the TA need not be Finnish or Nordic, what is important is that is TA that provides what the partners need in a way they can absorb and that not creates chocks. One can for example think of collaboration with experts from other Southern African countries that have a more well developed disability sector.

3. Technical comments

Page 21. KEPA's weakness in general, according to the evaluation, is in the area of policy development.

We want to clarify that in this case the concept usually used by KEPA is "development policy" analysis. KEPA has, as the present disability evaluation shows, contributed to policy development in the specific field of disability in Mozambique. But KEPA in general (and especially KEPA HQ) would like KEPA to have a more active role in supporting the civil society's efforts and advocacy activities at a general development policy level. It is in this context that KEPA MZ office has concluded that in this country the civil society needs in the first hand capacity building in the area of development policy or policy development analysis in order to take a more proactive role. Only after that this capacity has been developed, KEPA will be able support direct general development policy/policy development activities.

Page 38, 1st whole paragraph. FAMOD is the only formal partner of KEPA's disability programme.

Not fully true: KEPA also has individual disability organisations as partners through its small project funds, and is also in constant contact with disability organisations through its liaison activities to serve Finnish NGOs and their partners (more than half of liaison projects in year 2001 was in the disability sector). The magnitude of most of these agreements and commitments is

of course much more limited than in relation to FAMOD (with the exception of FAD's support to ASUMO). The individual member organisations of FAMOD are considered partners of KEPA and KEPA staff has regular interaction with them, they are invited to KEPA programme meetings, courses and seminars, etc.

Page 39. Reasons for not having used the TA to a higher degree for the training institutes for social workers seem to have been bureaucratic issues, poor planning and insufficient language mastery among some volunteers and DWs.

Comment: The general low awareness of the importance of coordination and share of experiences and knowledge between different government units in Mozambique is another aspect that could account for this.

Page 75. Programme officer's visit from Pemba (to Nampula) are too rare, only once or twice a year. The Northern programme officer has hereto visited the Nampula province, with main focus on the Nampula town, three to four times a year. At the district level the visits are naturally less frequent.

He also travels within the Cabo Delgado province and to Maputo and other provinces and Finland. If we continue to have only one programme officer in the North very frequent visits to Nampula province are not possible to arrange.

Page 44. Last paragraph. There is still much to do in the area of human rights. An additional example is that it still happens that innocent deaf persons are put in jail since somebody may accuse them of a crime they have not committed and they are not able to defend themselves.

4. Last remarks.

We think it should be even more stressed in the report that **social transformation** processes and changes of attitudes, like the ones with respect to disability, take considerable time, and ten eleven years is a relatively short time. In many cases we are talking about at least one generation, or around 20 -25 years.

For the case of support to a local organisation that works with social transformation: Of course a donor can not continue to support the process for decades as the one and only funding partner, but at least the donor should try to help the local

organisation diversify its range of donors and partners and support until the local organisation is organisationally stable to work on its own in this respect.

One issue that is not so clearly touched on, more than on page 47 in the interference discussion, is aspects of **governance and partners' use of funds**.

It is totally clear to us that KEPA should not admit bad management of funds, in particular it should not continue funding to partners that have mismanaged funds and are not able to show that they have acted to correct the detected situation and that they will not allow it to happen again.

However, as you know, in Mozambique it can take time to detect frauds, and some times new funds might have been conceded before the frauds are detected. The way to avoid this should be to each time more use professional assistance (auditors) to verify the accounts of the partners. This is of course a question of cost as well: some times the funding is so small that the only cost effective way to verify the accounts is to make it your self (or in this case the programme officers of KEPA).

And as you also know, the judicial system does not function very well in Mozambique, so that legal processing of organisations or persons that have mismanaged funds might not always be productive.

Sometimes funds are used in contradiction with the plans or without proper reporting, or with very weak supportive documents, but the situation can not be considered deliberate mismanagement or fraud, but lack of understanding of accounting procedures, what has been agreed, what is expected of a partner, etc. In this case KEPA should of course interfere in the sense that it advises on how to correct the situation. The judgement of what is the real reason for a non-expected situation is naturally difficult and sensitive, and a lot of analysis and reflection need to be done before drastic measures are taken.

Maputo 30/05/02
Edited 06/06/02

Response to KEPA Mozambique Programme staff comments

As with the other comments received from the various stakeholders, the team felt rewarded with the thorough comments of KEPA Mz. They show serious reflection on our work. That is what the evaluations are meant to be: food for thought. Our responses to the comments are regrouped as follows:

Question on the general tendency of directing funding and technical assistance to the central level and the future geographical balance of the activities and resources

The team recognises the substantial reductions of the KEPA Mz budget since mid-90s and is not referring to the need of KEPA to have expanded its activities to the north. The question raised is the balance between KEPA's activities in the south and in the north during the years and presently. The need for work at policy level with the central organisations is not questioned but directing the overwhelming part of the financial and human resources to the central level up to the present is.

Posting of the KEPA Development worker to Chiure in Cabo Delgado in 1997 is news to the team. The fact never came up during the evaluation, not in the discussions nor in the documents. However, it does not alter the general trend: technical assistance has continuously been posted mainly at the central level. This was justifiable in the beginning of KEPA's support to the disability sector but as the report has tried to show, the Mozambican context has changed considerably during the last 11 years. The question is not only of the brain drain of the counterparts that is a reality at the central level but also of the new role of the government and civil society that need to be strengthened.

Overall, the possibilities of the provincial governments in developing their programmes if more financial and human resources were available are different from what they were, and the needs of the central government are different from what they were. The civil society organisations also outside Maputo have a stronger role and communities are more aware of the rights of the disabled. In the opinion of the team, this change has not been sufficiently reflected in the allocation of KEPA's financial and human resources to the disability sector. Furthermore, KEPA's activities

should not contribute to strengthening the existing regional inequalities, year after year.

The need for KEPA to pay more attention to the evaluation of its programmes has been raised in the report and is only strengthened by the comments.

We agree with the comment on the need to carefully analyse possibilities of expanding to new provinces. With the present resources, it seems more realistic to cover only the provinces of Cabo Delgado and Nampula

even this is a formidable task and not include new provinces. However, we still would like to have “possibly later on also Niassa” in the recommendations for the sake of reminding of the existence of this neglected province in the north.

The team is not straightforward recommending that KEPA should have its main office in Pemba instead of Maputo. It is recommended that KEPA would seriously reflect the staffing balance between its two offices, and also consider the advantages and disadvantages of having the head office in Pemba. KEPA will need an office in Maputo also in the future but more staff it has there, more activities will take place in Maputo and in the south. The office in Pemba already now needs reinforcement and if the future activities, and also future technical assistance, will be directed increasingly to the north, the role of the Pemba office grows automatically. As the total number of KEPA staff in Mozambique is unlikely to grow, difficult choices need to be made.

Participation of partners and beneficiaries in the decision making

The team is not claiming that KEPA Maputo staff has been designing the Partnership programme with little involvement of the partners. Quite the contrary, the report fully acknowledges the good cooperation of KEPA with its partners and the active participation of the partners in the planning and decision making. We also acknowledge the budgetary constraints related to the participation of the provincial and district level government and NGO partners, and are not saying that KEPA has totally neglected the partners in the provinces. But there surely is a lot of room for improvement. In accordance with the conclusion of the team of the need to shift the balance of KEPA’s disability activities more to the provincial and district level in the North, we would like to see that KEPA’s partners at those levels would also have a more active role in plan-

ning KEPA’s support to the disability sector. The idea, presented in the comments, to arrange the programme review meetings in the provinces instead of Maputo is one good example of the possible ways.

The conclusion of the team that the ultimate beneficiaries have no voice in planning and implementing the programme is based on the discussions with the beneficiaries during the field work. The team met very many and none of them considered that they could have influenced, or could influence, the programme in any way whether it was a question of the compensation for the activists, support with school material to disabled children, or the content of the training or something else. There was no evidence of any participatory approaches used along the years. CBR programme has been a top-down government programme for the disabled but if the objective of turning it to be more community based is to be taken seriously, then participation of the individuals and emerging associations at the community level needs different attention. KEPA, as one central supporter of the programme, could have a more active role in trying to push for more participatory approaches.

It is true, as the comments point out, that the disability associations are formed by ultimate beneficiaries and should thus have the opportunity to influence the work at policy level through their own associations and FAMOD. Unfortunately there seems to be very little collaboration between the provincial nucleus and the central headquarters not only in the case of FAMOD but in the case of the disability NGOs in general. For example, the cooperation of ASUMO in Nampula with the headquarters in Maputo has been restricted to very irregular contacts, 350 USD support once from ASUMO central and participation in the annual meeting. ASUMO in Pemba was of the opinion that the headquarters do not provide any information, the matters taken up in the annual meeting have not been answered, representatives of ASUMO central never came to Pemba and ASUMO Pemba has no idea of the support ASUMO central is receiving from the donors. ASUMO Pemba is not participating in the meetings of FAMOD Pemba due to the disagreements over the translation in the meetings. As long as the situation continues like it is presently, there is not much base for thinking that the ultimate beneficiaries outside Maputo could have much influence in the programme or at the policy level through their associations.

FAMOD as a partner only at the national level

The team's response to the comments on not supporting the creation of FAMOD's provincial nucleus is provided in the earlier answers to FAMOD's and other MNGOs comments. We do not consider that the recommendation to support FAMOD only at the central level is in contradiction with the need to focus more on the provinces and districts in the north. In the opinion of the team, supporting FAMOD in the provinces is not the best, nor the only, way to strengthen the civil society and disability associations at the provincial and district level at present. The team does not have readymade answers on how this should be achieved in widely different situations. Consequently we have recommend that KEPA should consider new partnerships with the representatives of the civil society depending on the specific circumstances of the area. This calls for an in-depth analysis of both the general and local trends, and is related to the recommendation that KEPA should develop its own capacity to understand better the context of its activities, and the specific role of the civil society especially at the local level.

In our opinion, strengthening the new associations and increasing cooperation between them can best be achieved through concrete local activities which bring benefits to the members. Funding some specific projects where the disability associations need to join forces would be one way for KEPA to strengthen the associations and their cooperation. Several problems that can be only resolved through common effort were mentioned during the discussions: ensuring better treatment of the disabled in the hospitals, increasing the integration of the disabled children to schools, exemption of the disabled from the fees of the identity card etc. We certainly agree that the associations are in great need of capacity building and training but have in our answer to FAMOD's comment pointed out that there already exists various possibilities through other organisations for that even at the provincial level.

Technical assistance and the brain drain from MMCAS at central level

The report recognises that the problem of the brain drain from the ministry is beyond any one donor, least a small one like KEPA. The idea to try, with likeminded national and international organisations, to influence the social sector to have more priority is excellent and the same strategy could be applied for trying to make pressure

for the disability associations to have some public funding.

Most probably the MMCAS has more open attitudes towards civil society organisations as a result of KEPA's activities. On the other hand, institutional memory, or development of the capacities in the ministry, seems presently weak.

Lack of statistics, quantified summaries on number of beneficiaries, their gender and other characteristics, aggregated numbers of disbursed funds to partners etc is remarkable

The evaluation team fully concurs with this comment and agrees totally that one of the future priorities should be to systematically start to collect and process data.

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- ¹ Direct support stands for financial or technical support in which has not been considered programme management and general administration costs.
- ² Including Finnish staff in KEPA Mozambique office
- ³ Rytönen, P. Mikkola, A and Gomes, F, 1998 Evaluation of the Deafness Program, April July 1998, Colaco, J, Cassimo, F and Zinkin, P, Avaliacao do Programa para Pessoas com Deficiencia Baseado na Comunidade, para o Ministerio da Coordenacao da Accao Social, 1999
- ⁴ Evaluation of Finnish Personnel as Volunteers in Development Cooperation, 1995, p. 100
- ⁵ Ibid.p.216
- ⁶ Vasko, V, Kjisk, H and Salo-Lee, L, Culture in Finnish Development Cooperation. 1998, p 54
- ⁷ Evaluation of the Bilateral Development Cooperation Between Mozambique and Finland, 2002, p.100
- ⁸ Data from the 1997 Census
- ⁹ Data from the 1997 Census
- ¹⁰ National Human Development Report 2000.
- ¹¹ Link. Informe Fim de Semana, 5-6 May 2002
- ¹² National Human Development Report 2000.
- ¹³ Fundação para o Desenvolvimento da Comunidade. Projecto Wona Sanana. Inquérito local sobre a situação da criança. 1999.
- ¹⁴ Inclusive school is a MINED programme aimed at promoting integration of marginalised children in regular schools.
- ¹⁵ Data in the table should be read with caution. Different sources, and same source at different moments, have provided different figures for the same indicator. Poor information system is clearly a problem within the CBR programme.
- ¹⁶ In Chiúre the evaluation team met an orphan teenager student with club feet that had gone to the capital city in January in order to obtain shoes and had to go back again because he did not get them. Because of his absence in Chiure during school registration, he missed his place in the hostel for students and had to walk every day from his uncle's home to the distant secondary school.
- ¹⁷ Please note that these dates relate to the informal recognition of associations. Legal registration was usually completed a few years later for each organisation.
- ¹⁸ Save the Children Foundation, UK, and ADEMO, 2001.
- ¹⁹ Ib pp. 76 and 77
- ²⁰ Ib. p. 69.
- ²¹ Ib. p. 27
- ²² Ib. p. 67
- ²³ This is the formal posting of volunteers and development workers, but it should be recognised that a number of them had supported technically other organisations. As an example, some DW in MMCAS provided assistance to the Maputo City Directorate of Social Action and to MNGOS, such as ASUMO, ACRIDEME, etc.
- ²⁴ KEPA made little use of locally recruited expertise to assist MNGOs. A number of local experts were used to carry out studies but not many to provide TA. There are not many local resources (organisations and experts) to provide assistance to NGOs, but KEPA should collect more information regarding this and analyse its potential for future work.
- ²⁵ Serra Mesa is an inclusive school which explains the high figures.
- ²⁶ These studies are:
- ²⁷ It was not possible to get complete figures for this. In Cabo Delgado, only 5 out of 15 trained activists are still involved in the programme, but in Maputo City most of the trained activists continue their activities in spite of all difficulties. In Maputo City, 34 out of 80 trained activists continued their work at the time of the evaluation.
- ²⁸ The exception is ADEMIMO that receives some money for current expenses
- ²⁹ An example of this is the financing of CBR programme in Cabo Delgado. Even though the situation in PDMCAS is quite different from what it was when the decision to cut the USD 5000 from PDMCAS was made in 1999, the programme continues to be without financing now already for the third year. KEPA's unilateral decision has had negative consequences on the programme itself especially in Chiure where CBR activities had advanced well. There is little room for speaking of the partnership with the PDMCAS when the partner has no control over the decisions.
-