

Performance Analysis 2003

Part 1: General & Sectoral Analysis

India



Table of Contents

Abbreviations	3
I. General Analysis	5
1. Historical Context	5
2. The Current Programme	6
3. General Conclusions and Lessons Learned	7
II. Sectoral Analysis	10
1. Health	10
2. Education	15
3. Environment and Natural resources	17
4. Human Rights and Democracy	21
5. Research Co-operation	24
6. Humanitarian Assistance	27
7. Co-operation between Swedish and Indian NGOs	30
8. International Training Programmes	33
Select donor agencies and their priorities in India	35
Bibliography	39

Published by Sida 2003

Embassy of Sweden, New Delhi, India

Editor: Jonas Lövkrona

Printed by Edita Sverige AB, 2003

Art. no.: SIDA3247en

This publication can be downloaded/ordered from www.sida.se/publications

List of abbreviations

ADB	Asian Development Bank
APPCB	Andhra Pradesh Pollution Control Board
AWC	Anganwadi Centre
BLM	Block-Level Model
CBO	Community Based Organisation
CHC	Community Health Centre
CSD	Centre for Social Development
CSE	Centre for Science and Environment
CSSM	Child Survival and Safe Motherhood Programme
DFID	Department For International Development
DIC	Drop-In Centre
DIET	District Institutes of Education and Training
DPEP	District Primary Education Programme
EPTRI	Environment Protection, Training and Research Institute
FRU	First Referral Units
GDP	Gross Domestic Product
GP	Gram Panchayat
IEC	Information, Education, Communication
ICPD	International Conference on Population and Development
IDF	India Development Forum
IDU	Injecting Drug User
ICDS	Integrated Child Development Services (Programme)
ISS	Institute for Social Studies
ITP	International Training Programmes
KTH	Royal Institute of Technology
LLF	Lifeline Foundation
MDACS	Mumbai District AIDS Control Society
MLL	Minimum Levels of Learning
MMC	Mumbai Municipal Corporation
MNP+	Manipur Network of Positive People
MSACS	Manipur State AIDS Control Society

MSM	Men having Sex with Men
NACO	National AIDS Control Organisation
NE	North-East (India)
NFHS	National Family Health Survey
NFE	Non-Formal Education
NGO	Non-Governmental Organisation
NTGCF	National Tree Growers' Co-operative Federation
OBC	Other Backward Caste
ODA	Official Development Assistance
ORI	Outreach Intervention
PE	Peer Educators
PEP	Panchayat Education Reports
PEVAC	Pre-Election Voter Awareness Campaign
PHC	Primary Health Centre
PLWHA	People Living With HIV/AIDS
PRI	Panchayati Raj Institution
PRIA	(Society for) Participatory Research in Asia
PRS	Poverty Reduction Strategy
R&D	Research and Development
RCH	Reproductive Child Health
RIAC	Rapid Intervention for AIDS Control
RTI	Respiratory Tract Infection
SC	Scheduled Caste
SHG	Self-Help Groups
SMR	Swedish Mission Council
SSA	Sarva Shiksha Abhiyan
ST	Scheduled Tribe
STD	Sexually Transmitted Disease
STI	Sexually Transmitted Infection
SWAP	Sector-Wide Approach
TANPIC	Tamil Nadu Primary School Improvement Campaign
TB	Tuberculosis
TBA	Traditional Birth Attendants
TERI	Tata Energy Research Institute
UEE	Universal Elementary Education
UNFPA	United Nations Population Fund
VEC	Village Education Committees
VER	Village Education Registers
YRSHR	Youth Reproductive and Sexual Health and Rights

I. General Analysis

1. Historical Context

While the first project supported by Sweden in India dates back to 1953, large-scale assistance did not take off until the late 1960s, following the establishment of Sida and the selection of India as one of six principal recipient countries for Swedish aid. In the early years, in line with the development theories of that time, Sweden provided import credits to fill India's savings-investments gap and the balance-of-payments gap. The underlying notion was that India was heading towards a situation of persistent famine, and the import of capital goods for industrial growth would enable the country to meet the critical need of food and agricultural inputs.

The heavy emphasis on import support started to loose in strength in the early 1970s. This change was partly brought about by the fact that India was clearly in a fair way to warding off starvation, and partly by a new current in the donor community that questioned the government's ability to improve the conditions of the poor. Critics argued that the development co-operation should be targeted to specific activities with a more direct focus on the poor. This new thinking began to have a real impact only in the first years of the 1980s with the launch of projects and sector programmes in areas such as family planning, social forestry, vocational training, drinking water and public health. At about the same time, a new form of mixed credits, tied to procurement in Sweden, was introduced. The credits were primarily directed towards power sector projects, including high voltage direct current transmission lines and the Uri Hydroelectric Power Project.

In the early 1990s, India became the largest recipient of Swedish bilateral aid. By then, import support programmes had all but given away in favour of loan-financed projects in the energy sector and sector programmes in the areas of natural resource management, primary health care, and primary education. These areas remained in focus as the "new" Sida, in 1995, started to prepare for a new country strategy for India, to take effect from January 1997. The intention was to build further on the major flagships of past co-operation, including Lok Jumbish and Shiksha Karmi in Rajasthan, the ICDS in Tamil Nadu, EPTRI in Andhra Pradesh, and the countrywide CSSM programme. In addition, research co-operation, international training programmes, private sector develop-

ment, and NGO co-operation would be used as a means of stimulating the exchange of experiences and skills between India and Sweden. While not part of the negotiations with the Indian authorities, direct support to local NGOs was seen as an important mechanism to ensure local participation in the bilateral programmes.

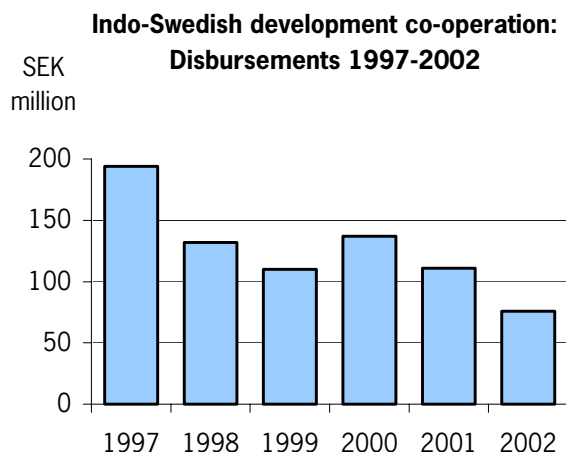
Towards this end, following the signing of a new Agreement on Development Co-operation in late 1996, an extensive programming exercise involving just about all of Sida's sector departments was initiated. As India carried out its nuclear test explosions in May 1998, a number of projects and programmes were already in full swing and several more had reached an advanced stage of preparation. The Swedish government's decision to terminate the Agreement on Development Co-operation in November 1998 implied that the preparation of new interventions had to be discontinued, and that ongoing projects and programmes could only continue up until the end of the specific agreement, but with no additional funds.

2. The Current Programme

In spite of the termination of the Agreement on Development Co-operation in 1998, Sida has been able to maintain a presence in India and partnerships with NGOs and multilateral agencies have been expanded and extended. In addition, some of the bilateral programmes were running well into 1999, one or two even into 2001, due to no-cost extension of agreements that were signed prior to 1998. Thus, while overall disbursements have dropped, results have continued to be achieved and new approaches have continued to be developed.

The current development co-operation programme is directed by special guidelines issued by the Swedish Government on 26 October 2000. As stated in the guidelines, the overall goal of the development co-operation should be to fight poverty and strengthen the human rights of the poor. Environment protection and promotion is singled out as another major objective. In terms of thematic focus, the major thrust of the programme has been on primary health and education, environment and natural resources, and, since the past one year, urban development. Support is also provided to select projects in the areas of human rights, democratic decentralisation, and research co-operation (up to 2001).

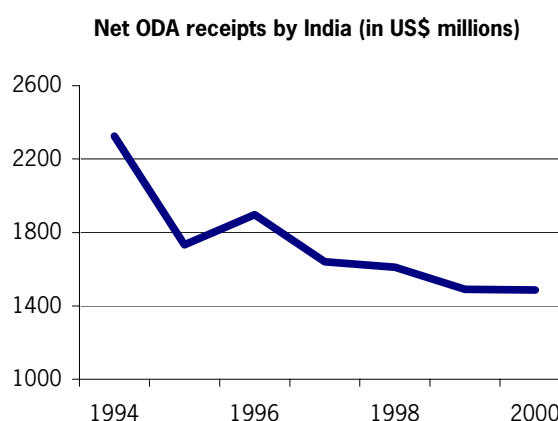
More broadly, Sida contributes to co-operation between Swedish and Indian NGOs, to occasional appeals for disaster relief, and to the participation of Indian nationals in Sida's International Training Programmes.



3. General Conclusions and Lessons Learned

The scope for a foreign donor agency to contribute to poverty reduction in India is heavily constrained by the limited importance of ODA in financial terms. Despite the fact that India has been, and still is, a major aid receiving country, net ODA received corresponds to less than 1% of the country's GDP.

Nevertheless, there are indications that programmes supported by Sida, especially in the social sectors, have played an important role in poverty reduction in some locations. Illustrative examples are the Shiksha Karmi and Lok Jumbish projects, which have contributed to improving overall access to and enrolment in schools, particularly in some remote regions of Rajasthan. Also in the areas of health and natural resource management important outputs have been achieved that have had an impact on overall socio-economic indicators. Sweden's contribution to the eradication of the guinea worm is a point in case; the increase in forest cover and ground water levels in the target areas of Swedish support to natural resource management another. Moreover, it is likely that Sida and other donor agencies have played a part in the increasing focus on people's participation in government projects and programme. More recently, donors have taken on an important advocacy role in furthering decentralisation, in particular the devolution of powers and resources to panchayati raj institutions (PRIs).



Gender equality has been a major objective of the development co-operation. For instance, the Lok Jumbish project had gender equality as one of its guiding principles and sought to make education an instrument of women's empowerment. A similar gender focus was found in the Shiksha Karmi project, a main objective of which was to improve girls' access to education. In the CSSM and ICDS programmes, the improvement of women's health and nutrition was at the centre of activities. In addition, workshops on gender concepts and mainstreaming have been organised for NGO partners, and specific efforts have been made to promote women's human rights and women's participation in decision-making. The challenge for the future lies in reinforcing the concept of gender mainstreaming in all areas of assistance, and increasing the efficiency of the dialogue with the Indian government, the civil society and other donor agencies.

Without depreciating the value of past and ongoing support, it is clear that ODA has had a limited impact on underlying institutional and structural constraints. This has, in turn, affected the sustainability of the assistance. For instance, inadequacies in delivery and management systems, combined with lack of political will, has limited the progress made by Sida and other donors in the health sector. In the case of human rights, experience has shown that the very nature of support in this area is that of a continuous struggle with little prospects of bringing about attitudinal changes among the police, prisons and courts. On the one hand, it is clear that donor agencies would have to strengthen their capacity to undertake critical analysis of the mediating links between project-level outputs and the overall poverty objective. On the other hand, a more realistic level of ambition and approach to poverty reduction is called for where a first benchmark should be for donor agencies to enhance synergies and improve co-ordination.

Top ten donors to India

Gross ODA, 1999–2000

Country/agency	US\$ million
World Bank/IDA	935
Japan	779
United Kingdom	174
Germany	158
United States	148
EC	69
Netherlands	42
UNICEF	31
Denmark	29
WFP	24

Many donor agencies –including the World Bank, ADB, DFID, and the Netherlands – have opted for a strategy of focusing their assistance to states that have shown a clear commitment to reform. Gujarat, Karnataka, Maharashtra and Andhra Pradesh are commonly regarded to fulfil this criterion, and have subsequently been awarded extensive grants and loan commitments in return for promises of economic and institutional restructuring. The perception is that the macro-economic, political and institutional context is markedly less conducive to ODA effectiveness in the poorest states such as Orissa, Bihar, Assam, etc. However, the Indian government argues that the increasing state focus contributes to a worsening of regional imbalances. In addition, given the fact that many areas are the joint responsibility of both Central and State Governments and that the Central Government continues to play an influential role in the design and planning of many poverty-related programmes, there is cause for continued interventions at the multi-state and national level.

Lack of transparency remains a major constraint. As in other countries, corruption holds back economic growth, distorts public services, deters investment, contains employment opportunities, and, in some

cases, undermines programmes specifically designed to empower the poor. While India has a range of institutions to deal with corruption, many of them lack real statutory powers and effective systems to ensure corrective action. Consequently, individual accountability is seldom established and sanctioned. Moreover, audits are often delayed, in some cases for several years, which means that a project or programme could even be completed before any remedial action is contemplated. Such shortcomings could have serious repercussions on ODA, and it is clear that donor agencies would have to continue to make use of alternative audit and financial review mechanisms to guarantee the proper utilisation of funds.

Concerns related to poor governance, including corruption, is one of the explanations behind the propensity of donor agencies to increasingly channel assistance through the civil society. However, the involvement of NGOs in the assistance provided by bilateral and multilateral donor agencies varies greatly. Some NGOs act as sub-contractors, virtual consultancy firms through which donor agencies channel funds. Others are supported for their existing involvement in particular activities (education, health, agriculture, etc.) or with a particular target group (children, Scheduled Castes, widows, etc.). But very few agencies seem to have been able to take advantage of the full potential of the civil society, including the inherent capacity of many NGOs and networks to link grassroots experience of community mobilisation with effective advocacy at the policy level. Sida has been seen as precursor in this area.

Another crucial issue that has proved to have a bearing on Sida's and other donor agencies' ability to deliver is the lack of effective donor co-ordination. There are no poverty reduction strategies (PRS) at central or state level, nor is a Comprehensive Development Framework in place. Furthermore, the India Development Forum (IDF), the round-table for multilateral discussions between the Indian government and the donor community, has only been held twice in six years. At the most recent IDF, in 2000, donor agencies emphasised the desirability of more active co-ordination on the part of the Central Government, with a crucial role for the State Governments. There was also an appeal for the establishment of some sort of development framework for the states that could offer a basis for effective aid co-ordination. Relatedly, the potential for budget support and full-fledged sector-wide approaches (SWAPs) in the development co-operation with India is limited. While some sort of written sectoral framework is in place for most sectors, implementation strategies are generally unclear and delivery mechanisms inadequate. Obsessive regulation, combined with the lack of accountability, further impedes the transition to SWAPs. Possible exceptions are the health and water and sanitation sectors respectively, where conditions for a programmatic response have improved in recent years.

All in all, it is clear that Sida could do more to find synergies with other donor agencies. Experience suggests that co-operation with other donors have proved to be most meaningful when Sweden's creativity in working with the civil society has been combined with the size and leverage of multilateral agencies.

II. Sectoral Analysis

1. Health

Background

Sida has been supporting interventions in the Indian health sector since the 1980s. In the beginning, the focus was mainly on vertical projects on malaria, TB and leprosy. From the 1990s, the main thrust has been on programmes addressing issues related to women, children, adolescents, and HIV/AIDS. A majority of the funding has been directed to UNICEF for the national programme on Child Survival and Safe Motherhood (CSSM), and to the State Government of Tamil Nadu for the Integrated Child Development Services (ICDS).

However, following the termination of the Agreement on Development Co-operation, NGOs have assumed an increasingly important role in the development co-operation. To address the sexual and reproductive issues related specifically to adolescent/young people, Sida has for the past few years been supporting a twinning arrangement between RFSU in Sweden and MAMTA, a sister-organisation in India. The project aims at establishing a country-wide network on Youth Reproductive and Sexual Health and Rights (YRSHR), considering the lack of youth-related services and information and Swedish experiences in this field. Relatedly, since 2000, Sida has also been supporting a network of NGOs in Rajasthan, working to improve the health status of young women and children.

In the field of HIV/AIDS, Sida was the first, and remains one of the few, donor agencies supporting out-reach activities in the Northeast. Since the early 1990s, contributions have been made to a coalition of NGOs in Manipur that seeks to prevent HIV infection among injecting drug users (IDUs) and their sexual partners. In collaboration with the National AIDS Control Organisation (NACO) and WHO, Sida has also supported the Mumbai Municipal Corporation in its pioneering work on preventing STD/HIV/AIDS among women in prostitution and their clients.

Relevance

The overall justification for Sida's interventions in the field of health and HIV/AIDS rests on the concerns posed by the country's huge burden of disease and the alarming morbidity and mortality rates. The single larg-

est intervention, the support to the CSSM, had a direct bearing on this situation, by explicitly aiming at reducing infant, child and maternal mortality. The same can be said about the support to ICDS, which remains the most successful scheme of the Indian government in improving the quality of life of disadvantaged children. The ICDS also represents an illustrative example of how Sida has been able to achieve economies of scale – the pilot projects supported by Sida in a few districts were later scaled-up at the state level.

In 1997, in accordance with the decision to concentrate social sector assistance to Rajasthan, plans were laid out together with the state and central government to initiate a decentralised programme on reproductive and child health in seven districts. While this programme never materialised due to the events of 1998, Sida decided to establish a partnership with a network of NGOs working to generate a demand for health services at the community level and establish links with the public health system to respond to these demands. While the support to this network represents a departure from the original intention, it has proved to be very relevant against the backdrop of the poor social outcomes of women and children in the state. The MAMTA-RFSU project responds to the overall neglect of the needs and rights of adolescents in general and the lack of youth-friendly reproductive health services in particular. The relevance of the project is further enhanced by the attempts made by MAMTA to concretise the programme of action of the International Conference on Population and Development (ICPD).

In the field of HIV/AIDS, Sida's contribution to NGOs in the Northeast has been a major factor in the adoption of a state policy on harm reduction. This policy addresses the concerns of unsafe injecting practises among drug users, the lack of psychosocial support and health care to people living with HIV/AIDS (PLWHA), and the need to sensitise and mobilising local communities. All these issues have proved to have a major bearing on the spread of HIV/AIDS in Manipur. Recently, the NGOs in Manipur have formed a network with other organisations in the Northeast region, recognising the need to respond to the HIV/AIDS pandemic on a larger scale and to create a platform for the sharing of experiences. The AIDS STD Health Action (ASHA) project of the Mumbai Municipal Corporation has a similar ground-breaking character, being the first intervention in India to address STD/HIV infection and promote healthcare services among women in prostitution, their children, and clients. The project has spearheaded the formation of a community self-help organisation that seeks to promote adequate health services to these groups.

Analysis of outputs

Surveys show that the percentage of children fully immunised and those receiving vitamin A prophylactic increased during the CSSM program, and parents increasingly brought their children for immunisation. However, efforts to extend the treatment of acute respiratory infection (ARI), which is an important cause of child mortality, did not succeed due to limitations in retraining programmes. In the area of safe motherhood, while nearly 8.5 million women in the childbearing age were immunised for NNT elimination, the availability and accessibility for

emergency obstetric care (EOC) services remained low. Overall, the various interventions have elicited more importance to the issue of child survival than to safe motherhood. At the same time, UNICEF's input has been more geared towards providing hardware and equipment, and the development of training material, than mobilising local communities.

Sida's support to the ICDS programme in Tamil Nadu covered around 4,500 aganwadi centres, catering to 100,000 children (6 months–2 years) for feeding, 154,000 (3–6 years) for pre-schooling, 70,000 pregnant and nursing mothers, and 17,000 adolescent girls for vocational skill training. The main shortcomings of the support was the lack of progress in the schemes addressing children with disabilities and the difficulties in developing a participatory planning process, involving functionaries both at the state and district level. Nevertheless, it is clear that considerable progress were achieved in the majority of the programme's different components – progress that, according to a Sida evaluation, has resulted in the improvement in the health and nutrition states of women and children in the project area.

The support to the RCH network has been directed towards the formation of different kinds of community groups in each of the 100 villages covered. Through such groups, awareness has been raised on critical issues pertaining to RCH, evidence of which is clearly reflected in the rapidly rising number of children receiving complete vaccination and pregnant women seeking antenatal care. However, despite such positive developments, village communities tend to continue to rely on private practitioners for their immediate health problems, reflecting the poor use and quality of public health services.

As a result of the twinning project between MAMTA and RFSU, eight state-level networks on YRSHR have been created, some more consolidated than others. Progress in other fields have also, by and large, been successful. Tangible outputs are the establishment of a resource centre/library and a web-site on adolescent health. As a recent evaluation of the project suggests, the challenge now lies in translating the advocacy efforts on the national level into concrete agendas for action at the local level. In addition, there is a perception that the parties need to develop a comprehensive strategy for capacity building, going beyond the organisation of issue-oriented training workshops.

A more long-standing engagement is the partnership on HIV/AIDS with the three Manipur-based NGOs – Lifeline Foundation (LLF), Institute for Social Disease (ISD) and Centre for Social Development (CSD). Together they have produced a number of important outputs related to HIV/AIDS prevention among IDUs and the sexual partners, as well as the community at large. For instance, the LLF has facilitated the formation of a state level network of HIV/AIDS positive people (MNP+), and all the NGOs have been active in supporting self-help groups. Training and awareness raising among women and adolescents, representing the most vulnerable segments of the population, have been a major feature of all NGOs, and ISD has become the trainer organisation for outreach intervention projects undertaken by the Manipur AIDS Control Society. Relatedly, clean needle/syringe and condoms have been made available to IDUs through outreach workers, peers educators and drop-in-centres.

The ASHA project has covered a population of 5,000 women in prostitution and about 20,000 potential clients. From having been limited to improve access to STD services, the scope of the project has been expanded to providing more comprehensive health care services, to the women as well as their children, and address difficult issues of stigma and discrimination. As a result of such activities, a decreasing trend in STD cases has been witnessed in the project area. Since 1998, the Mumbai District AIDS Control Society has been providing funds for the project.

Analysis of outcomes

The CSSM programme represented the first serious attempt by India to tackle its high maternal mortality through safe motherhood initiatives. However, due to factors such as insufficient community involvement, inadequate training of health staff, mismatch between training and delivery of supplies and equipment, and poor monitoring and evaluation, the programme has in effect had very little impact on maternal mortality. As a result, the Indian Government has launched the Reproductive and Child Health Programme, focusing on women's health, RTIs/STDs, management of unwanted pregnancies, and adolescent health.

The progress achieved under the ICDS programme stands in strong contrast to CSSM. The final programme evaluation suggests that Sida's support has contributed to the fulfilment of the programmes objectives, particularly in the areas of child nutrition and school attendance. Furthermore, the 'additionalities' supported by Sida, such as the pre-school teaching methodology and the adolescent girls' scheme, have been incorporated in the National ICDS Programme.

The RCH network of NGOs in Rajasthan has over the years expanded from four to eight NGOs, and is now covering 100 villages as compared to 20 at the start of the project. While the project has been successful in 'demystifying' reproductive health matters, its scope has been limited to a narrow range of health services, such as immunisation and antenatal care.

The twinning arrangement between RFSU-MAMTA is the first of its kind in the development co-operation between Sweden and India. Overall, MAMTA has been instrumental in bringing out several critical issues related to the needs and rights of youth, and has come to be seen as a legitimate platform for analysis of overall trends and issues. However, recent reviews point to the need of defining more clearly the twinning arrangement in terms of scope, focus and roles.

Sida's support to the three Manipur-based NGOs working on HIV/AIDS has contributed to increasing awareness levels among IDUs and their sexual partners, and there is evidence to suggest that the community stigma towards the IDUs has been reduced. During the course of the project, the seropositive rate among IDUs has decreased by about 15%. As a collective, the NGOs have also developed a model for outreach interventions among IDUs – a model that has been adopted by the Manipur State AIDS Control Society and scaled-up throughout the state. In fact, Manipur is the only state in India with a specific policy on IDU intervention. In addition, the setting up of positive networks, service cells in hospitals, a NGO Federation on HIV/AIDS, a Federation of Media and Lawyers on HIV/AIDS, and women's self-help groups indicates strong community ownership over the issue.

While the ASHA project has been pioneering in addressing the needs of women in prostitution through the public health system, the sustainability of the project has been severely compromised by the transfer of project staff to the MDACS and MSACS. In the absence of effective management structures and ownership, Sida support was discontinued.

Analysis of the achievement of objectives

Sida has achieved significant leverage by supporting innovative programmes and processes in the health sector. For instance, the CSSM and ICDS programmes have been important tools for flagging women's health issues and bringing issues of maternal mortality and safe abortion to the fore of the agenda. Both the programmes have also contributed to an improvement of the health and nutrition status of the targeted population. The direct support to NGOs has, above all, played an important role in raising awareness levels, and, relatedly, increasing community demand for quality health services. In Manipur, Sida's support to HIV/AIDS prevention has clearly been a factor in the reduction of the seropositivity rate among IDUs and their sexual partners by more than 15% in less than five years.

Nevertheless, there are indications that the pace of improvement in key health indicators appears to have slowed down and even stalled in some cases in the past decade. The slow rate of decline in infant mortality is a point in case. Surveys have also showed that the maternal mortality ratio has remained virtually unchanged, and that gender biases in many spheres of the society is a contributing factor. Adolescent girls are particularly at risk. Survey data reiterates that early marriage and child-bearing before attaining full physical development continue to be universal in India. Uneven educational opportunities, compulsion to work at home and outside, poor nutrition and lack of access to adequate food, increasing stress, and violence lead to a range of biological, social and psychological problems. The rapid spread of HIV/AIDS, among adolescent in particular, exacerbates the situation.

As far as health systems' performance is concerned, recent years have witnessed a significant increase in the cost of both in-patient and out-patient healthcare in rural and urban areas. Consequently, the divide between rich and poor in terms of untreated illness and expenditures on health services, as well in the use of both public and private health care institutions, has grown. Left undressed, this may well come to mean that, even if reproductive or other health services are made available, the poor may not be able to access them.

There is now a global recognition that the effectiveness of programmes promoting reproductive health and rights depends critically on broader health system issues that affect both the demand for and the supply of health services. Unfortunately, health sector reforms as such have been relatively slow to take off in the country. While a range of activities and programmes are being 'justified' or done in the name of health sector reforms, there is no cohesive understanding of reforms. The slowness of health system improvements also makes it difficult to draw lessons from donor-supported projects and programmes. It has also prevented forward movement on issues that may be critical to the effective advancement of reproductive health and rights, including affordable cost and

access to services, devolution of power and resources to panchayati raj institutions (PRIs), community needs-based planning, sustainability of infrastructure and workforce, and improved quality of services.

2. Education

Background

The two major education projects in Rajasthan, the Shiksha Karmi Project (SKP) and the Lok Jumbish Project (LJP), were initiated as a collaborative venture between the Government of Rajasthan, Government of India and Sida. The SKP, launched in 1987, seeks to provide quality basic education to children in remote rural areas where the formal primary schools are either non-existent or dysfunctional. Putting particular emphasis on girls, scheduled castes and scheduled tribes, and other marginalised groups, the project introduced the concept of parateachers in primary education. The assumption is that barefoot teachers, once intensively trained and with the support of the local community, can overcome the lack of formal education. The LJP, which started in 1992 with a view to achieving the goal of Universal Primary Education, has been recognised as one of the most successful community-based programs following the Jomtien Conference on 'Education for All'. The project advocated for education with a focus on gender equity, quality of learning, community participation, child development, and the needs of the poorest communities.

In 1998, as the planning of the third phases of the two projects were to commence, the overall Agreement on Development Co-operation was terminated by the Swedish Government, and subsequently, Sida was forced to withdraw earlier commitments on future support. Eventually, DFID stepped in and is now funding the two projects together with the Government of India and the State Government of Rajasthan.

Since 2000, Sida supports the Tamil Nadu Primary School Improvement Campaign (TanPIC), a collective of 80 NGOs, working on the basic premise that decentralisation process is key to improve the overall quality and management of education. To this end, TanPIC is pursuing a strategy based on advocacy, model interventions, network building, and field research.

Relevance

The SKP and LJP projects in Rajasthan both had a very strong justification in the poor education outcomes of the state, and the major disparities in educational attainment across gender and social groups. The state also offered a conducive environment for people-centred approaches to education. In the case of Tamil Nadu the issue is more about the quality of education, the low level of learner achievement, and the lack of community involvement in the management of schools. The support to TanPIC should be seen in the perspective of the 73rd and 74th Constitutional Amendments, which mandate the State Government to hand over the administration and management of the primary and elementary schools to the PRIs.

Analysis of outputs

With the support of Sida, the SKP has become a state-wide intervention, contributing to the establishment of 2,700 day schools, 4,335 Prehar Pathshalas (schools of convenient timings), and 97 Angan Pathshalas (courtyard schools). All in all, the concept of shiksha karmi (SK) has emerged as a credible alternative, particularly in the most remote areas of the state. A significant draw-back of the project was the lack of progress in mobilising women parateachers. Despite setting up women training centres (13), the number and proportion of women parateachers remained low (695 as compared to 5390 men). While social and cultural factors played a significant role, evidence also suggest that many women found it difficult to attend the training, especially when it involved traveling and long stays in training centers. At the same time, about 60% of the SKs and some 70% of the students were drawn from the most vulnerable groups in society, including the Scheduled Castes and Scheduled Tribes. Equally noteworthy is the fact that, while the project does not levy charges on students, the local communities contribute significantly towards maintenance costs, particularly of buildings, to the tune of 30% of building costs.

The LJP was conceptualised as a people's programme and was, consequently, implemented through participatory approaches. The project mobilised village women and girls and initiated activities to develop their scholastic and life saving skills. The fact that parents were convinced and felt safe in sending their daughters to residential training camps best highlights the confidence bestowed by the community on the project. The first phase of the project was implemented in 25 blocks – in the second phase the coverage expanded to another 50 blocks. The project has clearly succeeded in increasing the participation rates of children 6–14 years of age, particularly that of girls. The project also initiated various innovative strategies to empower women, including the establishment of a Women Residential Training and Education Institute (WRITE), Women's Groups, and Field Centres. By 1999, women's groups had been constituted in about 85% of the villages covered, and 210 field centres had become operative. Particular activities were also undertaken to prepare disabled children for school. However, the process-oriented character of the project, and the absence of defined targets over a period of time, have made it difficult to measure progress and give future directions.

While still at a nascent stage, the support to TanPIC has contributed to the strengthening of the institutional set-up of the collective. Tangible outputs include the drafting of Panchayat Education Reports (PEP), improved co-ordination between PRI members and school headmasters, and the appointment of para-teachers in some locations.

Analysis of outcomes

The SKP is perceived to be one of the most successful primary education projects in India. The project has demonstrated that a demand for learning exists in all segments of society, and that people from local communities, when appropriately selected, trained and supported, can function effectively as teachers and agents for social change. Similarly, the LJP has successfully developed a strategy – based on participation, gender equality and quality – for achieving the goal of Universal Primary Education.

Moreover, evaluations shows that both SKP and LJP have made significant contributions to improving the overall access, enrolment, retention, and attendance and achievement levels of both boys and girls, particularly in some very remote regions of Rajasthan. Census data indicate that, in the decade 1991–2001, Rajasthan recorded the highest percentage increase in literacy among the Indian states. During the same period, female literacy has more than doubled, from 20% to 44%.

In the case of the TanPIC project, it is premature to expect any significant impact. However, the initial objective of the campaign, making education a fundamental right, has been achieved. The challenge now is to make this a reality with increased decentralisation and improved quality education.

Analysis of the achievement of objectives

The SKP and LJP have received widespread acclamation and have been greatly affirmed as being instrumental in building human resources and involving communities. Both the projects, while still running, have shown clear progress towards their set goals. However, even though the projects have been able to reduce the gender gap in enrolment of boys and girls, and been fairly successful in reaching out to children from the disadvantaged communities, the socio-economic indicators of the state, and the country as a whole for that matter, confirms that major concerns remain.

Arguable the most important challenge is to the most vulnerable groups with good quality education. To this end, a comprehensive strategy – including interventions in the area of teacher education and development, curriculum and pedagogy, classroom environment, child-centred processes, assessment practices, and in the overall school environment – has to be pursued. Similarly, gender disparities can no longer be looked in isolation. The SSA programme of the Indian Government provides a broad framework for such efforts. All investments for elementary education from central and state plans will merge into the SSA programme within the first few years of the decade.

3. Environment and Natural Resources

Background

Sida has been supporting projects in the natural resources and environment sector since the last three decades mostly in the forestry and water sectors. During 1997–2001 over 18 projects have been supported. The main partners in implementing these projects are the UNICEF; the Indian government and the provincial governments; and Non governmental organisations. Majority of the projects are implemented through independent implementing agencies created for the specific purpose of implementing the respective projects. Exceptions to this are the Orissa Forest department under the Government of Orissa and UNICEF. In terms of sectoral distribution, projects could be categorised under a) water resource management; b) watershed development; c) forestry and d) industrial environment. Almost all projects have their origin in the early nineties though some have a redesigned focus and strategy during 1997–2001. Also many projects had a deliberate withdrawal strategy like the NGO projects in Tamil nadu. This has implications on the relevance of some of the projects within the context of the reporting period.

Relevance

Given that relevance of projects is very much temporal, almost all the projects supported by Sida were relevant in one way or the other. Some of the projects in Tamil nadu were not entirely relevant and were phased out.

The PAHAL project and NTGCF had an overall objective of reducing poverty through reduced degradation of common lands. Both projects addressed the need of developing appropriate institutional models at the village level for managing the common property resources. UNICEF attempts to do the same thing in the drinking water supply sector. Tarun Bharat Sangh, CECOEDECON and PRADAN tried similar approaches in water conservation. However, the relevance of this approach could be questionable for the future more due to the emergence of a debate in the context of the panachayati raj system in India.

The capacity building project in the forestry sector in Orissa along with the support to NGOs like Oxfam and PIPAR are perhaps relevant today and even into the future. They address cost effective means of regenerating forests and the development of an appropriate policy framework for the management of forests.

The overall objectives of EPTRI are relevant even today but the same thing cannot be said about the institution. It seems to be evolving backwards as an institution. Conversely, a good example of a relevant institution is CSE. With a reasonably strong research base, it is able to give a sharp edge to the policy debate on issues of relevance at the appropriate time – like the campaign on rainwater harvesting across the country and air pollution in Delhi.

Analysis of outputs

In almost all projects in the NRM sector, achievements at the output level are substantial. The outputs have been clearly formulated in majority of the cases except in the case of support to UNICEF. However, a critical lacunae has been that while it was easy to broadly indicate the achievement of an output, measuring the same is extremely difficult.

Further, though the outputs have been clearly delineated their linkages with the objectives have been vague. In some cases like that of the NTGCF, there was no difference between the outputs and the short-term objectives. Looking into the results of NTGCF, one could mistakenly conclude it to be a plantation and employment generation programme whereas the objectives indicate something else. A related issue is the cost of achieving the outputs, which gets little attention in most externally, aided projects. The cost of achieving the outputs could be termed as high in PAHAL, PRADAN, NTGCF and even UNICEF where the input costs are high in the first two cases and the implementation costs are high in the latter. There seems to be no justification for these high costs and should be an issue in the future aid programme in India.

Analysis of outcomes

Almost all projects had non-existent monitoring systems or weak monitoring systems. This makes it difficult to analyse and substantiate results from the projects apart from precluding any effective mid course corrections during the reporting period. Crucial lessons on the impact of the

projects on poverty are for example completely missing. However, three projects stand out for achieving some outcomes. One, the Centre for Science and Environment through its excellent documentation, research, and advocacy efforts have managed to have an impact on issues related to air pollution, water harvesting, industry rating and global environment. The second is water conservation programme with Tarun Bharat Sangh in which hydrological data clearly indicate a rise in ground water levels. The third is the forest protection programme with PIPAR in Dhenkanal district in Orissa. An increase in the forest cover in the district has been noted in the forest survey of India. In most other projects, despite an apparent achievement of the outputs, the outcomes appear diffused and do not add up into a consolidated whole. One of the important reasons could be poor design of the projects.

Analysis of the achievement of objectives

One of the key constraints in most projects is that objectives lacked indicators to measure the extent to which they were achieved. Therefore, this analysis though draws on the evaluations and other secondary data remains conjectural to a certain extent.

The mid term evaluation of the PAHAL project presents a classic case in underlining the need for clear and achievable objectives. The project had the twin objectives of method development in watershed management and area development of Dungarpur. The project management argued that area development takes precedence over method development while Sida argued that it is the opposite.

In the end, the methods developed in PAHAL, particularly in the formation of village institutions had wider replicability, area development was questionable. The second case is of the NTGCF in which by abandoning one of the key objective 'to improve rural income through the creation of local institutions for the production, processing and marketing of trees and tree produce' the sustainability of the entire operation was put at risk. An example for other projects to follow is that of Tarun Bharat Sangh(TBS). The project had three objectives but one key output that could influence all the three objectives. By creating water harvesting systems in a sustained manner with a good operational plan that was simple, indications from various external reviews are that it has clearly achieved its objectives. The same goes with the support to NGOs in the forestry sector in Orissa. Through a sustained campaign and working with village institutions, forest protection in Orissa has reached a scale, which the government cannot fail to recognise.

Results and lessons learned

- Perhaps the most important lesson learnt from across all projects implemented by government agencies is the lack of continuity in leadership; short tenures for project leaders; and in a few cases absence of leadership. This had serious implications for project management and consequently under achievement of results. Frequent changes in leadership resulted in different interpretations of project objectives thereby taking the project in many different directions in their lifetime. In certain cases, like EPTRI, the projects ended up as dead investments.

- A review of all the Agreed minutes from PAHAL and the Orissa forestry project (since inception) indicate unhealthy trends. The same issues were repeated again and again. At one level this could indicate a strong follow up from Sida, but at another level it could also be due to a lack of proper design in the project or a lack of ownership by the government.
- A common practice in aid projects was to create separate institutions to perform specified activities in accordance with the project objectives. While this was often done to reduce red tape and to increase operational efficiency this has resulted in side stepping the more serious delivery problems that affect the Indian administrative system. The effectiveness of this approach is questionable on two accounts. While this is a bureaucratic solution, it also indicates lack of political will to deal with the more fundamental problem of lack of political will. Further this could also lead to increasing the burden on the government after the project is phased out unless a proper withdrawal strategy is evolved at the outset.
- Transparency and accountability in project administration seem to have a significant role in creating sustainable institutions at the village level. The disbursement and management of funds in two projects – Tarun Bharat Sangh and PAHAL have had a lasting impact on the village communities to continue with their efforts in managing the assets created during the project. The innovative systems developed in PAHAL were later incorporated in the national guidelines for watershed development.
- Very often, a project implemented through one channel is bound by a set of vested interests as a consequence of which there are natural limits to learning from the concurrent developments in the outside environment. A combination of implementing channels, each one implementing what they are best at, has better results. The support to a network of NGOs in Orissa through Oxfam, Bhubaneswar has had a positive impact on the project implemented by the government. Similar is the synergy between CSE and Tarun Bharat Sangh.
- Finally, there were few linkages between the projects and the broader policy environment. At the same time no concurrent learning from other projects was attempted. A good example is the project with NTGCF. It is virtually isolated in the national level discourse on the developments in the natural resource management sector. An ironical fact is that they started undertaking watershed development in 1999 in accordance with the national guidelines framed in 1996. The emerging national context and the setting of the projects within that context is crucial for a small donor like Sida to be more effective.

Conclusion

The detailed description of the results from individual projects is presented in the results analysis matrix. Broadly, in most of the projects the specified results at the output level appear to have been achieved. However, the achieved outputs do not necessarily correspond to an achievement at the short-term objective level. Despite the contradiction, this helps us in understanding two key elements in project management.

Firstly, that projects need to be designed better – in such a way that the outputs are linked in a manner that they lead to the achievement of project objectives. Secondly, there are management issues that play a crucial role in the achievement of the overall objectives of a project. A better understanding of these issues and developing an appropriate strategy to deal with them becomes important for Sida in the future.

4. Human Rights and Democracy

Background

Over the last ten years, Sida has been supporting a select number of NGOs working in the two inter-linked areas of human rights and democratic decentralisation.

In the area of human rights, the focus has been on support to advocacy and awareness raising, documentation, research and legal aid. One illustrative example is the support to the Human Rights Law Network, consisting of nine units across the country, the main task of which is to conduct human rights campaigns and provide legal aid. A majority of the cases involves disadvantaged groups such as slum and pavement dwellers, street children, unorganised workers, Scheduled Castes and Scheduled Tribes. Relatedly, Sida has helped to initiate an internship programme for lawyers, who are placed to work in local NGOs. Managed by the Indian organisation Partners for Law and Development (PLD), the double objective of this initiative is to promote the use of law as a resource for advancing the rights of the poor and marginalised, while at the same time raising social consciousness among lawyers. A third intervention is the support to ASTHA and a network of some 20 NGOs in Rajasthan, endeavouring to empower the state's eight million widows to take control over their own lives.

Sida support to projects in democratic decentralisation is a fairly recent phenomenon after the 73rd and 74th constitutional amendments. The support was restricted to the NGOs and appears to be tentative with no clear long-term strategy. During 1997–2001, three NGO projects were supported. The society for participatory research in Asia (PRIA) is the largest with a national coverage across 18 states. Support through SUTRA was restricted to Himachal Pradesh while support to the Institute of Social Sciences (ISS) was operational in the states of Orissa and Rajasthan. All the three projects variously address the issues of (1) awareness generation, (2) capacity building of the panchayats at different levels and (3) policy advocacy.

Relevance

The law provides everyone equal access to the judicial system. However, under-privileged groups such as the poor, women, and members of SCs and STs often find it difficult to pursue their rights due to lack of knowledge of the law, inability to finance lengthy law suits, and lack of contacts in the legal and political system. Caste differences often play a huge role. In some cases, existing laws have proved to be a barrier against justice. In other cases, lack of political will has resulted in important pro-poor stipulations of existing legislation being relegated to the status of paper laws. Moreover, the lawyers, the lawyers who indeed are keen on working with disadvantaged groups and providing legal aid are generally con-

strained by time, money and/or lack of advice and training. The support to the Human Rights Law Network and to PLD plays an important role in this context.

The relevance of the support to the widows' network in Rajasthan should be seen against the backdrop of the lacuna of initiatives addressing the specific needs and concerns of widows. At the same time, widows and other single women represent a particularly vulnerable group in India, faced by discrimination, high dependency on relatives, low education and skill levels, and subsequent economic hardships.

Democratic decentralisation in India is not new, yet it has attracted immense interest since the mid 1990s, mainly because of the 73rd and 74th amendments to the Indian constitution. Through these amendments, the Government of India has created a third tier of governance at the district level. Panchayats (the basic building blocks of local self governance) have been authorised to manage twenty nine subject areas, starting from drinking water supply to health and primary education. Separate constitutional bodies – state election commissions, finance commissions have been constituted to ensure distribution of resources and conduct of regular elections. However, the actual transfer of powers from the state government to the panchayat bodies could take a long time. Therefore, most of the efforts initially were focussed on awareness building of the panchayat members and the gram sabhas through training programmes, workshops and awareness camps. The focus then gradually shifted to capacity building and planning exercises for the panchayat members. Advocacy on implementing the provisions of the constitutional amendments is a later phenomenon especially in states where elections are delayed or not held. In this context, the projects supported by Sida were relevant. At the same time, the learning's from the project also provided valuable understanding of the sector and possible future directions for support.

Analysis of outputs

The outputs of the support to human rights project are not easily quantifiable, primarily due to the process-oriented character of the projects. While figures on the numbers of court cases assisted, publications prepared, people trained, workshops/campaigns held, etc., are available, they say little about the role of the organisations in fostering a greater awareness and a change of attitudes in relation to human rights issues. In fact, there is generally a confusion between outputs and short-term objectives in the projects. The same is true for the project in the field of decentralisation. A good example of is the support to ISS. In the case of SUTRA, the evaluation report clearly pointed out that the achievement of one output in creating panchayati mandalis was done at the expense of the other output which is training the panchayat members. At the same time, in the case of support to PRIA, it is clear that outputs have been largely achieved and according to the external review there seems to be an impact, which is however difficult to measure.

Analysis of outcomes

The impact of the support to projects in the area can be measured at two levels, viz. the individual level in the sense that people receiving legal aid

may have been able to gain justice, and at the level of processes that could bring about attitudinal changes. The latter changes will require a concerted effort over a long period of time, beyond the scope of a few projects. Nevertheless, the projects clearly demonstrate that they have a potential to bring about a long-term impact. This is especially the case when the organisations have filed petitions in the Supreme Court. There are several examples of when NGOs have prompted the Supreme Court to make land-mark rulings resulting in the change of laws or specific orders to state governments to meet their constitutional responsibilities. On the project level, impact is clearly visible in strengthened capacities of NGOs, and in the leverage created by the formation and expansion of networks.

In the case of support to PRIA, there is a clear impact of the role played by the Panchayat resource centres and of the pre election voter awareness campaigns. The latter was done in active collaboration with the state election commissions and has raised the voter awareness in making informed choices. Besides, the programme has helped the state training institutions in developing training methodologies and material. However, in the project with SUTRA, according to the evaluation, by excessively focusing on creating panchayat mandalis, the overall outcome of the project was compromised. In ISS, the outcome is substantial, though vague, of women showing keen interest and acquiring confidence in meeting higher authorities.

Analysis of the achievement of objectives

The organisations supported in the field of human rights all have long-term goals and visions. In most cases, however, progress against these goals and visions are not easily monitored. While the use of LFA has made the support more result-oriented, one can not get away from the fact that human rights is an extremely difficult field of work with few opportunities of making a viable dent on government institutions and on the functioning of the court system. In fact, the common view among NGOs is that the human rights situation in India has worsened, not improved, in the last decade. Nevertheless, progress has been made against short-term objectives in all the projects. The ASTHA project, for instance, accomplished its objective of forming a state-wide association of widows and other single women.

In the area of democratic decentralisation, all the projects had clear and laudable development objectives and perhaps even the project objectives were formulated well except in case of the project implemented by ISS. The objectives of the project implemented by SUTRA were changed mid way and in a peculiar way the project ended up achieving one objective at the expense of the other. While the project may have had an impact in making the panchayats more responsive through what became an advocacy oriented initiative it failed establish the bridge between the panchayat representatives/officials and the people. However, the support to PRIA seemed to have had a reasonable impact in achieving its objectives. The stated objective 'to encourage stronger linkages across the spectrum of individuals, institutions and civil society groups with the three tiers of PRIs' seems to have been achieved. PRIA has managed to galvanise a strong network of individuals, NGOs, media and

state institutions towards a more substantive debate on issues related to decentralisation. It hosted the secretariat for the working group on decentralisation set up as part of the Constitutional review commission in 2001.

Furthermore, NGOs, which were one of the critics of the panchayat system initially, now have defined a space for themselves that complements the panchayat system. At the same time a more critical objective 'to synthesise lessons learned and assist the state governments in fine-tuning legislative and administrative mechanisms needed to speed up the process of decentralisation' was not achieved. While PRIA has managed to do some studies, such as 'decentralisation in primary education' this objective perhaps needed a more consolidated and focussed effort. PRIA needs to decentralise its operations more to work actively with the state governments because their support is crucial in achieving this objective.

Conclusion

Sida is one of the few bilateral donors that directly support activities related to human rights advocacy. The support has contributed to strengthening the capacity of the partner organisations and to the formation and consolidation of networks. In terms of impact, the support has helped to flag important issues of human rights, and made it possible for poor and other marginalised individuals to access legal aid. All in all, despite the lack of tangible progress, there are many justifications for Sida to continue giving strategic support to NGOs in the field of human rights.

Sida support to democratic decentralisation was relevant in its time. Capacity building efforts and awareness generation programmes need to be institutionalised within the government but at the same time for these efforts to become substantive, political decentralisation needs to be followed by administrative and financial decentralisation. The thrust now should be at the state level where the critical constraints appear. While some state governments, for example Madhya Pradesh and Kerala, have shown that devolution of powers yield political gains, much needs to be done. And there is potential for development in this sector as practically all sectors in which Sida is likely to be involved are to be implemented by the local bodies according to the Indian constitution.

5. Research Co-operation

The Indian government accounts for almost the entire funding of research in India. These funds are administered by several large central research councils, which work in close collaboration with the leadership in sectoral ministries, universities, national laboratories and research institutions outside the university system. A host of national laboratories and research institutions outside the university system fall directly under the research councils. The selection of projects and programmes to be funded is delegated by the councils' leadership to specialist, discipline-specific, committees of established (and often eminent) scholars and scientists.

With a few exceptions, research cooperation projects between Sweden and India have involved the Indian research councils as the contractual counterparts to Sida/SAREC. This has several advantages. It ensures

that (i) the obligatory research approval and clearance by a number of government agencies are forthcoming, (ii) the research projects are broadly relevant and important to India's developmental goals as perceived by the authorities, (iii) Swedish counterpart researchers get permission to conduct research in India and (iv) that substantial counterpart funding by the research councils are made available to Indian counterpart research institutions.

Working through the Indian research councils is however not free of problems. The biggest problem, by far, is the time it takes to process the project applications. It can take anything up to two years to launch a project. Another problem is the substantial delay experienced by the Indian counterpart research institutions in receiving the annual disbursements of the research council part of the project funding. A third one is the inordinate time it takes to receive responses from the research councils to queries and correspondence, and to get them to take even indispensable action.

Projects that do not involve research councils but are implemented directly by research institutions avoid the problems of complicated and lengthy procedures and the delays indicated above. However, they lose out on the great advantage of counterpart funding by research councils.

Lesson learned: In the Indian context, on balance, the advantages that accrue by working through the research councils outweigh the problems. In planning such cooperation, it is advisable to build in the long lead-time it takes to get a project off the ground and the inevitability of substantial delays in execution and completion.

Projects involving several Indian institutions

In a project where one Swedish institution cooperates with several Indian institutions, it has been observed that while there tends to be good and frequent contact between the Swedish and Indian sides, the same is not true of contact between the different Indian institutions. There tends to be a deep-seated unwillingness among Indian institutions to share information, knowledge and facilities and work truly jointly on a project. Each institution tries to maximise its own gain from the project. This tendency is very difficult to rectify, despite strong pro-active involvement by Sida/SAREC.

This indifference to intra-Indian cooperation can easily invalidate much of the premise on which the research project is designed, with only parts of the planned work getting done and those parts that depend crucially on true intra-Indian collaboration being neglected. It can lead to one or more of the Indian institutions being dropped after an external evaluation and the project concentrated to one institution each on the Indian and Swedish sides.

Lesson learned: Projects that involve several institutions on either or both sides will be beset with intractable problems of non-cooperation and rivalry. And, by corollary, the same warning applies to the ambition to conduct multi-disciplinary projects.

Joint-authorship of research papers

Contractually, the Swedish and Indian researchers involved in a project formally accept the proviso that they should write papers jointly for pub-

lication in international journals. In practice, this undertaking is seldom fulfilled and the majority of the papers submitted to international journals are not jointly authored. It seems very difficult to change this culture.

Lesson learned: Evidence of active effort to write papers jointly should be made a pre-condition for annual disbursements of funds and renewal of support to a project beyond the first agreement period should be strictly subject to the submission of jointly written papers to international journals.

Research visits

Active and dynamic research cooperation requires visits of researchers to counterpart institutions, at least once a year, with enough time spent at the counterpart institution to familiarise oneself with, and have in-depth discussions on, the scientific and project-implementation problems that arise.

Mutual annual visits do take place. However, there tends to be an asymmetry in the character of the visits as between the two sides. The project leader on the Swedish side (usually a professor or an associate professor/docent) is usually so pressed for time that she/he is unlikely to spend more than a few days in the counterpart institution. Junior colleagues (usually doctorate students) stay longer and get more involved. The Indian counterparts tend to make more use of the visits, both at the level of the project leader and others less senior. This asymmetry detracts from the quality of the cooperation and its outcome.

Indian researchers belonging to government-financed public sector institutions like national laboratories, universities, institutes of technology and specialist centres and institutes outside the university system, need to obtain clearance from the financing authority (e.g. research councils) and permission from the top leadership of their institutions (e.g. the office of the vice chancellor or the registrar of a university) in order to undertake a research visit or attend a meeting abroad. In general, this procedure can take several months, causing considerable problems at the Swedish end if the Indian researchers cannot arrive at the agreed time.

Lesson learned: Sida/SAREC needs to ensure that the Swedish project leaders earmark more time for visits. Realistic assessments should be made of the time required by Indian researchers to obtain clearance and permission to go abroad and factored into the planning of the visits and the research project's workplan.

Administration and disbursement of funds, and financial reporting

The Swedish grant for the Indian side is administered and disbursed by the Swedish counterpart institution, in accordance with its contract with Sida. This arrangement was decided upon because it was felt that the foreign exchange transactions involved in using the grant for the purchase of research equipment and consumables and for travel for the Indian side would be less complicated and more expeditious if handled from the Swedish end.

In practice, the expected administrative speed and efficiency from the Swedish side has not quite materialised, principally because of the shortfall in time and personnel devoted to administrative, disbursement and

follow-up activities. Delays accumulate, in particular in placing orders for equipment and consumables, which disrupt the experimental parts of the project and in turn considerably delay the completion of the project.

Another strong concern expressed by the Indian side is the difficulty in getting regular and detailed reporting from the Swedish counterpart on what has been disbursed, how much remains to be spent, and how much has been retained by the Swedish administrative instances as “administration charge”.

Substantial delays in financial reporting to Sida occur on the part of some (but not all) projects.

Lesson learned: In recent years, foreign exchange transactions have been liberalised in India, and it is now easier to make payments in foreign exchange for goods and services obtained from abroad. Institutions are allowed to open foreign exchange accounts with banks both inside and outside the country. Funds can therefore be disbursed directly by Sida to Indian institutions, with the stipulation that financial reporting be made directly to Sida.

Annual Review Meetings and End of Project

The holding of annual review meetings, usually at the site of the Indian counterpart institution, is specified in the cooperation agreement governing each project. In four of the eight projects listed in the indicator-matrix above, international meetings, to be held towards the end of the project at the Indian counterpart institution, are similarly specified and budgeted for.

These meetings are attended by the project leaders and some of the researchers from both sides, as well as the respective programme officers from Sida/SAREC and Sida/SAREC’s contractual counterpart (e.g. a research council) in India. In recent years, external experts have been invited to participate in the annual review meetings to comment on the work done so far and to provide suggestions for future work.

Lesson learned: The annual review meetings have been very useful as “benchmarks” and “milestones” in charting the progress of the projects, and in “trouble-shooting” administrative, coordination, grant-disbursement and grant-utilisation problems. The end-of-the-project international meetings have been very valuable in disseminating and publicising the results attained and the technologies developed to a selected audience of researchers, policy-personnel and representatives of public and private sector organisations from a number of developing and industrialised countries.

6. Humanitarian assistance

Background

The objective of Sida’s humanitarian assistance is to save and protect human lives and to alleviate the consequences of armed conflicts and natural disasters in such a way that it strengthens the local capacity and furthers durable solutions.

Sida’s contribution to humanitarian assistance in India implemented by Swedish NGOs and their partners during the 1997–2000 period amounts to 11.4 MSEK distributed among the organisations as follows:

Organisation	1997	1998	1999	2000	1997–2000
Diakonia	991,000		1,000,000		1,991,000
PMU Interlife			230,000		230,000
Röda Korset		500,000	1,000,000	750,000	2,250,000
SMR	230,000	199,000	973,000		1,402,000
Svenska Kyrkan		700,000	2,000,000	2,850,000	5,550,000
Total	1,221,000	1,399,000	5,203,000	3,600,000	11,423,000

Droughts, cyclones, hurricanes, flooding and earthquakes are disasters that regularly hit India and the impact on the population is often profound, especially in poor and densely populated areas with bad housing and infrastructure. These disasters demand emergency intervention in order to save lives and reduce suffering. The Swedish NGOs that have delivered humanitarian assistance to India during the relevant period have framework agreement with Sida which gives them access (within 24 hours) to funds up to 1 MSEK for life-saving operations in the first acute phases of emergency operations.

The following section is a summary of information provided by the Swedish NGO partners and reflects their own estimates of the output and impact of their humanitarian assistance in India during the relevant period.

Analysis of outputs

In order to save and protect lives in the emergency phase of a disaster, the NGOs have distributed immediate relief such as shelter, food, and medicine. The cyclone that hit the Orissa region in 1999 was the single largest operation with four of the NGOs supporting the disaster victims. More than 150,000 families received life-supporting relief packages and temporary shelter arrangements were arranged for those in need. Sida's contribution to the Orissa operation amounted to 4 MSEK.

The objective of rehabilitating the affected areas through support to housing, agricultural activities, small-scale business activities, fisheries, vegetable gardening and water and sanitation rehabilitation was partly achieved. Deviations from the planned outputs occurred due to overlapping with other organisations and the Indian Government, lack of interest or commitment of the beneficiaries, unsuitable or destroyed soil, and/or unsuitable distribution of allotments. Funds were instead transferred to income-generating activities in accordance with the request of the beneficiaries.

Outcomes, results and impact

The overall objective of saving and protecting lives is considered to have been reached, although there is no estimate of the number of lives that were saved through the interventions. Starting up a relief intervention is by some NGOs described as difficult due to lack of experience, lack of collaboration and of co-ordination between the different stakeholders such as local authorities, the population and other organisations. Shortcomings in the logistics are also mentioned as a hindrance to a smooth and efficient performance. The rehabilitation support is reported

by the NGOs to have enabled the beneficiaries to generate income leading to improved food security and less incentive to migrate. The credit-scheme project is assumed to lead to less dependence on moneylenders and an improved economic situation. Funds in the system have revolved five times during a period of four years.

Both the emergency and the rehabilitation phases have, in general, mobilised the affected population, which has worked together in local committees and in self-help groups with the aim to discuss and plan actions in order to find durable solutions. The assessment and identification of the victims in need of assistance have been a team effort and the teams are reported to have established good relations with the local authorities. The quality of drinking water has in some areas been improved through drilled tube wells and wells on high platforms which contributes to better resistance to possible future disasters. Better-adapted crops and farming methods is expected to lead to higher income and better food security. Measures to diminish the impact of future disasters such as more flood-resistant houses and reforestation have been taken.

Relevance

The humanitarian assistance that has been delivered in order to save and protect lives in emergency situations and in the aftermath of disasters have mobilised the population in the affected areas. Self-help groups and networks have been established and co-operation between the implementing organisations and the local authorities has been initiated, thus creating a better capacity and preparedness to cope with future disasters.

Evaluations

SMR's own evaluation of the Orissa cyclone operation indicates that it was cost-effective and highlights the good co-operation between the different NGOs and the local authorities. Diakonia has also conducted its own evaluation of the Orissa cyclone operation and concludes that the results were very successful, much thanks to a very competent implementing partner. The deviations between the planned and the achieved outputs that have been observed were due to requests from the beneficiaries and an ambition to avoid duplication of activities implemented by other agencies.

Conclusions and lessons learned

Experience has shown that mobilising the affected population to take an active part in the planning and implementation of relief operations in a disaster situation and in its rehabilitation phase is essential in order to save and protect the lives of the most vulnerable. The active participation of the target groups is also important in order to strengthen their capacity to prevent and/or cope with future disasters. Co-operation and co-ordination between the stakeholders – individuals, national and international organisations, and authorities – is essential in order to assure a cost-effective and efficient humanitarian assistance which indeed contributes to the overall objective of saving and protecting lives, strengthening local capacity and achieving of durable solutions.

7. Co-operation between Swedish and Indian NGOs

Background

The aim of Sida's support to development co-operation implemented by NGOs is to further the development of a sustainable and democratic civil society and to strengthen the capacity of local partner organisations. Sida's guidelines for support to NGOs stress the importance of developing the knowledge and capacity of local partner organisations and the importance of well functioning organisations. Sida is financing up to 80% of the programmes while the Swedish organisations are raising a minimum of 20% of the requested funds. Eight of the 13 Swedish NGOs with framework agreements with Sida have received funding for development programs in India during the relevant period.

The total amount granted for the period 1997–2000 was 83.5 MSEK distributed among the organisations as follows:

Organisation	1997	1998	1999	2000	1997–2000
Diakonia	3,143	2,294	3,005	2,564	11,006
Forum Syd	2,676	1,828	1,686	1,601	7,791
LO/TCO	3,913	2,619	2,826	4,039	13,397
OPC	370	255	143	264	1,032
PMU	616	358	350	355	1,679
SHIA	338	592	406	382	1,718
SMR	13,940	7,631	9,453	6,709	37,733
Svenska Kyrkan	1,104	2,022	3,190	2,868	9,184
Total	26,100	17,599	21,059	18,782	83,540

A number of these NGOs are acting as umbrella organisations for smaller Swedish organisations with own projects in India. The SMR (Swedish Mission Council) has acted as an intermediary for 14 organisations including Caritas, Erikshjälpen, Lepra Missionen and Frälsningsarmén, while Forum Syd has been the intermediary for 14 other NGOs including Adoptionscentrum and Framtidsjorden. LO and TCO have carried out projects through seven affiliated trade union organisations, e.g. Byggförbundet, Industrifacket and Lärarförbundet.

The sectors receiving the largest support through these NGOs are Human Rights Promotion and Democracy Development, Education, Health, Social Infrastructure and Organisational Development, however minor support has also been extended to projects within trade, industry, finance, agriculture and infrastructure. The support to Democracy Development and Human Rights Promotion increased during the four-year period while the support to education projects varied substantially with a peak in 1997. These projects have as a rule been implemented by local NGO partners rather than the Swedish organisation.

The following section is a summary of information provided by the Swedish organisations and reflects their own assessments of the output and impact of their activities in India during the relevant period.

Analysis of outputs

Strengthening the capacity of vulnerable groups to address their problems and needs, improving their living conditions and health status and enhancing the competence of local organisations have been the main objectives of the Swedish NGOs. The vulnerable groups are defined as ethnic minorities, orphans, mentally or physically disabled, and destitute rural and slum populations. Many projects moreover have a special focus on the empowerment of women as they are identified as particularly vulnerable in certain contexts. Advocacy on the rights and needs of disabled people and ethnic minorities has been on the agenda of several NGOs and has resulted in an increased awareness of their situation.

The planned outputs are reported to have been achieved in the majority of the projects, however, external circumstances such as natural disasters, local elections, and lack of well-functioning infrastructure have in some cases obstructed implementation. Moreover, rigid or weak structures in implementing organisations have sometimes had a negative effect on the output. The expected output in income-generating activities has in some cases not been fully achieved as the expectations were set too high.

Outcomes, results and impact

Rehabilitation of institutions for children including upgrading or construction of schools, upgrading of hospitals and clinics, education of health workers, vaccination campaigns, training of disabled people, water safety programs, basic health care education, ecological farming and food security promotion are activities that have directly improved the living conditions and the health status of the target groups.

Training and education programs are considered to be instrumental in enabling the target groups to address their vulnerability and improve their conditions in a long-term perspective. Workshops and seminars in the management and structuring of organisations have been held and are reported to have considerably improved the efficiency and work methods of formerly rather conservative and rigid organisations. The activities of interest groups, the establishment of networks and the creation of meeting places for different activities have been essential in the change process, enabling the targeted people to analyse their situation, to fight for their rights and to find possible solutions for development.

Small-scale income generation programs are considered to have improved the living conditions of the targeted poor even though the expectations have not always been met. Save-and-loan programs have been utilised for purchasing seeds and livestock, for vegetable gardening and for investing in small-scale business activities. The majority of the loans have been repaid in due time and the beneficiaries have become less dependent on moneylenders requesting exorbitant interest rates.

Many NGOs have emphasised the vulnerability of women and have formulated projects aiming at strengthening the position and status of women. The save-and-loan programs have given support to self-help groups and experience has shown that women often are better financial managers than men. Programs aiming at changing men's attitudes towards women and fighting the destructive tradition of high dowries, abortion of girl foetuses and killing of young girls are presumed to have improved the living condition of women and promoted gender equality.

Violence against women is reported to have decreased with the implementation of a program against illicit distilling, which also resulted in improved economic conditions. Support given in the form of technical or in-kind assistance such as hospital equipment and rehabilitation/construction of institutions is expected to result in better health status and living conditions for the beneficiaries.

Relevance of co-operation for strengthening civil society

The efforts to create networks and working groups at the grassroots level and to raise the awareness of the vulnerable target groups of possibilities for change are all aiming at building a solid foundation for a strong civil society. The training and education activities implemented through the programs are crucial for the development of a stronger civil society.

The local and the Swedish organisations have worked together to create a link between the target groups and the authorities and have established a basis for a continued dialogue. Women have been encouraged to start own groups to protect their rights and to advocate gender equality.

Strengthening of local CBOs and an active participation and co-operation of the vulnerable groups in planning, implementing and sustaining the activities are considered instrumental in the change process. Leadership training involving both training of present leaders and education of new leaders at community level has been conducted and is an essential element in the creation of a sustainable civil society.

Evaluations

Both internal and external evaluations have been made by most of the organisations. During the four-year period, Diakonia has carried out more than 20 evaluations in which the target groups have participated. The evaluations indicate that the Diakonia programs should focus more on gender equality, consider the possibility of utilising state funds and improve the organisational structure of the partner organisations.

The following organisations under the Forum Syd umbrella have carried out evaluations: Framtidsjorden (positive results but problems with money transfers), Bharat Indien (the evaluation showed that the local partner had embezzled the funds). Shanti, Svalorna, Svensk Förening för Indisk Byfolkshögskola and Tyresö U-landsförening have also carried out internal evaluations, however, no information of the outcome of these evaluations is available. SHIA has evaluated its support to mentally disabled and visually handicapped children and concludes that more active participation of parents is required in order to obtain better results.

Svenska Kyrkan's evaluations indicate that their projects have strengthened the development of democracy in rural communities. However, the goal of involving female leaders in the projects has not been fully achieved and the involvement of the target groups has not been up to expectations. Evaluations of the projects carried out by the organisations under the SMR umbrella recommend a more clearly defined long-term strategy with fewer partner organisations and integration of projects in a more holistic approach to the development process. There are currently no formal evaluations of the projects supported by LO-TCO but reports indicate that clear short-term *and* long-term goals need to be defined and analysed.

In addition to the above-mentioned evaluations, a study on Swedish-Indian NGO Co-operation and its Contribution to Civil Society was initiated by Sida and carried out by INTRAC and PRIA in 1999.

Conclusions and lessons learned

The long tradition and great number of both national and international organisations in India have contributed to the development of an active civil society. Experience has shown that an active participation of the target groups in the formulation and implementation of development programs is instrumental for their success and sustainability. The structure of the implementing partner organisations is equally important for the outcome of the projects. A strong emphasis on the strengthening of the civil society by the creation of networks, self-help and interest groups and by developing the capacity of individuals and organisations are important factors in the development process. Several of the Swedish organisations endeavour to have more holistic approaches in the programming of the development support and are currently attempting to integrate different projects into long-term development strategies.

8. International Training Programmes

The Sida International Training Programmes (ITPs) are part of the overall development co-operation programme. Over the past 5 years (from 1997 to 2002), Sida has sponsored 80–90 ITPs per year and India has been invited to most of them. The thrust of the ITPs are on the areas of:

- Governance, Democracy and Human Rights
- Social Services, Health, Education and Community Planning
- The Enabling Environment, Public Institutions and Services
- Infrastructure, Telecommunications, Energy and Transports
- Industrial Production, Management and Technology
- Environment, Land Use and Natural Resources Management

Indian participation in the ITPs has been as follows:

1998:39 participants (11 women and 28 men)
1999:43 participants (6 women and 37 men)
2000:35 participants (6 women and 23 men)
2001:42 participants (6 women and 36 men)
2002:53 participants (13 women and 40 men)

In order to encourage a wider and increasing representation of Indian nationals in the ITPs, the routines for nominations were revised in 2001. Apart from government officials, the new routines encourage participation by representatives of the civil society, independent institutions as well as the private sector. People engaged in projects financed by Sida would also be invited to participate. Sida has also been asked by the Indian government to look into the possibilities of arranging programmes with only Asian participants. It was later agreed that Sida should make preparation for only Indian participation in the following three ITPs:

- Applied International Management Programme (AIM)
- Small and Medium Enterprise Management Development (SMEM)
- Public Service Management (PSM)

The detailed planning of these ITPs has recently started.

In 2002, a follow-up meeting was held in New Delhi with former participants of various programmes. The general perception was that the ITPs were very much appreciated and had proven to be very useful for the participants in their profession.

Select donor agencies and their priorities in India (as of March 2003)

Country	Programme Size (US\$, latest year)	Thematic Focus	Geographical Focus	Programming strategy	Implementation channels	Future plans
Asian Development Bank (ADB)	1.5 billion (1997-2001)	<ul style="list-style-type: none"> • Energy • Finance & industry • Social infrastructure • Transport & communications • Capital markets 	<ul style="list-style-type: none"> • Madhya Pradesh • Gujarat • Kerala • West Bengal • Assam • Sikkim • Chattisgarh 	<p>Annual country programming exercise with a rolling programming cycle of three years</p> <p>Increasing emphasis on support for policy reform, innovation in project design, and leveraging operations with non-lending activities</p>	<p>50% of assistance to focus states</p> <p>TA also to NGOs</p>	
Australia (AusAID)	13 million (2002-03)	<ul style="list-style-type: none"> • Water & sanitation • Primary education • Health, HIV/AIDS • Governance 	<ul style="list-style-type: none"> • Himachal Pradesh • The Northeast 	<p>Agreement on Development Co-operation (1990 -)</p>	<p>Central and state government agencies, NGOs</p> <p>Projects implemented by Australian-led consultancy teams</p>	<p>Interest in urban governance</p>
Canada (CIDA)	31 million	<ul style="list-style-type: none"> • Environment protection • Economic co-operation • Poverty alleviation policy • Social sector reforms • Private sector development, including infrastructure 	<ul style="list-style-type: none"> • Madhya Pradesh • Chattisgarh • Uttaranchal 	<p>Country Policy Development Framework (2002-07)</p>	<p>Central and state government agencies, private sector, institutional partnerships, and NGOs</p> <p>Use of Indian Executing Agencies</p>	<p>More emphasis on private sector co-operation</p>
Denmark (DANIDA)	18 million	<ul style="list-style-type: none"> • Poverty alleviation • Women's development • Environment • Health • Rural development 	<ul style="list-style-type: none"> • Orissa • Madhya Pradesh • Karnataka • Tamil Nadu • Chattisgarh 	<ul style="list-style-type: none"> • Support based on requests from states through DEA • 10% of total grant is disbursed as small grants for innovative ideas 	<p>Central and state government agencies, NGOs</p>	<p>Phasing out development programme by 2008</p>

European Commission	940 million	<ul style="list-style-type: none"> • Rural development • Primary health & education • Environment • Irrigation • Culture • Democracy & human rights • Aviation 	In the process of selecting focus state	Country Strategy (2002-06) Requests from Gol submitted to ALA committee Use of project management units	Government, NGOs and private sector	Increasing focus on SWAPs, especially in education & health
Germany	62 million for Financial Co-operation 17 million for Technical Assistance	<ul style="list-style-type: none"> • Energy • Governance • Health • Environment • NRM 	-	New Country Strategy being developed	<ul style="list-style-type: none"> • Technical assistance through GTZ (German Technical Co-operation) • Financial Co-operation through KfW 	Emphasis on development in the North East
JICA	19.1 million (including 9.2 million in technical co-operation)	<ul style="list-style-type: none"> • Poverty Alleviation • Agriculture • Health • Education Economic Reforms <ul style="list-style-type: none"> • Transportation • Power • Industry Environment conservation	-	Co-ordinated approach to grant aid, technical co-operation and credit funding	All projects are implemented through DEA	New areas under consideration: <ul style="list-style-type: none"> • Disaster management • Water pollution control • Control of Desertification
Netherlands	64 million	<ul style="list-style-type: none"> • Rural water supply & sanitation • Urban environment • Education • Health • Governance 	<ul style="list-style-type: none"> • Gujarat • Andhra Pradesh • Kerala 	Geographic and thematic concentration, reduction in number of projects, & state level donor co-ordination	Central, state and local governments agencies Support to civil society through NGOs	

Norway (NORAD)	7.5 million (50% channelled through DEA)	<ul style="list-style-type: none"> Gender Environment Women's development Basic education & child labour HIV/AIDS Private sector development Culture 	<ul style="list-style-type: none"> Himachal Pradesh Karnataka with a focus on environment 	A strategy for Norway's overall relations with India, including development co-operation, has been submitted to MEA	Line Ministry, DEA, State Governments, UN Agencies, ILO and NGOs	Enhanced focus on environment Emphasis on thematic rather than geographical focus
U.K (DFID)	175 million	<ul style="list-style-type: none"> Pro-poor reforms Social sectors Energy Rural development Urban poverty Child labour Gender equality Natural resources & environment Governance 	<ul style="list-style-type: none"> Madhya Pradesh Orissa Andhra Pradesh West Bengal Multi state & National 	<ul style="list-style-type: none"> Asia Director's Delivery Plan for 2003-06 Country Assistance Plan for 2003-06 being developed State strategies developed in consultation with state governments 	<ul style="list-style-type: none"> Support to reforming states and the central line ministries through the DEA Support to NGOs 	<p>Increasing focus on poverty reduction through support to structural adjustment in reforming states</p> <p>Major emphasis on large initiatives in social sectors</p> <p>Continued emphasis on scaling up and replication</p>
UNDP	136 million	<ul style="list-style-type: none"> Employment & sustainable livelihoods Basic social services Rural development Natural resources & environment 	No state focus (Looking for possibilities of geographic focus)	Country Co-operation Framework (2003 – 07)	All programmes executed by line ministries with support from Specialised UN agencies NGOs involved as implementing agents	Further emphasis on gender and decentralisation in line with the UNDAF Increased emphasis on programme approach
World Bank	2.2 billion in new commitment for 10	Infrastructure and Energy (including power, transport,	The portfolio is large and diverse, with	The Bank uses a mix of lending instruments including	Out of total commitments:	The current India Country Assistance Strategy

USAID	projects (FY02) 1.3 billion in total net commitment for 69 projects (5.7 billion in IBRD loans, 7.1 billion in IDA credits.)	<ul style="list-style-type: none"> water supply, & emergency operations Human development (including education and health) Rural development (including irrigation, agriculture and forestry, sustainable natural resources) Environment Financial and private sector development 	<p>projects at both the central and state levels; the Bank has a presence in all the states of India.</p> <p>-</p>	Programmatic Structural Adjustment Loans (to states), Adaptable Program Loans and investment loans (the majority of lending in India)	<p>Central projects (41%) Andhra Pradesh (13%) Uttar Pradesh (7%) Maharashtra (7%) Gujarat (6%) Karnataka (5%) and Orissa (5%)</p>	<p>guides the Bank Group's program of support for 2001-04 New CAS (2004-07) is being prepared & expected to be ready by early 2004.</p>
	127 million (including 39 million in food assistance)	<ul style="list-style-type: none"> Economic growth Health/Nutrition Disaster Mgmt. Energy Environment Education Equity/Justice 		Country Strategy (2003-07)	<p>Bilateral agreements with DEA and support to select number of NGOs</p>	<p>Emphasis on thematic concentration</p>

Bibliography

1: Health

- Aadhar Research Institute (2000), *Narrative Report on RCH Activities, May 1999 – July 2000*
- ARI (2001), *Narrative Report on RCH Activities, October 2000 to September 2001*
- ARI (2002), *Revised Project Proposal on RCH activities in Rajasthan, 1st October 2000 – 30 September 2002*
- ASHA (1999), *Intervention Programme with Women in Prostitution and their Clients in the Red Light Area of Kamathipura and Khetwadi of Mumbai, January 1998 – December 1998*, ASHA AIDS STD HEALTH ACTION, Mumbai
- Basu (1996), *Review of Support to Three NGOs in Manipur for Project Implementation in Prevention of HIV Transmission and Aids Care*
- Basu (1998), *Report on Monitoring Four NGOs in North-East India in HIV/AIDS Prevention and Care*
- Björkman (1996), *The Integrated Child Development Services Scheme*, Chowdhury, *Prodigal's Home – A Review*
- Christensson, Hutter, Johansson, Lessel, Roy (1998), *Evaluation of UNICEF-Child Survival and Safe Motherhood Programme in India*, New Delhi
- Gopalan & Sundararaman (1999), *Review and Evaluation of the AIDS, STD Health Action (ASHA) Project*, Mumbai
- Gopalan & Sundararaman (1999), *AIDS, STD Health Action Project in Mumbai – An evaluation of ASHA*
- Greiner et al (2000), *Reaching Out to Children in Poverty*
- Institute for Social Disease (2001), *Outreach Intervention for Prevention of HIV Transmission Among Male Injecting Drug Users And Promotion of Sexual and Reproductive Health Among Women*, July 2000 – June 2001, Institute of Social Disease, Imphal, Manipur
- Institute for Social Disease (2002), *Sida Project Proposal on Outreach Intervention for Prevention of HIV Transmission among male Injecting Drug Users and Promotion of Sexual and Reproductive Health among Women*, July 2001 – June 2002, Imphal, Manipur

Lifeline Foundation (2001), *Annual Progress and Financial Report, June 2000 – July 2001*, Lifeline Foundation, Imphal, Manipur

Lifeline Foundation (2002), *LifeAid Narrative Progress Report, June 2000 – July 2002*, Imphal, Manipur

Lifeline Foundation (2002), *Workplan and Budget, July 2001 – June 2002*, Imphal, Manipur

MAMTA (2000), *Annual Report 1999–2000*, MAMTA Health Institute for Mother and Child, New Delhi

MAMTA (2001), *Evolving Strategies for Better Health and Development of Adolescent/Young People (Annual Report), 2000–2001*, MAMTA Health Institute for Mother and Child, New Delhi

Prakasamma (2000), *Review of RCH projects implemented by NGOs in Rajasthan*

Prakasamma (2001), *Review of Sida supported NGO Network Project in the area of RCH and Rights in Rajasthan*

Roy (1997), *Report of Mid Term Review of ASHA project*

Stauffer, Chandran and Sacchidanand (2002), *Review of AIDS, STD Health Action (ASHA) Project*, Mumbai

UNICEF (1995), *Child Survival and Safe Motherhood, July 1992 – June 1995*, New Delhi

UNICEF (1997), *CSSM Donors Report, January 1996 – December 1996*, New Delhi

UNICEF (1998), *Reproductive Child Health (RCH) Programme, July – December 1998*, New Delhi

UNICEF (1998), *Child Survival and Safe Motherhood (CSSM) Programme, July 1995 – December 1997*, New Delhi

UNICEF (1999), *First Six Monthly Progress Report, January – June 1999*, New Delhi

UNICEF (2000), *Child Survival and Safe Motherhood (CSSM)*, New Delhi

The Social and Rural Research Institute, *Sida-ICDS Evaluation Study*

The World Bank (1997), *Child Survival and Safe Motherhood Project*, New Delhi

2: Education

Aikara (1998), *People's Participation in Primary Education – The Lok Jumbish Project*, New Delhi

GoR (1994), *Lok Jumbish Phase II, 1994 – 97*, Government of Rajasthan, Department of Education, Jaipur

Lok Jumbish Parishad (1995), *Indicators and Action Plan, 1995 – 1998*, Jaipur

Lok Jumbish Parishad (1997), *Lok Jumbish – Phase III Project Outline*

Lok Jumbish Parishad (1998), *Lok Jumbish Phase III, 1998 – 2003*

Lok Jumbish Parishad (2000), *Eighth Report, January 1998 – December 1999*, Jaipur

Lok Jumbish Parishad & DFID India, *Lok Jumbish Phase III*

- ORG (1998), *Evaluation of Sahaj Shiksha Programme of Lok Jumbish*, Operations Research Group, New Delhi
- ORG (2002), *Impact Assessment and Cost Effectiveness of Lok Jumbish Project in Rajasthan, India*, ORG Centre for Social Research
- Ramachandran & Sethi, *Rajasthan Shiksha Karmi Project – An Overall Appraisal*

3: Environment and Natural resources

- NTGCF (1997–2000), *Annual reports and Agreed Minutes between the National Tree Growers Co-operative Federation and Sida on support to the Tree Growers Project*, 1997–2000
- Saxena (2001), *External Review of the Centre for Science & Environment*, a report commissioned by Sida
- Sida (1997–2001), *Agreed Minutes from the Project Review Committee meetings of the Environmental Protection Training and Research Institute*, 1997–2001, New Delhi
- Sida (1998), *Evaluation Report of the Project Building 250 water harvesting structures (Johads) in Bansur and Umren Blocks of Rajasthan*, New Delhi
- Sida (1998–99), *Agreed Minutes from the quarterly review meetings of the project on 'Capacity building for participatory management of degraded forests in Orissa' between the Government of Orissa and Sida*, 1998 – 1999, New Delhi
- Sida et al (1999), *Learning from experience – Evaluation of UNICEF's Water and Environmental Sanitation Programme in India*, New Delhi

4: Human Rights and Democracy

- Buch & Rao (2001), *Evaluation of Sida support to SUTRA*, New Delhi
- Manavalan (2001), *Evaluation of Sida support to the Institute of Social Sciences*, New Delhi
- Prasad & Rao (2001), *Mid-Term review of the Society for Participatory Research in Asia*, New Delhi

5: Research Co-operation

- Project: Fuel Cell Technology for Rural Electrification
- Agreements between SAREC and ICAR covering the periods 1989/90–1991/92 and 1992/93–1994/95
- Agreement between Sida and ICAR covering the period 1995/96–97
- External Evaluation Report by Dr K. Maniatis, April 1995
- Jain, A K; Panesar B S. & Jindal S L. (1997) *Final Report*, The School of Energy Studies for Agriculture, Punjab Agricultural University, Ludhiana
- Kiros Y. & Sampath R. (1997) *Final Report*, The Dept of Chemical Technology, KTH, Stockholm
- Lindström; Selected Progress Reports; *Number 21*, July–September 1995; *Number 22*, October–December 1995; *Number 25*, July–September 1996, KTH, Stockholm

Panesar B S; Jain A K & Singh C P. *Proceedings of the Asian Seminar on Fuel Cell Technology for Rural Electrification held at the Tamil Nadu Agricultural University, Coimbatore, 25–26 April 1996*

Project Proposals submitted by the Indian Council for Agricultural Research (ICAR), Government of India, New Delhi, in September 1992 and to Sida in March 1996

Sampath R. & Ramanathan M. (1997) *Final Report*; The Department of Bio-Energy, College of Agricultural Engineering, Tamil Nadu Agricultural University, Coimbatore

SAREC Board Paper (1992)

Sida Research Council Paper (1996)

Project: Environmental Aspects of Energy use in Large Indian Metropolises

Agreement between SAREC and TERI, dated 10 June 1994, covering the period 1994/95–1996/97, Progress Report, 1996, Final Report, December 1997

Project Proposals submitted to SAREC by the Tata Energy Research Institute (TERI), New Delhi, January 1994 and December 1994 (final version)

SAREC Board Paper (1994)

Project: Small-scale gasification of agro-waste and biomass for rural areas

Agreement between SAREC and the Indian Institute of Science, Bangalore and Anna University, Chennai, dated 10 June 1994, covering the period 1994/95–1996/97 and its extension to 31 December 1999

Progress Report, 1996

Progress Report, 1998

Progress Report, 1999

Project Proposal submitted to SAREC by the Indian Institute of Science, Bangalore and Anna University, Chennai, in December 1993

SAREC Board Paper (1994)

Project: Advanced technology for combustion of biomass

Agreement between Sida and the Indian Institute of Technology Madras, Chennai, dated 18 December 1997/20 January 1998, covering the period 1998–2000, and its extension to 30 June 2002

Progress Report, 1999

Progress Report, 2000–2001

Project Proposal submitted to Sida /SAREC by the Indian Institute of Technology Madras, Chennai, May 1997

Sida Research Council Paper (1997)

Project: Applied Biocatalysis: Cultivation of micro-organisms and the production of lactic acid by fermentation

Agreement between SAREC and DBT covering the period 1990/91–1992/93

Agreement between Sida and DBT covering the period 1995/96–1999, and its extension to 31 December 2000 and 30 June 2002

External Evaluation Report by Prof K. Schügerl, 1995

Progress Report, 1999

Progress Report, 2000

Project Proposals submitted to SAREC by the Department of Biotechnology (DBT), Ministry of Science and Technology, Government of India, in 1991 and to Sida in 1996

Report from the International Workshop on Lactic Acid Bacteria held at the Central Food Technology Research Institute, Mysore, 15–17 November 1999, Report received at Sida in May 2000

SAREC Board Papers (Insatspromemoria), March 1991

Sida Research Council Paper, March 1996

Project: Natural and recombinant proteins /enzymes as Biosensors

Agreement between SAREC and DBT dated 4 November 1992 and 9 June 1993, covering the period 1992/93 – 1994/95, and its extension to 31 December 1997

Agreement between Sida and DBT dated 28 October 1997, covering the period 1998–2000 and its extension to 30 June 2002

External Evaluation Report by Dr Howard H. Weetall, 1997, Sida Evaluation 97/38

Progress Report, 1999

Progress Report, 2000

Progress Report, 2001

Project Proposals submitted to SAREC by the Department of Biotechnology (DBT), Ministry of Science and Technology, Government of India, September 1992, and to Sida in May 1997

SAREC Board Paper (Insatspromemoria), October 1992

Sida Research Council Paper, June 1997

Project: Tree Tissue Culture

Agreement between SAREC and DBT dated 4 November 1992 and 9 June 1993, covering the period 1992/93 – 1994/95, and its extension to 31 December 1997

Agreement between Sida and DBT dated 28 October 1997, covering the period 1998–2000 and its extension to 30 June 2002

External Evaluation Report by Prof Indra K. Vasil, 1997, Sida Evaluation 97/38

External Reviewer's Report by Prof M. I. J. Umboh, November 2000

Progress Report, 1999

Progress Report, 2000

Progress Report, 2001

Project Proposals submitted to SAREC by the Department of
Biotechnology (DBT), Ministry of Science and Technology,
Government of India, September 1992, and to Sida in May 1997

SAREC Board Paper (Insatspromemoria), October 1992

Sida Research Council Paper (1997)

Project: Bioremediation of mine dumps

Agreement between Sida and DBT dated 28 October 1997, covering the
period 1998–2000 and its extension to 30 June 2002

Progress Report, 2001

Project Proposals submitted to Sida in May 1997

Sida Research Council Paper (Sidas forskningsnämnd,
Insatspromemoria), June 1997

Halving poverty by 2015 is one of the greatest challenges of our time, requiring cooperation and sustainability. The partner countries are responsible for their own development. Sida provides resources and develops knowledge and expertise, making the world a richer place.



SWEDISH INTERNATIONAL
DEVELOPMENT COOPERATION AGENCY

SE-105 25 Stockholm Sweden
Phone: +46 (0)8 698 50 00
Fax: +46 (0)8 698 56 15
info@sida.se, www.sida.se