



Power Analysis: A Learning Review

EXECUTIVE SUMMARY

This learning review explores how power analysis is integrated in Christian Aid resilience programmes funded by CHASE and General PPAs 2011-2016. The findings included here are based on patterns identified across a global portfolio of interventions in Health and HIV, Disaster Risk Reduction and livelihoods and Inclusive Market Development. It is fully acknowledged that the findings are based on common threads and that across a global portfolio there will always be exceptional examples and outliers.

Understanding and integration of power in resilience work.

The first step to using power is to understand how power relationships affect change. In very general terms partners and country programmes share an understanding of power as:

- Multi-dimensional, dynamic and changing;
- Have different forms of power to, power with and power within;
- Types of power: knowledge, resources, personal and positional;
- Power operates in different spaces.

The integration of power analysis is varied across the different types of interventions. Christian Aid has been developing an overarching Resilience Framework as a structure for different programme entry points and to clarify the links and potential synergy between thematic interventions. This review identified that thematic areas use power analysis in a variety of ways.

The Community Health and HIV framework leads with power. Changing social norms signpost “power within” and “power to”. Work with PWHIV organisations has sought to increase “power with” and mutual support to tackle discrimination. The CHH specifically addresses health systems and community health committees use new skills and knowledge in spaces with service providers. Changing health seeking behaviours (Sexual Reproductive Health and Malaria) focus on power within and less on power with.

Disaster Risk Reduction and Resilient Livelihoods: initially the main focus was on community level empowerment and collective power, with less attention to the differences in power in the community and how this affects risks and vulnerability. Programmes have started to address different needs of women and men however there is still a tendency to report on these a homogenous groups. Awareness of different factors: status; age; health; disability; education; location etc. which affect how and who benefits from changes in collective power are less visible in reports.

Inclusive Markets and the participatory market system development specifically targets products produced by marginalised groups and partners focus on are engaged in developing their collective power to engage with other market actors.

Country programmes and partner understanding of power is mediated by previous experience and types of interventions. The starting point is different for partners and the capacity depends to a great extent

on previous exposure to participatory methodologies. Many partners have moved to facilitating community processes rather than direct implementation.

Over and above the provision of conceptual frameworks, as far as partners are concerned the added value of Christian Aid is in increasing their skills and knowledge; accompanying field work to put this into practice. In some countries, challenging questions and processes which encourage reflective practice help partners to develop analytical skills.

Changes in strategies and partnership portfolio: The inclusion of power mapping in the Christian Aid strategy development in 2012 was a foundation for a multi-stakeholder approach to change. Some programmes seized the opportunity to revisit their areas of intervention and took on new partners. Initially the Christian Aid culture of strengthening existing partners prevailed as countries attempted to bring all partners along. Some partners were “dropped” following mid-term performance review or budget reductions. Some programmes have brought in new “strategic” partners to address emergent programming needs this includes national and international NGOs. The nature and shape of Christian Aid relationships has changed although the tendency to refer to all as partnerships is confusing. The need for better categorisation of relationships is required, if partnership is to maintain a distinctive Christian Aid value.

Changes in accountability has been driven by various initiatives. The core ideas of participation, sharing information and community feedback mechanisms as promoted by HAP have spread from CHASE PPA to the General PPA through the Participatory Vulnerability and Capacity Assessment methodology which underpins DRR and livelihoods design processes. A shared experience is that community feedback mechanisms have not been well used by the communities and partners. This is not completely surprising as complaining and making suggestions are not power neutral. It requires a degree of confidence and sense of entitlement which not always found in marginalised poor communities. Alternative methods have been introduced to encourage beneficiary feedback and there are some good examples of programmes in Kenya and Bolivia changing strategies in response. Feedback from partners to Christian Aid has been managed differently across the programmes. The 2015 Value for People research reports that Christian Aid actively seeks feedback from partners, and the partner review processes aim to systematise this. Christian Aid is mindful of power differences in all relationships and this understanding needs to be included in review, feedback and complaints mechanisms if they are to become effective.

Programme Change is assessed from the perspective of changes in frontline work. This is “in control” of partners more than Christian Aid. The most significant change across the portfolio is that more partners and communities are raising their voices in new spaces to influence decision making. This is not always done in an inclusive way.

Increased voice and advocacy is visible in the majority of programmes. This is happening at all levels from community to national. Communities are using their PVCA action plans as a negotiating tool with local authorities. Partners contribute to influencing policy and dialogues as part of civil society coalitions, networks etc. These are long processes and sometimes success is claimed too early. Nigeria health budget work is also linked to the global tax justice campaign but the instances of such links are small compared to the amount of national advocacy.

The extent to which this work is inclusive is difficult to say as this review did not visit the field and the evidence of inclusion is not adequately documented. This merits more attention by Christian Aid and

partners. Inclusive programming starts with inclusive participation and requires good facilitation skills and should be a point of interrogation in all monitoring and impact assessments by partners.

There is a significant improvement in the gender disaggregation of data and evidence of different types of activities for men and women. There is a common recognition that more could be done to help women participate and influence decisions in public spaces, particularly community fora. There is much less documented evidence of different types of exclusion being considered in relation to capacity to do things differently. There is very limited mention of PWD. The new corporate drive on gender and inclusion will reinforce a differentiation of power in the community. COs and partners should be provided with support and practical guidance on how to deepen their use of power analysis in gender and inclusion.

In summary:

- Christian Aids conceptualisation of power provided a new theory for Christian Aid programmes and partner interventions; more practical guidance would have helped staff and partners.
- Implementation and use was affected by different starting points, in country and amongst staff and partners experience. Absorptive and adaptive capacity varied;
- Embedding learning through accompanied support to field practice helps to build partner confidence.
- Facilitating critical reflection and learning with and between partners is important to improving local practice and is more like to build transformative practice.
- The PPA focus on quantitative reporting crowded out space for critical reflection on changes in power relations.

Key lessons from Christian Aid's approach to power and how to add more value

The organisational drive as a result of the Partnership for Change strategy and the development of power analysis in relation to Christian Aid's governance work filtered into resilience work through various conceptual frameworks and methodologies. More attention to tracing theoretical concepts (the why and the what) through explicit packaging into the different frameworks and more "how to guidance would have helped COs and partners develop a more power conscious practice across their work. This might have accelerated the adoption and increase confidence in how to change power relations.

The investment in supporting participatory planning helped to kick start a change of approach at community level, and in some cases this was learning by doing for Christian Aid and partner staff. Other countries were more experienced and better positioned to adapt the tools into existing participatory approaches. A more systematic and holistic review of partner organisation culture and approaches as might have helped Christian Aid in targeting and sequencing capacity support to partners. In most programmes PVCAs were used as a planning tool rather than as a process for planning and monitoring and learning about changing power relations.

Partners and staff would have benefitted from more attention to monitoring and learning methodologies which are better able to assess changes in power.

The PPA demands for quantitative data to some extent crowded out the space to develop skills in analysing success and failure to change from the perspective of power and transformation. Likewise, it encouraged a focus on upward more than downward accountability. In countries where participation was more familiar, COs have been able to engage with partners in a different way including developing reflective practice.

More investment in internal case studies on how and change happens or doesn't would have helped to increase a body of practice which could be used for cross programme learning. There is an opportunity to commission case studies from countries which include a deeper analysis of processes which support changes in power analysis. The work done by Philippines programme is a move in this direction.

Visualising transformation vs. project activities: as the PPA funding draws to a close and preparations are made for the future, it would be valuable for Christian Aid and partners to share an exercise of visualising transformation. This could be an entry point for deeper discussion of power, gender and inclusion in communities and beyond.

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Abbreviations

CHASE/ CSJH	Conflict, Security, Justice, and Humanitarian'
CHH	Community Health &HIV
CHS	Core Humanitarian Standards
CO	Country Office
CSO	Civil Society Organisation
DRR	Disaster Risk Reduction
EWS	Early Warning Systems
HAP	Humanitarian Accountability Principles
HFMC	Health Facility Management Committee
HSP	Health Service Provider
ICH	International Church House
IMD	Inclusive Market Development
MoH	Ministry of Health
MOU	Memorandum of Understanding
NGO	Non-Government Organisation
PMSD	Participatory Market Systems Development
PPA	Programme Partnership Agreement
PVCA	Participatory Vulnerability Capacity Assessment
PWD	People with Disability
PWHIV	People with HIV
RLF	Resilient Livelihoods Framework
TBA	Traditional Birth Attendants
TOC	Theory of Change
TRLF	Thriving Resilient Livelihoods Framework
TWG	Technical Working Group
VFM	Value for Money
VSL	Village Savings and Loans

1 INTRODUCTION

This review aims to provide an improved understanding of how power analysis has been used by Christian Aid and partners in resilience work to transform power relations, and reduce inequality and exclusion. Key review purposes are:

To provide learning on how Christian Aid has been able to integrate power analysis and tools in PPA funded Resilience programming

To investigate how effective Christian Aid has been at documenting the use of a power lens throughout the project cycle.

It is hoped that the learning from this review will contribute to future programme development initiatives, offer additional insights into how country programmes can improve and indicate questions that could be included in the forthcoming corporate impact evaluation of the resilience portfolio. The key questions included in the TOR (Annex 1) provide the outline for this report and are grouped into three main areas:

How is power understood and used by Christian Aid programme staff and partners?

1. To what extent do our programme staff and partners understand power?
2. How has the approach to power been integrated into the different elements of resilience (including health) and within different contexts?

What evidence is there of change resulting from the use of power analysis?

3. How have power relations between individuals, community, partners and government institutions shifted through our resilience work?
4. How has integrating power tools/techniques/processes in our resilience work altered our programme strategies and partnership portfolio?
5. What can we say about the inclusiveness of our approach? Has our approach to power supported increased active participation and influence of marginalised groups especially women and people with disabilities?
6. To what extent has integrating power analysis strengthened policy and advocacy work within our resilience programming?

Lessons learnt

7. What are the key lessons from our approach to power that should inform future programming?

1.2 Methodology and Approach

This is a qualitative review using a purposeful sample and a bottom up approach which aims to identify patterns of behaviour from written and spoken narratives. The main methods used were document reviews and semi-structured interviews with key informants from both partners' programme and advisory staff.

At the initial inception meeting with the review steering committee (see annex 2) agreed a sample and selection of countries was agreed, with the primary aim to ensure regional coverage: Africa, Asia and Latin America and a cross section of programme interventions: Humanitarian /DRR and Livelihoods, Inclusive Market Development and Health in both the CHASE and General PPA. Country offices had

already been approached to establish Staff and Partner availability and willingness to be involved the review. The final list of countries included:

- Africa: DRC, Ethiopia, Kenya, Malawi and Nigeria
- Asia and Middle East: Philippines
- Latin America and the Caribbean: Bolivia and Haiti.

In each country staff were requested to identify two partners. This was done with the exception of Haiti where partners were already fully occupied in end of project evaluations. A full list of country participants is available in Annex.

The matrix below shows the spread of programme/partner staff by type of intervention, and by country, interviewed during the review:

	DRR and Livelihoods		Inclusive Markets		Community Health	
	Staff	Partner	Staff	Partner	Staff	Partner
DRC	1	2				
Ethiopia,	1	1				
Kenya	2	1			2	1
Malawi			1		1	2
Nigeria					1	2
Bolivia	1	2				
Haiti	1	0				
Philippines	2	2				
	8	8	1		4	5

A *bottom-up* approach was agreed with PPA team. The intention behind this was to start with voices from the frontline of project and programme delivery which is the focus of power change before interviews with Christian Aid staff who may have a more normative view of how power is being applied. As far as possible partner project staff interviewed first. Following on were Christian Aid country programme staff, regional advisors and finally advisory and programme staff at ICH. One to one interviews and a focus group with the PPA team were completed in ICH and additional skype interviews completed with regional advisory staff in for Latin America and Africa.

For this review the key areas of resilience work considered are Disaster Risk Reduction and Livelihoods: Health and Inclusive Market Development (IMD). The Thriving Resilient Livelihoods Framework (TRLF) was used during the 5 years of the PPA. In March 2016, a revised Resilience Framework (RF) was launched with the intention of bringing together the different elements of livelihoods work. Guidance on power analysis was reviewed and updated in March 2016 as well.

Challenges:

A review by skype is a first for both Christian Aid and the consultant. It was time and resource efficient but not without challenges. Scheduling and requests for re-scheduling (and a shared confusion over the change to British Summer time) meant that organising interviews was time consuming. Internet and phone connections are better in some countries than others. The call to Ethiopian partners had to be abandoned and partners were requested to provide written responses to the questions which were not as informative as interviews. When communication worked it was possible to conduct interviews, although it is acknowledged that the interviewees may have felt the process to be more extractive than reflective. Christian Aid will seek feedback from the participants to assess viability for future use.

The timing of the review was challenging coinciding with end of year reporting, Christian Aid week and Easter holidays. This meant that staff and partners were occupied in different ways. In some instance partners were interviewed after programme staff etc.

There was an original intention to conduct a detailed document review but this was not feasible as the need to organise skype interviews took precedence. Although the consultant requested access to Christian Aids internal system to be able to look for reports etc. this is not allowed in Christian Aid. PPA reports, relevant evaluations, learning reviews and toolkits were shared with the consultant at the start of the consultancy via google drive. The review did not analyse Participatory Vulnerability and Capacity Assessment (PVCA) field reports and these are held by partners. These reports are relevant to an assessment of the quality of participation, degrees of inclusivity and tracing whose voices are most influential in the resulting plans.

Overall the length of time for such a review was tight but this is a factor of consultancy work and not unique to this piece of work.

This report presents finding in the main areas the TOR under three main headings:

1. How is power understood and integrated in resilience programme work?
2. What has changed as a result of using power analysis?
3. Key lesson for the future

There are some overlaps in the responses to the questions. The detailed sub-questions can be seen in the TOR in Annex 2:

This report is intended for internal use by Christian Aid and partners.

The learning review was carried out by an independent consultant with a background in reviewing and learning in programmes focusing on voice and empowerment, governance and civil society strengthening. Working with INTRAC provided a background to understanding partnerships and capacity development approaches and reflective practice.

2 FINDINGS

2.1 How is power understood by programme staff and partners?

2.1.1 Introduction

Partnership for Change is Christian Aid's global strategy and aims to:

Expose the scandal of poverty; to help in practical ways to root it out from the world, and to challenge and change the systems that favour the rich and powerful over the poor and marginalised.

- *Practical ways to root out poverty: building individual and collective power;*

- *Exposing the scandal of poverty: stopping 'power over' by confronting, engaging and negotiating with power;*
- *Changing power structures and dynamics which reproduce poverty – at all levels from community to global.*

How programme staff and partners understand power influences how they will use power through the project cycle praxis. Understanding of power and its integration throughout the project cycle penetrates all the findings in this review.

The top level findings are:

Overall Partner and Christian Aid programme staff share an understanding of power as:

- Multi-dimensional, dynamic and changing:
- Has different forms: 'power to', 'power with' and 'power within';
- Types of power: knowledge, resources, personal and positional.
- Power operates in different spaces

In very general terms, Christian Aid programme staff now have a broader conceptualisation of power. Christian Aid programme staff are more likely to mention spaces in which power can be negotiated, and the different faces of power. The experience of using power mapping in the organisation-wide 2012 country strategic analysis provided a good foundation for looking at projects in a new way. The power matrix explicitly encourages an analysis of 'hidden of power' and 'the power over'. Hidden power is referred to by staff in initial power mapping with occasional references to it as a factor influencing rate of progress in interventions. For example, in Kenya the unrealised potential of a new constitution and decentralisation (visible edifices) finds Christian Aid staff reflecting on hidden power that drives local decisions.

How power is understood is influenced by several factors:

- Partner experience and starting points
- How the frameworks being applied explicitly integrate the concepts of power.
- Training and direct support (accompaniment) by Christian Aid staff with partners in the field

2.1.2 Partner starting points:

There is a wide range of partner starting capacity. Partners with experience in participatory development approaches were better positioned to assess the PVCA and power analysis tools and adapt them. For example, the Philippines is understood globally as a leader in the development and use of participatory tools and methods. Not surprisingly partner and staff felt more confident in adapting tools and adopting the analytical power mapping and matrix.

Adoption by partners in Community Health and HIV depended on existing project approaches. For example: some partners used to service delivery, willingly adopted a more rights based approach, encouraging communities to organise and demand better quality services from government providers. Others were less willing, one health partner explained clearly: "we don't do that, we do service delivery". In some countries, for example Nigeria partners embraced a stronger health governance approach. In the existing portfolio of work with PWHIV partners, their historic work to reduce stigma and anti-

discrimination as groups of PWHIV was a helpful entry point for identity based empowerment and voice. These incipient interest based movements were better positioned to work on policy engagement.

Partners working on the relief to development continuum, improving resilience through Disaster Risk Reduction (DRR) to support communities to anticipate, organise and adapt to change, tended to focus on technical responses to risks created by natural hazards. Later some partners started to address a wider view of risks as community (and partner) understanding of different risks grew, for example responding to health and gender based violence etc.

Country contexts

As with any work across different countries and different regions the social, cultural and political contexts influence how partners position themselves in relation to formal power. For example, in Ethiopia legislation explicitly limits CSO engagement in policy dialogue and so strategies focus more on encouraging those with power to use their power effectively more than challenging the power structures.

2.1.3 Christian Aid Frameworks

Christian Aid staff and partners use different frameworks and tools across the different areas of work. A key difference between frameworks is the extent to which power is explained and how materials show how and where changing power relations will drive change. All the frameworks assume interventions will promote individual or group power through the increased use of different types of power: knowledge, resource and positional power and personal power.

The Community Health and HIV framework (CHH) developed in 2013 explicitly leads with concepts of power. The Framework identifies three dimensions of change: equitable social norms; equitable institutions, and approaches to health service development. CHH clearly signposts ‘power within’ and ‘power to’ as an approach to changing social norms, and ‘power with’ to underpin a range of social accountability and advocacy interventions to influence the institutions, systems and services which communities need.

The Thriving Resilient Livelihoods Framework (TRLF) developed in 2012 refers to the need for: participation and voice as key to building resilient communities; the importance of gender, power and exclusion analysis to identify marginalised groups and different vulnerabilities. Adaptability is understood to involve men and women transforming how they make a living. The TRLF framework promotes an analysis of risk, vulnerability and capacity and within this ‘power to’ mitigate risks as a community.

In 2016 Christian Aid has re-developed a **Resilience Framework**. This aims to gather different programme interventions around a set of core principles and a common goal of “empowerment to manage risk and improve well-being”. Power is more explicitly included in this new framework in several ways: as the common goal; in the principles: targeted assistance aimed at tackling power dynamics and community led processes; in integrated and standalone interventions shifting power relations.

During the period under review the TRLF framework shaped Christian Aid livelihoods work in both the CHASE and General PPA. Initially in CHASE work country programmes started to use Participatory Vulnerability and Capacity Assessments (PVCAs) at community level as a process and tool to identify community risks and responses. The participatory process aimed to encourage communities to reflect

on their own power and capacity to change their livelihoods. As an outcome, community groups mobilise around commonly agreed actions which are expected to address different vulnerabilities in an inclusive, gender and power sensitive way. The PVCA process is not intended as a one off event. The expectation is that over time and through repetition of the participatory processes, communities become empowered to do their own analysis and planning. The focus on community mobilisation generally includes increasing: “power to”, “power with”, the latter focusing on changing power relations between the community level and decision-makers. The PVCA guidance promotes (and assumes) that the process will be continuously reviewed, to deepen the analysis of risks and encourage empowerment and voice in the community to target institutions with the power to reduce risks. A minority of partners use the PVCA process continuously.

Inclusive Market Development (IMD)

IMD approach is based on Participatory Market Systems Development (PMSD). The PMSD 2012 guidance is explicit about how power is integrated into the inclusive markets work. It talks explicitly about: empowering marginalised producers, systemic and holistic change and unblocking power within in the market system. An initial market analysis identifies products in which marginalised groups are involved – and the value chain analysis involves power mapping. This is gender and inclusion sensitive. The approach encourages linking producers to the power of other actors as a route to change. A key challenge in PMSD is the extent to which a focus on producers is potentially exclusive in some countries, where the marginalised are landless or have very low productive resources.

2.1.4 Christian Aid support

The type of support which partners and Christian Aid staff receive influences how they understand power.

The power concepts were introduced to staff through a series of training and workshops in 2011 and 2012, in preparation for country strategic planning. This training kick-started an understanding of theory. Many informants acknowledged the training quality, but found it complex and theoretical. Country level strategic planning was the first exposure to power mapping.

Moving onto programme design with partners required Christian Aid staff to help translate the concept to partners initially through local training. Absorption depended on partner experience. For example, partners familiar with stakeholder analysis recognised the power mapping process and questions, while appreciating that the power matrix was a deeper and more systematic analysis. Some partners mention “adapting” their own tools to include additional dimensions. For partners and project staff less familiar with these planning tools it was more challenging to absorb.

Project staff in both Christian Aid and partners needed additional support to apply new tools and new analysis. Countries with existing “governance” programmes, which had benefitted from the first initiative to strengthen the use of power analysis were better able to do this locally. In-country resource people trained partners and supported field work. This was helpful in Kenya and Nigeria. In countries with a different programme history, Christian Aid and partners were often learning by doing together.

A similar pattern is noted in the roll out of PVCA as a key process to empower communities. In countries with a track record of using participatory project tools, it was significantly easier for them to adopt and

adapt PVCA methods. For example, for the Philippines and Bolivia the country teams were in a stronger position to support partners. Where there was limited in-country experience, different tactics were required; in DRC the team were supported by staff from Burkina Faso that had been involved in the PVCA pilots. In some countries PVCAs involved external consultants.

The key message is that 'hands-on' local support based on practical experience was an important influence on partner adoption and practice. This fits well with the collective power to do things differently and Christian Aid commitment to increasing decentralisation and reducing carbon footprint.

2.1.5 Christian Aid added value

Identifying and remembering the different types of support provided by Christian Aid is quite hard with hindsight. People are more likely to remember events such as training, than informal conversations.

- **Conceptualising and Framing**

Frameworks are an essential tool in large global organisations. It is assumed that Gender, Inclusion and Power analysis are expected to infiltrate all work and be driven out through the frameworks. However, in most visualisations power, gender and inclusion appear in a horizontal relationship alongside other principles and frameworks. More explicit signposting to power analysis in all frameworks would be helpful. Stronger ownership and understanding of sometimes hidden or implicit logic is evident amongst in staff who participates in framing processes.

Partner understanding of power is reinforced when they position their work in the frameworks. This is easier in the health portfolio. Partners identify their work in the dimensions of change and are aware of other partners in the same or other dimensions. Partners and staff initially worked in "sector silos" with separate own theories of change for livelihoods or DRR or health or market. These sector frameworks are now under the umbrella of the new Resilience framework. This should allow for linkages between the different entry points to be identified more clearly. This already happens to some extent where partners are in same geographic areas with different interventions.

The visualisation and narrative in the 2016 Resilience Framework should help to increase this understanding.

Increased knowledge and new skills

Christian Aid training in Power, HAP and PVCA have all contributed to strengthen partners' use of participatory methods and power analysis.

Over and above these events partners appreciate Christian Aid staff willingness to accompany them in the field. This is not always demand driven, but CO staff is recognised as being responsive and flexible in response to partners practical support needs.

Helping partners develop skills in practice, through the experience of using analytical and participatory process methods was largely left to country staff, all with different range of experience and skills. More practical guidance on "how to" might have helped those new to participatory methods. A key quality of the HAP training is that it is practical and clear on levels of operationalisation. Christian Aid needs to find a suitable cultural approach which provides guidance and empowers partners.

An interesting and less direct route to institutionalising capacity is through informing other key actors. The Philippines programme promoted the use of participatory risk analysis in a leaflet on the new DRRM law which was shared with local government. This had the dual purpose of informing and lobbying.

Power in Practice

Adoption and adaptation

In general, organisational materials are quite light on “practical guidance” or “how to” notes. As such local and regional Christian Aid staff did it themselves. Translating concepts and frameworks into practice would have benefitted from more explicit guidance on what types of power shifts are implicit in the different frameworks and at what levels (household, community, government). Accompanying guidance on the types of processes or participatory tools that partners could use to facilitate these changes could be beneficial.

Accompaniment

Partner project staff mentioned accompaniment by Christian Aid staff as useful to embed learning into practice. In some countries staff directly supported community PVCAs. Staff monitoring visits are now more frequent and Christian Aid staff are more likely to be involved in formal project monitoring including outcome assessments. As the PPA is reporting on partner results at outcome level this is not surprising.

Reflection and learning

Sharing experience and learning between staff and between partners is rated highly. Underpinning this and key to practice is knowledge building through practical field work and reflective learning review. This is the same for staff and partners.

For example, during the recent Health learning visit in Kenya Christian Aid staff shared learning and carried out a body mapping exercise in the community.

Partners value the joint programme review meetings as a peer to peer learning opportunity. In a *safe* non-judgemental space partners learn from successes and failures, and influence practice. This is a critical addition to the more normative results reporting which tends to focus on success. The Philippines programme has used this approach to good effect. During learning circles partners exchange learning from their projects which can be applied more widely by other partners or used to underpin shared advocacy with local, regional or national government.

The role of Christian Aid staff in upping the level of analysis through asking more penetrating questions of partners, is helpful and increases partners own analysis and ultimately analytical skills.

PPA’s significant investment in project M&E has, in the view of some partners, helped them be more reflective and re-visit power analysis. Across the board more data is collected. Applying a power lens and strong methods should mean that this is from multiple sources and includes multiple voices. This process is not always visible in outcome assessment reports that focus more on quantitative evidence. Although outcome assessments use both quantitative and qualitative methods, it would help if the quantitative data was done prior to qualitative work so that community focus groups could discuss and explain the reasons behind the “hard” data. Empowering communities to reflect on reasons behind

changes is an important part of building their capacity. Critical analysis of what the data actually means for the changes in power relationships is less reported.

2.1.6 Changing roles of partners in programmes

As a consequence of PVCA community based planning; a common refrain is that communities are in the driving seat. By implication the partners are driving less and see themselves more as facilitators of change.

Significant changes in project approaches include inter alia:

- More attention to group and community organising. This may not be completely new but the emphasis on improving local capacity 'to do' by strengthening links to other stakeholders is different from forming groups for the purposes of partner delivery of interventions.
- Facilitating and encouraging communities to engage directly with local authorities. In some instances, this means partners are standing back from representing the community.

Other changes for partners:

Partners power with: partners are more networked to other partners, to other NGOs and to other actors.

A significant change for partners is that they feel more part of a Christian Aid programme and in some areas work alongside other partners more collaboratively. It is not clear how far these collaborative relationships at the frontline of delivery translate into closer links between the partner leadership. A logical extension is that such frontline collaboration could lead to partnerships between partners or shared strategic planning but this is not reported.

In some cases, Christian Aid has developed MOUs with other INGOs who now work with partners to address needs identified by communities. In Nigeria, INGOs are part of the response to a broader range of health related issues such as: access to water and family planning services which are beyond the scope and resources of the Christian Aid partner. In this instance it appears that Christian Aid is working on improving supply indirectly, and not fully relying on the response of local government to community demands. These relationships are described as partnerships although they are not the same as partnerships with local CSOs.

The technical nature of some of the DRR work finds partners working with scientific institutions (e.g. on flood and weather patterns) or working directly with higher level government departments that are in a position to address issues more broadly.

In IMD the assumption is that power relationships between different actors on the value chain change to benefit the small-scale producers. Partners are strengthening farmer cooperatives and preparing them to engage with other value chain actors. Christian Aid convenes the different stakeholders. In the longer term developing CSO convening capacity is more coherent with Christian Aid's aim of empowering and strengthening civil society.

In other areas of work partners focus on policy and system change through civil society platforms and coalitions, for example:

- Participation in TWG on policy development (Philippines on DRR mechanism)
- PWHIV coalitions lobbying for policy change (e.g. anti-discrimination policies in Nigeria).

It is not always clear from reports whether such initiatives are undertaken by partner staff or whether the partner leadership leads on taking issues from the projects to a higher level. The involvement of leadership would indicate that partners recognise and use power within their organisations and that changing power relationships is not merely a project activity but also relevant to the whole organisation.

In organisations which are development arms of the Church, the involvement of Church leadership is less reported. There are examples of successful faith leadership, in particular amongst the networks of religious leaders living with or personally affected by AIDS in various countries (Burundi, Kenya, Malawi, Rwanda, Sierra Leone and Zimbabwe).

A deeper piece of research would be required to understand the reasons behind the relative invisibility of Church leaders in support of social and economic justice advocacy. This review was not able to establish if Church leaders are unwilling to engage with “politics” or whether such activities are seen as project work. In policy and advocacy work there is a range of expectation amongst partners about the role of Christian Aid. In some cases, they are together on advocacy platforms. In others local organisations are working with other CSOs. Using power analysis, partners sometimes say it would be a boost if Christian Aid was also involved in advocacy work, as without this involvement partners consider themselves to have less clout. (<http://nigeriahealthwatch.com/making-our-voices-count-active-citizenship-for-health/>).

2.2 How is power been integrated in resilience programmes?

In the last 5 years Christian Aid has been promoting the use of tools and frameworks to encourage more power sensitive programming.

Christian Aid developed a new organisational strategy in 2012 which put changing power relationships at the centre of its work. All Christian Aid countries conducted a strategic review to increase their alignment with the new “Partnership for Change” strategy. This included a power sensitive context analysis. Some countries used this new analysis to realign existing programmes to the new strategy and others developed new programmes and identified new partners.

Prior to this in 2011, Participatory Vulnerability and Capacity Assessments (PVCA) were used or adapted as a method for project identification and community empowerment in livelihoods programmes funded by both CHASE and General PPA.

Following the development of an integrated Community Health and HIV framework, a similar process of refining programme interventions with a power sensitive lens was undertaken in 6 countries from 2013.

Christian Aid’s approach to inclusive market development was piloted in two countries during 2011-2012 followed by a global roll-out in 2012-2014 in collaboration with Practical Action using the Participatory Market SD method.

Livelihoods portfolio: Use and Development of PVCA

In the CHASE PPA, partners facilitated PVCAs to support disaster affected communities to move along the humanitarian emergency recovery continuum with a focus on DRR in 7 countries. Under the General PPA 11 countries have designed resilient livelihoods programmes.

The process and product of PVCAs are expected to empower communities.

The CHASE partners initially used PVCA as a process to identify disaster risk reduction (DDR) interventions in communities recovering from recent shocks. DRR is understood to create a bridge from emergency recovery interventions to resilient livelihoods. For partners the innovation focuses on different types of risks and less mention is made about different types of vulnerability and capacity. Initially risks identified were mainly natural rather than “man-made”. In this context, there was a tendency for technical programme responses: building better flood defences; improving community Early Warning Systems and better access to information. Reducing risk was expected to benefit “a marginalised community”. The unit of analysis was community. How risks affected different groups, by age, gender, wealth, or ability, was largely undifferentiated.

This review found a wide range of experience, some partners taking PVCA as a technical research exercise rather than a community empowerment process. For example, one of the Philippine partners spent 3 months on their first PVCA. The majority of partners spend 3-5 days in the communities. Partners were often conducting the assessment in their “communities”. This is likely to have involved groups already known to the partners. Exceptionally, some countries took this as an opportunity to change programme geography, and to identify new partners and new communities. Bolivia, for example, moved to new areas and added new partners.

PVCA and Power Analysis

The application of power analysis in PVCA is dependent on partner approaches, understanding and facilitation skills. Partners more familiar with participatory approaches were able to adapt the analytical tools into their own approaches. For some partners and communities, a significant and “powerful” outcome of the process was having a written plan that could be used as tool for negotiation with local authorities.

The methods used in this review (desk and interview based) could not establish the extent to which PVCAs were inclusive in process and outcomes. It is well acknowledged that participation is not power neutral, marginalised members of a community are less likely to participate in public gatherings. Addressing this potential exclusion requires significant understanding of the community and multiple groups and sites for meetings and discussion.

Christian Aid was instrumental in the provision of training in both power analysis and the use of PVCAs by partners. In many cases Christian Aid staff and partners were “learning by doing” together. Partners with experience in participatory methods found added value in power mapping, body mapping and power matrix. The follow up interventions focused on reducing risk and improving livelihoods through: increased community organisation around common goals, mobilizing local resources and developing relationships with other stakeholders from government, NGOs and in some cases the private sector. Interventions tended to focus on increasing community collective power: working together to improve resource use and access new resources. This includes increasing awareness of entitlements such as health or vet services. Partners support the creation and organisation of groups, some of which include

women. A gender analysis of roles and responsibilities in relation to groups and volunteering is not clearly documented. This suggests that inclusion is more about balancing participation and contribution, and not transformation of gender relations.

The PVCA unit of analysis is the “community”, although the process gathers perceptions of livelihood risks from different groups and sub-groups. Building consensus around a plan may mean that initially marginal views are eclipsed in the need to work on common ground. The evidence suggests that the link between community groups and other stakeholders is mainly focused on the visible edifices of power, such as local government offices, with less attention to using the power of elected officials or the potential influence of other actors such as faith leadership.

In very general terms these first set of PVCAs paid less attention to the invisible or hidden power and household power dynamics.

During the 2 year PPA extension (2014 – 16), PVCA use has continued to evolve. With increased distance from “disasters” communities and partners started to recognise a wider “risk set” and as a result different interventions exist some of which address risks perceived by different parts of the community. For example: increasing women’s access and control of small livestock in Ethiopian communities.

The CHASE PPA reports reveal that in 3 countries PVCAs were repeated in 30 communities and this along with focus group discussions during monitoring, contribute to changes in response.

Revisiting the PVCA in Northern Kenya resulted in “new” risks being identified. In response partners have started to work with communities on reducing harmful social practices. Correspondingly, in Kenya community monitoring tools revealed how men and women assessed the value of the project differently. Women identified increased access to cash through Village Savings and Loans (VSL) groups as an important contribution to managing and reducing risks, whereas men prioritised infrastructure for water for cattle. In response the partner is supporting more VSL groups.

Gender based violence and other harmful social norms are receiving more attention although the responses are not always risk neutral for women. For example, in Ethiopia, community elders passed a by-law banning harmful social practices in public. The potential that this increased risks for women and girls as practice of early marriage or FGM become hidden from public view was not fully analysed. Similarly, the potential risk to women and girls trying to enforce the by-law in private spaces should be considered.

CHH is the entry point for health work, it was jointly developed by health staff in 2013, and has driven more integrated, holistic and rights based health programmes across dimensions of change:

- More explicit emphasis on changes in social norms, behaviours;
- Promoting equitable institutions, through social accountability and rights based approaches.
- Increasing demand and access to service across a wider range of health risks;

The programmes undertook a broader and deeper analysis of barriers influencing health amongst poor and marginalised people. A dialogue with key stakeholders on barriers to better health is the entry point. The barriers span households, community and policies. A focus on addressing or overcoming barriers has led to interventions specifically addressing and changes in power relationships. The influence of household power dynamics and gender on health seeking behaviours is visible in these initiatives. It

allowed institutional and systems analysis leading to more governance-facing actions to tackle institutions, in particular discrimination against PWHIV (health systems and traditional, religious leaders).

The CHH framework is widely adopted and resulted in different types of mutually reinforcing activities by partners including more advocacy, policy engagement, community driven social accountability and voice interventions as well as a wider range of health issues being tackled (Maternal Child Health, and Sexual Reproductive Health and malaria). The CHH framework enabled some service delivery interventions to continue, with a more systemic change intention, albeit often local. In Nigeria, using a “fruit bowl” approach to health risks and services, Christian Aid established MOUs with other INGOs to support broader public health issues: access to water with WaterAid, family planning with Marie Stopes and Bed net supplies with various agencies. In Kenya and Nigeria support from Christian Aid governance staff has helped both health and livelihood staff to look at the landscape differently using a political economy analysis, which helps to identify governance related issues. The long standing work on anti-discriminatory work by PWHIV across Africa provided a foundation for challenging policies and structures.

The PWHIV network in Nigeria advocates for non-discriminatory legislation. This is evidence of partners negotiating with power at different levels. The fact that membership of such groups is likely to include some influential participants, including in some cases religious leaders affected or living with HIV, underpins a confidence to tackle power at different levels.

The CHH framework identifies dimensions of change where interventions can make a difference to health outcomes rather than prescribing a method for analysis such as the PVCA.

Units of Analysis and focus of change

The units of analysis in resilience work and CHH were different at the outset. PVCA focused on the community risks and capacity. The CHH considers barriers (risks) in three dimensions: household, community and policy. The resilience work focused more at community level to organise self-managed projects and to relate to local service provision in local government.

These different ways of looking at the systems influenced the type of interventions and synergies between interventions. The livelihoods portfolio of work could benefit from learning from the health portfolio on the importance of changing household power dynamics as a foundation for social change. Where Christian Aid was working with the same partners in the same geographies more concrete guidance on the design of different power sensitive interventions could have helped to initiate change.

There is increasing awareness amongst Christian Aid staff that systems for monitoring, which have been improved under the PPA, focus heavily on quantitative data and insufficient attention is given to what the numbers really mean in terms of changes in power. Partner project staff increasingly recognises the power of numbers and feel more confident in their narratives about change (by numbers) and there is wide variety in capacity to reflect on whether power is really changing.

Christian Aid staff has different capacity (time and knowledge) to support a more critical analysis from a power perspective. Kenya programme staff considers power when reviewing the Theory of Change assumptions, especially when the expected results are not happening. This has led to Christian Aid staff reflecting on how best to tackle the “weak power” in the newly decentralised local councils. The more common experience is that in the context of PPAs, the pressure on collecting and aggregating numbers

has to differing degrees, driven out the space for the analysis of results in terms of power. Partners in Philippines commented that the Christian Aid senior staff was good at challenging and questioning actual outcomes and changes from a power perspective which helped them improve their own analysis.

2.3 How have power relationships changed?

Across Christian Aid programmes, relationships between individuals and between community groups and other actors are changing. These changes show that power relationships are dynamic. It is more difficult to establish whether these changes are transformational, for example, in changing household decision-making or changing how government officers perceive the role and legitimacy of community and civil society voices. Assessing whether reported changes are transformational is challenging for various reasons:

Timing: A 5-year time span within the PPA, is probably too short to show the level of institutionalised or sustained behaviour changes which underpin the changes in power structures and relationships.

Evidence from programmes is limited by the extent to which such changes are recorded and reported. PPA reporting has constantly evolved and as such it is difficult to track changes overtime. Some programme outcomes assess changes in household decision making but changes in government/community relationships are less clearly reported. Partners report on changes related to their inputs. As one commentator noted, partners and Christian Aid tend to report on investment related changes. If changes are happening in the community without investment this is not always recorded. It is not uncommon for people to show their knowledge has increased in terms of the “right answers” to safe practice but this is often undermined by data showing increases in STIs and differences in responses from men and women.

Understanding Transformation: Power documents do not specify what transformed relationships at different levels might look like¹. Behaviour change methodologies and questions about safe practices are used in health interventions, but partners do not seem to have methods and tools for assessing and describing transformation.

Despite these challenges, programmes do report on changes in power relations in some areas:

Individual and household relationships.

The Community Health and HIV portfolio is more likely to report youth and women having increased ‘power within’ and ‘personal power’ in behaviour change in sexual relationships. As stated above in challenges, it is not always clear if this is an indicator of better knowledge or actual change in practice.

A change to health seeking behaviour indicates empowerment of both men and women. The CHH portfolio focuses on this in relation to household discussions and shared decisions and changing harmful social practices. There are specific interventions which aim to “empower” men to behave differently. In Malawi, one partner works with men to encourage them to access health services and change their role in the household, for example more involvement in parenting. A similar approach is used in Kenya. Recent results show that in one of the three sites men were more involved in domestic responsibilities. Two interesting contingencies prevail – “in Machakos it happens when women are sick, travelling or

¹ This may be included in the training sessions but is not in the Power briefs

committed” or may require an up-grade of the task – fetching water by bike or donkey. These changes have some significance but appear to be more practical than transformational.

The more holistic approach has meant that in some programmes women engaged in health related group activities are also organising VSL groups. In this context access and control of cash underpins women’s empowerment and decision making. If necessary, women can borrow money from the group for hospital visits or transport. Whether this changes the household discussion or simply makes women more unilaterally powerful is not fully explored.

Power with:

In health and livelihoods work, individuals in groups gain confidence to move into spaces which may have traditionally been understood as closed or inaccessible. There is a common trend across the portfolio for women to be more visible in community committees and in many cases are reported to be leading on community initiatives (particularly in volunteering roles). Women are reported to be more active in public dialogue limited consideration of their influence on decisions. Nor do reports explore whether women empowered to participate in public spaces are able to translate this into changes at home. Whether any of these “transactions” add up to transforming gender relationships is largely not addressed.

Health Committees (generally mixed) are encouraged to take up local service provision issues with providers. The extent to which these committees influence the providers etc. is varied. Health centre staff often lack the power to make changes. The establishment of a dialogue is evidence that community members feel empowered. The 2016 Kenya report showed that Health Facility Management Committees (HFCM) is more likely to discuss complaints from the community and health facility planning. They are much less likely to address health centre budgeting or staffing despite obvious links. The question of whether “power with” could combine the power of community committees and the local health staff to make their voices heard at different government level or in community meetings seems to be relatively unexplored.

Formalising the “power” of community structures through registration or policy recognition is a step towards increasing and broadening potential influence. It is an opening for changing the ways in which government relates to community groups and opens doors to other groups.

Resilient livelihoods, DRR and inclusive market work tends to focus on building **collective power to do things for themselves and to negotiate with others**. The PVCA process mobilises community groups and the action plan can be used as a negotiating tool with other actors. In India there is some evidence that communities are savvy about an action plans “pulling power” and link their “priorities” to those known to exist in government plans. While this is more likely to illicit positive responses, it does beg the question about whose priorities count. In the Philippines interestingly anti-mining protest groups have found that instead of protesting, the community action plan gave them a more structured argument about the relationship between risk and deforestation and mining.

Inclusive Market Development is a relatively new way of working in Christian Aid. The focus is on changing relationships between all actors in the product value chain from producers to exporters and retailers. To improved livelihoods for 4000 pigeon pea farmers is the focus of IMD work in Malawi. A lesson learning document indicates that to maximise the voices of smallholder farmers in the PMSD process, it was more effective to work with farmers who are “already organised into established market

groups (such as the National Smallholder Farmers' Association of Malawi)". Although women producers are a target for this work there is no mention of the membership base of such associations.

The most recent training materials on power analysis do include a section on the types of questions which should be asked to interrogate how and why power relationships are changing. This is new and such analysis is not generally visible in reports. It is particularly absent from the PPA reporting and so it is challenging to aggregate the portfolio in a meaningful way.

Changes in power relationships are not easily assessed and there appears to be limited guidance from Christian Aid on what progressive and non-linear change might look like as individuals and group relationships with power holders are transformed. The new gender strategy mentions transforming relationships and sets indicators for this. The "power portfolio" would benefit from the more guidance on what transformation means and how this could be measured.

2.4 What has changed as a result of integrating power analysis?

2.4.1 On programme strategy, partnership portfolio and accountability

Partnership for Change and country programme strategies:

The global Partnership for Change strategy published in 2012 meant that all COs conducted a review of programmes, and contextual analysis. Christian Aid staff was trained in power mapping and analysis as part of this process.

Some countries seized this opportunity to revisit areas of intervention and partners; others worked with their existing partners and geographies as the starting point and revisited their interventions and approaches. Prior to this and during this time the resilient livelihoods framework and PVCAs were being used. It is difficult to establish respective contributions of these different yet complementary drivers of change however the emerging programme strategies reflect changes promoted by all.

The most visible shifts in programme strategies throughout the period of the PPA are:

- A focus on empowering communities to make their voices heard beyond the community;
- The inclusion of more governance oriented work, budget monitoring and other social accountability tools such as scorecards, health committees etc monitoring service quality most visible in health.
- Changing social norms, which had been integral to HIV interventions being more explicitly, included in resilient livelihoods interventions.
- Linking partners to other actors to help them achieve their goals, such as CSO coalitions and networks.
- Humanitarian responses being followed through with on-going support through community risk reduction work, including technical interventions;
- Partners being linked to other "funding sources" (this many have less to do with power analysis).
- Introduction of PMSD as a tool for developing inclusive markets and improving livelihoods;

In summary it appears that this re-strategizing helped Christian Aid shift their partnerships in the direction of change and become more outward facing.

Occasionally strategic intent was limited by funding. For example, following the typhoon in Philippines, although the programme and communities were ready for recovery and DRR type activities, the main funds available were for emergency relief and not easily used to fund DRR work.

Partner portfolio in resilient livelihoods

Christian Aid is recognised for its long term approach to working with partners. Exiting partners is a sensitive area. As resilient livelihood and CHH programmes developed, some new partners were identified to fill gaps in programme responses. As the organisation shifted to a stronger results focus and the necessary involvement in partner programmes, some more traditional partners, used to light touch support to strategies and organisational development were less able or willing to adjust. Some partners were dropped after formal programme reviews.

A noticeable trend is Christian Aid developing relationships with other INGOs to help deliver programme interventions particularly in IMD and Health. In IMD the value chain approach to stakeholder involves Christian Aid brokering relationships between civil society and non-civil society actors. Christian Aid collaborates with Practical Action as the developer of the PMSD method. In Bolivia and Malawi Christian Aid partners with INGOs (Practical Action and ICCO) with more experience in market oriented work. National CSOs partners tend to be responsible for organizing and formalizing community. In Bolivia the relationship with Practical Action started in DRR work and as a new partner they adopted the PVCA approach. The work in inclusive markets is taking Christian Aid into new terrain and new relationships. The scope of these relationships is not always clear. For example, in Kenya Christian Aid is supporting institutional development of the Honey Council as a critical stakeholder in the value chain. Capacity building is one of Christian Aid core offers to civil society partners. It is not clear to the reviewer if the Honey Council is interpreted as a civil society actor but it is assumed that this is programmatic arrangement with a clear exit strategy.

In health the strategic change from a focus on service provision to the CHH framework has meant Christian Aid works with new partners in particular, to address health governance issues. It is not always clear if these “new” partners are new to the PPA or new to Christian Aid. Nigeria made a call for new partners to increase health governance capacity but it is not clear if similar efforts were made in other countries. Many of the traditional service delivery partners are adjusting to using rights based approaches.

Changes in partnerships in resilient livelihoods and DRR were less common at the outset, however there are examples where in reviews of risks and vulnerabilities the need for certain skill sets, not found in the existing partner cohort meant that Christian Aid identified new organisations to complement the on-going work. In Kenya the work with pastoralists to reduce the risk of conflict required a partner with more specialized peace-building skills. More generally existing livelihoods partners, have adapted their interventions as a results risk and vulnerability analysis, with much stronger focus on supporting the development of community structures.

ICH staff refers to internal research showing a drop in numbers of partners. This change is less noted by COs, although there is occasional reference to “inactive” partners. Some partners were dropped due to budget cut-backs and some remain in the portfolio as un-funded partners. The evidence from Haiti is that it is challenging to engage with these partners on new ways of working even though they may benefit from training in power analysis etc. These partners are less likely to be fully engaged in current programmes, so the extent to which Christian Aid accompanies their work and helps them embed learning is limited.

A Christian Aid commissioned study Value for People (Elbers et al. 2015) found Christian Aid collaborating with new actors from government and private sector. The report recommends the need to clarify different types of relationships using of a continuum from transactional (exchange of mutual benefit) to transformational (a willingness to influence each other). This avoids the potential ambiguity of using partnership for all types of collaboration. Clarity about the intent of any relationship can be

used to define the type of support Christian Aid will provide. This is most relevant in the IMD work where the Christian Aid is working across a product sector with a variety of actors as in the case of the Kenya Honey Council above. Clarifying the nature of the relationship is important to defining Christian Aid's level of commitment to the Council and its development.

The overall picture is one of a relatively stable set of partners, which suggests that most partners were willing to adjust their project approaches. The main exception is in IMD and Christian Aid needs to clarify its level of engagement with different actors.

Changes in Accountability

This question relates to the extent to which different actors in the project delivery chain are accountable to each other. Christian Aid is certified under the Core Humanitarian Standard (CHS) and was previously under applied through the Humanitarian Accountability Principles (HAP).

Commitment four of the Core Humanitarian Standard (CHS), broadly reflect HAP principles.

“Communities and people affected by crisis know their rights and entitlements have access to information and participate in decisions that affect them.

Quality criterion: Humanitarian response is based on communication, participation and feedback.

PVCA methodology incorporates the principles of participation; information sharing and community feedback mechanisms which suggest similar accountability should be visible in throughout the resilient livelihoods portfolio.

The 2013-14 PPA reports include a discussion of accountability between partners and communities. The PVCA roll-out supported the adoption of beneficiary involvement in planning and M&E, transparency, information sharing and in some cases this includes community feedback and complaint mechanisms. In the General PPA the use of PVCAs in livelihoods work and the involvement of duty bearers in the community planning sessions is understood as a foundation for increased accountability between duty bearers and communities.

Following revisions to the PPA log frames, changes in accountability between partners and communities is not included in 2014-15 reports.

Participation

During the PVCA process communities are having a say. The degree and quality of participation and extent to which different views are taken into account is probably as variable as each PVCA. The community plan has potential to encourage intra-community accountability and with government officers. The 2014-15 General PPA report indicates that 30 communities had revisited the PVCAs and more reviews are planned during the 2016 9-month extension. It is intended to increase gender and power sensitivity as well as embedding the process more thoroughly in partners and communities.

Information Sharing

Partners feel that sharing information with the community, in particular about resources available is helpful. In some cases, communities mobilise their own resources. Clearly this is not feasible in all communities and begs the question about who benefits from community provided resources.

In DRC the partner in Kivu has handed over the budget to the community to manage. This goes beyond information sharing but is seen by the partner as increasing community empowerment to manage their own projects. The NGO has been criticized by local government and other NGOs as it is creating a new standard for transparency not necessarily welcomed by other actors.

In general community feedback and complaints mechanisms are more challenging to establish and are not well used by communities. The numbers of complaints are low and responses are not well recorded. If this means there was no response, this is a clear disincentive to making a complaint.

Using feedback and complaints mechanisms is not power neutral. Making a complaint requires a degree of confidence and sense of entitlement that is not necessarily found in marginalised communities or individuals. Leaders can specifically discourage community complaints: “don’t bite the hand that feeds you”. The use of complaints systems is a proxy of empowerment in community members. Tackling a relatively soft and open target, can be a rehearsal for engaging other power holders. The recent CHASE PPA learning event discussed accountability and accountability mechanisms and agreed that partner accountability to community is a challenge and requires creative thinking on the part of communities and partners. Bolivian partners encourage community feedback in a different way. A 2-day learning and planning process, in one case, led to change in the product being developed via IMD.

An underlying assumption in the PVCA and HAP processes is that partners would become closer to the communities. In reality there are competing pressures on partners which affect accountability and specifically downward accountability. Accountability requires a clear definition of respective roles and responsibilities. Each party knowing what they are accountable for. Christian Aid vernacular, which uses “We” to talk about achievement of partners and Christian Aid can obscure who is accountable for what. This is flagged here simply as a reminder about the importance of clarity at this nexus.

Partners and staff mention that in the PPA projects Christian Aid and partners are working more closely. For some this goes beyond accompaniment and can extend to co-facilitation of PVCAs or community based work.

Expectation of more downward accountability must be balanced by the reality that the increased demands on results based reporting incentivizes partners to be more upwardly accountable. This is neither unique to Christian Aid nor a new issue but is something that Christian Aid can manage more consciously. One comment was that in the PPA Christian Aid asks more questions of partners and provides less funding: “We are slowly getting used to it.”

HAP and PVCAs have had most influence on participation and information sharing. A particularly useful element of HAP was the requirement to evidence accountability throughout the project cycle. This evidence can be used by Christian Aid to focus attention on the parts that don’t work.

Overall the General PPA results framework and reporting focus more on outputs of processes than the quality of processes themselves. The quality of processes is more likely to be explored in impact assessments, such as the one carried out in the Philippines. These more detailed examinations of who is participating, sharing information and holding partners to account are an opportunity for Christian Aid and partners to reflect of the quality of their processes. It is reasonable to assume that post PPA funding there will be new opportunities for attention to quality of participation and scope for more downward accountability.

2.4.2 Inclusiveness of approach

This is a big question and merits more attention than is feasible in this review which was not able to establish how different social groups are benefitting. Inclusion is critical to the “leave no one behind agenda” which will require more detailed reporting of different categories of beneficiaries. It is assumed that the new corporate gender strategy and the inclusive programming approach are both in

part a response to acknowledged weaknesses in the current practice. Participation is not power neutral and as such it is critical to know who gets involved in PVCA and whose views influence the final agenda.

Key findings are:

Country strategy planning and power mapping identified marginalization and the barriers to inclusion which allowed for targeting.

Initial PVCAs were not always power sensitive or inclusive. PVCA guidance on inclusion is quite light: “vulnerability and different experiences of this for specific groups” and recognition that capacity assessment may overlook the capacity of more marginalised groups.

Health partners with their tradition of supporting PLHIV have a better understanding of stigma, exclusion and barriers to inclusion. Improving services and empowering excluded or marginalized groups may in some circumstances increase access and benefits to the wider community.

PMSD purposefully targets non-traditional cash crops as well as products produced by marginalized groups in the communities. Despite this targeting it cannot be assumed that these producers are the poorest in the community, as in many countries the poorest do not have access to land. Likewise, there is an on-going risk that richer farmers will take advantage of the new market opportunities and dominate in producer /marketing associations.

Throughout the life of PPA, disaggregation of data by gender has increased significantly. This is the first step towards integrating a gender analysis but requires more questions about the types (by age, wealth, ethnicity etc) of women who benefit. Do the poorest women in the community join VSL groups or benefit from livelihood activities? Do women control the benefits?

Reporting through outcome assessments etc. collects data on women’s decision-making in household and community level, but it largely silent on what this means in regarding changes to gender relations.

IMD Interventions:

The “selection” of Brazil nuts traditionally harvested by the marginalised quilombola people in Brazil, helped to empower groups to protect their territory from mega projects, dams etc. as well as increasing income. Similarly, in Malawi selecting a non-main cash crop, pigeon peas, has the clear intention of benefitting women producers. The case study reports that 66% of the producers are women, which suggests that men are taking more interest in pigeon peas as the market improves. The Malawi study does not indicate the extent to which women are leading the producer / marketing groups. In both these examples it cannot be assumed that men and women are benefitting equally from increased incomes.

Health Interventions:

The engagement in anti-discriminatory policy by PWHIV networks in Nigeria is a good illustration of marginalised groups taking up issues together, based on a constituency built over years of work with community based groups (with and without Christian Aid) and an umbrella membership organisation willing to take things up at national level. A more challenging story emerges in the Kenya programme. Despite similar levels of stigma reducing interventions with PWHIV and communities, PWHIV felt more included in the community but still felt excluded and stigmatized in church activities.

These documented examples have limited discussion about power is used or could be better used to influence outcomes for marginalized groups. Understanding who benefits and how from non-discrimination policy will be a useful case study in future years.

Livelihoods Interventions:

A more challenging example from Ethiopia shows the importance of monitoring the changes as a result of interventions from the perspective of the marginalized groups. Two consecutive outcome assessments report on changes in harmful social practices (HSP), following their outlawing by village elders through local by-laws. The first year report states that as a result of new bylaws HSP no longer happens in the community. The following year's report notes that the bylaws have meant that alcohol sales are now hidden. This raises the further question: Have FGM and Early Marriage also "gone underground". Unfortunately this was left unexplored by the evaluator.

Improving Inclusion: Monitoring and Analysis

The monitoring of inclusion is generally weak. More emphasis on "who is included /excluded" in social, production and marketing groups and "who benefits" is required.

Christian Aid staff is conscious that data collection receives more attention than an analysis of what it means.

Analysis of results from gender and inclusion and power perspectives is required. The use of continuums to assess the extent to which work is changing power is required in addition to a data set which describes # of men or women doing x or y. If changes in power relations are expected to be inclusive, partners and Christian Aid staff need to visualize what this looks like.

It may be too big an ask for communities to describe what their community would look like if it was inclusive, but it could be a discussion with partners facilitated by Christian Aid.

Similar visualization of what transformed power relations at household, community and with other actors, would also help with creating a longer term vision of change against which progress outside log frame indicators would look like. This could be followed with an identification of evidence that will show progress. The guidance for country strategic reviews includes matrices for assessing change against different areas of power but this is not adopted in outcome assessment analysis.

For the "leave no one behind" agenda, partners and staff will need to collect more detailed data for this to be effectively evidenced. The emergence of digital data gathering as a tool will help with this. How the data is used by partners in their engagement with communities on differences in their community will matter more.

2.4.3 Changes in advocacy and policy work

The increase and visibility of advocacy and policy dialogue across the both the CHASE and General PPA is perhaps one of the significant impacts of the use of power, in particular power mapping, in the resilient livelihood portfolio. The PVCAs contribute to a recognition that government behaviours and structures need to change to support long term community development. Support from governance staff, learning from the GTF programme and advocacy training for partners have all contributed to the sea change in this area.

Advocacy is widely defined and ranges from community voice, lobbying of local authorities (sometimes using action plan as an advocacy tool) to national level engagement on policy development.

Almost all partners were able to provide an example of how they were trying to influence policy, through better implementation of existing policies and in some cases policy development. Some partners are facilitating community members to work with others to do the same. The CHH framework clearly puts holding institutions to account and changing institutions on the map in health interventions.

In IMD bringing together key stakeholders has the potential to influence the implementation of legislation or the creation of new regulations. The fact that farmer groups are involved in these discussions means they are better informed on where they can apply soft pressure. The integration of power mapping is important to these initiatives. DRR theories of change often include changes in policy as one of the key strategies.

The following examples of influencing work show the range and scale of the work.

Bolivia: The Ministry of Rural Development and Vice Ministry of Civil Defense have recognized the PVCA as a valuable tool to work on improving resilience in the 'hard to reach' forest communities that are often excluded in humanitarian responses. Practical Action has worked directly with the Ministries on a booklet for use with these vulnerable communities, and this has been funded by new major donors. A similar initiative is on-going in the Philippines.

Haiti: GARR (Le Group d'Appui aux Refugies et Rapatries) is working at in several different spaces to improve housing. Advocating for better regulation of construction (to reduce risks during hurricanes); supporting housing cooperatives to do the same with local government; planning to hold the Government of Haiti to account through a submission to the UN on the right to housing later this year.

Kenya: A Christian Aid partner worked with the Ministry of Health (MOH) on developing a new curriculum for training of Traditional Birth Attendants (TBAs) to encourage them to refer or accompany expectant mother to health facilities. A small cash incentive paid to TBAs is used to motivate this behaviour change. This partner is now lobbying the Ministry of Health to adopt this model across the country.

On the other hand, the expectation that new County structures would be an opening for communities to engage and influence local decision-making power has not fulfilled the initial promise. Although partners took advantage of the new space there is increasing recognition amongst Christian Aid staff at least, that local power to make decisions is compromised by hidden and higher level power.

Nigeria: Health partners are working with other NGOs on the state health budget review to increase transparency. Locally the Community Development Committees are engaging with health facilities to improve service provision. In the most recent election campaign communities recorded promises made by politicians to use these to hold elected officials to account on their promises.

Philippines: The recent impact assessment shows partners using their power to influence decision makers across different levels of government. Partners "knowledge power" about DRR is recognized by the government and provided an entry to the Technical Working Group on national DRR legislation. Participation and knowledge about the new policy further empowers partners to lobby for implementation of the policy. Locally communities are using their action plans to negotiate with local government.

All these efforts are impressive and indicate a step change in how organised communities and partners see themselves in relation to formal power. This is a potential route to scaling up impact and a potential contribution to VFM and sustainability.

There are two dimensions to assessing policy and advocacy work: measuring an increase in effort and effectiveness; the changes which result in benefits to marginalized groups. Although this is not the place

for a detailed discussion of the challenges of assessing advocacy and policy work it is important to acknowledge the limits of responsibility and scale of change when assessing success.

Achieving impact in advocacy takes time even when the work itself is well planned and implemented. Power analysis may help to improve planning and implementation but will not always affect the outcomes.

Clarity on the expected change is significant to Christian Aid which is looking for a change in power structures, systems and dynamics which create poverty. As communities advocate to duty bearers their primary interest is in a positive response. Responses do not automatically mean a systematic change and more thought about the power of partners and other actors to influence deeper change, and benefit more communities.

Both PPAs report numbers of cases of influence. The PPA reporting format does not lend itself to details of changes as a result however it would be a useful area for closer interrogation overtime.

For policy development, Transparency International uses a seven-point scale to assess outcomes in this area. No change, change in discourse, policy development, policy adoptions, implementation, enforcement, change in culture. This is not a linear process, as noted in the GTF P2P evaluation where successful policy changes reported by long term partners were later revoked by legislatures². The Transparency scale is used by some Christian Aid staff to measure and report on the levels of change achieved. Experienced advocacy partners are conscious of the different stages even if not using the scale. Not every piece of advocacy will be pursued through the whole cycle. Being clear about the intention and achievement would help staff and partners analyse where to measure change.

3 KEY LESSON FOR FUTURE PROGRAMMING

PPA funding is coming to an end. During the life of PPA Christian Aid's approach to working with partners has evolved. In many instances Christian Aid and partners are closer, working at the frontline together, joint monitoring and sharing platforms. Christian Aid recognises that this change has not always occurred in a power conscious way. The corporate work resulting from the Added Value partner research is only recently starting to shape a new strategic approach to working with partners with new procedures and formats for partner review.

The PPAs allowed Christian Aid to adopt new ways of working with partners in line with the Partnerships for Change which has changing power relations at its core. Power thinking in the Power to People programme was oriented to governance work, some of which related to livelihoods. In the absence of an overarching power analysis for livelihoods, different areas of work have adapted tools and methods in the different strands of livelihoods work. The lessons included are based on reflections from the findings above and are intended to help Christian Aid support partners to absorb and adapt in the future.

Concepts and Frameworks provide the backbone for programmes. In a context of increasing complexity and multiple frameworks, Christian Aid staff and partners would benefit from clearer guidance on how to apply power, gender and inclusion analysis within each area of work. This should start with a clear

² Ficha Limpa in Brazil focused on the need for MPs integrity to be a condition of admission to Parliament and in Uganda a change in taxation was also revoked.

conceptualisation in the framework and be visible throughout the project cycle in all interventions. The RF includes power, gender and inclusion as key principles. Shifting power relations is presented as an intervention alongside the others, whereas in reality, shifting power relations is part and parcel of the success across all programme interventions.

This should be more explicit. Signposting staff and partners to guidance and tools and processes which can be used for analysis, planning, monitoring and assessing change is critical.

The key lesson from this review is that CO staff and partners would benefit from **more concrete guidance on how to use power analysis throughout the project cycle, across and between resilience interventions.**

The most recent power briefing paper is a move in this direction but it would benefit from more cross referencing in the other frameworks. There is body of experience amongst country staff on how to use power with the framework and they should be involved in a process of review.

Changing power is long term aim whether the focus is on households, communities or systems and structures. The difference between practical and strategic changes used in gender and inclusion could be used to help create guidance on transformational change in power relationships. Partners and staff need a shared vision of what transformational change would look like to reduce the risk that interventions reinforce the status quo not change it.

Supporting partners in practice

- Developing guidance on 'how to' use power analysis throughout project cycles. Guidance on tools to use within project interventions would be a useful resource for partners. Those who need it will use it, those who know it already will be able to adapt the top level guidance.
- Key to effective use of new thinking and frameworks are analytical skills. These skills have to be nurtured and are best built through dialogue: 1:1 conversations and partner meetings which encourage on-going diagnosis and constructive reflection. For example: the processes used in the Philippines and other COs could be documented and shared across Christian Aid.
- As the PPA draws to a close, the resources available to support partners are likely to change. In preparation for this or for other multi-country programmes, Christian Aid could usefully undertake a systematic analysis of partner capacity in applying power analysis. This should assess project and organisational capacity. Organisational systems need to be aligned to inclusive and power transformative work. Christian Aid needs to engage with the whole organisation on what a changing power relationship means within the organisation as well as externally.
- Diagnosis of current strengths and weaknesses in programme practice is an entry point for responding to capacity development needs of individual and organisations. A more holistic analysis of what introducing power analysis in the field means for internal workings of partners and identify drivers, and barriers to change within partners, could link to strategic organisational strengthening initiatives to support new ways of working internally as well as externally. The

inclusion of Board and Church leadership in such a discussion would help to drive internal change and may encourage leaders to engage more with issues arising in the programmes.

This is important to sustaining changes as field /project staff are often more mobile than organisational leaders.

What does transformation look like?

Transformation of power relations is critical to the overall success of Partnerships for Change, however this is rarely mentioned.

Facilitating country level Christian Aid and partner discussion and visualisation of what transformation would look like across the different programme participant relationships would reinforce a shared vision of change.

Facilitating partners to do a visualisation of transformed power relations across their work. Partners could decide if this would be a helpful exercise with groups and communities.

This process could be used for an analysis of units of change and how to create synergies between interventions in household and community more effectively. This would also contribute to an appreciation of different methods and approaches for achieving change and reinforce partner collaboration at community level and open the door to more adaptive programming.

Monitoring and documenting change.

The demands of the PPA reporting increased quantitative reporting of successes. Space for analysis was crowded out by the championing of the results by numbers. **Support increased capacity to analyse what data really means.** The introduction of digital data gathering tools will produce more data. This is hopefully an efficiency gain for partners and Christian Aid. This should not overshadow the need to increase skills in analysing this data from the perspective of power, gender and inclusion. Christian Aid M&E staff need to focus on this.

PVCAs were never intended to be a one-off event. These are planned in the final extension period and offer partners and Christian Aid staff to identify core tools that should be used with communities and help them develop approaches that they feel able to use on a more regular basis.

Christian Aid needs to support staff and partners with language and tools to identify degrees of change in power relationships. The resilience portfolio team does not need to invent these. A review of tools being used in Resilience and other areas of work as well as those used by other organisations would be a useful starting point. For example, the CHH HIV includes behaviour change assessment tools. The Transparency continuum for tracking advocacy work is a useful starting point. Identifying existing tools for assessing changes en-route to transformation would be helpful for staff and partners. Outcome mapping processes could be useful, although it is beyond the scope of this review to “recommend” such a significant change to Christian Aid’s M&EL.

Develop **guidance and a checklist for use in country programmes** on asking the right questions in monitoring processes, focusing the discussion on changes in power rather than activities. This will help COs and **partners change the nature of the discussion** which can be transferred to community discussion.

Understanding why change happens or not: Using internal dialogue, learning and process documentation more effectively as an opportunity for exploring why change does and doesn't happen. One area for closer examination is how the PWHIV movements influence agendas and translates this to benefits for their constituency. Discussing "failure" is more likely to uncover how hidden power is influencing progress and could be used to change tactics and strategies.

There are good examples of country staff and partners **using reflective practice in joint review exercises** but these are not necessarily documented for sharing across the portfolio. As this practice is not mentioned by all COs it is assumed to be locally driven. The "safe space" processes used by Philippines CO to discuss challenges could be documented and shared.

Country **case studies could be commissioned and supported to examine success and failure to change power relations at different levels.** More detailed capturing of the non-linear nature and on on-going challenges would create a body of a body of knowledge about processes which support changes in power, gender and inclusion which could also be used in training materials. This may already be included in the final PPA extension but if not it could be included.

Clarity about roles and responsibilities.

CO staff is willing to support partners and their flexibility in this is appreciated by partners. There is a risk support becomes "doing with" and even "doing for" which muddies responsibility, accountability and at worst can lead to a dependency. This is particular relevant in relation to the IMD work where Christian Aid has defined a role for itself as a convenor. This approach must be used carefully in a context where Christian Aid's main purpose is strengthening civil society. Assessment suggested above provides an opportunity to clarify different roles and responsibilities.

Power to change programmes:

Many of the lessons above are about how Christian Aid and initially advisors in ICH could provide more detailed guidance to programme staff to support a more strategic approach to partner and programmes support. The role of CO staff in the development of the above and testing with partners is critical.

People Consulted: Christian Aid Staff (table 1) Partners (table 2)

Anugrah Abraham	Performance Advisor Asia and ME
Nicholas Abuya	Programme Officer Resilience Kenya
David Adam	Senior Programme Officer for PPA
Gerhard Buttner	Senior Programme Officer for PPA
Jim Cannon	Programme Advisor for Inclusive Markets
Samuel Cumpstey	Africa Divisional Manager and Programme Development
David Clark	Programme Performance Manager (Review Steering Committee)
Simone Di Vicenz	Resilience Advisor
Emma Donlan	Bolivia Country Representative
Charles Gay	Power Advisor
Olga Inyongo	Programme Advisor for Gender and Social Inclusion
Victoria Jean-Louis	Senior Programme Manager, Haiti
Emmanuel Kanike	PPA programme M&E Malawi
Josh Levine	Corporate Gender Champion
Caroline McCarthy	Performance Advisor for LAC
Josephine Matriano	Programme Manager Philippines
Tarasai Mubonderi	Senior Programme Officer PPA
Kate Newman	Inclusive Programmes (Review Steering Committee)
Eston Njuki	Programme Officer Resilience
Jimmy Obuya	Health programme officer Kenya
Nanlop Ogbureke	Programme Manager CHH Nigeria
Rachel Ndirangu	Performance Advisor for Community Health
Richard Ponsford	Programme Performance Advisor Large & Complex Programmes (Review Steering Committee)
Rebecca Sinclair	PPA Manger (Review Steering Committee)
Tekalign Kebede	Senior Programme Officer Ethiopia
Allan Vera	Programme Manager Philippines

Bolivia	Practical Action Bolivia	Victor Yapu and Monica
	CIPCA Beni	Fatima Zelada
DRC	Reseau Ressources Naturelles	
	Communaute Baptiste d’Afrique Centrale (CBCA)	
Ethiopia	HUNDEE	Hirko Belay
	AFD	Tesfaye Gesisa
Kenya	National Council of Churches in Kenya	Phyllis Kamau
	Anglican Development Service Eastern	John Mutua
Malawi	FOCUS	Kossam Munthali
	Adventist Health Services	Florence Chipungu & Simon
Nigeria	Anglican Diocese Development Service Benue State	Sita Kerchia
	KDDWS	Mercy Yahaya
Philippines	Alyansa Tigil Mina (ATM) Alliance Against Mining	Jaybee Garganera
	Mindanao Land Development Foundation (Minland)	Dam Vertido

