

**Evaluation of the Government of Pakistan-UNICEF
Advocacy and Social Mobilization Strategy
January 1999-June 2001**

Final Report

**United Nations Children's Fund
Pakistan**

February 2002

Acknowledgements

I wish to thank Ms Carroll Long, the Country Representative of UNICEF, for her support and guidance, and for her unwavering determination to see this extraordinary evaluation through. A special thanks to the members of the evaluation reference group, Ms Serap Maktav, Mr. Erasmus Morah, Dr. Thane-Oke Kyaw-Myint, Mr. Maurice Robson, Ms Raana Syed, Mr. George Sommerwill and Mr. Paul Lundberg. Their participation, guidance and insights helped to make this evaluation a valuable learning experience for all. Many thanks to Mr. Bijaya Rajbhandari for accommodating our interests in his evaluation of the UPE Sialkot Project. A special word of thanks to all the staff of the Planning, Monitoring and Evaluation Section. This evaluation would not have been possible without their assistance.

I would like to thank Messrs. Najamuddin Mangrio, M. Hassan Mangi, Dr. Rehan Hafiz and Abdul Sattar Chaudhry taking time from their busy schedules to share their knowledge and experience. I hope that this report adequately reflects their ideas and concerns.

I am indebted to my editor, William Litwack, who has corrected several drafts and made many improvements to the organization and presentation of this report.

I have drawn extensively from two studies that UNICEF commissioned as part of the evaluation. I wish to acknowledge their principal authors, Ms Simi Kamal of Raasta Development Consultants and Mr. Izhar Ahmad of the Organization and Management Development Center, Institute of Leadership and Management.

This evaluation has been a journey on which I was the guide. There were times when the guide was uncertain where the journey was heading, but in the end we have returned to where we began with fresh insights and deeper understanding. While many contributed to this report, I am responsible for its contents, including any errors and omissions.

J. Mark Stiles
Stiles Associates Inc
stiles@magma.ca

Contents

	<i>page</i>
1. Executive Summary	1
2. Introduction	6
2.1 Background to the Evaluation	6
2.2 Terms of Reference	7
2.3 Approach and Methodologies	7
2.3.1 Approach	7
2.3.2 Methodologies	7
2.3.3 Constraints	9
2.3.4 Organization of the report	10
2.4 Context of the Evaluation	10
3. Findings	12
3.1 Advocacy and Social Mobilization as Defined and Understood	12
3.1.1 Advocacy and social mobilization as defined and understood by the CP partners	12
3.1.2 Advocacy and social mobilization as conventionally defined	14
3.1.3 Advocacy and social mobilization from a rights-based perspective	15
3.2 Advocacy and Social Mobilization as Applied	16
3.2.1 General advocacy and social mobilization	17
3.2.2 Three advocacy and social mobilization models	17
3.2.3 Short- and long-term advocacy and social mobilization	21
3.2.4 Advocacy and social mobilization within campaigns	21
3.2.5 Participatory advocacy and social mobilization	22
3.2.6 List of advocacy and social mobilization interventions	23
3.2.7 Advocacy and social mobilization in relation to strategy	23
3.3 The Organization of Advocacy and Social Mobilization	24
3.3.1 Organizational structure and institutional capacity	24
3.3.2 Roles, responsibilities and support	25
3.4 Planning, Monitoring and Evaluating Advocacy and Social Mobilization	26
3.4.1 Participation and collaboration	26
3.4.2 Monitoring and evaluation systems	28
3.5 Expenditures on Advocacy and Social Mobilization	29
3.6 Effectiveness of Advocacy and Social Mobilization	31
4. Conclusions and Recommendations	33
References	37
Appendix A: Evaluation Questions	39
Appendix B: List of Key Documents Reviewed	42
Appendix C: Case Study of Advocacy and Social Mobilization in Relation to Polio Eradication and Vitamin A Supplementation	45
Appendix D: Case Study of Advocacy and Social Mobilization in Relation to the Girl Child Project	49
Appendix E: Case Study of Advocacy and Social Mobilization in Relation to the Universal Primary Education Project, Sialkot	52

Contents

	<i>page</i>
Figure 1: Development Communication Model	14
Figure 2: Direct Model	18
Figure 3: Intermediary Model	19
Figure 4: Rights-holder Model	20
Table 1: Time Frame for Advocacy and Social Mobilization	21
Table 2: Campaign-based Advocacy and Direct Lobbying Compared	22
Table 3: GOP-UNICEF Advocacy and Social Mobilization by Level of Beneficiary Participation	22
Table 4: Advocacy and Social Mobilization Interventions, CP (1999-2001)	23
Table 5: Perceptions of UNICEF's Programme Staff Regarding Collaboration	28
Table 6: Expenditures on Advocacy, Social Mobilization and Programme Communication, Pakistan Country Programme 1999-2000	30
Table 7: Expenditures on Advocacy, Social Mobilization and Programme Communication as a Percentage of Overall Expenditures on Programmes, 1999-2000	31

List of Acronyms and Abbreviations

ARI	Acute Respiratory Infections
CBO	Community-based organization
CEDAW	Convention on the Elimination of all forms of Discrimination Against Women
CIDA	Canadian International Development Agency
CP	GOP-UNICEF Country Programme of Cooperation
CRC	Convention on the Rights of the Child
EPI	Expanded Programme of Immunization
FPAP	Family Planning Association of Pakistan
GMC	Global Movement for Children
GOP	Government of Pakistan
IDD	Iodine Deficiency Disorders
KAP	Knowledge, attitudes and practices
OMDC	Organization and Management Development Center
MPO	Master Plan of Operations
MTR	Medium-Term Review
NGO	Non-governmental organization
NID	National Immunization Day
OMDC	Organization and Management Development Center
PEI	Polio Eradication Initiative
PME	Planning, Monitoring and Evaluation
PROMS	Programme Manager System
RBM	Results-based Management
SMC	School management committee
SWEET	Sanitation, Water, Environmental Education and Technology
UN	United Nations
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
UPE	Universal Primary Education
WHO	World Health Organization

1. Executive Summary

In March 2000, UNICEF Pakistan, in consultation with the Government of Pakistan (GOP) and UNICEF's Regional Office for South Asia, decided to undertake an in-depth evaluation of advocacy and social mobilization, one of three "fundamental strategies" of the GOP-UNICEF Country Programme of Cooperation (CP). The evaluation covers the period from January 1999 to June 2001, roughly the first half of the 1999-2003 CP. The purpose of the evaluation is "to help UNICEF and its partners learn from the past in order to plan and implement effective advocacy and social mobilization initiatives over the second half of the CP and beyond" (UNICEF 2001b, p. 1). The key evaluation questions appear in Appendix A. The evaluation followed a utilization-focused approach, as described in Section 2.3.

This report draws on two major studies that UNICEF commissioned for the evaluation¹, as well as several other assessments which provide useful data on advocacy and social mobilization in relation to specific projects and programmes. The author has synthesized data from these studies and many other sources in preparing this report.

Key Findings and Recommendations

1. *The evaluation has identified areas where advocacy and social mobilization have contributed to the achievement of project and programme objectives, but attribution difficulties and inadequate monitoring data make it impossible to determine the extent to which advocacy and social mobilization have affected macro-level trends and indicators.*

The case studies of the Girl Child Project and the UPE Sialkot Project (Appendix D and E) provide the clearest evidence of highly successful advocacy and social mobilization initiatives under the current CP. These major projects have been well planned and effectively implemented, largely with the assistance of NGO partners. Both serve as models and have clearly made significant contributions toward the achievement of the broad objectives in the current Master Plan of Operations (MPO). Furthermore, they provide UNICEF and its CP partners with a rich body of knowledge and experience with which to chart new programmes and projects in the future. Some evidence suggests that the GOP's increased attention to children and women and its emphasis on the girl child are a direct result of UNICEF's persistent advocacy work.

The results of advocacy and social mobilization in other areas of the CP are mixed. Most other successful examples of advocacy and social mobilization have been small-scale, well-planned initiatives that have included clear outcomes and monitoring procedures.

2. *Advocacy and social mobilization play a major, indispensable role in the CP. They take place at many different levels, within and outside of programmes, and with the involvement of many partners. Most advocacy and social mobilization initiatives under the CP are long-term and evolve over time.*

Advocacy and social mobilization are integral to all sector programmes within the current CP, and go hand-in-hand with programme communication. There are important non-programmatic applications of advocacy and social mobilization in support of the rights of children and women. This report refers to such applications as general advocacy and social mobilization. General

¹ They are: *Documentation of UNICEF's Advocacy and Social Mobilization Strategies and Survey of Stakeholders* (Raasta 2002) and *Evaluation and Documentation of Universal Primary Education Project Sialkot* (Organization and Management Development Center, 2002).

advocacy and social mobilization are led by the UNICEF Representative, other senior staff and the Chiefs of Programmes in UNICEF's provincial offices. Staff carry out much of this important work informally in their daily interactions.

3. *General advocacy and social mobilization wherein UNICEF staff promote respect for the rights of children and women is regarded as a key staff function. However, UNICEF has not given this function the attention that it deserves, considering that this is perhaps the most important way UNICEF communicates its core values.*

The roles and responsibilities of staff in relation to general advocacy and social mobilization are inadequately reflected in job descriptions and in personnel policies. This type of advocacy and social mobilization is generally not well planned and monitored. It is important that all staff members have an orientation to general advocacy and social mobilization. Some need training and communication support materials to perform this function well. Above all, staff need to be clear on what these terms mean and how they are to apply them.

Recommendation: UNICEF Pakistan should take steps to ensure that its personnel policies, planning and monitoring and evaluation systems better reflect the roles of staff members in relation to general advocacy and social mobilization, and that staff receive orientation, training and communication support materials where needed.

UNICEF and its partners need to do more to document non-programmatic and high-level programme advocacy and social mobilization. Missing are the details of tactics, methods and nuances in this often highly sensitive work. Institutional memory is lost without documentation, and this impedes learning over time.

Recommendation: UNICEF and its partners should document non-programmatic and high-level programme advocacy and social mobilization more systematically in order to track progress and capture important lessons.

4. *The CP partners apply advocacy and social mobilization according to three distinct models:*
 - a. *Under the **direct model** they advocate and mobilize individuals and groups directly on behalf of children and women.*
 - b. *Under the **intermediary model** they do the same through intermediaries.*
 - c. *Under the **rights-holder model** they empower children and women to advocate and mobilize on their own behalf in order to claim their rights from duty bearers.*

The rights-holder model fits best with a rights-based approach to programming. The Girl Child Project is a highly successful example of this approach. While all three approaches are needed during the remainder of the CP, the CP partners must increasingly make the rights-holder model their priority.

5. *Conventional definitions of advocacy and social mobilization, as understood by leading practitioners and theorists, are broad and complex. Since no two conventional definitions are the same and the definitions change over time, it follows that there is no overall, coherent concept of advocacy and social mobilization in the minds of the CP team and key stakeholders.*

Some UNICEF staff and many staff members among their partners are unclear about the meaning of advocacy and social mobilization. Lack of precision and inconsistency in the use of these

terms, particularly in planning documents, has contributed to this misunderstanding. Not all of UNICEF's programme staff link advocacy and social mobilization with the rights of children and women.

Most conventional definitions of advocacy and social mobilization inadequately reflect UNICEF's rights-based approach to programming. Advocacy, social mobilization and programme communication are applied much differently within a rights-based framework than in conventional approaches to communication. Rights-based advocacy and social mobilization strive to enable rights-holders to take greater control over their life situations while conventional approaches are often prescriptive and message-driven.

UNICEF and its partners increasingly, yet inconsistently, undertake advocacy and social mobilization within a rights-based framework. It is essential that UNICEF and its partners come to terms with this important issue since consistency is critical when an organization adopts a rights-based approach to programming.

Recommendations: The GOP and UNICEF should define advocacy and social mobilization and associated programme communication within a rights-based framework, and explain these terms clearly when they use them. The GOP and UNICEF should increasingly apply a rights-based approach in all advocacy, social mobilization and associated programme communication.

6. The scope of advocacy and social mobilization under the CP is vast. The evaluation shows the need for more intensive advocacy and social mobilization in priority areas, such as the Expanded Programme of Immunization (EPI), where progress toward the goals of the CP are lagging.

UNICEF and its partners may be trying to do too much and at too many levels, given that they are actively involved in some 40 programmes and issues where advocacy and social mobilization play a role.

Recommendation: The GOP and UNICEF should review the CP's advocacy and social mobilization initiatives with a view to a more sharply focused set of priorities over the next few years within the Medium-term Strategic Plan.

7. The GOP's institutional capacity for advocacy and social mobilization is not as strong as UNICEF's. UNICEF's capacity is largely centralized in Islamabad at a time when increased support for social programmes is needed at provincial and district levels.

Institutional capacity needs to be examined broadly, and in the context of the GOP's devolution process.

Recommendation: The GOP, UNICEF and their CP partners should commission a study on the future of communication support to Pakistan's social sectors with a view to developing sustainable institutional arrangements to support the GOP, where support is needed most over the long term.

UNICEF's provincial offices and their partners have expressed the need for more training in advocacy and social mobilization. The GOP's devolution process makes it imperative for UNICEF to do more to build the capacity of its provincial offices and their partners working at the district level and lower.

Recommendation: UNICEF should strengthen the capacity of its provincial offices and their programme partners in relation to advocacy, social mobilization and associated programme communication, and UNICEF should make the organizational changes necessary to sustain this capacity.

8. *The evaluation finds that beneficiary participation enhances the effectiveness of communication. The CP's advocacy and social mobilization initiatives under the rights-holder model feature high levels of beneficiary participation, but the GOP and UNICEF need to do more to increase the participation of beneficiaries in planning, monitoring and evaluation of advocacy and social mobilization.*

UNICEF could do more by example to encourage the GOP and other partners to adopt collaborative and participatory approaches to the planning, monitoring and evaluation of advocacy and social mobilization. The GOP-UNICEF Medium Term Review (MTR) clearly demonstrated the value of engaging district-level partners and beneficiaries, especially children, in a major review.

Recommendation: The GOP and UNICEF should give greater priority to collaborative and participatory planning, monitoring and evaluation of advocacy, social mobilization and associated programme communication initiatives.

9. *UNICEF and its CP partners have lost opportunities to learn from their advocacy and social mobilization initiatives owing to a weak monitoring system.*

The present monitoring system places too much emphasis on activities and too little on results. Neither programmatic nor general advocacy and social mobilization are adequately tracked and indicators are inconsistently gender- and rights-sensitive. Section 3.4.2 deals with these findings in detail.

Recommendation: The GOP and UNICEF should adopt a results-based management (RBM) system of performance measurement that is consistent with a rights-based approach to programming, and that reflects programme-wide priorities such as gender equality.

Findings and Recommendations of Three Case Studies

10. *In-depth analysis of three programme initiatives has found encouraging results, with room for improvement.*

Polio Eradication and Vitamin A Supplementation

The National Immunization Days (NID) campaigns have the basic ingredients for successful communication, but the programme has not achieved its coverage targets. The programme design for polio eradication with its door-to-door approach to service delivery has undermined community mobilization and diverted attention away from routine immunization. A recent GOP and donor-supported review made several practical suggestions for improving the effectiveness of communication in relation to the Expanded Programme of Immunization (EPI) and polio eradication.

Recommendations: The GOP, UNICEF and their partners should re-examine their EPI and NID strategies and redouble their communication efforts aimed at increasing routine immunization coverage. The GOP, UNICEF and their partners should follow up on the suggestions contained in the report of the PEI/EPI Communication Review. They should monitor the changes and adopt the innovations that prove successful.

UNICEF's intensive, low key advocacy initiative resulted in the GOP agreeing to include vitamin A supplementation in its polio eradication campaign. The NID rounds in 1999 reached 90-100% of all children under 5 years of age (UNICEF 2002, p. 9).

The Girl Child Project

The Girl Child Project is a cost-efficient, shining example of a successful rights-based approach to advocacy and social mobilization. It is helping to transform thousands of adolescent girls, who in turn are claiming their rights within their families and their communities, without major conflict.

Recommendation: UNICEF and its partners should continue to support the Girl Child Project and explore ways of utilizing the same or similar models where feasible in more districts of Pakistan, with linkages to local government and micro-credit and marketing initiatives.

UPE Sialkot Project

The UPE Sialkot Project demonstrates the power of advocacy, social mobilization and associated programme communication in bringing about social change. It has achieved 97% enrolment of children aged 5-9 and a 99.3% student retention rate, owing in large part to the mobilization of parents at the village level (Organization and Management Development Center 2002, p. 40-41). This initiative has cost less than US\$ 2.00 per household over a three-year period. While the project serves as a successful model, it cannot be replicated without adjustments. It warrants UNICEF's continued support in order to maintain its achievements and make further improvements to the quality of education.

Recommendation: Stakeholders should follow up on the recommendations contained in the evaluation of the UPE Sialkot Project and strive to improve the quality of primary education and to institutionalize UPE on a wider scale.

2. Introduction

2.1 Background to the Evaluation

In March 2000, UNICEF Pakistan, in consultation with its Government of Pakistan (GOP) coordinating ministry and the Regional Office for South Asia, decided to undertake an in-depth evaluation of advocacy and social mobilization, one of three² "fundamental strategies" of the GOP-UNICEF Country Programme of Cooperation (CP). The GOP-UNICEF Master Plan of Operations (MPO) describes advocacy as "lobby[ing] with the policymakers, parliamentarians, civil society, the private sector and other donors on behalf of women and children, to influence values, attitudes, policies, legislation, plans and programmes in favour of children and our effective action" (p. 26). The MPO states that social mobilization "aims at involving the civil society in the planning, monitoring, and evaluation leading to their ownership of the programmes" (p. 26).

The evaluation coincides with a medium-term review (MTR) of the CP. The MTR provides an opportunity to review and adjust programmes in light of the results during the first half of the five-year programme cycle, and in view of changes to Pakistan's social and political environment.

The reasons for selecting the advocacy and social mobilization strategy as the subject of a major evaluation were as follows:

- The advocacy and social mobilization strategy commands a significant resource investment under the CP. Advocacy and social mobilization has never before been evaluated in a systematic way. Some previous reviews have suggested the need for a comprehensive evaluation of the strategy in associated programme interventions, in order to learn from past experience.
- The need for taking a measured look at advocacy and social mobilization has gathered urgency and importance, owing to the strategy's centrality, and the shift towards a more rights-based approach. The GOP's devolution policy has substantial implications for the CP for the next few years and beyond, particularly in relation to advocacy targets, allies and partners. Devolution could usher in more propitious circumstances for advocating and realizing a more rights-based approach to programming.
- Evaluating implementation of the advocacy and social mobilization strategy meets one of the requirements of the MTR, which is to assess major cross-sectoral issues that encompass key programme interventions.
- The CP adopted six areas of priority for accelerated programme implementation at the beginning of 1999, namely a) polio eradication and vitamin A, b) universal salt iodization, c) safe delivery practices, d) universal primary education (UPE), e) rural sanitation and f) violence against women. Evaluations are underway for rural sanitation, and have been completed for salt iodization. The evaluation of advocacy and social mobilization encompasses two additional programme priorities, polio eradication and vitamin A, and UPE.

² The other primary strategies are capacity building and service delivery.

2.2 Terms of Reference

The purpose of the evaluation is to help UNICEF-Pakistan and its partners learn from the past in order to plan and implement effective advocacy and social mobilization initiatives over the second half of the CP and beyond, keeping in view the CP's priorities and the GOP's ongoing devolution process.

Five key questions and related sub-questions guide the evaluation. They appear in Appendix A and are summarized as follows:

1. What is the CP's overall advocacy and social mobilization strategy?
2. What advocacy and social mobilization initiatives were undertaken during the first half of the CP?
3. How have these initiatives contributed to the MPO's objectives?
4. What have they cost?
5. How can the GOP, UNICEF and their partners improve advocacy and social mobilization in the future?

The evaluation examines advocacy and social mobilization in programme-related and non-programme-related areas of the CP. In the programmatic area, it focuses on three key initiatives: Polio Eradication and Vitamin A Supplementation, Universal Primary Education (UPE) and Empowerment of the Girl Child. Appendix A contains a set of specific evaluation questions for each of these components.

The terms of reference call for an examination of the organizational context of advocacy and social mobilization, with a focus on collaborative processes in relation to planning, implementing, monitoring and evaluating advocacy.

The evaluation faced many challenges because it is, in many ways, breaking new ground. Evaluating a strategy, particularly one that takes many different forms, is uncommon and far more difficult than evaluating a programme or project. The absence of standard definitions of advocacy and social mobilization among the CP partners complicated matters, and meant that the evaluation had to begin by clarifying the meaning of these terms. It was difficult to narrow the scope of the evaluation since advocacy and social mobilization are integral to most programmes and projects. They are, as well, functions that many staff perform formally and informally inside and outside of programmes. It proved challenging to separate programmatic and non-programmatic advocacy and social mobilization since their boundaries are often overlapping. For this reason, many of the recommendations of the evaluation pertain to programmes.

2.3 Approach and Methodologies

2.3.1 Approach

An evaluation of this complexity required flexibility in its approach and methods. The evaluation followed a utilization-focused model, wherein the evaluator "facilitates judgment and decision-making by intended users, rather than acting as a distant, independent judge" (Patton 1996, p. 21). This approach was consistent with the purpose of the evaluation, which was to improve planning and implementation of advocacy and social mobilization over the second half of the CP. While the approach was improvement-oriented, it entailed judgments of the merits of advocacy and social mobilization initiatives. However, the process leading to such judgments was more

participatory than in more traditional approaches to evaluation. The evaluation process was, in itself, a learning experience for stakeholders.

In June 2001 when the terms of reference for the evaluation were being formulated, UNICEF established an internal Reference Group to guide the evaluation. The Reference Group became UNICEF's principal vehicle for reflection, judgment, decision-making and learning. It consisted of UNICEF's Country Representative and relevant section heads. The management structure of the evaluation followed the GOP-UNICEF MTR structure. UNICEF's key GOP partners were members of an evaluation steering committee. They were consulted at the beginning and at the end of the evaluation, and they had an opportunity to comment on a draft of the final report.

2.3.2 Methodologies

In keeping with the utilization-focused model and the somewhat amorphous nature of the subject under investigation, the evaluation employed a wide range of methodologies. This consultant used the following methods:

- a desk review (a list of documents examined appears in Appendix B);
- a literature search pertaining to concepts, best practices and lessons learned in the field of communication for development;
- open-ended dialogue with members of the Reference Group;
- a written survey of selected GOP partners (N=8: 22% response rate);
- a written survey of UNICEF programme staff (N=14: 35% response rate) in Islamabad and the provinces; and
- site visits to the UPE Sialkot Project and the Girl Child Project.

This consultant drew from two major studies that UNICEF commissioned for the evaluation: one to document advocacy and social mobilization initiatives and to survey primary stakeholders; and the other to evaluate the UPE Sialkot Project. The first employed an extensive review of documentation and a variety of mainly qualitative assessment methods, including:

- semi-structured interviews and focus group discussions with staff of UNICEF (N= 51), GOP partners (N=74), sister UN organizations (N=5), donors (N=8), NGO partners and community representatives (N=98), children (N=25) and with adults (N=53) on the streets of Islamabad and the provincial capitals (Raasta Consulting Ltd 2002).

The second study used a mix of quantitative and qualitative methodologies within a collaborative evaluation framework. These included:

- a participatory workshop during which the evaluation questions and research instruments were determined;
- in-depth interviews with selected stakeholders;
- a review of pertinent documents and statistics; and
- a household survey in Sialkot district that encompassed six urban clusters and 12 rural clusters for a total of 774 households (0.25% sample), selected at random (Organization and Management Development Centre 2002).

Numerous secondary sources of data proved useful. The following two studies were particularly pertinent:

1. Favin, M., Tyabji, R., Mackay, S. (2001). *Pakistan PEI/EPI Communication Review*. Study commissioned by Government of Pakistan, Ministry of Health with the support of UNICEF, WHO, CDC and USAID; and

2. Croll, E. (2001). *The Girl Child Project Pakistan. An Assessment Report, June 2001*. Unpublished report prepared for UNICEF Pakistan.

The former study was a qualitative assessment based mainly on a review of documentation, meetings with selected stakeholders and interviews and field assessments in three provinces. The latter, done by an international team, involved a review of pertinent documents, observation during several site visits, and interviews and group discussions with project staff, beneficiaries and national, provincial and local implementing agencies.

This report is a synthesis of information culled from all of the above sources, which are cited throughout.

2.3.3 Constraints

The Reference Group recognized at the outset that the evaluation would be unable to deal adequately with attribution. It was impossible in an evaluation of this nature and scope to measure the outcomes of advocacy and social mobilization using such conventional means as control groups. Baseline information on attitudes and behaviours was unavailable in most cases, and the indicators and monitoring data from secondary information sources were insufficient to determine attribution conclusively. Many factors influenced the outcomes of advocacy and social mobilization beyond the scope of advocacy and social mobilization inputs. The inputs themselves are often multi-dimensional and they vary from one target group to the next. The sometimes vary even within the same target group, as in the UPE Sialkot Project.

Recognizing these constraints, the Reference Group agreed that the evaluation would strive for a balanced assessment of the strengths and weaknesses of the CP's advocacy and social mobilization initiatives using logic models, where appropriate, and taking into account multiple perspectives, multiple interests and multiple realities. Most components of the evaluation used small, purposeful samples of information-rich cases, rather than large, random samples that permit valid generalizations and tests of statistical significance. The evaluation research methods were closely matched to the evaluation questions, the limited time and resources constraints, and the stakeholders' need for information that was valid, reliable and, above all, useful.

The events of September 11, 2001, disrupted some aspects of the evaluation. Many stakeholders were preoccupied with emergency preparations throughout the fall of 2001. This evaluator, was unable to travel Islamabad and the provinces in the fall to meet with UNICEF and GOP staff in person, owing to security concerns. Instead, he conducted surveys electronically. Although the evaluation included 23 short case studies of advocacy and social mobilization, time and resources allowed for an in-depth analysis of only three major programmatic interventions.

There was insufficient time to discuss drafts of the evaluation report. In retrospect, learning could have been enhanced had this evaluator had an opportunity to review drafts in person with all key stakeholders, including more of UNICEF's provincial staff.

It took longer than originally anticipated to reach consensus on the terms of reference and to hire consultants to undertake components of the evaluation. This was, however, not unusual, given the complexity of the evaluation, its wide scope and debate over the most appropriate approaches and methodologies to use.

2.3.4 Organization of this report

The next section begins with an overview of the situation of children and women in Pakistan to establish the context for the information which follows. The major findings, conclusions and recommendations are contained in the body of the report and summarized at the end. Case studies of advocacy and social mobilization in three programmatic areas appear in Appendices C, D and E. Recommendations pertinent to each case study also appear in the corresponding appendix. Appendix A lists all the questions that guided the evaluation. These questions are repeated separately in italics at the beginning of each relevant sub-section of Section 3.

2.4 Context of the Evaluation

The following situation analysis, excerpted from the Master Plan of Operations (MPO) 1999-2003, highlights many areas where advocacy and social mobilization are required in order to help bring about needed change³.

Pakistan's 1999 National Census estimated the population at about 130,600,000. Despite impressive annual economic growth since independence, about a third of the population suffers from poverty, up substantially since the early 1990s (Pakistan 2001). With an annual growth rate of 2.6%, the population is expected to double over the next 26-30 years. Rapid population growth is particularly worrisome for youth since education, employment and training opportunities have not kept pace with the burgeoning youth population. As of 1999, 41% of Pakistan's population was below the age of fifteen years. The figure includes 19.1 million children under the age of five. What will their future be unless society provides them with opportunities?

Poverty is pervasive and on the rise. Some 45 million Pakistanis live in poverty, mostly in rural areas, and their numbers could rise to 60 million by the end of the CP (Canadian International Development Agency 2001). Poverty is rooted in feudalism with an elite of large landowners reaping most of the benefits of agriculture. Small landholders eke out a marginal livelihood and the landless are most vulnerable. The rise in poverty has grave implications for human development and the social stability of Pakistan.

The deplorable social indicators for Pakistan's children and women are a call for strong advocacy at the highest levels and an overhaul of social programmes. As of 1998, the infant mortality rate was 90 per 1,000 live births, a rate that is among the highest in Asia. This means that one in five Pakistani children dies before his/her fifth birthday. Twenty-five per cent of the babies are born with low birth-weight; 40% of children under five years of age are underweight; and about half the children of Pakistan are likely to be at risk of iodine deficiency disorders (IDD). Diarrhoeal diseases, acute respiratory infections (ARI), measles, neonatal tetanus and malaria are among the major causes of infant and child deaths. Too many children die or suffer unnecessarily from preventable childhood diseases. While Pakistan has made progress toward the elimination of polio, routine immunization coverage has remained below 50% between 1990 and 1999. The evaluation indicates where some advocacy and social mobilization initiatives have been relatively successful in relation to children's health, and where increased efforts are needed.

Child malnutrition contributes significantly to child morbidity and mortality because it increases susceptibility to infection. Malnutrition in infants and young children is primarily a result of inadequate breastfeeding and poor complementary feeding practices. The underlying causes of

³ Unless otherwise stated, the source of all data in this section is the Master Plan of Operations 1999-2003 (Pakistan and UNICEF 1999).

infant and child deaths include poverty, inadequate access to affordable health-care facilities, unsafe storage and handling of drinking water and inadequate parental knowledge of child care practice and personal/household hygiene. Advocacy and social mobilization at multiple levels can help combat some of these immediate and underlying causes of infant mortality, as the evaluation will show.

Many Pakistani women die unnecessarily during pregnancy and childbirth. The country's maternal mortality rate is estimated at 350 per 100,000 live births. Most deliveries take place at home, often without the assistance of trained birth attendants. Only one in twenty women has access to emergency obstetric care, suggesting that for every woman who dies during pregnancy or childbirth, many others suffer lifelong complications. Fewer than 50% of pregnant women are immunized against tetanus. More than 30% of adult women and 42% of pregnant and lactating women are anaemic. The high rate of maternal mortality is a direct result of malnutrition, lack of knowledge and poor health and reproductive behaviour. Underlying these problems are widespread poverty, violence in the home, economic and social discrimination against women and girls, inadequate access to good health services and weak enforcement of legislation. The evaluation provides examples of how a rights-based approach to advocacy has helped to bring about change within families, communities and government institutions.

Too few Pakistani children receive a good basic education. Net enrolment (the percentage of children 5-9 in grades 1-5) is about 40%. This means that there are approximately 8.2 million Pakistani children who never enrol in school or who drop out before completing the fifth grade. A host of factors contributes to this situation, including low perceived value of education, lack of relevant curriculum, high cost of schooling, discrimination against girls and the economic benefits of child labour. A widespread social acceptance of child labour, combined with limited school opportunities, poor employment prospects for adults and family economic necessity, compels children to seek employment. Governments do not adequately enforce labour laws and the laws do not apply to farming, domestic work and cottage industries where the majority of children work. Lack of parental and community involvement contributes to young children leaving school early to enter the workforce. The evaluation will show where concerted efforts in advocacy and social mobilization have helped turn this situation around in one district.

Women in Pakistan face systemic discrimination. Laws are biased against women and a strong traditional patriarchy hinders their advancement as equal citizens. Women's economic contribution is unremunerated and largely invisible. Few women hold senior level positions in society: 3% in administrative or managerial positions; 5% in ministerial positions; and 2% in parliament. Pakistan ranked 120th out of 146 countries in the United Nations Development Programme's (UNDP) 1998 Gender-related Development Index and 92nd out of 94 countries in the UNDP's gender empowerment measure (Canadian International Development Agency 2001, p. 10). The evaluation points to areas where the GOP and UNICEF have made progress on women's rights issues in part through formal and informal advocacy and social mobilization, and where renewed efforts are required.

3. Findings

3.1 Advocacy and Social Mobilization as Defined and Understood

What is the CP's overall advocacy and social mobilization strategy as conceived in relevant programme documents, as understood in the minds of pertinent UNICEF staff, collaborating partners and other primary stakeholders, and as translated into a wide range of programmes, projects and initiatives, including the three selected associated interventions? Is the CP's overall advocacy and social mobilization strategy a coherent strategy, as conceptualized by the CP team and key stakeholders?

Any evaluation of advocacy and social mobilization must, by necessity, begin with an examination of what these terms mean and how they are perceived in the minds of the CP partners. These are challenging terms, even for those who have made their careers in this field. Advocacy and social mobilization are complex social constructs whose meanings change over time. The evaluation first looks at how advocacy and social mobilization are defined and understood by the CP partners.

3.1.1 Advocacy and social mobilization as defined and understood by the CP partners

Advocacy and social mobilization, along with capacity-building and service delivery, are the three fundamental strategies of the Country Programme for Children (CP). The terms advocacy and social mobilization appear extensively in the Master Plan of Operations (MPO), but nowhere in that document or other CP documents are they defined precisely.

The MPO states that through advocacy UNICEF will “lobby with the policy makers, parliamentarians, civil society, the private sector and other donors on behalf of women and children, to influence values, attitudes, policies, legislation, plans and programmes in favour of children and our effective action” (p. 26). According to the MPO, social mobilization “aims at involving the civil society in the planning, monitoring, and evaluation leading to their ownership of the programmes” (p. 26). These interpretations of advocacy and social mobilization are more narrow than the conventional definitions, as outlined in Section 3.1.2.

The MPO stops short of defining advocacy and social mobilization within a rights-based framework, but states that the aim of advocacy and social mobilization is, in combination with six other “guiding strategies”, “to empower low-income people and in particular children and women to realise their rights” (p. 26). Elsewhere in the document, advocacy, social mobilization and programme support communication are sometimes described within a rights-based framework, but often not.

Surveys of selected government partners and UNICEF programme staff carried out by this consultant found inconsistencies in their understanding of advocacy and social mobilization. Almost all respondents in the survey of UNICEF's programme staff correctly defined advocacy as a form of lobbying or securing support from decision-makers for a cause. However, less than a third referred to the rights of children and women in their definitions, and a quarter were unable to distinguish between advocacy and social mobilization. Only two of 14 respondents referred to the rights of children and women when defining social mobilization. Most respondents in the survey of selected government partners were unable to describe advocacy and social mobilization in ways that approximated the conventional definitions of these terms.

Raasta Development Consultants probed deeper into how the CP partners understand advocacy and social mobilization. Within UNICEF, advocacy is “largely understood in two ways: overall (non-programme) advocacy and programme advocacy” (Raasta 2002, p. ii). Non-programme-related advocacy, referred to as general advocacy throughout this report, is understood to mean advocacy of general nature in support of children and women’s rights. Much of it is undertaken informally (see Section 3.2.1). According to the Raasta study, understanding the distinction between overall and programmatic advocacy and social mobilization is directly related to one’s position in UNICEF: the higher the position, the better the understanding. The most probable explanation for this is that senior staff are most likely to be engaged in overall advocacy, while mid-level staff are most likely to be engaged in advocacy related to programmes and projects. As well, some senior and mid-level staff have received gender and rights training that would help prepare them for a general advocacy role.

According to the Raasta study, almost all of UNICEF’s senior staff and many mid-level and support staff perceive that “promoting respect and protection for and fulfillment of the rights of children and women” is the chief function of UNICEF (p. ii-iii). However not all of UNICEF’s programme staff link advocacy and social mobilization with this core function, as noted earlier. The Raasta study found that NGOs are, of all UNICEF’s partners, most likely to link UNICEF’s advocacy and social mobilization work with the promotion of the rights of children and women. Government partners tend to identify UNICEF with sector-specific messages more than with messages about the rights of children and women. Of all UNICEF’s partners, donors are least likely to associate UNICEF with a rights focus.

The Raasta study found “much confusion” among UNICEF’s partners regarding the meaning of advocacy and social mobilization (p. v). Many of UNICEF’s partners use the terms advocacy, social mobilization, communication and awareness-raising interchangeably. Generally, advocacy is better understood than social mobilization. Few people outside of UNICEF recognize that advocacy and social mobilization are one of the CP’s fundamental strategies. Many government partners are, however, familiar with the goals of the MPO. NGOs appear to be best informed about advocacy and social mobilization among UNICEF’s partners.

Findings

- *Many CP partners are confused about the meaning of advocacy and social mobilization, in part because UNICEF neither clearly defines nor communicates what these terms mean.*
- *Most UNICEF staff members believe that promoting respect and protection for and fulfillment of the rights of children and women is the chief function of UNICEF, but not all programme staff link advocacy and social mobilization with this core function.*

Raasta concluded that “Within UNICEF there is little clarity about the relationships between the crucial areas of advocacy, social mobilization and communication” (p. 39). Evidence in the Raasta study and this consultant’s review of key documents shows that the GOP and UNICEF neither clearly define nor communicate what they mean by advocacy and social mobilization. This has contributed to confusion in the minds of the CP partners. The MPO 1999-2003 and

UNICEF-Pakistan’s annual reports for 1999 and 2000 provide examples to support this conclusion. The MPO refers to advocacy and social mobilization as a fundamental strategy, advocacy and communication as a programme, advocacy and communication as a fundamental project strategy (of the advocacy and communication programme), and communication support to programmes as a project. The MPO contains frequent references to strategies within strategies. (See Section 3.2.7 for a discussion of advocacy and social mobilization in relation to strategy.)

3.1.2 Advocacy and social mobilization as conventionally defined

Most development communication practitioners define advocacy and social mobilization broadly, and no two define them the same way. Roche (1999) defines advocacy as "the strategic use of information to democratize unequal power relations and to improve the conditions of those living in poverty or who are otherwise discriminated against" (p. 192). Neill McKee (1992), a former UNICEF employee and a leading authority on development communication, defines advocacy as:

The organization of information into argument to be communicated through various interpersonal and media channels with a view to gaining political and social leadership acceptance and preparing a society for a particular development programme. (p. 163)

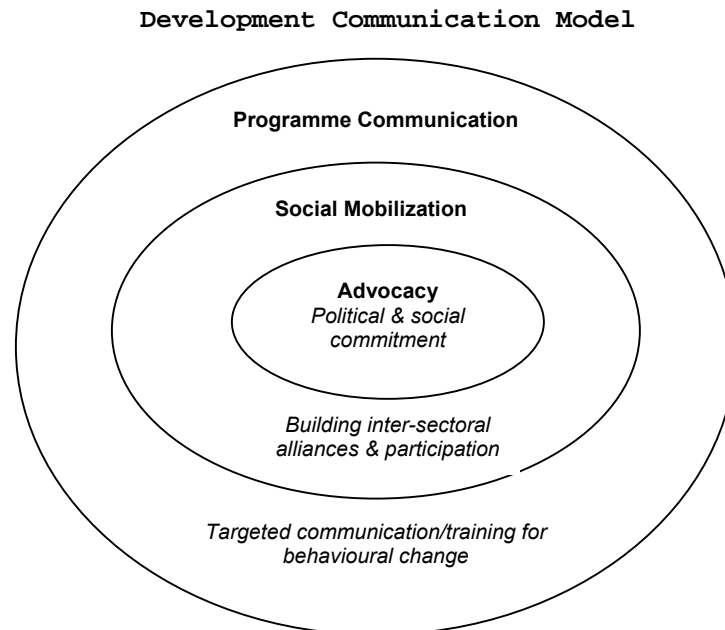
McKee (1992) defines social mobilization as:

The process of bringing together all feasible and practical inter-sectoral social allies to raise people's awareness of and demand for a particular development programme, to assist in the delivery of resources and services and to strengthen community participation for sustainability and self-reliance. (p. 163).

McKee suggests that social mobilization has to do with alliance-building and creating demand, whereas the MPO equates social mobilization with the participation of civil society in programme planning, monitoring and evaluation.

McKee's development communication model (Figure 1) shows how advocacy, social mobilization and programme communication are integrated.

Figure 1



Source: Adapted from McKee, N. (1992). Social Mobilization and Social Marketing in Developing Communities: Lessons for Communicators. Penang, Malaysia: Southbound, p.164.

McKee (1992) defines programme communication as:

The process of identifying, segmenting and targeting specific groups/audiences with particular strategies, messages or training programmes through various mass media and interpersonal channels, traditional and non-traditional. (p. 163)

Programme communication plays out at the project and sub-project levels, as in NID campaigns, where a variety of audiences are targeted and vaccination teams are trained in interpersonal

Findings

- *Conventional definitions of advocacy and social mobilization, as understood by leading practitioners and theorists, are broad and complex.*
- *Since no two conventional definitions are the same and the definitions change over time, it is not surprising that there is no overall, coherent concept of advocacy and social mobilization in the minds of the CP team and key stakeholders.*

communication and motivation. All three communication components—advocacy, social mobilization and programme communication—come together as an integrated whole in large-scale communication campaigns. UNICEF's senior staff sometimes begin advocacy at high levels in government, but it is gradually taken up by national, provincial and local leaders and the media. Social mobilization adds more national and provincial partners for

advocacy, programme communication, resource mobilization and service delivery. Social mobilization is “the glue that binds advocacy activities to more planned and researched programme communication activities” (McKee 1992, p. 165). Advocacy and social mobilization involve communication since people advocate and mobilize largely by means of communication. They can, as McKee suggests, also include training and capacity-building.

3.1.3 Advocacy and social mobilization from a rights-based perspective

While the conventional definitions reflect much of the advocacy and social mobilization practiced by UNICEF and its partners, they do not adequately describe advocacy and social mobilization from a human rights perspective. Ford (2001) contends that UNICEF’s move to a human rights approach to programming challenges these conventional definitions. He suggests that UNICEF needs to redefine its approach to advocacy, social mobilization and programme communication within a human rights framework. Within such a framework, advocacy and social mobilization should empower children and women to claim their rights. Instead of advocating “*on behalf of* children and women [emphasis mine],” as stated in the MPO, UNICEF and its partners should empower children and women to advocate directly *on their own behalf*. Ford argues that social mobilization, as conventionally defined and practiced, often assumes a development approach in which outsiders mobilize rights holders to support “externally developed goals” (p. 5). Similarly, traditional approaches to programme communication imply that the purpose of communication is for UNICEF and its partners to “explain their programmes to local people” so that UNICEF and its partners can achieve their objectives (p. 5).

The old paradigm of “top-down” message development and delivery by external agents is not appropriate in a rights-based environment, according to Ford (2001). He suggests that rights-based communication requires a bottom-up, participatory approach that enables children and women to assert their rights. Only in this way will they become “the subjects of their own development, not the objects of development strategies set by outside stakeholders” (p. 4). Rights-based advocacy and social mobilization are a major departure from more traditional, prescriptive approaches to communication wherein agencies develop and target messages at

specific audiences to encourage attitudinal and behavioural change. Ford illustrates the difference with the following example:

Behaviour change campaigns that use posters and slogans to promote condom use have done little to halt the spread of HIV/AIDS in adolescents. A human rights communication strategy, in which young people negotiate a secure future in their communities, could give adolescents more compelling reasons, such as self-confidence and self-esteem, to adopt safe sexual practices. (p. 6)

Findings

- *Advocacy and social mobilization within a rights-based framework are markedly different from conventional advocacy and social mobilization.*
- *The former involves enabling rights holders to claim their rights; the latter often involves prescriptive, message-driven communication.*
- *UNICEF and its partners increasingly, yet inconsistently, undertake advocacy and social mobilization within a rights-based framework.*

Rights-based advocacy and social mobilization fit well with the concept of health promotion that many developing and developed countries have adopted. Health promotion is, according to the Ottawa Charter for Health Promotion, “the process of enabling people to increase control over, and to improve, their health” (World Health Organization, Health and Welfare Canada, Canadian Public Health Association 1986, p. 1). Those who adhere to this concept focus their efforts on developing the life skills of individuals so that they can take greater control over the determinants of

health, and so that they can apply pressure for equal access to health resources. This approach to communication contrasts with conventional approaches that rely on didactic messages, communication materials, such as pamphlets, posters and T-shirts, and mass media.

Section 3.2 shows that UNICEF and its partners increasingly, yet inconsistently, undertake advocacy and social mobilization within a rights-based framework.

3.2 Advocacy and Social Mobilization as Applied

What are the actual programmatic and non-programmatic advocacy and social mobilization initiatives carried out by UNICEF and its key partners since the beginning of the MPO? What are the array of initiatives that comprise the macro and specific strategies for advocacy and social mobilization, and how sophisticated are these in targeting messages in different ways at different audiences?

Finding

- *Advocacy and social mobilization occur inside and outside of programmes, and at many levels.*

Advocacy and social mobilization occur inside and outside of programmes, and at many levels. Three case studies that relate to programmatic examples are discussed in detail in the appendices. Polio Eradication and Vitamin A Supplementation (Appendix C) and

the UPE Sialkot Project (Appendix E) are important sector-specific examples of advocacy and social mobilization.

3.2.1 General advocacy and social mobilization

General advocacy is at the core of UNICEF’s work and is perceived as the responsibility of all staff, as outlined in Section 3.3.2. General advocacy, wherein staff promote women and children’s rights and mobilize others to do the same, occurs on a daily basis, informally and formally. As such, it is the key component of non-programmatic advocacy and social mobilization⁴. Much of this important work has a low profile. For example, UNICEF and Save the Children have been quietly working together to advocate for the participation of children in all major social development fora in Pakistan over the course of the CP.

Although general advocacy and social mobilization are at the heart of UNICEF Pakistan’s mandate, much of this work is undocumented and unstructured. Most of the advocacy that takes place at private meetings, receptions and dinners away from the limelight is undocumented. Much of the high-level advocacy work is as well. Some events are described briefly in reports and in media coverage, but the details of the tactics used to advocate are not. For example, there is relatively little documentation describing the years of intensive lobbying that lead to Pakistan’s Juvenile Justice Ordinance. Similarly, there are no case studies of the sensitive advocacy and social mobilization work related to the marketing of breast milk substitutes and the introduction

of vitamin A supplementation. It is difficult to analyze what worked, what did not, and why without this information. The absence of such data impedes organizational learning.

A number of annual reports suggest major accomplishments in relation to general advocacy of this nature. The 1999 annual report states that UNICEF Pakistan played a lead role in ending escalating confrontation between the GOP and NGOs, through “backdoor

Findings

- *General advocacy and social mobilization—promoting children and women’s rights and mobilizing others to do the same—are at the heart of UNICEF’s mandate, yet they are not as well planned and documented as programmatic advocacy and social mobilization.*
- *By not documenting general advocacy and social mobilization, UNICEF impedes institutional learning.*

diplomacy and alliance-building” (p.35). The 2000 annual report claims that UNICEF was partially responsible for national and regional media taking a “proactive role” in covering children’s rights and discrimination, and for achieving a “major breakthrough” in bringing media and government together to debate women’s issues and children’s rights (p. 23). It is, however, difficult to determine the extent to which UNICEF influenced these changes or, more importantly, what it learned in the process, because these initiatives are not well documented.

UNICEF staff are expected to communicate the organization’s core values in their daily interaction with partners and the general public. However, this important, informal advocacy role is not as well planned, documented and supported as the formal advocacy and social mobilization associated with programmes and projects. Section 3.3.2 deals with this issue in greater detail and suggests the need for remedial action.

3.2.2 Three advocacy and social mobilization models

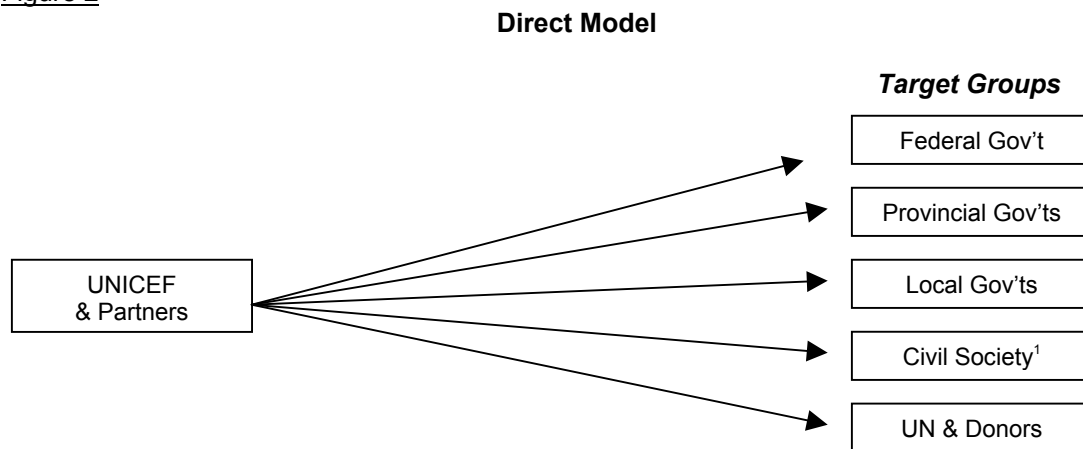
Three distinct patterns emerge when advocacy and social mobilization are examined within these wide and somewhat amorphous boundaries. Figures 2, 3, and 4 provide, in simplified form, visual

⁴ There are other kinds of non-programmatic advocacy of which the launch of the State of the World’s Children Report every December is one example.

representations of the three principal approaches and show the multiple levels at which they take place. These visual representations help evaluators determine the merits of each approach in reaching specific target groups. It should be noted that elements of all three models are found in some programmatic advocacy and social mobilization initiatives, such as the UPE Sialkot Project (see Appendix E). It should also be noted that the advocacy and socialization process is cyclical. Mobilizing one target group is likely to result in that group mobilizing others.

In the direct model (Figure 2), UNICEF and its partners lobby and mobilize various target groups directly on behalf of children and women. Decision-makers within federal and provincial governments are most frequently the primary target groups. UNICEF and its partners strive to influence government policy-makers and to mobilize public servants to implement policies and programmes for children and women. UNICEF and its partners direct much of their advocacy

Figure 2



¹ Civil society includes NGOs, professional associations, media, religious organizations and private sector groups.

work at senior levels in government. Sometimes UNICEF acts alone when it advocates and mobilizes, but often it acts in concert with other UN agencies, donors and civil society organizations. Sister UN agencies and donors are themselves the targets of UNICEF's advocacy and social mobilization on occasion. For example, UNICEF lobbied and mobilized some UN and donor agencies to obtain their support in convincing government, pediatricians and family doctors of the need for vitamin A supplementation (see Appendix C). The Raasta (2002) suggests that UNICEF is advocating when it gives the federal and provincial governments information on the state of children and women in Pakistan.

Under the direct model, some advocacy work is ongoing, while other work focuses on annual or special events. Examples of each are as follows:

- On-going liaison with the Ministry of Foreign Affairs to ensure that Pakistan plays a regional and world leadership role with regard to the rights of children and women;
- Ongoing liaison with members of the national and provincial assemblies and senate secretariats to secure commitment to policies that respect the rights of children and women;
- Ongoing liaison with senior officials of federal ministries and provincial line departments to ensure that they support policies and programmes that benefit children and women;
- Launch of the Progress of Nations report every June;
- Celebration of Universal Children's Day every November;
- Launch of the State of the World's Children Report every December;
- Celebration of International Children's Day every December;

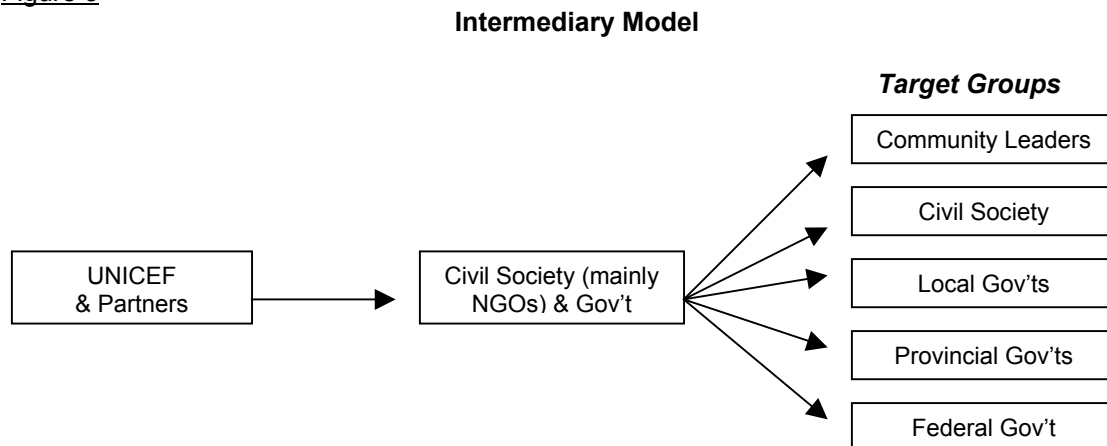
- Global Movement for Children; and
- Medium Term Review⁵.

Journalists are one of the principal target groups of the direct model. UNICEF held dozens of briefings and seminars for print journalists during the first half of the CP. Many of these sessions dealt with rights issues, such as juvenile justice, honour killings, child abuse⁶ and child labour. Some sessions covered sector-specific issues, such as polio eradication and HIV/AIDS.

Increasingly, UNICEF and its partners advocate and mobilize on behalf of children and women through intermediaries. As Figure 3 suggests, this allows them to reach deeper and wider, often to decision-makers in communities. Government front-line workers are frequently the intermediaries. For example, UNICEF and its partners helped train and mobilize about 500,000 vaccinators, 45,000 Lady Health Workers and 400,000 boy scouts so that they could raise awareness of and demand for immunization against childhood diseases. They also provided them with communication materials for use during National Immunization Days (NIDs), as outlined in Appendix C. Teachers mobilized parents to enroll their children in primary school in the UPE Sialkot Project, as explained in Appendix E. UNICEF often prepares senior public servants to advocate at the highest levels of government for policy changes favouring children and women. This work is usually carried out informally, sometimes linked to sector programs and sometimes not.

NGOs have become the CP's principal intermediaries for advocacy and social mobilization. UNICEF funds organizations, such as the Aurat Foundation, to actively pursue women's rights issues at all levels of government, and to mobilize at the community level. UNICEF provided funding to the Aurat Foundation to advocate for electoral reforms, including women's representation in local elections.

Figure 3



The “Brothers Join Meena” project exemplifies the intermediary model. The project engaged thousands of boy scouts throughout the country to advocate and mobilize for girls’ education and

⁵ Senior government officials, donors, district nazims and nazimas, and NGOs attended this high-level event. It featured direct, indirect and rights-based advocacy. Not only did UNICEF and its partners advocate for social policy change directly with government decision-makers, children did as well, through poetry readings and a video presentation.

⁶ There is a direct correlation between UNICEF’s work with journalists in this area and increased press coverage of child sexual abuse, a subject that has hitherto been taboo in Pakistan (UNICEF 2001a).

enrolment within their own families and their neighbours' families. Another example is the UPE Sialkot Project (Appendix E). Here six NGOs in the Sialkot District of Punjab successfully mobilized parents to enroll their children in school.

- Findings**
- *The CP partners apply advocacy and social mobilization according to three distinct models:*
 - a. *Under the **direct model** they advocate and mobilize individuals and groups directly on behalf of children and women.*
 - b. *Under the **intermediary model** they do the same through intermediaries.*
 - c. *Under the **rights-holder model** they empower children and women to advocate and mobilize on their own behalf in order to claim their rights from duty bearers.*

 - *The rights-holder model fits best with a rights-based approach to programming.*

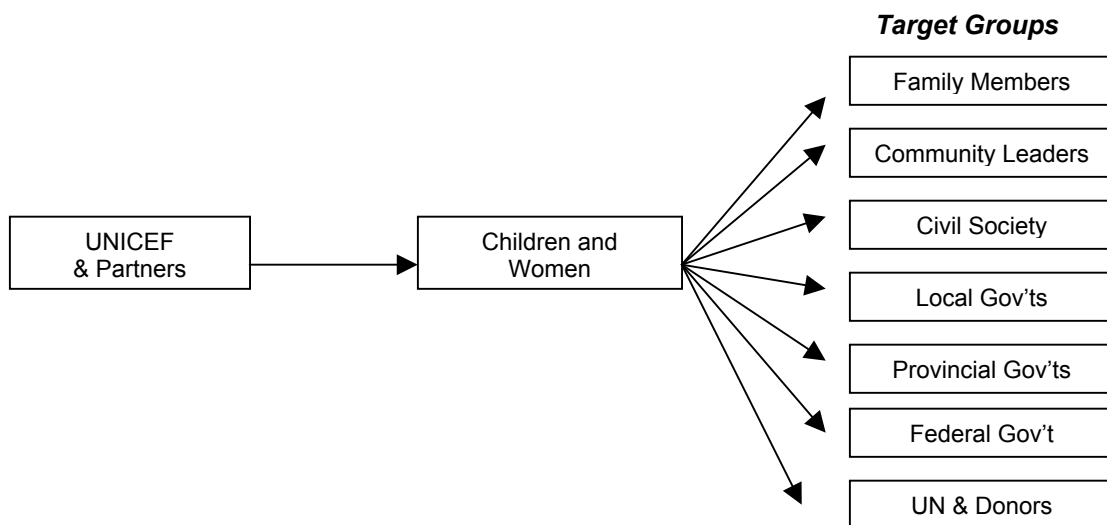
Analysis of the CP reveals a third pattern of advocacy and social mobilization. UNICEF facilitates advocacy and social mobilization through rights holders, as illustrated in Figure 4. An example of the rights-holder model is the Girl Child Project (Appendix D), where the Family Planning Association of Pakistan (FPAP) prepared about 20,000 girls and young women to act as role models and agents of change in 500 villages and urban slums.

The rights-holder model differs from the other models in that it involves empowering or enabling children and women *to advocate and mobilize on*

their own behalf. Change Makers for South Asia is another example of this pattern of action. This initiative brought together 27 young girls and boys from various socio-economic backgrounds to elect two representatives to voice their concerns at a meeting of South Asian countries. UNICEF's ongoing support to women's organizations for their participation in preparing the National Plan of Action for women is another example of the rights-holder approach.

Figure 4

Rights-holder Model



3.2.3 Short-and long-term advocacy and social mobilization

Evaluation is aided by understanding the time dimensions of advocacy and social mobilization. Table 1 provides examples of short- and long-term initiatives within the current CP. UNICEF

Table 1

Time Frame for Advocacy and Social Mobilization

Annual/Short-term Events	Long-term Initiatives
<ul style="list-style-type: none"> • Celebration of Children’s Day • Rally for the Global Movement for Children (GMC) • Say Yes Campaign for the GMC • Launch of the State of the World’s Children Report 	<ul style="list-style-type: none"> • National Immunization Days • Expanded Programme of Immunization • Maternal and Neonatal Tetanus initiative • Social Marketing of Iodized Salt • Acute Respiratory Tract Infections and Control of Diarrhoeal Diseases • Education for All • Baby Friendly Hospital • Ordinance on the Marketing of Breast Milk Substitutes • Juvenile Justice Ordinance • Policy and legislative reforms in relation to CRC and CEDAW • Girl Child Project

supports relatively few single, short-term initiatives, such as the celebration of Children’s Day. Most advocacy and social mobilization initiatives are long-term and evolve over time, such as the

Findings

- *Most advocacy and social mobilization initiatives under the CP are long-term and evolve over time.*
- *It can take a decade or more of advocacy, social mobilization and associated programme communication to bring about attitudinal and behavioural change in societies.*

NID campaigns. Some advocacy takes years of sustained effort before it bears fruit. Pakistan’s Juvenile Justice Ordinance, for example, took six years. Researchers (including Kotler and Roberto 1989, Manoff 1985, McKee 1992, and Young 1988-1989) have demonstrated that it often takes a decade or more to bring about wide-spread attitudinal and

behavioural change in societies using advocacy, social mobilization, programme communication and other interventions.

The timing of projects governs some programme-related advocacy and social mobilization. The Girl Child Project (Appendix D) and the UPE Sialkot Project (Appendix E) are two examples.

3.2.4 Advocacy and social mobilization within campaigns

Finding

- *The CP’s campaign-based advocacy initiatives and its direct advocacy work have many distinct characteristics that distinguish it from direct lobbying.*

Table 2 illustrates important distinctions between campaign-based advocacy and direct lobbying. Campaigns reach far more stakeholders than direct lobbying, but their messages are

usually few and simple. There is less control over the communication within major campaigns,

compared to direct lobbying. Many factors other than the communication inputs can influence the communication outcomes in large campaigns.

Table 2

Campaign-based Advocacy and Direct Lobbying Compared

Campaign-based Advocacy	Direct Lobbying
<ol style="list-style-type: none"> 1. Large numbers of participants 2. Media mediated contact 3. Public, visible events 4. Simple messages 	<ol style="list-style-type: none"> 1. Small numbers of participants 2. More direct contact 3. Relatively private processes 4. More detailed messages

Adapted from Davies (2001).

3.2.5 Participatory advocacy and social mobilization

<p>Findings</p> <ul style="list-style-type: none"> • <i>Beneficiary participation enhances communication effectiveness.</i> • <i>The CP's advocacy and social mobilization initiatives under the rights-holder model feature high levels of beneficiary participation.</i>

While participation of beneficiaries provides no guarantee that communication will be effective, development researchers (Fraser and Restrepo-Estrada 1998, McKee 2000 and 1992, Stiles 1996 and White 1982) concur that participation enhances the chances that it will be successful, because it allows for two-way and multi-directional communication. Table 3

provides examples of some of the CP's advocacy and social mobilization work along a continuum of participation. It is noteworthy that most examples of high stakeholder participation feature the rights-holder approach to advocacy and social mobilization.

Table 3

**GOP-UNICEF Advocacy and Social Mobilization
by Level of Beneficiary Participation**

Low Participation	Moderate Participation	High Participation
High-level lobbying of government policy-makers by UNICEF	Mobilizing communities and immunization teams for NIDs	Enabling adolescent girls to claim their rights (e.g. Girl Child Project)
Centralized preparation of mass media messages to promote EPI, polio eradication and vitamin A	Alliance-building in support of women's health	Empowering communities to develop and manage primary education for all (e.g. UPE, Sialkot)
Social marketing of iodized salt	Mobilizing communities and health workers for NIDs (fixed centre approach)	Enabling UNICEF staff and selected government and NGO partners to integrate CRC and CEDAW principles into their programmes through training.
Awareness-raising activities to promote the use of oral rehydration salts	Facilitating policy formation in support of child's rights and women's rights at the provincial level	Empowering women to organize and give voice to their rights in deliberations with government on the National Action Plan for Women.

3.2.6 List of advocacy and social mobilization interventions

Table 4 shows that UNICEF and its partners have applied advocacy, social mobilization and associated communication in at least 40 areas during the course of the current CP. Some

Findings

- *The scope of advocacy and social mobilization under the CP is vast.*
- *The CP partners may be trying to do too much and at too many different levels.*

interventions, such as those related to annual special events and Children as Change Makers, have involved relatively little input, but others, such as polio eradication, universal primary enrolment and the Girl Child Project have

involved major allocations of human and financial resources.

Table 4

Advocacy and Social Mobilization Interventions, CP (1999-2001)

Sectoral	CRC/CEDAW Issues and other
1. Universal Primary Education	23. Child labour
2. Universal primary enrolment	24. Child abuse
3. Education for All (learning achievement)	25. Children in armed conflict
4. Compulsory Primary Education Act	26. Birth registration
5. Out-of-school Youths	27. Children as Change Makers
6. Expanded Programme of Immunization	28. Girl Child Project
7. Polio Eradication	29. Girl Guide Shield Project
8. Vitamin A Supplementation	30. Brothers Join Meena
9. Iodine Deficiency Disorders	31. Juvenile justice
10. Acute Respiratory Tract Infections	32. Juvenile Justice Ordinance
11. Control of Diarrhoeal Diseases	33. Abuse of women
12. Breastfeeding	34. Coverage of women and children's issues by the media
13. Ordinance on the marketing of breast milk substitutes	35. Declaring honour killings murder
14. Baby-friendly Hospital Initiative	36. Women's representation in local government
15. Early Childhood Care and Development	37. Training in Rights-based Approach to Programming (staff and partners)
16. National Committee for Maternal Health	
17. Maternal and Neonatal Tetanus	
18. Universal Salt Iodization	
19. HIV/AIDS	<u>Other</u>
20. Holistic approach to women's health	38. Launches and annual celebrations (e.g. Children's Day)
21. Sanitation, Water and Environmental Education	39. Medium-term Review
22. Interim Poverty Reduction and Strategy Paper	40. Multi-donor Support Unit

Sister UN agencies point to a few areas of overlap. For example, some suggest that UNICEF focus on a few key clauses of the Convention on the Elimination of Discrimination Against Women (CEDAW), leaving the rest for other UN agencies (Raasta 2002).

3.2.7 Advocacy and social mobilization in relation to strategy

Are advocacy and social mobilization really a strategy? The term "strategy" has its origin in Greek and was originally used to describe plans and tactics of military campaigns. Notwithstanding this origin, the term is now used to mean just about anything. Mintzberg, one of the world's leading authorities on management, helped to sort out what strategy means and how it

is formulated in organizations. He defines strategy as a pattern of action or behaviour, either planned, intended or emergent (1987).

Findings

- *Advocacy and social mobilization might best be described as core functions of the CP, rather than as a ‘fundamental strategy’ since they involve several distinct strategies.*
- *The rights-holder approach to advocacy and social mobilization appears to be the key emerging strategy of the CP partners.*

Mintzberg has shown that strategies need not be deliberate. They often emerge through experimentation and innovation. Sometimes organizations are not immediately aware that they have embarked on a new strategy. Mintzberg refers to such strategy as “emergent strategy” (p71). In this light, the rights-based approach to

advocacy and social mobilization appears to be the key *emerging* strategy for advocacy and social mobilization in Pakistan. With this understanding of strategy, advocacy and social mobilization are, perhaps, more accurately described as core functions rather than as a ‘fundamental strategy’ of the GOP and UNICEF.

3.3 The Organization of Advocacy and Social Mobilization

By what manner and process within UNICEF, government and other partners do the Sections, Ministries and Departments collaborate in planning, implementing, monitoring and evaluating advocacy and social mobilization initiatives? On what basis has UNICEF Pakistan allocated human and financial resources to implement the strategy?

3.3.1 Organizational structure and institutional capacity

UNICEF's expertise in advocacy and social mobilization is concentrated in the Programme Support Communication Section. It has responsibility for supporting the advocacy, social mobilization and programme communication work of the three sections that deal with sector programmes, and it supports the provincial offices where most programmes are delivered⁷. The Programme Support Communication Section also has major responsibility for advocacy and social mobilization initiatives related to the Convention on the Rights of Children (CRC) and the Convention on the Elimination of Discrimination Against Women (CEDAW). This includes advocacy and social mobilization in relation to policy formulation, policy implementation and enforcement, rights violations, child protection, and the empowerment of children and women.

The Advocacy and Communication Section, sometimes referred to as the Information and External Relations Section, also plays an important advocacy role in reflecting UNICEF's overarching goals and values in all information and communication with the public. In this way it reinforces general advocacy and social mobilization in support of the rights of children and women. UNICEF has wisely separated the programme support communication function from the public information function in its organizational set up. This makes good sense because these functions are dissimilar and require markedly different sets of skills and communication processes.

The Planning, Monitoring and Evaluation Section also supports advocacy and social mobilization by providing senior management, programme partners and programme sections with research data and analysis, and by coordinating planning.

⁷ The provincial offices perceive the need for much more support, as outlined in Section 3.4.1.

The advocacy and social mobilization functions are integrated with programmes at UNICEF's provincial offices. There are, however, few staff in the provinces who have the expertise to conceptualize, design, implement and monitor multi-faceted advocacy and social mobilization initiatives. UNICEF's institutional capacity is centred largely in the Programme Communication Support Section in Islamabad. This section has the largest staff component next to the section that deals with health.

The GOP's expertise in advocacy, social mobilization and programme communication is organized by sector. There is little cross-sector coordination or collaboration within the GOP with respect to advocacy and social mobilization. Although the GOP's capacity has improved in recent years, none of the federal ministries or provincial departments associated with the CP has a unit to match UNICEF's Programme Support Communication Section. While there is, increasingly, improved capacity in the private sector and among some NGOs, there is no institutional base of support to government on a par with UNICEF. In some other developing countries, governments have established institutional support mechanisms for their advocacy, social mobilization and

Findings

- *Much of Pakistan's institutional capacity for advocacy, social mobilization and associated communication support to social programmes resides in UNICEF.*
- *This institutional capacity is centralized in Islamabad at a time when the GOP is devolving responsibility for social programmes to provinces and districts.*

programme communication initiatives. Donors have frequently assisted governments by covering the start-up costs of these communication support institutions. The Bangladesh Center for Communication Programs is one example. This institution assists the ministry

responsible for health and population with communication research, strategy development, campaign design and the production of communication materials. It offers government and NGOs a wide range of training courses, and it trains trainers, who in turn train field staff.

For many years, UNICEF's Advocacy and Communication Section has designed, tested, produced and helped distribute a wide range of communication materials for the NID campaigns. An internal audit (UNICEF 1999) raised concerns about the heavy demands on staff time and the administrative burden associated with these activities. The broader issue here is sustainable institutional capacity. Why after many years does much of Pakistan's institutional capacity for advocacy, social mobilization and programme communication reside in UNICEF, and why is it largely concentrated in Islamabad? Government devolution and UNICEF's plans to focus more of its programmes at the district level make it timely for the GOP and UNICEF to address this issue.

3.3.2 Roles, responsibilities and support

Most staff perceive that UNICEF expects all of its employees to advocate and some to mobilize others (Raasta 2002). This perception applies particularly to general advocacy that promotes the rights of children and women and, in so doing, reflects UNICEF's core values. This expectation is, however, more implicit than explicit. Staff hold the view that "UNICEF does not have a separate or defined policy on advocacy" (Raasta 2002, p. 8). UNICEF's personnel policies, job descriptions and selection criteria inadequately deal with advocacy, according to the Raasta study, which calls for an advocacy policy that would help to clarify what is to be advocated and by whom.

Even though job descriptions make little reference to advocacy and social mobilization, staff spend much of their time engaged in these functions. This consultant's survey of programme staff

found that they spend on average about 30% of their time advocating and mobilizing. Some of this time includes planning, supervising and monitoring advocacy and social mobilization as an element that cuts across sector programmes. Some of it also includes general advocacy that is often informal, unplanned and sometimes not well documented (see Section 3.2.1). Generally, the

Findings

- *Promoting respect for the rights of children and women is considered a key function of UNICEF staff, and is one of the most important means by which UNICEF communicates its core values.*
- *This function is inadequately reflected in UNICEF's personnel policies and its orientation and training programmes.*

more senior the staff member, the more time he/she spends on general advocacy. An analysis of UNICEF's Country Representative's itinerary in 2001 shows that she spent about a third of her time in meetings with government, largely in an advocacy role (Raasta 2002).

More could be done to support staff in their role as advocates, particularly if

general advocacy is to continue to be expected of all staff. Interpersonal communication and motivation training from a rights-based perspective would appear to be a priority for effective advocacy. Staff perceive that the organization provides inadequate orientation and training in advocacy and social mobilization (Raasta 2002)⁸. They believe that orientation and training of UNICEF's government and civil society partners are inadequate as well. The partners concur with this perception.

There are relatively few materials available to guide UNICEF staff and their partners in their daily interactions when opportunities for advocacy arise. The Raasta study suggested that "Everyone in UNICEF should have sufficient information to be able to verbalize what UNICEF stands for" (p. 43). Some staff have suggested the need for talking points on critical issues (personal communication with members of the Reference Group, January 30, 2002). These could help staff dealing with sensitivities related to children and women's rights in Pakistan's diverse cultural context. Such materials might best be developed in the provinces in order to respond to local and regional perceptions, customs and beliefs.

Little information is available to guide UNICEF's Country Representative in his/her high-level advocacy work. Briefing notes on advocacy roles, tactics and lessons learned would be valuable for new senior staff at UNICEF, and for some of their colleagues in other UN organizations.

3.4 Planning, Monitoring and Evaluating Advocacy and Social Mobilization

By what manner and process within UNICEF, government and other partners do the Sections, Ministries and Departments collaborate in planning, implementing, monitoring and evaluating advocacy and social mobilization initiatives?

3.4.1 Participation and collaboration

The MPO signals that UNICEF and its partners will advocate for children's rights and mobilize others—particularly communities—to take ownership over development programmes during the course of the CP. The principal means of encouraging ownership is participation. The MPO acknowledges that "lack of community participation in planning... means that programmes do not reflect the needs of the people and therefore utilization of services is poor" (p. 62). The

⁸ Many staff members have, however, received training on rights issues, gender equality and a rights-based approach to programming.

document emphasizes participation when it describes social mobilization as a participatory process that "aims at involving the civil society in the planning, monitoring, and evaluation..."(p. 26).

The CP's track record in applying participatory and collaborative principles to planning advocacy and social mobilization is mixed. For example, Croll (2001) found effective participatory planning in the Girl Child Project. The evaluation of the UPE Sialkot project found broad-based community participation in planning at the village level (Organization and Management Development Center, Institute of Leadership and Management 2002).

Collaborative planning of communication and social mobilization was less successful in relation to the NID campaigns. Favin, Tyabji and Mackay (2001) found that "incomplete and/or last-minute planning...pervades all levels, obviously affecting the other processes associated with implementing the programme" (p.6). They noted that the committees established at the federal, provincial and district levels to coordinate and implement communication and social mobilization "have not met or have been convened without sufficient high-level participation" (p. 6). The authors also cited numerous barriers to effective planning and implementation, such as weak coordination among partners, disparities in the allocations of human and financial resources and "differences of opinion and expectations concerning programme strategy and implementation" (p.6).

Evaluation under the CP has been mainly of the "third-party" variety, far removed from participatory evaluation. The Medium-term Review (MTR) and the collaborative evaluation of the UPE Sialkot Project are exceptions to the norm. They featured participatory processes down to the district level and provide evidence that UNICEF and its partner may be shifting evaluation in this direction, following a worldwide trend (Patton 1996, Fetterman 1996). A guiding principle of participatory evaluation is that participants *own* the evaluation. They make major design decisions, gather and analyze data, and draw and apply conclusions. The evaluator is a facilitator, collaborator, and learning resource (Patton 1996). A problem with third-party evaluation is that the stakeholders have little stake in them and, consequently, they often fail to implement the

Findings

- *Participation and collaboration are key to the success of advocacy and social mobilization.*
- *The CP partners have successfully applied participatory and collaborative approaches to planning, implementing and evaluating advocacy and social mobilization, but there is considerable room for improvement.*

recommendations. Participatory monitoring and evaluation can be done without losing evaluation rigour. Participatory and collaborative evaluation fit with a human rights approach to programming because they empower beneficiaries. Evaluation by distant third parties can have the opposite effect (Patton 1996, Fetterman 1996).

There is room to improve collaboration within UNICEF itself. Table 5 shows that some programme staff perceive that UNICEF collaborates better externally than it does internally in relation to advocacy and social mobilization. Staff believe that UNICEF collaborates best with NGOs, followed by government. Two respondents to the survey carried out by this consultant described UNICEF's sections as "compartmentalized" and "working in isolation." Several called for better internal collaboration as a means of improving the planning, monitoring and evaluation of advocacy and social mobilization. Some said that there was insufficient involvement of the provincial offices and called upon UNICEF to provide provincial staff with training in advocacy and social mobilization. These findings are consistent concerns raised by UNICEF's provincial staff during the MTR. The MTR report identified the need for better collaboration and

coordination among different sectors and programmes, and the need to work more closely through devolved institutions (UNICEF 2002).

Table 5

Perceptions of UNICEF's Programme Staff Regarding Collaboration

Questions	Responses				
	Poorly	Fairly well	Well	Very well	Total
<i>How well have UNICEF and the federal and provincial governments collaborated since 1999?</i>	1	4	7	1	13
<i>How well have UNICEF and its major NGO partners collaborated since 1999?</i>	1	3	8	2	14
<i>How well have the Islamabad office and the provincial offices of UNICEF collaborated?</i>	3	6	4	0	13
<i>How well have the sections of UNICEF collaborated?</i>	1	9	2	1	13

3.4.2 Monitoring and evaluation systems

The documentation review (Raasta 2002) found weakness in the CP's system of monitoring advocacy and social mobilization⁹. Outcomes for advocacy need to be "clearly stated and the processes to achieve these also articulated at the outset" (p. viii). The review concluded that "UNICEF does not seem to have found a way to measure the success of advocacy when the burden of getting the results...lies with the partners" (Raasta 2002, p. ix).

The UPE Sialkot evaluation (Organization and Management Development Center [OMDC], Institute of Leadership and Management 2002) also pointed to weakness in the monitoring system. The project partners failed to do a baseline study of attitudes, despite the fact that one of the project's main objectives was to bring about attitudinal change among community members (through advocacy and social mobilization). The evaluation concluded that the "non-availability of baseline data on knowledge, attitudes and practices (KAP) has been a major problem" (p. 41). As a result, the "evaluation exercise could not assess the change in attitudes" (p. 21).

Poor choice of indicators and a lack of evaluation rigour characterize the monitoring of advocacy and social mobilization under the CP. For example, none of the indicators in the partnership agreement of the UPE Sialkot Project is suitable for measuring progress in relation to attitudinal and behavioural change. All are quantitative and none is an appropriate measure of change. Typical of them are: "Number of meetings held by the SMCs [School Management Committees] and Parent Committees," and "Number of communities sending the monitoring reports" (OMDC 2002, p 11).

Generally, the CP's monitoring system places too much emphasis on activities and too little on results¹⁰. The MPO provides evidence of this. For example, half the expected outputs on page 67

⁹ UNICEF is not alone. Weak monitoring and evaluation are common in the field of communication for development, according to a study conducted for UNICEF and WHO in eight countries (Fraser 1984).

¹⁰ 'Result' means the developmental change that takes place as a logical consequence of the project/programme inputs and activities. Output results are the developmental changes that project/programme managers strive to achieve over the short term. Outcome results are higher-level changes that are expected toward the end of a project. Impact results are the broad societal changes linked to long-term programme goals.

are results, such as “Improved communication and training material developed based on formative research...” The remaining are material outputs or activities, such as “regular monitoring reports on communication and training activities.”

Monitoring indicators, such as “number of KAP studies completed, number of training packages developed” (MPO, p. 69, 70) and “periodic programme reviews and meetings” (MPO, p. 59) are not measures of development change. Measures of development change would be, for example, the degree to which the implementing partners apply the lessons learned from KAP studies and the number of trainees who actually apply skills and knowledge imparted through training. Ideally, there should be a mix of qualitative and quantitative indicators for each anticipated result at the output and outcome levels.

Findings

- *Monitoring and evaluation in relation to advocacy and social mobilization need strengthening..*
- *The system overall lacks rigour.*

Indicators throughout the MPO and other planning documents are not consistently gender- and rights-sensitive. This is a glaring oversight for a UN organization that champions gender equality and children’s rights.

The performance measurement system alluded to in the above analysis is a results-based management (RBM) system. RBM has the potential to provide a more effective means of tracking progress and capturing lessons than the present system. It can also be an effective management tool for planning, decision-making and organizational learning if kept flexible and iterative¹¹.

Moving to an RBM system has major implications for UNICEF and its partners beyond the scope of this evaluation. One obvious change is that it would require close collaboration among the sections and the provincial offices under the guidance of the PME Section.

3.5 Expenditures on Advocacy and Social Mobilization

If and where possible, what are the associated cost elements so as to maximize the efficiency and economy of advocacy and social mobilization initiatives? On what basis has UNICEF Pakistan allocated human and financial resources to implement the strategy?

UNICEF Pakistan is required to track its spending in relation to the three fundamental strategies, advocacy and social mobilization among them, but it does not allocate funds on the basis of the strategies *per se*. The budget planning process is oriented to programmes, all of which incorporate advocacy and social mobilization. UNICEF budgets on the basis of a 5-year financial planning cycle. Spending priorities are established in relation to rights-based programming, emergencies and, on the basis of the Country Programme Management Plan, Annual Management Plan, Programme Budget Allotments and Annual Programme Budgets.

Tracking spending in relation to advocacy and social mobilization is problematic. The Programme Manager System (PROMS), as presently set up, does not allow users to easily extract information in relation to social mobilization (J. Lassalle, personal communication, January 8, 2002). PROMS is coded for advocacy and programme communication, but not for social

¹¹ While this evaluation advocates a more rigorous system of planning, monitoring and evaluation, flexibility is essential. McKee (1992) suggests that “advocacy must remain somewhat opportunistic and therefore less planned and researched” (p.166). The same applies to monitoring and evaluation: Not everything that can be measured counts, and not everything that counts can be measured.

mobilization. Unclear distinctions between advocacy and social mobilization in the minds of some staff (see Section 3.1.1) may exacerbate coding difficulties. Other ambiguities may complicate matters. For example, expenditures on training in advocacy and social mobilization, could be coded as capacity development or as advocacy. There do not appear to be clear guidelines in such cases. These problems could be resolved by carefully tracking expenditures from Project Plans of Action.

Despite coding difficulties, the Planning, Monitoring and Evaluation Section determined that UNICEF spends more than US\$ 2.5m annually on advocacy and social mobilization and related communication, all programmes combined, as outlined in Table 6. The Programme Support

Table 6

**Expenditures on Advocacy, Social Mobilization and Programme Communication
Pakistan Country Programme 1999-2000**

Programme Name	1999	2000	Total
ADVOCACY & COMMUNICATION (A&C)			
Support for CRC/CEDAW	930,032	1,452,691	2,382,723
Other CSP, IER & social mobilization activities	73,267	246,804	320,071
TOTAL	1,003,299	1,699,495	2,702,794
CHILD HEALTH	157,567	56,458	214,025
Communication Support to Programmes (A&C)	126,821	398,170	524,991
TOTAL	284,388	454,628	739,016
WOMEN'S HEALTH	56,697	114,827	171,524
Communication Support to Programmes (A&C)	44,458		44,458
TOTAL	101,155	114,827	215,982
NUTRITION	297,651	370,644	668,295
Communication Support to Programmes (A&C)	41,766	35,681	77,447
TOTAL	339,417	406,325	745,742
EDUCATION	9,872	190,556	200,428
Communication Support to Programmes (A&C)	119,488		119,488
TOTAL *	129,360	190,556	319,916
SWEET	123,946	148,011	271,957
Communication Support to Programmes (A&C)	74,487	106,062	180,549
TOTAL	198,433	254,073	452,506
GRAND TOTAL	2,056,052	3,119,904	5,175,956
* Social mobilization activities for UPE are likely to be under estimated as support is reflected as capacity building of NGOs undertaking these activities.			

Source: PME, June 2001

Communication Section spends more than other sections, about half of all the funds expended in this area. It has its own projects, and it supports the advocacy and social mobilization work of the other sections. The Programme Support Communication Section spends about half of its budget on CRC and CEDAW initiatives, for which it raises funds, and the remainder on communication support to programmes.

Table 6 does not reflect all of UNICEF's advocacy and social mobilization work, because much of it is neither attached to any budget nor well documented (see Section 3.2.1).

Findings

- UNICEF spends at least US\$ 2.5 million annually on advocacy, social mobilization and related communication.
- Tracking expenditures on social mobilization is problematic owing to coding difficulties in PROMS.

Advocacy, social mobilization and programme communication, on average, accounted for about 25% of overall expenditures on programmes in 1999 and 2000, as shown in Table 7.

Table 7

**Expenditures on Advocacy, Social Mobilization and Programme Communication
as a Percentage of Overall Expenditures on Programmes, 1999-2000**

Programme	1999	2000
Advocacy and Communication	60	68
Child Health	26	7
Women's Health	14	17
Nutrition	27	30
Education	12	7
SWEET	15	20
Average	26%	25%

3.6 Effectiveness of Advocacy and Social Mobilization

What has been the contribution [of the CP's advocacy and social mobilization strategy] to the realization of the MPO's objectives?

It is difficult to determine whether or not the vast array of advocacy and social mobilization initiatives under the CP have made a major difference in the achievement of the MPO's objectives. The evidence presented in this evaluation suggests that some have and some have not.

The Raasta (2002) study concluded that the "most successful examples of advocacy and social mobilization have been small-scale well-planned initiatives that have included clear outcomes and monitoring procedures" (p. ix). Raasta found that "some evidence suggests that the strategy has resulted in the government giving children and women increased attention in its programmes and policies" (p. ix). UNICEF's government, donor and UN partners concur with this finding, according to Raasta's interviews with them. Many government staff attribute the GOP's current emphasis on the girl child to "constant and successful advocacy by UNICEF" (p. 13).

As a measure of UNICEF's general advocacy, the Raasta study found that the level of awareness about UNICEF among street children varied greatly:

In Quetta and Islamabad (small cities) the level was much higher, as it was in the two UNICEF-supported programme sites. In the other larger cities about half could recognize the logo and name UNICEF, or at least say that it stood for a UN agency and one working for peace and safety. Most children (in programme areas) associated it [UNICEF] with immunization and polio drops and said they had heard of it (or seen logo) through media or school teacher. (p. 26)

Interviews with a wide range of stakeholders led Raasta to conclude that “advocacy and social mobilization (especially [through] the media) has [sic] at least brought some of the more important messages into the consciousness of men, women and children” (p. 26). The evaluation cannot, however, determine the extent to which this has led to developmental change.

The evaluations of the Girl Child Project and the UPE Sialkot Project (Appendix D and E) have yielded the most conclusive evidence of tangible change. These projects have been well planned and effectively implemented, largely with the assistance of NGO partners. Both serve as models and have clearly made significant contributions toward the achievement of broader objectives in the MPO. Furthermore, they provide UNICEF and its CP partners with a rich body of knowledge and experience with which to chart new programmes and projects in the future.

UNICEF reports success in relation to the following advocacy initiatives:

- persuading government to declare that honour killings be treated as murder (Annual Report 2000);
- getting national and regional media to take a proactive role in covering children’s rights and discrimination (Annual Report 2000);
- bringing media and government together to debate women’s issues and children’s rights (Annual Report 2000);
- obtaining increased participation of civil society and children in preparations for the UN Special Session on Children (Annual Report 2001);
- hosting, jointly with the GOP, a regional meeting on the rights of the girl child (Annual Report 2001); and
- persuading government to include child-focused strategies and monitoring indicators in the Interim Poverty Reduction Strategy Paper to (Annual Report 2001).

Not to diminish these accomplishments, but most are stepping stones to broader social and policy change. It is difficult to assess the extent to which they have contributed to the goals of the MPO. That assessment is best left to UNICEF’s staff. They need to take a hard look at these and many other small-scale initiatives to determine where to focus their energies and resources in the future.

Over the course of the CP, the GOP has ratified protocols and in some cases passed ordinances on pay equity, juvenile justice and the protection of children from trafficking and armed conflict. Although little data are available to measure the extent to which UNICEF and its partners affected these outcomes, it is reasonable to assume that their interventions were influential.

Progress is often incremental in advocacy work. For example, UNICEF has for many years supported painstaking efforts to change laws that discriminate against women. These have yet to achieve their full objectives. Some long-term initiatives have seen breakthroughs. For example, five years of advocacy and social mobilization helped bring about a public debate on the sexual abuse of women and children for the first time in Pakistan’s history. Some advocacy and social mobilization work is never-ending. All of it is subject to the vicissitudes of a volatile political

environment in which setbacks are inevitable. UNICEF's 2001 Annual Report states, for example, that the GOP continues to show resistance to working with NGOs, despite progress reported in the previous year (p. 12).

Some advocacy and social mobilization initiatives have fallen short of expectations. For example, the communication associated with the Iodine Deficiency Disorders (IDD) Prevention and Control Programme appears to have been more successful at raising awareness about iodized salt

Findings

- *Attribution difficulties and inadequate monitoring data make it impossible to determine the extent to which advocacy and social mobilization have affected macro-trends and social indicators.*
- *The Girl Child Project and the UPE Sialkot Project are examples of advocacy and social mobilization initiatives that have clearly made significant contributions to the broad objectives of the MPO.*
- *Evidence suggests that the GOP's increased attention to children and women and its emphasis on the girl child are a direct result of UNICEF's persistent advocacy work.*

than in getting people to use it. The communication, which was based on social marketing methodologies and the delivery of information via mass media, ran for only several years. A recent evaluation (Ahmed and Nasir, 2001), found that over 70% of households responding to a national survey are aware of the iodized salt label; 63% think they should use it; but only 27% actually do (p 23, 25). Use is up marginally from 19% in 1995 (UNICEF 2002, p. 3). The evaluation discovered that many

people believe that iodized salt is for family planning. According to the research, this misconception was the reason why about 20% of respondents who once used iodized salt stopped (p. 30). Such misconceptions are not changed by means of a media campaign alone, and not likely by one that runs only for a few years. Most experts (for example, Chatterjee 1989, Fraser and Restrepo-Estrada 1998, and McKee 2000) would argue that education and interpersonal communication on the ground are needed in addition to mass media under such conditions.

The review by Favin, Tyabji and Mackay (2001) of communication related to the Expanded Programme of Immunization (EPI) and polio eradication found that the communication materials, many of which UNICEF produced, were successful at raising awareness, but "lacked additional attributes" that might make them more effective in changing behaviour (p 8). The review team concluded that "the strong communication focus on polio eradication has diluted or confused the messages on routine immunization" (p. 8). A more in-depth discussion of these issues appears in the case study in Appendix C.

With the exception of projects that have been reviewed or evaluated in depth, there is, overall, scant evidence of tangible results, whether successes or failures. Much of the available information is anecdotal or descriptive of activities. This situation will remain until a more effective system on ongoing performance measurement is in place.

4. Conclusions and Recommendations

What are the ways and means of improving GOP-UNICEF CP performance, and that of its wider partners, in carrying out advocacy and social mobilization in the future?

In keeping with utilization-focused evaluation, the conclusions and recommendations which follow are designed to assist UNICEF and its partners to implement advocacy and social mobilization more effectively over the second half of the Country Programme (CP) and beyond.

The concepts of advocacy and social mobilization and the strategies for them under the first half of the CP are many and varied. No coherent concept or single model dominates. Advocacy and social mobilization take place at many different levels, within and outside of programmes, and with the involvement of many partners. Three distinct models are apparent in the way the CP partners apply advocacy and social mobilization. UNICEF and its partners advocate and mobilize individuals and groups directly on behalf of children and women; they do the same through intermediaries; and they empower children and women to advocate and mobilize on their own behalf in order to claim their rights from duty bearers. It is this latter pattern of action—the rights-holder model—that fits best with a rights-based approach to programming. The Girl Child Project exemplifies this approach, and is by all accounts highly successful. While all three approaches are needed during the remainder of the CP, the CP partners must increasingly make the rights-holder model their priority.

Some UNICEF staff and many staff members among their partner organizations are unclear about the meaning of advocacy and social mobilization and how they are applied within a rights-based framework. Lack of precision and inconsistency in the use of these terms, particularly in major planning documents, has contributed to this misunderstanding. Most conventional definitions of advocacy and social mobilization fall short because they are out of sync with a rights-based approach to programming.

It is recommended that the GOP and UNICEF define advocacy and social mobilization and associated programme communication within a rights-based framework, and explain these terms clearly when they use them. The GOP and UNICEF should increasingly apply a rights-based approach in all advocacy, social mobilization and associated programme communication.

This recommendation will prove challenging to implement. As the evaluation shows, applying advocacy, social mobilization and programme communication within a rights-based framework is markedly different from prescriptive, message-driven communication. It requires a significant conceptual shift and considerable innovation. It is essential that UNICEF and its partners tackle this issue head on. Consistency is critical for any organization that embraces a rights-based approach to programming.

The scope of advocacy and social mobilization under the CP is extensive. The CP team is actively involved in 40 or more programmes and issues where advocacy and social mobilization play a role. UNICEF and its partners may be trying to do too much and at too many levels. The Medium-term Review (MTR) questioned the efficacy of many small, widely-dispersed initiatives (UNICEF 2002). This evaluation shows the need for more intensive advocacy and social mobilization in priority areas, such as the Expanded Programme of Immunization (EPI), where progress toward the goals of the CP is lagging.

It is recommended that the GOP and UNICEF review the CP's advocacy and social mobilization initiatives with a view to a more sharply focused set of priorities over the next few years within the Medium-term Strategic Plan.

Most UNICEF staff perceive that one of their key functions is to promote respect for the rights of children and women through general advocacy and social mobilization. Yet the organization does not give this function due attention, considering that it is the most important means by which UNICEF communicates its core values. The roles and responsibilities of staff in relation to general advocacy and social mobilization are inadequately reflected in job descriptions and in personnel policies. This type of advocacy and social mobilization is generally not well planned

and monitored. All staff members need orientation and some need training and communication support materials. Above all, they need to be clear on what these terms mean and how they are to apply them.

It is recommended that UNICEF Pakistan take steps to ensure that its personnel policies, planning and monitoring and evaluation systems better reflect the roles of staff members in relation to general advocacy and social mobilization, and that staff receive orientation, training and communication support materials where needed.

UNICEF and its partners need to do more to document non-programmatic and high-level programme advocacy and social mobilization. Only in this way will they acquire the institutional memory that is needed in order to learn over time.

It is recommended that UNICEF and its partners document non-programmatic and high-level programme advocacy and social mobilization more systematically in order to track progress and capture important lessons.

The Government of Pakistan's (GOP) institutional capacity is weak relative to UNICEF in relation to advocacy, social mobilization and programme communication. UNICEF's Programme Support Communication Section has, for many years, been one of the GOP's main sources of support. UNICEF's institutional capacity is, however, centralized in Islamabad. The issue of institutional capacity should be examined broadly, and in the context of devolution.

It is recommended that the GOP, UNICEF and their CP partners commission a study on the future of communication support to Pakistan's social sectors with a view to developing sustainable institutional arrangements to support the GOP, where support is needed most over the long term.

UNICEF's provincial offices want more training in advocacy and social mobilization. They and their provincial and district partners need to develop their capacities in these core areas of work. The need to strengthen provincial and district-level capacity will become even more acute as UNICEF and its partners respond to the devolution imperative. This is likely to result in the Programme Support Communication Section focusing more of its attention on capacity-building in the provinces.

It is recommended that UNICEF strengthen the capacity of its provincial offices and their programme partners in relation to advocacy, social mobilization and associated programme communication, and that UNICEF make the organizational changes necessary to sustain this capacity.

The evaluation has stressed the need to improve planning, monitoring and evaluation of advocacy and social mobilization. The GOP and UNICEF need to increase the participation of beneficiaries in this regard. The MTR process clearly demonstrated the value of engaging district-level partners and beneficiaries, especially children, in a major review. UNICEF should do more by example to encourage government to adopt similar approaches. It should begin by improving collaboration internally.

It is recommended that the GOP and UNICEF give greater priority to collaborative and participatory planning, monitoring and evaluation of advocacy, social mobilization and associated programme communication initiatives.

Each component of this evaluation has pointed to weak monitoring and evaluation in relation to advocacy and social mobilization. The monitoring and evaluation system needs strengthening for accountability, and so that it can contribute more effectively to decision-making and organizational learning. The present monitoring system places too much emphasis on activities and too little on results. Neither programme nor general advocacy and social mobilization are adequately tracked. Indicators are inconsistently gender- and rights-sensitive. The system lacks rigour overall.

It is recommended that the GOP and UNICEF adopt a results-based management (RBM) system of performance measurement that is consistent with a rights-based approach to programming, and that reflects programme-wide priorities such as gender equality.

The GOP and UNICEF should look carefully at the experience of the Canadian International Development Agency (CIDA), adopting the best of its RBM system and avoiding its pitfalls. RBM has the potential to bring much-needed evaluation logic to planning, monitoring and evaluation. Moving to an RBM system has major organizational implications for UNICEF, not the least of which is a major role in capacity-building for the Planning, Monitoring and Evaluation (PME) Section. Training in RBM is critically important for all of UNICEF's programme staff and most of its partners.

This report began with a brief overview of macro trends and indicators reflecting the situation of Pakistan's children and women. While the evaluation is unable to shed much light on the extent to which advocacy and social mobilization have affected these macro-level trends and indicators, it has shown where advocacy and social mobilization have contributed to the achievement of project and programme objectives. It has clearly demonstrated that advocacy and social mobilization play an indispensable role in the CP. Equally important, the evaluation has provided the CP partners with new information, important lessons and areas where significant challenges remain.

References

- Ahmed, A. and Z. Nazir (2001). *Performance Evaluation of the IDD Control Programme (2000-2001)*. Report prepared by the Pakistan Institute of Development Economics for the Nutrition Section, Planning and Development Division, Government of Pakistan and UNICEF, Pakistan.
- Canadian International Development Agency (2001). *CIDA Program Framework for Pakistan 2001-02 to 2005-06*. Ottawa: Canadian International Development Agency.
- Carnegie, R. and Weisen, R. (2000). "The ability to act: Strengthening people's life skills." in *Involving People Evolving Behaviour*. New York: UNICEF.
- Chatterjee, A. (1989). *Can Mass Media Change Anything?* Ahmedabad: National Institute of Design.
- Croll, E. (2001). *The Girl Child Project Pakistan. An Assessment Report, June 2001*. Unpublished report prepared for UNICEF Pakistan.
- Family Planning Association of Pakistan (2000). *Annual Report 2000*.
- Favin, M., Tyabji, R., Mackay, S. (2001). *Pakistan PEI/EPI Communication Review*. Study commissioned by Government of Pakistan, Ministry of Health with the support of UNICEF, WHO, CDC and USAID.
- Fetterman, D. (1996). "Empowerment evaluation: An introduction to theory and practice." In Fetterman, D., Kaftarian, S. and Wandersman, A., Eds. *Empowerment Evaluation: Knowledge and Tools for Self-assessment and Accountability*. Thousand Oaks, CA: Sage.
- Ford, N. (2001). *Operationalization for ESAR of UNICEF Global Guidelines for Human Rights Programming*. Draft document. Nairobi: UNICEF.
- Fraser, C. and Restrepo-Estrada, S. (1998). *Communication for Development: Human change for survival*. London: I. B. Tauris.
- Fraser, C. (1994). *How Decision-makers See Communication for Development*. Report of a survey commissioned by the Development Communication Roundtable with the financial support of UNICEF and WHO.
- Kotler, P. and Roberto, E. (1989). *Social Marketing. Strategies for Changing Public Behavior*. New York: Free Press.
- Manoff, R. (1985). *Social Marketing*. New York: Praeger.
- McKee, N. (2000). "Motivating to Act." in *Involving People Evolving Behaviour*. McKee, N., Manoncourt E., Yoon, C. and Carnegie, R. eds. Penang: Southbound and United Nations Children's Fund.
- McKee, N. (1992). *Social Mobilization and Social Marketing in Developing Communities. Lessons for Communicators*. Penang: Southbound.

- Mintzberg, H. (1987). "Crafting Strategy." In *Harvard Business Review*, No. 87407.
- Organization and Management Development Center, Institute of Leadership and Management. (2002). *Evaluation and Documentation of Universal Primary Education Project Sialkot*. Lahore: UNICEF-Punjab.
- Pakistan and UNICEF (1999). *Country Program for Children, Master Plan of Operations 1999-2003*. Islamabad: UNICEF Pakistan.
- Patton, M. (1997). *Utilization-Focused Evaluation*. 3rd edition. Thousand Oaks, California: Sage Publications.
- Qureshi, S. (1999). *Sustainability Study of the UNICEF/FPAP Girl Child Project*. Islamabad: Swiss Agency for Development Cooperation.
- Raasta Development Consultants (2002). *Documentation of UNICEF's Advocacy and Social Mobilization Strategies and Survey of Stakeholders. Vol. 1, Main Report*. Prepared for the United Nations Children's Fund, Islamabad, Pakistan.
- Roche, C. (1999). *Impact Assessment for Development Agencies: Learning to Value Change*. Oxford: Oxfam-UK.
- Stiles, J. M. (1996). "Challenging Conventional Approaches to Health Communication in Pakistan." *Journal of Development Communication*, Vol. 7, No. 1, June 1996.
- UNICEF (2002). *Mid-Term Review Report. Country Programme of Co-operation 1999-2003*. Draft II report, UNICEF and the Government of Pakistan, January 15, 2002.
- UNICEF (2001a). *Annual Report*. Islamabad: UNICEF Pakistan.
- UNICEF (2001b). Terms of Reference, Evaluation of the GOP-UNICEF Advocacy and Social Mobilization Strategy, January 1999-June 2001.
- UNICEF (2000). *Annual Report*. Islamabad: UNICEF Pakistan.
- UNICEF (1999). *Report of the Audit of Input Management Practices in the EPI Project, Pakistan Country Programme*. New York: Office of Internal Audit.
- UNICEF (n.d.). *Girl Child Programme, Family Planning Association of Pakistan & UNICEF*. Power Point presentation.
- White, A. T. (1982). "Why community participation? A discussion of the arguments. *Assignment Children*, 59/60. Geneva: United Nations Children's Fund.
- World Health Organization, Health and Welfare Canada and Canadian Public Health Association (1986). *Ottawa Charter for Health Promotion*. As adopted by delegates to the International Conference on Health Promotion, Ottawa, November 17-21, 1986.
- Young, E. (1988-1989). "Social Marketing: Where It's Come From; Where It's Going." in *Health Promotion*, Winter 1988-1989.

Evaluation Questions

Key Questions

1. What is the CP's overall advocacy and social mobilization strategy as conceived in relevant programme documents, as understood in the minds of pertinent UNICEF staff, collaborating partners and other primary stakeholders, and as translated into a wide range of programmes, projects and initiatives, including the three selected associated interventions?

Related question: Is the CP's overall advocacy and social mobilization strategy a coherent strategy, as conceptualized by the CP team and key stakeholders?

2. What are the actual programmatic and non-programmatic advocacy and social mobilization initiatives carried out by UNICEF and its key partners since the beginning of the MPO?

Related question: What are the array of initiatives that comprise the macro and specific strategies for advocacy and social mobilization, and how sophisticated are these in targeting messages in different ways at different audiences?

Related question: By what manner and process within UNICEF, government and other partners do the Sections, Ministries and Departments collaborate in planning, implementing, monitoring and evaluating advocacy and social mobilization initiatives?

3. What has been the contribution [of the CP's advocacy and social mobilization strategy] to the realization of the MPO's objectives with respect to three programme initiatives: polio eradication and vitamin A supplementation, universal primary education, and empowerment of the girl child?

Related question: How effective has the CP been in carrying out and monitoring progress in relation to the advocacy and social mobilization strategy?

4. If and where possible, what are the associated cost elements so as to maximize the efficiency and economy of advocacy and social mobilization initiatives?

Related question: On what basis has the CP allocated human and financial resources to implement the strategy?

5. What are the ways and means of improving GOP-UNICEF CP performance, and that of its wider partners, in carrying out advocacy and social mobilization in the future, both in general terms and in connection with the three programme initiatives? In particular, what are the lessons learned for replication purposes or rapidly scaling up interventions during the balance of the current programme cycle, and in view of Pakistan's evolving political and administrative environment?

Questions by Component

A. Documentation of Advocacy and Social Mobilization Initiatives and Survey of Primary Stakeholders

1. What do UNICEF, GOP and their other partners actually do—inside and outside of major programme areas—to advocate for child and women's rights, and to mobilize others to improve the situation of children and women in Pakistan?

2. How well do they perform these roles, both separately and jointly?
3. Regarding the UNICEF-assisted initiatives, what should the organization do more of and less of?
4. How do primary actors in UNICEF view their key advocacy and social mobilization roles? How well does UNICEF Pakistan as an organization communicate its role in influencing values, attitudes, policies, legislation, plans and programmes in favour of children?
5. What are the similarities and differences in the perceptions of the primary stakeholders? What is the basis for the similarities and differences?
6. How can effective strategies be made more efficient and scaled up?

B. Polio Eradication and Vitamin A Supplementation

1. What research went into advocacy and social mobilisation planning for the campaigns to support polio eradication and vitamin A supplementation?
2. What advocacy, social mobilisation and programme communication initiatives were undertaken in the campaigns, and to what extent did they contribute to achieving the campaign objectives?
3. What human and financial resources did the CP devote to these initiatives?
4. What causal model of communication did GOP-UNICEF and their partners use and how closely was it followed?
5. To what extent were standard practices of situation analysis, audience segmentation, message design and field-testing of materials followed?
6. What worked well, what didn't and why?
7. What could be done to improve future campaigns based on past experience? For example, should there be a more appropriate balance of advocacy, social mobilization, programme communication and capacity development? What could be done to get government (new local bodies, provincial and federal) and communities to take greater responsibility, ownership and action? What could be done to improve the efficiency and effectiveness of UNICEF's own direct inputs?

C. Universal Primary Education (UPE)

1. What were the strategies for the Sialkot UPE initiative? On what were they based (research, assumptions, causal models, etc.)? How did the strategies evolve over time?
2. What were the CP's human and financial inputs to the initiative (January 1999-June 2001)? What could be done to improve future inputs?
3. In addition to results from the enrolment verification assessment, what more has the initiative achieved to-date relative to changing community attitudes towards UPE, as well as in the way of any other planned and unanticipated results?
4. What worked well, what didn't and why (key factors contributing to success/failure), in relation to the core strategies, including advocacy and social mobilization strategies?
5. What lessons can be drawn from Sialkot that could help the CP scale up primary education initiatives elsewhere in Pakistan? What needs to be emphasized when planning similar interventions in the future? What does the experience to date suggest about the ways and means of lobbying and mobilizing government (new local bodies, provincial and federal), communities and civil society organizations to take responsibility, ownership and action?

D. Empowerment of the Girl Child

1. What is the model of the interventions in terms of its hierarchy of assumptions about causal linkages between interventions (advocacy, social mobilization, and capacity development), girl's empowerment and social change? What are the strengths and weakness of the model? Is there an appropriate balance among the interventions?
2. What have been the major achievements (planned and unplanned) to date? What outcomes has the intervention had on peer groups, families and communities, for example?
3. How can the intervention be made more cost-effective for expansion and replication purposes?
4. What could be done to strengthen the links between this intervention and other child rights advocacy and social mobilization initiatives, including those of UNICEF?
5. What lessons, in relation to advocacy and social mobilization, can be drawn from the experience to date for planning purposes? For example, should a new phase extend outreach horizontally to more girls or vertically, strengthening and/or broadening the scope of interventions directed at present, past and future beneficiaries? What do the initiatives' experience suggest about the best ways and means of lobbying and mobilizing government—particularly new local bodies—and civil society organizations to take responsibility, ownership and action?

List of Key Documents Reviewed

General Documents

- Chapman, J. and Wameyo, A. (2001). *Monitoring and Evaluating Advocacy: A Scoping Study*. London: ActionAid.
- Davies, R. (2001). *Evaluating the Effectiveness of DFID's Influence with Multilaterals. Part A: A Review of NGO Approaches to the Evaluation of Advocacy Work*. London: Department of International Development.
- Favin, M., Tyabji, R., Mackay, S. (2001). *Pakistan PEI/EPI Communication Review*. Study commissioned by Government of Pakistan, Ministry of Health with the support of UNICEF, WHO, CDC and USAID.
- Ford, N. (2001). *Operationalization for ESAR of UNICEF Global Guidelines for Human Rights Programming*. Draft document. Nairobi: UNICEF.
- Freire, P. (1972). *Pedagogy of the Oppressed*. London: Penguin.
- Government of Pakistan and UNICEF Pakistan (2000). *Country Programme for Children 1999-2003. Master Plan of Operations*.
- Government of Pakistan and UNICEF Pakistan (n.d.). *Master Plan of Operation. Government of Pakistan UNICEF Country Programme of Cooperation 1996-98*.
- Lundberg, P. (2001). *Decentralization and UNICEF in Pakistan*. Unpublished paper, April 2001.
- UNICEF (2002). *Mid-Term Review Report. Country Programme of Co-operation 1999-2003*. Draft II report, UNICEF and the Government of Pakistan, January 15, 2002.
- UNICEF (2001). *Annual Report*. Islamabad: UNICEF Pakistan.
- UNICEF (2001). *UNICEF-Medium Term Strategic Plan 2002-2005*. (Draft Summary, dated May 12, 2001. New York: UNICEF New York.
- UNICEF (2000). *UNICEF Pakistan Annual Report 2000*. Islamabad: UNICEF Pakistan.
- UNICEF (2000). *Year 2000 Audit Report on the Pakistan Country Office*. (Summary). New York: UNICEF New York.
- UNICEF (1999). *Integrated Monitoring and Evaluation Plan (IMEP)*. Islamabad: UNICEF Pakistan.
- UNICEF (1999). *Report of the Audit of Input Management Practices in the EPI Project, Pakistan Country Programme*. New York: Office of Internal Audit, UNICEF New York.
- UNICEF (1999). *UNICEF Pakistan Annual Report 1999*. Islamabad: UNICEF Pakistan.
- UNICEF (n.d.). *Annual Management Plan 2001*. Islamabad: UNICEF Pakistan.

Polio Eradication and Vitamin A Supplementation

- Federal Task Force on EPI Acceleration and Polio Eradication, Islamabad (2000). *Social Mobilization and Communication for National EPI Acceleration and Polio Eradication for the 2000 and Beyond*.
- Federal Task Force on EPI Acceleration and Polio Eradication, Islamabad (2000). *House-to-House Micro-planning for Polio/Vitamin A. Guidelines and Training Plans*.
- Hafeez-ur-Rehman (2001). *Quick Assessment of Mosque Mobilization and Communication for Boys Scouts, January 20001*.
- Hafeez-ur-Rehman (2000). *Quick Assessment NID 2000 Communication. House-to-House Campaign (1st Round), District Rawalpindi*.
- National Institute of Health (2001). *House-to-House, National Immunization Days (NIDs), Spring 2001*.
- Nutrition Section, Planning Division, Government of Pakistan and UNICEF Pakistan (1999). *Proceedings of National Vitamin A Strategy Meeting, May 12, 1999, Islamabad*.
- The Consultants Consortium, SoSec-KemC (2000). *UNICEF Third Party Evaluation, EPI Program Punjab, Final Report, July 2000*.
- n.a. (2000). *Communication Strategy NID 2001, January Round*.
- n.a. (2000). *National House-to-House Fall Polio Campaign, October 10-12 and November 21-23, 2000*.
- n.a. (1999). *Assessment of Immunization Coverage-Pakistan. February-April 1999*.
- n.a. (1999). *National NID/Vitamin A Supplementation, Communication Strategy, 1999*.
- UNICEF Islamabad and Ministry of Health, Government of Pakistan (2000). *IEC/Training Materials on Vitamin A*.
- UNICEF Islamabad and Ministry of Health, Government of Pakistan (2000). *National Media Summit on Vitamin A Supplementation, 25, November 1999*.
- UNICEF Islamabad and Ministry of Health, Government of Pakistan (1999). *Media Campaign on Vitamin A Supplementation for Children 1999-2000*.
- UNICEF Pakistan (1999). *Project Agreement between UNICEF Pakistan and the Nutrition Section, Planning and Development, Government of Pakistan for the period October 1-December 31, 1999*.

Girl Child Project

- Croll, E. (2001). *The Girl Child Project, Pakistan. An Assessment Report, June 2001*. Unpublished report, School of Oriental and African Studies, University of London.
- Croll, E. (2001). *The Girl Child Shield Programme, Pakistan. An Assessment Report, June 2001*. Unpublished report, School of Oriental and African Studies, University of London.
- Mannan Rana (2001). *Duty Travel Report for the period May 10, 2001 to May 17, 2001*.
- Qureshi, S. (1999). *Sustainability Study of the UNICEF/FPAP Girl Child Project*. Islamabad: Swiss Agency for Development and Cooperation.
- Binder prepared by Mannan Rana on May 29, 2001, containing Project Cooperation Agreements (Feb 99- Dec 01, July 97-Dec 98), background material, Partner Activity Agreements, detailed budgets, funding proposal for the Swiss Agency for Development and Cooperation, Donor Report June 27, 2000.

Universal Primary Education

- Khan, Mohammad Azhar Khan (2000). *The UPE Process. A Guideline for Implementers*.
- Raasta Development Consultants (2001). *Verification of enrolment Status in District Sialkot, March 2001*.
- Save the Children-UK (2000). *End of Phase II Review, Sialkot Basic Education Programme, November 2000*.
- Save the Children-UK (2000). *Child Labour Project Sialkot, Social Mobilization Report, Project Progress Report, January-March 2000*.
- UNICEF Pakistan (2000). *Case Study, Social Communication for Promotion of Universal Primary Enrolment, Prevention of Child Labour and Communication for Quality Education*. Prepared by Raana Syed, Chief, Programme Communication.

Sanitation, Water, Environmental Education and Technology

- EDC, Enterprise & Development Consulting (Pvt.) Ltd. (1999). *Evaluation of the GOP/UNICEF Water Supply and Environmental Sanitation Programme, 1992-98*.

Nutrition

- Ahmed, A. and Z. Nazir (2001). *Performance Evaluation of the IDD Control Programme (2000-2001)*. Report prepared by the Pakistan Institute of Development Economics for the Nutrition Section, Planning and Development Division, Government of Pakistan and UNICEF, Pakistan.

Case Study of Advocacy and Social Mobilization in Relation to Polio Eradication and Vitamin A Supplementation

The Master Plan of Operations (MPO) 1999-2003 has as its objective to “eradicate wild polio virus from all districts of the country through sustained high routine coverage of OPV [oral polio vaccine] and high coverage during National Immunization Days (NIDs) and mop ups” (p. 81). The MPO has no objectives specific to vitamin A since vitamin A supplementation began during the course of the Country Programme (CP).

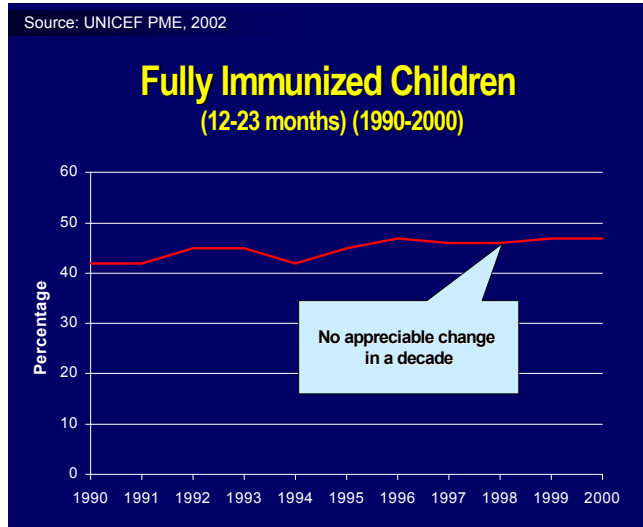
Polio Eradication

UNICEF formed alliances with the federal health ministry, provincial health departments, World Health Organization (WHO), Rotary International and others in a massive programme to rid the country of polio. Throughout the CP, UNICEF played a major role in National Immunization Day (NID) campaigns with its support for advocacy, social mobilization and programme communication. UNICEF helped design the communication strategies for urban, rural and hard-to-reach groups, and it helped train thousands of polio team members in interpersonal communication and motivation. Other key inputs have included:

- Assistance to each provincial government in forming a task force to plan and coordinate communication and social mobilization in relation to NIDs;
- Briefing top political leaders;
- Holding social mobilization events at the federal, provincial and district levels;
- Training 45,000 Lady Health Workers and 392,000 boy scouts to raise awareness about polio;
- Composing and field-testing key messages for distribution by mass media and interpersonal communication channels;
- Preparation of special radio and television programmes for broadcast during each round of NID;
- Establishing a toll-free telephone access number at 54 locations for use by community members in the event that the polio teams fail to arrive on time;
- Designing, pre-testing, printing and distributing print materials to support NIDs (26 million pamphlets, posters, flyers and training booklets in 2000 alone);
- Preparation of media briefing packages;
- Conducting launch ceremonies at the federal level for NIDs; and
- Assisting partners with community events, mosque announcements and mobilizing volunteers.

UNICEF has contributed millions of dollars and thousands of hours of staff time to NIDs since 1994. Government has taken over the responsibility for most of the mass communication inputs to NIDs and has substantially increased its expenditures in this regard. But the results have been mixed. Field research shows that 98% of families with children under 5 years of age are aware of the importance of the polio eradication initiative, following 13 rounds of NIDs since 1999 (UNICEF 2002, p. 21). Since 1999, polio coverage has ranged between 85% and 100%, with 104 acute polio cases confirmed as of the end of 2001 (UNICEF 2002, p. 9).

However, as polio coverage has improved, routine immunization coverage has stagnated, as shown in the chart on the next page. Full immunization coverage is now less than 50%, far from the MPO’s target of 90%. According to WHO, knowledge about routine immunization has, for many years, been in the range of 80-95% (S. Chaudhry, personal communication, July 4, 2001). This would suggest that messages about the Expanded Programme of Immunization (EPI) have reached mothers with children under five, and that most understand the value of immunization.



EPI authorities believe that polio will not be eradicated without improving routine immunization (Dr. R. Hafiz, personal communication, July 4, 2001). Vaccinating the last 10% of the population against polio, particularly hard-to-reach groups, will require an extraordinary effort, including numerous, targeted mini-campaigns.

The challenge for evaluators is to measure the extent to which the GOP-UNICEF advocacy and social mobilization initiatives influence coverage results. The assessment is particularly challenging because it is

difficult to establish a direct causal relationship between communication inputs and coverage data. Many factors influence coverage in addition to communication. The best the evaluator can do under the circumstances is, in Patton's (1996) words, to make "reasonable estimations of the likelihood that particular activities have contributed in concrete ways to observed effects" (p. 217).

All available data suggest that the GOP and UNICEF have the basic ingredients to make their NID campaigns successful. In theory, their communication inputs should have the desired effects, *if all other factors that influence behaviour are working as they should*. The polio eradication campaigns feature situation analyses, communication strategy design, audience targeting and segmentation, pre-testing of materials and messages, use of multi-channels, and attention to interpersonal communication. The campaigns have a reasonable mix of advocacy, social mobilization and programme communication, although several stakeholders told this researcher that the country's political leaders should be more visible in the campaigns.

The campaigns include standard monitoring and evaluation practices and procedures. They incorporate field monitoring during the campaigns, rapid assessments following them, and revisions to subsequent campaigns based on lessons learned. UNICEF and its partners appear to have a reasonable grasp of what communication is working and what is not. For example, they know which channels are most effective for urban populations and which work best for rural audiences. They know most of the gaps in the communication campaigns, and the major reasons for them. Even though much is right with the campaigns, there is considerable room for improvement.

A recent review (Favin, Tyabji and Mackay, 2001) pointed to a number of areas that need strengthening. The review team noted weaknesses in planning and managing the campaigns, for example. The team's major concern was that the communication strategy needed to be oriented more strongly toward behavioural change. The team concluded that communication materials, for which UNICEF has major responsibility, were successful at raising awareness, but less so at changing behaviour. The reviewers made a number of practical suggestions to this end. They made the following observations about parents:

- uncertain of what to do if the team fails to visit or if a child is missed;
- not fully aware of the need to immunize every child during every NID; and
- unclear about the location of fixed sites for routine immunization (p. 8).

The review team's most illuminating finding was that the strong communication focus on polio eradication had "diluted or confused the messages on routine immunization" (p. 8). The campaign partners were robbing Peter to pay Paul, according to the review team. For example, they noted that some parents believe that polio drops protect their children from all EPI diseases. Their conclusion speaks to broader organizational issues as the root cause of lacklustre performance in relation to routine immunization.

Many of the campaign partners express similar concerns. Sattar Chaudhry (personal communication, July 4, 2001), WHO's senior health education advisor, believes that the door-to-door approach to the polio eradication campaign is partially responsible for missed routine immunization targets this past year. UNICEF's Dr. Kyaw-Myint, Senior Programme Officer (Health Section), believes that the door-to-door approach is necessary to eradicate polio, but concedes that it undermines opportunities for community mobilization (personal communication, January 11, 2002). Community mobilization appears to have played a key role in achieving better results for routine immunization coverage under a fixed-centre approach in the late 1980s. Communities owned and took responsibility for EPI more so then than now. Individuals and civil society organizations donated space, time and other resources to ensure that the campaigns were successful. In contrast, there is little evidence of social mobilization or community ownership in the door-to-door approach. Many unqualified vaccinators were recruited, paid, trained—often poorly—and sent out to get their work done often without proper supervision. Many did not bother to remind parents about the need for routine immunization, or to hand out pamphlets that UNICEF had prepared for this purpose (Dr. Kyaw-Myint, personal communication, January 11, 2002). The sustainability of the door-to-door approach is doubtful. However, reverting to a fixed-centre approach is inadvisable when polio eradication is the first priority.

Experience globally shows that routine immunization coverage sometimes falls or remains static when all efforts are focused on polio eradication. This issue, which is beyond the scope of this evaluation, needs to be taken up by UNICEF and its partners. In the meantime, UNICEF and its partners have an exceedingly difficult challenge on their hands. They need to strengthen the communication campaign not only to eradicate polio, but also, to dramatically improve immunization coverage.

It is recommended that the GOP, UNICEF and their partners re-examine their EPI and NID strategies and redouble their communication efforts aimed at increasing routine immunization coverage.

It is recommended that the GOP, UNICEF and their partners follow up on the suggestions contained in the report of the PEI/EPI Communication Review. They should monitor the changes and adopt the innovations that prove successful.

Vitamin A Supplementation

Vitamin A supplementation is a success story. The NID rounds in 1999 reached 90-100% of all children under 5 years of age (UNICEF 2002, p. 9). The advocacy initiative behind this accomplishment is a story untold.

Pakistan was the last country in the world to include vitamin A supplementation within its polio eradication campaign. Initially, senior government officials were unconvinced of the need for vitamin A, and concerned about having to bear the costs of the programme over the long term. UNICEF mounted an intensive, but low-key advocacy initiative. The Country Representative

took two senior federal government officials to a consultative group meeting on vitamin A in South Africa in 1999. This won over some decision-makers, but not all.

Staff in the health section lobbied hard with government officials and with sister UN organizations, mobilizing support from wherever they could. They flooded the government and various interest groups with the latest in medical research and mobilized the world's top medical experts in this field to write letters encouraging the Government of Pakistan (GOP) to take action.

In May 1999, UNICEF supported a national strategy meeting on vitamin A supplementation with participation from key policy-makers, programme managers, international agencies and NGOs. The aim of the meeting was to develop a comprehensive national strategy to combat vitamin A deficiency. The meeting achieved consensus on the need to move forward, but not everyone fully agreed with the plan of action.

UNICEF redoubled its efforts. It conducted a pilot initiative in one district of Northwest Frontier Province during NIDs. It also arranged to have vitamin A administered during the management of measles cases in Sindh. UNICEF published and distributed the results in a further attempt to change government policy and to dispel lingering resistance. Some of the strongest resistance came from Pakistan's pediatricians and their professional association. UNICEF held seminars on vitamin A supplementation in Lahore and Karachi in an attempt to win them over. UNICEF staff met with the pediatricians and with government officials to press the case.

After years of advocacy, they succeeded in 2000. The Government of Pakistan introduced vitamin A supplementation as part of the NID programme. Vitamin A supplementation is scheduled to become part of the government's routine service in 2002.

Case Study of Advocacy and Social Mobilization in Relation to the Girl Child Project

The Family Planning Association of Pakistan (FPAP) began the Girl Child Project in 1991 with the assistance of UNICEF and the Canadian International Development Agency (CIDA). The Girl Child Project is essentially a human rights advocacy initiative that exemplifies a rights-based approach to programming. It aims to empower adolescent girls to improve their own status in families and in communities, and to equip them to serve as role models and agents of change in the local environments. It provides them with practical skills with which most can generate income.

As shown in Table 3, the Girl Child Project fits the high-level participatory typology in the spectrum of GOP-UNICEF advocacy and social mobilization initiatives. It typifies a rights-holder model of advocacy and social mobilization, as illustrated in Figure 4.

The project's conceptual underpinnings are sound. The project engages adolescent girls in a transformative process that enables them to advocate for their own rights and become agents of change in their communities. This intervention is based on a pedagogical model popularized by the Brazilian adult educator, Paulo Freire, in the 1960s, and employed successfully in many parts of the world. Known as *conscientization*, the pedagogical model differs radically from information-based learning. Rather than focus on absorbing information, *conscientization* strives to transform learners into activists by awakening their consciousness to their own reality (Freire 1972).

While the project is largely about *conscientization*, advocacy and skills training, it involves interpersonal communication and considerable social mobilization. For example, FPAP staff help mobilize male and female community members, school teachers and families. They build alliances with provincial education officials and teachers' associations. The project has also featured provincial seminars and national symposia. These have provided the project beneficiaries with opportunities to share their experiences and advocate for women's rights to a wide audience.

Over the past 10 years, the Girl Child Project has expanded rapidly. Now in its fourth phase, it has grown from 10 locations to about 500 with the support of UNICEF and the Swiss Development and Cooperation Programme. It was evaluated in 1994 (Seers Consultants) and has undergone two recent reviews: a sustainability assessment by Qureshi (1999) and an project assessment by Croll (2001). The analysis which follows draws from these reviews and the author's visit to several project sites in June 2001.

The objectives in the CP that pertain most closely to the Girl Child Project are:

- to empower people, especially children and women, to claim their rights (p. 64); and
- to empower girls and women to improve their status in families and communities (p. 70).

The most closely related output result is "increased empowerment of 20,000 girls and young women to act as role models and agents of change in 500 selected villages and urban slums..." (p. 72).

The project objectives for Phase IV (February 1999 to December 2001) are:

1. To raise awareness in 500 locations directly (130 existing and 370 new), and in 1,500 communities indirectly, on the situation of girls and young women, including children, and on the implications of this situation on community well-being and development.

2. To empower 25,000 girls/young women to participate at all levels of family and community in the areas of health, education and economic self-reliance to serve as agents of change in their respective communities. (UNICEF, n.d.)

As of June 2001, the quantitative targets for Phase IV—370 new locations and 18,500 new direct beneficiaries and 1,500 communities indirectly—were on track with the expectation that the project is likely to meet the CP's cumulative targets of 20,000 girls and 500 locations by the end of 2001. No conclusive data exist to confirm that the project reaches 1,500 communities indirectly. FPAP reports that there is great demand for the project from neighbouring communities (FPAP 2000). It is, however, reasonable to assume that the project benefits the family members and peers of the girls who receive training. They would number at least 200,000.

Qualitative data confirm that the project has been successful in raising the awareness of adolescent girls about their rights. Indicators of awareness are often based on the difference in knowledge before and after the project interventions. It is reasonable to assume that the vast majority of girls entering the programme have little or no concept of their rights since they have little formal education and come from low-income households. Qureshi and Croll gave evidence that most girls can clearly express their rights and the rights of women on completing the programme.

Qureshi noted a “marked difference...in the communication abilities between the trained and untrained girls” (p. 5). The former demonstrated “improved ability to communicate, express themselves, and speak out” (p.5). Qureshi noted several case studies and anecdotal information that demonstrated “a marked improvement in the girls’ influencing and persuasion skills, especially with male members of their families who are the decision-makers” (p. 5).

Croll concluded that the girls who had undergone training were “not only aware of the dimensions of gender inequality, but also of some of its causes” and “their corresponding responsibilities” (p. 17). She found these girls were aware of the importance of educating their families and communities about children’s rights via “persuasion and negotiation” (p. 17). Croll noted that the girls learned to express their rights in their families and in their communities largely without confrontation.

Empowerment is more difficult to achieve and to measure. Although the term ‘empowerment’ has lost the force of its original meaning through over-usage, it is generally understood to mean a process of development in learners, leading to a deliberate effort to transform the situation of their lives (Carnegie and Weisen, 2000). Indicators of empowerment include:

- *Ways of thinking*: critical consciousness to question the status quo, aspirations to strive for a better life, skills in problem solving;
- *Ways of feeling*: feelings of competence, self-esteem and control over the events in one’s life;
- *Ways of behaving*: autonomy, determination to make decisions and follow them through (Wedeen, 1991, cited in Carnegie and Weisen, 2000, p. 142).

The project design recognizes other closely associated indicators of empowerment, such as self-respect, self-reliance and self-worth.

Qureshi and Croll found many of the above characteristics in the girls who had received training under the programme. Qureshi concluded that “the high project impact on girls is most visible in their enhanced communication skills, and increased levels of self-esteem and self-confidence” (p.i). Croll acknowledged the methodological difficulties in attributing empowerment to the

project inputs alone when other factors come into play. However, she found a consensus among girls, parents, teachers and community leaders that the project “has helped girls overcome shyness and that, as they have become more confident in their own knowledge and abilities and aware of larger issues, they were more secure, cooperative and polite in their inter-personal and family relations” (p. 18).

The Girl Child Project promotes empowerment and reinforces the life skills of empowerment through various communication channels. For example, Croll and this researcher noted the effective use of Meena posters, stories and booklets as a vehicle for education and role modeling.

Croll found the project to be cost effective. She calculated the cost at about US\$ 40 per girl child. This level of investment is in line with projects of a similar nature in Pakistan and of good value.

A major shortcoming identified by Croll was the need for follow-up after the participants have completed their training. She cautioned that “without substantial follow-up, the project is in danger of raising the confidence and expectations of girl participants but then stranding them so that they feel abandoned” (p. 23). Several graduates of the programme raised this same issue with this evaluator during his field visit. They called for more assistance in order to access credit and market their products and services. Croll made numerous recommendations to deal with this issue and to strengthen the project where she found other minor weaknesses.

The project could also do more to lobby governments to recognize women’s rights and support development initiatives for women (S. Asad, FPAP, personal communication, June 20, 2001). It could benefit from a more rigorous performance measurement system. It could, as well, benefit from a longitudinal study to track graduates and their families in order to determine the project’s impact.

One area not assessed to date is the relationship between the Girl Child Project and new local government structures. It would be prudent to explore linkages with local government in the future for sustainability and accountability.

Croll’s overall conclusion gives the Girl Child Project a strong endorsement:

This dynamic and purposive project is fulfilling both its strategic objectives and many of its practical objectives. It meets the basic needs of girls by extending their knowledge of health education, child rights and girl child issues and improving their skills in communication and collective activities. More strategically, the Girl Child Project is equipping and encouraging girls to become role models and agents of change in their families, schools and communities and is contributing to positive changes in perceptions and attitudes towards girls by their peers, families and communities. (p. 24)

It is recommended that UNICEF and its partners continue to support the Girl Child Project and explore ways of utilizing the same or similar models where feasible in more districts of Pakistan, with linkages to local government and micro-credit and marketing initiatives.

Case Study of Advocacy and Social Mobilization in Relation to the Universal Primary Education Project, Sialkot

The objectives in the Master Plan of Operations (MPO) 1999-2003 that pertain most directly to the Universal Primary Education (UPE) Sialkot Project¹² are:

- To increase primary school participation, completion and achievement for all children aged 5-9 years, especially girls, hard-to-reach children and potential child labourers in selected districts (p. 150); and
- To mobilize societal, family and community support to increase primary school participation and completion (p. 155).

UNICEF's involvement in the UPE Sialkot Project was an outgrowth of an earlier project, begun in 1997. It aimed at eliminating child labour in Sialkot's soccer ball industry. The Child Labour Project involved partnerships among UNICEF, the Sialkot Chamber of Commerce and Industry, the International Labour Organization, Save the Children-UK, Pakistan Bait-ul-Mal, Bunyad Literacy Commission and the Adult Basic Education Society. The project incorporated remedial measures, such as non-formal education and skills development, as well as preventive measures, such as enrolling children in school at an early age and raising awareness of children's right to education. Prior to the UPE Project, some of the NGO partners were already active in Sialkot advocating for education, mobilizing communities and training teachers. Thus, advocacy and social mobilization during the Child Labour Project helped set the stage for the UPE project.

The shift from a labour focus to education was an easy transformation for UNICEF. As the Child Labour Project began to achieve its objectives, UNICEF turned its attention to education as a means of sustaining the gains made toward eliminating child labour. The focus on UPE made a good fit with the priorities of the GOP-UNICEF MPO 1999-2003.

As the project took shape, much of UNICEF's initial advocacy work centred on the province's political leadership and on senior officials in the Education Department. UNICEF's senior staff carried out much of this high-level advocacy work.

The lobbying efforts led to a formal agreement among UNICEF, the Education Department and NGOs operating in Sialkot. Under the 3-year arrangement (January 1999 to December 2001), UNICEF agreed to contribute US\$ 853,000; the Education Department agreed to manage the project and spend about US\$ 4 million on teachers' salaries, school improvements, textbooks, teacher training and incentives; and the NGOs agreed to take the lead in advocating for UPE and mobilizing communities and families.

The Education Department's financial contribution was at a standard level and consistent with previous budgetary allocations for the district. UNICEF's funds paid for things not normally covered by provincial budgets, such as community-based planning, project preparation, monitoring, capacity-building and advocacy and social mobilization. Social mobilization accounted for the largest portion (38%) of UNICEF's expenditures, followed by monitoring (30%), according to an evaluation carried out by the Organization and Management Development Center (OMDC), Institute of Leadership and Management (OMDC 2002, p. 40).

¹² It is a misnomer to refer to the project as a UPE project, because its objectives were focused more narrowly on enrolment. It is more accurately described as a universal primary enrolment project.

The agreement set out two objectives:

1. To achieve 100% enrolment of 5-7 year-old children by 2001; and
2. To bring about attitudinal change among all the communities toward UPE.

A third objective—retention of the newly enrolled children for at least five years—was added later.

The agreement called for joint management by the Government of Punjab's District Education Officer, under the supervision of the Additional Secretary (Planning) responsible for the Social Action Programme, and UNICEF's Project Coordinator under the supervision of senior staff in Lahore. The project established a broad-based steering committee, headed by Sialkot's Deputy Commissioner with representation from six line departments, the army, Sialkot Chamber of Commerce and Industry, NGOs, local politicians and the media. The provincial minister of education established a UPE high-level committee to monitor the Sialkot initiative and similar projects in other districts.

The project began September 1999 with an inauguration ceremony coinciding with Literacy Day. UNICEF and its NGO partners worked out a general plan for advocacy and social mobilization at the national, provincial, district and village levels. The plan involved a mix of advocacy, social mobilization, programme communication and capacity building. It was a flexible plan and it evolved over time through experimentation.

One of the first tasks was to secure the commitment of high-level decision-makers. The UNICEF Country Representative devoted considerable time to promote the project and the broader goals of Education for All among senior officials in the Government of Punjab and ministers at the federal level. UNICEF persuaded the army to use some of its retired personnel to support the Sialkot project. The Pakistan Council of Social Welfare and Human Rights, one of the NGO implementing partners, met with the President of Pakistan. The President asked Punjab's Secretary of Education to provide him with regular updates following the NGO's presentation. According to the OMDC evaluation, this gave great impetus to the project.

The six implementing NGOs took a lead role in advocacy, social mobilization and associated communication at the community level. They were somewhat thinly spread with one field worker responsible for 30 villages, each village containing about 200 households. The NGOs began by enumerating children aged 5-7 and investigating the socio-cultural make up of each community. They developed social-change strategies based on the information gathered.

The social-change strategies contained a mix of advocacy, social mobilization and communication. The aim was to get communities to take responsibility for schooling and parents to take responsibility for enrolling their children in schools. The NGO field staff lobbied union council members, retired officials, religious leaders and teachers. Working with teachers, they often went door-to-door encouraging parents to enroll their children. They helped form school management committees and provided its members with orientation and training. The details of the advocacy, social mobilization and communication activities varied from one village to another, depending on the local circumstances and the skills, intuition and creativity of the field staff. Highly participatory approaches based on sound community development principles appeared to be most successful at generating community and parental involvement, commitment and action (A. Khan and NGO representatives, personal communication, June 27, 2001). The NGOs used a variety of methods and tools common to participatory rural appraisal (PRA), such as community or "transect" walks.

UNICEF's Lahore office produced posters, brochures, briefing notes, a video and a multi-media presentation to support the UPE Sialkot initiative. The project even had its own flag. The project partners in Sialkot hosted many foreign visitors, senior bureaucrats, politicians and journalists. The implementing NGOs made use of radio, television and the Urdu press to promote the project and its objectives.

Within the first 10 months, the project was close to achieving 100% enrolment in 545 villages and in urban locations in Sialkot teshil. The project partners held a workshop with the district administration of Sialkot to plan to expand the project to the remaining two teshils of Sialkot district. The Education Department agreed to take on increased responsibility using its own resources. According to the project evaluation (OMDC, 2002), the "Education Department Officials were so much motivated that they accepted the challenge...and by September 2000, 100% enrolment was achieved in 1,341 villages" (p. 14).

The project partners were successful at mobilizing Sialkot's private sector. For example, UNICEF persuaded the private sector to fund 80 teachers on an interim basis when the Education Department was unable to provide their salaries. The private sector lent its financial support to more than 20 union councils in response to a campaign to encourage community-private sector partnerships for UPE. Each participating union council received more than US\$ 3,300 from the private sector, a sum which it agreed to match.

In some villages, community members, with the help of teachers, raised funds locally to improve the school infrastructure. The OMDC evaluation found this to be "a healthy sign" of community participation "in the real spirit of social mobilization" (p. 38).

The project met its primary objective, having achieved a 97% enrolment rate for children between the ages of 5 and 9 by the end of 2001 (p. 41). It met its objective in relation to student retention with a drop out rate of only 0.7% (p. 41)¹³. Although the OMDC evaluation was unable to determine the extent to which attitudes changed as a result of advocacy and social mobilization, it was able to show that parental attitudes are now supportive of UPE in the project area. For example, the evaluation found that parents were primarily responsible for enrolling their children in schools, and that 95% of the children enrolled were there because their parents wanted them to go to school (p. 42). The research also determined that 99% of Sialkot parents who enrolled their children in school wanted them to continue beyond the primary level (p.42).

Although the project and subsequent research were unable to measure the extent to which advocacy and social mobilization contributed to enrolment, evidence suggests that they were key contributing factors. The project design hinged on advocating for children's education among parents and mobilizing them to enroll their children, and to take an active interest in the schools. The evaluation recommended that future advocacy and social mobilization campaigns focus on parents since they were the primary decision-makers with regard to enrolment.

Many factors in addition to advocacy and social mobilization contributed to the project's success. For example, quality improvements may have positively influenced enrolment and retention. Some of the implementing NGOs provided teacher training and testing support to improve the quality of education. Some NGOs integrated social mobilization with quality improvements. For

¹³ The evaluation report contains useful information in addition to its insights on advocacy and social mobilization. Data on corporal punishment in schools and on the rise in popularity of private schooling for children from low- and moderate-income households are of particular interest.

example, they held union council meetings in which they gained the support of locally elected officials for new learning outcomes, improved teaching methods and student assessments protocols.

The evaluation concluded that the direct cost to UNICEF was relatively small, and of good value at less than US\$ 2.00 per household over a three-year period (p. 40). The cost of much of the high-level advocacy and communication support activities is, however, not reflected in this figure.

While advocacy and social mobilization contributed to the project's overall success, not all initiatives were successful. For example, field staff were unable to mobilize some parents in areas where the schools were distant from homes. Similarly, they found it difficult to mobilize in villages when teachers were often absent, where teaching staff were transferred frequently, and where teaching posts lay vacant for long periods of time. Some migrant populations were difficult to reach, and not all religious leaders were receptive to the project's goals.

The OMDC evaluation noted weaknesses in the project's monitoring system, notably the absence of a baseline study of the attitudes of parents and other community members. The evaluators found it impossible to accurately measure changes in attitudes towards UPE—one of the two original project objectives—without such data. All of the indicators for monitoring progress in relation to advocacy and social mobilization were quantitative, and not always good measures of advocacy and social mobilization. For example, the “number of meetings held by the school management committees” and the “number of communities sending the monitoring reports” are poor indicators of advocacy and social mobilization. Some of the implementing organizations in the district said they would like to have had indicators to measure community participation in order to determine the optimum level required to achieve and sustain UPE (A. Khan and NGO representatives, personal communication, June 27, 2001).

The Sialkot UPE Project has made an important contribution to the goals of the MPO in that it has provided a model for UPE, albeit with caveats regarding replication and sustainability.

Is the initiative sustainable? The answer to this question is complex. The short answer is that it needs continued support for some time, but appears to be on a sustainable track. The OMDC evaluation found that the interaction between departmental staff and communities and parents was still “far less than the level demanded by UPE as self-sustaining process” (p. 35). It recommended that the Education Department develop a “reach out” policy to make education officers and teachers more accountable to communities. It suggested that the policy be designed to ensure that education officers visit the schools regularly and that teachers “take responsibility for every school-age child in the community” (p. 43). The evaluation recommended that UNICEF continue initiatives designed to improve the quality of education through teacher training, coaching, supervision and the development of a monitoring system that facilitates on going learning (p. 43). Experience elsewhere suggests that quality improvements must go hand in hand with improved enrolment for sustainability. In short, the evaluation suggests the need to continue to develop the government's capacity to deliver quality education services, based on lessons learned to date. The project warrants UNICEF's continued support.

It is recommended that stakeholders follow up on the recommendations contained in the evaluation of the UPE Sialkot Project and strive to improve the quality of primary education and to institutionalize UPE on a wider scale.

While continued support is needed, there are encouraging signs that local and provincial governments have taken steps to institutionalize UPE. For example, the Education Department has launched UPE initiatives in eight additional districts of Punjab, using its own resources. The local government in Sialkot has notified the public that primary school is mandatory and that child labour is banned. It has also made a commitment to equip all girls' schools in the district with toilets and boundary walls (M. N. Javed, District Nazim, Sialkot in an address to the GOP-UNICEF Medium-Term Review, January 15, 2002, Islamabad). These recent developments are unanticipated results of the UPE Sialkot Project and bode well for sustainability.

Government-private sector partnerships are likely to continue in Punjab, but will the government continue to partner with NGOs for UPE? It is, perhaps, too early to answer this question. The UPE Sialkot Project suggests that government-NGO partnerships are critical when developing UPE in other districts, given the important role the NGOs played in mobilizing communities and parents.

Caution is warranted in replicating the Sialkot model and in scaling up UPE initiatives. Sialkot had many advantages over other districts. For example, its enrolment rate was already 74% when the project began (OMDC, p. 41). It had a relatively high level of adult literacy, a vibrant local economy and strong partnerships among government, NGOs, international development organizations and the private sector. It was located close to the provincial capital. As noted earlier, the UPE Sialkot Project was built on a successful project to eliminate child labour. The OMDC evaluation suggests that the Sialkot model cannot be replicated elsewhere without "a number of adaptations" (p 44).

Rapid scaling-up of UPE could compromise quality and undermine community and parental involvement. The Sialkot experience underscores the need for a sound enabling environment in order to bring about change. But Sialkot took years of intense advocacy and social mobilization work when its environment was already conducive to change. Advocacy and social mobilization have important roles to play in bringing about change, but they take time, as the Sialkot UPE experience attests. According to McKee (1992), despite modern communications technology, there is no effective alternative to painstaking advocacy and social mobilization at the community level:

If we look at all of these [successful] programmes at a glance, it is evident that much of their claimed success has depended on interpersonal communication and the participation of community-based workers. ... The overwhelming evidence indicates that in most developing community contexts, there is no substitute for the much more difficult work of community involvement and education. (p. 155)