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tubidu



Co-funded by
the Health Programme
of the European Union



TUBIDU PROJECT

EMPOWERING PUBLIC HEALTH SYSTEM AND
CIVIL SOCIETY TO FIGHT TUBERCULOSIS
EPIDEMIC AMONG VULNERABLE GROUPS

Interim Evaluation Report
June 2013



The Interim Evaluation Report was commissioned by the National Institute of Health Development (Estonia) and it was conducted by the Centre for Applied Social Sciences, University of Tartu (Estonia).

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EXECUTIVE SUMMARY

The general objective of the TUBIDU project is to contribute to the prevention of IDU- and HIV-related tuberculosis (TB) epidemic in the project partner countries. The duration of the project is 36 months – from June 2011 to July 2014. The current report contains the results of external interim evaluation of the project.

The interim evaluation focuses on processes and products of implemented activities. The evaluation relies empirically on evaluation research, which uses ethnographic method of textual analysis to produce evidence that are relevant for answering the evaluation questions. The evidence has been collected from the project documentation, evaluation interviews and participant observation.

The evaluation research reveals that not all the planned activities have been implemented during the evaluation period and that several milestones have not been passed but shifted to the next period. At current stage, the situation does not yet endanger achieving the project objectives, but only enhances risks. The key risk is that work accumulates too much onto the last year of the project and there will not be enough (work)time and financial resources left to produce quality products.

In relation to the questions about the coordination of the project, the collected evidence indicates that more success has been achieved in the formal side of project management and administration and also in creating positive personal relations. Much less has been accomplished in coordinating the work of the core work packages and promoting the participation of the working group members in providing inputs to the products. In order to improve project coordination and lower risks, it is recommended to produce clear input-output graph(s) indicating key activities, necessary inputs, outputs and deliverables with deadlines.

To increase the participation of partners and working group members in producing outputs and deliverables, additional efforts to explicate the expected inputs should be made. Detailed and evaluative feedback to the project partners and working group members should be provided about their input (or the lack of it).

From three deliverables planned for the first interim report period (months 1-18), no deliverable has been produced yet that could meet the quality and correspondence (with technical annex descriptions) criteria. The quality of the textual products and their drafts annexed to the interim report of the project should be improved considerably. As a general guiding principle, the integrity of products should be increased, and comparisons and conclusions added to the textual products. All these quality problems and deviations from initial plans can be fixed in the remaining project period, but additional time and effort is needed.

The project activities have achieved good reach among and coverage of important target groups already. There is no evidence suggesting that reach and coverage targets will be not met by the end of the project. The quantitative targets determined in the technical annex of the grant agreement are important, but even more attention should be paid to the quality of contacts with target groups.

1. INTRODUCTION: TUBIDU PROJECT AND THE EVALUATION TASK

The general objective of the project "Empowering public health system and civil society to fight tuberculosis epidemic among vulnerable groups" (TUBIDU project) is to contribute to the prevention of IDU- (injecting drug users) and HIV-related tuberculosis (TB) epidemic in the project partner countries. The main expected outcome is a reduced burden of TB among IDUs and PLHIV throughout the project area.

TUBIDU project is co-funded by the Executive Agency for Health and Consumers (EAHC) of the European Commission and it will contribute substantially to action 3.2.1 "Improve citizens' health security – Protect citizens against health threats" and in particular to the sub-action 3.2.1.3 "Enhance existing response capacity against biological/chemical/radiological agents/environmental burden of diseases".

The project leader – the co-ordinator in terms of the grant agreement – is the National Institute for Health Development (NIHD, Estonia). The project associated partners and co-beneficiaries are:

- "Dose of Love" Association (DoL) – Bulgaria
- Fundatia Apelul Ingerului Roman (RAA) – Romania
- Tuberculosis Foundation of Latvia (LTBF) – Latvia
- Eesti HIV-positiivsete Võrgustik (EHPV) – Estonia
- Institute of Hygiene (IH) – Lithuania
- Finnish Lung Health Association (Filha) – Finland.

In addition, 5 collaborating partners from the Russian Federation, Georgia, Ukraine, Bosnia and Herzegovina, and Albania are involved in selected activities of the project. The duration of the project is 36 months – from June 2011 (month 1) to July 2014 (month 36).

The evaluation of the project forms the content of work package 3 of the project. According to the grant agreement technical annex, it includes actions undertaken to verify if the project is being implemented as planned and reaches the objectives.

The more specific tasks and tools of the external interim evaluation – the research and results of which are presented in this report – have been agreed upon in the contract between NIHD and the external evaluator (University of Tartu), and in its annexes. The overall task of the current evaluation is to evaluate the processes of the project and also to provide feedback to the project team about the quality of project outputs already produced.

2. METHODOLOGY

The interim evaluation focuses on processes and products of implemented activities.

Process evaluation includes:

- Implementation evaluation – are all the project activities executed as planned (incl. following the timetable) during the first period of the project, and deliverables provided;
- Coordination of activities – timing, interrelations of activities and their outputs; leadership and cooperation.

Evaluation of the products includes:

- Existence of outputs;
- Quality¹ of activities' outputs;
- Reach/coverage of intended target groups by outputs.

The impact of the current state of processes and outputs for further activities, for the provision of deliverables and achievement of objectives, is evaluated as well. In addition, two points are covered:

- Continuous relevance of activities in relation to objectives, target group needs and social problems;
- Sufficiency of activities in relation to objectives, target group needs and social problems.

The respective evaluation questions (see part 4) have been asked in the interviews and questionnaires, and have been taken as the starting point for document analysis evidence collection.

The evaluation relies empirically on evaluation research. The evaluation research concentrates on producing textual evidence that is relevant for answering evaluation questions. It uses the ethnographic method of textual analysis, where quotes from interview answers and documents are the main empirical data (and evidence) to make evaluations and other research statements.

The function of evaluation research is to detect how well is what is stipulated in the grant agreement (and also, what is reasonable and necessary to achieve the agreed objectives in the context of changed circumstances) in coherence with what has been delivered by the time of the interim evaluation, or whether there are any significant contradictions, which may threaten the achieving the project objectives.

The key points of empirical interest for the evaluation research are:

- the promises of the project beneficiaries fixed in the grant agreement and its annexes;

¹ The concept of quality is used in the evaluation in broad terms as a property of an output to perform satisfactorily (within the project) and be suitable for a purpose. In relation to textual products it includes the questions of textual form, sufficiency and adequacy of a content, integrity of a text, correspondence to the general principles of the textual genre (e.g. principles of a strategic plan or a qualitative research report).

- the statements of the project beneficiaries about the progress of the project made in the interim report;
- the factual and evaluatory evidence about the project's processes and results acquired from the interview and questionnaire responses of different actors in the project implementation process;
- the proof of and supporting evidence to the statements of the beneficiaries presented as the annexes of the interim report in the form of written/textual outputs of the project.

The evaluation research results are presented in the next part of the report (3), organised according to the TUBIDU project logic divided into 8 work packages.

The evaluation of processes and products is based on the results of evaluation research. The respective part of the report (4) sums up and provides generalised answers to the evaluation questions asked, with minimum documentary and interview evidence (see part 3). The report concludes with recommendations (part 5).

As a process, the external interim evaluation has been performed in the following stages/subactivities:

- Document analysis – the analysed documents are the grant agreement and its annexes, and the interim report and its annexes.
- Interview with the project coordinator (NIHD) representatives – a 3-hour face-to-face interview in Tallinn, Estonia (17.04.2013 – 13:00-16:10).
- Participation observation of the partners' cooperation and communication in the TUBIDU international steering committee (ISC) meeting in Sofia, Bulgaria (23.04.2013 – 9:00-12:45).
- Focus group interview with the representatives of associated project partners, which was conducted after the ISC meeting in Sofia, Bulgaria (23.04.2013 – 14:00-16:35).
- Interviews with the representatives of associated partners, who are leading work packages. The interview with the Romanian (RAA) partner took place in Sofia, Bulgaria as a face-to-face interview (23.04.2013 – 17:00-17:50) and with the Latvian partner (LTBF) via Skype (23.05.2013 – 15:00-16:45).
- Interview with the representative of EHPV via Skype (06.06.2013 – 15:00-15:30).
- Interview with the EC program officer in Sofia, Bulgaria (23.04.2013 – 18:00-18:50).
- Relying on the suggestions of project partners in the respective project countries, instead of interviews with local collaborating partners, written communication was used for getting feedback. Two collaborating partners from Latvia (Centre for Disease Prevention and Control; Latvian Red Cross) and one from Romania (Marius Nasta Institute of Pneumology) sent answers to the questions.
- Synthesis and analysis of evidence gathered from project-related documents and the evaluation interviews.
- Writing the interim evaluation report.

3. THE RESULTS OF EVALUATION RESEARCH

The evaluation research results are presented, following the TUBIDU project logic and its division into two types of work packages. These provide textual evidence and analytical proof for the evaluation summary in part 4 of the report.

3.1. Project management - horizontal work packages

WP 1: Coordination of the project

According to the grant agreement, the work package includes actions undertaken to manage the project and to make sure that it is implemented as planned. It covers project administration, project financial administration, and project professional activities coordination.

Activity 1: Establishing the project team and setting up the cooperation network

The activity relates to the first four milestones of the WP at the beginning of the project, all of which have been passed successfully by the time of evaluation. The project team reports a “well-functioning steering committee” in the interim report. No problems are reported there. Annex 1 of the interim report provides lists of persons belonging to the international steering committee, those responsible of financial issues, and all the members of working groups.

During the evaluation interviews, several relevant topics having influence on the project implementation were brought out, which will be presented and contextualised below.

The project idea grew out from the local interests and problems in Estonia. The draft of the project was written by NIHD, and all the bureaucracy to prepare the project documentation and to apply for support was done by NIHD. In the selection of countries, the project leaders aimed at finding countries with similar problems. The limited number of countries was deliberate, because – based on the experience of the project leaders – the more partners there are, the more superficial the co-operation is. Partner selection relied on NIHD’s earlier contacts within international co-operation.

The fact that the project team includes both state organisations and NGOs is considered to be very good for the content and dissemination of the project by the representatives of NIHD: “The final target of the project is to empower NGOs, therefore it would be unimaginable to undertake the project just between state authorities – the balance between state and NGO sector organisations is very welcome. It makes project management a little more difficult, but is good for the content.”

The specific role of the Finnish partner Filha – to act as a consultant of activities led by other partners – has caused some tensions and misunderstandings in coordination of WP 7 training activities led by the Latvian partner LTBF. The frictions between Latvian and Finnish partners are known also to the project leader NIHD: “Latvians had problems with that. They are training organisation and experts in the field, and then Finns gave evaluations to their activities”. During the research interview, the representative of LTBF endorsed the expertise of Filha and concentrated on another topic – that they did not get quality input they were expecting to the prepared materials. The representative of Filha,

on the other hand, commented the situation about their contribution to the training strategy in the focus group interview in a following way: „It came out late, in summertime, and there was very little time to comment, it was very difficult to manage”. The inclusion of the Finnish partner as an associated partner into the project team is a result of consultations with the EC during the preparation of the project. At first Filha was planned to be involved as a subcontracting partner.

The project preparation phase took two years together with re-application, and the motivation of partners changed due to that. At times there was no hope that the project will be carried out any more. The process from the acceptance of the project by the EC and the final signing of agreement was also complicated. The amendments to the plan of activities and to the budget have resulted in some incoherence in the project grant agreement technical annex. However, the impression of the project coordinator, NIHD, that other partners got tired and demotivated during the long preparatory process, did not get support from partners’ representatives in the focus group interview.

During the project preparations, ideas were discussed with potential project partners. After the project was affirmed by the EC, NIHD engaged partners into the discussions of the project (e.g. amendments to the budget and correction of project activities) as well. Yet, in some cases, the changes proposed by the EC had a character that NIHD considered it reasonable to make the decisions by themselves: “But nevertheless we tried to avoid the situation we have been in ourselves when participating in such project as regular partner – not to act as a leader partner in a way that we just dictate budget and activities, take it or leave it. We tried to be more flexible and democratic in planning.” The democratic planning of NIHD is appreciated by other project partners.

As a result of quite a long period of project preparation, signing the contract and starting with the activities, some involved persons as well as partner organisations changed during the process and therefore some topics were needed to be discussed over again. The personal changes also pertain to the leading partner NIHD. The EC program officer sees this as the main reason why for example the follow-up survey is questioned by NIHD (see WP 5).

Another consequence of the delays was that the partners got engaged in other projects and other activities. Mainly, the problem has been related to the Romanian partner RAA, who is leading WP 6 and the information materials working group, but simultaneously got Global Fund financing for an even bigger project. There is evidence that most of the motivation and capacity problems have been solved by now and no significant interventions are needed any more.

It was also admitted by the project leaders that during the preparation of the project some mistakes in expenditure planning were made and they argued that significant budget cuts have created the situation where there are no or not enough resources for some of the planned activities (e.g. follow-up study, working group meetings).

To sum up, three main shortcomings can be detected in relation to the activity, which may have impact on the further proceedings of the project:

- The slow start of the project has created the situation where several milestones and deliverable deadlines have been postponed and many of the activities and most of the deliverables have been crowded into the second half or even to the end of the project. It causes some problems in input-output relations between deliverables and raises risks whether all the agreed deliverables will be produced in time and in quality.
- Although some of the important tasks (e.g. leading of two out of eight WPs) have been distributed to other partners, the comparative strength of the leading partner NIHD and the

unequal distribution of roles and tasks in the project has formed the situation, where there is, in terms of the EC program officer, “an imbalance between partners”. Along with the Estonian leading partner NIHD, Latvian partner LTBF, who leads training WP, seems to be very well motivated due to their role in this particular project and the lack of important roles in other such projects. The situation with the Romanian partner RAA, the leader of WP 6, is different due to its engagement in other projects. The specific role of the Finnish partner does not seem to work without problems either, at least if taking into account the evidence from evaluation interviews and their scarce participation in steering committee meeting discussions. The different motivation of the partners and unequal participation in the production of deliverables and other outcomes is not in correspondence with the reasons of an international networking project to elaborate on common interests and find solutions collectively.

- The long and difficult negotiations with the EC, and late changes made into the project because of EC requests, has resulted in a situation where the technical description in the project grant agreement annex has incoherences, some of its content is interpreted differently by the EC and the beneficiaries, and some of the activities present in the technical annex are not totally owned by the project team (e.g. follow-up study).

Solutions to these problems can be achieved by improving the coordination of the project (see activity 4), empowering working groups (activity 3) and starting the process of preparing a sustainability plan as soon as possible (activity 5).

Activity 2: Organising international steering committee meetings

The grant agreement technical annex says that the International Steering Committee (ISC) will meet twice a year (in rotations in partner countries). ISC meetings and the number of these meetings is part of the fifth milestone of the WP. There should be four ISC meetings during the project period.

The interim report states that 3 ISC meetings (incl. that integrated with the kick-off meeting) have been held. In addition, there has been a steering committee meeting in Sofia, Bulgaria, that took place after the interim report had been prepared – in April 2013. No problems are reported in the interim report in relation to that activity. For practical and budgetary reasons the steering committee meetings and international network meetings have been united in location and time, the first one preceding the latter ones. Annex 1 of the report includes materials about the steering committee meetings – agendas, minutes, participant lists.

The purpose, content and use of ISC meetings were discussed in evaluation interviews. From the perspective of NIHD, who organises these meetings, they fulfil their planned function: “We are presenting our activities, worries and successes in a circle. Project leaders are presenting bigger initiatives – evaluation tender, interim report, budget change acceptance, etc. WP leaders are presenting their WPs.” NIHD representatives report “fierce debates in substantial questions” in the past.

The focus group interview confirmed the satisfaction of partners with the meetings and the usefulness of such meetings. The process itself and the “positive energy” from it is appreciated. It provides opportunity to “get to know what is new in other WPs” and to “get together and discuss developments”, but has also a more instrumental purpose in clarifying misunderstandings and getting feedback to problems. Yet, it was also reflected in the interview that “time is not so much to discuss everything”, to go beyond overviews.

Two critical points have been brought out by NIHD in relation to steering committee meetings:

- The participation of partners' representatives is not equally active. On the other hand, these differences in public communication skills are at least partly compensated by private bilateral conversations with project leaders on the subject matters of the meetings after the ISC meetings.
- Another complication is that partners are not eager to send their questions beforehand, although NIHD sends them such reminders before ISC meetings.

The evaluation team members visited the international steering committee meeting in Sofia, Bulgaria. Although the meeting itself took place in a positive and constructive atmosphere, it also revealed the unequal participation in discussions, concurrent with the observations of NIHD representatives and the EC program officer, who also participated in the meeting.

It was also acknowledged by the project leader NIHD in the interview that "most questions [in ISC meetings] are about budget or reporting". Participant observation confirms the bias towards formalities of ISC meeting discussions. Even if substantial questions related to deliverables and other outputs of the project were asked, the discussions did not lead to any new or better ideas or solutions.

The more hidden problem is that some of the important organisational topics are not discussed either in these meetings. Thus, when the observations on the meeting were juxtaposed with the replies from the focus group interview, it appeared that the question related to the increase of working hours for financial reporting, due to budget changes, and possible additional compensation of that work, were not brought out for common discussion, due to the understanding that it is not an important topic for all the partners (which turned out to be a wrong impression). Instead, more time-consuming bilateral communication with NIHD was preferred.

The unequal activity of project partners in the observed steering committee meeting concurs with and reflects the unequal distribution of roles and tasks in the project. There are only two steering committee meetings left in the project; therefore, further amendments would not make an immense difference for the project. Nevertheless, the attempts to empower less active partners in the discussions should be continued. Even more importantly, more time should be spent to discuss substantial questions of the project – viz. the work with deliverables and the quality of deliverables, especially taking into account the fact that working groups/networks are predominantly working virtually (see activity 3). The discussions in steering committee meetings should include reciprocal evaluation of each other's inputs to the deliverables.

Activity 3: Establishing well-operating international working groups/networks

The grant agreement technical annex prescribes setting up three international networks (NW) in order to ensure the quality and implementation of specific WPs, which are: 1) Training and information NW (WP 6, WP 7), 2) Research NW (WP 5), 3) Guidelines NW (WP 8). According to the agreement, networks also serve as advisory boards and meet twice a year (meetings are planned to be held in conjunction with the international network meetings of the project) and in the meanwhile they communicate on a regular basis via e-mail lists and Skype calls.

The interim report notifies about well-functioning working groups (previously known as networks) and regular e-correspondence between members of working groups (WGs). 4 international working

groups were established according to the report – Training WG, Information WG, Research WG, and Guidance WG. Annex 1 of the interim report contains the list of persons recruited to working groups.

The evaluation interviews confirm the changes in working group/network division. The separation of information WG and training WG is reasonable, taking into account the division of the project into work packages led by different partners. The formation of working groups seems to be very straightforward and democratic according to the description of NIHD representatives provided in the interview: “We send to each partner Excel a table for each WG and they filled these in with their national organisations and persons, ...and thus different virtual WGs were formed.”

The work of WGs through e-mail communication is evaluated by project leaders as effective. On the other hand, they also note that “more meetings would be good”. The fact that only few actual meetings of working groups have taken place – contrary to the technical description of the project² (see above) – is attributed to the budget cuts during the preparation of the project by the project leaders. One solution, also described in the grant agreement, to save on travel costs is to combine working group meetings with international network meetings and study tours. But it increases the risk that working group matters remain at the back in these meetings and that important matters are discussed without prompt focus. An even more serious shortcoming of this idea is that the WG members and participants of the international network meetings are most often not the same persons. In addition to the research WG meeting, the expenditures of which were planned into the budget of the project, the guidance WG has also had one face-to-face meeting, using the money saved in other articles of the project.

The project leaders considered it “self-evident that deliverables are produced in cooperation of the WG leader and project partners” in the evaluation interview. The key method of preparing a deliverable is “doing the draft of a deliverable and sending for commenting to others”. The evidence from evaluation interviews with other leaders of WGs indicate that not all is working as it is supposed to be. Thus, LTBF, who is responsible for training WG/WP, expressed in the interview deep dissatisfaction with the situation that nobody except the Estonian partner contributed to the training strategy: “We were expecting more input and involvement; apart from NIHD, others are not contributing... and we are communicating this problem to them also in steering meetings. At some point it seemed that it is an Estonian- Latvian project. Partners are expecting that if you are the leader of WP, it is your work, but in fact it should be the work of all partners.”³ The problems with the information WG appear to be different in nature, compared to the training WG. Romanian RAA leaders of the WP and WG prefer to find solutions by themselves. There have been complaints, for example, from the Lithuanian side that their inputs were neither taken into account nor given any explanation why these were not taken into account.

² NIHD representatives do not agree with the statement of evaluators, on the grounds that the budget of the project includes financial resources only for one WG (research WG). The evaluators admit it but nevertheless consider it necessary to point to the discrepancy between what is planned and agreed in the technical description of the project’s grant agreement, and what has been and will be performed due to budgetary restrictions. The source of the problem lies in the incoherence in the grant agreement – between its annexes.

³ NIHD representatives have commented during the revision of the evaluation report that in fact Lithuanian and Bulgarian partners have contributed to the strategy as well, and that the role of Filha has been significant in improving the strategy.

The project leader NIHD acknowledges that the quality of work in a working group “depends much who is the leader of WG, ... how much material you can get from others”, because “it is a task of WG leader to get input from the members”. Especially the motivating skills of the leader are valued.

The fact that partners and countries tend to work separately and not as a network has been brought forward by the representative of the EC, as the main deficiency (along with the quality of some outputs) of the project. Co-operation in the project tends to stay on the administrative side, but it should be mainstreamed to the production of deliverables in WGs. The key problem in the work of WGs is the lack of significant motivation mechanisms for WG members to provide valuable input to the discussions and the products of the project. Along with leader qualities of WG leaders, it is a question of available resources for the financial motivation of working group experts, of course, which cannot be increased significantly at that point of the project.

Activity 4: Overall coordination and management of the project

The activity includes communicating regularly with project partners, managing the finances of the project, co-ordinating expenditure reporting and organizing progress reporting of the project. Relying on the progress reports, the interim report of the project is produced and the final report will be produced as well.

The grant agreement Annex III specifies the requirements for the interim report, including the requirement to inform “of any deviation from the initial work programme set out in [technical] Annex I to the grant agreement that has occurred or is likely to occur”, and a description of “the work programme planned for the following period”. The interim report is one of the two deliverables of the WP. The interim report has 40 pages and it reports on the period from June 2011 to November 2012. It includes a table of deliverables and milestones, and a more detailed description of the technical implementation of the project, as well as an internal evaluation of the pre-set indicators. In general, the interim report provides a rather formal and overly optimistic account on the progress of the project, especially if juxtaposed with the evidence from the evaluation interviews. It tends to minimize problems with regard to following the agreed time schedule, avoid significant contradictions (e.g. related to the follow-up study, the number of working group meetings), and does not question the quality of processes and outputs (with the exception of the information material WP and WG) produced so far.

In the evaluation interviews a number of relevant topics related to project leadership and coordination were brought out and discussed. In the first version of the project, NIHD was the leader of all WPs. It was the EC’s wish that other partners should have their opportunity to lead as well. Hence, NIHD made an offer to all the partners to lead some WPs. But Bulgaria, for example, denied, on grounds that they are a small NGO. It was discussed and decided that in the case of WPs not led by NIHD, NIHD is an ordinary participant like others and WP leaders should lead. Despite that, there was initially confusion in roles in the training WP.

The general principle of overall coordination approved by the project team is to leave the matters regarding content to WP leaders and keep the coordination of WP activities in the hands of the leading partner – to remind others about schedules, deadlines and objectives. Although the representatives of NIHD feel that they “have to put their foot down on some issues – reporting and deadlines” and “send reminders if necessary”, they rely “first of all [on] a human approach”. The project leader NIHD hopes there is no need of sanctions and is optimistic about the future of the project: “Because at least today we are foreseeing that all the objectives and deliverables are coming. Our mechanisms are working and too much poking and surveillance demonstrates suspicion

and no trust and this diminishes motivation. It is important to keep a hand on the pulse and communicate”.

In general, communication within the project is evaluated by NIHD to be working well: “All this exchange of expert opinions – it is cordial and it is good to see dynamics in there, that all the right persons are in the right places and good things are [being] produced”. In a historical perspective, NIHD has the viewpoint that “communication has become much better”, and that it is “related to the fact that we have met in network meetings – everybody sees the persons behind roles”. They also reflect the difficulties at the first stages of the project: “With Latvians there was a wall at first, but today the communication is very smooth and friendly. Maybe it is because we had two visits to Riga, because we felt this wall – we needed more personal contacts.” LTBF admits the usefulness of NIHD’s visit and personal communication. The importance of personal communication is also emphasised in relation to current “problem areas” of the project, especially related to WP 6.

The project partners are very satisfied with the project leading by NIHD and communication with them: “NIHD is always providing very clear deadlines and tasks”; “with Estonians we have very active communication”; “NIHD does excellent work, they are very supportive”; “NIHD is an excellent partner, they support us, they reply 100% to our messages”, “they are correct in communication – they even came to Latvia to assist us to be leaders of WP 7”; “they are always on time like a clock”; “no room for improvement, everything is good”; “they are professionals in the field, we are very happy that they are coordinating the project”. A more existential rendition of the difficult role of NIHD in the project by RAA includes a confession: “I would not like to be in the place of NIHD. It demands psychology, management and only after comes content.”

There are some reproaches towards other project partners’ communicative performance, most often in relation to RAA. Also, the inactivity of partners to provide input has been brought out by WP leaders. In the interview, NIHD representatives stated: “More enthusiasm was expected by partners, more initiative. ...It is somewhat felt that they do not dare to ask.”

The representative of the EC has a more critical view on the issue of communication and coordination, especially because of its probable negative impact on the deliverables: “Estonian leading partner ...has to ...delegate and ask them [other partners] to deliver... ... if you work in a network, ...you need to have a leader and you need to follow a plan. ... when you depend and the people depend on you, you have to share and you have to deliver.there are connections missing. Between them? Between the work package, between the different activities? Yes. ...They don’t work as a network, they work as individual organizations doing their own business.”

The most critical consequences of the problems in effective coordination and management within the project are the deviations from initial timetables and the quality of outputs, especially when considering their internal coherence, analytical strengths and correspondence with descriptions of the technical annexes of the grant agreement. The content, style and quality of deliverables and other outputs have been the dispute questions between the project team and the EC representative for a longer time period. The position of NIHD on the matter is that the EC representative’s expectations are too broad and do not fit to the initial logic and aims of the project: “We have made it very clear in the project wording that the things we do are very practical, in a very simple language. We cannot expect that only people with higher education are working in CBOs.” The EC representative’s argument is that all these controversial topics should be discussed to be solved and agreed upon as soon as possible, and if there are deviations from the grant agreement, and it seems that there are, all these changes should be justified satisfactorily.

As a reply to the EC representative's reproaches about not following the agreed timetable and the accumulation of activities into the last half of the project period, the project leaders have emphasised, along with self-criticism on that matter, the positive effects of delays on the quality of the deliverables: "The delay in starting the project has played good cards into our hands in fact – we planned to do training and training programme at the same time but now we do trainings first and then the training program. The same pertains to information materials – they should be ready by now, but we do not have research results. ... We are now waiting for the results and will use them in the materials and it will enhance the quality of these materials. There are no problems or delays that would lead to the situation that something will not be carried out." From the point of view of project leaders, there are no open questions about the remaining schedule after the EC accepted the interim report.

The most problematic aspect of project management for the associated partners has been expenditure reporting. Although there have been improvements, NIHD accepts that "this is the part that does not work too well in our project. ...this reporting thing is a little complicated for the partners". Different regulations in countries make the situation more confusing for the partners. The current feedback to expenditure reporting by the partners is mixed: some think "it is good that NIHD is strict, they demand supporting documents", others refer to an increasing job burden due to excessive financial accounting, which should be compensated.

The progress report template has been made relying on grant agreement annexes. The progress reports presented by the partners are not very specific and it is reflected also in the interim report, which is not as informative as it could be. The leading partner sees no significant problem in that, because they "need to be more evaluative in final report than in the interim report. But these reports work in a sense that in each half-year period they look back and think about what they did." The project partners evaluate the laconic character of progress reporting: "It has been the easiest of all, very pragmatic."

To sum up, many of the project partners' representatives and members of working groups are not contributing enough to the project, especially if the ambitious objectives and plans of the grant agreement technical descriptions are taken into account. Project leaders should be more demanding towards partners, working group leaders and project experts without compromising good communicative relations with all the partners. Nevertheless, it has been a very ambitious task from the start for a project like TUBIDU to achieve significant change in TB policies, carried out by a network whose members are mostly working only partially for the project and have other, sometimes more important duties from their perspective.

The positions of the project leaders and the EC program officer, who is responsible for the TUBIDU project to the EC, have quite different renditions about the stipulated content of several deliverables of the project and these should be addressed as soon as possible, preferably also in written form, using among other things the evidence presented in this report. The positions of the evaluators in relation to each particular deliverable and outcome under the dispute are presented in respective sections of part 3 of this report.

Activity 5: Preparing a sustainability plan

There is no requirement for a sustainability plan in the grant agreement, but its technical annex repeatedly emphasises the importance of sustainability of the results – more specifically in relation to networking, training and training materials, information materials and guidelines. A sustainability plan is noted in the interim report description of the technical implementation of the project. Under

the point “Sustainability plan available, describing the measures taken to ensure the continuation of the action after the end of EC funding”, it is admitted that there is no such plan prepared. There is also the promise that “sustainability plan is going to be developed by project managers by M36”.

The interview with the EC program officer also indicated an expectation from the EC for a sustainability plan: “They need to have a sustainability strategy. This would be the long-term development of what they are building now, ...they have to have a longer perspective. ...It should be started as soon as possible. I think, if you have an international network and they are involving stakeholders from different policies and different levels, this is the opportunity to discuss, to make them recognize the value of the project and then buy out and decide how much they would be able to maintain the project networks, results.”

The project leader NIHD admits that they “haven’t discussed that topic with other associated partners yet. It will be the topic for the next steering meeting or meeting after that”. They also point to the fact that a project can have sustainability without a sustainability plan as well, and that is the way they approach many of the project activities, with or without the sustainability plan.

On the other hand, project leaders also consider it impossible to guarantee that everything the project achieves is going to be continued and that is very much related to the nature of (EU) projects: “It is very hard for projects. Nobody wants that the project will remain on a shelf, but it is very hard to oblige partners after the end of project to do something if they do not have any other grants. Real work demands money”.

To sum up, the evaluators’ position is that the quicker the sustainability plan will be discussed, prepared and communicated, the better. In fact it should have been one of the first tasks to start with. A formal plan produced and published right at the end of the project is not what can make the results of this project sustainable. The evaluators suggest to focus on preliminary negotiations with potential financial contributors in the project countries in order to find support for follow-up activities which could increase the sustainability of project results, e.g. for using research methodology and tools worked out within TUBIDU project for subsequent studies of TB situation. We also admit that the form of sustainability discussions and decisions is not the main issue, and as it has been said, although sustainability is a requirement for the project in the grant agreement, sustainability plan is not a mandatory deliverable of the project.

WP 2: Dissemination of the project

According to the grant agreement, dissemination actions are undertaken to ensure that the results and deliverables of the project will be made available to the target groups. The grant agreement technical annex provides a list of dissemination activities and also the table of appropriate distribution channels and target audiences for all project deliverables.

Activity 1: Working out and approving a dissemination strategy and media plans

An approved dissemination strategy is one of the output indicators and a delivery of the project. The dissemination strategy is discussed in singular form in the grant agreement technical annex, thus conveying an expectation that there is one common plan or strategy. The necessary contents of the dissemination and media plan are outlined in grant agreement, in fact.

It is reported in the interim report that a dissemination strategy is prepared. The interim report also says that media plans are updated and submitted by associated partners once per project year. No deviations related to these activities and outputs are indicated in the interim report. The technical implementation part of the interim report communicates about an overall dissemination strategy that was developed by NIHD and approved by the associated partners. It also says that every partner elaborated on a local dissemination strategy and media plan according to the overall dissemination strategy.

The interim report annex includes an exemplary dissemination plan, which also includes some general principles of the dissemination of TUBIDU project activities and deliverables, and the dissemination strategies of 5 partners: DoL, NIHD, EPHV, LTBF, RAA. There are no dissemination plans for IH⁴ and Filha in the annex. There are also media plans for the seven partners, incl. Filha and IH, for the period from June 2011 to May 2012, and six media plans for the period June 2012 to May 2013, including IH, but excluding Filha. RAA has a media plan that covers the whole project period.

The evaluation interview explicates the actual process of producing dissemination strategies and media plans, and their rationale: "This dissemination strategy is worked out by NIHD and it includes target groups and the size of these groups, for whom we communicate our deliverables or just information about the project. In fact, every partner wrote it down, to whom they disseminate the information – that is the point of a dissemination strategy. Plus every country has their media plan. These plans and strategies include compulsory activities we promised in the project agreement, but these may have more content." There is no strict obligation⁵ to implement all the dissemination activities planned in the dissemination plans of associated partners. As the representatives of NIHD have explained in the evaluation interview: "There are certain contents that are compulsory, but these plans also include their own initiatives we are encouraging. We do not punish if something written into plans - for example television interview - is not delivered, except these project agreement activities."

The dissemination strategies of NIHD, EHPV, IH, RAA and LTBF have been compiled using the template prepared by the WP leader organisation NIHD. Bulgarian partner DoL has developed the dissemination plan in their own. The structure of DoL dissemination plan, which includes specification of the dissemination goal, target groups, methods and the distribution of responsibilities among DoL personnel, and the table of activities with the indication of the period of implementation of each planned dissemination event, confirms much better to the standard logic of a strategic plan, compared to the dissemination strategies prepared according to the template, which specify only the target groups and the appropriate dissemination methods for these target groups in each country.

The draft of the dissemination plan, included to the interim report annex 2, asks important strategic questions about the purpose and goals of the dissemination of the project, about the targets of dissemination activities, about appropriate methods of dissemination, and about the timing of

⁴ In fact, IH has a dissemination plan and it was presented to the evaluators by NIHD during the revision of the evaluation report.

⁵ The representatives of NIHD do not agree with this statement of the evaluators, which is based on the interview reply and quoted here in the evaluation report. It is asserted that there is an obligation and that it is a part of the contract between NIHD and the associated partners of the project.

dissemination activities. These questions should be answered for the TUBIDU project as a whole in the common dissemination strategy, which is missing.

The lack of a common dissemination strategy enhances the risk that dissemination activities of the project are not integrated, harmonized and synchronized sufficiently. The EC program officer stated in the interview that this is exactly what has happened: “When I see what they send me as dissemination activities, it’s every country doing differently.” The evaluators were not able to acquire whole picture about the actual dissemination activities implemented in each project country. The comparison of the content of the dissemination strategies nevertheless indicates that there are significant dissimilarities between planned dissemination activities. Thus, in some countries (Latvia, Lithuania, Bulgaria) local municipalities are included as the target group for dissemination of the project, while in other countries (Estonia, Romania) these are not included. The distinctive set of dissemination activities for universities is incorporated into the dissemination strategy of IH, RAA and not of LTBF, NIHD and DoL.

The media plans comprise from 10 (RAA) to 19 (NIHD) activities to be implemented during the interim report period. According to the interview with NIHD representatives, “many events are actually included into these plans retrospectively”, which makes them to documents, which mix the elements of planning and reporting.

To sum up and conclude from the evidence presented above, it seems that in their present form the dissemination strategies and media plans do not support the integrity of the project and could be interpreted as almost redundant, taking into account that all the obligatory dissemination practices are prescribed in detail in the grant agreement technical annex, and that other activities have not been planned strategically and commonly for the project.

The redundancy of the dissemination strategy and media plans in their present form does not mean that dissemination of the project has been or will be inefficient. As the account of other activities of the WP demonstrates, dissemination takes place and reaches the target audiences. But in case there is a dissemination strategy, it should be common and strategic. If needed, it should be supported by operational plans for each country that are coherent with the general strategic framework of dissemination – common aims, comparative situation analysis, common and specific tools, target groups. The media plan should complement the strategy. The material for that kind of work is available – in grant agreement annexes, in the exemplary dissemination strategy and media plan form, and also in separate country plans. The aspects of planning and reporting should be kept separately while documents are prepared.

Activity 2: Producing and disseminating the project leaflet

The grant agreement requires that project leaflet will be produced and disseminated. The interim report says that it is disseminated according to the needs and published electronically. No deviations related to the leaflet are reported.

The interim report annex includes the leaflet, that in principal is the summary of the project on 5 pages in English. The evaluation interview with the NIHD clarified that it “is a short introduction to the project” and is “sent to those we are inviting to our events, to potential cooperation partners. It fulfils its task to inform briefly what the TUBIDU project is.”

The only evaluation remark in relation to the leaflet is that taking into account the most probable level of language skills of a considerable part of potential partners, the leaflet should also be in the

native languages of the project partner countries. It would enhance its communicative power significantly.

Activity 3: Working out and regularly updating the project website and Facebook page

The grant agreement technical annex does not describe the contents of the website but prescribes "linking the website to partner websites and relevant EU networks". A Facebook page is not mentioned in the technical description.

The interim report informs about a regularly updated website and Facebook page and its annexes contain printouts of both channels. The evaluation interview with NIHD representatives provides more information about the use of the webpage: "We are communicating with partners through the webpage. ... It is a dynamic website. It took time to have it but now it works. We are updating it – putting new information about events. We have given links to those we are working with, indicating that they can find documents there. It is a project-centred product and is not meant for target groups. On the other hand, if you need, you can get training materials from this webpage as well." The integration with the NIHD webpage that might appear to be a weakness, provides more sustainability to the dissemination of the TUBIDU project – "... we can keep it there after the end of the project. Otherwise, without the project, there will not be any person who could keep it running."

Google gives the project webpage as one of the first results while searching keyword "TUBIDU". On the negative side, despite the stipulation in the grant agreement technical annex, the WP leaders admitted in the interview that they "haven't mapped it, how much it is linked in other sites". Google search indicates that the project webpage is linked to the webpages of LTBF, Filha and EHPV, but not to the webpages of DoL, IH and RAA. The webpages of DoL and IH contain the information about TUBIDU project. In the RAA webpage the evaluators were not able to find information about TUBIDU project. The project webpage is supported by a Facebook account mainly due to the fact that it is not possible to add pictures to the webpage. It has less than 100 friends, but provides a lively image about the project.

If possible, the project webpage should be complemented with information in the native languages of the project partners. Also, more work should be done to link the project webpage to partners' websites and relevant EU networks, as it is stipulated in the technical description of the project.

Activity 4: Giving radio interviews

There is an overlap of the information WP 6 and the dissemination WP 2 in relation to radio interviews. Radio interviews are listed as an output indicator of WP 6: two interviews per associated partner.

The interim report mentions two radio interviews given in conjunction with the international TB/HIV days and in conjunction with international network meetings. No problems are reported. The interim report annex does not include any files of radio programs.

Activity 5: Producing and publishing the e-newsletter

There is a stipulation in the grant agreement that there will be a "biannual e-newsletter (separate sections for project members and for wider audience)" and that "biannual circular letters on project progress will be regularly sent to relevant European organisations". The biannual publishing of an e-newsletter is one of the output indicators.

Nevertheless, there are no e-newsletters published yet. The interim report promises that the first e-newsletter will be issued in conjunction with publishing the research results. The explanation for not publishing e-newsletters was provided in the evaluation interview with NIHD: “E-newsletter is for announcing news – for example when the research is ready. Today we do not have any newsletter issued yet. The plan is to issue two. Its target group is ministerial officials, international partners. But we haven’t reached the news threshold yet.” Thus, if the project proceeds according to the plan of the WP leaders, one of the output targets cannot be achieved by the end of the project.

WP 3: Evaluation of the project

The evaluation includes actions undertaken to verify if the project is being implemented as planned and reaches the objectives. Project evaluation consists of internal and external evaluations, the content of which is shortly described in the technical annex of the grant agreement. The evaluation instruments determined there are: assessment via questionnaires of operation capacity as a network member and of partners’ and target groups’ satisfaction, evaluation interviews, on-site visits and observations.

Activity 1: Carrying out internal interim evaluation

The results of the internal interim evaluation are presented in the interim report and its annex 3. The interim report includes evaluation tables for all the main activities, and reports the level of achievement and problems encountered. It also has a separate table of predefined indicators of the project process, output and outcome indicators for each specific objective of the project (activities of WP 4–8), the means of verification, and results achieved. As such these are informative for the external evaluator as well. The problem is that the indicator system does not have a single logic – process and output indicators are mixed up. Some of the indicators have target values, while others have not.

Annex 3 of the interim report contains filled-in evaluation forms from each associated partner. The evaluation task by the project leader NIHD includes 6 evaluative questions about the achievements of the partner organisations and of the leading partner during the last 6 months on a 5-point scale. It is emphasised that the evaluation should be done with the local team (not by the project manager alone). It has a field for more qualitative information as well, but nobody contributed there. Despite that, the project leader confirmed in the evaluation interview that “the marks provide some message as well”. The interpretation of these messages should be cautious, because as the partners reflected in the focus group interview: “[Evaluation] numbers depend on ...mood, it is too subjective”. Also, it was suggested in the interview that anonymous evaluation should have been considered.

The evaluators are on the position that qualitative feedback should be preferred over quantitative in internal evaluation. Even more important is to create grounds and opportunities for more open face-to-face discussions about each other’s work, about the inputs, meeting the deadlines and quality requirements, etc., instead of a formal and scalar evaluation.

3.2. The core activities of the project

WP 4: National and international networking

The grant agreement says that transnational and national network meetings and study tours to partner countries will be organized in order to improve collaboration on national and international level and to exchange experiences and best practices. Desk review will be performed to map policies and practices in the TB & HIV field. The activities of WP 4 should lead to specific objective 1 of the project: enhancing horizontal, vertical and cross-border collaboration in the field of TB, injecting drug use and HIV.

Activity 1: Strengthening local networks

The grant agreement stipulates the development of five national networks. Each country, except Finland, is responsible for organizing the work of the national network. It should include representatives from public health institutions, ministries (health, education, justice, internal affairs, etc.), community-based organizations (CBOs) working with vulnerable groups (IDU, PLHIV), professional societies (infectious diseases, tuberculosis, etc.). The national network will serve as a forum to discuss the situation, problems and activities, and also as a forum to present international good practice.

The grant agreement technical annex describes the planned activities and the distribution of duties in more detail. It is written that all the partners organize once a year a one-day meeting with local stakeholders, organizations, institutions etc. The number of national network meetings (15) is a process indicator. Along with well-functioning national networks (5), the number of specialists from community-based, health and social care organisations, who have exchanged good practices and have familiarised themselves with work practice in project area countries, is another output indicator related to the activity.

Reported outcome in the interim report is that “networking, sharing best practice as a result increased knowledge of TB service provision approaches, methods and systems among the participants”. The reported level of achievement is that 6 out of 15 meetings have taken place (two in Lithuania and Romania, one in Estonia and Bulgaria). No problems related to local networking are reported.

The annexes of the interim report include materials about one local meeting in Estonia in February 2012 – the agenda, the list of participants and presentations. 47 persons from 19 organisations were present at the meeting, incl. 3 out of 7 predefined collaborating partners. The information about five other local network meetings can be found in annex 12, the “Training Events Summary” table. According to the presented data, 138 participants in total have taken part in six local network meetings.

Although the general principle of national networks is defined by the WP leaders – “the national network meetings should be similar in each country – the general idea is to initiate discussions around the topics of the project” – the partners have wide freedom in selecting network partners and topics.

Two key critical points emerge in relation to national networking: involvement of NGOs into these networks and effective contacts with governmental authorities, which both are vital for the success of the whole project, and acknowledged by the project partners as such.

The problem with recruiting and keeping NGOs in TUBIDU networks is most acute in Lithuania and Latvia. Thus, it was reported during the evaluation interview that “we have a problem [in Lithuania], we had at the first meeting many partners, ...during that first meeting NGOs asked about financing and we said that no money will be distributed, and they left the network, ...today only two NGOs have remained.” The situation in Latvia is a little bit better, but still the representative of LTBF is not satisfied with the situation: “When we had the first meeting, only part of them came, ...we are informing them anyway. The organisations are mainly in Riga, and they are working separately.” The dominant motivation of NGOs to participate in such projects – to get money for their own activities – applies to other countries as well. More success can be achieved in building the TUBIDU network by using the already existing national networks in the field, as it has been done for example in Romania.

It could also be a problem for NGOs as project partners to form effective relations with governmental institutions, with the responsible ministry, which is very important for the sustainability of the results of the project (see WP 8). It requires long-term work and cannot be completely achieved within a single project like TUBIDU. This is also culturally specific.

The WP leaders promote the approach that existing networks are used for TUBIDU aims, but they do not have very strict control over other partners’ networking activities. The total coverage and 100% reach is not considered to be necessary by project partners, because of the large number of relevant organisations in bigger countries and because of the capacity limits of the project itself. Instead, it is better to have less but motivated partners. Nevertheless, the inclusion of the majority of relevant organisations in the project countries to project networks is highly important for the impact of the project to the TB situation and treatment, and should therefore be addressed by project leaders as well. It is not only an issue of the associated partners if their country networks remain weak. The targeted communication of specific benefits (e.g. better understanding of the needs and obstacles, communication tools with IDUs, training materials for CBOs, new ideas and tools for policy makers) resulting from the project could be the main method of achieving better networking.

Activity 2: Developing international network

The grant agreement annex describes the development of the international network in considerable detail. Network meetings and study tours are planned in five partner countries, so that a study tour will immediately follow an international network meeting. Each partner will organise these events – a 2-day meeting and a 2-day study tour – in their country.

The activity relates to three milestones of the WP: a framework for network meetings and study tours (which is presented in grant agreement annexes), the first international network meeting and study tour organised by month 10, and 5 international network meetings organised by month 36.

The relevant output indicator of the project is as follows: “Number of specialists from community based, health and social care organisations who have exchanged good practices and have familiarized themselves with work practice in project area countries”. The target number has not been set in the technical annex. The number of study tours (4) is a process indicator of the project.

The reported outcome in the interim report is that two international meetings and study tours have been organised: the first international network meeting and study tour were held in Finland and the second in Estonia. During the evaluation process the third international network meeting and study

tour have also taken place, in Bulgaria. The annexes of the interim report include materials about two international network meetings in Helsinki (March 2012) and Tallinn (October 2012) – agenda, list of participants and presentations. The first meeting in Finland was used to provide introductory information “about the situation of TB and IDU, TB among IDU’s and service providers for vulnerable groups”. There were in total 43 participants in the first network meeting. The second network meeting and study tour concentrated on TB situation and services in prisons (which is one out of the two predetermined topics to be discussed in these meetings). There were 43 participants in the event. The interim report includes 14 presentations.

The evaluation interview with WP leader organisation NIHD provides more detailed information on what is happening in these meetings: “We have involved international experts into these meetings, who can give us a more general European picture on the topic. Also, the representatives of ministries, key persons are participating in these meetings – this is the tool we can use to increase sustainability and put our work into practice, to influence policies” (see WP 8). The international network meetings and study tours are appreciated by the participants.

Despite a minor delay in the beginning, the activity is in schedule by now, and there is no evidence suggesting that the appropriate process indicators will not be achieved.

Activity 3: Producing the country-profiles report about the TB and HIV situation and the related policies, services and practices among IDUs in the project area

The grant agreement technical annex provides quite a detailed methodological description of the desk review (country-profiles report). It has been written that the desk review on TB situation among vulnerable groups in the project area applies data triangulation and rapid assessment, response, and evaluation (RARE) methods and principles. The grant agreement annex also describes the necessary steps for producing of the desk review.

The activity has three milestones and one deliverable, all of which are planned into the first half of the project period. The milestones are: country descriptions by month 10, final report in English by month 13, and the final report in all languages by month 16. Final desk review is also the fourth deliverable of the project.

The interim report suggests new deadlines for the desk review – months 20, 23 and 24 in different tables. The level of achievement reported in the interim report is the following: “Country-profiles report has been discussed and updated among the project partners and at the moment is being updated with 2012 data. Will be ready by M23”. The reason for being late is explicated as follows: “Partners decided to include data from 2012 to the country-profiles report, therefore this part of the desk review is delayed”. The evaluation intermediate report table includes the remark that desk review will be ready for the Delphi communication by month 24.

The interim report annexes include two separate texts:

- “Tuberculosis prevention among injecting drug users in community based organizations” (literature review) – it has 20 pages and has many open spots (marked as such) to be elaborated and included later;
- “Assessment of HIV and TB knowledge and barriers related to access to care among vulnerable groups, including injecting drug users. Overview of the situation in project countries” – it has 63 pages and consists of separate accounts on each project country, without any comparative part or conclusions.

The aims of the desk review from the point of view of WP leaders were explicated in the interview with NIHD representatives: “The point is to provide an overview of the situation for important stakeholders. ...for CBOs, for policymakers, and also for general public. ...Desk review is in principle a written version of what we have done already in international meetings – introducing to each other our situation and discussing solutions.”

The quality of the desk review was criticised by the EC program officer on grounds that it is too descriptive, it does not have comparisons, evaluations or summing up, it is just “some descriptions ...put together into one file”. The WP leaders are aware of the reproaches: “We got from the EC program manager feedback that we should work a little bit more with that – more comparison, more analysis.” The main reason for the dissatisfaction of the EC is considered to be a different perception of who the target audience of the report is: “The issue is that we saw it as practical material for our target group, and our target group is a kind who needs simple, clear text. It is for distribution to many organisations and also international organisations. These are NGOs, medical professionals and local municipality social workers – those are our targets.” In fact, the problems in the quality of the desk review are partially and indirectly admitted also by NIHD: “To guarantee a similar level of these country reports was one of the biggest challenges for our working group leader/manager – good experts are costly.” Nevertheless, the activity is in principle considered to be ready by the WP leaders, because as it was concluded in the evaluation interview by the representatives of NIHD, “each work has its time, persons, and money ...and that has been spent already”. Despite that position, NIHD representatives expressed in the interview also willingness to discuss the issue in ISC meeting and to find possibilities to make changes to the review.

Taking into account the evidence (incl. texts in the interim report annexes), the evaluators agree with the position of EC program officer that the deliverable does not meet the quality agreed in the grant agreement. The country report is clearly not ready – e.g. there is a comparative table with very limited information. The methodological possibilities of triangulation have not been exploited enough, especially with regard to “the potential for rapid turnaround, from data collection to the presentation of the analysis and results”. The review misses comparative analysis. Some additional work should be done. And this work is not about updating statistical data but integrating the prepared literature review (as an introductory framework for comparisons), country profiles and the yet missing comparative section to a single analytical paper.

The desk review has been planned to form a common comparative ground for all the interested parts. Therefore the delay and indecision in matters of quality and content, and the resulting lack of translations, compromises the achievement of the specific WP objectives – “to increase knowledge of TB service provision” and “become more familiarized with work practice in project area countries”. Understanding each other’s similarities and differences would support the quality of discussions and finding common solutions to problems. Moving the deadlines further is not as innocent as it seems, especially if there are doubts about the sustainability of international networks after the project period.

WP 5: Research

The research activities under work package 5 should promote achieving the specific objective 2: “Describing the TB and HIV related knowledge and behaviours and identifying the barriers to access to TB and HIV related health care services among IDUs and PLHIV”. The grant agreement specifies

the means and methods to achieve specific objective 2. In addition to qualitative and quantitative studies, the means also include desk review, which later is included in WP 4.

Activity 1: Qualitative and quantitative study, data analysis and report writing

The methodology of the qualitative and quantitative studies is prescribed in detail in the grant agreement technical annex. The results of the qualitative study are planned to be used to develop the questionnaire of the quantitative study. The relevant milestones of the activity are: preliminary results of qualitative study by month 7; final report of qualitative study by month 12; quantitative research protocol, questionnaire, and ethical review board approval by month 12; data files by month 18; data analysis finished by month 21; final report in English by month 24. Final study report by month 24 is also the seventh delivery of the project.

The activity is related to several output and process indicators, which target values are not totally coherent with each other. 100 participants at focus group interviews and 2100 participants at quantitative interviews is planned. Output indicators include distribution of research report and percentage of national and international implementers of HIV and TB interventions who are informed about the research findings (75%).

The interim report informs that there are the report on focus groups, research protocol, questionnaire of the quantitative study and ethical review board approval. Instead of the initial deadline in month 12, the new delivery date for the qualitative report has been shifted to month 22, i.e. beyond the interim report period. It is reported that the qualitative study (focus group interviews) with 87 participants has been conducted and that the final draft will be ready for translation and dissemination by month 21.

In relation to the quantitative study, it is reported that changes have been made to the sampling method and it has been conducted using RDS methods, with 1946 participants. The change in the sampling method is highlighted and explicated enough. The delivery deadline of the quantitative study (conducted quantitative research) has been shifted to the end of the project period, to month 36, while the preliminary analysis deadline has been set to month 20 and the final report deadline to month 24. There seems to be confusion⁶ over milestones and delivery dates that should be clarified. Other than that, no problems or deviations have been brought forward in relation to these studies.

The focus group interviews' report is included in the interim report as Annex 6. It is a text of 45 pages, with results and recommendations presented on 4 pages – on TB awareness, services and training needs. Most of the report is account of focus group discussions by countries and groups (IDUs and specialists). The methodology and questions are given in the annex of the report. According to the written report data, both intended target groups (IDUs and service providers) have been reached with a sufficient number of participants. The quality of the obtained data (interviews) satisfies the needs of inquiry and implemented activities are sufficient for the achievement of

⁶ The representatives of NIHD do not agree with the statement of evaluators, that there is a confusion of deadlines in the interim report. They indicate that the deadline of the activity shifted to month 36 (conducted quantitative research) is related to the writing and publication of articles in local and international journals. The evaluators point to the fact that the interim report table has a separate row for the activity „articles on research results“. The expected month of the activity is described in the respective column of the table as month 30 and proposed month of delivery to EACH as month 36.

specific objectives of qualitative research. The results indicate that in general, people's knowledge about HIV- and TB-related issues varies by countries and target groups. However, according to the evaluators' opinion the knowledge does not differ drastically.

Annex 7 of the interim report includes a questionnaire of the quantitative study, draft guidelines for study protocol development and study implementation, and exemplary tables. The study protocol and the corresponding questionnaire are very competently designed and usable for the analysis of HIV and TB populations. This document supports the achievement of project deliverables/outputs. The data and experience gathered from qualitative research has been implemented in questionnaires and research protocols. The total number of respondents (1946 persons) is a little bit less compared to what was planned. However, this is not a big problem because the total number of respondents is enough to conduct a statistically reliable analysis.

The project partners evaluate that the research practices are successful and (preliminary) research results are both relevant and useful for further activities of the project. The research also provided additional motivation to the partners of the project, because as the representatives of NIHD expressed in the interview, "they were able to ask their own questions as well in this research." The delay of the results of the quantitative research has been brought out as the main reason why information materials are not ready yet – because these materials should operate with the best quantitative data available about the TB situation. The work package leaders from NIHD announced in the interview that report writing is in process and it should be ready by the beginning of May.

The general preliminary conclusion of the project leaders, based on the research results – that situations are different in project countries and hence, recommendations relying on research conclusions should/could also be very general – makes it necessary to remind that according to the technical description of the project activities, the guidance (known as guidelines in the project technical annex) and recommendations (WP 8) are supposed to rely significantly on research results and should be country-specific.

Activity 2: Follow-up quantitative study

The grant agreement technical annex defines the follow-up quantitative study as the third step in the research work package. It also provides a more specific description of what should be done: "At the end of the project a follow up study with smaller sample size will be conducted in selected locations in project partner countries to evaluate the increase in TB knowledge among vulnerable groups. The sample size will be calculated based on the results of the first study in order to have statistical power to detect significant changes in knowledge. The questionnaire will be a shorter version based on the questionnaire used in the quantitative study". The follow-up study should start in month 26 and be ready by the end of the project in month 36.

Despite the quite detailed description of the purpose and content of the activity, and the distribution of duties in implementing it, the follow-up study is not related to any milestones of the project, neither is the follow-up study determined as a project deliverable.

The interim report is vague in the matter. It has been written that "the activity will be described in the sustainability plan", without any indication on delivery deadlines, etc. The reason for that was explicated in the interview with NIHD representatives, who describe it as a dispute issue and a logical error in the project on several grounds: "It is planned as an activity, but it is not in the project budget and project schedule. We have to discuss about it with EC, who requires it. ...it is not within the timeframe of the project. Also, nobody does such large research every year, at best over two years.

These are so resource-demanding. We have discussed to make some sort of focus group, but it is supposed to be quantitative. ...This is the biggest logical error in the project. It is caused by the fact that at first plans were bigger, but during the negotiations there were cuts, and we did not mention that there will be no resources planned to it, and the EC did not point to that either. ...There is no budget and it cannot be done within this project. We feel expectations from the EC that at the end of the project we will deliver research results. It is not possible. We have to discuss it once more”.

The EC program officer is on the opposite position and points to management faults in NIHD team: “...we had planned a follow-up survey to assess the outcomes – today they are questioning, because there is a change of leadership... If you read what is in the text, ...it says “at the end of the project”, not after. ... [after] 24 months [of the project period] ... they should make a follow up, in order to know: do they increase in something? Do they change the knowledge?”

The evaluators share the view of the EC program officer that the follow-up study should be conducted. It is stipulated as one of the WP 5 activities and described quite in detail in the technical annex of the agreement. So it cannot be a mistake in the grant agreement text. Although it is true that one or one and a half years is very limited time to measure changes – it could provide important measuring tool to measure the success or failure of the project in terms of its impact on TB situation and awareness. Thus, the evaluators strongly recommend to find a solution concurrent to the technical description of the project activities. As the interview evidence indicates (see WP 6 on the possible increase in the information material budget), there could be some possibilities within the project budget to finance the follow-up study at least partially. Other resources of co-financing should be searched for as well. On the other hand, we must also emphasise the fact that the follow-up study is not a deliverable of the project, and neither is there any process, output and outcome indicators related to a follow-up study. Thus, it is possible to achieve all the formal results of the project without doing the follow-up study.

WP 6: Information distribution and awareness rising

The WP 6 activities aim at achieving specific objective 3 of the project: “Raising the awareness of TB and HIV related prevention, treatment and care among vulnerable groups and PLHIV, general population and professionals on services and policy level”. According to the grant agreement technical annex, several information channels will be developed and distributed to IDUs and PLHIV and the general population to provide information related to TB and HIV (special focus on TB symptoms and related health and social care services), such as information brochures, articles and radio interviews.

Activity 1: Producing and disseminating information materials for IDUs, CBOs and general population

The initial plan written into the technical annex of the grant agreement was to produce two brochures (one for IDUs and one for CBO personnel) and one information leaflet about TB for the general population. In addition, the technical annex also includes subactivity 1.4: “Set on information materials for displaying on websites (CBOs, patient organizations, professional societies, public health institutions, websites for the general population, etc.)”. There is no clarification what these materials should be, or whether they are different from those that will be printed and distributed in material form.

Two milestones are related to the activity, which both belong to the evaluation period of the interim evaluation: first drafts of the materials in English by month 10 (translations ready for printing by month 16); TB information materials for vulnerable groups, the general population and professionals by month 18. Information materials are also the sixth deliverable of the project.

The interim report says that drafts of information materials have been prepared and are being further elaborated. The delay with the information materials is reported and related to the delay in research results. Information materials will be finalized – this has been written in the interim report – only after final research results are ready by month 26. Hence, the interim report provides a new deadline for the delivery of the WP, printed information materials, by month 27. The interim report annex contains 6 versions of designed materials – a poster for IDU, a flyer for IDU, two versions of a general population brochure (4 pages), two general population posters, and four textual versions of information materials, with some comments – for IDUs, the general population and CBOs.

The interview with the representative of the WP leader organisation RAA explicates the process that led to changes in communication media. The changes are related to the needs and habits of target audiences: “Initially, as in the project was settled, we should have had 3 kind of materials: brochure for injective drug users, leaflets for the general population and brochure for (community-based) organizations. But after discussion within the working group and steering committee, it was obvious that no-one, no injective drug user, will read a brochure, at least 8 pages, you know. This was the decision, to make something like more easy to read and to have something instead of a brochure ...to have 3 other options instead of a brochure. That means a flyer, a leaflet; ...a small card; ...and a poster. It will be up to every country to decide what kind of material they should use.”

The important point emphasised by the WP leader, which has consequences for the rest of the project as well and makes good scheduling and keeping the deadlines even more important, is the understanding that “the information materials cannot work without other activities”. The accepted and produced information materials should be integrated into next national trainings: “...it’s not only the information materials that should be given to these people, it’s also a problem of training those persons that are providing the information materials. That means – community-based workers, family doctors, TB doctors. Otherwise it won’t work.” The information material distribution should be related to trainings of CBO personnel, at least: “Otherwise it will be something like distributing leaflets to the injective drug users and most probably 1% of them will go to be tested to the TB dispensaries.”⁷

The other issue missed in the preparation of the information materials is that in advertising and communication it is routine practice to test messages and communication channels with the representatives of target audiences. The potential content of the information materials should be discussed at least in trainings and local networks, and if possible also with IDUs, before the decisions on their exact content and form are made. This is much more important for the effectiveness of communication than waiting for some exact quantitative data about the TB situation in particular countries, which seems to be the main obstacle why the materials are not ready. As opposed to the understanding written into the grant agreement annexes, the WP leader considers quantitative data

⁷ The representatives of NIHD have confirmed during the revision of the interim report that activities in TUBIDU project are complex by character and that information materials are part of combined activities – the materials will be delivered to trained CBO workers.

more relevant than the results of the qualitative research performed within this project for the content of information materials, due to the perceived communicative power of numbers.

Another limitation of the selected communication approach – to produce and disseminate written printed materials – was brought forward by the RAA WP leader in the interview: “... information, education, communication materials do not work if they are not working as changing behaviour. ...it was supposed to increase the awareness and this is possible through the information materials. But if you want to change behaviours, it is not possible with one leaflet, with one poster.” In fact it demands much more resources and time, far beyond the capacities of TUBIDU project: “To make this work, you need a network of persons trained ...to realize that TB in the injective drug user or in the general population is a problem. ...in order to change a behaviour, you need at least 10 years of very tough information campaign, otherwise you will not change anything.” The best way to communicate effectively with IDUs about TB is considered, by the representative of the WP leader, to be hiring people who discuss topics with target audiences. The approach would be extremely costly and cannot be financed within the budget of the TUBIDU project. Of course, the existence of more effective but also more expensive alternatives does not make the efforts of the TUBIDU project vain.

The evaluation interview with the WP leader RAA representative indicates that in principal the materials are ready by now: “The text is already ready. And also we make something like a draft design to see how it is looking. If the people will agree that this is the final text, because as I mentioned, not all the feedback was received.right now I submitted the last version of the text to the partners and something like Excel saying what do you want for your country: this kind, this kind, this kind.... from these 3 types.” Yet, some disagreements about appropriate communication channels among project partners, esp. with IDUs, still remain. One of the partners opposed the current plan in the focus group interview: “It is not useful to communicate using a written paper with IDUs. We suggested to use something IDUs are using for communication, not leaflets. But there are financing problems. We cannot use T-shirts... stickers would be useful.” The same partner is also not satisfied with the overall communication in the WG/WP: “It was a little bit difficult to communicate, Romanians were delaying with answers, and they do not use our comments and suggestions to amend materials; they send old versions without explanations.” Others support the WP leader’s proposal.

The evidence demonstrates that the milestones related to the activity have not been passed in the stipulated time and the deliverable has not been delivered. There have been significant delays due to human resource (time) scarcity and problems in co-operation. The question of effective and co-operative leadership of the WP has been raised. If possible, the communication channels should be discussed in local networks and tested with target audiences before being printed. The question of the content and distribution methods of electronical information materials should be decided as well.

Activity 2: Conducting radio interviews

The activity overlaps with the similar dissemination activity (see WP 2). The aim is that two radio interviews in every country should have been aired by month 30. The interim report informs about four radio interviews introducing the TUBIDU project conducted by the associated partners (DoL – 1; EHPV – 1; NIHD – 2). There are no files providing proof to that in the report annexes.

WP 7: Trainings

Training activities form the work package 7. According to the grant agreement annexes, training programs and materials will be developed and international and national trainings will be organised for service providers in community based organizations and health care institutions working with IDUs and PLHIV. A short-term international internship program will be organized for out-reach workers. Recommendations for professional education and continuous training contents for specialists will be developed. The activities should contribute to the specific objective 4 of the project: “Raising the awareness of TB and HIV among community based organizations and health care and public health institutions personnel”.

Activity 1: Conducting the training need assessment and building the training strategy

Assessment of training needs and development of the training strategy was planned for months 2–7. The relevant milestone is an overall training strategy by month 7. The initial assessment of training needs was planned to take place within the focus group interviews of WP 5 research. Training needs are also planned to be assessed through the assessment questionnaire sent to the partner and target organizations/institutions.

The interim report announces that training need assessment is ready. The deliverables and milestones table of the interim report (Table 2.3) does not have a row for the training strategy. The training strategy is mentioned in the internal evaluation of WP 7 as “another, very important tool in WP 7”. It is written that “in the process of developing training strategy all partners had an equal chance to be involved in and as a result a thorough support for the package was done”.

The interim report Annex 9 includes the summary of training needs assessment on 7 pages. It summarises the answers to the questionnaire – the total number of respondents from 5 countries is 168. The summary does not include an analysis. At minimum, the background questions about respondents should have been cross-tabulated with the answers about need assessment. Also, these results should have been juxtaposed with the focus group results, and discussed. In some cases (countries), the frequency of same/similar answers is provided, in other cases not – thus indicating the insufficient coordination of the work in partner countries. Despite these critical remarks, the country specific lists of training needs are informative and could be used in planning trainings.

Annex 9 also contains the training strategy that has been drafted in January 2012. It has 20 pages, plus annexes (incl. the summary of training need assessment, training application forms and evaluation forms). The strategy has 9 subchapters. The subchapter “Initial assessment of training needs and development of training curriculum and materials” does not, in fact, describe any steps for training curriculum development. The subchapter “General topics for TUBIDU training programs” is based on the assessment of training needs and determines the topics that should be discussed during the TUBIDU project international trainings, national trainings and internships. Five general topics have been selected for the training activities: epidemiological trends of TB and HIV; TB and HIV regulations and services available, patients rights and legislation; TB/HIV co-infection; TB prevention among HIV infected individuals, particularly among vulnerable groups – IDUs; and management of patients with TB/HIV, problems and solutions. The training methodology is described with three sentences, which is not enough in the context of the grant agreement stipulation to have trainings with the same content in all project countries. International trainings, national trainings and internship subchapters provide the material from the grant agreement annexes, as well as more specific criteria for participants and trainers, and also time frames for events. The training materials

subchapter is limited to a single sentence from the grant agreement annexes: “During TUBIDU project there will be developed training materials and recommendations for CBOs working with IDUs and PLHIV on training topics”. The strategic questions, such as why, how, when, etc., have not been asked nor answered in the strategy.

The evaluation interview answers reveal that the coordination of the activities in the WP is quite similar to the work in other WGs/WPs. The leading partner provided a general framework, partners collected information using it, and later the answers were compiled. This approach provided results that have been interpreted in different ways by project partners. The representative of WP leader LTBF reported in the evaluation interview that “mostly the results of the training need assessment were quite similar in countries – lack of basic knowledge on TB, like symptoms, also the basics about treatment, about legislation, about the simple question where people can go to check TB – CBOs who work with those people do not know it.” During the focus group interview, a different viewpoint was presented as well: “The idea was to detect our local needs – the result was that different countries have different needs”. The corollary from this observation that “in training, according to the training need assessment, every country has their own topics”, contradicts the initial idea presented in the grant agreement annex that local trainings should have common content.

The delayed status of the training strategy – its delivery deadline was in month 7, but it has not been finalized and approved yet – was explained by the WP leader as follows: “The status of the strategy is following – we decided that it will remain open for a time, so partners can add any points to it. Now we asked for last amendments from partners, so we can close it and it will remain such till the end of the project. By June it will be the final version. ... This paper was ready at the right time, but other partners were hoping that we will write all the strategy by ourselves and they will give just their comments to it. ...From our point of view it is ready, but if the Finnish partner thinks it should be improved we are ready to discuss. ... Our task is to coordinate WP 7, ...it is not our task to do all the work of the WP. We did the skeleton and proposed to the other partners – partners could be more active in compiling this strategy. Only NIHD participated but others were thinking that it is only our task. But it is a very important document for the project. We were all the time reaching for partners in steering committee meetings and e-mail communication to get feedback.”⁸

Thus, a part of the problem with the strategy is that very few partners have made a substantial contribution to it according to the representative of the WP leader organisation LTBF. Nevertheless, WP leaders believe that “the strategy is sufficient to carry on with trainings – there is time frame and description of what we are going to achieve, and we are linking all the training materials, presentations to it”. There seems to be a misunderstanding about the role of a strategy in planning activities among the project team. The suggestion that “...training materials ...will be added [to the empty subchapter of “Training materials”] and ...when trainings are done, we are receiving all training materials and we are adding these to training strategy” does not make the strategy better. The role of a strategy is to provide a framework for looking ahead and acting accordingly, and not to collect materials informing readers about past activities.

To sum up the evidence, the evaluators are on the position that in order to meet quality standards of a strategic plan, the document should be improved. Yet, at the current point of the project, where

⁸ See footnote 2 on page 12.

almost half of the training activities have been implemented already, its relevance has diminished (see 4.3).

Activity 2: Conducting international and national trainings, developing recommendations for professional education and continuous training for specialists, and preparing TB-related training material

The activity includes conducting 3 international and 10 national trainings following the quite detailed descriptions in the grant agreement technical annex. Among other things, it is stipulated that “the contents will include TB and HIV, access to treatment, quality of treatment and services, case management. Local trainings will have the same content (the main focus will be TB control in CBOs and case management in collaboration of CBOs and health care institutions)”. In addition and closely integrated to the training activities, the WP should develop recommendations for professional education and continuous training for specialists, plus comprehensive TB-related training material. The first step of training activities should be, according to the grant agreement technical annex, “development of the training curriculum and materials during the focus group interviews in WP 5”.

Related milestones to the compound activity are: first international and national trainings by month 10; recommendations for professional education and continuous training for specialists by month 16; TB-related training program and materials for community based organizations and health care personnel by month 24; 3 international trainings and 10 national trainings by month 32. TB-related training program and materials are also one of the deliverables of the project.

The reported outcomes of the WP in the interim report are: one international training conducted in September 2012; one national training conducted in Romania in September 2012. The interim report proposes a new time period for national trainings: M8–31. It is also reported that work is going on with the TB training materials and preparation of recommendations is continuing. The interim report also proposed to move the respective milestones and delivery dates to months 32 and 33. The report provides the following explanation: “There is a delay with the recommendations for professional education and preparing of training materials because the training WG considers it very important to wait for the final results of research before finalizing the materials. It is also very important to finish national and international trainings before drawing conclusions and making international recommendations on the topics and methods of TB training.”

The interim report Annex 10 includes the materials of Riga International training – the program, 12 presentations, and the participant lists of 27 participants from 9 countries. The training was about the HIV/AIDS and TB situation in Latvia; tuberculosis treatment; TB prevention; HIV-TB co-infection; drug abuse associated risks: HIV/AIDS, tuberculosis, hepatitis; multidisciplinary cooperation for TB case identification and treatment. The interim report annexes do not contain these training materials.

The documentary evidence and evaluation interviews indicate that the trainings are not going on exactly as planned and agreed in the grant agreement. First of all, no common training curriculum and material were prepared using the focus group interview results. The EC program officer has formulated the problem in the following way: “If you don’t have a guideline that you are implementing and adapting, everybody’s teaching something else. If we read ...you would see that the content [of national trainings] is different.”

The representatives of NIHD admitted in the evaluation interview that the content (and organisational work) of national trainings is given to be decided for the partners. The answer of the

project team to the criticism made by the EC program officer is that as a result of the training needs assessment, general topics for training activities have been determined, and countries prepare their national and international trainings, study tours and network meetings according to these topics. The dispute could be relegated to the question of timing – partners think it is sufficient to have a curriculum afterwards, while the EC requests that it is something that should be made beforehand as a common ground or base for all the training work within the project. It should be reminded here that the common training curriculum onto which to ground trainings during the current TUBIDU project is neither a milestone nor a deliverable of the project. It is also true that the development of TB-related training material has been planned from the beginning to happen during the (national) training period, from month 7 to month 24. Thus, it is too early to expect the training material to be produced and ready yet. The proposal in the interim report, that national trainings should be extended till month 32, means that the deadline for finalising the training materials should also be extended. The project leaders look at the situation positively: “The delay in starting the project has played good cards into our hands in fact – we planned to do the training and training program at the same time but now we do trainings first and then the training program.”

To sum up the confusion with (a) the training curriculum, that was supposed to be based on qualitative research results and precede actual trainings, (b) actual national trainings that were supposed to have the same content everywhere, and (c) training materials, that should be developed in the process of trainings, but with some additional work as well, it seems that the initial logic written (not very consistently) into the grant agreement has not been followed in the process. First and foremost, it demands strong methodological leadership and coordination of all the activities of the WP both by WP leaders and project leaders. The tactics that every partner organises trainings according to the particular training needs in their country is not satisfactory from the perspective of the grant agreement stipulations. On the other hand, the evaluators admit that local trainings carried out according to the local needs are definitely useful for improving the awareness and skills of the participants.

In relation to the participants of international trainings, there is a requirement in the grant agreement annex that these people should be or become local trainers. Although the competition is rather tough for participants, the representative of WP leader LTBF was not absolutely sure in the interview that this condition is fulfilled and also does not see how it could be guaranteed: “Not all of those participating in international training are becoming local trainers (like it is supposed) – we do not know about Russia or Georgia surely. We cannot say 100% these will train later or that they are trainers. We do not know who will be trainers and who will not. We believe some of them will train others, but not all. Maybe there should be some agreement that they will carry on at least some trainings, but right now we do not have such legal agreements. It is impossible to demand. I think 80% will be able to carry on trainings.” In international trainings insufficient language skills are also a problem for many potential participants, which has been (e.g. in training in Latvia) and can be solved at least partially by providing additional synchronous translations.

The collaborative organisations have provided positive feedback to the trainings: “It was useful. Participants, who participated at several trainings, got ideas, best practices which they will try to implement within their country.” The question of covering relevant organisations has also got a positive evaluation by WP leaders in the interview: “Looking at Latvia’s and other countries’ list of participants, it appears that the diversity of participants is quite wide.”

The evaluation interviews have also revealed that “at this stage there is only communication going on [about the matter], but no development of training materials yet”. The final production of TB

training material is related to the production of the guidance: “From that guidance, we are developing training material for self-learning.” The threat coming from this plan is that the guidance should be ready by month 34, that is at the very end of the project, according to the annexes of the grant agreement and also according to the interim report.⁹

To sum up the evidence, several important deviations from the technical description of the activity in the grant agreement have appeared. Although the number of trainings is on schedule, the problem is that national trainings do not have a common curriculum as it was supposed to be. More attention should be paid to the selection of participants of international trainings – it was stipulated in the grant agreement that they will act as trainers afterwards. The evaluation interviews do not give guarantee that the respective output indicator will be achieved.

WP 8: Development of guidelines (the guidance) and recommendations

According to the technical annex of the grant agreement, country-specific guidelines for TB services for community based organizations working with IDUs and PLHIV will be developed, based on the results of WP 4 and WP 5. National stakeholders and policy makers will be provided with country-specific recommendations for this field. The guidelines will serve as a starting point for providing recommendations for national public health programmes on the provision of TB services for IDUs on country level.

Activity 1: Conducting an overview of existing guidelines

The activity is planned to be implemented between months 20 and 26 and consists of two steps: collection and preparation of a short overview of (1) the existing guidelines within the partner countries (all partners) and of (2) the international guidelines including the available indicators for measuring adherence to the guidelines.

It appears from the interview with the representatives of NIHD, who leads the WP, that “the literature overview of guidance and regulations by countries is ready”. There are some hesitations, related to the character of the material, and the reaction of the EC program officer that should be addressed: “It is preparatory work, it is planned to be preparatory. We have a misunderstanding with the EC on this matter as well – they expected that it should have more analysis, but it is working material. It is the first step in preparing the guidance, it is not a separate deliverable.”

Activity 2: Developing the guidance and recommendations, communicating recommendations for national policy makers

The technical annex of the grant agreement stipulates that “based on the results gained in the desk review, research and relevant international guidelines, country- and setting-specific guidelines for TB infection control and intensified case finding in community based organizations working with IDUs and PLHIV will be developed which include proposals for specific activities. The guidelines will also

⁹ NIHD representatives have asserted in the process of revising the evaluation report that despite the deadlines in the interim report, the threat is not real. It is because the first draft of the guidance is ready and the first feedback to it from experts was received already in April 2013. The basic content is available for the training working group and based on it the preparation of training materials has been commenced.

include a tool for monitoring and evaluation of the activities and a set of indicators for quality assurance. The guidelines will serve as a starting point for elaborating recommendations for national public health programs on provision of TB services for IDUs on country level. Guidelines and recommendations will be developed, applying Policy Delphi method.”

The first draft of the guidelines should be circulated among the main stakeholders by month 30 and guidelines should be ready for translation by month 32. The deadline for two deliverables of the WP “TB services provision guidelines for community based organizations” and “Recommendations for policy making in HIV-TB field” is month 34. Month 35 is for introducing the guidelines and recommendations at national network meetings.

There have been some changes in the project related to work package 8. First of all, the key deliverable has been renamed as guidance instead of guidelines. Secondly, there are changes in the timing of the project activities related to the preparation of the guidance. At first, in the grant agreement technical annex, the guidelines (the guidance) were supposed to be the last textual deliverable, but during the recent evaluation interview in April 2013, NIHD representatives promoted the understanding that “guidance materials are what other deliverables rely on a lot. ... From that guidance, we are developing training material for self-learning.” It might appear that this also requires shifting respective delivery dates to earlier months compared to the initial plans. Yet, that it is not proposed in the interim report, where the delivery deadline for the guidance and recommendations is still month 36, i.e. the last month of the project period. If the guidance will be finalised only by month 36, there will be no time to develop training material from the guidance.¹⁰

On the positive side, the interview with NIHD indicates that progress has been made in producing the guidance already and the Delphi process is on its way: “The first version of the guidance has been sent to project partners for commenting, and there will be several waves in broader rounds before the final product is ready. And most certainly we will send it to international partners outside the project. We have sent this first version also to social workers and to the ministry. The social workers [and harm reduction workers] are the right judges for the material. ...The first round is among our own project partners, the next round is among international experts.”

The WP leader NIHD has a general idea about the final product: “We are targeting 20 pages, and in some places what we need is one A4 of material which says what to do when a TB patient comes to the office. The ambition is that the guidance is not only for project countries, but used elsewhere as well. ... The guidance is not legally binding, maybe it is not very clear in this project documentation. ...The recommendations will be for politicians – one page on how to implement this guidance.”

These ideas should be discussed as soon as possible with all who are involved in the project, including and especially with the representatives of the EC, because WP leaders foresee yet another problem: “It could be the same problem with the EC, that for them it will be too simple. But we will be firm. It is our experience that in order to communicate all these international guidances, we have to simplify these, because harm reduction specialists’ education is not always at university level. And most probably we will remain on a little bit different positions. If you have promised guidance for a certain target group then you should think most of all about that target group. But of course it

¹⁰ The representatives of NIHD have refuted the argument of the evaluators on the grounds that it is possible to use draft versions of the guidance as the base for the preparation of training materials. The only risk in this tactic is that the Delphi process could lead too far from the initial draft.

is good if it has broader use. But if anybody but the target group can use it, it is badly made material. Material for NGOs or local government social workers cannot be too long, too complicated for use in work. We should discuss it more.”

The evaluators agree with these arguments. A more controversial position, also communicated in the evaluation interview, is that the guidance will be “done in a general level, so every country can use it.” The problem is that in the grant agreement annexes, it is stipulated that country- and setting-specific guidelines need to be developed.¹¹ The need for country-specific guidelines or guidance and also for country-specific recommendations is suggested by the results achieved within the TUBIDU project so far, viz. the differences in TB situation among IDU and PLHIV, in the training needs of CBOs, and in the social security and health care systems of the project countries.

Even more important is the work after the guidance and recommendations are ready – to influence real policy with these deliverables: “This is the most important thing ...some strategy for how to lobby the needs to the government should be there, incl. TB drugs etc.” The prospects of the success are not univocal, as it was admitted in the interview with NIHD representatives: “We cannot guarantee that our guidance and recommendations are accepted by politicians, by policy makers. We as a state organisation have better opportunities to sell these recommendations, to integrate these into the public health strategy. For the Bulgarian partner who is a small NGO in Burgas, it is a bigger challenge. But they have done a good job inviting the ministerial representatives to the meetings. The Romanian partner is very big organisation and their voice is heard well, most probably. The Latvian organisation is an old organisation and very well linked to the ministry. In Lithuania the partner is state organisation. Thus, we are not afraid...”

4. EVALUATION SUMMARY

The evaluations presented below are based on evaluation research results. These are summed up and organised according to evaluation framework introduced in the methodology part (2.). The evidences grounding the evaluation statements are provided in previous part of the report (3.). The evaluation research results and current evaluations base the key recommendations (see part 5.), how to improve processes in the project and secure the quality of the products.

4.1. Evaluation of processes

Implementation of planned activities

To evaluate the implementation of project activities, the following questions have been asked and answered:

¹¹ The representatives of NIHD have responded to the problem highlighted by the evaluators during the revision of the evaluation report with the following remark: “Every partner will add a short country-specific explanatory note how to apply the guidance in the respective country. But the basic content of the guidance is the same for the whole region. This is also the vision of the EC on the matter.”

- Have the planned activities been implemented during the evaluation period?
- Have the planned and agreed milestones been passed in time?
- Have the deliverables been produced following the deadlines?
- What progress has been made to carry on with the activities?
- Have there been any significant deviations from the planned schedule?
- Are there any foreseeable obstacles to the further implementation of the activity?

The grant agreement technical annex has determined 35 milestones for the project, of which 15 belong exclusively to the interim report period (months 1-18) and 3 more fall into the period before the evaluation research started (month 23, i.e. April 2013) to collect evidence.

From these 15 milestones 4 have not been met during the interim evaluation period. The most significant deviations are related to the WP 6 milestone about designed and printed information materials (agreed to be done by month 18, postponed to month 26); WP 7 milestone about recommendations for professional education and continuous training for specialists (agreed to be done by month 16, postponed to month 32); WP 4 milestone about the desk review (agreed to be done by month 16, postponed to month 23). WP 4 milestone (by month 5) about the framework for national networks and study tours has been presented within the training strategy draft (WP 7). The draft of the overall training strategy has been prepared almost in time (by month 8, compared to planned month 7), but has not been finalised yet.

There have also been minor postponements of some other activities, which have no negative impact on the prospects of the project, but indicate difficulties in starting the project – e.g. the project kick-off meeting took place in month 4 instead of month 2; the first international network meeting and study tour were organised in month 10, not in month 6 as it had been planned.

From the 10 deliverables of the project, determined in the grant agreement technical annex, 3 belong to the period M1-18 – the dissemination plan has been planned to be delivered by month 6, the report on TB and HIV situation by month 16 and TB-related training program and materials for CBOs and health care personnel also by month 16. TB information materials were promised to be delivered by month 20 (January 2013). None of them have been delivered in the form that corresponds to what has been agreed in the grant agreement (see also 5.2). There is no single and common dissemination plan for the project. Instead, every country has its own modified version of the exemplary plan. The report on TB and HIV situation does not include a comparative analysis. Its delivery date has been moved to month 23, but the disputes over the quality and contents of the document were still going on in the same month. The work with TB-related training program and material has started only recently.

All these deviations from the planned schedule are considered by the project coordinator and associated partners to be insignificant for the results of the project and for the achievement of all objectives.

Some additional points outside the milestone and deliverance frameworks of the project should be highlighted in relation to the evaluation of implementing project activities. First, no attempt was made to formulate a training curriculum – as a result, local trainings miss common content as it was planned and agreed in the grant agreement technical annex. Instead, it was decided that every country is selecting training topics according to the local training needs. The project documentation

does not specify an activity period for the preparation of a sustainability plan. Nevertheless, the fact that its preparation has not been started and it has been shifted to the end of the project period is not good for the project. Sustainability issues should have been discussed from the start of the project and decisions should have been made by the half-time of the project period on how to secure the sustainability of the project results and what should be done by project partners during the project period for that.¹²

Conclusion: Relying on the collected evidence, two main challenges in the implementation of project activities can be foreseen. The most important problem pertains to the confusion around a follow-up study, the role of which in the project is described in quite detail in the grant agreement technical annex, but which is not related to any milestones, delivery dates or indicators, nor are there any resources planned for the activity. The second point is more a risk than a problem. It is related to delays of several activities. Not all the planned activities have been implemented during the evaluation period. Several milestones have been shifted to the next period. As a result, additional work should be done in the remaining period of the project to produce quality deliverables and other products (see 4.2). It could be that even more time will be needed than it has been planned in the interim report in order to ensure the quality of the products – for example to prepare, negotiate and test TB information material, if considered necessary. At the current stage, the situation does not put the project into danger, but enhances the risks. The key risk is that work accumulates too much onto the last year of the project and there are no time and human resources to do it in an appropriate order, to follow an appropriate input-output logic. And there are inescapable budget limitations to increase the work hours of project partners and experts.

The evaluation task did not include financial matters; however, if money is spent according to predefined schedule, but products and deliverables have not been produced during that time in the form and content that could satisfy both sides of the grant agreement, this may lead to a situation where additional work is needed, but planned work hours and finances for that have been depleted. The example with the training strategy improvement needs and Filha’s consultation hour limits provides the first sign of threat, which could happen also elsewhere in the project. Another relevant example is the case of the desk review, in relation to what the project leaders have commented in the interview that “every task has its time, human resources and finances” and that “by now these are actually used up, because this activity is ready for us” but they nevertheless seek together with the associated partners some additional possibilities to contribute, in order to make the changes requested by the EC program officer to the review.

Project leadership, coordination and management

Project leadership, management and coordination is evaluated using two questions:

- How successful has been the leadership and co-operation in planning and implementation of the activity?

¹² The representatives of NIHD object to that suggestion by the evaluators as an incorrect reproach, on the grounds that sustainability issues have been discussed with associated partners and these issues are taken into account in the implementation of project activities, and that a sustainability plan is not an official deliverable of the TUBIDU project.

- What have been the consequences and what will probably be the consequences of the established leadership and co-operation quality for further implementation of the activities and/or to the achievement of project (specific) objectives?

From the perspective of project partners the leadership is valued highly and provides a good context for international cooperation in terms of personal relations. The most problematic aspect of project management from the viewpoint of partners has been financial reporting, but the majority of difficulties have been overcome by now. The evidence from the participant observation of the ISC meeting in Sofia and from the evaluation interviews indicates that in some cases the ambition to keep a positive atmosphere in meetings may have the negative side effect that more controversial issues are avoided or not discussed until the positions of all partners have been made clear, even if these are opposite to each other, and a more or less rational decision has been made.

The more significant problems are related to management of the core activities of the project, especially in the WPs led by other partners than the coordinating organisation NIHD. The delegation of responsibilities of WP leadership and defining the roles have not been very successful. DoL refused the offer by NIHD to lead a WP on grounds that they are too small organisation for that role. RAA has had capacity problems during the interim report period to lead WP 6 due to engagement in other international projects. LTBF has felt uncertainty about their decision authority in WP 7, which has been discussed with NIHD. The common understanding has been reached in relation to responsibilities in preparation of training strategy and organising international trainings. The evaluation interview with the representative of LTBF indicates that imprecision still persists in relation to the preparation of training materials from their perspective: “NIHD will be more leader, and we will coordinate somehow, but we do not have clear picture, how we will do it”.

The uneven participation of project partners in providing input pertains to several core WPs – viz. training WP 7, information material WP 6 and national and international networking WP 4. It is also the case that working groups are not operating in the best possible way – these are formed on a voluntary basis and there are no sufficient incentives planned for the members to participate in producing deliverables and other outputs. Another important reason is that there has been very few meetings of working groups – only research working group and guidance working group have had one meeting – because during the budget negotiations in the preparatory phase of the project international network meetings were prioritised and financial resources for working group meetings were reduced.

The situation where project beneficiaries and EACH have several disputes over issues such as what has been agreed in the grant agreement and what is the necessary content of project outputs and deliverables, how important are the changes made in milestones and delivery dates, and how well these are justified, is endangering the future prospects of the project.

The risks identified in the grant agreement technical annex are all related to project management, coordination and leadership. Some of them have realised, others not. The external risk of “low motivation of the target groups (IDU, PLHIV) to participate in the research” has not realised. The low motivation risk of the local stakeholders and service providers to participate in the activities of the project has realised partly in some countries, the most conspicuously in Lithuania in relation to national networking events. The proposed solution – to involve local stakeholders already in the early phases of project and provide them with detailed information on the project area and relevance – is still relevant. There is no evidence that “economical crises will further exacerbate IDU situation and increase the size of target groups”. From the purely instrumental point of view, the increase in TB incidence could make the TUBIDU project more relevant for CBOs and the ministries –

and thus make communication, awareness raising and other project tasks and objectives more easily achievable.

There are also three internal risks identified in the grant agreement annex. The risk of “high turnover rate of the personnel” has realised with some negative consequences. The provided solution to provide continuous supervision is not applicable, because the main reason for the changes is not “burnout and reduction in motivation”, but regular career decisions and organisational changes. The second internal risk – not meeting the deadlines – has realised despite the allegedly realistic timeframe. The proposed solution, to warn the partners of possible shortcomings, has not worked either, as the existence of significant delays in the project demonstrates.

Conclusion: The project coordinator has achieved more success in project management and administration in formal terms – good financial reporting, formalised progress reporting – and also in creating positive personal relations facilitating the project activities. Much less has been accomplished in coordinating the work of the WPs and WGs – to secure participation and inputs from all the countries and WG members. Yet, this is exactly what is needed for achieving specific objectives of the project. Part of the problems in the project coordination can be related to the slightly incoherent technical description of the project activities, milestones and deliverables in the grant agreement annexes, deriving from the early stages of project preparation and negotiations. Considerable efforts should be made now to catch up in schedule, to redefine the input-output relations of the project and communicate those to the project partners and WG members, so they can see why their contribution is relevant and needed.

4.2. Evaluation of products and results

Quality of products

The questions to be answered in evaluating the quality of the products are:

- What is the quality of the produced outputs and deliverables?
- What have been the consequences and what will probably be the consequences of the produced quality in terms of outputs/deliverables – for further implementation of the activities and/or for the achievement of project (specific) objectives?
- Have there been any significant deviations in terms of the content of outputs/deliverables compared with what has been planned? If yes, what have been the consequences and what will probably be the consequences – for further implementation of the activities and/or for the achievement of project (specific) objectives?

The content and quality of the project outputs has been the most disputable and controversial topic according the evaluation research. Significant deviations from the form and content planned in the grant agreement technical annex can be observed. There is no integrated dissemination plan, but plans for each country. Local trainings do not have common content based on a pre-produced training curriculum – instead, each country has their own training topics according to the results of the training need assessment.

One of the results of this situation is that several milestones and deliverable deadlines have been missed (see 5.1). The problems in and controversies over the dissemination plan (WP 2), desk review

(WP 4), TB information materials (WP 6), and training need assessment and training strategy (WP 7) are highlighted and evaluated in the respective sections of part 3 of this report. The success in establishing local networks (WP 4) and working groups (WP 1) has also been uneven in countries and groups.

Some other products follow the initial plans and fulfil their function without significant problems – research tools (WP 5), international network, network meetings and study tours (WP 4).

Conclusion: Out of three deliverables planned to be delivered in the interim report period none has been produced yet that could meet the correspondence criteria with the grant agreement technical annex descriptions. The evidence from the first period of the project indicates that more attention should be paid on ensuring the best possible quality of the deliverables. In general, the integrity of products should be increased, and comparisons and conclusions added to the textual products. All quality problems and deviations from initial plans can be fixed in the remaining project period, but additional time and effort is needed. The most important products and deliverables – the guidance and training materials – are in the active process of preparations. The research promises to provide interesting and methodologically sound knowledge about TB situation and services. In case the deviations from the technical description of the grant agreement are considered to be inevitable and beneficial to the results of the project, these should be justified more thoroughly, with references to the activities and deliverables dependent on the changes proposed and made.

As a guiding principle, the quality of products should be prioritized over the following of the time schedule, at that point of the project. The availability of resources to make additional efforts should be made clear by project coordinators. The timing, human work and financial resources in the remaining project period is a key issue here.

Reach and coverage

The products of the project – both social networking products and textual products – should be made available to the target groups for participation, awareness raising, acquiring new knowledge and behaviour patterns. The relevant evaluation questions are:

- Have the intended target groups been reached (or will be most probably reached)?
- If not, what have been the consequences and what will probably be the consequences – for further implementation of the activities and/or to the achievement of project (specific) objectives?

Reach and coverage issues relate most significantly to the end products. Considerable success has been achieved in reaching policy makers, service providers and PLHIV through the activities of dissemination, networking, research and trainings. Nevertheless, some problems have appeared that should be addressed. The language barrier – not everybody knows English well enough or is willing to acquire new information and study in a foreign language – is something that should be taken into account both in international trainings (there are positive examples of providing synchronous translation) and in project dissemination. The broader use of the native languages of the project countries in written communication (e.g. leaflets, webpage information) could support the sustainability building. A comparative approach is needed in analytical products to make the experience of other countries relevant for all.

In trainings, reach is limited by places of training events and the targeted selection of persons is a paramount task to achieve the set objectives. The potential problems in achieving effective reach among target groups have been brought forward in relation to information materials and awareness raising practices. The effectiveness of contacts can be and should be increased by training out-reach workers and networking CBOs. The quality, not the quantity of reach is primary also in local networking in general. Participation of NGOs working in the field is not satisfactory in several project countries. In order to ensure the success of the information campaign, project sustainability, etc., additional motivation should be provided for NGOs to be active in local networks. The important challenge waits at the end of the project in relation to having impact on policy makers. There is time to prepare for that task.

Conclusion: The project activities have produced good reach among and coverage of important target groups already. There is no evidence suggesting that reach and coverage targets will be not met by the end of the project. The quantitative targets determined in the grant agreement technical annex are important, but even more attention should be turned to the quality of contacts with target groups. The quality of the deliverables to be produced – e.g. training materials – determines the success in this aspect.

4.3. Continuous relevance of planned activities

The grant agreement technical annex provides quite a detailed plan for achieving objectives, which is not without its internal contradictions. On the other hand, the evaluation research and the interim report prepared by the project coordinator indicate that there have been several important changes in the plans. Some activities have been postponed and other are being considered irrelevant for the success of the project. Hence, the continuous relevance of activities should be considered:

- Are the (planned) activities still (or continuously) relevant to achieving the objectives?
- If not, what changes should be made in the implementation of the activities or in the content of their planned outputs/deliverables?

The postponement of several activities and the scarcity of (working) time and financial resources forces to make rational choices on which activities and products to concentrate on during the remaining project period – in the framework of the required deliverables, of course. Time relations of activities and producing deliverables are important. Thus, improvement and finalising of the dissemination plan or the training strategy may be necessary from the perspective of a separate evaluation of the quality of their content (see 4.2). Yet, by definition these documents are meant to be used in planning further activities. In the situation where a considerable part of training and dissemination activities have already been performed and approximately 1/3 of the project period is left, it would have little effect on the success of the project to make these documents better and better. Instead, the scarce resources should be concentrated on producing end use products of these working groups – training materials, dissemination channels and messages.

The question of appropriate timing is also important in deciding on the relevance of a sustainability plan. In the current timetable it is stipulated to be delivered right at the end of the project. In that case, the suspicions of the partners that without the project and its obligations, nobody can guarantee that the produced sustainability plan is followed, nor is anybody responsible for it, are substantiated. The corollary from this observation is that the sustainability plan (or at least discussions, common decisions and respective actions during the project period) should be initiated

as soon as possible. Otherwise, if prepared and used only at the end of the project period, its relevance is low.

The evaluators are on the position that the follow-up study is continuously relevant for the project, despite the fact that it is not determined as a deliverable in the project and there are no resources planned for doing it. It will provide at least some feedback about the first impacts of the project to the TB situation and service improvement.

Re-mobilising international working groups to make sure they are not just formal lists of working group members, but collectives producing useful inputs and common deliverables, also has continuous relevance to the success in achieving objectives and ensuring the sustainability of the results.

4.4. Sufficiency of activities to achieve specific objectives

The sufficiency of activities to achieve objectives is first and foremost about the initial planning and allocation of resources for the project. Yet, even within this context, it still makes sense to ask: are the planned and implemented activities sufficient for achieving the project objectives?

The general objective of the project as well as specific objectives themselves are formulated in a general manner. The best available framework to evaluate the sufficiency of activities is provided by outcome indicators related to specific objectives, as presented in the technical annex of the grant agreement.

The outcome indicators related to specific objectives 1 and 2 are formulated without quantitative targets, and only require an increase of knowledge of the TB situation and services among members of networks, CBOs, health care workers, etc. These targets have already been achieved.

The achievement of specific objective 3 in terms of outcome indicators depends on several aspects. First of all, due to the fact that indicators are formulated quite narrowly, it depends on concrete messages in information materials. The only quantitatively targeted indicator focuses on misconceptions about TB transmission. The information material drafts included to the interim report and prepared for IDUs are not addressing the misconceptions literally as misconceptions. Instead it is planned to communicate what is TB and what its symptoms are, who might be infected and how it can be treated. Thus, in order to ensure achieving specific objective 3 in terms of outcome indicators, all the messages of the information materials should be checked before finalising them in relation to the stipulated outcomes. But to produce information materials with appropriate messages, it is clearly not sufficient to raise “the awareness of TB and HIV related prevention, treatment and care among vulnerable groups and PLHIV, general population, and professionals on services and policy level”. The appropriate media channels, as well as informed, trained and motivated out-reach workers should be exerted as well.

Specific objective 4 has two outcome indicators. The first one is targeted at diminishing service providers with misconceptions about TB (by 10%) and there is no evidence suggesting that trainings and distributed training material cannot achieve it. The second indicator focuses on the methodological quality of trainings.

The outcome indicators related to specific objective 5 specify the expected content of the guidelines (the guidance) – a new TB control and case finding model – that should be taken into account when preparing the deliverable. The second outcome indicator of that specific objective is targeted at

policy changes through communicating the recommendations. Success depends on the quality of national and international networks. In some countries there are problems in these networks that should be fixed before the project ends. The evaluation research detected such problems in Lithuania and Latvia, but possibilities to strengthen local networks should be considered in every project country.

5. RECOMMENDATIONS

The recommendations listed below derive from the key problems in the processes and in the quality of products that have been detected in the evaluation research (see part 3) and summarised in part 4 of the report.

1. The technical description of project activities, milestones and deliverables agreed in the grant agreement and its annexes includes some inconsistencies. The changes made to the project logic during the project – some of which is described in the interim report, some of which is not – complicate understanding the current actual plan even more. The postponement of many activities and milestones, together with continuously changing the plans, enhance the risk that too many activities will accumulate at the very end of the project “without noticing”. In order to improve project coordination and lower the risks, the project leader needs to produce clear input-output graph(s) indicating key activities, necessary inputs, outputs and deliverables with deadlines. This should be communicated to partners and working group members, together with indicating the critical points in the project logic.
2. Participation of partners and working group members in producing outputs and deliverables has been a problem. Efforts should be increased to explicate the expected input and provide detailed and evaluative feedback to project partners and working group members about their input (or the lack of it). The international steering committee meetings and other face-to-face events can be used to discuss substantial points related to project outputs and outcomes. WG leaders should be assisted by the project leaders to find incentives for WG members to participate in producing inputs. These incentives have to be communicated to the potential participants.
3. The key issue emphasised in the grant agreement is sustainability of the project results. There have not been any activities started in relation to a sustainability plan. Sustainability discussions should be started in all forums, groups and networks of the project as soon as possible – in ISC meetings and correspondence, in working groups, local networks and trainings. First, the aims need to be defined and the situation analysed, followed by working towards realistic tools etc. in specific contexts (countries, target groups, activities, use of products). The plan itself is not as important as decisions and exchange of ideas and ambitions during the remaining project period.
4. The problem of weak local networks should be addressed in cooperation between project leaders and associated partner organisations in respective countries. Motivate local partners and introduce sustainability issues from the perspective of potential networking partners –

- what is their benefit from the project and policy amendments. The dissemination of the project is important for recruiting network members and keeping them interested. The ability and habits to read material in English are not excellent for many. Written communication in national languages should be increased – newsletters, webpage material.
5. The follow-up study is written into the grant agreement, and it is relevant for making the first evaluations about the outcomes of the project interventions. Possibilities of the project budget should be looked at to detect additional sources of finances and select countries/sites according to financial possibilities. In fact, the sustainability plan should include further follow-up studies using the same or similar methodology.
 6. Training strategy has not played the intended role in planning training activities – especially in relation to the common content of trainings. If discussion about the training strategy is opened, focus should be on objectives, situation analyses and guiding principles helping WG members contribute to the production of common training material.
 7. The process of producing information materials has been delayed and there are still suspicions about the messages and channels to communicate effectively with all the target audiences. Content needs to be checked in relation to outcome indicators and, if possible, information materials should be tested in local network meetings and trainings, and also with IDUs.
 8. The existing indicator system proposed in the grant agreement annex is difficult to apply for systematic evaluation. Some of the outcome indicators have target values, others do not. The indicator system should be rearranged and amended for the final evaluation. All outcome indicators should describe awareness or behavioural changes in target groups, due to the contacts with project outputs. A coherent division line between process indicators and output indicators should be drawn. Output indicators are those regarding the existence of products, the numbers reached by these products or coverage of target groups. Process indicators operate with timing issues, participation activity, etc.