**Reporting form C**

**EXECUTIVE SUMMARY OF THE EVALUATION**

**(Submitted to SACS for each TI evaluated)**

**Profile of the evaluator(s):**

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| **Name of the evaluators** | **Contact Details with phone no.** |
| **W. Bimolata Devi** | **B-33, Street No.7, Dahsrathpuri**  **Palm-Dabri Road**  **New Delhi- 45**  **Phone no- 8014714363/+91 88026158014** |
| **L. Purnima Devi** | **H/No. 14**  **Milanpur,Bamunmaidan**  **Guwahati-21 Assam**  **Phone no- +91 9613737433** |
| **R.K. Joyshree Devi** | **Keishamthong Thangjam Leirak, Imphal West, Manipur**  **Phone no- +91 8974043577** |
| **Officials from SACS/TSU (as facilitator)** | **L. Guna, District Assistant DAPCU, Imphal East, Manipur ,**  **Phone no. - +91 9856269488** |

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| **Name of the NGO:** | **NIRVANA FOUNDATION** |
| **Typology of the target population:** | **Female Injecting Drug Users (FIDU)** |
| **Total population being covered against target:** | **199** |
| **Dates of Visit**: | **16, 17, 18 October 2015** |
| **Place of Visit:** | **DIC of FIDU Project, Nirvana Foundation, Imphal East** |

**Overall Rating based programme delivery score:**

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| --- | --- | --- | --- |
| **Total Score Obtained (in %)** | **Category** | **Rating** | **Recommendations** |
| **86.0%** | A | Very Good | Recommended for continuation |

**Specific Recommendations:**

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| 1. Only 2 PEs out of 4 have clarity of the format and activities. The Peer Educators need handholding trainings on the use of risk, vulnerability, STI, condom and NS demand data. 2. 39% of the HRGs met during the FGDs were not aware of the services available in the project except for the Condom and N/S distribution. They should be given proper information of all the services available in the project. Community mobilization activities need to improve. Demand generation activities and DIC meeting should focus on motivation for receiving all the services available 3. Out of 29 HIV positive FIDUs 23 were tested for sputum through linkages with Sawongbung PHC DOT centre which is far from the project site. However, there were no proper documents of linkages or referrals with nearby/nearest DOT/RNTCP. Resource mapping and referral service of the HRGs to the nearest RNTCP as per project guideline should be improved. 4. The stakeholders met had less knowledge on the services available in the project. Only 1 out of the 3 stakeholders was aware of the project services except for the needle and condom services. She involved in addressing the issues /crisis occurred. It is recommended to give proper information of all the services available and improve the involvement of stakeholders in addressing the issues. 5. It was reported that it was difficult to strengthen the social marketing of condoms. However, being high risk project area, the project staff should know the reason of strengthening the social marketing of condom as a part of condom promotion in the programme. The field staff should be trained and motivation for social marketing should be strengthened among the HRGs also.      1. The HRGs were arrested and detained in the police station in the month of November 2014 before the Sangai Festival of the year 2014. The organization in collaboration with the FIDU project implementing partner (MLSS) in Imphal west had dialogue with the police personnel of Manipur Police to release the HRGs. In collaboration, they provided food and lodging of the FIDUs in their concerned DICs with the help of other TI NGOs in Imphal East and West districts. The organization also had dialogue with the Social Welfare department for providing support to the HRGs. The two FIDU implementing NGOs decided to go hand in hand for advocacy programmes with the linked department. However, there has been no follow up after the festival was over. Advocacy strategy with other linked departments/organization/stakeholders should be strengthened for ensuring the HRGs are protected and cared during the crisis that may happen in future. 2. During the above mentioned incident, 8 HRGs were given OST support by linking with the OST centres in Imphal East and West districts. It was provided with less counseling and just used for the time being resulting only 1 continues till date. The incident could be taken as opportunity for strengthening the networking with OST centres as well as for motivating the HRGs to initiate OST. It was shared by the project staff and the GB members that it is very much necessary to open OST centre for the female injecting drug users only in the project itself. During the FGD also, the participants shared that they want to stop using drugs. However, they do not want to go to OST centres opening for male IDUs as they are not comfortable to go there. It is recommended to strengthen counseling service especially for OST services available in the district. It is suggested to the concerned authority also to look into the matter seriously. |

**Name of the evaluators Signature**

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| **W. Bimolata Devi** |  |
| **L. Purnima Devi** |  |
| **R.K. Joyshree Devi** |  |