



**Darwin Initiative Main/Post/D+ Project
Half Year Report
(due 31st October 2018)**

Project reference:	23-023
Project title:	Can Health Investments benefit Conservation and Sustainable Development?
Country(ies)/territory(ies):	Uganda
Lead organisation:	Conservation Through Public Health
Partner(s):	University of Oxford, International Institute of Environment and Development (IIED), Uganda Wildlife Authority (UWA), Jane Goodall Institute (JGI), Budongo Conservation Field Station (BCFS)
Project leader;	Gladys Kalema-Zikusoka
Report date and number:	31 st October 2018, HYR3
Project website/blog/social media etc.	https://www.iied.org/are-health-investments-paying-for-endangered-wildlife ; https://www.iccs.org.uk/project/can-health-investments-benefit-conservation-and-sustainable-development ; http://www.ctph.org/one-health/

1. Outline progress over the last 6 months (April – Sept) against the agreed baseline timetable for the project (if your project has started less than 6 months ago, please report on the period since start up to end September).

An assessment of the effectiveness of CTPH's Bwindi project in bringing about poverty alleviation and biodiversity conservation outcomes, using robust impact evaluation methodology

Results from the BACI qualitative and quantitative research were not conclusive because of a lack of baseline data and appropriate controls where there has been spill over of project activities from the treatment to control sites. A recommendation was thus made for additional research to be done to identify the process by which CTPH interventions contributed to a range of outcomes. Oxford University conducted additional research to try and understand CTPH's influence on conservation and public health practices at Bwindi.

On recommendation of the Darwin internal evaluators, the Theory of Change for this project was revised with external support from a consultant with expertise in developing ToCs who attended the March review meeting and held a workshop session with CTPH team to revise the ToCs for Bwindi, Budongo and Mount Elgon as well as the log frame for the project. These ToCs are still being reviewed to more clearly represent pathways by which CTPH interventions contribute to stated outcomes.

The gorilla health data have been cleaned. CTPH is determining the best method by which to analyse the data, either R software or STATA. To this end, CTPH team had a training session on R open source software with Oxford University. The new CTPH M&E intern has been trained in STATA and will also try to analyse the data using this tool.

Recommendations for improvements to the Bwindi CTPH project are adopted and implemented.

Recommendations from the preliminary research were made and CTPH has started to implement some of them including (i) training all Ministry of Health (MOH) VHTs to become

VHCTs. As the MOH and on the ground health partners like Bwindi Community Hospital will have the key responsibility for health training, supervision and data collection, this will free CTPH to focus on and be mainly responsible for the conservation outcomes of their social service delivery, collaborating where necessary with UWA, National Forestry Authority (NFA) and National Environment Management Authority (NEMA) District Natural Resource Offices and (ii) improving data collation for effective adaptive management. Henry Travers from Oxford University came to Bwindi and trained CTPH staff in data collation to increase capacity to correct identified errors in a timely manner including developing an excel database, which is easier to use than access. He felt that some of CTPH's summary data is flawed and thus should not be used to report project progress. In response, CTPH has started the process of reviewing raw data from what VHCTs have written in their source note books, to try and see if those could be compiled in an updated summary report as a means of measuring its effort over the past ten years.

CTPH is working with a public health advisor and advisory board member, Dr. Lynne Gaffikin, who helped to initially design CTPH's integrated Population, Health and Environment (PHE) program in 2007. Based on a recent trip to the field and discussions with the team, she recommended the design of an updated data collection tool with conservation indicators that mirror in format the ones currently being used by the MOH for VHTs to monitor and record health and WASH (Water, Sanitation and Hygiene) indicators. The latter is much simpler than the tool CTPH has been using. CTPH has adopted this recommendation, which should reduce inconsistencies in VHCT data. The MOH and Bwindi Community Hospital have agreed that CTPH can access the health data they collect from all VHTs, thereby reducing duplication of data collection effort, if CTPH commits to support all the VHTs. This new data collection system is scheduled to be rolled out in November 2018 and is currently undergoing pilot testing.

The approach is rolled out to Mount Elgon National Park and Budongo Forest Reserve, based on the evidence from the evaluation.

Oxford University did a baseline survey in two parishes bordering Budongo Forest Reserve, Kasenene and Nyabyeya Parishes. The VHCT program was launched at Budongo in collaboration with BCFS and JGI. It was decided to launch the VHCT model in one parish, Kasenene Parish, which has had much less development partners' support than Nyabyeya Parish. JGI has been working in Kasenene Parish for many years and is taking the lead in implementing the VHCT program there. All 18 VHTs in Kasenene Parish were selected to be trained as conservation VHTs (VHCTs) and a training workshop held with them introducing conservation education content and skills, on top of the health and family planning services they are currently mandated to provide. Accordingly, new logbooks are also being developed with input from JGI, BCFS, Kasenene Parish Subcounty Health Assistant and the VHTs incorporating conservation issues unique to Budongo Forest Reserve. It was found that there are very few family planning supplies available in the area so the VHTs have not yet been trained in delivering family planning methods. CTPH is following up to solve this supply chain problem by contacting health NGO partners, including Uganda Health Marketing Group, who have a large supply of contraceptives and have supplied CTPH before with contraceptives when stocks run out at Bwindi, so that the VHTs of Budongo can also be trained to give family planning commodities like VHCTs do at Bwindi. Budongo VHCTs have already started to visit homes in their villages with much needed health and conservation services.

The VHCT program was launched at Mount Elgon in 2016 with funding from Global Development Network. There have been similar data inconsistencies because the same tool was being used, which has been found to be too complicated for these VHCTs to fully understand. Therefore it is now being simplified along the same lines as with the new logbook being developed to enable Mount Elgon VHCTs to use the same new system. Mount Elgon VHCTs are continuing to visit homes in their villages with critical health and conservation services.

Analysis of data, production of findings and recommendations in project report where agreed set of recommendations for action, based on research findings, developed into a 5-year prioritized Strategic Plan

A project team meeting was held and target dates have been set for the final project research report and Policy Brief as well as CTPH blogs through IIED, CTPH and Oxford University. The team is deciding on what message will go into the policy brief after reviewing the remaining research information. One option is that the document will focus on providing guidance about how to collect and process community-generated datasets, based on the experience of CTPH. We are also looking into the possibility of writing a peer-reviewed paper on the difficulties of conducting impact evaluation with poor data, changing local conditions and new partner involvement, and how new data collection tools have been developed as well as reporting lessons learned.

Recommendations from the evaluations are included in national biodiversity policies.

CTPH will present research findings to local stakeholders from policy making agencies in Uganda working in the biodiversity sector, at a Uganda Poverty and Conservation Learning Group (UPCLG) meeting and Bwindi research forum, as well as to the project Advisory Committee represented by government policy making agencies in Uganda. Project Advisory Committee members include NFA, NEMA, MOH, Ministry of Agriculture, Animal Industry and Fisheries (MAAIF), Ministry of Gender, Labour and Social Development (MGLSD) and Ministry of East African Community (MEACA).

Committed funding for scale up is obtained

Two years committed funding for scale up has been obtained from Disney Conservation Fund for Mpungu subcounty at Bwindi Impenetrable National Park and from Mulago Foundation for general support towards improving monitoring and evaluation and scaling of CTPH's model. Together with funding from the Darwin Initiative this has enabled CTPH to hire an M&E intern and a Program Manager to support the activities of the project as well as consultancy services of a PHE technical advisor to develop a revised data collection tool for the VHCTs that better captures their individual efforts thus improving CTPH's ability to measure its results and contribution to impact. Furthermore JGI has received additional financing for WASH activities in Kasenene Parish from USAID through the Africa Biodiversity Collaborative Group, where JGI has been initially supporting 6 VHTs, one from each frontline village, enabling the project to maximize resources for implementing the VHCT model with all 18 VHTs in Kasenene Parish.

2a. Give details of any notable problems or unexpected developments/lessons learnt that the project has encountered over the last 6 months. Explain what impact these could have on the project and whether the changes will affect the budget and timetable of project activities.

Lessons learnt include the importance of engaging all VHTs in the parish for sustainability, a recommendation that was put forward by the District Health Office during the launch of the VHCT program at Budongo. It may impact the budget at Mount Elgon, but not at Budongo.

The Budongo implementing partners have requested for a full household baseline survey to be able to track implementation processes and results within homes over time as had been indicated in the original proposal. This will incur additional costs, which the project is minimising through working with the VHCTs to record data on household-level indicators of the homes for which they are responsible in their villages. CTPH will do the same at Mount Elgon and the next subcounty at Bwindi, as was done in the first two parishes at Bwindi in 2009.

2b. Have any of these issues been discussed with LTS International and if so, have changes been made to the original agreement?

Discussed with LTS:	Yes
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Formal change request submitted:	No
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Received confirmation of change acceptance	No
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3a. Do you currently expect to have any significant (e.g., more than £5,000) underspend in your budget for this year?

Yes No Estimated underspend: £ 0

3b. If yes, then you need to consider your project budget needs carefully. Please remember that any funds agreed for this financial year are only available to the project in this financial year.

If you anticipate a significant underspend because of justifiable changes within the project, please submit a rebudget Change Request as soon as possible. There is no guarantee that Defra will agree a rebudget so please ensure you have enough time to make appropriate changes if necessary.

4. Are there any other issues you wish to raise relating to the project or to Darwin's management, monitoring, or financial procedures?

No other issues

If you were asked to provide a response to this year's annual report review with your next half year report, please attach your response to this document. Additionally, if you were funded under R24 and asked to provide further information by your first half year report, please attach your response as a separate document.

Please note: Any planned modifications to your project schedule/workplan can be discussed in this report but **should also be raised with LTS International through a Change Request.**

Please send your **completed report by email** to Eilidh Young at Darwin-Projects@ltsi.co.uk. The report should be between 2-3 pages maximum. **Please state your project reference number in the header of your email message e.g. Subject: 22-035 Darwin Half Year Report**