



United Nations
MOLDOVA

FINAL EVALUATION

Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova

September 2018



Today should be better than yesterday

Evaluator
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Disclaimer

This report is focused exclusively on evaluation aspects and its terminology and language does not reflect any political position. The Transnistrian region is not recognized as an independent state by the international community, the unanimous position of which is that it is part of the Republic of Moldova. Therefore, evaluator has accordingly related to the decision makers in this territory as *de facto* authorities.

The use in this report of such terms as, 'Law', 'Minister', and 'Supreme Soviet' does not indicate any *de jure* recognition of these normative acts, *de facto* authorities or institutions. These terms are used to provide the most precise identification possible of specific documents, *de facto* authorities and institutions. Evaluator also has used the terms "left bank" and "right bank" to indicate territory controlled by the *de facto* Transnistrian authorities and the Government of the Republic of Moldova.

This project evaluation report presents the view of the Consultant and does not necessarily fully correspond to the opinions of Government of Sweden, UN Agencies or other stakeholders referred to in this report.

Every effort has been made to ensure that the information given here is correct. Any factual error that may appear is unintended and falls under the responsibility of Consultant.

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Abbreviations and Acronyms

CBS – Community-based service
CRPD - Convention on the Rights of Persons with Disabilities
DAC – Development Assistance Criteria
DV – Domestic Violence
EU – European Union
HR – Human Rights
HRBA – Human Rights Based Approach
HT – Human trafficking
MAI – Ministry of Internal Affairs
MJ – Ministry of Justice
MoH – Ministry of Health
MoHLSF - Ministry of Health, Labour and Social Protection
MoU – Memorandum of Understanding
NGO – Non-Governmental organization
LEA – Law Enforcement Authorities
LPA – Local Public Authority
OECD – Organization for Economic and Cooperation Development
OHCHR - Office of the High Commissioner for Human Rights
OST - Opioid Substitution Treatment
PLHIV – Persons living with HIV
PwDs – Persons with disabilities
RM – Republic of Moldova
SCBM – Support to Confidence Building Measures
SDGs - Sustainable Development Goals
TB - Tuberculosis
TN – Transnistria
ToC – Theory of Change
TOR – Terms of Reference
UN - United Nations
UNAIDS - Joint United Nations Programme on HIV and AIDS
UNDP – United Nations Development Program
UNDG – United Nations Development Group
UNICEF - United Nations Children's Fund
UNODC - United Nations Office on Drugs and Crime
UNPF - United Nations Partnership Framework
VET - Vocational and Educational Training

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Executive Summary

This report presents the findings, conclusions and recommendations of the final evaluation of the *Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova* Project funded by the Government of Sweden and implemented during June 2016- June 2018 through the UN Multi-Donor Trust Fund.

The project was developed as a management response to the recommendations developed by the Senior UN Expert on Human Rights, Thomas Hammarberg, who undertook a complex human rights assessment mission in Transnistrian region of Moldova in February 2013.

Following the recommendations of the expert, the UN Agencies identified three key areas where *de facto* authorities of Transnistrian region of Moldova have expressed openness and which were considered feasible for implementation and with strong potential to expand cross-river networks, particularly: work on people with disabilities; gender/domestic violence and HIV/AIDS. Each of the HR areas represents a distinct project component and is coordinated, respectively by: OHCHR, UNDP and UNADS/UNODC.

The objectives of the evaluation are: (1) to provide an independent assessment of the Relevance, Effectiveness, Efficiency and Sustainability of the project achievements and (2) to provide recommendations for the expansion of the project interventions.

The expected users of the final evaluation include: UN Agencies (UNDP, OHCHR, UNAIDS/UNODC), Government of Sweden, the governmental bodies of RM, *de facto* authorities of TN region, NGOs and other implementing and development partners.

The evaluation was structured around DAC Criteria (*Relevance, Effectiveness, Efficiency and Sustainability*) to assess Joint UN interventions focused on strengthen human rights in the Transnistrian region of Moldova in all project components. The data collection tools used by the evaluator included a detailed review of the documentation, semi-structured interviews and focus groups discussions with 77 selected key informants and sites visits in 7 localities: Chisinau, Tiraspol, Bender, Grigoriopol, Slobozia, Ribnita and Balti. Throughout the evaluation process, the evaluator systematically triangulated the collected data and information sources.

The findings of the final evaluation show that the project, represents a multi-stakeholder and complex initiative focused on three areas of the human rights development in the Transnistria region of Moldova. The action was developed as a management response of the UN Agencies to the findings, conclusions and recommendations generated of the UN Senior HR Expert's mission to Moldova. The project is consistent with the national priorities of Moldova and priorities of the *de facto* authorities from Transnistrian region of Moldova. The project is also consistent with the SDGs and has the HRBA and confidence building elements mainstreamed.

The project has some incoherencies in its design from perspective of Theory of change and inconsistency of the performance indicators (explained in the *Relevance* section). Those aspects influenced the comprehensiveness of the data reflected in the progress reports and subsequently, the judgement of the final review.

The project operated in a complex, sensible and sometime unpredictable context, but proved flexibility during the implementation and encouraged three scale partnerships among state and non-state actors at the: local level, national (cross-river) and international.

Although each component had its own distinct portfolio of interventions, the common approaches included: consistent capacity development actions, initiatives on awareness raising and *de facto* policy and normative framework review (component I and III).

Altogether, the project managed to reach majority of its targets (with some exceptions), if judging through existing set of indicators. In majority of the cases the project significantly contributed to: 1) Augmentation of the local, national and international partnerships between the key actors; 2) Strengthening the competencies of existing *duty bearers* and *rights holders*; 3) Institutionalisation of the new services and entities and 4) Increasing the visibility of the tackled human rights aspects.

Some of the initiatives did not generated expected results, despite the efforts of the partners, which delivered all planned activities (e.g. review and adjustment of the *de facto* policy and normative framework), while one initiative (work in TN prisons) was blocked, although at the initial stage it was promising in terms of effectiveness.

The project was and remained mostly cost-efficient during the delivery, but was affected by the so called *elections* in TN region, which represented a serious bottleneck, which caused substantive delays, especially in the initiatives based on the involvement of *de facto* authorities.

The sustainability prospects of the results achieved, so far, are generally weak, although there are some decent isolated positive examples achieved within each of the three components of the project. Those sustainability achievements are far not enough to ensure continuity in the case of ceasing of the development support. Therefore, an exit strategy should not be taken into consideration; on contrary - it is necessary to consolidate the efforts for maximizing the effects achieved, adjusting the approach, reaching in-depth results and generating long-lasting changes, incl. in the cases of "*unfinished businesses*", which proved to be sensible and resistant to change.

Regardless of the project performance, there is always room for improvement. Usually, any approach, which does not fully work as planned, represents an excellent opportunity for the project team to learn a lesson. Based on the evaluator's review of project documents, interviews with key informants, and analysis of the information collected in project sites, the Consultant suggested and described in the report three lessons that may be of value to the partners.

The evaluator recognizes that there might be additional recommendations. Nonetheless, given the main evaluation findings and conclusions, the evaluator suggested and explained seven overarching recommendations, which in the opinion of the evaluator might contribute to increasing the relevance, effectiveness, and efficiency of the future similar actions:

1. Improve project design aspects.
2. Mainstream RBM approach through the project lifecycle and strengthen monitoring, data collection and reporting.
3. Use comprehensive and coherent approach towards capacity development.
4. Develop and implement a Lobby & Advocacy Plan regarding HR policy and *de facto* normative framework.
5. Support blogging as additional awareness raising and HR culture development initiative.
6. Mainstream uncompleted and still relevant commitments in the next joint action.
7. Use blended format of Delivery as One and include a Program Manager position.

Part I. INTRODUCTION

1.1 Background and context

The Transnistrian region, as reflected in the Figure 1, is located along the Eastern part of Moldova, bordering with Ukraine, mostly on the left bank of the Nistru River. The region is *de jure* part of Moldova but announced its separation in 1990 to become the so-called “Pridnestrovian Moldavian Republic” with the capital in Tiraspol. After violent clashes and a ceasefire agreement in 1992, the status of the region remained undetermined, subject to a negotiation process on-going ever since². The population is about 0,5 million, with 32% being Moldovan, 29% Ukrainian, 30% Russian, and 9% other ethnic minorities.

Figure 1: Map of Republic of Moldova



Due to its disputed status, the region has been excluded from major HR developments and international community did not receive adequate information on HR in Transnistria.

During November 2011 mission to Moldova of UN High Commissioner for HR, Navi Pillay, a broad range of parties, including the Moldovan Government, *de facto* authorities from the Transnistrian region, as well as civil society emphasized the need for further attention to the HR in the region. This visit provided the opening for in-depth follow-up, including acceptance on the need to increase the actions on HR.

In February 2013, Senior UN Expert on HR, Thomas Hammarberg, undertook a complex HR assessment mission in the Transnistrian region. The Expert concluded that 20 years of isolation had left significant gaps in information and

knowledge of HR among actors. The first recommendation was that the region needs and should develop a HR Action Plan, which resulted initially in an investments plan developed by the *de facto* authorities. Gradually, greater understanding was being built on what the HRBA entails, as requests for support from the region are increasingly about building expertise.

As management response, the UN Agencies identified 3 key areas where *de facto* TN authorities have expressed openness and which were considered feasible for implementation and with potential to expand cross-river networks: work on people with disabilities; gender/domestic violence and HIV/AIDS. Each of the HR areas represents a distinct project component and are coordinated, respectively by: OHCHR, UNDP and UNADS/UNODC.

These are aiming to advance Moldova’s progress towards the achievement of SDG 16 (Peace, Justice and Strong Institutions), 5 (Gender Equality), and 3 (Good Health and Well-being).

² The official negotiations are held in the “5+2” format since 2005.

1.2 Overview of the project

Joint Action to Strengthen Human Rights in the Transnistrian region of Moldova is grounded in the UN HR-based norms and standards and pursues strengthening of the effective exercise of HR by people residing in the TN region through fostering improvement of the regulatory and institutional frameworks in the area of disability, gender based violence and HIV, PWIDs and people in prisons. The action is funded by Government of Sweden and was implemented during June 2016-June 2018 through the UN Multi-Donor Trust Fund. The project was framed around 3 inter-linked components (rights of persons with disabilities, women in vulnerable situations, and HIV/AIDS) which were led respectively by OHCHR, UNDP, and UNAIDS.

Component 1: *Non-discrimination and social inclusion of children and adult persons with disabilities:*

The action on the rights of PwDs in the TN region is implemented in the framework of a broader OHCHR Program on promotion of HR in the region, which is expected to be co-funded by other donors. OHCHR leads a coordination platform of development partners on the rights of PwDs in the TN region to maximize synergy and combined effect of joint actions. The planned key interventions:

- *Empowerment of the rights-holders* – PwDs, their groups/organizations – internal capacity development, building relations and partnerships with other organizations and *de facto* authorities and with similar type of NGOs across the Nistru-river;
- *Capacitation of the duty-bearers* – *de facto* authorities – to make them understand, internalize and apply the rights-based understanding of disabilities by developing compliant normative and institutional framework;
- *Support in development and piloting of Convention-compliant community services* and facilities for persons with disabilities;
- *Awareness raising among broader range of opinion and decision-makers and wider society* about the rights-based concept of disabilities.

The five main outputs the project aims to achieve are as follows:

- Organizations of PwDs (women & men with disabilities) empowered to take action in protection and advancement of non-discrimination and their fundamental human rights as per the international standards;
- *De facto* central and local authorities, ombudsperson's office, other authorities trained and capacitated on international standards with regard to rights of PwDs;
- *De facto* normative framework reviewed and adjusted – to the furthest possible extent – in line with the international standards with regard to rights of PwDs (as amendments to *de facto* laws, regulations and/or as executive order, operational guides, etc);
- Convention-compliant community services developed and piloted to provide a successful model to be multiplied and scaled-up at the next stages;
- Raised awareness among broader range of opinion and decision-makers (*de facto* MPs, LPA, media, etc.) and wider society about the rights-based concept of disability.

Component 2: *Enhancing gender equality and combating violence against women.* The key interventions are related to:

- Providing support in the establishment, institutionalization and functioning of a more complex social reintegration/rehabilitation service, including the establishment of a shelter for the victims of violence and HT and two regional hubs;
- Strengthening the capacity of key service delivery partners to promote and protect women's rights to life free from violence and those of the victims of the HT;

- Contributing to a sustainable reintegration/empowerment of vulnerable women, including victims of DV on the labour market through the regional hubs;
- Raising public awareness to support prevention and disclosure of DV and HT instances.

Component 3: Improving prevention, treatment and care services for PLHIV, PWIDs and people in prisons. The key interventions are related to:

- Increasing access to comprehensive package of services for PWIDs, including drug dependency;
- Improving comprehensive package of service for people living with HIV and people who inject drugs in prisons through addressing normative framework, political commitment of prisons and health authorities;
- Supporting implementation of international standards, pursuing human rights and gender mainstreaming into HIV normative framework;
- Increasing the access of the most at risk HIV populations to HIV Testing and Counseling through building capacities of NGOs and strengthening the dialogue between NGOs, health, and LEAs on both banks of Nistru river;
- Establishing a sustainable dialogue with law enforcement authorities with regards to a communitarian policing approach in working with most at risk populations, such as PLWHIV and PWIDs and ensure referral services from police to harm reduction programs;
- Raising public awareness to combat HIV and drug dependency related stigma and discrimination.

Component 4 (cross-cutting): Platform for Human Rights - Coordination and Monitoring

Under this component the establishment of coordination and monitoring platforms is envisaged so that there is a better chance that implementation will be successful and sustainable. UN agencies shall actively engage with and co-opt participation of CSOs to encourage HR advocates and emergent initiative groups to lead in promoting HR-oriented reforms. This cross-cutting component was planned to contribute to successful achievement of substantial objectives and targets under the above three components. Key interventions:

- Coordination effectively all the regional stakeholders in the process of implementing the present project and in advancement of Thomas Hammarberg's recommendations;
- Coordination the efforts of the development partners in advancement of Hammarberg's recommendations.

Part II. EVALUATION FRAMEWORK

2.1 Scope of the evaluation

The scope of the evaluation is to learn from the experience of the *Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova*, with a forward-looking approach. The Evaluation is expected to clarify underlying factors affecting the situation, highlight unintended consequences (positive and negative) and better design UN-supported interventions at the next stage.

The purpose of the final evaluation is twofold: 1) *Review the progress made by the project* in fulfilling its agreed outcome and outputs through the planned activities; *Assess how successful the HRBA* was applied and the efficiency and effectiveness with which resources have been used to generate results and achieve project objectives and 2) *Develop recommendations* for the expansion of the project interventions beyond 2018, which UN Moldova can offer as support for the strengthening of the effective exercise of HR by people residing in the Transnistrian region of the Republic of Moldova.

The *overall objectives* of the evaluation are the following:

- Objective assessment of the progress towards the achievement of the project objectives and outcomes as specified in the Project Document and the effects produced so far under the area of intervention.
- Generate lessons from experiences in the project respective interventions to inform current and future programming at the country level, especially in the context of Moldova progress towards the achievement of SDGs 16 (Peace, Justice and Strong Institutions), 10 (Reduced Inequality), 5 (Gender Equality), and 3 (Good Health and Well-being).
- Provide clear and forward-looking recommendations to suggest effective and realistic strategies by UNCT.

2.2 Evaluation methodology

The evaluation process included the following phases of the evaluation:

Preparatory: Evaluation Reference Group Formation, Finalization of TOR and contract signing;

Design and office-based data collection: Desk review; Key stakeholder mapping; Designing data collection tools for the in-country/field phase (one week);

Field-based data collection: Conducting key informant interviews, focus group discussions and site visits (3 weeks);

Analysis & Synthesis: Analysis and synthesis of the collected data; Preparation of a Draft report; Review Process; Final Evaluation Report

During the *preparatory phase*, the consultant had a meeting were selected and discussions took place via Skype. An evaluation reference group (ERG) was formed.³ The ERG provided oversight to the evaluation process giving the team guidance on key informants and data

³ The ERG is composed of representatives from the UN Agencies under the leadership of UNDP.

sources and reviewing the design report and the draft and final evaluation reports. During the *design* phase the design report was based on a document review, and a proposed methodology was described as well as data collection and analysis strategies for each programmatic area. The list of documents reviewed is attached to the evaluation report.

The *in-country field data collection* phase took place from 7 to 27 August 2018 during which 77 key project stakeholders (final beneficiaries, UN Agencies, Governmental bodies, *de facto* authorities from TN region, CSOs and other actors) were consulted and sites visits in 7 localities (Chisinau, Tiraspol, Bender, Grigoriopol, Slobozia, Ribnita and Balti) were conducted. A debriefing of preliminary results was conducted for implementing agencies. During the *analyses and synthesis phase*, a draft evaluation report was prepared, to be followed by a review process and the final evaluation report. The dissemination of the final report will be organized by the implementing agencies.

2.3 Evaluation variables

The final evaluation of the project was structured around the following evaluation criteria:

- OECD-DAC criteria: *Relevance, Effectiveness, Efficiency and Sustainability*;
- *Capacity development* as cross-component added value

Based on these evaluation criteria, the Consultant used the evaluation questions (See attached to the evaluation report), which guided the data collection and analysis work throughout the final evaluation process.

UN agencies involved in the implementation will make use of the exercise as a learning opportunity for their teams and key partners and stakeholders, as inclusively and practically possible. The findings and recommendations generated by the evaluation should inform the implementation and targeting of activities planned for the next stage of the project development.

The framework of the evaluation incorporated the following categories of analysis:

Relevance: the degree to which the purpose of the Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova remains valid and pertinent.

Efficiency: the productivity of the implementation process - how good and how cost efficient the process of transforming inputs into outputs and outcomes was.

Effectiveness: a measure of the extent to which the Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova has contributed to achieve its results through an effective use of their resources.

Capacity development: as a key to development effectiveness, the achievement of the SDGs and sustainable local development.

Sustainability – to what extent are the *Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova* results sustainable, i.e. rights-holders are empowered to claim their rights, taking into consideration the existing capacity, structures and political context in the country.

2.4 Limitations and constraints

The project team provided all required support during the data collection. However, the most serious data collection limitations facing the evaluation included the following:

- o *Limitations of progress reports as performance tracking tools*. The progress reports form the basis for documenting project interventions and preliminary findings and conclusions

about the achievements, but in the given situation it was difficult to judge the performance, because the reports describe better the project implementation aspects than the effects and on-going changes. To mitigate this constraint, the evaluator asked for and referred to some primary documents, such as: narrative reports of the selected stakeholders, post-interventions/follow up events, strategic documents of the local partners, data base information etc. and including in the sampling framework of a greater number of final beneficiaries and visited project sites.

- *Limitation on key informants and project stakeholders* due to a large number of potential key informants and interviewees, although the majority of key informants were included, the holiday period (August) caused cancellation of the interviews with some key informants from TN region, such as: representatives of *de facto* Ministry of Health of TN region; *de facto* Police Training Specialist of the Tiraspol Juridical Institute, as well as some representatives of LPA. This was mitigated through interviews of other project stakeholders in TN region and in Chisinau and use of secondary data (reports, publications, national plans, regional strategy plans, brochures distributed, and web-sites, among others).

Part III. EVALUATION FINDINGS and CONCLUSIONS

This part of the report presents the findings and analysis of the final independent evaluation organized to highlight project Relevance, Effectiveness, Efficiency, and Sustainability, including the questions pertaining to each of the evaluation criteria, as required in the ToR developed by UN Agencies and specified in the evaluation methodology developed by the evaluator.

3.1 RELEVANCE

3.1.1 Consistency between the project components and the national priorities

Summary

The project objectives and components are aligned with the priorities of the Moldovan government and *de facto* authorities of Transnistrian region of Moldova and were planned by the project team with sufficient justification, knowledge of the selected areas and the main stakeholders. The project is in line with the Sustainable Development Goals and reflects the commitments assumed in the UN – Republic of Moldova Partnership Framework 2013-2017 “Towards Unity in Action” and follows the recommendations of the Hammarberg report.

The project represents a multi-stakeholder complex intervention and includes both *policy level* initiatives and *grass-roots level* ones, as well as public awareness. It encourages local, national (cross-river) and international cooperation. The elements of HRBA are mainstreamed and both dimensions *duty bearers* and *right holders* are targeted.

The ToC is integrated in the project planning, but there are two different models used. The casual - effect *if..., then...* and the change pathway is not reflected and the ToC is not analysed and reflected in the progress reports.

There are some inconsistencies in project design. In terms of results-based approach (results’ chain), the project represents a complex in-wide rather than in-depth approach. It is outputs-based the results’ portfolio consisting of 15 outputs mostly *qualitative*, while the indicators are mostly *quantitative* and *qualitative* indicators are missing. The joint action was designed to be implemented through the UN Multi-Donor Trust Fund by four UN Agencies: OHCHR (component I), UNDP (component II), UNAIDS/UNODC (Component III).

The United Nations – Republic of Moldova Partnership Framework 2013-2017 (UNPF) “Towards Unity in Action” expresses the collective determination of the Government of the Republic of Moldova and the UN to work together to enable Moldova to address major national development challenges and meet its international human rights (HR) commitments. Responding to a request from Government, it advances UN reform through greater unity in

UN action⁴. Outcome 1.3 of the UNPF supports effective promotion and protection of HR, gender equality and non-discrimination with particular focus on marginalized and vulnerable groups⁵. The UNPF Action Plan commits to follow up the key recommendations of the Hammarberg report.

The position of *the de facto* TN authorities resonates with the one of the public authorities of Republic of Moldova. Thus, *de facto* authorities also have expressed openness for implementation of the selected HR strengthening areas (work on people with disabilities, gender and HIV/AIDS) resulted from the above mentioned mission of the UN HR Expert and a series of bilateral meetings with the UN organisations and with the UN Resident Coordinator. The main directions for cooperation such as: strengthening of health system, protection of the rights of people with disabilities and countering the spread of HIV/AIDS and restoration of social infrastructure were highlighted on the website of the *de facto* foreign affairs of the TN region⁶. The political will and priorities of the *de facto* TN authorities were also reiterated in an official letter addressed to the UN Resident Coordinator⁷.

3.1.2 Consistency between the project areas and the priorities put forward in the SDGs

The *Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova* Project is in line with the Sustainable Development Goals (SDGs) and its intervention areas are aiming to advance Moldova's progress towards the achievement of the SDG: # 3 (*Good Health and Well-being* - Ensure healthy lives & promote well-being for all at all ages); # 5 (*Gender Equality* - Achieve gender equality and empower all women and girls), and # 16 (*Peace, Justice and Strong Institutions* - Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels)⁸.

3.1.3 Consistence and coherence of the project design and intervention logic

Before assessing the design and logic of intervention, it's worth noting that the project represents a multi-stakeholder and a complex intervention, which involves several international, national and local actors, such as: UN Agencies, line ministries and state actors of the Republic of Moldova, *de facto* authorities of the TN region of Moldova, media outlets and civil society organizations from the both banks of the Nistru river in the targeted areas. The action includes both policy-level initiatives, such as: policy and regulatory review and adjustment and grass-roots level interventions, e.g. service delivery by the local actors to final beneficiaries from TN region, as well as public awareness raising and capacity strengthening support of the key state and non-state actors and encouraging transferability of positive practice from the right bank and elsewhere. The project supports cooperation at three scales:

⁴ UN Team in Moldova consists of: FAO, IFAD, ILO, IOM, OHCHR, UNAIDS, UNDP, UNFPA, UNHCR, UNICEF, UN Women, WHO, UNESCO; World Bank, IMF; and regionally-based agencies IAEA, ITC, UNCITRAL, UNCTAD, UNECE, UNEP, UNIDO and UNODC.

⁵ The UN – Republic of Moldova Partnership Framework 2013-2017

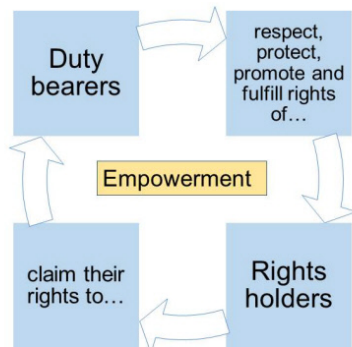
⁶ Press release published on 23 September 2015: <http://mfa-pmr.org/en/vjL>

⁷ In the letter *de facto* TN authorities requested technical support in implementation of the HR strengthening recommendations of the UN Senior Expert and establishment of a joint coordination platform to monitor the progress. 18 November 2015

⁸ See the link: <https://sustainabledevelopment.un.org/?menu=1300>

1) *Local cooperation* between the civil society representatives – (*de facto*) public authorities; 2) *National (cross- river) cooperation* and encouraging confidence building between the thematic actors from the both banks of the river as well as and 3) *International cooperation* between the visited entities of the European countries and the participants of the study visits. Final evaluation remarks that the key elements of Human Rights Based Approach (HRBA) as reflected in the Figure 2, are mainstreamed in the project design.

Figure 2: The core concept of HRBA



Thus, the project targeted capacity strengthening interventions of both *duty bearers*, such as: representatives of ministries and state actors from Moldova and *de facto* authorities from TN region of Moldova dealing with the public health, social protection, internal affairs and penitentiary system to fulfil their obligations and of

the *right holders*, such as: people with disabilities, victims of domestic/gender-based violence, PLWH etc. to claim their rights.

As the result of the desk review, evaluator concluded that there are some project design inconsistencies and incoherence, which affected data collection and the comprehensiveness of the progress reporting of the project team.

The Theory of Change (or the *outcomes chain*) was developed individually for each project component, but the ToC model for the component I differs substantially from ToC models of the components II and III. Thus, the ToC model used for the component I describes expected impact, major problems, major interventions, objectives and outputs (outcome and assumptions are not reflected); while the ToC model used for two other components are pretty similar and reflect assumptions, preconditions for the intermediate outcomes, objectives and the goal, as well as the links between them, but problems, interventions and outputs are not mentioned. Both models do not show the casual - effect and the change pathway *if..., then...*, which is the core approach of the ToC. The ToC is not analysed and reflected in the progress reports. In other words, it is not analysed to what extent the changes generated by the project are happening / happened as were predicted in the ToC.

In terms of results-based approach (results' chain), the project represents a complex in-wide rather than in-depth approach. It is outputs-based the results' portfolio consisting of 15 outputs (component I – 5 outputs⁹, component II – 4 outputs and component III – 6 outputs). Components I and II do not have planned outcomes, while the component III has just three outcomes in six interventions areas (i.e. three other areas have outputs and any outcomes), but the progress reporting is still against outputs and implemented activities.

The outputs are mostly *qualitative*, such as: *Improved capacities...*, *Public awareness raised...*, *De facto normative framework reviewed and adjusted...*; while the performance indicators included in the project log-frame are mostly *quantitative* expressed in *nr. of...* The *qualitative* indicators, such as: *functionality of the entities, transformative potential of the*

⁹ In the project proposal are presented as outcomes, but in the log-frame and progress reports are reflected as outputs.

policy adjustments, receptiveness and participation, satisfaction level, perceptions changed, knowledge acquired, skills developed, behaviours changed etc. are missing from the log-frame, although some of them, such as: *knowledge acquired* by participants are reflected occasionally in the progress reports.

The project was designed to be implemented through the UN Multi-Donor Trust Fund being framed around three inter-linked components (rights of persons with disabilities, women in vulnerable situations, and HIV/AIDS) being led by Office of the High Commissioner for Human Rights, UNDP, and UNAIDS/UNODC.

3.2 EFFECTIVENESS

EQ: To what extent did the Project reach the expected results?

The following part of the report presents the findings of the final evaluation related to the effectiveness of the project in context of the results achieved. The findings are reflected both at the levels of objectives and outputs achieved accordingly to the evaluation questions. Before going into the evaluation findings and conclusions it is important to bear in mind the political context, sensitiveness of the human rights aspects for Transnistrian region of Moldova, and the constraints described above and observed by the evaluator during the field mission.

The final evaluation reveals that the ***project was flexible and scored satisfactory on the effectiveness managing to reach majority of the expected results and targets with some exceptions described below and contributed to strengthening human rights aspects on the targeted areas in the Transnistrian region of Republic of Moldova and augmentation the cooperation between the main thematic actors both within the region and cross-river.***

Below is described the project fulfilment and are presented the key achievements generated by the actors and factors per each of the components.

Component I: Non-Discrimination and social inclusion of children and adult persons with disabilities

The profile of the project component I includes three objectives and five thematic outputs linked to them as reflected below in the Table 1:

Table 1. Profile of component 1

<i>Objective</i>	<i>Output</i>
O1: Support the transformation of the <i>de facto</i> policy and normative framework with regard to people with disabilities - with particular focus on women with disabilities - moving from segregation and institutionalization model to inclusive community-based model in line with the HRBA.	<ul style="list-style-type: none"> Output 1.1 - <i>De facto</i> authorities of central and local level, ombudsperson's office, other specialized <i>de facto authorities</i> and institutions trained and capacitated on international standards with regard to rights of PwDs.
	<ul style="list-style-type: none"> Output 1.2 - <i>De facto</i> normative framework reviewed and adjusted – to the furthest possible extent – in line with the international standards with regard to rights of PwDs

	(amendments to <i>de facto</i> laws, regulations and/or as executive order, operational guides etc).
O2: Empower organizations of PwDs and local communities to develop access to specialized and mainstream services to persons with all types of disabilities by developing their design and delivery modalities, and by promoting measures that will increase availability and affordability, and thus developing a rights- and community-based model to addressing the needs and rights of women/girls & men/boys with disabilities.	<ul style="list-style-type: none"> • Output 2.1 - Organizations of women & men with disabilities empowered to take action in protection and advancement of non-discrimination and their fundamental human rights as per the international standards and establish close collaboration with the similar organizations from the right bank of the Nistru River. • Output 2.2 - Women & men, as well as children with disabilities from the pilot one-two communities have access to a range of inclusive CRPD-compliant community services.
O3: Promote attitude changes at different levels of society through awareness raising, while promoting supportive and empowering attitudes.	<ul style="list-style-type: none"> • Output 3.1 - Raised awareness among broader range of opinion and decision-makers (de facto MPs, local authorities, media, etc.) and wider society about the rights-based concept of disability.

An analysis of the profile of the component reveals that it is outputs-based linked to the respective objectives and anchored to Transnistrian region of Moldova. Thus, the first objective has two inter-linked dimensions focused on: 1) *de facto* policy level and normative framework and 2) capacity development of the *de facto* decision makers. Both dimensions target development (policy and capacities) against benchmarks, i.e. international standards with regard to rights of PwDs. The second objective is also bi-dimensional preponderantly focused on capacity development and boosting grass roots - level cooperation both within the TN region and cross-river. Both objectives with the corresponding outputs have gender aspects mainstreamed. Finally, the third objective is a long-term one focused on changing attitude at the society level as the result of raised awareness, which usually requires permanent, consistent and coherent interventions and goes beyond a singular action project or even program.

Regarding the key achievements of the component, they are analysed through the mostly quantitative¹⁰ indicators of the outputs included in the project proposal and log-frame as reflected in the Table 2. Thus, assessing the performance through the existing set of indicators, it can be concluded that 4 out of 5 targets were achieved, while the 5th one with the most transformative potential focused on *de facto* policy and normative framework is partially achieved, which leads to conclusion that the project scored acceptable within this component.

¹⁰ As was mentioned above, the qualitative indicators are mostly missing and were not included in the project design and logframe. Therefore, the assessment was done through existing set of indicators.

Table 2. Achievements of the Component I

Output	Indicators	Baseline Target	Achievements & Remarks
O1.1	1.1.1 No. of responsible officers and professionals (% of women) capacitated in applying international standards with regard to rights of PwDs.	Baseline: 0 Target: 100 (of which at least 60% - women)	Achieved. 104 Women responsible officers and professionals trained and capacitated in applying international standards with regard to rights of PwDs and provision of social services.
O1.1	1.1.2 Existence of policy and normative framework compliant with UN standards on PwDs.	Baseline: 0 Target: Policy and the normative framework in place (min soft – Strategy/roadmap and /or guidelines endorsed);	Partially achieved. 5 normative acts reviewed and recommendations for amendments to comply with CRPD developed. However, recommendations were not examined by the <i>de facto</i> authorities and the regulatory framework reviewed was not adjusted yet. Law on CRPD ratification was passed by <i>de facto</i> Parliament of TN region. The 2018 - declared the Year of Equal Opportunities in TN with the Action Plan.
O1.2	1.2.1 No. of empowered organizations of women and men with disabilities.	Baseline: 1 NGO Target: - 5 empowered NGOs of PwDs	Achieved. 24 NGOs and initiative groups have been involved in local and cross-river activities and partnerships. 1 NGO from TN have submitted an alternative report to the Committee on Economic, Social and Cultural Rights.
O 1.2	1.2.2 Establishment of the regional alliance of PwDs	Baseline: 0 Target: 1 regional alliance of PwDs	Achieved. Platform for Sustainable (Community) Development was established by 10 NGOs and 5 initiative groups, of which 4 NGOs and 5 initiative groups from TN. Strategic priorities set, the strategy plan underdeveloped.
O 1.2	1.2.3 No. of community-based services (CBS) for PwDs developed.	Baseline: 1 CBS for PwDs Target: 5 CBS for PwDs	Achieved. 12 CBS launched and are functional: 3 in Ribnita (psychological support, legal support and assisted employment); 1 - Dubasari (assisted employment); 2 - Tiraspol (psychological and legal support); 3 - Slobozia and 3 - Grigoriopol (psychological support, legal support and assisted employment).
O 1.2	1.2.4 No. of PwDs (% of women and girls) enjoying the developed CBS.	Baseline: 0 PwDs Target: 50 PwDs (incl. 60% women and girls)	Achieved. About 70 PwDs (57% women) received needed thematic support from the established community-based services.
O 1.3	1.3.1 No. of region residents covered by awareness-raising activities.	Baseline: 0 residents Target: Min. 100,000 region residents	Achieved. About 120,000 of region residents covered by TV materials produced, articles published in local newspapers and internet portals on the rights of PwDs and the project's activities, incl. 409 persons as FB followers.

More detailed description about the up to final evaluation date achievements under each of the outputs is presented below.

Objective 1: Support the transformation of the de facto policy and normative framework with regard to PwDs - with particular focus on women with disabilities - moving from segregation and institutionalization model to inclusive community-based model in line with the HRBA.

Output 1.1: De facto authorities of central and local level, ombudsperson's office, other specialized de facto authorities and institutions trained and capacitated on international standards with regard to rights of PwDs.

Interviewed stakeholder, particularly the representatives of the *de facto* central and local authorities confirmed the openness for and usefulness of the capacity development interventions on the international standards with regard to rights of PwDs and best practice sharing with the countries from CIS region but also with the right bank of Nistru river. Although, as remarked some of them, the approached topics on PwDs were not brain new for them, they recognised that acquired knowledge, especially on CRPD, contributed to augmentation of their perceptions and believes on importance of the HRBA both in the *policy making* /regulatory framework and for mainstreaming it in the day-to-day life of the society. In the opinion of the evaluator, this represents one of the key changes at the perception level generated by the project interventions and should not be underestimated.

Regarding applying the acquired knowledge, interviewed respondents provided vague answers and could not give some illustrative examples. However, they underlined that the acquired knowledge will be helpful in longer perspective while *policy making* and adjusting the *normative framework*. The high staff turnover in the *de facto* authorities also was remarked as a factor, which affects the institutional memory and, subsequently the effects of the capacity development interventions. Financial issues also were highlighted as other factor, which affects applying the knowledge. As mentioned one of the interviewed representatives of *de facto* authorities: *"It is good that I got important people-centred knowledge and experiences, but if I do not have budget allocations to apply them, i.e. to cover implementation costs of my HRBA initiatives I get blocked in a closed circle and the effects are minimised"*¹¹.

The study visit to Sodertalje (Sweden) of the representatives of the target group, incl. five *de facto* decision-makers from four Transnistrian localities helped them to learn about the legislation on and service provision to the PwDs. Some of them changed their perception. Thus, as remarked one of the interviewed stakeholders: *"We have travelled in the future, got a lot of food for reflection and returned back home with inspiration and vision. Before the visit I was convinced that if you do not have sufficient money, you cannot implement consistent initiatives, but after the visit I figured out that even if you have little money, you still can and should do the best you can do"*¹². Therefore, evaluation revealed that there are some singular but positive cases when local public authorities from TN implemented some small scaled projects focused on PwDs such as installing of tactile tile and sound traffic light (Ribnita), Day Center for children with disabilities (Dubasari).

Final evaluation showed that the project achieved this output and contributed to sensitisation and to increasing the competences of the *de-facto* authorities by transferring the knowledge

¹¹ Key informant interviews.

¹² Key informant interviews.

and best practices sharing on international standards with regard to rights of PwDs. This represents an immediate positive effect and a starting point.

However, *thinking out of the box* and following to what extent the *duty bearers* use those increased competences to make the difference in the real life of the communities and TN society and to generate tangible changes at the policy and grass-roots levels, it can be concluded that they encounter numerous bottlenecks and impediments, which requires additional consistent and coherent efforts and resources both from the development partners and from the *de facto* decision makers.

Output 1.2: *De facto* normative framework reviewed and adjusted – to the furthest possible extent – in line with the international standards with regard to rights of PwDs (as amendments to *de facto* laws, regulations and/or as executive order, operational guides, etc)

This output included two milestones: 1) Review of the *de facto* normative framework, which was manageable by the project and was achieved and 2) Adjustment of the *de facto* normative framework, which was out of control of the project and within the exclusive competence of the *de facto* authorities and which was not achieved.

Evaluation revealed that the first milestone was achieved as initially planned as the result of the review undertaken by the National Expert, Vitalie Mester who analysed five key TN *de facto* normative acts on: social protection of PwDs, employment, administrative proceedings and participation in the electoral processes¹³. The expert concluded that most of *de facto* normative acts provisions are not compliant with CRPD and recommendations were formulated for their adjustment. It was also underlined that it is necessary to use a narrower and in-depth approach by reviewing both primary and secondary normative acts regarding the rights of PwDs but also their application in practice. This could represent a task for future similar initiatives. See the *Recommendations* part of the report.

As for the second milestone consisting of adjusting the *de facto* normative framework, as mentioned it was not achieved and still requires additional advocacy efforts. The Transnistrian *de facto* central authorities consulted during evaluation field mission mentioned that they were not provided with the review report produced by the expert and are not familiar with his findings and recommendations¹⁴. However, they are mostly aware of the incompliances of the TN *de facto* normative framework with the CRPD norms in terms of: procedures of disability determination; infrastructural aspects, e.g. access to administrative and locative buildings; access to labour market; access to education of the children with disabilities and other aspects. The process of advocacy with the *de facto* authorities for the revision and adjustment of the *de facto* normative framework was initiated in 2018 and is still on-going, with more receptiveness on the area of disability determination.

Although the second output was not achieved, it is worth noting, that project contributed to generation of additional changes and recognitions related to aspects of PwDs. Thus, it was a premiere when Declaration of 2018 as Year of Equal Opportunities (with the focus on PwDs) by the *de facto* leader of the Transnistrian region. The Declaration was followed by a tailored

¹³ See Report Analysis of Transnistrian Legislation on Persons with Disabilities. 2017, Vitalie Mester.

¹⁴ The review report was produced for OHCHR and due to its sensitiveness it was decided to restrict its sharing.

Action Plan with the thematic activities, implementation time schedule, responsible bodies etc. Although it is premature to conclude to what extent the Action Plan was implemented because the 2018 is not finished yet, this represents a qualitative indicator of sensitiveness of the TN *de facto* authorities towards the aspects of PwDs and a positive example of contribution of the project, which is commended by the evaluator.

A distinct policy level initiative which happened as a side effect of the project is the unilateral recognition (April 2018) and ratification (June 2018) of the CRPD by the de-facto Supreme Council of TN region. This is not going to create effects on the international level, because TN region is part of Moldova and it is not recognised as international subject, but it represents another qualitative indicator of HRBA on PwDs and affirms commitment of the *de facto* authorities to follow the international norms on PwDs.

Objective 2: Empower organizations of PwDs and local communities to develop access to specialized and mainstream services to persons with all types of disabilities by developing their design and delivery modalities, and by promoting measures that will increase availability and affordability, and thus developing a rights- and community-based model to addressing the needs and rights of women/girls & men/boys with disabilities.

Output 2.1: Organizations of women & men with disabilities empowered to take action in protection and advancement of non-discrimination and their fundamental HR as per the international standards and establish close collaboration with the similar organizations from the right bank of the Nistru River.

This output achieved its targets based on the set of three indicators as reflected above in the Table 2. Thus, about 24 thematic entities NGOs and initiative groups from the targeted project sites benefitted of the functional and thematic capacity development support and have been involved in the local and cross-river activities and partnerships, which proves the partnership and the cross-river cooperation boosted by the project.

An important and tangible institutional achievement of the project represents the Sustainable (Community) Development Platform established by 10 NGOs and five initiative groups, out of which four NGOs and five initiative groups are from TN region. The project created preconditions for cooperation and for association of the above mentioned actors. The partnership was officialised in a MoU¹⁵ signed by the representatives of the above mentioned entities and the Platform was set on 08.09.2017. Nine months later (June 2018), the members of Platform elected the Secretary and Coordination Committee¹⁶. The Platform developed some elements of draft Strategic Plan, which defines the mission, vision, values, shortly describes the context and sets priorities. The SWOT analysis is not done but is intended. The Action Plan defines the key activities and time table for 2018, but other components of the plan such as: indicators, responsible persons, resources, partners are not filled in. The final version of the Strategic Plan is expected to be approved by the Platform by the end of the 2018.

However, creation of the platform represents an important step forward and was remarked by the consulted stakeholders – members of Platform. Thus, some of them affirmed that due

¹⁵ See the MoU for creation of the Sustainable (Community) Development Platform.

¹⁶ The Committee is represented by NGOs from 4 different raions of the Transnistrian region and 3 regions from right bank, including Gagauzia.

Platform, they can voice up their concerns, visions and opinion. It is a way to get them out from their houses and day-to-day routine and set up links and networking between the people with the same issues and aspiration. As highlighted one PwDs: *“It is important for me to come to events of the Platform, because I am getting convinced that I am not just a person who generates compassion and needs help from the society, I can be useful for society and to help others, as well”*¹⁷. All of them agreed that Platform is still weak and needs capacity development support to increase its functionality, in terms of planning, communication, decision making etc.

Output 2.2: Women & men, as well as children with disabilities from the pilot one-two communities have access to a range of inclusive CRPD-compliant community services.

The assessment of existing services for PwDs in the Transnistrian region of Moldova and consultations with representatives of NGOs working with PwDs in the region, resulted in selection of the three community services to be provided, particularly: legal assistance and psychological support and assisted employment.

Interviewed stakeholders confirmed that all three good experience sharing study visits¹⁸ organised on the right bank were useful as they provided relevant and applicable for TN context examples of effective social services provision for PwDs at the local level. Stakeholders also highlighted that during the visits they not just have learned new thematic topics, but also observed the service provision process and interacted with the providers.

As the result 12 similar community-based services were launched in five localities in Transnistria: 3 in Ribnita (psychological support, legal support and assisted employment); 1 in Dubasari (assisted employment); 2 in Tiraspol (psychological and legal support); 3 in Slobozia and 3 in Grigoriopol (psychological support, legal support and assisted employment). Initiatives were implemented by four consortiums, representing NGOs from both banks of the river. Providers benefited of capacity development interventions including coaching sessions.

Due to the community services delivered by the providers, about 70 PwDs (incl. 40 women) benefitted of types of support such as legal advice, psychological assistance or employment support. Some other 120 men and women benefitted of different types of trainings focused on empowerment of PwDs.

Evaluation revealed some positive examples of: employment of a PwDs as phone operator in taxi company (Grigoriopol); empowerment of some beneficiaries who got reloaded and one of them started supporting her peers by providing legal consultations for PwDs as peer-to-peer consultant. Although this cases are rather singular than systematic, they represent positive changes generated with the contribution of the project interventions.

A high resonance among the target group consulted during the final evaluation had the study visit to Stockholm¹⁹. The purpose of the action was to learn the Swedish best practices on community-based services for PwDs. Participants learned how state and private actors run

¹⁷ Key informant interviews.

¹⁸ Each study visit had a distinct topic, i.e. legal assistance, psychological support and assisted employment. The visited service providers were from: Chisinau, Orhei and Rezeni.

¹⁹ The study visit was organised in June 2018 and eight representatives of NGOs from TN region, incl. five PwDs or parents of children with disabilities took part.

different types of employment, transportation and other services centred on the PwDs. The consulted stakeholders remarked that they were impressed with the level of service-provision for PwDs, especially for people with intellectual and psycho-social disabilities. They also noted that services like personal assistant and “god-man” for PwDs are applicable and pretty much needed in the TN region. Therefore, represent a good example which should be replicated by the state and non-state actors and adopted to local context.

Objective 3: Promote attitude changes at different levels of society through awareness raising, while promoting supportive and empowering attitudes.

Output 3.1: Raised awareness among broader range of opinion and decision-makers (*de facto* MPs, local authorities, media, etc.) and wider society about the rights-based concept of disability.

Both the Objective and the Output are extremely ambitious, as such kind of transformations need consistent efforts and coherent involvement and are difficult to be assessed with the accuracy to what extent the awareness was raised and the attitude has been changed. This was expressly confirmed by media specialists and journalists consulted during the triangulation process undertaken by evaluator²⁰. Usually, it takes a long period of time, such as several years and sometimes even decade/s to accomplish those changes, if to be judged accordingly to the qualitative indicators, not just quantitative once.

The only (quantitative) indicator included in the project design under this output (*1.3.1 No. of region residents covered by awareness-raising activities*) is far not sufficient to accurately assess it, because the number of the residents covered by awareness-raising activities does not mean automatically that those residents raised their awareness and, moreover, changed their attitudes. Therefore, judging through the only indicator available, the project seems to reach its target, even if there are not sufficiently verifiable means to prove the reached nr of 120,000 pers. A holistic assessment reveals that there is need for much more (especially qualitative) indicators and pre- and post- intervention monitoring and assessment to collect pertinent evidence-based data about changes in awareness and attitudes in order to make a judgement to what extent those expected qualitative transformations happened.

However, evaluation remarks that the project put efforts consisting of thematic trainings and informational events to raise public awareness of PwDs, representatives of NGOs, in-field specialists on the HR aspects, international HR standards, with the special focus on rights of PwDs, and SDGs from the perspective of rights of PwDs.

Accordingly, to the desk review findings around 210 women and 160 men with a wide geographical representation (circa 57 localities from the whole Moldovan territory), have been informed on the rights of PwDs and supported in development of their capacities on advocacy and networking. Out of these, more than 190 PwDs (incl. 114 women), many of whom for the first time, have been informed on their rights and had the chance to interact with peers and representatives of NGOs from the both banks.

²⁰ Key informant interviews.

In order to increase the visibility and its outreach, the component implementing agency (OHCHR) has launched a Facebook (FB) page in 2017²¹. At the moment of the evaluation report writing, there are 409 followers of the FB page. The field mission consultations show that the project have actively interacted with local and regional mass media outlets through the press clubs, trainings, Human Rights Media Academy which: 1) increased their knowledge on PwDs issues, 2) promoted human stories of PwDs and 3) published/broadcasted about 190 different materials on this subject.

Component II: Enhancing gender equality and combating violence against women

The profile of the project component II includes four objectives and four thematic outputs as reflected in the Table 3 below:

Table 3. Profile of component II

<i>Objective</i>	<i>Output</i>
O1: Provide support in the establishment, <i>institutionalization</i> and <i>functioning</i> of a more complex social reintegration/rehabilitation service, incl. the establishment of a shelter for the victims of violence and HT and two regional hubs.	<ul style="list-style-type: none"> Output 1.1 - The new created services help the women – victims of DV and/or HT and their children, to break the wheel of violence.
O2: Strengthen the capacity of key service delivery partners to promote and protect women's rights to life free from violence and those of the victims of the HT.	<ul style="list-style-type: none"> Output 2.1 - Increased number of professionals contribute to diminish the consequences of domestic violence and HT phenomena.
O3: Contribute to a sustainable reintegration/ empowerment of vulnerable women, including victims of DV in the labor market, through the regional hubs.	<ul style="list-style-type: none"> Output 3.1 - Created opportunities are in line with the victims’ needs and contributes to their economic empowerment. The equipped regional hubs are able to help the victims to find a decent workplace and were enabled to provide professional orientation services to their beneficiaries, pay for vocational courses and, eventually – offer scholarships. The resources were also used to help the victims find a job and, depending on the case – co-finance the salary for the first 3 months.
O 4: Raise public awareness to support prevention and disclosure of DV and HT instances.	<ul style="list-style-type: none"> Output 4.1 - Public awareness raised to support prevention/disclosure of DV and HT cases

An analysis of the profile of the component II shows that it is outputs-based linked to the respective four objectives and focused on complex approach of the DV and HT in the Transnistrian region of Moldova. Thus, the first objective is related to institutionalization of

²¹ Please see <https://www.facebook.com/oonprava/>

the relevant services dealing with the women victims of DV and HT; Second objective is focused on capacity strengthening of the service providers; Third objective is committed to a sustainable reintegration / empowerment and finally the last one on Raising public awareness to support prevention/disclosure of DV and HT cases.

The key achievements of the component are analysed through the mostly quantitative indicators of the outputs included in the project proposal and log frame as reflected in the Table 3. Thus, assessing the performance through the existing set of indicators, it can be concluded that 7 out of 11 targets were achieved; one is close to be achieved and three targets are not measurable, because the initial approach was changed and the targets were not reviewed, although the evaluation reflected the efforts put by the project.

This leads to conclusion that over all the project scored acceptable within this component.

Table 4. Achievements of the Component II

Output	Indicators	Baseline Target	Achievements & Remarks
O1.1	2.1.1 Nr of created services	Baseline: Lack of services for assisting victims of DV and HT Target: One effectively established, functional and capacitated Residential Women Centre (Shelter) and Women's Safety & Prevention Services (non-residential) in Tiraspol with regulations for social reintegration services	About to be achieved. The shelter was run in a temporary premise. The permanent location of the Shelter will be functional and the reconstruction works will end up by tentatively October 2018. Meanwhile, the human resources were capacitated and functional guidelines were developed, approved and mainstreamed.
O2.1	2.1.2 Exact types of created services in the units	Baseline: 0 Target: Two effectively established, functional and capacitated regional hubs Women's Safety & Prevention Services (non-residential) in Grigoriopol & Ribnita	Achieved. Two regional HUBs (Grigoriopol and Slobozia) have been established and are mostly functional. Both hubs benefited of capacity building interventions and provide regularly complex services to the beneficiaries, mostly women, victims of domestic violence.
O2.1	2.1.3. Nr of partnerships with local NGOs for transfer of the management of the Shelter and regional hubs	Baseline: 0 Target: Partnerships created with 2 NGOs in order to transfer the management of the Shelter and 2 hubs	Achieved. Partnerships were created and two grant Agreements with two extensions have been signed. The transfer of the management of shelter is expected to take place after launching the new premises.
O 2.2	2.2.1 The presence of professionals (in shelter, in two regional hubs, in services managed by other local NGOs) who can deliver qualitative services for victims of DV and HT	Baseline: 0 Lack of skilled human resources in regional hubs to deliver qualitative services for victims of DV and HT. Target: 15 professionals from the specialized services of the partners are strengthened.	Achieved. 98 thematic specialists such as: psychologists, social assistances, case managers, lawyers, teachers, doctors, representatives of local public institutions, policemen representing 11 NGOs and 5 public institutions from TN increased their competences in qualitative services delivery for victims of DV and HT as the result of the six capacity building trainings.

O 2.3	2.3.1 Nr of psychologists trained to use vocational counseling techniques and psychological tests for career counseling and planning	Baseline: 0 Target: Capacity of partner NGOs developed to implement economically oriented programs for victims of DV and HT, incl. 5 trained psychologists.	Partially achieved. 3 of psychologists were trained to use vocational counselling techniques and psychological tests for career counselling and planning. It increased capacities of the partner organizations to implement actions on economic empowerment of their beneficiaries.
O 2.3	2.3.2 Nr of victims professionally oriented	Baseline: 0 Target: 80 victims professionally oriented.	Achieved. The human resources from the Shelter and two regional hubs of the project oriented professionally 103 beneficiaries.
O 2.3	2.3.3 Nr of women who graduated VET courses	Baseline: Target: 20 women graduated VET.	Achieved. 57 women graduated VET courses due to the support provided by the project.
O 2.3	2.3.4 Nr of women employed	Baseline: 0 Target: 40 employed women.	Achieved. 92 people were temporarily or permanently employed as the result of the support provided by Transnistrian implementing partners.
O 2.4	2.4.1. Nr of awareness raising activities carried out	Baseline: Domestic Violence – a hidden social problem. Target: Support the organization of awareness raising campaigns and joint events (involving the right bank) on DV and HT - 5 awareness raising activities carried out.	Not measurable. The initial approach has been changed by the project team with the donor approval. Informing population and awareness raising was planned to be done by the mobile teams of the regional hubs during the field visits ²² . The new performance indicators and targets corresponding to the changed approach were not developed. The project efforts consisted of printing and widely dissemination in the covered project sites of 1.250 brochures, 500 flyers and 500 calendars.
O 2.4	2.4.2. Not specified	Baseline: Relatively high tolerance of Domestic Violence phenomena among society. Target: Empower 5 NGOs to develop local mid-term plans to prevent DV.	
O 2.4	2.4.3 Nr of NGOs, trained to develop local campaigns	Baseline: Lack of public debates regarding Domestic Violence phenomena. Target: 5 NGOs trained to develop local campaigns.	

It worth mentioning, that the interventions within this component have been adjusted mainly due to the changed context during the project implementation, which shows the project flexibility. Thus, some activities under the objectives two and four related to the study visits for strengthening the capacities of local professionals and implementing an awareness campaign, were adjusted to better meet the local needs and the savings were redirected to construction works of the Shelter. Please see below the achievements of the project within this component.

²² The generated savings, i.e. financial resources were re-allocated to the construction works of the location of the permanent shelter.

Objective 1: Provide support in the establishment, institutionalization and functioning of a more complex social reintegration / rehabilitation service, incl. the establishment of a shelter for the victims of violence and HT and two regional hubs.

Output 1.1: The new created services help the women – victims of DV and/or HT and their children, to break the wheel of violence.

This objective and the output is pretty closed to be achieved. Thus, the project established and functionally capacitated two regional hubs in Grigoriopol and Slobozia, which run regularly the full package of services for the planned beneficiaries. As for the Shelter in Tiraspol, it was established (and functionally capacitated) in a temporary premise, because the construction works took more time and financial resources than anticipated and it is expected that by the end of October the Shelter will move into the newly renovated premises.

The field mission consultations showed that the project generated constructive partnerships with all three implementation partners from the targeted region, which run institutionalised services for women victims of DV and HT. The implementing partners also have good partnerships with the *de facto* central and public authorities of Transnistrian region of Moldova, incl. *de facto* Ministries of Social Protection; Health and Internal Affairs²³.

Regarding the *regional hubs*, evaluation confirms that although they started their work later, both of them are functional and provide systematically a complex support to the intended beneficiaries, i.e. women victims of DV and HT consisting of: legal support, psychological assistance and employment support. Both hubs increased the competencies of the capacity development trainings, good experience sharing with similar service providers from the right bank, developed operational guidelines and case management procedures which are used by the staff of the hubs.

Field mission interviews showed that in their day-to-day activity both hubs and the Shelter are working not just with the women victims of the DV and HT, but also occasionally with their children and, sometimes even with the aggressors as confirmed some of the consulted women beneficiaries²⁴. Specialists of all three entities mentioned that they are focused preponderantly on women victims of DV and HT and they have sufficient competencies in working with women, but the children, which are also victims of DV needed to be included proactively in the future similar initiatives. In this case, they would need additional capacity development on working with children victims of DV, because as mentioned on of the interviewed specialist: *“The way I interact with an adult victim of DV is different from the way I have to deal with a child. I have learned how to treat adults not children”*²⁵.

Another relevant topic was work with the aggressors of DV. This group also was not targeted by the project, but it represents the main source of DV. Again, field mission consultations revealed that hubs and Shelter occasionally interacted with them, but on ad-hoc basis and such examples are singular. The issue is that if local service providers are ready to work more proactively with the children, but recognize and require additional capacity strengthening support, none of them are willing to work with the aggressors, mentioning that it requires completely different approach, much more involvement of the *de facto* public authorities

²³ See the Partnership Agreement of the *Resonance* Center (which is running the Shelter in Tiraspol) with the three *de facto* Ministries of Social Protection; Health and Internal Affairs.

²⁴ Key informant interviews

²⁵ Key informant interviews

especially police units and the legal framework should be appropriate. Therefore, this topic is pending, although all agreed that ideally would be to have a separate actor on this.

The services related to psychological assistance and the legal advice do not encounter great implementation challenges, while the economic empowerment support proved to be very specific and challenging to the teams because of the difficulties related to job market and employment opportunities, reluctance of the employers to hire officially etc. Therefore, consulted actors expressed the opinion that this kind of support should represent a complementary initiative interlinked with other empowerment types, i.e. psychological and legal²⁶ provided by CSOs or other entities previously capacitated and encouraged to reinforce cross-river partnerships. This vision is shared by the evaluator as well. Please see the *Recommendations* part of the evaluation report.

The information from the progress reports and the data bases of the both hubs and shelter reflect that since the establishment of the services about 1,270 people, of which 1,019 of them from the target group and 251 collateral beneficiaries. Out of 1,019 target beneficiaries, 454 women, 216 children and 39 men, as follows:

- 760 women informed about the DV, its consequences and existing services;
- 580 people benefited at least of one service or more;
- 379 persons benefited of legal services;
- 415 persons received psychological services through 1996 consultations;
- 103 beneficiaries were oriented professionally by the psychologists from the temporary shelter and regional hubs;
- 57 people were professionally trained;
- 92 people were (self)employed.

With the contribution of the three institutionalised services 88 women managed to start their lives again, 72 left or are leaving the aggressor and another 16 divorced or are divorcing. More than 120 victims managed to re-enforce their rights, particularly when it comes to property rights, the restoration of parental rights, receiving social payments, obtaining ID cards for them and their children, being also assisted to address to the police department on the facts of the violence from the intimate partner. According to data presented by service providers, about 200 women were socially integrated.

The findings of the field mission interviews and data base checks show that one of the hubs have sometimes has a challenge with the double counting of the beneficiaries. This issue is pretty common for entities which deliver complex services, because a person is benefitting of a few services (e.g. legal advice and psychological assistance) and each specialist counts her for the service provided. This aspect does not undermine or diminish the project achievements and contribution, but needs to be tackled because it generates some difficulties and inaccuracies in reflecting and assessing the project performance.

Objective 2: *Strengthen the capacity of key service delivery partners to promote and protect women's rights to life free from violence and those of the victims of the HT.*

Output 2.1: Increased number of professionals contribute to diminish the consequences of domestic violence and HT phenomena.

²⁶ Key informant interviews.

These commitments represented one of the key priorities and main preconditions for securing successful service delivery. As mentioned, the teams of the hubs and shelter benefitted of tailored capacity development support after the preliminary needs assessment. Thus, for instance social workers on how to work with services' beneficiaries and psychologists on to work with victims of DV.

The comparative analysis of the pre and post training questionnaires revealed the increased level of understanding by the participants of the phenomena of DV and HT and the high degree of satisfaction with the gained knowledge in line with the taught topics.

As remarked psychologists, social assistants, and lawyers consulted during the evaluation, the two-week internship in the Drochia Maternal Centre and Drochia Centre for Assisting Perpetrators, proved to be helpful in terms of learning, inspiration and motivation²⁷. A set of regulations & guidelines and case management documents in risk assessment, case evaluation were developed, which are important for increasing functionality of the entities.

Given the fact that the capacity building interventions on topics of HR represented a premiere during the last six years in the region, the current capacity building opportunities for the HR promoting organizations is important. However, as mentioned above a lot still should be done to continue strengthening the existing capacities of the CSOs to struggle against DV, to work with children victims of DV, to approach aggressors, to strengthen cooperation on victims' identification and protection and other actions.

Objective 3: Contribute to a sustainable reintegration / empowerment of vulnerable women, including victims of DV in the labor market, through the regional hubs.

Output 3.1: Created opportunities are in line with the victims' needs and contributes to their economic empowerment. The equipped regional hubs are able to help the victims to find a decent workplace and are were enabled to provide professional orientation services to their beneficiaries, pay for vocational courses and, eventually – offer scholarships. The resources were used to help the victims find a job and or co-finance the salary for the first three months.

The evaluation findings resulted from the desk review and field data collection show that opportunities generated by the project interventions are in line with the victims' needs and contributes to their personal and economic empowerment.

The regional hubs were equipped and strengthened but still struggle to provide adequate employment support to victims to find a decent workplace or to get self-employed due to: poor economic situation in the region, lack of decent jobs, limited influence of the organizations. As underlined one of the stakeholders: *"We are not an employment agency, but we try to do the best we can do to help those women and families in need to increase their well-being"*²⁸.

However, both hubs (especially the one from Slobozia) are able to provide professional orientation services, microbusiness development advice to their beneficiaries, to cover the costs for vocational courses and, from case to case even to offer scholarships. It is important to underline that those resources were provided by the project. Therefore, it reflects the

²⁷ Key informant interviews.

²⁸ Key informant interviews.

ability of the hubs to manage adequately them while helping the victims to find a job, or co-financing their salaries for the first three months.

The entities were also equipped with the training software packages for vocational and educational actions and labour market activities.

As the result of the professional courses covered by the project, some beneficiaries were employed on the local market as seller-cashier, manicurist, hairdresser, taxi driver, cook-confectioner, bank cashier-operator, and administrative assistant. This reflects the positive contribution of the project toward a sustainable reintegration and empowerment of vulnerable women from the targeted region.

Objective 4: Raise public awareness to support prevention and disclosure of DV and HT instances.

Output 4.1: Public awareness raised to support prevention/disclosure of DV and HT cases.

Similar situation to the Objective 3 of the Component 1 and, again, as mentioned, such kind of transformations need much more consistent efforts and coherent involvement and are difficult to be assessed with the accuracy to what extent the awareness was raised not just the audience was informed as the result of the informational materials or face-to face information during the mobile teams visits. In this case this subcomponent even cannot be measured, because the initial approach has been changed by the project team with the donor approval and informing population and awareness raising was planned to be done by the mobile teams of the regional hubs during the field visits²⁹.

The initial indicators and the targets were not tailored to the new approach and are not relevant for assessment the effects of the awareness raising initiatives. Similarly, to the above mentioned situation in the component 1, there are no qualitative indicators and data to measure to what extent the changes happened in the awareness of the audience.

As per the initial project design, awareness raising campaigning was planned to be carried out by 5 NGOs, but after two attempts to select the providers, the project changed the approach due to poor coverage and corroborated with the insufficient resources for completion the renovation works of the shelter. Thus, it was decided to delegate this task to the mobile teams to ensure information of citizens from remote areas during the mobile teams' visits and face-to-face contact with the actual and potential beneficiaries. Thus, a number of informational materials and visual adds on DV and HT were spread in the covered areas consisting of about 1,250 brochures, 500 flyers and 500 calendars.

Component III: Improving prevention, treatment and care services for PLHIV, PWIDs and people in prisons.

²⁹ According to the project team, the UN Expert on HR, Thomas Hammarberg, remarked during his mission (June 2018): *I am pleased to note a growing human rights awareness in the Transnistrian region. Broadening acknowledgement of domestic violence as a human rights violation can be observed.* This information can not be triangulated as the report was not developed at the moment of final evaluation.

The profile of the project component III, as reflected in the Table 5 below, includes three outcomes and six thematic outputs. Three outputs are not linked neither to objectives nor to outcomes but are relevant to the targeted thematic area.

Table 5. Profile of component III

Objective	Output
Not specified	<ul style="list-style-type: none"> Output 1.1 - Increased access to comprehensive package of services for PWIDs, including drug dependency in community.
Not specified	<ul style="list-style-type: none"> Output 2.1 - Increased access to HIV services for 2000 prisoners.
Outcome 3. Existent HIV programming policies are HR based and gender sensitive, including M&E frameworks and budgets.	<ul style="list-style-type: none"> Output 3.1 - HR and gender mainstreamed into HIV normative framework on both banks.
Outcome 4. Improved capacities of NGOs to provide HIV testing and normative framework ensured for the service.	<ul style="list-style-type: none"> Output 4.1: Increased access to communitarian testing of most at risk populations.
Not specified	<ul style="list-style-type: none"> Output 5.1 - LEAs participate in referral process of vulnerable groups of harm reduction services.
Outcome 6: Stigma and discrimination of the PLWH decreased.	<ul style="list-style-type: none"> Output 6.1: HIV and drug dependency related stigma and discrimination reduced.

An analysis of the profile shows that the component is mostly outputs-based, although has three outcomes focused on policy reviewing (Outcome 3); Improving capacity of NGOs and adequate normative framework (Outcome 4), as well as Stigma and discrimination decreasing. Three out of six outputs are focused on increasing access of the targeted beneficiaries, while one is on HR and gender mainstreaming; other one is on increasing participation in the referral process and one is on reducing HIV and drug dependency.

Table 6. Achievements of the Component III

Output	Indicators	Baseline Target	Achievements & Remarks
O1.1	1.1.1 Nr of specialists participated at the working visit on HIV/OST to Minsk (Belarus) .	<p>Baseline: Weak understanding of OST benefits among decision makers on both banks.</p> <p>Target: 10 Authorities and relevant specialists have increased knowledge on addressing public health policies on drug use.</p>	<p>Achieved. 11 specialist had enhanced their competencies, particularly knowledge on addressing public health policies on drug use as the result of the study visit to Minsk (Belarus).</p>

O1.1	1.1.3 Nr of capacitated drug dependency & infectious diseases specialists from both banks to ensure piloting and scaling up of drug dependency treatment.	Baseline: Lack of knowledge and skills of health and NGO staff to provide OST on both banks of Nistru Target: At least 7 persons skilled to provide OST in the new 4 OST sites (2 on left bank and 2 on right bank)	Achieved. About 80 police officers had their capacities strengthened as the result of the four thematic trainings in Balti, in Chisinau and field visits.
O 1.1	1.1.4 Ensure adequate functioning of the new 4 OST sites by providing equipment.	Baseline: No OST available on the left bank. OST in partly available on the right bank. Target: 4 new sites (2 on left bank and 2 on right bank) available and 4 medical personnel trained to provide OST in the new opened sites	Mostly Achieved. Three OST sites on the right bank were opened, including one (out of two planned), which is close to TN region (Rezina).
O 2.1	2.1.1 Assessment report shared with the prison authorities.	Baseline: Lack of needs assessment of HIV response in prisons Target: Conduct the assessment in comprehensive package of services to HIV in TN prisons to identify major challenges and adjustments (incl on the normative framework).	Achieved. As the result of the assessment, the major challenges related to comprehensive package of services to HIV in TN prisons were identified. The recommendations for adjustment of the normative framework were formulated. The assessment report was elaborated in Eng and Ru and disseminated.
O 2.1	2.1.2 Nr of NGO and prison staff trained in comprehensive services to HIV in prisons.	Baseline: Weak integrated HIV and TB skills of prison and NGOs staff Target: Improved capacities of 20 Health and NGOs staff in providing qualitative integrated TB and HIV services for inmates	Achieved. 25 Health and NGOs staff members improved their capacities in providing qualitative integrated TB and HIV services for inmates.
O 2.1	2.1.3 Nr of prison staff who participated at the working visit on comprehensive package of services in prisons to Switzerland.	Baseline: Limited knowledge of prison staff regarding the comprehensive of services. Target: 6 decision making staff increased understanding with regards to integrated services in prisons	Achieved. 8 specialists had their capacities built during a study visit to Olaine prison. 9 specialists had their capacities built in alternatives to incarceration during the study visit to Bucharest (Romania).
O 2.1	2.1.4 Integration of HIV and TB services will be available for all inmates. NGOs have access to prisons to ensure peer counselling & informative sessions for the inmates. Needle Syringe & Exchange program in prisons scaled up.	Baseline: Total nr of persons with HIV in prisons – 150. Total nr of beneficiaries in prison– 2000. HIV treatment is available for persons with HIV. The retention in prisons - treatment rates are very low Target: Improved normative framework to increase access to HIV prevention and treatment services for prisoners – this is also important as only with the assessment the situation will not be changed.	Not achieved. This topic turned to be sensitive to <i>de facto</i> authorities of TN region. Despite the efforts of the implementing agency, which had six meetings with prison authorities discussing integration of HIV and TB services the normative framework as reflected in the target was not improved.

O 3.1	3.1.1 Nr of gender assessment performed and implemented.	<p>Baseline: Lack of gender assessment of HIV policies on the left bank.</p> <p>Target: One gender assessment of HIV response.</p>	<p>Achieved. The report developed for the adjustments of the normative framework has fully integrated gender-sensitive issues and recommendations developed for the new legal acts are recognized as gender-sensitive.</p>
O 3.1	3.1.2 Nr of NGO specialists and from public sector able to develop gender and HR sensitive policies.	<p>Baseline: Lack of specialists</p> <p>Target: (25) specialists from both banks of Nistru river able to develop HIV gender sensitive policies and integrate HR & gender base approach in HIV normative framework.</p>	<p>Achieved. 30 specialists from both banks increased their competencies on development of HIV gender sensitive policies and integration of HR & gender base approach in HIV normative framework.</p>
O 3.1	3.1.3 Nr of HIV working plans for 2017-2018 on both banks of Nistru river gender sensitive.	<p>Baseline: Lack of skills to provide HR and gender sensitive services on both banks.</p> <p>Target: 10 specialists skilled to promote gender sensitive plans implementation as a result of the study visit.</p>	<p>Both the baseline and the target are not linked to the indicator 3.1.3, but to the previous indicator (3.1.2). However, the target was achieved. Nine specialists increased their competencies on gender sensitive planning and implementation and achieving UNAIDS global goals 90-90-90, as a result of a study visit in (Stockholm), Sweden.</p> <p>The output <i>HR and gender mainstreamed into HIV normative framework</i> in Transnistrian region was just partially achieved. Thus, it was reviewed and recommendations formulated, but TN <i>de facto</i> authorities have no political will to examine them and to adjust the regulatory framework. However, the sustainability plan developed with the project contribution, generated changes of <i>de facto</i> Transnistrian 2018 Budget Law offering treatment for 500 pers and approving the regulatory treatment protocols.</p>
O 4.1	4.1.1 Nr of NGOs representatives able to provide qualitative HCT (HIV communitarian testing).	<p>Baseline: Weak knowledge and skills of NGO service providers to realize communitarian testing.</p> <p>Target: 30 NGOs representatives able to provide communitarian testing on both banks.</p>	<p>Achieved. 85 medical and civil society representatives are able to provide qualitative HIV testing and treatment services as a result of four trainings on new HIV clinical protocols and testing guidelines.</p>
O 4.1	4.1.2 Nr of specialists exposed to best HCT practices.	<p>Baseline: Weak abilities of NGO sector to ensure sustainability of communitarian testing.</p> <p>Target: 8 specialists exposed to best HCT practices from the region through a study visit to Baltic states.</p>	<p>Achieved. 10 specialists capacitated and able to provide qualitative HCT and PrEP treatment as a result of the study visit in Paris (France).</p>

O 4.1	4.1.3 Number of NGO personnel who are able to get funds from public resources.	Baseline: 0 Target: 25	Achieved. 30 management staff of NGOs developed their fundraising skills as a result of three trainings. Two NGOs have access to resources from domestic funds.
O 4.1	4.1.4 % of waste safely managed.	Baseline: 0 Target: 100% of waste managed safely on the right bank.	Achieved. A modern waste management medical equipment procured and installed in Balti, at NGO UORN. Currently is functional.
O 5.1	5.1.1 Nr of LEAs participated at working visit on Police Referral Services to Vienna (Austria).	Baseline: Lack of knowledge of LEAs related to comprehensive HIV/TB/OST prevention package. Target: 10 LEAs are sensitized in Harm Reduction and referral services.	Achieved. 10 participants increased their knowledge and learned the Austrian experience on Harm reduction and referral services.
O 5.1	5.1.2 25 police officers trained in Harm Reduction and personal security and safety.	Baseline: Lack of normative guidance for LEAs to address public health needs of PWID. Target: 20 LEAs are capacitated and have the necessary skills to ensure referral to Harm Reduction and personal safety and security while interacting with the vulnerable groups.	Achieved. About 50 police and 10 NGO specialists trained on Harm Reduction and personal security and safety.
O 5.1	5.1.3 Regulation developed and approved to incorporate safety and security at the work place and referral schemes to Harm Reduction for police officers.	Baseline: 0 Target: 1	Achieved. Memorandum between NGOs and police signed on the left bank. Consultants contracted. Regulation developed and approved.
O 6.1	6.1.1 Nr of reports on Stigma Index.	Baseline: Lack of Stigma index research on the right bank. Target: Stigma Index conducted.	Achieved. Two reports developed for the both banks of the river Nistru. Clear conclusions and recommendations provided on the stigma and discrimination reduction.
O 6.1	6.1.2 Nr of population covered by the campaign.	Baseline: High level of stigma and discrimination towards HIV on both banks which impede persons to exercise their rights. Target: At least 5,000 persons covered by communication campaigns	Achieved. More than 60,000 persons covered during four informative campaigns delivered by the project.
O 6.1	6.1.3 Nr of staff tolerant towards beneficiaries.	Baseline: High level stigma among health personnel providing services to HIV affected or infected persons. Target: 200 health personnel providing HIV prevention, treatment	Achieved. As a result of the campaigns provided about 200 health workers were involved into the campaigns.

		and care services tolerant to their beneficiaries.	
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Output 1.1: Increased access to comprehensive package of services for PWIDs, including drug dependency in community.

Assessing this output through the existing sets of indicators it can be concluded that it was mostly achieved even if it started with almost one-year delay due to the election of the *de facto* authorities.

Thus, with the project support 11 TN specialists³⁰ had enhanced their competencies, particularly knowledge on drug dependency treatment while ensuring HIV/AIDS prophylaxis for PWUDs as the result of the study visit to Minsk (Belarus).

It worth reminding that despite having a fast-growing epidemic, concentrated mostly in PWUDs and people in prisons, the Transnistrian region of Moldova does not implement neither Methadone nor any other evidence-based drug treatment programs.

As was confirmed by evaluation findings, about 80 police officers had increased their knowledge on relevant legal and medical topics, referral schemes as the result of the thematic trainings delivered in Balti and Chisinau by a wide range of national consultants/ specialists representing medical/drug dependence unit. The interviewed stakeholders remarked that capacity development trainings were accessible for them also because they were followed by field visits to opioid substitution sites and Therapeutic Community. This represented an added value appreciated by them, as it helped them better understand the tackled topics³¹.

The SWOT analysis undertaken during the capacity development trainings, revealed that police officers need specific technical instruments, such as Information Education & Communication. As the result, they were equipped with the thematic info materials about the key aspects and guiding procedures in two languages (Russian and Romanian). A total number of about 6,000 booklets were disseminated to police units and drug users.

It is important to remind that according to the Project Risk-analysis, the scenario (A) was to open OST on the left bank, however this is still a highly political issue; scenario (B) was to ensure opening of OST on the right bank but closer to the left bank. Due to UNODC advocacy efforts new Opioid Substitution sites have been opened in 3 additional rayons on the right bank with the financial support of GFATM, namely: Rezina (close to the left bank), Nisporeni and Ungheni. This represents a good example of project flexibility and appropriate use of risk mitigation measures.

Output 2.1: Increased access to HIV services for 2000 prisoners.

Achievement of this output turned to be sensitive and some targets were achieved, while some of them were not possible to be achieved due to their sensitiveness and resistance of the *de facto* authorities of Transnistrian region.

³⁰ The lists of delegates and traveling dates have been revised by the *de facto* authorities, the project Board and the Moldovan Bureau for Reintegration several times. Finally, the visit to Minsk was undertaken in September, and the list of 11 delegates representing just specialists and not decision makers.

³¹ Key informant interviews.

As the result of the assessment undertaken by the international expert, the major challenges related to comprehensive package of services to HIV in TN prisons were identified and analyzed. The data was gathered through the desk reviewed and interactive field data collection. It worth noting that, the project had a limitation in data collection, because it could not gather full relevant and accurate data from the inmates. The statistical data was provided on partially basis by the *de facto* authorities. However, the initiative helped to identify seven priority areas for future interventions. Tailored recommendations for adjustment of the normative framework³² were also formulated. The assessment report, produced in Eng and Ru, was presented to and discussed with the *de facto* authorities.

The post-assessment training session conducted in Transnistria proved to be important, because, on one hand - it gathered together prison staff, health and CSO specialists on HIV, TB and Drug dependency services integration in prisons was conducted on the left bank; on other hand - generated constructive and solution-oriented dialogue between the *state* and non-state actors. The evaluation findings show that the intervention had a positive effect on the participants who have increased their knowledge and improved their understanding on the provision of the Harm Reduction services in prisons.

The project was expected to integrate HIV and TB services, which would be for all inmates to create access of NGOs to prisons to ensure peer counseling and informative sessions for the inmates and to scale up needle syringe and exchange program in prisons. However, as mentioned, it was not possible to be implemented despite the efforts of the implementing partners. Therefore, the approach was mixed up and the project stakeholders benefitted of two thematic best practice sharing to study visits. The first one was to Olaine prison in Latvia and beneficiaries both prison and NGO specialists learned the Latvian experience in running Therapeutic Community and probation services. The stakeholders consulted during evaluation mission remarked the relevant experience of their Latvian colleagues, which is mostly applicable for right bank Moldovan context as well, e.g. in Prison nr. 9 Pruncul.

Visit also revealed that Moldovan prison staff and NGO specialists need thematic capacity development support, especially trainings on effective rehabilitation and re-socialization of prisoners, because as mentioned one of the stakeholders: *"It is important but not enough just to see and understand the experience, we still need support to implement what we have learned and this should be planned in the future projects"*³³. At the post visit stage, similar message was formulated officially in written and sent to UNODC by the one representative of a public institution who participated at the study visit³⁴.

After the study visit, the Therapeutic Community was launched and nine inmates are undergoing rehabilitation program³⁵. This represents a tangible accomplishment commended by the evaluator.

The beneficiaries of the second study visit were nine Moldovan stakeholders (NGO representatives, interior, justice and health state secretaries, probation services and

³² Key informant interviews.

³³ Key informant interviews.

³⁴ See the post-study visit Letter of the Aurelian Suhan, Interim Director of the National Penitentiary of RM sent to UNODC. June 2018

³⁵ See: https://www.facebook.com/Comunitatea-Terapeutica-Catharsis-390814561717282/?modal=admin_todo_tour¬if_id=1537180196377915¬if_t=page_invite

persecutors' office) just from the right bank of the river and was set also in the last month of the project duration. The visited entity was Romanian National Antidrug Agency (ANA). Again, the consulted beneficiaries underlined the usefulness of the study visit, which was an excellent opportunity for them to learn Romanian experience in applying alternatives to incarceration for PWUDs. As a direct consequence of the visit, it is planned that Romanian experts will visit Moldova in October-November 2018 to provide support on drafting the similar concept considering Moldovan context. This is an important post study visit effect, which underlines both relevance and effectiveness of the intervention and is expected to generate policy and normative framework changes.

Outcome 3: Existent HIV programming policies are HR based and gender sensitive, including M&E frameworks and budgets.

Output 3.1: HR and gender mainstreamed into HIV normative framework on both banks.

This output *was not achieved as initially planned*, despite the fact that the project delivered all key scheduled activities. Similar to the Component I, the project reached the first milestone, which was mostly under its control, and reviewed the framework, but things got blocked while trying to reach the second milestone, which was out of control of the project and was fully due to the *de facto* authorities. Thus, the project expert reviewed the Transnistrian normative framework through the HIV perspectives and formulated well-structured and justified recommendations, but because of the lack of political will of the *de facto* authorities, those recommendations were not examined. Subsequently, the TN regulatory framework was not adjusted. It is commendable, that the project team decided to change the entry strategy and policy review scale and reviewed the regulatory framework of the *so called* MoH of TN, but the result was the same, the review results and recommendations were not examined yet.

It worth noting, that the second initiative was not planned by the initial project design and represents an added value produced by the project.

Both review packages with tailored recommendations at the TN regional level and *ministerial* level are on hold and there are no yet any official explanations or plans to examine them. The initial efforts of the project team to mainstream them did not bring expected results due to the reasons explained.

However, it worth mentioning that as the results of the project interventions, e.g. thematic workshops and working meetings, about 30 envisaged actors from TN region, guided by the experts from the both banks of the river, developed a road map/working plan on sustainability (2018-2020). The policy document establishes also the financial flow and financial sources both domestic ones and from the development partners.

Meanwhile, the working plan of the Moldovan authorities on the right bank was adjusted as results of the collective efforts of about 30 state and non-state specialists. Among other related aspects such as legal, structural, institutional and managerial, the document contains the Government financial commitments to support the implementation of the policy.

This represents a clear financial sustainability prospect, which should not be underestimated.

The last intervention was aimed to strengthening capacities of the actors by providing the best international practices on gender HIV related experience. Again, as a reflection of the project flexibility, it was commonly agreed that the approach should be changed and the initially planned visit to Ukraine needs to be replaced with the Sweden, because the first one did not

generate yet good practices on gender HIV, while the second one became the world champion in reaching the targets of the 90-90-90 Strategy. Another justification for change was that Sweden is recognized as one of the top performers in mainstreaming and using of the gender sensitive norms.

The final evaluation shows that the change was justified, because as remarked several consulted civil society representatives, governmental and medical institutions from the both banks of the river, the visit represented a source for information, inspiration and motivation regarding the development of the gender sensitive HIV policies and generation of the own good practices as was voiced up during the mission³⁶.

Outcome 4: *Improved capacities of NGOs to provide HIV testing and normative framework ensured for the service.*

Output 4.1: Increased access to communitarian testing of most at risk populations.

The project scored well within this subcomponent judging through existing indicators. Thus, as a result of a capacity development course consisting of four trainings 85 medical specialists and NGO representatives increased their competencies in providing qualitative services of HIV testing and treatment according to the new HIV Clinical Protocols and testing guidelines approved in 2018.

The initially planned study visit to Lithuania on communitarian testing was assessed as not relevant anymore, because it was already consolidated on the both banks of river and Moldova, become one of the best in this thematic area in Eastern Europe and Central Asia. The clinical protocols on HIV treatment were adjusted and pre-exposure prophylaxis was introduced, which represented a premiere for Moldova³⁷.

It is another illustration of the project flexibility, when it was decided and approved³⁸ the study visit on PrEP³⁹ to Paris (France). As the effect, 10 representatives from governmental, medical and civil society sector increased their competences in HCT and PrEP implementation. As some confirmed some of them interviewed during the field mission they studied the entire process of PrEP treatment, learned the role of doctors and civil society, remarked the particularities of each stage of PrEP implementation, observed the patient's consultations, figured out the methodology and analyzed the cost-effectiveness of the treatment.

A series of three workshops represents another intervention from the development repertoire of the project, which helped about 30 Transnistrian medical specialists and representatives from the civil sector to sharpen their knowledge on such areas as: advocacy, fundraising and mobilization, prevention, support and care, monitoring and evaluation, partnership strengthening between NGOs and public institutions, in particular the AIDS Center.

³⁶ Key informant interviews.

³⁷ This approach represents a prevention method used in the highly risk groups, especially men who have sex with men, as part of the LGBT community.

³⁸ See the Project Board Decision. December 5th, 2017.

³⁹ PrEP as an innovative HIV prevention measure focused on the most at-risk populations. It was only adopted in Moldova in February 2018 and was relevant to the capacity development needs of the involved state and non-state actors for improving public and community-based services.

Finally, the procured⁴⁰ innovative medical waste management equipment installed in the premises of NGO UORN (Balti) is functional and ensures safe disposal of needles and syringes collected from about 10 rayons through harm reduction projects and meets the ecological requirements towards the process.

The interviewed project stakeholders, incl. representatives of the *de facto* TN authorities consulted during the field mission asked for financial support in procurement of similar equipment for Transnistrian region.

Output 5.1: LEAs participate in referral process of vulnerable groups of harm reduction.

The findings lead to conclusion that the project performed well on this subcomponent. Thus, about 50 police officers and 10 CSO representatives from the both banks increased their competences following the study visit to Vienna (Austria) and UNODC thematic training modules tailored to the context of each project site, i.e. right and left banks.

As remarked representatives of the LEA consulted during the evaluation interviews, it was the first ever since the war in 1992, when policemen from both banks together took part to study visit. During the visit the participants learned and observed the integrated “one-stop-shop” services for PWUDs, services for women victims of domestic violence, the Viennese model of police’s involvement and participation in referral of PWUDs.

In order to technically support the *de facto* LEAs from the left bank in effectively developing and implementing HIV sectorial plans and referral schemes from PWUDs it was revised the normative framework and formulated recommendation in line with UNODC recommendations. The set of documents, including memorandum of collaboration between LEA and NGOs were developed. Two other outputs produced by the project are the Guiding procedure document on the safety and security measures for police while interacting with PWUDs and PLHIV and the respective Action Plan, which contains actions planned and the time table to be implemented. At the moment of final project evaluation about eleven persons were referred by police to NGOs in Ribnita, which underlines the functionality of the referral system.

Outcome 6: Stigma and discrimination of the PLWH decreased.

Output 6.1: HIV and drug dependency related stigma and discrimination reduced.

The situation with this subcomponent is dual. Thus, this qualitative expected result as formulated either at the outcome or at the output level has three quantitative indicators⁴¹, which are relevant but far not sufficient to assess to what extent stigma and discrimination of the PLWH was decreased (Outcome) or HIV and drug dependency related stigma and discrimination was reduced (Output). Therefore, if assessing the output through existing set of three indicators, the output was achieved, but if to analyze to what extent stigma was reduced or decreased they are not indicative because they do not show the progress or regress. They show the nr of reports produced, nr of people covered and number of tolerant staff, not specifying how the tolerance level is going to be measured and monitored during or at the end of the project.

⁴⁰ The equipment was procured in June 2018 and was co-financed by the Global Fund to fight AIDS, TB and Malaria through the PAS Center.

⁴¹ Indicators: 6.1.1 Nr of reports on Stigma Index; 6.1.2 Nr of population covered by the campaign and 6.1.3 Nr of staff tolerant towards beneficiaries.

Nevertheless, regardless of the performance assessment issue, it is evident that the project put sufficient efforts in implementing the portfolio of interventions, which represents the first stage in the long way of reaching the expected results as formulated. Thus, two Stigma Assessment reports were developed for the both banks of the river Nistru. Both with clear conclusions and recommendations advanced on the stigma and discrimination reduction. For the TN region of Moldova, it represented a premiere. The assessments on the both banks of the river revealed that self-stigmatization is a more acute issue than the stigmatization, therefore in the future actors should be focused more on working with the beneficiaries to reduce self-stigmatization not just stigmatization. This was confirmed also by the interviewed public and private stakeholders on the both banks⁴². Another aspect highlighted during the field consultations was that it would have been extremely useful to get the opinion of those PLWH which are not yet registered as such. However, the Stigma assessments represented de-facto a baseline research and an important step forward in analyzing the issue, identifying the tendencies and formulation of the solutions for both project sites.

It worth also noting the four informative campaigns⁴³ delivered in a participative manner by the project with 18 CSO partners and line public authorities, which accordingly to the progress report (with not sufficient evidences and means for verification) has reached about 60,000 persons. Regardless of the accuracy of estimated reached audience, the evaluation remarked that project was active and publically visible. It delivered a wide range of interventions to inform, sensitize and increase awareness on HIV. The interventions consisted of: online press-conference; safe route actions; round tables; workshops, essay contest; visual adds, dance shows; flash mobs; HIV testing, Red Ribbon Gala Awards; TV and radio reportages etc. All the mentioned actions lead to conclusion that project managed to put together key state and non-state actors as well as media outlets from the both banks in its efforts which represents an important key success factor and inclusive development aspect, which should be remarked and encouraged in future similar initiatives.

3.3 EFFICIENCY

3.3.1 Cost-effectiveness of the project

⁴² Key informant interviews.

⁴³ World AIDS Day 2016; AIDS Candlelight Memorial Day 2017; World Drug Day 2017 and World AIDS Day 2017.

***EQ:** How well was the availability and use of inputs and resources managed by implementing agencies? Is the project cost-effective, i.e. could the expected results have been achieved at lower cost through adopting a different approach or using alternative delivery mechanisms?*

The cost-effectiveness was examined in terms of the overall project costs and the major project activities. The final evaluation findings show that the expertise, material and financial resources were invested in the project (human resources, capacity building interventions, researches, public campaigns, etc.) adequately and mostly sufficiently (with some exceptions e.g. related to renovations in component II and equipment procurements in component III) in terms of reaching the planned results of the evaluated project.

Analysing the budget breakdown of the project costs in relation to project components and complexity of activities carried out within each of the project component, one can conclude that the distribution of costs is appropriate. Requested and approved budget adjustments, as well as fine-tuning of the project implementation strategy proved to be efficient as contributed to maximizing effects, increasing the relevance, involving additional counterparts and widening the geography of the project with the same amount of budget allocations (e.g. the case of study visits). During the project implementation intentionally⁴⁴ or unintentionally⁴⁵ generated savings were reallocated with approval of the Steering Committee and donor.

The project proved synergy with other projects while providing or getting co-financing of some activities, e.g. with the SCBM program in the case of renovation of the Shelter (component II) or with the Global Fund to Fight AIDS, TB & Malaria (through the PAS Center) in the case of procurement of medical waste management equipment (Component III).

It worth underlining that the timeliness of the project implementation was pretty much affected by the so called *elections* in the Transnistrian region of Moldova. It is especially valid in the case of interventions of the component III and, occasionally, component II, which were linked to the *de facto* authorities. This factor shifted project implementation sometimes up to 8 months. The project was in a situation to intensify significantly its efforts and to crowd the activities in its attempt to meet the deadlines, e.g. in the component III two international study visits was organized and undertaken in the very last month of the project, i.e. June 2018.

There are two examples of approaches used by the project (one in component I and one in component II) where the efficiency of the planned and implemented interventions is questioned. Thus, evaluation revealed that the workshops organised directly by implementing agency (OHCHR) for the members of the Platform represents o source of tension and indignation⁴⁶ for two of the most well-known and experienced NGOs, who claimed that the OHCHR *should not be in the frontline by providing by itself capacity development workshops, which could be delivered by the members. In this case de facto it replaces the driving CSOs. Instead of this, it should encourage joint development actions delivered by experienced members from the both banks.* In other words, there is sufficient expertise among the platforms members, which should be used for strengthening the less capacitated members. Stakeholders remarked that this would decrease overheads, because the events would be organized in less expensive premises, would increase ownership and encourage joint actions

⁴⁴ E.g. savings generated by the component II when changed the awareness raising approach and delegated it to the mobile teams.

⁴⁵ Savings generated by the fact that some activities in the prisons were blocked by the *de facto* authorities.

⁴⁶ Evaluator assessed the current satisfaction level of the both representatives with the actual approach using the scale from 1 (extremely dissatisfied) to 10 (very satisfied). The overage mark was 5,5. Both organizations supports the idea of Platform but disagree with the actual approach of OHCHR.

of the members. The opinion of other Platform members (mostly from TN region) are shared, some of them consider that indeed there are a few members, which could take leadership and provide joint capacity development actions, while some of them (majority) consider that the existing format is a good one and if someone has something additionally to offer it is welcomed to join and do so.

Consultant triangulated this information with the feedback from some of the implementing team members and other stakeholders in his attempt to avoid interpretations about potential interpersonal aspects (ambitions, interests or incompatibilities) and formulated a recommendation. Please consult the *Recommendations* part of the report.

The second questionable approach from the efficiency point of view is the mobile teams created under the component II. They were planned and undertook periodical field visits in the localities from the targeted areas. Evaluator concluded that the idea behind the mobile team is noble – to reach out the victims from the rural and deprived areas. However, the solution is not the most efficient, because the frequency of the 35 field visits in 20 localities during project duration means 1,7 times per locality in two years, which is in the best way once per year. This is not either efficient not effective having in mind the nr of potential beneficiaries from the visited localities, frequency of the domestic violence and the fact (confirmed by the providers) that victims need systematic support. Again, please consult the *Recommendations* part of the report for a possible solution.

Nevertheless, the consultant concluded that the project has performed mostly well in achieving results in a cost-effective manner. Resources were used as planned with some adjustments and the evaluation did not find any alternative solutions (except the two suggested in the *Recommendations*), which could be provided at fewer expenses and greater sustainability and, which would be more economical for the project.

EQ: What measures have been taken during planning and implementation to ensure that the project is smoothly implemented?

The main strategic management and key decision-making body was the Steering Committee (SC) of the project. The project SC strategically monitored the implementation of the project, discussed its progress and main implementation issues encountered and approved adjusted approaches and main financial adjustments.

Generally, the management of the project was mostly proactive, flexible, solution-oriented and participatory given the multi-stakeholder format of the action. At the project design phase, and even start up stage, the UN project partners jointly decided and planned on the overall intervention areas and the implementation strategy.

However, during the other stages of the project life cycle, especially at the implementation, operational monitoring and reporting, several desynchronizations appeared as the result of the fact that every UN agency was focused on its component struggling to follow the work plan, to develop partnerships, to solve the implementing problems and to get things done, to meet the deadlines, to follow and report progress. This determined insufficient communication among the partners, which affected among other aspects also: 1) performance assessment, particularly data collection for identification of the in-depth changes generated and 2) reporting, which, among other factors, was influenced also by the project design gaps.

It is understandable that the project operated in a complex, sensitive, sometimes unpredictable and difficult context. However, the joint partners have to assume these shortcomings, which affect the efficiency of the project and are weak points. Therefore, in

future initiatives it is necessary to continue critically assessing and learning on how to: perform together, increase functionality, strengthen M&E, reach synergy and eliminate the shortcomings. Some suggestions provided in the report might be helpful in this respect.

3.4 SUSTAINABILITY

In terms of the likelihood of sustaining the benefits of the project, the results achieved to-date are particularly important. Evaluator concluded that, although some achievements reflect a higher level of sustainability and some are more ephemeral, generally the sustainability prospects of the project achievements are mostly weak and fragile with some positive exceptions, as described below.

In terms of policy sustainability, the prospects are not significant and are premature to be assessed, because the most transformative expected policy level results with regard to the policy review (components I and III) were, so far, half achieved, i.e. were reviewed by the project experts, but not adjusted by the *de facto* TN authorities⁴⁷. However, in the opinion of the evaluator, the most significant policy sustainability prospect represents the increased sensitiveness and political will of the *de facto* authorities to continue supporting the Joint action of the UN agencies and, eventually accepting good cross-river experience sharing. This prospect is still fragile but it creates good opportunities for the future initiative and the key actors can take advantage and build on it.

There are at least two positive examples (one within the component I and one within the component III) when the project influenced policy making. Both of them represents the proxy effects of the interventions and the policy sustainability prospects. Thus, within the component I the *de facto* authorities after declaration of the 2018 as Year of Equal Opportunities, drafted so called State Program “*Equal Opportunities*” (2019-2022) focused on strengthening the rights of PwDs in such areas as: increasing accessibility of PwDs (infrastructural adjustments); freedom of movement. incl. in public transportation; access to education and information and employment opportunities. The estimated budget is about 210,000 USD planned to be covered from the so called republican budget (70 %) and from the local budgets (30%). This represents a financial sustainability prospect as well if approved.

The second positive example when the project influenced policy making and budget allocations about 40,000 USD per year is related to the procurement of the means for HIV AIDS treatment for about 500 persons, which represents approx. 30% of the current needs (component III)⁴⁸.

Both examples reflect the policy sustainability aspects because are planned for a long (four years - first example) or undefined (second example) period of time. Also both of them represent clear financial sustainability prospects because contain financial commitments.

Component I of the project provides one more positive example of the policy level commitment with the sustainability aspect, particularly *ratification* of the CRPD by the *de*

⁴⁷ Although the TN *de facto* authorities got a well-structured and justified policy and normative review scheme through the HIV/AIDS aspects developed by the project expert (Component III).

⁴⁸ The Transnistrian *de facto* authorities adjusted so called Budget Law for 2017 and approved procurements. 25 April 2018.

facto TN authorities. Although they are not subject of the international treaties, it represents a policy level engagement to respect the international norms of PwDs.

In terms of institutional sustainability, the project was geared towards institutional development of the two hubs and Shelter (component II), three OSTs from the right bank (component III) and the Platform for Sustainable (Community) Development (component I).

Thus, both hubs and the shelter represents consolidated institutional sustainability prospects as the result of the increased functional capacities in terms of: priorities & working plans set; operational, case management and human resources management procedures and tools developed, increased competencies of the staff etc. The OSTs established are also functional and prove sustainability aspects in terms of: regulations, procedures, capacities etc. Both regional hubs, and three OSTs were established for an undefined period of time and intra-entity relations are appropriate for performance.

As for the Platform for Sustainable (Community) Development – the picture is mixed. On one hand - it gathered different representatives of CSOs and initiative groups of PwDs from the both banks and stimulated dialogue, including the cross-river one; On other hand- the prospects of the institutional sustainability are weak, although in June 2018 the Platform elected its Secretary and Steering Committee. After the project completion and one year of creation, the entity still has half developed and not approved action plan and the functional capacities of the entity are underdeveloped, incl. internal and external communication. Intra-entity relations between the members are positive, but, as mentioned, there are reluctance about the actual approach toward capacity development, which determined a step back of two well-experienced co-founders from the right bank.

Findings of the final evaluation reveal that accordingly to the point 8.1 of the MoU signed by the founding members, the Platform is set for three years, i.e. till 07.09.2020⁴⁹. Duration of the Platform can be extended with the consensus of all founders⁵⁰.

Financial sustainability of the project achievements in Transnistrian region of Moldova is generally weak. Established entities and leading local actors almost have no diversified financial sources and are highly dependent on the external support. One of the few exceptions is the *Resonance* Center, who is managing the Shelter and has some other financial sources coming from the different projects as direct financing. Entities are not able to cover operational costs and there are no sustainability development plans (except the one on HIV/AIDS mentioned below). As remarked interviewed stakeholders the paid services or membership fees (in the case of Platform) are not viable solutions given the context and the nature of the interventions.

Although in the agreements signed by the entities with the *de facto* TN authorities do not envisage financial commitments or buy-in actions of the *duty bearers*, the institutionalised entities/services benefit of free renting locations, which should not be underestimated because decrease the financial pressure on them.

⁴⁹ See MoU for creation of the Sustainable (Community) Development Platform, art 8.

⁵⁰ Ibidem.

Another fragile and sometime ephemeral financial sustainability prospect represents the employed beneficiaries as the result of the economic empowerment efforts of the project. As remarked interviewed beneficiaries, some of them increased their financial well-being as the effect of the VET and employment support, they are still employed and perform well; while others were employed for a short period of time (up to a few months) and then became jobless again⁵¹.

The Financial Sustainability Plan (2017-2019) developed under the HIV/AIDS component represents a good example of proactive financial sustainability-oriented approach. Thus, the document reflects the key planned interventions in the area, total financial estimations and specifies the financial sources planned to be covered by the public and “other sources”. The plan represents rather a financial estimation document that a financial sustainability plan, because it does not identify which are the “other sources” and it does not show clear commitments and a time table to raise the needed amount from those sources. But, even so the document represents an important step forward focused on financial aspects of the commitments. The document is functional and is periodically monitored and reviewed.

The financial commitments of the Moldovan Government regarding the Action Plan on HIV on right bank adjusted as results of the collective efforts of about 30 state and non-state specialists represents also a financial sustainability prospect.

Environmental sustainability was not specifically targeted by the project as the project was designed as mostly non-environmental linked intervention. Therefore, the final evaluation did not remark any actions, which would produce harm or affect the environment, on contrary the medical waste management equipment represents an example of environment protection action.

PART IV. CONCLUSIONS & LESSONS LEARNT

At the outset of this final evaluation report, it is important to emphasize that the joint project, was designed as a multi-stakeholder and complex initiative focused on the different aspects of the human rights development in the Transnistria region of Moldova. It was developed as a management response of the UN Agencies to the findings, conclusions and recommendations generated of the EU High Level HR Expert’s mission to Moldova. The mission also represented a baseline assessment and one of the *doors opening* factors, which increased the sensitiveness and political will of the *de facto* TN authorities and prepared the ground for the action.

The project is consistent with the national priorities of Moldova and priorities of the *de facto* authorities from Transnistrian region of Moldova. The project is also consistent with the SDGs and has the HRBA and confidence building elements mainstreamed.

The project has some incoherencies in its design from perspective of Theory of change and inconsistency of the performance indicators (explained in the *Relevance* section). Those aspects influenced the comprehensiveness of the data reflected in the progress reports and subsequently, the judgement of the final review.

⁵¹ Key informant interviews.

The conclusions reflect the evaluator's belief that the project was mostly action-oriented than results/change-oriented. In other words, the project partners were focused more on implementation the activities and on delivering the actions (getting things done) than on following and capturing the information about the changes generated as the results of the implemented actions.

The project operated in complex, sensible and sometime unpredictable context, but proved flexibility during the implementation and encouraged three scale partnerships among state and non-state actors at the: local level, national (cross-river) and international.

Although each component has its own distinct portfolio of interventions, the common approaches included: consistent capacity development actions, initiatives on awareness raising and *de facto* policy and normative framework review (component I and III).

Altogether, the project managed to reach majority of its targets (with some exceptions), if judging through existing set of indicators. In majority of the cases the project significantly contributed to: 1) Augmentation of the local, national and international partnerships between the key actors; 2) Strengthening the competencies of existing *duty bearers* and *rights holders*; 3) Institutionalisation of the new services and entities and 4) Increasing the visibility of the tackled human rights aspects.

Some of the initiatives did not generated expected results, despite the efforts of the partners, which delivered all planned activities (e.g. review and adjustment of the *de facto* policy and normative framework), while one initiative (work in TN prisons) was blocked, although at the initial stage it was promising in terms of effectiveness.

The project was and remained mostly cost-efficient during the delivery, but was affected by the so called *elections* in TN region. This factor determined changes among TN decision makers and represented a serious bottleneck, which caused substantive delays, especially in the initiatives based on the involvement of *de facto* authorities.

The sustainability prospects of the results achieved, so far, are generally weak, although there are some isolated positive examples achieved within each of the three components of the project. Those sustainability achievements are far not enough to ensure a continuity in the case of ceasing of the development support. Therefore, it is not the case to advance the idea for an exit strategy, even on the step-by-step approach; on contrary - it is necessary to consolidate the efforts for maximizing the effects achieved, adjusting the approach, reaching in-depth results and generating long-lasting changes, incl. in the cases of "*unfinished businesses*", which proved to be sensible and resistant to change.

Lessons learned

Regardless of the project performance, there is always room for improvement. Usually, any approach, which does not fully work as planned, represents an excellent opportunity for the project team to learn a lesson. Based on the evaluator's review of project documents, interviews with key informants, and analysis of the information collected in project sites, the Consultant suggests at least three lessons that may be of value to the partners:

- *Coherent and consistent project design is critical for a successful results-based implementation, reporting and evaluation.* The design is not a theoretical issue, because if project is not coherently designed, and there are "grey zones" between the indicators - baselines – targets, or qualitative indicators are missing, the effects of implementation and changes generated are difficult to be determined and, subsequently the value of the project is undermined. Consistent and coherent quantitative and qualitative indicators

(with interlinked baselines and targets) are essential for measuring the project's performance. Such indicators represent the key ingredients for a results - based evaluation as opposed to action- or process-based evaluation⁵². It should be possible to know whether a project has achieved its outputs/outcomes or expected results because relevant data on quantitative/ qualitative indicators and targets have been collected. The project targets should be set taking into consideration the baseline. If the baseline assessment is undertaken after the project design, i.e. during the project implementation or the approach/activity was changed as happened the project targets should be revised (added or excluded). The appropriate design of a project requires sufficient effort and expertise because its quality and coherence affect implementation, data collection, reporting and, subsequently the evaluation. Therefore, a well-structured and coherent Theory of change and a corresponding results framework are prerequisites for a successful change/results-oriented project design.

- *Delivery as One approach* sounds well, is commendable and appreciated by all state and non-state actors on the both banks of the river, but requires much higher level of interaction between the joint partners. The existing format underlined several desynchronizations among the partners and proved insufficiently efficient.
- *Capacity development* is not a one-off intervention or two-three trainings, but an iterative process of assessment – design – systematic interventions – adjustments – reinforcement– measurement of quantitative & qualitative results achieved – and exit. Approaching capacity development through this process, specifying what kind of capacity is targeted and using appropriate and various development interventions with a consistent sets of indicators can contribute to rigorous and systematic capacity development.

The evaluator recognizes that there might be additional project specific lessons. Some of them already were identified, analysed and reported by the project partners. Nonetheless, given the weaknesses identified, the evaluator has restricted himself to lessons that are overarching and that are the most striking. However as “basic” the lessons learned may be, their application offers the opportunity for partners to increase the relevance, effectiveness, and efficiency of their joint actions, including the future upcoming project.

⁵² An action-based evaluation or/and progress reporting highlights what has been done by the project and to what extent the project managed to implement properly all planned activities. i.e. it describes what happened; while a results-based evaluation or/and progress reporting is trying to identify not only if activities were implemented as planned, but to what extent targets and milestones (if any) achieved and what has been changed as a result of what has been done.

PART V. RECOMMENDATIONS

This part of the report provides seven complex recommendations based on the findings and conclusions of the final evaluation and are set forth for the UN agencies, their implementing partners and other stakeholders to use in a follow up initiative, if this is considered most feasible.

4.1 General framework of the recommendations

The diagram presents the general framework of the recommendations.

N	Recommendations
Rec. 01	Improve project design aspects.
Rec. 02	Mainstream RBM approach through the project lifecycle and strengthen monitoring, data collection and reporting.
Rec. 03	Use comprehensive and coherent approach towards capacity development.
Rec. 04	Develop and implement a Lobby & Advocacy Plan regarding HR policy and <i>de facto</i> normative framework.
Rec. 05	Support blogging as additional awareness raising and HR culture development initiative.
Rec. 06	Mainstream uncompleted and still relevant commitments in the next joint action.
Rec. 07	Use <i>blended</i> format of Delivery as One and include a Program Manager position.

4.2 Detailed recommendations

Below all recommendations are explained, which, as to the evaluator, could contribute to more efficient development of the new joint initiatives of the agencies, as well as to its enhanced relevance and effectiveness of the interventions. The order in which the recommendations are listed does not reflect their value or importance.

Rec. 01	Improve project design aspects.
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The Consultant highlighted already the importance of the adequate planning and design and how they influence implementation, monitoring, data collection and, finally reporting. Therefore, in future similar actions is highly advisable to improve the design aspects and eliminate the gaps. The suggestions described below might be in this regard:

- Project proposal development should be preceded by the *Theory of change* (ToC), which should identify the long-term goal and contain a backwards mapping of the longer-term, intermediate, and early outcomes, called “changes pathway” reflecting *if... then...*, casual linkages. It should also identify the basic assumptions about the context and key interventions needed to generate desired change. For a better assimilation it is suggested to combine narrative description and graphic presentation of ToC.
- *Develop a coherent logic of intervention and assessment*. Expected results – baseline-indicators - targets should be interlinked with no gaps. Indicators should be both

quantitative and qualitative and should be consistent and sufficient to assess the achievements versus expected results.

- *Include milestones* in the logframe or in the Results Assessment Framework. Usually, the performance planning approach is *baseline vs target*, but in a complex context as Transnistrian region, it is advisable to have milestones between the baseline and targets. Milestones should be linked to a certain time frame, e.g. project year or to some sub-activities. In some cases, the project might include also *ambition*, which, unlike milestones, is beyond the target. For instance, the target is to raise 4,000 USD generated by the public campaigns delivered during a three-year project. The baseline is “0” and the three yearly milestones might be: 1,000 USD -1st year, 1,300 USD - 2nd year and 1,700 USD 3rd year = 4,000 USD. The *ambition* would be to get raised 5,000 USD. The project team will report and will be evaluated against the target/s, but the *ambition* is a self-imposed level and represents an added value and an indicator of a self-driven entities.
- *Extend the duration of the action*. In order to generate more consistent results and to follow their sustainability prospects, it is advisable to extend the project duration for at least three years. Subsequently, switch from a two-year outputs-based project to a three-year outcomes-based action and include mid-term (self)review.

Rec. 02

Mainstream RBM approach through the project lifecycle and strengthen monitoring, data collection and reporting.

The *Results- Based Management Handbook*⁵³ developed by the United Nations Development Group (UNDG) is highly recommendable in this respect.

- *Reflect the Results’ chain* (outputs-outcomes-impact) of the project and provide a distinct set of qualitative and quantitative indicators for each of the levels. As mentioned, target outcome-based intervention and plan for outcome-based final evaluation instead of outputs-based one. Use the RBM mainstreaming guidelines, as explained in the above mentioned source, throughout the whole project management cycle, i.e.: RBM in planning; RBM in Managing; RBM in Monitoring & Evaluation and RBM in reporting. Blueprints and templates developed by the authors will be helpful.
- *Develop a detailed plan for monitoring*, use monitoring templates, collect data and report toward performance indicators. Combine describing the process/activities with the reflection of the effects/results and analyze the changes, e.g. to what extent those changes are happening as predicted in the ToC; why is a resistance to change; how to overcome the resistance; who are or might be the drivers of change etc i.e. analyze the ToC during project implementation and reporting.
- *Revise own reporting templates and the templates of the local implementing partners* through the RBM approach.
- *Provide capacity development on RBM to the local partners*. Help them to acquire knowledge and develop skills on how to: identify, plan, manage, capture and report changes generated by their interventions. It might be necessary to equip them with the adjusted RBM tools.

⁵³ Please consult: <https://undg.org/wp-content/uploads/2016/10/UNDG-RBM-Handbook-2012.pdf>

The *Capacity Development – UNDP Primer*⁵⁴ explains and provides guidelines and applicable tools, as well as generic and distinct lists for indicators both for outputs and for outcomes focused on capacity development. It is a useful source for inspiration, while planning monitoring, (self)-assessing and reporting *capacity development* initiatives. Two cognitive recommendations would be:

- Distinguish between *capacity building* and *capacity development/strengthening*. The first one means building the capacity from the scratch, i.e. the baseline is “0”, while the second one recognizes that there are some capacities already and the baseline could not be “0”.
- *Understand what means “capacity” and be specific in planning, managing, assessing and reporting*. The UNDG defines “*capacity*” as the ability of the *individuals, institutions* and *societies* to perform functions, solve problems, set and achieve objectives in a sustainable manner. Capacity involves 3 independent levels and each level requires tailored interventions, data collection, assessment and reporting:
 - *Individual* (knowledge, skills, experience)
 - *Institutional* (internal structure, HRM, policies, different operational procedures)
 - *Enabling environment* (regulations, norms, laws, policies and power relations)

Some specific recommendations coming from the project implementation and focused on increasing effectiveness and efficiency of capacity development include:

- Develop pre- and post- intervention assessment tools, e.g. after the trainings, workshops etc. Reflect assessment results and analyse them in the progress/training reports. Show the changes in perceptions, knowledge, skills, attitudes. Use appropriate assessment tools and approaches. Capacity developers should be tasked on this.
- Encourage Back-Home Action Plans (BHAP) development by the participants of the the study visits. Their BHAP might include one idea or a set of structured actions as the result of the study visits. In this way, the project will boost participants toward application and solutions. It might be a good responsibility increasing strategy, which should not be underestimated.
- It is advisable for OHCHR to fine-tune its capacity development approach and to support capacity development instead of providing it or arranging the logistics. All these aspects can be delegated to the actors both members and non-members of the Platform. Instead of this the OHCHR could be focused on implementing other recommendations, incl. on strengthening M&E system, data collection and analysis etc. This would consolidate the ownership aspects, will facilitate buy-in, stimulate joint development actions and, why not, will increase satisfaction level. It might be also an overheads reducing strategy.
- Hubs and Shelter need a tailored assistance on performance planning, management and reporting, incl. dealing with the double counting.

⁵⁴ Please consult <http://www.undp.org/content/undp/en/home/librarypage/capacity-building/capacity-development-a-undp-primer.html>

- Develop the referral system between the local actors and drop out the mobile teams approach. In the long term it is a more sustainable approach, because it is focused on capacity strengthening of the local actors and development of the referral system between the local actors and the hubs. It is also more cost-efficient.
- Encourage cross-river experience exchange between the Coalition Against of Domestic Violence from Moldova and similar alliance from TN, as well as between Alliance of Organisations with People with Disabilities (AOPD) and the Platform created by the project.

Rec. 04

Develop and implement a Lobby & Advocacy Plan regarding HR policy and *de facto* normative framework.

This is a political sensitive issue, but the partners are in a position when they have to decide how to proceed further with the policy and regulatory review packages. It is obvious that they consumed substantive efforts, expertise and recourses, but still did not reached the targets. Advocating openly for *de facto* policy and normative framework, might be interpreted as a tacit recognition, dropping it out would be perceived as a waste of resources and a failure or unsuccessful attempt. It should be decided clearly what will be done next and whether the project should be proactive and lobby for them or use the *Laissez faire* principle⁵⁵. Implementation or non-implementation of this recommendation would represent the answer. Consultants suggest to go for it.

Rec. 05

Support blogging as additional awareness raising and HR culture development initiative.

Development of the HR culture, boosting awareness raising and eventually positively influencing the attitudes and public behaviours could be maximised by development of the blogging culture, when non-journalist but proactive members of the society write and sensitise the community of about different topics of public interest and value. This might be one of the relatively innovative (for the region) but powerful intervention focused on increasing the public engagement, particularly encouraging people, as *right holders*, to write and inform others about their vision, concerns, priorities, observations of the public affairs etc. A mixed capacity development approach of professional journalists and non-professional journalists but future bloggers might generate sufficient interest and boost the initiative. Some potential capacity development topics could be:

- Why blogging is so popular?
- What are the benefits of the blogging both for bloggers and for community?
- What implies blogging?
- How to start a blogging?

⁵⁵ *Laissez faire* - "let (people) do (as they think best)" (French). The practice of non-interference in the affairs of others, especially with reference to individual conduct or freedom of action. In other words, it is the idea that people should be free to choose how to do things, without too much involvement. *Laissez-faire management* style means you give your staff freedom to make their own decisions. For additional information please consult: <https://dictionary.cambridge.org/dictionary/english/laissez-faire> .

- Blogging best practices

Also can be organised different *blogging tours* to collect data on some HR related topics and to encourage a blog contest on highlighting respective topic.

Rec. 06	Mainstream uncompleted and still relevant commitments in the next joint action.
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Final evaluation revealed which targets were not achieved or were just partially achieved. Subsequently, the uncompleted but still relevant commitments need to reach the planned and expected changes, even if it might imply full or partial review of the approach. It would represent a coherence in the approach before, eventually jumping in other areas related to HR development in TN region of Moldova.

Rec. 07	Use <i>blended</i> format of <i>Delivery as One</i> and include a Program Manager position.
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The initial *Delivery as One* format used by the project partners determined each agency to struggle to deliver its component and, at the same time, to attempt to get synchronised with other agencies. It proved to be inefficient as described in the report. Therefore, it is recommended to adjust it, particularly to use *blended* format, which is a cross-component approach when agencies perform different tasks within one component. Thus, each of them brings added value and contributes to the joint performance of the component. This involves a much closer cooperation, communication and decision making among the partners throughout the entire project management cycle, i.e. joint planning, joint implementation, joint monitoring, joint data collection and joint reporting. These advantages corroborated with the distinct Program Management might bring expected synergy among the agencies and might represent a valuable quality management solution.

PART VI. ANNEXES

ANNEX 1: Evaluation Questionnaire.

Relevance

- To what extent the project is consistent in term of SDGs and priorities of Moldovan public authorities and *de facto* authorities of TN region?
- Appropriateness of the project strategy to the actual needs and priorities of the target groups/beneficiaries of the project?
- To what extent HRBA and confidence building were mainstreamed in the project design?
- What is the quality and coherence of the project design?

Effectiveness

- What is the project fulfilment, i.e. to what extent the project reached its expected results?
- What are the effects of the capacity building interventions supported by the project?
- What are the key driving factors and bottlenecks/difficulties that influenced project implementation and achievement of the results?
- What were the direct and indirect/unintended effects of the action?
- What are the lessons and good practices generated by the project?

Efficiency

- How well are the means/inputs and activities converted into outputs/outcomes?
- Are the activities implemented in line with the plans?
- Are they implemented and the outputs/outcomes delivered in a cost-efficient manner?
- What measures have been taken during planning and implementation to ensure that resources are efficiently used?

Sustainability

- What are the main sustainability prospects of the project achievements (policy, institutional, financial and environmental)?
- Are the benefits of the project likely to continue after donor funding has been withdrawn?
- Have sound exit strategies/phase out been developed?

ANNEX 2: List of reviewed documents

1. Project Proposal “Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova”, OHCHR, UNDP, UNAIDS, UNODC, 13 June 2016.
2. Thomas Hammarberg “Report on Human Rights in the Transnistrian Region of the Republic of Moldova”, 14 February 2013.
3. 2017 Annual Narrative Progress Report, 01 January 2017 – 05 December 2017.
4. Final Narrative Progress Report, June 2016– June 2018.
5. Guidance Note on Joint Programmes, Standard Operating Procedures for Countries Adopting the “Delivering as One” Approach, August 2014.
6. “Comprehensive Package of Services for HIV Prevention, Treatment and Care in Prisons”, Assessment Report based on visits to two incarceration facilities and Recommendations to effectively address the need for a comprehensive response to HIV and AIDS services in prisons located in Tiraspol and Glinoe, Catherine Ritter, 25 February 2017.
7. Road Map UNAIDS for Transnistrian region, 2018.

8. Order No. 297 on approval of the "Instruction on prevention of HIV infection for employees of the Internal Affairs Directorate of the MIA of the PMR with groups at increased risk", 25.06.18.
9. On the introduction of changes and additions to the order No. 297 of the Ministry of Internal Affairs of the PMR of June 25, 2018. Action Plan on implementation of the Memorandum on cooperation of the Ministry of Internal Affairs of the PMR with non-profit organizations within the framework of the state program "Prevention of HIV and STI for 2016-2019".
10. Annual Consolidated Progress Report on Programmes Implemented under the Towards Unity in Action Multi-Donor Trust Fund, UNCT in the RM, Reporting period: 1 January-31 December 2016.
11. The STIGMA index of people living with HIV, Left Bank of Nistru River, Sociological research.
12. The STIGMA index of people living with HIV, Right Bank of Nistru River, Sociological research.
13. Sustainability Plan HIV, draft, UNAIDS.
14. Transition plan - UNAIDS EURO 10.04.2017 with fin. of the Global Fund.
15. Plan of joint activities of the Ministry of Social Protection and Labor of the PMR and the Center "Resonance" within the framework of the Cooperation Agreement No. 03-04 / 17 of 15.07. 2017
16. Plan of joint activities of the Ministry of Internal Affairs of the PMR and the Centre "Resonance" within the framework of Cooperation Agreement.
17. Letter of Confirmation No 05.1-14.1/4265 from Ministry of Health of PMR to Centre "Resonance" of 11 Oct 2016.
18. Free rent agreement of the Ministry of Health No. 77-D and Center "Resonance" of 26.09. 2016.
19. Results-based matrix for Strategic planning of Center "Resonance" June 2016 – July 2019.
20. Letter of the Centre for Support and Development of Civic Initiatives "Resonance" № 01-12/16 to the Ministry of Foreign Affairs of PMR on the UNDP 2016 Project, 22.01.2016.
21. Information from NGO "Zhenskie Initsiativy" about disaggregation of number of beneficiaries of Slobozia Hub from 15-12-2016 to 15-03-2017.
22. Narrative Report of the project "Strengthening the protection of victims and potential victims of HT and domestic violence with the help of the Women's Security and Violence 15.03.2017.
23. Brief report on the implementation of the components of the project by Grigoriopol Hub.
24. Statistical report of Grigoriopol Hub for Dec. 2016, Jan.-Feb. 2017, 16.03.2017
25. MPTF Office Generic Annual Programme Narrative Progress Report "Moldova Towards Unity in Action Trust Fund", reporting period 1 January-31 December 2017.
26. Analysis of Transnistrian Legislation on Persons with Disabilities. Vitalie Mester, 2017
27. Decree On the announcement of 2018 in PMR "Year of Equal Opportunities".
28. Annex to the Decree of the Government of the PMR from March 20, 2018 No. 195 "The Republican Plan of Activities for the Year of Equal Opportunities".
29. The Governmental Decision on Approval of "The Republican Plan of Activities for the Year of Equal Opportunities", 20.03.2018.
30. Sustainable Community Development Platform Memorandum of Understanding
31. Sustainable (Community) Development Platform STRATEGY for the period from 2018 to 2022.
32. Terms of Reference "National Consultant to conduct Final Evaluation of the Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova"
33. Post-study visit Letter of the Aurelian Suhan, Interim Director of the National Penitentiary Administration of RM to UNODC Moldova, June 2018.
34. <https://liktv.org/ru/content/mir-neogranichennyh-vozmozhnostey>
35. <https://liktv.org/ru/content/vich-ne-prigovor>
36. <https://liktv.org/ru/content/video-v-rybnice-proshla-informacionnaya-kampaniya-nn>
37. <https://liktv.org/ru/content/video-v-tiraspole-podveli-itogi-raboty-po-prodvizheniyu-prav-lov>
38. <https://liktv.org/ru/content/video-akademiya-oon-po-pravam-cheloveka-povysila-uroven-znaniy-zhurnalistov>
39. <https://liktv.org/ru/content/video-pridnestrovskie-zhurnalisty-virtualno-pobyvali-na-neobitaemom-ostrove>
40. <https://www.facebook.com/oonprava/>

ANNEX 3: List of consulted stakeholders

Nr	Name	Organisation	Function
1	Irina Sherstyuk	NGO "Rodnoy Bereg", Women's Safety & Prevention Service (regional HUB), Grigoriopol	Project Coordinator, Executive Director
2	Anna Chulkova		Psychologist
3	Tatiana Usova		Jurist, Social Worker
4	Oxana Chitul		Beneficiary
5	Nina Arcan		
6	Elena Burlaka	NGO "Zhenskie Initsiativy" Women's Safety & Prevention Service (regional HUB), Slobozia	Social Worker
7	Natalia Savchina		Project Coordinator, Executive Director
8	Natalia Basiul		Accountant
9	Ludmila Matveeva		Social worker
10	Alexandra Pasnichenko		Beneficiary
11	Alexandr Mazurenko		
12	Olga Vozian		
13	Tatiana Chiper		
14	Elena Leontieva	Centre for Support and Development of Civic Initiatives "Resonance", Temporary Shelter, Bender	Service Coordinator
15	Alexandra Martynenko		Director of Crisis Centre
16	Aliona Slipchenko		Beneficiary
17	Natalia Svijaia		
18	Maria Mina		
19	Oleg Fedotov	<i>de-facto</i> Ministry of Social Protection, Tiraspol	<i>De-facto</i> Deputy Minister of Social Assistance Department
20	Anastasia Bondarenko	<i>de-facto</i> Ministry of External Affairs, Tiraspol	<i>De facto</i> Advisor to the <i>de facto</i> Office for Foreign Countries and International Organizations
21	Daniela Vidaicu	Embassy of Sweden to Moldova, Chisinau	Program Officer
22	Vitalie Frecauteanu	UNDP Moldova, Chisinau	Project Officer Social Services
23	Olesea Cazacu		Program Analyst/Inclusive Growth Cluster
24	Andrei Darie		Program Specialist
25	Daniela Demiscan	Ministry of Health, Labor and Social Protection, Chisinau	Head of Public Health Policy Department
26	Alexandr Gonciar	Center for the Prevention and Control of AIDS and Infectious Diseases , Tiraspol	Chief Doctor
27	Tatiana Alexeenco		Deputy Chief Doctor
28	Svetlana Popovici	National AIDS coordination Unit, Hospital of Dermatology and	Coordinator of the National Program for Prevention and Control of HIV/AIDS

29	Iurie Climasevschii	Communicable Diseases, Chisinau	
30	Vitalie Mester	NGO "Centre for the Rights of Persons with Disabilities", Chisinau	Executive Director
31	Ruslan Poverga	NGO "Positive Initiative", Chisinau	Executive Director
32	Constantin Cearanovski		Member of NGO
33	Ala Iatco	NGO "Youth for the right to live", Balti	Chairman
34	Oxana Buzovici		Program Coordinator
35	Ludmila Untura	League of people living with HIV, Chisinau	Executive Director
36	Zhanna Vilihovaia	NGO "Alliance for Social Health", Tiraspol	Executive Director
37	Roman Sandu	NGO "Zdorovoie Budushchee", Tiraspol	Chairman
38	Veaceslav Mulear	NGO "GenderDocM", Chisinau	LGBT Health Program Coordinator
39	Svetlana Plamadeala	UNAIDS Moldova, Chisinau	Country Manager
40	Ion Turcanu	General Inspectorate of Police, Chisinau	Head of National Investigation Department, secretary of the National Anti-drug Commission
41	Vladislav Cojuhari	Ministry of Internal Affairs Moldova, Chisinau	Head of the Policy for Combating Organized Crime Department
42	Irina Barbiros	National Penitentiary Administration of Moldova, Chisinau	Head of Medical Unit
43	Varvara Dohotaru		Justice Commissar, Head of Social Reintegration Division
44	Svetlana Doltu	NGO "AFI", Chisinau	Coordinator of medical, including TB programs in Prisons
45	Irina Galacenko	NGO "Trinitii", Ribnita	Executive Director
46	Evghenii Barda		Social Worker
47	Ina Tcaci	UNODC, Chisinau	National HIV-AIDS Coordinator
48	Irina Shlaeva	Lik-TV, Ribnita	journalist
49	Igor Meriacre	NGO "Motivatia, Chisinau	Executive Director
50	Emma Matreniuc	Asociația "Vivere", Edineț	Executive Director
51	Ivan Petcoglo	Initiative Group, Comrat	Member of Sustainable Development Platform (SDP)
52	Svetlana Hromyh	Zerkalo-TV, Bender	journalist
53	Alexandru Stratulat	OHCHR, Chisinau	Program Coordinator
54	Andrei Esanu		Coordinator of Educational and Mobilization Activities for People with Disabilities
55	Cornelia Adeola		National adviser on rights of persons with disabilities

56	Natalia Murahovscaia		Coordinator of activities in Transnistria
57	Ruslan Chaban	<i>de facto</i> District Administration, Dubasari	<i>de facto</i> Head of the Administration of the District and the City
58	Elena Kupreychuk	NGO Information and Law Center "VIALEKS", Member of Sustainable Development Platform (SDP) Ribnita	Member of NGO
59	Ella Rozumnaya		
60	Maria Banari		
61	Stella Climenco	Association of parents of disabled children "Alye Parusa", Member of SDP Dubăsari	Head of NGO
62	Svetlana Statnik		Member of NGO
63	Irina Doga		
64	Artiom Diligul	Left bank of Nistru River	Member of SDP
65	Ludmila Brailova	Left bank of Nistru River	Member of SDP
66	Veaceslav Palii	Association of Families of PwDs, village Caragas, district Slobozia	Member of SDP
67	Alexandr Kovalciuc	NGO "Uchastie/ Participation", Member of SDP, Bender	Secretary of SDP
68	Svetlana Lopatina		Head of NGO
69	Svetlana Kovalciuc	NGO "Motivatsiya/ Motivation", Member of SDP, village Ternovca	Member of NGO
70	Alexandr Tolochenko		
71	Andrei Macovei	Initiative Group of the psycho-neurological Boarding School, Tiraspol	Member of SDP
72	Alexandru/ support person for A. Macovei		
73	Evghenii Nazaria	NGO "Pomozhem vmeste/ Help Together", Member of SDP, Tiraspol	Member of NGO
74	Anna Dashchenko		
75	Nadezhda Cecherlan	Initiative Group, village Speia, district Grigoriopol	Member of SDP
76	Stella Cecherlan		
77	Stefan Liller	UN Moldova	Deputy Coordinator