

Participatory Evaluation — Case Study in Thailand —



Project Sites Lampang

1. Background and Objectives of Evaluation

In recent years, a concept known as participatory evaluation has been attracting growing attention. Participatory evaluation stresses the importance of the beneficiaries' participation in the field of development assistance, and raises their sense of ownership. Although the definition of this concept has yet to be established, JICA defines it as "an evaluation ¹⁾ in which a wide range of stakeholders, including end beneficiaries, participate as much as possible to design evaluation plans, to provide, gather, and analyze information, and to revise initial project plans and other project activities." ²⁾ JICA also listed the following four objectives (expected results) of participatory evaluation:

- (1) enhancement of management capacity;
- (2) development of ownership;
- (3) promotion of effective feedback; and
- (4) improvement of accountability.

Despite the increasing attention, however, the method for participatory evaluation has not been established, and JICA has not yet implemented this type of evaluation.

In this context, as an attempt to review the concept of participatory evaluation, this evaluation study applied the Northern Ceramic Development Center Project in Thailand, which aimed at improving the local industry, as a case study to introduce a participatory evaluation approach. At the same time, drawing lessons learned and recommendations for future participatory evaluations were included in the study objectives.

The two primary objectives of this study are as follows.

- 1) Evaluation of the Northern Ceramic Development Center Project in terms of sustainability and impact among the five evaluation criteria.
- 2) Provision of recommendations for research and development of participatory evaluations applicable to JICA.

2. Evaluated Projects

(1) Project Name:

Northern Ceramic Development Center Project

(2) Type of Cooperation:

Project-Type Technical Cooperation

(3) Period of Cooperation:

14 October 1992 – 13 October 1997

(4) Partner Country's Implementing Organization:

Ceramic Development Center (CDC)

(5) Partner Country's Competent Authority:

Department of Industrial Promotion (DIP)

(6) Narrative Summary:

1) Overall Goal

Quality of Northern Thai ceramics is improved

2) Project Goal

CDC provides information and technical training regarding material use and production techniques to the northern Thai ceramic factories.

3) Outputs

- a) CDC's managerial and operational systems are established.
- b) Equipment for research and development on material use, and production are installed and maintained properly.
- c) Counterparts are trained in material use and production techniques.

¹⁾ Evaluation" in this context is inclusive of ex-ante evaluation, mid-term monitoring, terminal evaluation, ex-post evaluation. It does not refer to evaluations at completion alone.

²⁾ Institute for International Cooperation, *Participatory Evaluation and International Cooperation*, 2001.

- d) Result of research and development is disseminated through publications, training, and seminars.
- e) Technical guidance for ceramic factories is provided individually.

3. Study Participants

In addition to the Japanese evaluation team, two members from the DTEC (Department of Technical and Economic Cooperation; Thailand's agency in charge of international cooperation) joined the study at the request of the Japanese side. The Thai side prepared a separate evaluation report.

Japanese Side

Team Leader:

Kouichi MIYOSHI, Director, Office of Evaluation and Post Project Monitoring, Planning and Evaluation Department, JICA

Evaluation Method:

Ieko KAKUTA, Assistant Professor, Asia University

Analysis of Beneficiaries (residents):

Yasutoshi YAMADA, Deputy Chief Researcher, Social Development International Study and Research Centre

Analysis of Beneficiaries (firms):

Hiroshi SHIRAKAWA, First Technical Cooperation Division, Mining and Industrial Development Cooperation Department, JICA

Evaluation Planning:

Haruko KASE, Office of Evaluation and Post Project Monitoring, Planning and Evaluation Department, JICA

Analysis of Impact:

Ryujiro SASAO, ICNet Limited

Thailand Side

Duanohathai CHENCHAIWIT, Monitoring and Evaluation Sub-division, Planning Division, DTEC

Vishinu SANITBUROOT, Japan Sub-division, External Cooperation Division, DTEC

4. Period for Dispatch of Study Group

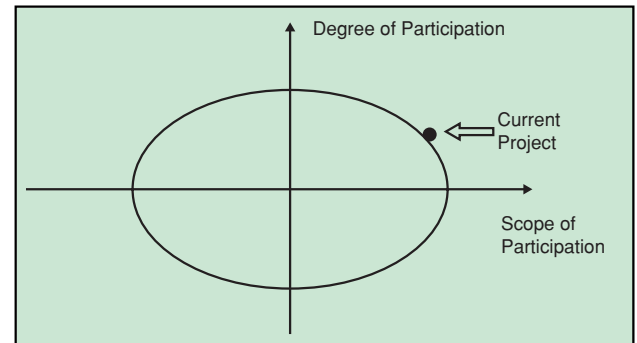
30 October 2000 – 8 November 2000

5. Method of Evaluation

(1) Position of this evaluation as a participatory evaluation

In order to implement participatory evaluations, there are two aspects that must be considered: namely, the scope of participation and the degree of participation (Figure 1).

Figure 1 Position of this Evaluation as a Participatory evaluation



The scope of participation concerns the question of who among a wide range of stakeholders including beneficiaries should be included in the evaluation process in addition to those who implement the project in question. On the other hand, the degree of participation involves the question of how far stakeholders should be involved in each evaluation process, such as designing evaluation plans and providing, gathering and analyzing information.

This evaluation emphasized expanding the scope of participation. More specifically, the evaluation was carried out to reflect different views by involving a broad range of stakeholders. The degree of participation was of a lower priority, considering that the project was not being planned and implemented as a participatory project. Time constraint was also a factor in deciding the degree and scope of participation.

(2) Method of Evaluation

Although JICA's cooperation period had already been completed, CDC activities were still in progress. In this evaluation, therefore, rather than evaluating JICA's cooperation activities in the past, it was decided to have the ceramic vendors (beneficiaries) evaluate CDC activities from the viewpoint of beneficiaries, then based on the results of this evaluation, analyze a cooperation approach. The flow of the evaluation process is described in Figure 2.

Notably, the field study was conducted in three steps.

Step 1: Project stakeholders shared their views on the CDC.

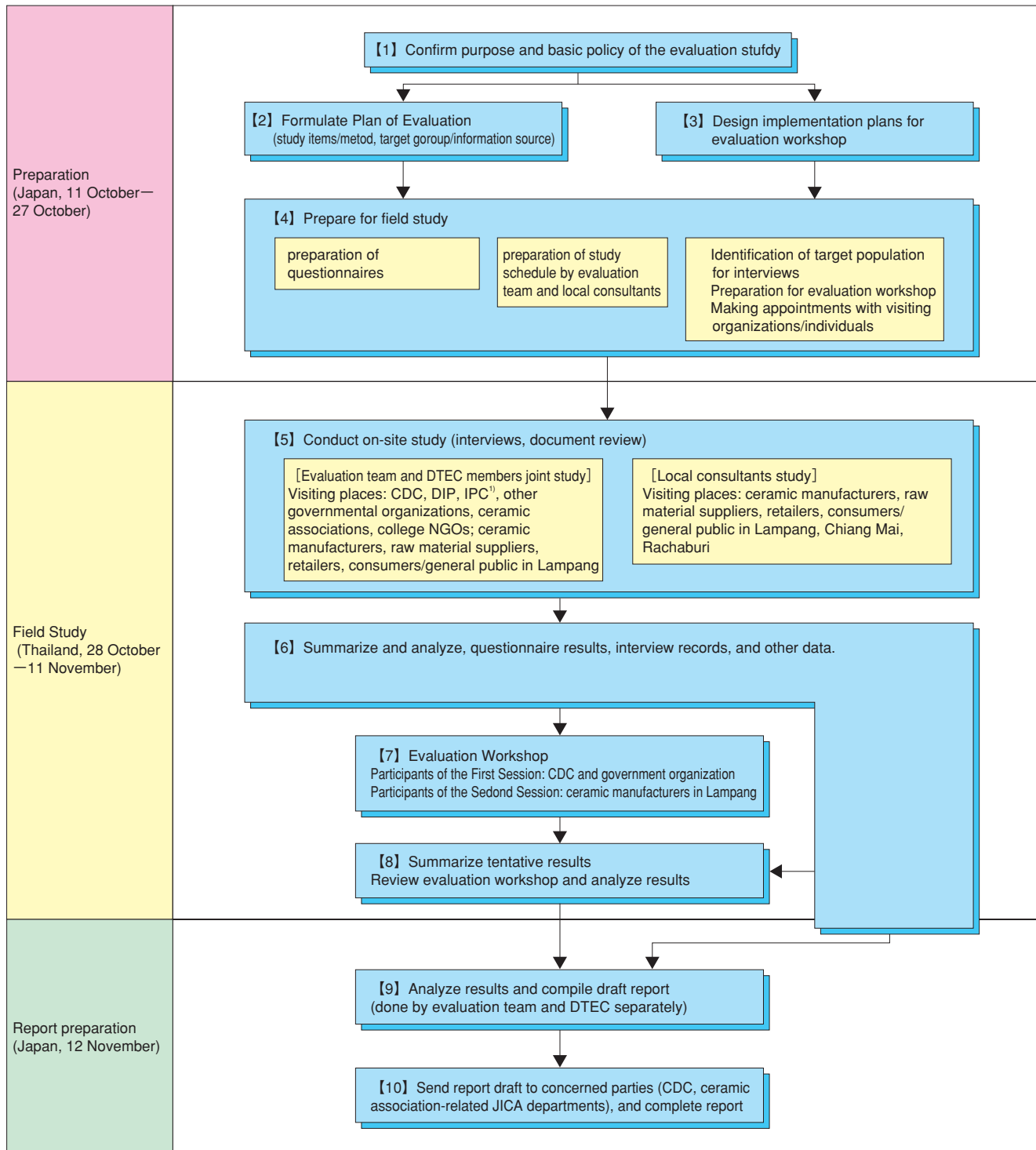
This was done through interviews with the CDC, ceramic vendors, and experts.

Step 2: Project stakeholders discussed the results gained from Step 1. CDC staff and ceramic firms freely discussed this in evaluation workshops.

Step 3: Evaluation based on the results of the previous two steps and statistics from a wider perspective. Thai and Japanese sides evaluated separately.

The final evaluation result was prepared by the

Figure 2 Flow of Evaluation Study



1) IPC : Industry Promotion Center

Japanese side.

6. Procedure of Evaluation

(1) Document Review

The following documents and reference materials were obtained and analyzed. (Sources in parentheses)

- Various reports concerned to the Project and reports of Development Studies (JICA)
- Export Statistics on the Ceramic Industry (Customs Office in Chiang Mai)
- Various Statistics on the Ceramic Industry (Industrial Department of Lampang Province)
- Trend of the Exchange Rate of the Thai Baht (Bank of Thailand)

(2) Interview Research

In order to verify the impact of the project, interviews were conducted in Chiang Mai and Rachaburi in addition to Lampang (project site) for the purpose of comparison. The criteria for selecting target areas to compare was as follows: (1) not a direct target area of this project; and (2) a relatively high degree of location of ceramic firms are present³⁾.

Targets of the interview were as shown in Table 1. Organizations, groups, and individuals that fall under one of the following six categories were interviewed: (1) project implementing organization; (2) competent authorities; (3) direct beneficiaries; (4) indirect beneficiaries; (5) implementing parties (former dispatched experts); and (6) other concerned parties (ceramic associations, college instructors etc.) Interviews with categories (3) and (4) were conducted in three different areas by students of local universities under the supervision of local consultants.

(3) Evaluation Workshop

Based on the results from (1) and (2), a workshop for participatory evaluations was held. Main purposes of the workshop included: (1) sharing the results with the project's shareholders and concerned parties, (2) discussing project evaluations in response to the results, and (3) considering the CDC's future role through discussions on evaluations.

There were two workshop sessions: one in the morning and one in the afternoon. The morning session had a total of 36 participants (33 CDC members, 1 DIP official, and 2 IPC staff), while the afternoon session had 19 participants including manufacturers.

A member from the DTEC facilitated the workshops. After the evaluation team shared the research results with



Interview with ceramic vendors

other participants, a discussion followed in response to the results.

7. Trend in the Ceramic Industry in Northern Thailand

(1) Overall Trend

Changes in export values (Figure 3) show the following trends nationwide and in northern Thai (including Lampang, Chiang Mai) ceramic industries.

After project implementation, the exports doubled nationwide, and tripled in the northern area including Lampang, one of the project sites. Although there has been a significant increase in exports since 1997, according to the interview research, the increase was deemed to be a result of rising price competitiveness due to a depreciation of the baht brought about by the economic crisis.

Table 1 Interview Research Targets

Category	Organization Name	Participated Steps of Evaluation (shown in 5.(2))	Evaluator (sample number)	Evaluation Points
Project Implementing Organization	CDC	Step 1 Step 2	Evaluation Team	CDC activities after project completion and impact on ceramic industry
Competent Authorities	DIP, IPC	Step 1 Step 2	Evaluation Team	Same as above
Projects Direct Beneficiaries	Ceramic Manufacturers	Step 1 Step 2	Local Consultants (103) Evaluation Team	Recognition of CDC, service utilization level, evaluations on service, requests for CDC
	Raw Material Suppliers	Step 1	Local Consultants (4), Evaluation Team	Same as above
Projects Indirect Beneficiaries	Retailers	Step 1	Local Consultants (17)	Evaluation of ceramic quality, impact made by ceramic industry
	Customers/General Public	Step 1	Local Consultants (99)	Same as above
Projects Implementing Parties	Former Dispatched Experts		Evaluation Team	Implementation process of the project
Other Concerned Parties	Ceramic Associations, College Instructors, etc.	Step 1	Evaluation Team	CDC activities after project completion and impact on ceramic industry

³⁾ At the time of this research, Rachaburi had the second-most and Chiang Mai had the fourth-most ceramic firms.

(2) Changes in the number of ceramic manufacturers

- 1) The number of firms has also been increasing since the project began in 1992. The number has increased from about 50 (before the project began) to 230 in 1999 (Figure 4). At the same time, the number of employees has also been on the rise.
- 2) Characteristics and Issues among Ceramic Manufacturers in Lampang (by size).

Extensive interviews were conducted on ceramic manufacturers (direct beneficiaries) during this research. Prior to the interviews, the manufacturers were classified into four categories according to size: large/medium, small, micro, and cottage. The classification by the Thai Ministry of Industry was used as a reference to set up these four categories. Refer to Table 2 for details of each category.

Problems faced by ceramic manufacturers in Lampang are shown in Figure 5. According to this figure, a very large number of large/medium-scale manufacturers are facing management problems. The most common problems faced by small-scale manufacturers are related to marketing and manufacturing processes, followed by funding. Likewise, micro manufactures identify marketing, funding and production techniques as their major

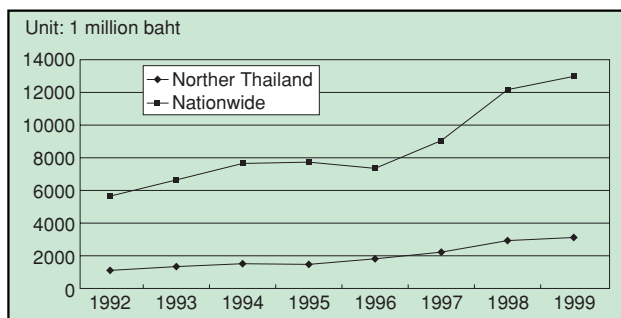


Trial Products manufactured at CDC

issues. As for the cottage industry, marketing is perceived as an extremely serious issue, followed by funding.

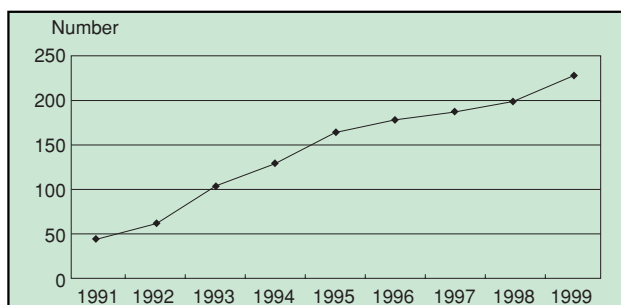
The company scale makes a difference in terms of information sources for manufacturing techniques. Large/medium scale manufacturers obtain such information from overseas ceramic vendors and brokers, while small-scale manufacturers rely on a relatively wide range of sources, including the CDC and publications. Micro manufacturers obtain such information

Figure 3 Changes in Export Values of Northern Thai Ceramics



Source: Customs Office in Chiang Mai, the Ministry of Finance, Bureau of Customs

Figure 4 Change in Number of Ceramic Manufacturers



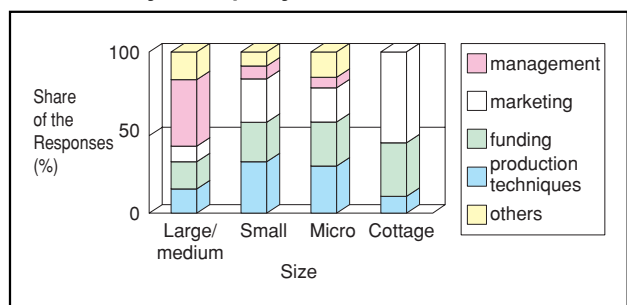
Source: Department of Industry of Lampang Province
In this figure, northern Thailand refers to Lampang, Chiang Mai

Table 2 Characteristics of Ceramic manufacturers by Size

Size of companies	Number of companies	Number of employees (average)	Capital fund ¹⁾	Annual Sales ¹⁾	Share of Exported Products
Large/medium	4	505.0	26,750	141,500	0.76
Small	30	64.6	2,050	6,208	0.70
Micro	18	28.2	339	1,961	0.43
Cottage	7	4.6	343	262	0.00
Unknown	7	63.0	3,000	3,950	0.00
Average/total	66	74.8	3,000	13,065	—

Notes: (average; unit: baht)

Figure 5 Problems of Ceramic Manufacturers by Company Size



from domestic ceramic vendors/associations, and domestic companies, in the case of cottage manufacturers, mainly from the CDC.

8. Results of Interview Research

(1) Sustainability

Results of the interview research on CDC staff regarding sustainability are as follows.

- 1) Organization: There were no major changes in the organization systems/staff after the completion of the JICA cooperation period. Many of the staff members were finding their work rewarding, but expressed dissatisfaction about their salaries. Regarding the effect of the decision that temporary staff (accounting for half of the entire workforce) would be laid off in fall 2000, there were differing opinions between top and lower level employees.
- 2) Finance: The budget has been decreasing since the 1997 economic crisis, which had affected CDC activities.
- 3) Technology: Training sessions and seminars has been conducted with a certain scale since completion of the project. Results of the evaluation on technology lev-

els by ceramic vendors were as follows.

Results of the four-grade evaluation by company size are shown in Table 4. In the evaluation of CDC's technology services, over 80% of respondents rated them as either "excellent" (36%) or "good" (46%), (Figures 6 and 7).

The result of the evaluation team's interview revealed user companies' opinions. These opinions were listed in Table 3 as comments to the CDC. As can be seen, there are differences in opinion depending on the scale of the companies.

(2) Impact

The following are the results of the interview conducted mainly on ceramic manufacturers as beneficiaries. In this interview, the manufacturers were asked the degree of accomplishment of the overall goal "the quality of Northern Thai ceramics is improved" and the CDC's impact on the ceramic industry.

1) Degree of Utilization of Techniques Learned from CDC

The interview research was conducted on a total of 103 ceramic manufacturers at three sites (Lampang, Chiang Mai, and Rachaburi). Looking at the "degree of utilization of techniques learned from the CDC," which is the premise of quality improvement, 65 manufacturers (63%) responded that they had received

Figure 6 Evaluation of CECs Technology Services (overall)

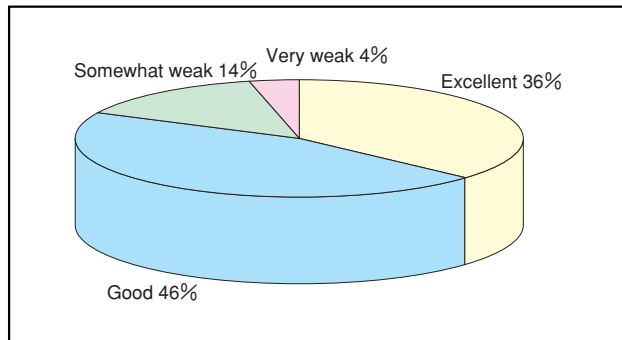


Figure 7 Evaluation of CDC's Technology Services (ceramic manufacturers only)

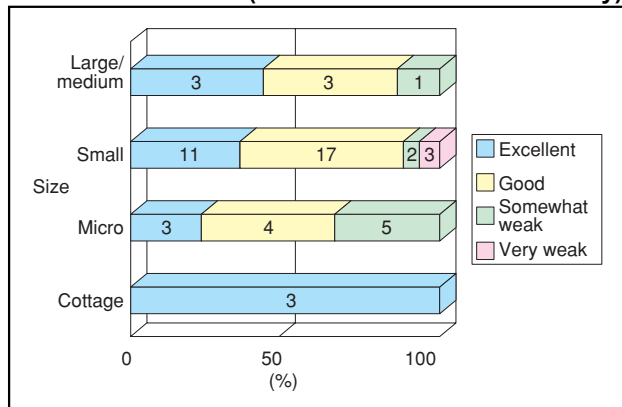


Table 3 User Companies Comments to CDC

<Large/medium manufacturers>
We occasionally contact the CDC when testing needs to be done on a laboratory scale. The CDC lacks factory-level knowledge, making it difficult to provide technology and other things necessary to manufacture products of better quality.
Training on such issues as quality management and factory management are useful to improve productivity. The presence of the CDC helped us save the time and costs necessary to reach the current level.
<Small manufacturers>
The level of technology remains the same although technologies used at other places are changing. We are using its testing services, and its machines are good.
Our staff has taken training courses and also consulted the CDC by bringing our samples. We would like CDC staff to visit our facility for on-site training. However, this has not yet been realized.
<Micro manufacturers>
CDC staff visit us two or three times a year to check our kiln and explain about glazes and paints to us. Their instruction actually helped us to solve problems.
I took training courses at the CDC. I often take their courses, as they are short (one week) and theme-specific. The course on cover coating was interesting. The content of the design course was too technical for me, as I did not have basic knowledge. I prefer onsite instructions in our factory to those training courses, though.

CDC's services, and, of those, 60% answered that they utilized techniques learned from the CDC "to a great/considerable extent."

2) Extent of Quality Improvement Realized by CDC's Assistance

Among the total of 103 ceramic manufacturers at three research sites, 55 manufacturers (70%) responded that the quality of their ceramic products had "improved to a significant/considerable degree." Therefore, it can be concluded that the CDC did contribute to improving their production quality to a certain extent.

3) Evaluation by Retailers and Consumers

In addition to the above results, 47% of 17 retailers and 72% of 99 consumers/general public at the three sites mentioned that the quality of Thai ceramics had improved in recent years. This response confirmed abovementioned ceramic manufacturers' self-evaluations to a certain extent (Figures 8 and 9).

9. Evaluation by Evaluation Workshops

In this evaluation, a workshop were held to explore the CDC's future role. This was performed by having the project-implementing parties and other stakeholders

Figure 8 Quality of Ceramics Evaluated by Retailers

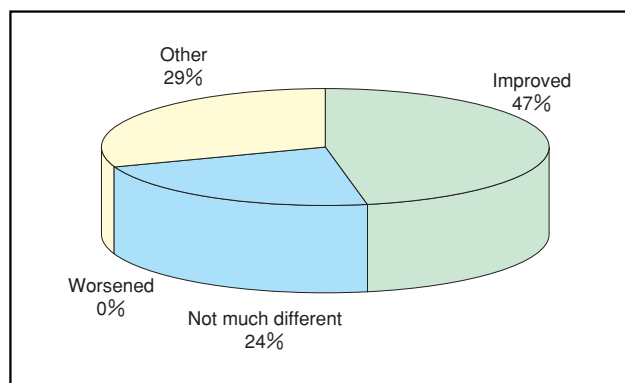
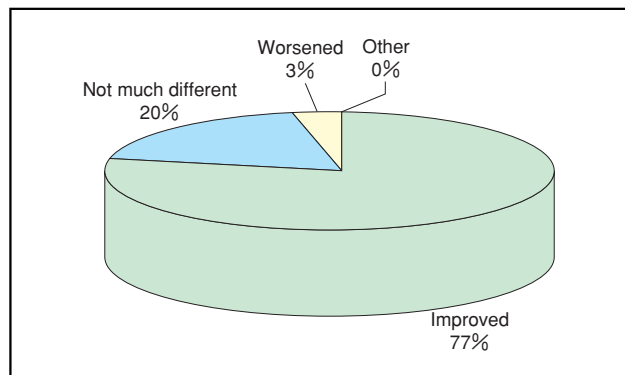


Figure 9 Quality of Ceramic Evaluated by Consumers / General Public



participate at the venue where evaluation results were gathered and discussed. However, in reality, the workshop could not be carried out in the way intended due to the fact that too much time was spent verifying facts, as well as other problems in organizing the information presented in the workshop and time constraint.

There were not so many comments on the workshop. However, these comments revealed that the most remarkable difference in opinions between CDC staff and manufacturers was about the CDC's visit to manufacturers' factories for on-site training. In the interview, many manufacturers voiced their wishes to receive training in a manner whereby the CDC would visit their factories and inspect their manufacturing processes to improve the quality of their products. In contrast, CDC senior staff indicated that the manufacturer side should visit the center for consultation, since the center is a governmental organization (however, in some departments in the CDC, there were cases which staff visited manufacturers for on-site training).

10. Evaluations by the Japanese Evaluation Team and DTEC Team

Finally, the Japanese evaluation team and DTEC conducted the second last step of evaluation. This evaluation took the results from the workshop discussions into consideration. The summary of the evaluations by the Japanese and Thai sides is shown in Table 4.

Although both sides had agreed to prepare separate evaluations since it was apparently acceptable to have differences in opinion from the same observation. However, it turned out that there was not much difference between the conclusions of the two sides. The fact that both sides exchanged their opinions after the completion of the research seems to have contributed to this result. The major reason for this, however, seems to be the fact that both evaluations results were prepared on highly neutral ground, as there was little involvement of the those actually implemented at both sides of the process.

Table 5 shows the final evaluation by the Japanese side, taking all other results into consideration.

Table 4 Summary of Evaluations by the Japanese and Thai Sides

	DTEC Team	Japanese Evaluation Team
1) Sustainability		
Organization, human resources, Institution	Somewhat weak	Somewhat weak
Technology	Not so high	Inadequate
Finance	No clear judgment	Somewhat weak
2) Impact	Fair	To some extent

11. Review as a Participatory Evaluation

(1) Review on the Evaluation Method

1) Differences in Study Results - Questionnaire vs. Open-ended Interview

In the evaluations on "CDC's Technology Services" conducted for ceramic manufacturers, there were differences between answers in the interviews based on questionnaire and those in the open-ended interviews. Specifically, while CDC's technology services were rated excellent in the questionnaire, there were severe comments against the CDC (no change in technology levels, limited on-site training at manufacturers' factories, etc.) from the open-ended interviews. The fact that the questionnaire results were somewhat more favorable than how the respondents were actually feeling seems to be explained by Thai people's hesitancy to give harsh ratings in their evaluations. Therefore, it seems important to use not only a questionnaire, but also an open-ended style or questions that do not limit respondents' answers.

2) Differences in Views Found in Responses from a Wide Range of Stakeholders and in Responses from Different Positions within a Same Category of Stakeholders

By interviewing a wide range of stakeholders, this



Facility of a large/medium-sized manufacturer. Products shown here (mugs, etc.) are packaged for export

study uncovered various parties' views on the Thai ceramic industry and the quality of ceramics. It also exposed discrepancies in views on CDC activities (such as the necessity of CDC's on-site training at manufacturers' factories) between the CDC itself and ceramic manufacturers. Moreover, an analysis by company size on manufacturers' characteristics, major issues, and relationships with the CDC clarified that the CDC was playing different roles ⁴⁾ depending on the scale of the companies.

Table 5 Final Evaluation by the Japanese Evaluation Team

<p>1) Sustainability</p> <p>A. Human Resource/Organization/System</p> <p>The current total number of staff remained the same (50 staff members) as that of at project completion. However, the sustainability in this category seemed weak, as it was planned that temporary staff (accounting for half of the entire workforce) would be laid off in fall 2000 due to budgetary concerns.</p> <p>B. Finance</p> <p>The budget had been decreasing since 1997, due partially to the economic crisis. Since this decline had been affecting the Center's activities, financial sustainability seemed somewhat weak.</p> <p>C. Technology</p> <p>Despite a certain level of sustainability in terms of technology, it was not sufficient enough. As for the CDC's external technology services, training and technical training activities were being offered at about the same level as they were during the project period. However, since the technological level of factories (CDC users) had been improving, it seemed necessary for the CDC to constantly innovate its technology to maintain its current function.</p> <p>2) Impact</p> <p>A. Achievement of the Overall Goal</p> <p>The overall goal of this project was assessed to have been achieved to a certain extent. However, the CDC's (this project's) degree of contribution was not clear enough, since there were somewhat severe responses in the interview research.</p> <p>B. Other Effects</p> <p>a) Visibility</p> <p>The CDC was well recognized. 64% of the total 223 researched targets (manufacturers, retailers, consumers/the general public) knew of the CDC.</p> <p>b) Promotion of the Ceramic Industry</p> <p>Judging from the opinions of concerned parties, promotion of the ceramic industry in northern Thailand was due more to increased price competitiveness brought about by the depreciation of the baht than to CDC activities. Nevertheless, the CDC, albeit to a limited extent, seemed to have partially contributed to the promotion of the industry. This could be said because there were many responses indicating that the presence of the CDC helped to save time and costs to bring the industry to its current position. Also, about half 26 of the 55 companies of the three research sites responded that the CDC's technological assistance helped to increase their sales.</p>
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⁴⁾ For large/medium-sized companies, this includes sample products and analysis tests, and for relatively small-sized companies, training/seminars and instructions on techniques. As for the micro or cottage companies, the lack of knowledge and/or funding for facility improvements on the company side often prevents favorable effects.

From the wider perspective, the research conducted with the CDC staff also exposed differences in views between permanent staff (managers/general staff) and temporary staff regarding the continuation of CDC activities. The planned layoff of temporary staff in September 2000 might have affected this result.

Furthermore, other organizations that provide technology information, such as colleges, were also interviewed. The responses to these interviews clarified the position of the CDC among those organizations. In addition, it also revealed that the DIP had implemented a project to provide small and medium enterprises with training by utilizing the knowledge of private-sector experts (from large-scale ceramic manufacturers) in Lampang. In finding abovementioned information a study method whereby an interviewee refers the study team to the next interviewee proved to be effective. In this evaluation, one of the manufacturers introduced the public-sector experts and the experts then introduced the DIP staff in charge, whom the evaluation team visited accordingly.

3) Comparison between Areas with CDC (Lampang) and Areas Without (Chiang Mai, Rachaburi)

A rigorous comparison could not be made, as the ceramic industries in Chiang Mai and Rachaburi actually have a sort of relationships with CDC, and also as the types of ceramic products in Ratchaburi and Lampang are different.

12. Lessons Learned and Recommendations

(1) Recommendations for Future Role of CDC

As described in the evaluation results, the improvement of ceramic exports and the ceramic industry in north-

ern Thailand has generally been progressing in line with the purpose of this project. On the other hand, however, the sustainability of the project itself has been weakening from the organizational, technological, and financial points of view, making it uncertain whether the effects seen thus far will be maintained and expanded in the future.

The following two points seem important for the CDC to become an organization that is further needed by society.

- 1) Reconstructing the CDC's appropriate role (functions/external services) by analyzing the status quo of the external environment and internal organizations, and clarifying its issues to be addressed.
- 2) Strengthening on-site training for companies, improving training quality, strengthening functions as a center to serve the industry (such as improvement of its catalyst-like role to support business activities).

(2) Recommendations for the Implementation of Participatory Evaluation

1) The results of the study revealed differences in views between companies and the CDC. In other words, while companies consider it necessary for the CDC to visit their factories, the CDC does not share this view. Since this kind of difference seems typical in Thailand's governmental organizations, it implies that the project's initial intention to "raise technological levels during the project and transfer such technologies to external organizations after the completion of the project" is rather unrealistic in this country. This project is not neglecting to provide information to external entities, and in fact, seminars and training courses are still being offered on the same scale as they were during the project. While these seminars/courses have been held on the CDC premises since its establishment in 1993, there might have been a growing corporate culture among CDC staff that regards on-site training as out of the scope of its activities. As such, it is necessary to ensure a mechanism where information is also provided to external organizations through on-site visits during the project.

In order to meet the needs on the user side, which have been becoming increasingly varied, it is vital to establish a system where users' and other organizations' demands and opinions are directly heard and reflected in activities during the project. The examples of the components of the system are namely: CDC staff visits companies, collaboration with colleges and evaluation of training courses by trainees, etc.

There seems to be an expectation that JICA, as an organization in charge of technical assistance will serve



Inside of a factory of a small-sized manufacturer

as a bridge between the CDC, which is part of the bureaucracy, and beneficiaries to realize the establishment of the above-mentioned system. Concrete measures are required to meet this expectation.

2) It would be meaningful to involve a wider range of stakeholders for participatory evaluation. It is also important to employ this method as much as possible when conducting JICA evaluations in the future. On the other hand, it is not easy to increase the degree of participation (partner country's participation in the evaluation and holding participatory workshops) within a limited time frame. Moreover, there are some cases where its effectiveness can be limited. For example, participants may not feel free to express their honest opinions in a society where there are social strata and/or status gaps between public officials and private citizens. At the same time, it is not easy to apply the participatory method under a situation in which stakeholders, who have not participated in the planning and implementation phase of a project are asked to express their opinions only at the evaluation stage. As such, the use of the participatory method requires a project-specific, case-by-case consideration.

3) Participatory Evaluation by JICA

One of the purposes of participatory evaluation is to strengthen the ownership of a cooperation project by encouraging the partner country to learn. For this, it would be desirable for counterparts in the partner country to implement a "self-evaluation," which includes establishment of evaluation criteria and the collection of evaluation information on their part. On the other hand, the purpose of the evaluation by a donor organization includes accountability and feedback to other projects as well. Therefore, a participatory evaluation for this type of project requires as many elements of the participatory method as possible, but only to an extent so as not to undermine such objectives.

Also, to meet these two objectives, in addition to the counterpart organization's self-evaluation, it would be effective to include an evaluation on the role of the counterpart organization from the viewpoint of beneficiaries.



Local employees in production