

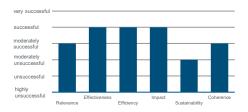
Ex post evaluation UNRWA Education and health, Palestinian territories

Title	UNRWA Education and Health Programme – Gaza and West Bank, Phase II and Phase III				
Sector and CRS code	16050 Multisector aid for basic social services				
Project number	2019 69 245 (Phase II), 2020 68 625 (Phase I	II)			
Commissioned by	Federal Ministry for Economic Cooperation and Development (BMZ)				
Recipient/Project-executing	United Nations Relief and Work Agency for Pa	alestine Refugees in the N	ear East (UNRWA)		
Project volume/ Financing instrument	EUR 25 million/BMZ (Phase II), EUR 15 millio	EUR 25 million/BMZ (Phase II), EUR 15 million/BMZ (Phase III)			
Project duration	December 2019–December 2020 (Phase II); September 2020–December 2021 (Phase III)				
Year of report	2022	Year of random sample	2022 (Phase II); 2023 (Phase III)		

Objectives and project outline

The objective at outcome level in both phases was to ensure the use of basic services of an appropriate quality for Palestinian refugees in the education and health sector in the Palestinian Territories (PT). At impact level, the aim was to contribute to maintaining the education level and health status of Palestinian refugees in the PT and to contribute to maintaining stability in the refugee camps. By financing UNRWA salaries for education and health services in the PT, Phase II and III sought to implement the objectives.

Overall rating: moderately successful



Key findings

Overall, the projects are rated as "moderately successful". The sustainability criterion is not taken into account in the overall rating, as the projects were not designed to have a sustainable impact. The higher weighting of the relevance and coherence criteria is a decisive factor in the overall rating, as the weaknesses identified there would have been avoidable.

- The relevance of the projects was moderately successful: Although they were geared towards the needs of the target group as well as the project executing agency and its capacities and were able to contribute to solving the identified core problems, the projects had conceptual weaknesses with regard to the formulation of the impact chain and the consideration of qualitative aspects.
- The coherence of the projects is rated as only moderately successful, as both phases cannot be clearly defined as humanitarian aid in terms of internal coherence and duplicate financing cannot be ruled out.
- Despite the coronavirus-related partial shortfall of the target indicators in the health sector in Phase III, the effectiveness is rated as successful overall, as the target values were achieved again at the time of the EPE.
- Production, allocation and time efficiency were successful in both phases, including in comparison with similar FC projects in the MENA region.
- The overarching developmental impacts are rated as successful, as the contribution of the UNRWA education and health programme, in which the projects were embedded, to maintaining the education level and health status of Palestinian refugees in the PT is plausible.

Conclusions

- In FC projects to refinance UNRWA salaries already paid, management of the project executing agency is limited
- In principle, the question arises as to the extent to which standard development policy cooperation procedures are suitable for the post-financing of UNRWA functions.
- A sustainable impact contribution cannot be expected from projects that provide short-term salary financing for the project executing agency.
- Due to the replicated concepts, there are few differences in relevance, effectiveness and efficiency between the projects.
- The focus on salary payments failed to address qualitative aspects in the education and health sector.



Ex post evaluation – rating according to OECD-DAC criteria

General conditions and classification of the projects

For decades, the unresolved conflict in and around the Palestinian Territories (PT) and the associated wars and outbreaks of violence have shaped the lives of people in the West Bank and Gaza Strip. The starting point of this conflict was the forced flight of millions of Palestinians following the establishment of the State of Israel in 1948 and the Israeli-Arabic wars of 1967 and 1973. The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA), founded in 1948 for Palestine refugees, currently has more than 5 million registered refugees in the PT, Jordan, Syria and Lebanon.

It was not until 1995 that the Oslo II Agreement laid the foundations for self-government in parts of the PT by the Palestinian Authority (PA). However, Israel remained solely responsible for security and administration in large parts of the PT. Discussions between the government of Israel and the PA did not lead to a lastingly viable solution to the conflict, despite international mediation efforts. Phases of stagnation and peaceful negotiations were repeatedly followed by periods of violence and counter-violence. The conflict with Israel intensified with the 2006 election victory of Hamas, classified as a radical Islamist group, competing with the political party Fatah for power in the PT. In 2007, Hamas, classified by the EU as a terrorist organisation, took over the government power in Gaza, which had already largely been cut off from the outside world by Israel. The two-state solution, which is preferred internationally (including by Germany), currently appears to be a long way off.

In the PT, the Human Development Index (HDI) has deteriorated significantly at times in recent years. Economic development in the PT is highly dependent on Israel, as all exports and imports, for example, must be approved by Israeli authorities. On average, macroeconomic value creation stagnated during the five-year period 2017–2021, with per capita gross national income even falling from USD 3,910 in 2017 to USD 3,620 five years later. With annual population growth of 2.4 %, economic stagnation also had a particular impact on the labour market, affecting younger population groups in particular. Although the educational level in the PT is higher than in many other countries in the Arab world, the working life of younger people has become frustrating due to a lack of suitable jobs. The difficult living conditions in the PT particularly affect people in Gaza. Around 2 million inhabitants live in an area of only 360 km², of which just under 1.48 million are refugees (around 74 %). Since 2017, the PA has reduced payments for electricity supplies to Gaza and reduced the salaries of its employees. In 2020, the social and economic situation in the PT was exacerbated by the effects of the COVID-19 pandemic. The poverty rate in the PT reached 29.7 % in 2020 according to estimates by the World Bank, an increase of almost 8 percentage points compared to 2017.

Brief description of the projects

With the projects "UNRWA Education and Health Programme – Gaza and West Bank, Phase II" and "UNRWA Education and Health Programme – Gaza and West Bank, Phase III", Germany financed the salary payments of around 4,500 teachers and other school staff and medical personnel in Phase II and around 3,100 teachers and other school staff and medical personnel in Phase III for different periods from January 2019 to December 2019 (Phase II) and January 2020 to December 2020 (Phase III). Under Phase II, a total of 96 schools in the West Bank and 69 schools in the Gaza Strip benefited, and under Phase III, 96 schools in the West Bank and 23 schools in the Gaza Strip benefited. As a result, access to education was maintained for approximately 113,000 Palestinian pupils in Phase II and for approximately 68,000 Palestinian pupils in Gaza and the West Bank in Phase III. Palestinian refugees in Gaza were also ensured access to basic health care (including in the context of the coronavirus crisis starting in 2020) and 22 health care centres benefited from the financing of salaries in Phase II and III respectively. Both projects stabilised UNRWA's continuing problematic financial situation and followed the previous phase "UNRWA Education Programme in Gaza and the West Bank, Phase I" (BMZ No. 2018 49 553).

 $^{^{\}rm 1}$ In the period 2017–2021, the PT's gross domestic product fell by -0.3 % on average each year.

 $^{^{\}rm 2}$ Gross national income per capita in constant USD from 2015.

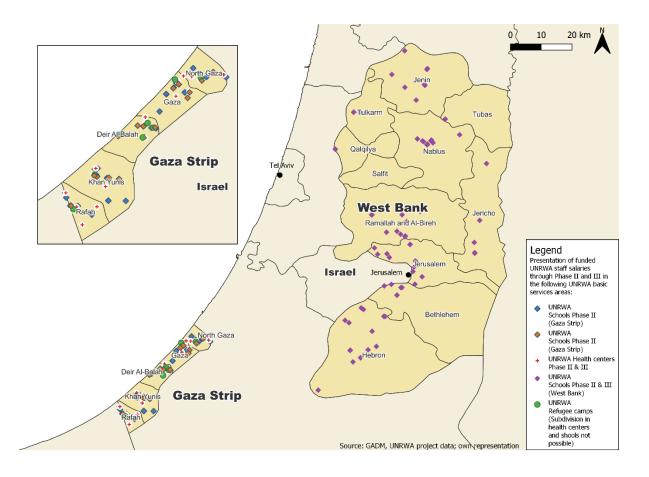
³ At the beginning of November 2022, Johns Hopkins University registered 703,036 COVID-19 infections for the PT and 5,708 COVID-19 deaths; https://www.arcgis.com/apps/dashboards/bda7594740fd40299423467b48e9ecf6 (accessed: 09/11/2022).

⁴ https://www.worldbank.org/en/country/westbankandgaza/publication/economic-update-april-2022 (accessed: 11/12/2022).



As part of this evaluation, Phases II and III are considered⁵ jointly, as the respective measures cannot be sufficiently differentiated from one another and therefore a phase-specific impact assignment cannot be ensured.

Map of Palestinian Territories including project locations



Breakdown of total costs

		Inv. Phase II (planned)		Inv. Phase III (planned)	Inv. Phase III (actual)
Investment costs (total) EUR million		25.0	25.0	15.0	15.0
Counterpart contribution	EUR million	0.0	0.0	0.0	0.0
Debt financing	EUR million	25.0	25.0	15.0	15.0
of which budget funds (BMZ)	EUR million	25.0	25.0	15.0	15.0

Phase II was part of the 2022 sample; phase III was part of the 2023 sample.



Rating according to OECD-DAC criteria

Relevance

Policy and priority focus

The projects were closely aligned with the high financing requirements of UNRWA, which was heavily underfinanced from 2018 in particular, after the United States of America initially scaled back and finally discontinued its contributions to the organisation. In addition, the projects were generally in line with the objective of the BMZ's development cooperation with the PT to provide improved living conditions and comprehensive development prospects for the people living in the PT, in which access to essential services in the education and health sector was to be maintained through consistent salary payments for staff. According to the programme proposals, this was intended to contribute to increasing the personal and economic development prospects of Palestinian refugees in the PT and to contributing to stability in the refugee camps.

However, it was not possible to reflect the further objective of the BMZ's development cooperation with the PT to lay the foundations for the construction of a future Palestinian state with high-performing institutions. UNRWA – an organisation with quasi-governmental features in the health and education sector 8– cooperates with various ministries and institutions of the PA, is represented in sector working groups and is based on fundamental sector-relevant documents, such as the curricula issued by the PA's Ministry of Education. This will allow UNRWA students to pass state examinations at the end of each educational period and move to upper secondary and higher education in the host country, in line with UN practice in refugee situations. However, in line with its commitment to neutrality towards political actors, the charity does not support the establishment of a future Palestinian state.

Focus on needs and capacities of participants and stakeholders

The core problem identified in the financing proposals, the precarious situation of Palestinian refugees in the PT and in Gaza in particular, still applies to the almost 1.4 million Palestinian refugees. In Gaza in particular, there are significant gaps in the healthcare sector in terms of supply for Palestinian refugees, 81 % of whom lived below the poverty line and who depended on free services provided by UNRWA and others in the education and healthcare sectors. ⁹ The FC projects, which aimed to safeguard Palestinian refugees' access to free health and education services, were therefore geared towards the fundamental developmental needs of Palestinian refugee families, among which education is a high priority and which is expressed through high enrolment and completion rates.

In the design of both projects, particularly disadvantaged or vulnerable groups were not addressed directly, but Palestinian refugees were generally considered vulnerable due to their refugee experience. ¹⁰ Similarly, there was no conceptual differentiation by gender, socio-economic status or age for the financed school and health personnel or the beneficiaries, which would have had the advantage, for example, of explicitly addressing gender equality within the scope of the projects, although UNRWA pays particular attention to gender-sensitive design in the education programme (see Effectiveness).

In addition to the precarious situation of Palestinian refugees, the second core problem identified was the problematic financial situation of UNRWA in the financing proposals, which also persists. For example, UNRWA shows an interim chronic underfinancing of almost USD 100 million per year on average for the core budget as a

 $^{^{\}rm 6}$ Since April 2021, the USA has been making payments to UNRWA again.

⁷ Through development cooperation with the PT, the Federal Ministry for Economic Cooperation and Development (BMZ) aims to "establish better living conditions and comprehensive development prospects for the people living in the Palestinian territories. In particular, the aim is to support the population in Gaza and East Jerusalem. On the other hand, development cooperation is intended to lay the foundations for the establishment of a future Palestinian state with high-performing institutions."; https://www.bmz.de/de/laender/palaestinensische-gebiete (accessed: 31/10/2022).

⁸ In the health sector, UNRWA provided 47 % of Palestine refugees in the West Bank and 84 % of Palestine refugees in Gaza with basic services in 2021; https://apps.who.int/gb/ebwha/pdf_files/WHA75/A75_26-en.pdf (accessed 06/11/2022). In the education sector, UNRWA in Gaza provides training for around 60 % of pupils in grades 1 to 9, in the West Bank for just under 8 %; https://www.pcbs.gov.ps/site/lang_en/708/default.aspx and https://www.UNRWA.org/what-we-do/education (accessed: 06/11/2022).

⁹ Cf. https://www.unrwa.org/sites/default/files/content/resources/gaza_crisis_monitoring_survey_report_nov_2021_final.pdf (accessed: 06/11/2022).

¹⁰ Palestinian refugees are any person whose normal place of residence was Palestine during the period 1 June 1946 to 15 May 1948 and who lost both home and means of livelihood as a result of the 1948 conflict, and their descendants; https://www.unrwa.org/de/Fragen FAQ zur UNRWA (accessed: 14/12/2022).



result of a combination of changed geopolitical priorities, new regional dynamics and the emergence of new humanitarian crises.

Appropriateness of design

Due to its experience and many years of presence in the PT, UNRWA was fundamentally suitable for implementing the projects. Likewise, the financing of salaries was suitable for mitigating the core problem, namely the problematic financial situation of UNRWA. However, from the evaluation team's point of view, there are no reasons for merging two non-contiguous components or earmarking FC funds, as this was associated with significant additional reporting, accounting and low flexibility for UNRWA, with limited administrative capacities. In any case, UNRWA's salaries were only pre-funded and funded with FC funds, and the predefined sectoral, geographical and temporal distribution of FC funds as well as the selection of schools and health care centres to be financed followed needs expressed by UNRWA and not conceptual considerations on the part of FC.

However, the fact that the projects contributed to solving the other core problem, the precarious situation of Palestinian refugees, or to the project objectives at outcome and impact level formulated in the programme proposals, can only be assumed if the projects are embedded in UNRWA's overall commitment to education and health. From the point of view of the financing of salary payments, intended effects would have to be applied to UNRWA staff and not to the beneficiaries of UNRWA services.

However, if the impact chain is assessed against the background of the FC projects' being embedded in UNRWA's overall commitment, it seems logically stringent that it was possible to maintain access to education and health services through salary payments (outcome objective), as schools and health care centres did not have to be closed due to underfunding. Access to and use of basic services can then lead to the maintenance of the level of education and health of Palestinian refugees at impact level, as well as stability in refugee camps in the sense of the absence of violence, conflicts and unrest (dual objective), which is considered to be at risk due to the population living in poverty and the very high pressure on resources and services within the camps.¹¹ However, from a development policy perspective, other influencing factors, such as the qualification of staff or the learning environment, were not addressed conceptually.

Response to changes/adaptability

Contrary to the original financing proposal for Phase II, the Federal Ministry for Economic Cooperation and Development (BMZ) imposed the requirement to use EUR 5 million of FC funds to maintain health care for Palestinian refugees in the Gaza Strip, while only funds for the education programme were provided in Phase I. As a result, the module title and module objective were expanded in Phase II and the indicators adapted to the health sector; Phase III followed the basic division of FC funds for education and health. The conceptual adjustment of the projects thus followed the changed needs and is assessed as appropriate from the perspective at the time, as well as today.

While the financing proposal for Phase II provided for 80 % of the FC funds for education and 20 % for health, the share of FC funds planned in Phase III for education was 68.7 % and for health 31.3 % (in each case including the UNRWA management fee). The somewhat higher share for health in Phase III was the result of necessary adaptations to the COVID-19 pandemic, such as reorganising the health care centres in accordance with the World Health Organisation (WHO) rules and regulations, needs-based selection of health care centres whose personnel costs were funded, supplementing medical consultations with telemedical advice, implementing the necessary hygiene and distancing regulations, equipping staff with protective equipment, medical care for patients in home quarantine, etc.

Summary of the rating:

Taking into account all assessment dimensions, we rate the relevance as only moderately successful due to conceptual weaknesses (see appropriateness of the design). This applies to both projects, as there were no major differences in relevance between Phase II and III. The positive effect of the evaluation of both projects is that they

¹¹ The formulation of the impact chain was slightly adjusted in this EPE. At impact level, instead of the improvement of personal and economic development opportunities, this evaluation talks about maintaining educational attainment and health status, as opportunities are very unspecific. In addition, access to education and health services was replaced at outcome level by the use of basic services in education and health, as access must be located at output level and usage reflects the outcome level.



were geared towards the needs of the target group as well as the project executing agency and its capacities and were able to contribute to solving the identified core problems.

Relevance: Moderately successful

Coherence

Internal coherence

Both projects were consistent with international norms and standards to which both German DC and the project executing agency UNRWA are committed, such as gender equality or the implementation of Agenda 2030. In addition, the two projects complemented other projects implemented by UNRWA with the support of German FC, such as the Regional Programme for Palestine Refugees in the Near East Region (REPAC)¹², as well as German FC projects in the PT with other project-executing agencies. These include, for example, the Investment Programme for Resilience (IPR – COVID-19 Response) implemented by the United Nations Development Programme (UNDP), which covers, among other things, emergency aid measures to strengthen the capacities of health services in the context of the COVID-19 crisis as well as measures to rehabilitate and expand social infrastructure.¹³ German TC made an additional contribution, particularly in the area of vocational training, and also cooperated with UNRWA and other project-executing agencies. One example is the TC project Needs-based Vocational Training (DoTVET), which aims to qualify training staff at vocational schools and in training companies.¹⁴

In terms of internal coherence, a fundamental division of labour within German DC can be seen in summary, and synergies between the projects can also be assumed. However, the projects differed less significantly from the support provided by the German Government in the Gaza Strip, which was provided to UNRWA using funds from the German Federal Foreign Office in the context of humanitarian aid. While UNRWA was free to use these funds for the core budget in the areas of health and education, the FC funds were tied to financing salaries from the core budget. Overlaps cannot be ruled out here.

External coherence

UNRWA works in the education and health sector with Palestinian ministries and authorities, as well as with local and international NGOs. In addition, UNRWA focuses on the education plans of the Palestinian Ministry of Education in order to give pupils the opportunity to pass state examinations and complete secondary and higher education. Coordination with relevant institutions, such as the WHO, was also in place in the health sector. While UNRWA exclusively provided primary health care for Palestinian refugees in the health care centres, secondary and tertiary health care was the responsibility of private and civil society providers as well as the competing Hamas and Fatah parties. ¹⁵ In principle, the Fatah-led PA was interested in cooperating with UNRWA, as the charitable organisation was a service provider for the PA with no alternative against the backdrop of the unresolved Middle East conflict and the internal Palestinian tensions in Gaza, which provided a majority of the population with education and health-related services, as well as a significant employer in the education and health sector.

A large number of other donors were also involved in UNRWA's involvement in the PT, such as the European Union or the United Kingdom, which also partially financed the UNRWA education and health programme. UNRWA did not systematically record whether and to what extent individual donors linked their contributions exclusively to salary funding, as in the case of the projects evaluated here, or other specific measures. Its requests for reform and learning experiences were received, among other things, by the UNRWA Advisory Commission, whose objective was to support UNRWA in the Medium Term Strategy 2016 to 2021 to increase efficiency in the provision of education and health services.

¹² Information on the current phase can be found at https://www.kfw-entwicklungsbank.de/ipfz/Projektdatenbank/Regionalprogramm-f%C3%BCr-Pal%C3%A4stina-Fl%C3%BCchtlinge-in-der-Nahost-Region-hier-REPAC-XII--47866.htm (accessed: 11/11/2022).

¹³ Information on the project can be found at https://www.kfw-entwicklungsbank.de/ipfz/Projektdatenbank/UNDP-Pal%C3%A4stinensische-Gebiete-Investitionprogramm-f%C3%BCr-Resilienz-IPR---COVID-19-Response-48187.htm (accessed: 11/11/2022).

¹⁴ Information on the project can be found at https://www.giz.de/projektdaten/region/2/countries/PS (accessed: 11/11/2022).

¹⁵ However, the roles of providers are not clearly defined and the responsibilities overlap, which leads to duplication of work on the one hand and gaps in supply on the other. Overall, the healthcare sector is characterised by a large number of actors, which differ in their offerings and the quality of services. However, it is not possible to make a general statement about which provider performs better in terms of quality; https://jogh.org/2022/jogh-12-03014 (accessed: 16/12/2022).



Summary of the rating:

Given the complex political environment, we rate the division of labour and coordination between the relevant DC actors, as well as the complementarity of Phases II and III with other projects in the education and health sector, as good. However, since both phases cannot be clearly defined as humanitarian aid and duplicate financing cannot be ruled out, we rate the overall coherence as only moderately successful.

Coherence: Moderately successful

Effectiveness

Achievement of (intended) targets

The outcome-level objective underlying this EPE for both projects was to ensure the use of basic services of an appropriate quality for Palestinian refugees in the education and health sectors in the Palestinian Territories.

By financing salaries in the education sector for a period of six months in Gaza and a period of three months in the West Bank, it was possible in Phase II to ensure access for 67,000 pupils at 69 out of a total of 278 UNRWA schools in Gaza and 45,681 pupils at 96 out of a total of 702 UNRWA schools in the West Bank from grades one to nine, as the teachers were paid and lessons could therefore be maintained and school closures due to underfunding avoided.

In Phase III, FC financing for salaries in Gaza for six months and in the West Bank for three months was able to ensure access for 22,000 pupils at 23 schools in Gaza and for 46,028 pupils at 96 schools in the West Bank.

Through follow-up financing, UNRWA has also succeeded in securing uninterrupted access to school education for Palestinian refugee children in the PT beyond the project term. In the 2020/21 school year, UNRWA supplied around 286,000 pupils at UNRWA schools totalling 477,000 pupils from grades one to nine in Gaza and more than 45,000 pupils at UNRWA schools totalling 600,000 pupils from grades one to nine in the West Bank. ¹⁶

In terms of quality, UNRWA sought to provide high-quality education through qualification and reform programmes. However, a high demand for UNRWA education services, savings constraints and demographic growth led to relevant indicators of educational quality, such as the average class size or pupil/teacher ratio, being comparatively high at UNRWA schools and UNRWA schools having to be run in double shifts, particularly in Gaza. In the 2020/21 school year, for example, the average class size there was 41.2 pupils at UNRWA schools (public schools: 39.2), while the pupil/teacher ratio at UNRWA schools was 34.4 (public schools: 25.5). In the West Bank, the average class size at UNRWA schools was 27.2 pupils (public schools: 27.8) and the pupil/teacher ratio 26.7 (public schools: 19.8). Teven in the case of the FC projects, the ratio between pupils and financed teachers at the chosen schools was similar in amount (cf. table and efficiency). According to UNRWA, this not only shows that the capacities of the charity in the education sector are fully utilised, but that the classes that are too full are also associated with property damage and violence at schools.

Based on anecdotal evidence, UNRWA basic services in the education sector are still assessed as appropriate in light of the difficult underlying conditions; the values in terms of class size and pupil/teacher ratio were also not expected to be different, but there is an increasing risk that the cuts in UNRWA budget will lead to further losses in qualitative terms.

The fact that the challenging general conditions for UNRWA, which are additionally characterised by power outages or restrictions on the movement of goods and people, especially in Gaza, were also generally at the expense of quality in the health sector can be assumed; the target of 1.13 million medical consultations in primary care in Gaza in Phase II could still be achieved by funding personnel in UNRWA health care centres for ten months. In Phase III, however, contrary to the design, only 632,000 consultations were carried out in Gaza through the twelve-month funding of personnel in UNRWA health care centres in Gaza. The reasons for this were necessary adaptations for the COVID-19 pandemic, such as the closure of 13 of the 22 health care centres in Gaza (see Relevance and Efficiency).

¹⁶ Cf. https://www.un.org/unispal/wp-content/uploads/2022/10/UNRWAANNUALOPSRPT2021_271022.pdf and https://www.pcbs.gov.ps/site/lang_en/708/default.aspx (accessed: 18/11/2022).

¹⁷Cf. https://www.pcbs.gov.ps/site/lang_en/708/default.aspx (accessed: 18/11/2022).



Overall, the following UNRWA facilities under Phases II and III benefited from the salary financing from FC funds:

Phase	Areas of intervention	
	West Bank	Gaza Strip
II	96 schools	69 schools; 22 health care centres
III	96 schools	23 schools; 22 health care centres ¹⁸

Source: Final inspection Phase II, final inspection Phase III

The achievement of objectives at the outcome level is summarised in the table below:

Indicator	Status during PA	Target value PA	Actual value at final inspection	Actual value at EPE ¹⁹
(1) Number of Palestinian refugee children with access to education in 69 schools (Phase II) and 23 schools (Phase III) in Gaza (grades 1–9)	67,000 (Phase II); 23,000 (Phase III)	67,000 (Phase II); 23,000 (Phase III)	67,000 (Phase II); 22,000 (Phase III)	67,155; 22,000 → Achieved.
(2) Number of Palestinian refugee children with access to education in 96 schools (Phases II and III) in the West Bank (grades 1–9)	45,700 (Phase II); 45,681 (Phase II)	45,700 (Phase II); 45,681 (Phase II)	45,681 (Phase II); 46,028 (Phase III)	46,037 → Achieved.
NEW: (3) Ratio of pupils to funded teachers at 69 schools (Phase II) and 23 schools (Phase III) in Gaza	N/A	N/A	35.7 (Phase II); 33.5 (Phase III)	N/A
NEW: (4) Ratio of pupils to funded teachers at 96 schools (Phases II and III) in the West Bank	N/A	N/A	27.8 (Phase II); 27.8 (Phase III)	N/A
(5) Number of medical consultations in the Gaza Strip (Phases II and III)	1.13 million ²⁰ (Phase II); 1.13 million (Phase III)	1.13 million, (Phase II); 1.13 million (Phase III)	1.13 million (Phase II); 632,500 (Phase III)	1.12 million ²¹ (Phases II + III respectively) → Almost achieved.

Source: Final inspection Phase II, final inspection Phase III, data from the project executing agency

Contribution to the achievement of objectives

The high utilisation of the schools and the once again increased number of medical consultations in 2021 prove that the basic services are used by the target group, to which the projects were able to contribute, as personnel

¹⁸ 13 of the health care centres were closed during Phase III implementation

¹⁹ The information on the education sector relates to the 2021/2022 school year; the information on the consultations relates to 2021 and was provided by UNRWA.

²⁰ This figure corresponded to approximately one third of the annual medical consultations at UNRWA health care centres in Gaza in 2019.

²¹ In 2021, a total of 3.35 million medical consultations were conducted. If the target value of 1.13 million (one third of all consultations) is set here, this was almost achieved with 1.12 million consultations.



were continuously paid and education and health services were offered consistently. In addition, it became apparent that many girls and women were able to benefit from the financing, albeit not always in an equivalent ratio.

In the education sector in Phase II, 44 % of girls were beneficiaries in Gaza and 60 % in the West Bank. In Phase III, the proportion of girls was 59.6 % in the West Bank and 50 % in Gaza. The relatively high proportion of girls in primary education can also be attributed to the gender-sensitive design of the UNRWA education programme, which promotes equal access to education for girls and boys. The fact that UNRWA promoted the role and participation of women was also reflected in the recruitment of female personnel, who were financed by the FC projects. According to UNRWA, of the 3,525 teachers and 484 people (partially) financed in Phase II who were employed as rectors, social workers or administrative staff in schools in Gaza and the West Bank, more than 60 % were women in Gaza and 68 % were women in the West Bank. In Gaza, more than 95 % had refugee status, 62 % were over 45 years old. According to UNRWA were women in the West Bank. In Gaza, more than 95 % had refugee status,

In the health sector, to which the measures in Phase II were extended in accordance with the Federal Ministry for Economic Cooperation and Development (BMZ) and continued in Phase III in the context of the COVID-19 pandemic, many girls and women also benefited, as healthcare for mothers and children was a focus of UNRWA's health care, with men also increasingly involved here. In addition, the e-Maternal and Child Health mobile application was introduced in 2019 in the form of an app to open up health services for families with limited access. Similar to the education sector, 61 % of the total of 502 health professionals financed in Phase II were female, 96 % were refugees and 45 % were over 45 years old.²⁴

Quality of implementation

In addition to gender-sensitive personnel and education policies during the project's term, UNRWA also stood out due to its high quality in project management and implementation, as well as its ability to adapt well to the COVID-19 pandemic, both in the education and health sectors. In response to school closures during Phase III, UNRWA developed materials for home schooling and a digital learning platform. In the healthcare sector, for example, in addition to remote medical consultations, medications were also supplied to patients in home quarantine.

Unintended consequences (positive or negative)

It was foreseeable that both projects would not only have an impact on the intended target group, but also on the level of the financed personnel, e.g. in terms of purchasing power or the socio-economic status of the personnel. Salaries also included social security contributions and company social benefits, e.g. for transport or health insurance. Although UNRWA was forced by the chronic underfinancing to leave teaching vacancies unfilled or to pay teachers only on a daily wage basis, the UN charity was a more reliable employer with a tendency to pay slightly higher salaries for teachers and health workers in Gaza than the PA, which in the past sometimes did not pay or reduced salaries for staff in the education and health sector in Gaza on a continuous basis. However, there is no evidence that this circumstance led to obvious conflicts between staff without refugee status and teaching and healthcare workers with refugee status who were employed by UNRWA and who tended to be somewhat better qualified.

Summary of the rating:

While in education the target values were also achieved beyond the end of the project in both phases, the target values in the health sector could only be achieved in Phase II. However, since the failure in Phase III is due in particular to restrictions brought about by the coronavirus pandemic and significantly more consultations were carried out in 2021 that are close to the original target value, we rate the effectiveness of the projects as a result that fully meets expectations.

Effectiveness: Successful

²² It was not possible in the EPE to reconstruct why the proportion of girls increased significantly in Phase III.

²³ There is no information available on the 2,311 teachers and 422 other school employees (partially) financed in Phase III or equivalent information on the West Bank.

²⁴ Information on the 373 healthcare professionals financed in Phase III is not available.

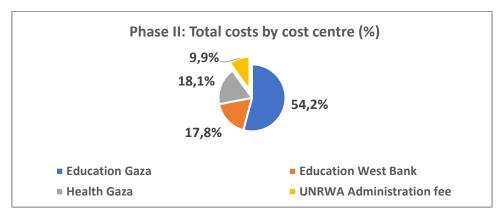


Efficiency

Production efficiency Phase II

Since the project was limited to the funding of UNRWA salaries in the education and health sector, conceptual design options for input and output remained narrowly restricted. Limits were also set for the evaluation of the achievement of economic objectives and the economic use of resources, as UNRWA as the project executing agency was not obliged to submit detailed cost and performance accounting for the measures implemented. This was in line with the standard procedure for Financial Cooperation with UN organisations.

The cost structure of Phase II that can be derived from the evidence available shows that of the FC funds of EUR 25 million (USD 27.5 million), UNRWA used USD 14.9 million (54.2 %) for education measures in Gaza, USD 5.0 million (18.1 %) for health care measures in Gaza and USD 4.9 million (17.8 %) for education measures in the West Bank. In addition, UNRWA charged USD 2.7 million as a flat-rate administrative fee, representing 9.9 % of the total project costs of USD 27.5 million. More than 70 % of the FC funds were used to provide uninterrupted access to school education for Palestinian children in the PT. According to the UNRWA project proposal for Phase II, three quarters of direct education expenditure was used in Gaza. 100 % of the salaries of school staff in Gaza were financed from FC funds; in the West Bank it was only 49 %.

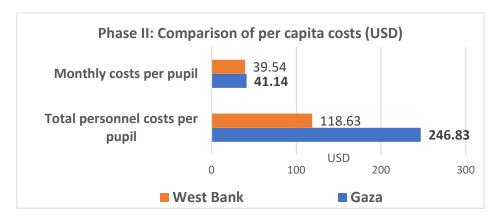


Own data. Source: UNRWA Consolidated Final Report 2019.

In Gaza, the salaries of school personnel were financed for six months in 69 UNRWA schools with monthly personnel costs per pupil of USD 41.14, including pro rata administrative costs; in the West Bank, salaries of school personnel in 96 schools were financed with FC funds for three months, with monthly "unit costs" totalling USD 39.54. In Gaza, the "unit costs" were higher than in the West Bank, despite the higher average monthly salary of teaching staff here (USD 1,672) compared to USD 1,198 in Gaza; in addition, 3.6 posts per school were financed for UNRWA school management in the West Bank (341 people for 96 schools), while in Gaza it was only 2.1 posts/school (143 people for 69 schools). The average pupil/teacher ratio of 27.8 in UNRWA schools in the West Bank was lower than in Gaza schools (35.7), where the salary costs of teaching staff were mathematically spread over more pupils. Despite lower salaries of teaching staff, fewer positions per school and higher pupil/teacher ratios in Gaza, the calculated "unit costs" are higher than in the West Bank. This apparent contradiction can be explained by the fact that 100 % of staff financing in Gaza was provided by FC funds, and only 49 % in the West Bank. If the actual personnel costs are taken as a basis, and not only those financed from FC centres, costs of USD 68.45 per pupil were incurred in the West Bank, significantly more than in Gaza.²⁵

²⁵ In Phase II, the total costs (100 %) of the schools in the West Bank amounted to USD 9,417,852, which is USD 3,139,217 per month.





Own data. Source: UNRWA Consolidated Final Report 2019.

In the provision of educational services, UNRWA was forced to take austerity measures due to the tense financial situation, such as leaving teacher vacancies unfilled and only paying an increasing proportion of teachers on a daily wage basis. Despite the general price increase²⁶, the production costs of the education services provided by UNRWA in Phase II of the evaluated project remained appropriate, compared to the "unit costs" of education services from similar FC projects with UNRWA as the project executing agency. In the FC project "UNRWA basic services in the context of the Syrian crisis" (BMZ no. 2018 49 553), the monthly per capita costs per pupil in Lebanon were more than twice as high as in Gaza at USD 86.84, while in Jordan they were lower at USD 26.95. The costs of the education services provided must take into account the demanding pedagogical-didactic concept of UNRWA schools, which is based on the formation of the Education Resilience Approach (ERA), supplemented by the Teacher Centred Approach (TCA) for critical teaching of alternative perspectives. This achieves a performance profile of pupils, which is largely higher than that of public schools.²⁷ We therefore rate the production efficiency as successful from the perspective of the project executing agency in Phase II.

In accordance with BMZ requirements, personnel costs for UNRWA health care centres were only financed in Gaza; the total costs for 10 months amounted to USD 5.5 million in 2019, including the pro rata UNRWA administrative costs. The average production cost of each of the 1.13 million consultations during 10 months of 2019 was USD 4.89, or USD 0.49 per month. This was only about one third of the monthly costs per medical consultation in FC-financed UNRWA health care centres in Lebanon in 2018.²⁸

In the financing proposal from October 2019, the project was planned to last seven months from the conclusion of the financing agreement to the final review (December 2019 – June 2020). Due to the requirement in the BMZ negotiation mandate dated 10/12/2019 to use EUR 5 million of FC funds to maintain health care for Palestinian refugees, the financing agreement was only concluded in December 2019, but the final review took place in December 2020. UNRWA implemented the financed measures from January to December 2019. The project's implementation time until the submission of the final inspection lasted a total of 12 months. The extension of the term by 5 months compared to the original design was also a consequence of the changed sectoral implementation desired by the Federal Ministry for Economic Cooperation and Development (BMZ); therefore, the project's time efficiency is still rated as successful.

Since services already provided by UNRWA were financed with FC funds, the flat rate for administrative costs of 11 % of direct costs (9.9 % of FC funds) appears to be comparatively high; ²⁹ the additional administrative expense incurred for UNRWA remained limited. However, UNRWA, as the project executing agency, was de facto given a monopoly position in the PT, meaning that there was no room for negotiation with regard to the flat-rate administrative expenses to be reimbursed. The fact that UNRWA invoiced the direct management costs for the

²⁶ According to the World Development Indicators, the deflator of macroeconomic value creation in the PT in 2019 rose by 3.85 percentage points compared to the previous year; the inflation rate is not reported separately for Gaza and the West Bank. https://data-bank.worldbank.org/source/world-development-indicators (accessed: 25/09/2022).

²⁷ World Bank (2013): Palestine Refugees. High achievement in a context of protracted displacement: What helps UNRWA students learn under adversity. Education Resilience Case Report. Washington DC, p. 12; see also Overarching developmental impacts.

²⁸ EPE "UNRWA basic services in the context of the Syrian crisis in Lebanon and Jordan", BMZ no. 2018 49 553.

²⁹ UNICEF, as the project executing agency of the FC project "UNICEF Jordan, WASH Berm and Education/NLG" (BMZ no. 2016 18 594), with the aim of improving the living conditions of Syrian refugees in Jordan, charged an administrative fee of 8 % of the direct project costs.



FC-financed school and health care operations separately corresponded to usual practice in FC cooperation with UN organisations.

Allocation efficiency Phase II

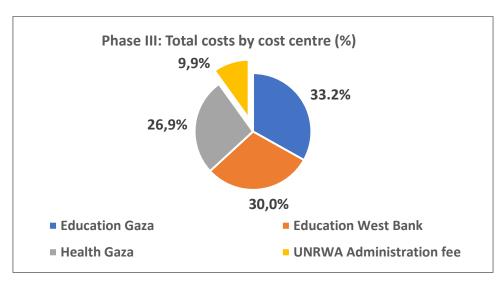
Statements on the allocation efficiency of Phase II of the FC project can only be derived indirectly from the available data by interpreting the number of beneficiary pupils and the utilisation in numbers of medical consultations as indicators of output utilisation from the perspective of the target group. In Gaza, the FC funds were used for six months to ensure lessons for 67,000 Palestinian children and in the West Bank for three months for over 45,000 children, around 60 % of whom are girls. In addition, Palestinian refugees in Gaza had access to 1.13 million qualified basic medical health consultations, which would otherwise have been virtually impossible.

When assessing efficiency, it must be taken into account that alternative design options were not available for the project design. It was only possible to make a contribution to bridging the acute underfinancing of UNRWA and thus to maintaining basic services for Palestinian refugees in the PT by using FC funds to partially finance the operational costs of the UNRWA budget. In this respect, there were also no questions about alternative strategies for achieving the positive impacts achieved in a more cost-effective manner, or about the use of the available financial resources, e.g. for other local project executing agencies. With the funds available, wage financing that would have been shorter in time but extended to more schools, or longer-term wage financing for fewer schools would have also contributed to closing the UNRWA budget gap, but without positively influencing the allocation efficiency or the overarching developmental impact of the project.

Production efficiency Phase III

In accordance with FC's standard procedure with UN organisations, UNRWA as the project executing agency was also not obliged to submit detailed cost and performance accounting in Phase III. However, the cost structures of the education and health services provided by UNRWA in Gaza and the West Bank can be derived from the Final Financial Report prepared as at 31/12/2020. The information structure of this report essentially corresponds to that of the report for Phase II, such that the specific cost factors derived from it are comparable.

In Phase III, of the FC funds totalling EUR 15 million (USD 17.8 million), UNRWA used USD 14.9 million (33.2 %) for education measures in Gaza, USD 4.8 million (26.9 %) for basic health care measures in Gaza and USD 5.3 million (30.0 %) for education measures in the West Bank. UNRWA also charged USD 1.8 million as an administrative fee, i.e. 9.9 % of the total project costs of USD 17.8 million. More than 60 % of the FC funds were thus used to ensure the continuation of the use of school education in the PT. In contrast to Phase II, the division of funds for educational services between Gaza and the West Bank in Phase III is almost uniform. In Phase III, in Gaza 100 % of school personnel were financed from FC funds, and 53.4 % in the West Bank, as other donors were responsible for the difference.



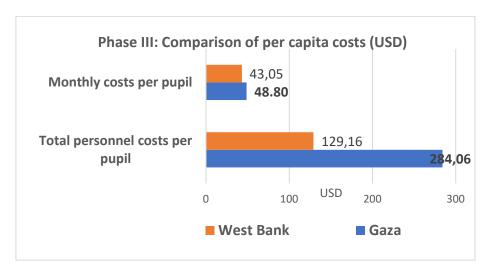
Own data. Source: UNRWA Project Final Report 2021; UNRWA Detailed Final Financial Report 2021, Annex 2.

The costs of the six-month salary financing of school staff in 23 UNRWA schools in Gaza totalled USD 6.5



million, with a two-thirds reduction in the number of supported schools compared to Phase II. The monthly staff costs per student, including pro-rata administrative costs, amounted to USD 48.80 (Phase II: USD 41.14), an increase of 18.6 %. The increase by 8.9 % was significantly lower in the West Bank; as in Phase II, salaries in 96 schools were financed for three months, with a monthly "unit cost" of USD 43.05 per pupil (Phase II: USD 39.54).

The increase in the monthly costs per pupil compared to the previous phase was not only due to the general price increase in the PT.³⁰ The difference in "unit costs" between Gaza and the West Bank was due, among other things, to the salary gap between school staff in both intervention areas and the different staffing levels in UNRWA schools. While the average monthly salary of teaching staff in Gaza rose by USD 102 compared to Phase II to USD 1,300, it remained unchanged in the West Bank at USD 1,672. In Gaza, in addition to the 667 teachers, 77 people were financed for UNRWA management in 23 schools (2.1 positions per school); in the West Bank, there were 334 people in 96 schools (3.5 positions per school), with higher salaries on average than in Gaza. The pupil/teacher ratio was higher in Gaza schools than in the West Bank (33.5 compared to 27.8), so that the personnel costs were allocated to more pupils. However, while the calculated "unit costs" for Gaza were higher than in the West Bank, it must be taken into account that 100 % of staff financing was provided by FC funds in Gaza, but only 53.4 % in the West Bank. If the actual personnel costs are taken as a basis, and not only those financed from FC funds, costs of USD 76.89 per pupil were incurred in the West Bank, significantly more than in Gaza.³¹



Own data. Source: UNRWA Project Final Report 2021; UNRWA Detailed Final Financial Report 2021, Annex 2.

Personnel costs for UNRWA health care centres were also only financed in Gaza in Phase III of the project; the total costs for 12 months, including the pro rata UNRWA administrative costs, amounted to USD 5.3 million. With a slightly reduced FC-financed budget for health services, the number of monthly consultations compared to Phase II had to be halved; the reasons for this were higher costs for medical staff and new modalities of service provision due to the pandemic (see Relevance). The average production cost of each of the more than 633,000 consultations during 12 months of 2020 was USD 8.41, or USD 0.70 per month. This was an increase of USD 0.21 in monthly personnel costs per consultation compared to Phase II. However, these "unit costs" were just over half of the monthly costs per medical consultation in FC-financed UNRWA health care centres in Lebanon in 2018.³²

In the financing proposal from July 2020, the project was planned to last four months from the conclusion of the financing agreement to the final review (September – December 2020). UNRWA implemented the FC-financed measures from January to December 2020. The financing agreement was signed in September 2020; the final review took place in December 2020. The originally planned term of 4 months was complied with, so that the project's time efficiency is rated as very successful.

³⁰ The deflator of macroeconomic value creation in the PT increased by 2.41 percentage points in 2020 compared to the previous year.

³¹ In Phase III, the total costs (100 %) of the West Bank schools amounted to USD 9,991,733, or USD 3,526,075 per month, with monthly "unit costs" of USD 76.89, i.e. an increase of 12.3 percentage points compared to Phase II.

³² Cf. Footnote 26.



The FC funds were used to finance services already provided by UNRWA, with limited additional administrative expenses for the project executing agency. In this respect, the flat rate for administrative costs of 11 % of direct costs (9.9 % of FC funds) appears unreasonably high. In accordance with the practice accepted and customary by the donors, UNRWA invoiced the direct management costs for the FC-financed school and health care operation separately as Programme Support Cost (PSC) or Direct Project Implementation Cost (DPIC). When assessing production efficiency, it was taken into account that there was realistically no alternative to UNRWA as the executing agency in the PT in the short term.

Allocation efficiency Phase III

For Phase III, statements about the allocation efficiency of the FC project can only be derived indirectly from the evidence available. This is done by interpreting the number of beneficiaries and the use of medical consultations as indicators of the use of outputs from the perspective of the target group. In Gaza, FC funds were used to ensure that lessons were continued for more than 22,000 Palestinian children (half of whom are girls), in West Bank for 3 months for almost 46,000, of whom close to 60 % are girls. In Phase III, only 57 % of the FC funds that could be used for education in Phase II were available; with these comparatively reduced funds in Phase III, around 60 % of the number of pupils in Phase II used the financed lessons.

Palestinian refugees in Gaza were able to receive 633,000 medical consultations in UNRWA health centres during the project period³⁴, to which there were hardly any privately financed alternatives. In view of the coronavirus-related restrictions on face-to-face consultations in the health care centres, the offer of remote medical consultations via a free telephone service was particularly important for the refugees and was used more than 100,000 times

For Phase III of the project, there were realistically no alternative design options if a contribution was to be made in the short term to bridging UNRWA's acute underfunding in order to maintain the use of basic services for Palestine refugees in the PT; this could only be ensured by using FC funds to (partially) finance with FC funds operational costs of the UNRWA budget. In this respect, even in Phase III, there were no questions about alternatives to achieving the positive impacts achieved or about an alternative use of the available financial resources, e.g. for other local project-executing agencies.

Summary of the rating:

Taking into account the difficult framework conditions in the PT, we rate production efficiency in Phase II and Phase III of the project as successful from the perspective of the project executing agency. From an efficiency perspective, we consider the flat rate for administrative costs invoiced by UNRWA to be comparatively high, especially since the additional administrative expense in the context of salary financing remained limited. From the target group's perspective, we also rate the allocation efficiency of the project as successful in both phases. The time efficiency in Phase II is rated as still successful, in Phase III as very successful. There was no evidence of any misappropriation of funds in either phase.

Taking into account all evaluation dimensions, we rate the efficiency of the project as successful.

Efficiency: Successful

Impact

Overarching developmental changes (intended)

The project's objective, which was adjusted as part of the EPE, was to contribute to maintaining the level of education and health of Palestinian refugees in Gaza and the West Bank. Due to the FS-1 identifier of the projects,

³³ UNRWA Fact Sheet for PSC and UNRWA Fact Sheet for DPIC (Direct Project Implementation Cost).

³⁴ In the UNRWA Project Final Report 2020 (p. 2) and in the final inspection 2020 (note 4.02), more than 632,500 basic health consultations are mentioned for Gaza. However, the Detailed Final Financial Report 2022, Annex 2, erroneously states approximately 1.35 million consultations in Gaza as Output C.



which was rated as appropriate, a contribution was also to be made to maintaining stability in the refugee camps (dual objective).

With regard to the level of education, both in Gaza and in the West Bank, there were high completion and literacy rates at the time of the evaluation, which have been maintained since the project appraisal of Phase II in 2019. In the 2020/21 school year, 94.2 % of all girls and boys in Gaza completed grade 9 (girls: 98.3 %; boys: 90.6 %) and 92.7 % in the West Bank (girls 96.9 %, boys: 88.8 %). 35 At 99.6 %, the literacy rate among 15-19-year-olds was also persistently high in both Gaza and the West Bank, and the trend is rising. 36

With regard to the state of health, selected relevant indicators on the state of health of the Palestinian population must be assessed in a differentiated manner. The Covid-19 pandemic had an impact on life expectancy or maternal mortality in Gaza, as did the ongoing blockade and deadly conflicts between the Palestinian and Israeli populations. Nevertheless, in Gaza, where two thirds of the population have refugee status, life expectancy has risen to 74.9 years for women and 72.7 years for men in recent years.³⁷

While selected indicators show that the state of health and the level of education in the PT has improved in recent years, there is no downturn in conflicts in the PT due to the still unresolved conflict between Israel and Palestine. ³⁸ According to UNRWA, high demographic growth and poor living conditions are increasingly having an adverse effect on stability, particularly in UNRWA refugee camps in Gaza and the West Bank, which is associated with damage to schools, for example.

Target achievement at the impact level can be summarised as follows:

Indicator	Status PA (Phase II)	Target value at PA	Actual value at final inspection	Actual value at EPE
NEW: (1) Completion rate (after grade 9) in % in Gaza in the West Bank	92.7 (2018/19) 91.6 (2018/19)	N/A	93.2 (2019/20) 91.0 (2019/20)	94.2 (2020/21) 92.7 (2020/21)
NEW: (2) Literacy rate in % in Gaza in the West Bank	99.5 (2019) 99.3 (2019)	N/A	99.5 (2020) 99.3 (2020)	99.6 (2021) 99.6 (2021)
NEW: (3) Life expectancy in years in Gaza Women Men	74.7 (2019) 72.5 (2019)	N/A	74.8 (2020) 72,6 (2020)	74.9 (2021) 72.7 (2021)

Source: Palestinian Central Bureau of Statistics

Contribution to overarching developmental changes (intended)

Overall, it seems plausible that the projects were able to contribute to maintaining the level of education and health of Palestinian refugees through their integration into the UNRWA education and health programme, as basic services could be maintained and neither schools nor health care centres had to close due to staffing. ³⁹ The FC projects thus prevented negative social impacts from staff-related closures of educational or health facilities, although stability in the PT and in the refugee camps is still at risk.

 $^{^{35}\} Cf.\ https://www.pcbs.gov.ps/Portals/_Rainbow/Documents/CompletionRate-2009-2021-E.html\ (accessed:\ 21/11/2022).$

³⁶ Cf. https://www.pcbs.gov.ps/Portals/_Rainbow/Documents/Education-1994-2021-11E3.html and https://www.pcbs.gov.ps/Portals/_Rainbow/Documents/Education-1994-2021-11E2.html (accessed: 21/11/2022).

³⁷ Cf. https://www.pcbs.gov.ps/Downloads/book2595.pdf (accessed: 21/11/2022)

³⁸ Between 2019 and 2021, the number of demonstrations in the PT increased, as did the amount of fighting, unrest, violence against civilians and explosions; https://data.humdata.org/dataset/a01fb41d-b89c-4de0-abbd-b5046695d448 (accessed: 23/11/2022).

³⁹ However, UNRWA schools had to be closed in the wake of the coronavirus pandemic.



The FC projects' contribution was significantly reduced by the short implementation period of the projects, particularly in the West Bank, where school staff were financed for only three months in Phases II and III. In addition, from a purely financial perspective, the FC projects made a smaller contribution to maintaining the level of education than expected to the state of health. With a share of 13 % in Phase III, the FC projects contributed to the health programme in Gaza, but only 7.1 % in Phase II and 3.3 % in Phase III (including the UNRWA management fee in each case) contributed to the education programme in the PT.⁴¹

Contribution to (unintended) overarching developmental changes

Unintended changes in development policy as a result of the FC projects could not be identified at the time of the EPE. Interviews with project managers also did not provide any indications of unintended changes at impact level. However, the positive ancillary effects of the demanding pedagogical concepts and medical consultations in the UNRWA health care centres provided by UNRWA staff are not to be underestimated, as awareness-raising and educational knowledge transfer tend to contribute to positive development.

Summary of the rating:

The overarching developmental impacts of the UNRWA education and health programme, in which the two FC projects were embedded, are rated as successful due to the contribution to maintaining the level of education and the state of health of Palestinian refugees. In this respect, the contributions of the FC projects are also rated as successful, although stability in the refugee camps is still under threat.

Impact: Successful

Sustainability

Capacities of participants and stakeholders

At the time of the EPE, UNRWA continued to provide basic services in the education and health sector, but remains largely dependent on external financing, without which the UN charity cannot perform the tasks assigned to it. In this respect, the positive impacts that could be achieved with the FC projects will also not be maintained if there is no follow-up financing for the education and health services to be provided by UNRWA in the future. The majority of Palestinian refugees who use UNRWA services in the camps cannot afford privately financed school education for their children and health care for their families, and the free provision from other public providers is insufficient.

The majority of the teaching staff financed with FC funds were people who had previously worked in UNRWA schools, so that existing knowledge, experience and capacities were preserved; dismissals were also avoided, and thus the risk of poverty for those affected. If, due to a lack of budgetary resources, some teaching staff were only paid on a daily wage basis, this might indirectly reduce sustainability; but in fact, jobs in UNRWA schools are sought after because of the salaries and the quality standards of teaching.

Contribution to supporting sustainable capacities

By providing the FC funds for (partial) financing of salaries, UNRWA was able to continue operating schools and health care centres, so that capacities to provide basic services for Palestinian refugees in the PT were preserved. Nevertheless, the ongoing problem of a financing gap exists for the UNRWA budget; it necessitates savings and reductions in the range of services offered and/or donor commitments of additional financing. UNRWA implemented austerity measures in Phase II and increasingly in Phase III. However, if, for example, vacant teaching positions were no longer filled, as in the school sector, this inevitably led to capacity restrictions.

⁴⁰ The expenditure for the UNRWA health programme in Gaza amounted to EUR 36.1 million in 2020; disaggregated data from the UNRWA total health care budget in Gaza is not available for 2019.

⁴¹ The expenditure for the UNRWA education programme in the PT amounted to EUR 283 million in 2019 and EUR 309 million in 2020.



The project was not designed to promote particularly disadvantaged or vulnerable groups within the Palestinian refugees; in addition, there was no conceptual differentiation between the financed UNRWA staff or the indirect target group, pupils, according to gender, age or socio-economic status (cf. Relevance).

Durability of impacts over time

The fundamental question of whether the short-term (partial) financing of the salaries of staff in UNRWA schools and health care centres can have lasting positive effects as UNRWA employees over a few months in order to maintain the level of education and health status of Palestinian refugees and/or the Palestinian population can be answered in the negative from a development policy perspective. However, in accordance with the module proposal for Phase II, the FC project's financing item was not designed to be sustainable in any case; this also applied unchanged to Phase III.⁴²

Although the project was able to stabilise UNRWA's financial situation for the provision of education and health services in the short term, the continuation of these activities after the end of the short-term FC financing was dependent on further financing – including from other donors. The project's capacity to be tied in to other projects was therefore important, and UNRWA schools and health care centres were actually continued after Phase III of the FC project. In this respect, the FC project's beneficial effects were sustained to the extent the FC project's objective was to secure the use of basic services for Palestinian refugees by partially financing UNRWA's education and health programme at outcome level. The financed education and health services were also heavily used by girls and women and can therefore have contributed to strengthening the resilience of this gender-specific target group.

The extent to which the FC projects' contributions to maintaining the level of education and health of Palestinian refugees in the PT are permanent cannot be definitively answered from today's perspective.

Summary of the rating:

Whether positive impacts of the project, which were discernible at outcome and impact level during the short implementation phase, can be permanent depends primarily on a sustainable solution to the UNRWA's chronic financing problems. However, this presupposes a political solution to the Palestine issue, which was not present at the time of the evaluation. For this reason, the project must primarily be rated as unsuccessful due to a lack of long-term financial viability. That being said, the sustainability criterion is excluded from the overall assessment, as the project was not designed to have a sustainable impact.

If the political risk given by the context of the project is excluded from the assessment of sustainability and only the assurance of the use of qualitatively appropriate UNRWA basic services is taken into account for the rating, the FC project receives the rating of successful from today's perspective. It is highly likely that UNRWA will receive the required further financing commitments, so that the effects of the evaluated project can remain positive.

Sustainability: [moderately unsuccessful]

⁴² Module proposal FC module: Education programme UNRWA – Gaza and West Bank (BMZ no.: 2018 68 728), note 5.09; Financing proposal for the third phase: UNRWA Education and Health Programme – Gaza and West Bank, Phase III (BMZ no. 2020 68 625).



Overall rating: Moderately successful

Taking into account the fragile context, we rate both phases as moderately successful overall. The sustainability criterion is not taken into account in this evaluation, as the project was not designed for sustainable effectiveness.

The decisive factor for the overall rating as moderately successful is the assessment of the OECD DAC criteria Relevance and Coherence as moderately successful, to which a comparatively higher weighting is assigned in the overall rating of the projects, as the weaknesses identified would have been avoidable under Relevance and Coherence. For example, although the projects were geared towards the needs of the target group as well as the project executing agency and its capacities in terms of relevance, there are shortcomings in particular with regard to the formulation of the target system, which can only be assessed as logically stringent with regard to the embedding in the overall UNRWA commitment. Likewise, the merging of two components does not lead to any added value at impact level. In addition, there was a failure to take appropriate account of qualitative aspects in the education and health sectors. In terms of internal coherence, both phases were not clearly defined as humanitarian aid and duplicate funding cannot be ruled out.

Due to coronavirus-related adjustments, there were slight losses in effectiveness in the target achievement in the health sector in Phase III; however, the target values were achieved again at the time of the EPE, and therefore the effectiveness is rated as successful overall. Production, allocation and time efficiency were successful in both projects, as were the overarching developmental impacts, as contributions from the FC projects to maintaining the education level and health status of Palestinian refugees in Gaza and in the West Bank are plausible due to the UNRWA education and health programme in which the FC projects were embedded.

Contributions to the 2030 Agenda

Universal validity: The project contributed to achieving sustainable development goals, in particular SDG 1, SDG 3, SDG 4, SDG 16 and SDG 17.4^3

<u>Shared responsibility</u>: The project was designed to implement the planned activities for the exclusive use of the school and health care system and the UNRWA structures there; this was actually implemented. Accountability was based on the United Nations' single audit principle.

<u>Interaction of economic, environmental and social development:</u> Since only a few months were planned for the conceptual implementation of the project in both phases, it was not designed for sustainable development. Nevertheless, maintaining education and health care for refugees has fostered positive interactions between social and economic impacts.

<u>Inclusiveness/leave no one behind</u>: For Palestinian refugees as a particularly vulnerable group, the measures of the projects had a positive impact in the area of school education and health care; girls and women were also reached by these impacts.

⁴³ Since all registered Palestinian refugees had access to the basic services provided by UNRWA with equal rights and opportunities, the projects contributed to SDG 1. The objective and achievement at outcome and impact level contributed to SDG 3 and SDG 4, as Palestinian refugees had access to basic health services and Palestinian girls and boys had access to free and high-quality primary education. The aim of preserving stability in refugee camps was also intended to contribute to SDG 16. In addition, the projects mobilised additional funds for the PT and thus made a contribution to SDG 17. The interpretation of the exclusive use of the UNRWA system and its structures also contributed to SDG 17, as capacities to achieve the SDGs were temporarily and effectively stabilised.



Project-specific strengths and weaknesses as well as cross-project conclusions and lessons learned

The projects had the following strengths and weaknesses in particular:

- The projects prevented the essential UNRWA offer of education and health services for Palestinian refugees from being temporarily suspended.
- As the project executing agency, UNRWA submitted meaningful cost and performance records, although there was only a limited obligation to financial reporting according to the UN's single audit principle.
- The projects only temporarily stabilised UNRWA's precarious financial situation.
- There was only limited control over UNRWA, as project executing agency, given its quasi-monopoly position in the PT in terms of cost factors such as salaries paid or the flat administrative fee.
- The impact measurement had to be adjusted as part of the EPE, as the project objective formulated in the programme proposals mapped the output level and the formulation of objectives at impact level was not specific and was not underpinned by indicators.

Conclusions and lessons learned:

- Projects with a duration of just a few months cannot be expected to make a sustained contribution to strengthening the resilience of the target group(s) and/or stability in the UNRWA camps; furthermore, quality losses in basic services cannot be ruled out due to the financing problems.
- The impact chain can only be assessed as meaningful and logically stringent if it is embedded in UNRWA's overall commitment. From the point of view of the financing of salaries, intended effects would have to be applied to UNRWA staff and not to the beneficiaries of UNRWA services. In future, more consideration should be given to this in comparable projects when developing the impact matrix and the target system.
- Focusing on salary payments has failed to address qualitative aspects of education and health, such as creating an adequate learning environment or training staff.
- The UNRWA financing problems remain as long as there is no discernible political solution to the Palestine issue, on which UNRWA's task depends.
- In the case of UNRWA financing projects with replicated design, it can be examined within the scope of the possibilities under project award law to simplify resource-intensive routine processes of project appraisal, final inspection and evaluation.
- For projects whose financing proposals largely correspond to UNRWA's project proposals for the short-term financing of liquidity bottlenecks, alternative procedural formats with fewer procedural loops may prove to be efficient.
- Due to separate causal relationships at outcome and impact level, the combination of an education and health component does not create any added value in terms of concept. At the same time, the merging of the two components, with limited administrative capacity of the project-executing agency due to financing problems, means additional reporting and accounting costs, as its accounting system is not intended for this purpose.
- Differences in Phase II and III in target achievement at outcome level can be attributed to necessary adjustments in the context of the Covid-19 pandemic, such as the closure of health care centres, etc.



Evaluation approach and methods

The ex post evaluation follows the methodology of a rapid appraisal, which is a data-supported qualitative contribution analysis and constitutes an expert judgement. This approach ascribes impacts to the project through plausibility considerations which are based on a careful analysis of documents, data, facts and impressions. This also includes – when possible – the use of digital data sources and the use of modern technologies (e.g. satellite data, online surveys, geocoding). The reasons for any contradicting information are investigated and attempts are made to clarify such issues and base the evaluation on statements that can be confirmed by several sources of information wherever possible (triangulation).

Documents:

KfW project documents, UNRWA project proposals and reports, secondary specialist literature, World Bank analyses, ex post evaluations of comparable projects with UNRWA as project executing agency

Data sources and analysis tools:

Digital databases: UNRWA Registered Population Dashboard; UNRWA in Figures; World Bank: DataBank Education Statistics; World Bank: DataBank Gender Statistics; World Bank: DataBank Health Nutrition and Population Statistics; World Bank: DataBank World Development Indicators

Interview partners:

UNRWA employees; KfW operational department employees; MENA experts from research institutions

The analysis of impacts is based on assumed causal relationships, documented in the results matrix developed during the project appraisal and, if necessary, updated during the ex post evaluation. The evaluation report sets out arguments as to why the influencing factors in question were identified for the experienced effects and why the project under investigation was likely to make the contribution that it did (contribution analysis). The context of the development measure and its influence on results is taken into account. The conclusions are reported in relation to the availability and quality of the data. An <u>evaluation concept</u> is the frame of reference for the evaluation.

On average, the methods offer a balanced cost-benefit ratio for project evaluations that maintains a balance between the knowledge gained and the evaluation costs, and allows an assessment of the effectiveness of FC projects across all project evaluations. The individual ex post evaluation therefore does not meet the requirements of a scientific assessment in line with a clear causal analysis.

The following aspects limit the evaluation:

Some of the project documents could not be obtained at all or only with a great deal of effort. Proof of costs in project documents was partly contradictory. There was deviating information on the number of beneficiaries of UNRWA education and health services financed by FC.

The simultaneous ex post evaluations of several FC projects with UNRWA as the project executing agency meant a significant capacity burden for UNRWA employees on site.



Methods used to evaluate project success

To evaluate the project according to OECD-DAC criteria, a six-step scale is used for all criteria except for the sustainability criterion. The scale is as follows:

Level 1 very successful: result that clearly exceeds expectations

Level 2 successful: fully in line with expectations and without any significant shortcomings

Level 3 moderately successful: project falls short of expectations but the positive results dominate

Level 4 moderately unsuccessful: significantly below expectations, with negative results dominating despite discernible positive results

Level 5 unsuccessful: despite some positive partial results, the negative results clearly dominate

Level 6 highly unsuccessful: the project has no impact or the situation has actually deteriorated

The overall rating on the six-point scale is compiled from a weighting of all six individual criteria as appropriate to the project in question. Rating levels 1-3 of the overall rating denote a "successful" project while rating levels 4-6 denote an "unsuccessful" project. It should be noted that a project can generally be considered developmentally "successful" only if the achievement of the project objective ("effectiveness"), the impact on the overall objective ("impact") and the sustainability are rated at least "moderately successful" (level 3).

Publication details

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List of annexes:

Target system and indicators annex

Risk analysis annex

Project measures and results annex

Recommendations for operation annex

Evaluation questions in line with OECD DAC criteria/ex post evaluation matrix annex



Target system and indicators annex

Project objective at outcome level	Rating of appropriateness (former and current view)
During project appraisal: Children of school age should complete high-quality primary education with equal access, and Palestinian refugees' access to basic medical care should be maintained.	From today's perspective, the project purpose is located within the context of UNRWA's overall involvement, to which the FC project contributed, but access is to be at output level (use at outcome level).

During EPE (if target modified): At outcome level, the use of qualitatively appropriate basic services for Palestinian refugees in the education and health sector is to be ensured.

Indicator	Rating of appropriateness (for example, regarding impact level, accuracy of fit, target level, smart criteria)	PA target level Optional: EPE target level	PA status (year)	Status at final inspection (year)	Optional: Status at EPE (2022)
Indicator 1a (PA) Number of Palestinian refugee children with access to education in Gaza (in relation to the total number of Palestinian children in Gaza)	Allows conclusions to be drawn on ensuring access, but must be situated at output level, as no statement on use is possible.	67,000 (Phase II)	67,000 (Phase II)	67,000 (Phase II)	67,155
Indicator 1b (PA) Number of Palestinian refugee children with access to education in Gaza (in relation to the total number of Palestinian children in Gaza)	See above	10,000 (Phase III)	23,000 (Phase III)	22,000 (Phase III)	22,000
Indicator 2a (PA): Number of Palestinian refugee children with access to education in the West	See above	45,700 (Phase II)	45,700 (Phase II)	45,700 (Phase II)	46,037



Bank (in relation to the total number of Palestinian children in the West Bank))					
Indicator 2b (PA): Number of Palestinian refugee children with access to education in the West Bank (in relation to the total number of Palestinian children in the West Bank))	See above	45,681 (Phase III)	45,681 (Phase III)	46,028 (Phase III)	46,037
Indicator 3 (PA): Number of medical consultations in the Gaza Strip	Although it does not allow for any final conclusions regarding qualitative aspects, consultations show the use of healthcare services. The indicator can thus serve as an indicator for the use of basic services in the healthcare sector	1.13 million (Phase II)	N/A	1.13 million (Phase II)	N/A
Indicator 5 (PA): Number of medical consultations in the Gaza Strip	See above	1.35 million (Phase III)	N/A	632,500 (Phase III)	N/A
NEW: Pupil/teacher ratio at schools in Gaza / West Bank / project ar- eas	Allows conclusions/indications to be drawn about the quality of education.	N/A	N/A	Phase II (number of fin. teachers/stu- dents): 35.7 Gaza 27.8 West Bank	34.4 Gaza 26.7 West Bank
NEW: Pupil/teacher ratio at schools in Gaza / West Bank / project ar- eas	Allows conclusions/indications to be drawn about the quality of education.	N/A	N/A	Phase III (number of fin. teachers/stu- dents): 33.5 Gaza 27.8 West Bank	34.4 Gaza 26.7 West Bank



Project objective a	Project objective at impact level		Rating of appropriateness (former and current view)			
During project apprais should be made to im and economic develop Palestinian refugees i Bank. The intent of the also to contribute to steamps.	proving the personal oment prospects of n Gaza and the West e FC measure was	Impact can only be assumed against the background of UNRWA's overall involvement. The use of basic services can then improve the personal and economic development prospects of Palestinian refugees and contribute to stability in refugee camps. However, personal and economic development prospects are non-specific, which is why the opportunities in terms of maintaining the level of education and health are specified in more detail.				
During EPE (if target modified):0		At impact level, the aim ugees. In addition, the a	is to contribute to maintain	ing the level of educatior	n and health of Palestinian ref- ugee camps (dual objective)	
Indicator	Rating of appropriateness (for example, regarding impact level, accuracy of fit, target level, smart criteria)	Target level PA status (year) Status at final inspection (year)				
NEW: Completion rate after grade 9	Indicates the extent to which education levels have improved.	N/A	Gaza: 92.7 (2018/2019) West Bank: 91.6 (2018/2019)	Gaza: 93.2 (2019/2020) West Bank: 91.0 (2019/2020)	Gaza: 94.2 (2020/2021) West Bank: 92.7 (2020/2021)	
NEW: Literacy rate	See above	N/A	Gaza: 99.5 (2019) West Bank: 99.3 (2019)	Gaza: 99.5 (2020) West Bank: 99.3 (2020)	Gaza: 99.6 (2021) West Bank: 99.6 (2021)	
NEW: Life expectancy in Gaza (health indicators in the area of maternal healthcare, paediatric healthcare, combating communicable diseases, disease surveillance were not available)	which health has improved. which health has improved. which health has improved.		Women: 74.7 (2019) Men: 72.5 (2019)	Women: 74.8 (2020) Men: 72,6 (2020)	Women: 74.9 (2021) Men: 72.7 (2021)	



New: Number of demonstrations in PT	Indicates the extent to which dual objectives have been achieved	N/A	681 (2019)	432 (2020)	1167 (2021)
New: Number of clashes, unrest, violence against civilians and explosions in PT	See above	N/A	1,377 (2019)	936 (2020)	2094 (2021)



Risk analysis annex

Risks ex ante (according to module proposal)

Risk to effectiveness: UNRWA must take extraordinary austerity measures that lead to a reduction in the tasks assigned to it. The financing gap remains

Risk that the project-executing agency has little influence: Despite UNRWA's political neutrality, there is a high risk of low influenceability.

Political risk: In the context of the endemic conflict between Israel and the Palestinians as well as the geographical and political divisions of Palestinian society, there is a risk of renewed armed conflicts with the associated deterioration of the security situation in the Gaza Strip.

Risks in the course of the project (according to final inspections in phase II and phase III)

Risk to effectiveness: UNRWA had to take austerity measures, which led to limitations in offering education and health measures; the financing gap could not be closed.

Risk that the project-executing agency has little influence: The refinancing of the salaries of UNRWA personnel enabled only minimal influence on the project-executing agency.

Political risk: The fragile context remained and the security situation in Gaza remained precarious.

Risk identified ex post

Risk to effectiveness: UNRWA's financing gap remained.

Risk that the project-executing agency has little influence: Since UNRWA as the project-executing agency was effectively without alternatives, the management options remained limited.

Political risk: As a solution to the Palestine issue is not foreseeable, the political risk remains.

Risk	Relevant OECD-DAC criterion
Risk to effectiveness	Relevance, effectiveness
Risk that the project-executing agency has little influence	Efficiency
Political risk	Overarching developmental impact Sustainability



Project measures and their results annex

Not applicable, as detailed in the main report.



Recommendations for operation annex

Phase II project completion report: no operating recommendations.

Phase III project completion report: no operating recommendations

New process formats with fewer procedural options can be suitable for projects that largely adopt the UNRWA proposal for short-term bridging of liquidity bottlenecks.

In future projects for the refinancing of UNRWA salaries with a replicated design, it would be possible to take a look at simplifying resource-intensive process procedures (project appraisal, final inspection, evaluation) within the scope of opportunities under procurement law.

Implementation of the development of monitoring approaches promised by UNRWA to check the effectiveness and, if necessary, adjustment of the Teacher-Centred Approach (TCA) at pupil level.

No recommendations for operation were formulated in the project completion reports.



Evaluation questions in line with OECD-DAC criteria/ex post evaluation matrix annex

Relevance

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Level	Weighting (- / o / +)	Reason for weighting
Evaluation dimension: Policy and priority focus			2	0	
Are the objectives of the programme aligned with the (global, regional and country-specific) policies and priorities, in particular those of the (development policy) partners involved and affected and the BMZ?	To what extent is the project's objective in line with the Federal Ministry for Economic Cooperation and Development's (BMZ) objective of providing better living conditions and comprehensive development prospects for the people living in the Palestinian territories and with the aim of laying the foundations for the development of a future Palestinian state with effective institutions?	Including Palestinian territories Federal Ministry for Economic Cooperation and Development (BMZ); https://unctad.org/topic/palestinian-people/The-question-of-Palestine			
Do the objectives of the programme take into account the relevant political and institutional framework conditions (e.g. legislation, administrative capacity, actual power structures (including those related to ethnicity, gender, etc.))?	To what extent do the education plans of UNRWA and the Palestinian Ministry of Education align?	Including project documents, interviews with operational department			
Evaluation dimension: Focus on needs and capacities of participants and stakeholders			2	0	
Are the programme objectives fo- cused on the developmental needs and capacities of the target group?	Can the identified core problem still be assessed as correct today, i.e. the precarious situation of Palestinian refugees	Secondary data on the situation of Palestinian refugees			



Was the core problem identified correctly? Were the needs and capacities of particularly disadvantaged or vulnerable parts of the target group taken into account (possible differentiation according to age, income, gender, ethnicity, etc.)? How was the target group selected?	and the problematic financial situation of UNRWA? Why was the project not designed to ensure that particularly disadvantaged or vulnerable groups have access to the education and healthcare system?	Including project documents, interviews with operational department			
Would the programme (from an ex post perspective) have had other significant gender impact potentials if the concept had been designed differently? (FC-E-specific question)	Why was no attention paid to differentiation according to gender, etc. in the financing of salaries? What positive/negative consequences would such differentiation have had?	Including project documents, interviews with operational department			
Evaluation dimension: Appropriateness of design			3	+	There are no reasons for combining two non-contiguous components or earmarking the FC funds. In addition, the results chain is insufficiently formulated.
Was the design of the programme appropriate and realistic (technically, organisationally and financially) and in principle suitable for contributing to solving the core problem?	What are the organisational/financial reasons for/against financing salaries exclusively? Was UNRWA technically/organisationally suitable for implementation? The ratio of salary financing, on the one hand for education and on the other for medical staff, was in line with the core problem, particularly taking into account the special circumstances of the COVID-19 pandemic in Phase III.	Including interviews with the operational department			
Is the programme design suffi- ciently precise and plausible (trans- parency and verifiability of the	How is the contribution of salary financing to improving personal and economic	Including project documents, interviews with operational department			



target system and the underlying impact assumptions)?	development opportunities checked for plausibility?	
Please describe the results chain, incl. complementary measures, if necessary in the form of a graphical representation. Is this plausible? As well as specifying the original and, if necessary, adjusted target system, taking into account the impact levels (outcome and impact). The (adjusted) target system can also be displayed graphically. (FC-E-specific question)	The MP is based on the assumption that financing staff in education and health care (output) will provide children of school age with equal access to high-quality primary education and alleviate the burden of Palestinian refugees by maintaining basic medical care (outcome), which in turn will improve personal and economic development prospects and contribute to stability in refugee camps (impact). Why were other influencing factors on target achievement (such as training (and advancement), learning environment, etc.) not taken into account?	Interview with operational department, among others Interview with project-executing agency
To what extent is the design of the programme based on a holistic approach to sustainable development (interplay of the social, environmental and economic dimensions of sustainability)?	To what extent can the financing of salaries have long-term, holistic effects, or are decisive components/measures missing?	Interview with operational department, among others Secondary literature
For projects within the scope of DC programmes: is the programme, based on its design, suitable for achieving the objectives of the DC programme? To what extent is the impact level of the FC module meaningfully linked to the DC programme (e.g. outcome impact or output outcome)? (FC-E-specific question)	Omitted	



Evaluation dimension: Response to changes/adaptability			2	0	
Has the programme been adapted in the course of its implementation due to changed framework conditions (risks and potential)?	Why did the stipulation come about after the fact, that at least EUR 5 million of the FC funds be used to maintain health care for Palestinian refugees, thus deviating from the financing proposal, as well as an extension of the module title, the module objective and an adjustment of the indicators to the health sector? What conceptual changes are there in the subsequent phases? How has UNRWA's financing situation been since the end of the project?	Interview with operational department, among others			
Other evaluation questions					No evaluation, as there were no ma- jor differences
Other evaluation questions	What were the differences between Phases II and III in the design, objectives and needs of the target group, executing agencies and partners?			·	

Coherence

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Level	Weighting (-/o/+)	Reason for weighting	
Evaluation dimension: Internal co- herence (division of tasks and syn- ergies within German development cooperation):			3	0		
To what extent is the programme designed in a complementary and	Which German FC and TC projects are there in Gaza and the West	Including project documents, questionnaires to operational department				



collaborative manner within the German development cooperation (e.g. integration into DC programme, country/sector strategy)?	Bank that complement the evaluated project? What contributions do other donors make to UNRWA financing? What concrete measures do they implement?				
Do the instruments of the German development cooperation dovetail in a conceptually meaningful way, and are synergies put to use?	Are there synergies or, if applicable, conflicting effects in conjunction with other projects, e.g. the German Federal Foreign Office?	including project documents, German Federal Foreign Office research project database; KfW and GIZ,			
Is the programme consistent with international norms and standards to which the German development cooperation is committed (e.g. human rights, Paris Climate Agreement, etc.)?	Does the project-executing agency – UNRWA – align itself with international norms and standards?	including secondary literature			
Evaluation dimension: External coherence (complementarity and coordination with actors external to German DC):			2	0	
To what extent does the programme complement and support the partner's own efforts (subsidiarity principle)?	To what extent does UNRWA work with Palestinian institutions (e.g. Ministry of Education) and local authorities (e.g. local NGOs)? To what extent are there efforts on the part of the Palestinian administrative authorities or PA to secure the education offer for refugees? To what	Interview with project-executing agency			



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	extent does salary financing support these efforts? To what extent are other actors involved in the project?			
Is the design of the programme and its implementation coordinated with the activities of other donors?	Which governmental and private do- nors/international organisations are still active in the health and educa- tion sector in Gaza and the West Bank?	Interview with project-executing agency		
Was the programme designed to use the existing systems and structures (of partners/other donors/international organisations) for the implementation of its activities and to what extent are these used?	How do the systems and structures of UNRWA differ from the Palestinian systems and structures in the West Bank and Gaza Strip? To what extent is the learning content consistent with that of Palestinian executing agencies? To what extent does UNRWA ensure the quality of the learning content, or is the taught curriculum based on specifications/quality standards of the Palestinian/Israeli executing agencies in order to secure premises for social mobility?	including interview with project-executing agencies, secondary literature		
Are common systems (of part- ners/other donors/international or- ganisations) used for monitor- ing/evaluation, learning and accountability?	Did UNRWA use systems of other institutions (e.g. donors) for monitoring and accountability? During the design phase, did UNRWA draw on existing learning experiences from other donors / DC actors?	including interview with project-executing agency, project documents, secondary literature		
Other evaluation questions				 No evaluation, as there were no major differences
Other evaluation questions	What differences were there in terms of other measures in the intervention are	of the accuracy of the measures in the context of a, the education and health sector?		



Effectiveness

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Level	Weighting (Reason for weighting
Evaluation dimension: Achievement of (intended) targets			2	0	
Were the (if necessary, adjusted) objectives of the programme (incl. capacity development measures) achieved? Table of indicators: Comparison of actual/target	Were the target values achieved (even beyond the project term)?	Interview with project-executing agency			
Evaluation dimension: Contribution to achieving targets			2	0	
To what extent were the outputs of the programme delivered as planned (or adapted to new devel- opments)? (Learning/help question)	Why were the measures extended to the health sector, unlike those provided for in the MP? Were these achieved?	Interview with operational department, among others			
Are the outputs provided and the capacities created used?	Are the schools and healthcare facilities operated by UNRWA still in operation and are they accepted by the target group? What impact did the COVID-19 pandemic have on the operation of the facilities?	Interview with project-executing agency, among others			
To what extent is equal access to the outputs provided and the capacities created guaranteed (e.g.	To what extent is equal/inclusive access to schools and healthcare facilities guaranteed?	Among other things, interview with project- executing agency and operational depart- ment			



non-discriminatory, physically accessible, financially affordable, qualitatively, socially and culturally acceptable)?		
To what extent did the programme contribute to achieving the objectives?	What would have happened if FC had not refinanced salaries?	Interview with project-executing agency and operational department
To what extent did the programme contribute to achieving the objectives at the level of the intended beneficiaries?	To what extent do the UNRWA programmes in which the FC project is involved contribute to the achievement of the objectives at the level of the intended beneficiaries?	Evaluation reports on the programmes, secondary literature
Did the programme contribute to the achievement of objectives at the level of the particularly disad- vantaged or vulnerable groups in- volved and affected (potential differ- entiation according to age, income, gender, ethnicity, etc.)?	Which groups of people have benefited from the measures at target group level (gender, age, origin, etc.)? Which groups of people have benefited from the measures at the level of the financed staff (gender, age, origin, etc.)?	Interview with project-executing agency
Were there measures that specifically addressed gender impact potential (e.g. through the involvement of women in project committees, water committees, use of social workers for women, etc.)? (FC-E-specific question)	Was the hiring of female teachers or healthcare workers promoted? To what extent did girls specifically benefit from the education component and girls and women from the health component?	Interview with project-executing agency
Which project-internal factors (technical, organisational or financial) were decisive for the achievement or non-achievement of the intended objectives of the programme? (Learning/help question)	What role did the UNRWA financing situation play in achieving the intended objectives? To what extent did the institutional capacity contribute to UNRWA's achievement of the intended objectives?	Interview with project-executing agency



Which external factors were decisive for the achievement or non-achievement of the intended objectives of the programme (also taking into account the risks anticipated beforehand)? (Learning/help question)	How does demographic development in the camps generally look, and what in- fluence does this have on UNRWA's fi- nancing requirements? Which other do- nors have also participated?	Including interview with project-executing agency and secondary sources			
Evaluation dimension: Quality of implementation			2	0	
How is the quality of the management and implementation of the programme (e.g. project-executing agency, consultant, taking into account ethnicity and gender in decision-making committees) evaluated with regard to the achievement of objectives?	How is UNRWA's administrative capacity to be assessed? How does the target group perceive the services of UNRWA?	including secondary literature/studies			
How is the quality of the management, implementation and participation in the programme by the partners/sponsors evaluated?	With which organisations/civil society initiatives does UNRWA cooperate in the camps?	Interview with project-executing agency			
Were gender results and relevant risks in/through the project (gender-based violence, e.g. in the context of infrastructure or empowerment projects) regularly monitored or otherwise taken into account during implementation? Have corresponding measures (e.g. as part of a CM) been implemented in a timely manner? (FC-E-specific question)	Why wasn't gender-sensitive design taken into account when financing salaries?	Interview with operational department, among others			



Evaluation dimension: Unintended consequences (positive or negative)			2	0	
Can unintended positive/negative direct impacts (social, economic, ecological and, where applicable, those affecting vulnerable groups) be seen (or are they foreseeable)?	What effect does the financing of salaries have on teachers and health workers, e.g. in terms of motivation/purchasing power, etc.? Did UNRWA's salary financing lead to market distortion and/or have a negative impact on social cohesion between UNRWA teachers and local teachers? To what extent did the project ensure a conflict-sensitive design that did not significantly worsen the situation of non-refugee Palestinians? What qualifications do UNRWA teachers need to have? Is the requirements profile comparable to that of the local teacher?	Interview with project-executing agency			
What potential/risks arise from the positive/negative unintended effects and how should they be evaluated?	See above				
How did the programme respond to the potential/risks of the positive/negative unintended effects?	What impact did the salary financing have on the Palestinian education and health sector?	Including interview with operational department, secondary literature			
Other evaluation questions			3	0	Target value was not achieved in phase III
Other evaluation questions	Were there significant differences in target achievement in the education and health sector in Phase III compared to Phase II? If so, what are the reasons for these differences?				



Efficiency

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Level	Weighting (- / o / +)	Reason for weighting
Evaluation dimension: Production efficiency			2 Both phase s	0	
How are the inputs (financial and material resources) of the programme distributed (e.g. by instruments, sectors, sub-measures, also taking into account the cost contributions of the partners/executing agency/other participants and affected parties, etc.)? (Learning and help question)	How much of the total costs did the salary financing for schools account for compared to the salary financing for healthcare? What share of UNRWA total costs was accounted for by salary financing?	Phase II project completion report Phase III project completion report Phase II UNRWA Project Final Report Expenditure Breakdown; Consolidated Final Report Phase III UNRWA Detailed Final Financial Report Annex 2			
To what extent were the inputs of the programme used sparingly in relation to the outputs produced (products, capital goods and services) (if possible in a comparison with data from other evaluations of a region, sector, etc.)? For example, comparison of specific costs.	How high were the costs of salary financing for school staff per pupil? Were there significant differences in the monthly costs per pupil in the UNRWA schools in Phase III compared to Phase II? If so, what are the reasons for these differences? How high were the costs of salary financing for medical staff per consultation? Were there significant differences in costs per consultation in the UNRWA health centres in Phase III compared to Phase II? If so, what are the reasons for these differences?	See above			
If necessary, as a complementary perspective: To what extent could	The number of staff to be refinanced in UNRWA schools and healthcare	Question not relevant; the continuation of school lessons and medical consultations by			



the outputs of the programme have been increased by an alternative use of inputs (if possible in a com- parison with data from other evalu- ations of a region, sector, etc.)?	facilities was specified and cannot be reduced.	UNRWA had to be carried out by the existing staff
Were the outputs produced on time and within the planned period?	For what period were salaries re- financed? Did the refinancing period correspond to the financing of the planned period?	Phase II project completion report Phase III project completion report
Were the coordination and management costs reasonable (e.g. implementation consultant's cost component)? (FC-E-specific question)	Was the flat-rate UNRWA management fee of 10% appropriate? What administrative fee was defined in the financing agreement with UNRWA? Was a reduction in the flat rate for administration negotiated with UNRWA due to the reduced administrative burden for salary funding projects?	Comparison with other FC-financed projects in which UNRWA or other UN organisations were project-executing agencies. Question for the operational area
Other evaluation question 1	Did the salaries paid by UNRWA correspond to the customary level in the country for activities of comparable content and comparable qualifications?	Interview with project-executing agency Job advertisements on the Internet
Other evaluation question 2	How were input and output divided between the West Bank and Gaza Strip?	Analysis of the cost structure Phase II UNRWA Project Final Report Expenditure Breakdown; Consolidated Final Report. Phase III UNRWA Detailed Final Financial Report Annex 2
Other evaluation question 3	Did the subsequent expansion of the FC project (phase II) to include refinancing of salaries in the health sector also have an impact on production efficiency?	Interview with project-executing agency and operational department
Other evaluation question 4	Were measures implemented in Phases II and III to reduce the costs of running schools?	Phase II project completion report Phase III project completion report



		Phase II UNRWA Project Final Report, Phase III UNRWA Project Final Report			
Evaluation dimension: Allocation efficiency			2 Both phase s	0	
In what other ways and at what costs could the effects achieved (outcome/impact) have been attained? (Learning/help question)	There was no alternative to the subsequent financing of salaries already paid for staff in UNRWA schools and healthcare facilities.	Interview with operational department			
To what extent could the effects achieved have been attained in a more cost-effective manner, compared with an alternatively designed programme?	There was no conceptual alternative to the subsequent financing of salaries already paid for staff in UNRWA schools and healthcare facilities. To what extent would a concentrated allocation of FC funds to only one intervention area (Gaza or West Bank) have produced the same impacts with less effort?	Interview with operational department			
If necessary, as a complementary perspective: To what extent could the positive effects have been increased with the resources available, compared to an alternatively designed programme?	There was no alternative to the subsequent financing of the salaries already paid for the staff in UNRWA schools and healthcare facilities.	Interview with operational department			
Other evaluation questions	Were Palestinian refugees from Syria also able to benefit from the services in UNRWA schools and health centres?	Questions to project-executing agency			
Other evaluation questions	Did the splitting of the input into the two regions of the West Bank and Gaza Strip result in efficiency synergies or losses?	Comparison of cost analyses Interview with operational department			



Other evaluation questions			2 Both phas es	0	
Other evaluation questions	Were there indications of misuse of funds?	Phase II project completion report Phase III project completion report Interview with operational department			
Other evaluation questions	Did the splitting of the input into the two regions of the West Bank and Gaza Strip result in efficiency synergies or losses?	Cost analysis Question to the project-executing agency			
Other evaluation question 3	Have measures been implemented to reduce costs for school operations and health centres?	UNRWA Final Project Reports Phases II and III			

Impact

Evaluation question	Specification of the question for the present project		ta source (or rationale if the question is relevant/applicable)	Rating	Weighting (- / o / +)	Reason for weighting
Evaluation dimension: Overarching developmental changes (intended)				2	0	
Is it possible to identify overarching developmental changes to which the programme should contribute? (Or if foreseeable, please be as specific as possible in terms of time.)	How have relevant UNRWA education and health indicators developed?	d	Including interview with project-executing agency, secondary sources			
Is it possible to identify overarching developmental changes (social, economic, environmental and their	How does the target group perceive their suation? How has the frequency of violent conflicts developed in the camps?	sit-	Including interview with project-executing agency, secondary sources			



interactions) at the level of the intended beneficiaries? (Or if foreseeable, please be as specific as possible in terms of time). To what extent can overarching developmental changes be identified at the level of particularly disadvantaged or vulnerable parts of the target group to which the programme should contribute? (Or, if foreseeable, please be as specific as possible in terms of time).	The project did not target particularly disadvantaged or vulnerable target groups (see Relevance)				
Evaluation dimension: Contribution to overarching developmental changes (intended)			2	0	
To what extent did the programme actually contribute to the identified or foreseeable overarching developmental changes (also taking into account the political stability) to which the programme should contribute?	To what extent has the project contributed to maintaining the education level and health status of refugees? To what extent has the project contributed to stability in the refugee camps?	Including interview with project-executing agency, secondary sources			
To what extent did the programme achieve its intended (possibly adjusted) developmental objectives? In other words, are the project impacts sufficiently tangible not only at outcome level, but also at impact level? (e.g. drinking water supply/health effects)	Are impacts at the overarching development policy level considered at all realistic/achievable for the measures?	including secondary literature			



Did the programme contribute to achieving its (possibly adjusted) developmental objectives at the level of the intended beneficiaries?	Were negative coping strategies avoided during the implementation period and beyond, e.g. closure of facilities?	Including interview with project-executing agency, secondary sources
Has the programme contributed to overarching developmental changes or changes in life situations at the level of particularly disadvantaged or vulnerable parts of the target group (potential differentiation according to age, income, gender, ethnicity, etc.) to which the programme was intended to contribute?	The project did not target particularly disadvantaged or vulnerable target groups (see Relevance)	
Which project-internal factors (technical, organisational or financial) were decisive for the achievement or non-achievement of the intended developmental objectives of the programme? (Learning/help question)	What was the FC contribution's share of the UNRWA core budget for the health and education programme?	Interview with project-executing agency
Which external factors were decisive for the achievement or non-achievement of the intended developmental objectives of the programme? (Learning/help question)	What impact did the USA's decision to no longer support UNRWA have at the financial level? To what extent did the constantly fluctuating numbers of refugees influence the sufficient provision of teachers, also in the context of the Syrian crisis?	Interview with project-executing agency
Does the project have a broad- based impact? - To what extent has the pro- gramme led to structural or institutional changes (e.g.in	How have UNRWA's financing requirements developed? Will salaries still be refinanced? What alternative sources of financing were tapped?	Interview with project-executing agency



organisations, systems and regulations)? (Structure formation) - Was the programme exemplary and/or broadly effective and is it reproducible? (Model character)					
How would the development have gone without the programme? (Learning and help question)	What are the effects, for example, of school closures that could have been a consequence of the underfinancing?	Secondary literature: https://re- liefweb.int/report/world/no-education- no-protection-what-school-closures-un- der-covid-19-mean-children-and-young			
Evaluation dimension: Contribution to (unintended) overarching developmental changes			3	0	
To what extent can unintended overarching developmental changes (also taking into account political stability) be identified (or, if foreseeable, please be as specific as possible in terms of time)?	How has the frequency of violent conflicts developed in the camps? To what extent have there been increasing conflicts between camps and the host communities?	Including interview with project-executing agency, secondary sources			
Did the programme noticeably or foreseeably contribute to unintended (positive and/or negative) overarching developmental impacts?	To what extent did salary financing lead to a local shortage of teachers?				
Did the programme noticeably (or foreseeably) contribute to unintended (positive or negative) overarching developmental changes at the level of particularly disadvantaged or vulnerable groups (within or outside the target group) (do no	Can increasing negative coping strategies be observed in the target group? What is their current situation?	Interview with project-executing agency			



harm, e.g. no strengthening of inequality (gender/ethnicity))?			
Other evaluation questions			
Other evaluation questions	Were there adjustments to the UNRWA education and health programme between Phases II and III that influenced the overarching developmental impacts?		

Sustainability

Evaluation questions	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Level	Weighting (-/o/+)	Reason for weighting
Evaluation dimension: Capacities of participants and stakeholders			5	0	
Are the target group, executing agencies and partners institutionally, personally and financially able and willing (ownership) to maintain the positive effects of the programme over time (after the end of the promotion)?	Does UNRWA provide education and health services even after the short-term FC refinancing of salaries ended?	Phase II and Phase III project completion report Interview with project-executing agency and operational department			
To what extent do the target group, executing agencies and partners demonstrate resilience to future risks that could jeopardise the impact of the programme?	Has the FC project reinforced the executing agency's and the target group's resilience to risks? Are there demonstrable differences in the resilience of the target group between the two intervention areas of the West Bank and Gaza Strip?	Interviews with project-executing agency and operational department			
Other evaluation questions	To what extent is UNRWA dependent on donor financing to continue	Interview with project-executing agency and operational department			



Other evaluation questions	education and health services in the Palestinian territories? Could a stronger allocation of funds from the FC project to UNRWA measures in the West Bank have contributed to sustainability due to the differences in the potential for conflict between the two intervention areas?	Interview with project-executing agency and operational department			
Evaluation dimension: Contribution to supporting sustainable capacities:			5	0	
Did the programme contribute to the target group, executing agencies and partners being institutionally, personally and financially able and willing (ownership) to maintain the positive effects of the programme over time and, where necessary, to curb negative effects?	Is the target group dependent on the continuation of UNRWA schools and health centres in the long-term? Is UNRWA able to continue school operations and health centres in the long-term?	Questions for the project-executing agency and the operational department			
Did the programme contribute to strengthening the resilience of the target group, executing agencies and partners to risks that could jeopardise the effects of the programme?	Has the FC project made a sustainable contribution to the institutional and financial strengthening of UNRWA?	Question to the project-executing agency			
Did the programme contribute to strengthening the resilience of par- ticularly disadvantaged groups to risks that could jeopardise the ef- fects of the programme?	The FC project did not explicitly target particularly disadvantaged or vulnerable target groups within the Palestinian refugee population (see Relevance)	Module proposal			
Other evaluation questions	Was the FC project compatible?	Question for the operational area			



Evaluation dimension: Durability of impacts over time			5	0	
How stable is the context of the programme (e.g. social justice, economic performance, political stability, environmental balance)? (Learning/help question)	Can a sustainable improvement or an end to the conflict situation in the Palestinian territories realistically be expected? To what extent can a further influx of refugee Palestinians from Syria be expected in the future?	Secondary literature Background discussions with Middle East experts			
To what extent is the durability of the positive effects of the programme influenced by the context? (Learning/help question)	What influence does the ongoing conflict situation in the Palestinian territories have on the continuation of UNRWA services in the education and health sector?	Questions for operational area Background discussions with Middle East experts Secondary literature			
To what extent are the positive and, where applicable, the negative effects of the programme likely to be long-lasting?	What is the risk that the positive impacts achieved by the FC project will no longer exist in the foreseeable future due to the conflict situation in the Palestinian territories and the unsecured financial situation of UNRWA?	Questions for operational area			
Other evaluation question 1 To what extent are the gender results of the measure to be considered permanent (ownership, capacities, etc.)? (FC-E-specific question)	Does UNRWA intend to prioritise/give greater consideration to access to education and health services for girls/women?	Questions for the project-executing agency			
Other evaluation questions			5	0	
Other evaluation questions	Can long-term effects be achieved at all with the short-term refinancing of salaries in UNRWA schools and health centres?	Questions for operational area			



t s	Why did the experience of failing to achieve long-term effects with the short-term refinancing of salaries in UNRWA schools and health centres in Phase II not lead to a conceptual realignment of subsequent Phase III?	Questions for operational area
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