

Ex-post evaluation

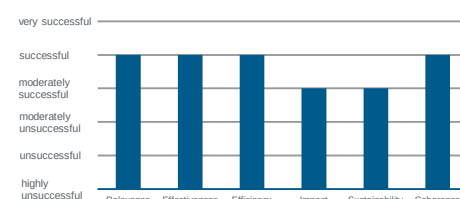
Safe WASH services and prevention of / care for survivors of GBV, South Sudan

Title	Access to safe drinking water and sanitation (WASH) in addition to prevention of gender-based violence (GBV) and care for GBV survivors		
Sector and CRS code	14020 Water supply and sanitation – large systems, 15170 Women's equality organisations and institutions		
Project number	2018 18 541		
Commissioned by	German Federal Ministry for Economic Cooperation and Development (BMZ)		
Recipient / Project-executing agency	United Nations Children's Fund (UNICEF)		
Project volume / Financing instrument	EUR 6.0 million		
Project duration	December 2018 – March 2021		
Reporting year	2023	Year of random sample	2023

Objectives and project outline

The objectives at outcome level were to improve access to safe, gender-sensitive water, hygiene and sanitation facilities at schools, health centres and public institutions, as well as to strengthen local structures for GBV prevention as well as care for GBV survivors. The three main components promoted were WASH, Communication for Development (C4D) and GBV. The objective at impact level was to strengthen the physical and psychological resilience of the target group, especially of women.

Overall rating:
successful



Key findings

The project had a developmental impact. A limited sustainability claim was formulated and the project's connectivity was evaluated instead. The project has been rated "successful" for the following reasons:

- The inclusive design and implementation of WASH and GBV measures was expedient, as women and girls are particularly exposed to higher GBV risks when using WASH services (relevance).
- Due to the close coordination with a UNICEF project implemented in parallel, more than twice as many women and girls were reached via the Women and Girls Friendly Spaces (WGFS) than originally planned (effectiveness). The UNICEF programme raised awareness among the communities of the services available for GBV prevention as well as care for GBV survivors, while the FC-funded WGFS made these services available.
- Despite the restrictions due to the COVID-19 pandemic, the project-executing agency managed to implement the measures almost completely with just three months' delay. Adjustments were made to the implementation modalities (e.g., virtual training), which helped to compensate for efficiency losses.
- The project's connectivity is satisfactory, as the created structures and local capacities generally provide starting points for follow-up projects. There is still a high dependency on external donors to ensure the durability of the achieved results.

Conclusions

- The selection of a project executing agency with many years of experience in fragile contexts and strong integration in the local co-ordination mechanisms proves to be successful in ensuring the efficient implementation of the measures under difficult conditions.
- The use of synergies with similar projects makes a positive contribution to the achievement of objectives and enables to reach a larger target group.
- Due to the limited data situation, additional results monitoring (e.g., remote or third-party) is recommended for future projects in fragile contexts.

Ex post evaluation – rating according to OECD-DAC criteria

General conditions and classification of the project

South Sudan is one of the world's poorest and least developed countries (LDC). Just a few years after South Sudan's independence from Sudan, a civil war broke out. This is due to the rivalry between two groups. One supported President Salva Kiir, while the other supported former Vice-President Riek Machar. For the most part, these two groups also represented two different ethnicities. In August 2015 the conflicting parties signed a peace treaty negotiated under the auspices of the regional organisation Intergovernmental Authority on Development (IGAD). The implementation of the agreement and the formation of the government did not take place until May 2016 and only two months later the fighting flared up again. The peace treaty was renewed in September 2018. Among other things, it regulates the distribution of power with the involvement of all opposition parties, the formation of a transitional government and Machar's return to a vice-presidential post, the reconfiguration of the army and the definition of the internal borders between the federal states, which were repeatedly shifted during the war. In February 2020, another important step towards peace was taken with the formation of a new transitional government. In summer 2022, the transition process was extended by two years. Elections are scheduled for December 2024. Armed disputes continue to occur regularly at both local and regional level. Violent livestock theft and ethnically motivated raids on other villages in particular continue. One of the reasons for this is the long-standing political conflict that is waged along ethnic lines. The poor humanitarian situation and the resulting increase in frustration and lack of prospects also contribute to this¹.

The country ranks 159th out of a total of 163 listed countries on the 2022 Global Peace Index. Around 11 million people live in South Sudan². It is estimated that around 9.4 million people required humanitarian aid in 2023, compared to 8.9 million in 2022. These include 2.2 million women and 4.9 million children. This increase is largely due to a conglomeration of shocks, including **ongoing conflicts, widespread floods, increasing food insecurity, inflation, high food prices and lack of access to basic services**. Close to 2.2 million people have been displaced from the country since 2013, and more than 2.3 million South Sudanese refugees are being housed in neighbouring countries. At least 148,000 South Sudanese citizens who have returned from abroad are still displaced within the country³.

People's access to safe **water, improved sanitation and hygiene (WASH)** is low. Commonly reported problems with access to WASH facilities include long queues and congestion at water abstraction points, leading to disputes and tension. Women and girls are particularly exposed to the risk of physical and sexual assault and harassment at remote water extraction points and latrines. The destruction of WASH facilities, inadequate hygiene and sanitary facilities and the lack of access to clean drinking water contribute to poor health. They also pose a danger to the population because of the fact that the unclean water often harbours waterborne diseases such as diarrhoea, cholera and hepatitis E, with the latter being particularly dangerous for foetuses in pregnant women. It is estimated that in 2023, the well-being of an estimated 6.1 million people will be adversely impacted by insufficient or complete lack of access to safe water and improved sanitation⁴.

Gender-based violence (GBV)⁵ is a prevalent problem in South Sudan, ranging from domestic violence to sexual violence in conflicts. Although gender equality is enshrined in the constitution of South Sudan, women and girls continue to be marginalised and subject to cultural and patriarchal constraints. These constraints, as well as the low status of women at individual and systemic level, contribute to an environment that makes it difficult for women to access justice and threatens their physical security. Around 75% of women and girls have experienced violence from a partner, and around 46% have witnessed at least one incident of GBV against another woman in the same household⁶. Despite international efforts to build capacity, South Sudan is largely lacking efficient and independent judicial authorities committed to safeguarding the rule of law and fundamental human rights.

UNICEF's approach to preventing and responding to GBV is based on two different but complementary approaches: **1) programmes with a focus on GBV and 2) the integration of GBV as a cross-cutting topic into**

¹ Sources: German Federal Ministry for Economic Cooperation and Development (BMZ) and Foreign Office 2023

² Source: United Nations Population Fund 2023

³ Source: South Sudan Humanitarian Needs Overview 2023 (OCHA)

⁴ Source: South Sudan Humanitarian Needs Overview 2023 (OCHA)

⁵ GBV is a generic term for harmful acts committed against a person due to socially attributed differences between women and men.

⁶ Source: Gender-based violence knowledge, attitudes and practices survey in South Sudan 2019 (IOM)

other programme areas (e.g., WASH, food security, education)⁷. UNICEF and its implementation partners focus on the guidelines of the Inter-Agency Standing Committee (IASC) on the integration of measures for the prevention and care for survivors of GBV in humanitarian contexts⁸. Originally published in 2005, the now updated GBV guidelines are an important tool for humanitarian actors and the communities affected by armed conflicts, natural disasters and other humanitarian emergencies. The overarching objective of the GBV guidelines is to achieve a system-wide transformation in which GBV-sensitive approaches and programmes are consistently implemented in all humanitarian sectors from the outset⁹. The evaluated FC project promoted this cross-sectoral approach by **financing gender-sensitive measures in the areas of WASH (60% of FC funds) and GBV (40% of FC funds)**.

Brief description of the project

The improvement of long-term and gender-sensitive access to water and sanitation in schools, health centres and public institutions was achieved through the expansion of water supply systems, the creation and rehabilitation of boreholes for decentralised distribution networks as well as the building and rehabilitation of accessible, gender-appropriate latrines. These components were mainly implemented at schools, health centres and municipal facilities. A small proportion of the FC funds financed latrines at household level. Gender-sensitive hygiene practices were taught through training and awareness-raising campaigns (e.g., cholera prevention, menstrual hygiene). In addition, the project promoted various training courses for community members and service providers (e.g., healthcare providers and social workers) in the area of GBV as well as psychosocial support for women and girls. This improved access to cross-sector services for the reduction of GBV as well as care for survivors of GBV. Another component promoted the improvement of the living conditions of women and girls through micro-entrepreneurship training.

The target group was the population of the programme cities in the administrative districts of Juba, Yei, Yambio and Torit, with women and girls in particular benefiting from the financed measures as vulnerable groups.

⁷ Source: GBV Risk Mitigation Programmatic Highlights, 2017 (UNICEF South Sudan)

⁸ Source: <https://gbvguidelines.org/en/> (last accessed 28 June 2023)

⁹ The GBV guidelines are accompanied by an implementation strategy for the humanitarian sector and an inter-agency implementation support team working to operationalise GBV risk mitigation in non-GBV sectors. The implementation support team consists of members of CARE, IOM, UNFPA and UNICEF.

Map/satellite image of the project country including project areas



Source: GADM (national borders and administrative units), project documentation (project areas). Own data.

Breakdown of total costs

		Inv. (planned)	Inv. (actual)
Investment costs (total)	EUR million	6.00	6.00
Counterpart contribution	EUR million	0.00	0.00
Debt financing	EUR million	6.00	6.00
<i>Of which budget funds</i>	<i>EUR million</i>	<i>6.00</i>	<i>6.00</i>

Evaluation according to OECD-DAC criteria

Relevance

Alignment with policies and priorities

The project was embedded in the “Regional Approach to Transitional Development Assistance for Strengthening Resilience in the Horn of Africa” (2017), whose country focus is on Ethiopia, Somalia, Sudan, and South Sudan. It is a set of measures to address the various needs of people in crisis, stabilisation and refugee contexts in the Horn of Africa and to strengthen their resilience to future crises. The measures are geared towards closing the gap between humanitarian aid on the one hand and the long-term development cooperation (DC) on the other. As part of the regional approach, a central role is attributed to the rehabilitation and (re)building of initial central infrastructure for the provision of basic services (including water and sanitation as well as education and healthcare facilities). For the operation and maintenance of these infrastructures, the projects are to develop adapted operating concepts in order to ensure more sustainable and longer-term operation, also beyond the project duration. These first structural investments form the basis for subsequent long-term DC. Nevertheless, the risk of unsustainable operation of the rehabilitated or built infrastructure or the sustainable use of the contribution in-kind or training services financed by the regional approach is high.

However, German development cooperation with South Sudan was made into a non-governmental cooperation in mid-2016 due to the political situation. The primary goal of German involvement is to provide the most direct and fast-acting support possible to vulnerable population groups, i.e., in particular women and children, internally displaced persons, refugees and host communities. The impact of the civil war on the population and the resulting humanitarian emergencies are to be mitigated. The involvement is therefore in line with the quality characteristics of *gender equality* and *do no harm* of the German Federal Ministry for Economic Cooperation and Development (BMZ) thematic model 2030. The BMZ's involvement currently focuses on the areas of food and agriculture, water and sanitation, education, and income creation, as well as good governance and peacebuilding.

The project was embedded in the WASH sector strategy adopted by UNICEF and national partners to establish sustainable water supply systems as an alternative to cost-intensive water trucking. In addition, the project supported the United Nations' extensive work to reduce GBV and provide care for survivors in South Sudan. The measures in the area of GBV were in line with the existing national political road maps and the UN Interim Cooperation Framework for South Sudan (2016–2018).

Focus on needs and capacities of participants and stakeholders

The long-lasting and recurring crises in the countries in the Horn of Africa affected by severe poverty and food shortages are key challenges at regional level (regional approach). Often weak government institutions are barely able to effectively deal with chronic stress factors and recurring shocks such as the effects of extreme weather events, the consequences of violent conflicts and challenges posed by acutely increasing numbers of displaced persons. To a certain extent, the diverse challenges compound each other and spread cross-border destabilising effects. The deteriorated physical and mental health situation of the population, which was already vulnerable due to the continuing conflict situation, was correctly identified as a country-specific core problem (FC project). Due to the continued fragile security situation, the core problem remains relevant even after the end of the civil war.

Water supply and wastewater disposal in South Sudan are severely restricted, especially for people with disabilities. The absence, presence or placement of WASH facilities is a reason for population migration and conflicts about land and property in some areas. The effects of severe droughts and floods associated with the effects of climate change are leading to increased demand for WASH services.

Women and girls are exposed to an increased risk of GBV when collecting water and using community latrines. In South Sudan, there is generally a high awareness of where to report GBV and where survivors of sexual and other violence can receive the necessary health care and psychosocial support. However, survivors often do not

talk about violence for many reasons, including embarrassment, distrust of authorities and fear of re-victimisation¹⁰.

In order to identify the safety needs and problems of women and girls, multi-sectoral safety audits were to be carried out by UNICEF. The methodology consisted of direct observation, interviews with key persons and focus group discussions with women, men, boys and girls. One of the main concerns was the safety of women and girls when searching for food, collecting water and firewood, and carrying out other domestic tasks. The long distances they have to travel for these tasks and general safety concerns also expose women and girls to sexual violence. Because of this, after consultation with the women, in Yei, some of the project locations (which had previously been selected by the local authorities) were changed. This was to ensure that the selection of promoted WASH facilities met women's and girl's needs.

From today's perspective, the procedure for selecting the intervention areas or for the orientation of specific measures is also appropriate in order to determine the needs of the target group and to prioritise the right areas.

The long-term continuity of the WASH infrastructure was to be ensured by training courses at community level and at the level of the local administrations (WASH committees).

Appropriateness of design

The project's design did not consider the challenges regarding WASH and GBV separately. Rather, the project took a multifaceted approach. A UNICEF study from April 2018 found that women and girls are particularly exposed to GBV when using educational, health and WASH facilities. This is also due to poor design of facilities, lack of user involvement and inappropriate behaviour on the part of operators. The lack of gender-sensitive sanitary facilities as well as the lack of provision of hygiene products and care for girls during their periods stop girls from attending school and increase the risk of them dropping out. In order to address this complex problem, a multi-sectoral approach was chosen so that GBV aspects were also taken into account when implementing the WASH components, e.g., by setting up gender-separated toilets in easily accessible locations. In addition, some measures fall under the "Communication for Development" (C4D) component. This component promoted positive social practices and changes in behaviour, which in particular complemented the promoted WASH infrastructure (e.g., teaching hygiene practices for cholera and coronavirus prevention, teaching menstrual hygiene practices and education to make the topic less taboo). The combination of WASH and GBV measures as well as the targeted addition of a C4D component for the promotion of positive standards is also coherent and synergistic from today's perspective.

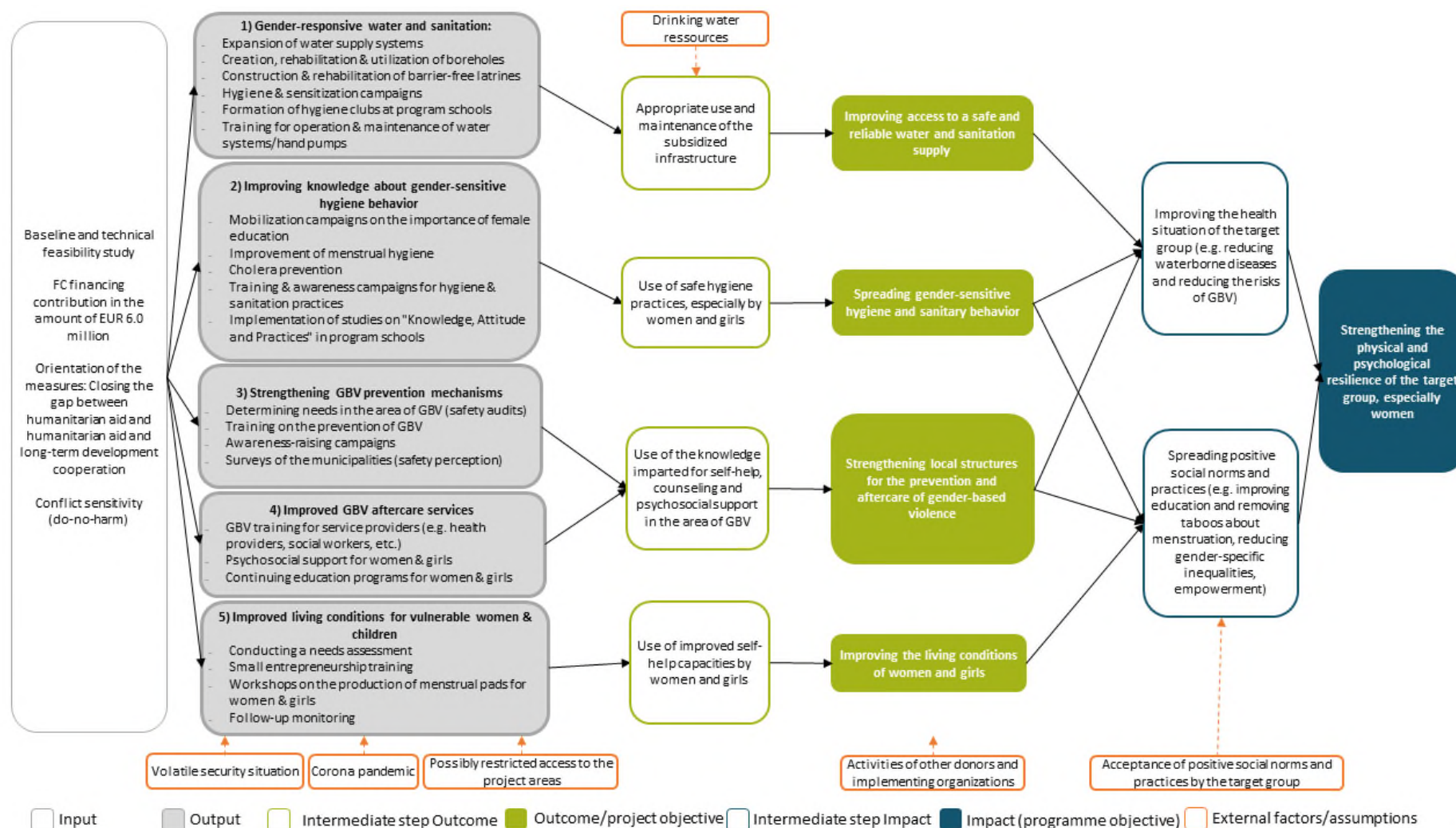
A cross-sectoral approach was useful for addressing the core problem. However, due to the close linkages between the components, a strict separation in the evaluation of the WASH, GBV and C4D measures in the EPE is not expedient (see Impact). This is also demonstrated by the visual Theory of Change. The division of components was defined as follows: WASH (Output 1), C4D (Outputs 2 and 3), GBV (Outputs 4 and 5). Outputs 1 and 2 complement each other in their impact, as do Outputs 3 and 4, although they are assigned to different components. Furthermore, it is not clear why the "Strengthening of GBV prevention mechanisms" (Output 3) and the "Improvement of services for care for survivors of GBV" (Output 4) are listed under separate components, although both outputs address the same topic.

The project was designed according to a holistic approach to sustainable development, in particular through the interaction of measures for the promotion of gender equality and improving access to WASH infrastructure. In addition, the approach was suitable for contributing to social sustainability through fair access to WASH and the promotion of gender equality. Conflict sensitivity in a fragile context (do no harm) was ensured through a needs-oriented design and implementation of measures based on baseline and technical feasibility studies by the project-executing agency. In addition, the evaluation team considers it particularly positive that a high proportion of men and boys were also to be educated regarding GBV. This approach leads to higher acceptance of the measures among the communities and was to include all population groups when promoting positive social norms (e.g., destigmatisation of menstruation). From today's perspective, the theory of change seems to be plausible overall.

¹⁰ Source: The Situation of Children and Women in South Sudan, 2021 (Ministry of Finance and Planning, Ministry of Gender, Child and Social Welfare and UNICEF)

The project was financed from the Federal Ministry for Economic Cooperation and Development's (BMZ) budget funds for structural transitional development assistance¹¹ and, in accordance with the OECD definition, was meant to contribute to strengthening resilience capacities at three levels: 1) stabilisation capacity, 2) adaptation capacity and 3) transformation capacity. Strengthening stabilisation capacities will enable basic needs to be met and the functioning of existing structures to be maintained. This includes access to safe and reliable water and sanitation. Strengthening adaptability empowers people and structures to adapt to long-term changes and mitigate the negative impacts. This includes, for example, teaching gender-sensitive hygiene and sanitary practices, strengthening local structures for GBV prevention as well as care for GBV survivors, and the improvement of living conditions by improving self-help capacities. Strengthening the transformation capacity promotes structural systemic change for sustainable livelihoods by making changes at the root of vulnerability (e.g., power structures, economic status). In this case, the project contributed to the promotion of an inclusive form of society with positive social norms and practices as well as to stabilising the health situation of the target group. From the evaluation team's perspective, the stabilisation and adaptation capacities are addressed at the outcome level of the project, while the transformation capacities serve as an intermediate step to target achievement at impact level (see visual Theory of Change).

¹¹ See also <https://www.bmz.de/resource/blob/30738/strategiepapier505-strategy-transitional-development-assistance.pdf> (last accessed 4 July 2023)



The project combined fast-acting and structural measures to strengthen crisis management capabilities at local level. Fast-acting measures were to contribute directly to improving the living situation of the target group, e.g., the built latrines and the expansion of water supply systems. On the other hand, measures aimed at building up local capacities in the medium term have a structure-forming character and therefore also contribute to the connectivity of the measures (e.g., training for the maintenance of water systems, GBV training for service providers, promotion of the range of Women and Girls Friendly Spaces (WGFS)). Against the backdrop of the still fragile peace situation and the poor humanitarian situation in the partner country, this focus is also expedient from today's perspective. The target group's need for fast-acting emergency mitigation measures in a fragile context is high. In addition, the project's structural components generally had the potential to create connection points for longer-term DC projects. The evaluated project's overall design is therefore assessed as appropriate.

From today's perspective, the approach chosen for structure-building transitional development assistance also seems to be best suited to achieving the best possible results at outcome and impact level. Stabilising livelihoods in a fragile context through fast-acting components and building longer-term local capacities is assessed as appropriate. The fragile context significantly limited the possibilities of impact measurement. Therefore, at the time of project planning, only output indicators were defined as proxies for impact measurement at outcome level based on UNICEF's logframe. From today's perspective, the financing of third-party monitoring would have been expedient for ensuring more detailed impact measurement at the specific project locations (reduction of the attribution problem) and to ensure the collection of usage values as outcome indicators. At impact level, the prevalence of diarrhoea cases in urban and suburban areas was determined to measure potential health effects. From today's perspective, the indicator is appropriate in terms of content as a proxy for the physical health of the target group. However, the geographical coverage of the available data was too wide and there were gaps in data collection, which resulted in some limitations in this regard. An additional indicator for the mental health of the target group would have been desirable but could not be defined either ex ante or ex post due to the data situation described. As a result, methodological challenges materialised in the impact measurement at the time of the EPE.

Response to changes/adaptability

To ensure good adaptability to the volatile security situation, regular consultations were planned between UNICEF and the communities or implementation partners. Close involvement of community leaders aimed to ensure acceptance of the project and the implementation partners involved. In the course of the COVID-19 pandemic, UNICEF managed to ensure the ongoing implementation of activities despite government contact and movement restrictions (see Effectiveness, quality of implementation).

Summary of the rating:

The project was in line with the "Regional Approach to Transitional Development Assistance for Strengthening Resilience in the Horn of Africa" (BMZ) and supported the United Nations' involvement in South Sudan. The project addressed the core problem in the partner country through a multi-sectoral approach in the areas of WASH and GBV. The project's conflict-sensitive orientation (do no harm) and the planning of components for long-term structure formation are highlighted positively in the fragile context. Overall, the relevance is assessed as good.

Relevance: 2

Coherence

Internal coherence

As part of other transitional development assistance projects, corresponding measures were already implemented in the areas of WASH and GBV, with UNICEF as project-executing agency, before the evaluated project was implemented. Among other things, funds from the suspended bilateral FC programme in South Sudan were used to finance the development of urban water and sanitation services in Yei, Yambio and Torit (BMZ no. 2015 68 773). The evaluated project supplemented the bilateral FC programme, among other things, by continuing the promotion of the community-led total sanitation (CLTS) approach¹². This is a collaborative approach to improving

¹² CLTS is a method for the promotion of sanitation and hygiene, with the aim of convincing entire communities to permanently end open defecation. CLTS uses participatory methods and processes to help communities analyse their sanitary practices and encourage positive behavioural change.

household water supply and the use of latrines. The CLTS approach encourages communities to build latrines with their own funds and continue to use them properly. In addition, the evaluated project supplemented the FC project “Water and sanitation supply for poverty-stricken areas and refugee camps in Juba, Phases I and II” (BMZ no. 2016 18 768 and BMZ no. 2017 18 790). The evaluated project built on the previously financed WASH infrastructure in Juba, Yambio, Torit and Yei, and concentrated on WASH at schools and healthcare facilities. In addition, supplementary measures for GBV prevention as well as care for GBV survivors were financed during implementation of the water and sanitation measures in order to respond to the country-specific challenges in the area of GBV. Reducing the risks of GBV by providing safe and gender-specific water, sanitation and hygiene facilities as well as safe refuges was already a main objective in the aforementioned Juba projects. There were synergies between the evaluated project and the previously implemented FC projects, as the detailed plans already available for the construction of the standard structures were also used for the evaluated project.

TC works in South Sudan on the core topics of food security and agricultural development, urban water and sanitation, as well as rural development and governance. The evaluated project complemented the TC project “Development of the urban water and sanitation sector”, which was implemented by 2020. The TC project pursued a poverty-oriented approach and promoted affordable water and sanitation for the population in Yei, Yambio and Torit. It built upon two previous projects. The Ministry of Water Resources was advised on the drafting of a law on institutional reform of the water sector and on investment planning. In addition, partner institutions were supported in developing initial regulatory instruments. The programme supported the development of public water utilities and thereby created the conditions for FC investments in the area of WASH. Based on the interviews conducted as part of the evaluation, however, it is suspected that redundancies occurred in some cases with the evaluated FC project (e.g., promotion of similar components at the same schools, while no measures took place at all at other schools).

The German Federal Ministry for Economic Cooperation and Development's (BMZ) involvement in South Sudan is also complemented by numerous DC measures in the region. For example, neighbouring countries such as Ethiopia, Uganda, Kenya, Sudan and the Democratic Republic of Congo are being supported in providing for South Sudanese refugees.

External coherence

Where possible, the project supported the existing systems and structures in the partner country, which are used to identify needs, as well as design and implement measures in the areas of WASH and GBV. Nevertheless, according to some sources, the involvement of government institutions in project planning and implementation remained a challenge that not even UNICEF itself as the project-executing agency was always able to adequately overcome. However, this could be partly due to the difficult situation on the ground in the sectors affected here. Although there are national plans at political level for the promotion of gender equality and the empowerment of women, many gender-specific measures in South Sudan have not yet been implemented in practice or only exist in the form of proposals (due to lack of financing or political will), and gender-specific issues are given little priority¹³.

The so-called clusters are groups of humanitarian organisations (both UN and non-UN organisations) operating in the main areas of humanitarian aid. Agreements have been signed between UNICEF and each leading organisation at country level to ensure effective and efficient coordination as well as clearly define each party's roles and responsibilities. UNICEF has already taken over (co-)management of the WASH cluster in South Sudan, which is relevant for the evaluated project. In addition, the project-executing agency is still closely involved in the work and coordination activities of the GBV sub-cluster. The clusters work together at national and sub-national level as part of an inter-cluster coordination group to ensure coherence in achieving common objectives, avoid duplicate work and ensure that needs are prioritised. A comprehensive evaluation from 2022 concludes that UNICEF has made significant investments in implementing its role as a cluster (co-)lead agency (CLA) – with positive results overall¹⁴.

The clusters assist in deciding on the allocation of country-specific funds in which the financial contributions of several donors are pooled. The United Nations Office for the Coordination of Humanitarian Aid (OCHA) awards these funds to several projects at country level. The clusters also develop objectives, activities and

¹³ Source: The Situation of Children and Women in South Sudan, 2021 (Ministry of Finance and Planning, Ministry of Gender, Child and Social Welfare and UNICEF)

¹⁴ Source: Evaluation of the UNICEF Role as Cluster Lead (Co-Lead) Agency (CLARE II), 2022 (UNICEF)

accompanying budgets for their sectors within the framework of humanitarian action plans. Donors refer to these plans in order to determine their funding priorities. The highest financial contributions to the promotion of the Humanitarian Response Plan 2023 in South Sudan were made by the USA (USD 551.6 million), the European Commission (USD 80 million), the United Nations' Central Emergency Response Fund (USD 46.3 million), Germany (USD 43.6 million) and the United Kingdom (USD 24.5 million)¹⁵.

Summary of the rating:

In terms of content, the evaluated project linked to similar FC projects that had previously been implemented and supplemented these with the components in the area of GBV. Internal coherence is diminished by possible redundancies in the selection of project schools and types of interventions that are related to insufficient coordination of parallel actions. This assumption is based on the anecdotal evidence of the interviewees who were surveyed as part of the EPE. However, due to a lack of verification options, this aspect is less important in the rating. Overall, the project's coherence is evaluated as successful. The selection of UNICEF as the project-executing agency ensured the embedding of the FC project in the strategies and activities of the national WASH cluster and contributed to a high level of external coherence of the project. Overall, the efficiency of the project is rated as successful.

Coherence: 2

Effectiveness

Achievement of (intended) targets

The objective underlying this EPE was to improve access to safe, gender-sensitive water, hygiene and sanitation facilities at schools, health centres and public institutions, as well as to strengthen local structures for GBV prevention as well as care for GBV survivors. According to German DC's understanding of the impact, the effectiveness criterion outcome indicators that map the use of the available capacities at output level are examined. Due to the limited data available in the fragile context, the FC contribution to achieving the objectives is primarily evaluated solely on the basis of the output indicators monitored by UNICEF during implementation. The target achievement at outcome level is summarised in the table below:

Indicator	Status at PA (2018)	Target value according to PA/EPE	Actual value at FI (2021)	Actual value at EPE (2023)*
(1) Persons with access to safe, gender-sensitive and adapted water and sanitation in schools, health centres and community facilities in Yei, Yambio, Torit and Juba	Baseline: 0	30,000 people	39,394 people	Achieved.
(2) Schools that apply positive behavioural practices such as hand washing, safe storage of drinking water and appropriate use of gender-specific toilets	Baseline: 6	48 schools	42 schools	Almost achieved.
(3) Number of UNICEF partners and community members trained with regard to GBV	Baseline: 242	300 partners	394 partners	Achieved.
(4) Number of local service providers trained with regard to GBV	Baseline: 30	100 providers	130 providers	Achieved.

* The evaluation is based on information provided by UNICEF at the time of the FI. Since these are output indicators, no more current values are available at the time of the EPE.

¹⁵ Source : <https://www.unocha.org/south-sudan>

Contribution to achieving targets

Component 1: WASH

During the project period from December 2018 to March 2021 more than 39,000 people benefited from the improved WASH services (Indicator 1). The **water supply** was improved by drilling four new boreholes and refurbishing 36 non-functioning boreholes in schools, health centres and communities. The boreholes to be renovated were selected jointly by the Ministry of Education and the South Sudanese Ministry of Infrastructure in cooperation with UNICEF and the implementing partners. After completion, each borehole underwent a bacteriological water quality test to ensure the safety of the water before it was approved for use. The refurbishment also included the replacement of defective mechanical pump parts and construction work. Technicians from the State Ministry of Physical Infrastructure were deployed to carry out this renovation work in cooperation with UNICEF's implementation partner.

Access to sanitary facilities and hygiene in schools and healthcare facilities has been improved by building 12 latrine blocks and refurbishing 30 latrine blocks with hand-washing facilities. Close to 27,000 schoolchildren received access to **gender-separated and accessible latrines**. In addition, an estimated 14,000 people can now use safe latrines in healthcare facilities. Sanitary facilities and hygiene at household level have been improved by building over 2,000 new latrines in line with the CLTS approach. Overall, around 12,400 people benefit from access to sanitary facilities in their homes.

Based on the outputs delivered, at least temporarily, a contribution was made to improving **access to safe, gender-sensitive water, hygiene and sanitation facilities at schools, health centres and public institutions**. An on-site appraisal of the technical construction by KfW was not possible due to the remoteness of the project communities or in the course of travel restrictions imposed due to the COVID-19 pandemic. Due to the volatile security situation, it was unfortunately also not possible to evaluate the quality of the outputs created ex post. Furthermore, it is not possible to make a clear statement about the extent to which the infrastructure is used to date. It is possible that the condition of the infrastructure (e.g., latrines and boreholes) has deteriorated in the meantime due to conflicts and the lack of capacities for maintenance. Consumables (e.g., soap and toilet paper) are also needed so that the beneficiaries can continue to apply the hygiene practices they have learned. Because of disrupted supply chains due to the pandemic, school closures and movement restrictions, it is clear that the infrastructure could not be used at times. Since the promoted measures are relatively low-maintenance infrastructure, it can be assumed that the effects will continue in the medium term at least (also see Efficiency, Allocation efficiency).

Component 2: Communication for Development (C4D)

In addition to the WASH infrastructure measures, appropriate **awareness-raising campaigns** were carried out on the basis of a KAP study on menstrual hygiene, and discriminatory norms and cultural taboos were discussed. **Hygiene and health clubs** were set up at schools to inform children, teachers and members of the school committees about WASH topics. In addition, the communities benefited from general **mobilisation campaigns on menstrual hygiene and WASH**. Not least community helpers, healthcare staff and other service providers were trained in the aforementioned topics. According to UNICEF reporting, a total of 42 schools apply positive behavioural practices such as hand washing, safe storage of drinking water and appropriate use of gender-specific toilets (Indicator 2). UNICEF also carried out a Community Rapid Assessment (CRA) in all administrative districts to assess changes in behaviour in the target communities. At the time of the survey (as of 2021, final report by UNICEF), more than 98% of respondents stated that they regularly wash their hands with soap and clean water.

The mobilisation campaigns and training on menstrual hygiene and WASH were also highly relevant in the context of the COVID-19 pandemic and successfully contributed to the **teaching of gender-sensitive hygiene and sanitary practices in the beneficiary communities**. In addition, these are longer-term effects, and it can be assumed that there will be a lasting learning effect for the beneficiaries.

Component 3: GBV

The evaluated project promoted the dissemination of the IASC guidelines and the expansion of corresponding **capacities for the prevention of GBV** through the training of a total of 394 UNICEF partners (Indicator 3). The training content included a general overview of core GBV concepts and of COVID-19, the integration of GBV measures into humanitarian measures in accordance with the IASC guidelines, and the use of a GBV pocket guide. Awareness-raising of the causes and consequences of GBV as well as prevention messages were integrated into community-based campaigns and reached around 54,700 people. In addition, 20 safety audits were

carried out in order to identify the needs of vulnerable women, young people and girls in the area of GBV. The results of the safety audits were fully used in order to design information and training activities.

A total of 130 service providers (teachers, head teachers, clinical staff, social workers and midwives) were trained in building **capacities for care for survivors of GBV** (Indicator 4). Refresher training on the core GBV concepts was held at 50 municipal contact points for survivors of GBV. Due to their easy accessibility, the municipal contact points play a key role in supporting women and girls. In addition, three new **Women and Girls Friendly Spaces (WGFS)** were built and an existing WGFS was renovated. The project supported the provision of services (GBV case management, psychosocial support, leisure activities and teaching life skills) by a total of six WGFS in the project districts.

Last but not least, the project promoted training courses for the **management of microenterprises** (e.g., tea shops, hairdressing salons) and **life skills courses** for the production of sanitary towels and household textiles. The content of the courses was adapted to the needs of the local target group as necessary, so that skills with a direct link to local markets could be taught. Often, poverty and lack of perspective lead to child and forced marriage, which increases the risk of GBV. The project's component can therefore be regarded as a preventive measure for GBV, as it enables girls and women to support themselves independently. At the time of the evaluation, no income effects can be mapped, but a positive contribution to the **empowerment** of the female beneficiaries can be assumed. Most girls who took part in this income-generating programme planned to go back to school as soon as they were able to pay the school fees through their business.

The provision of services and training on the prevention of as well as care for survivors of GBV contributed to **strengthening local structures for the prevention of gender-based violence as well as care for GBV survivors**.

Quality of implementation

The construction quality of the installations could not be evaluated. The appropriateness of the technical quality standards implemented by UNICEF cannot therefore be conclusively evaluated. Operational implementation by the executing agency is evaluated as appropriate on the basis of the (over)achieved output indicators and due to the close integration into the cluster system (see Coherence).

The administrative capacities of the project-executing agency and the quality of implementation are rated as satisfactory overall at the time of the evaluation. Close coordination with a parallel UNICEF programme to change social standards contributed to the services offered in WGFS reaching significantly more women and girls than originally assumed (8,852 instead of 3,500). As of 2018, UNICEF started integrating WGFS in places where the Community Care programme to change social standards was also implemented. As part of the programme, UNICEF raised awareness of the services available through community initiatives and encouraged discussions about GBV in the communities, while the WGFS ensured that appropriate community-based aid services were available. These combined strategies contributed to more women and girls becoming aware of and willing to take advantage of the WGFS offerings as well as increased acceptance and understanding of these spaces within the communities. To accommodate the large number of women and girls visiting these spaces, the groups were divided into morning and evening shifts, and when the COVID-19 restrictions came into force, UNICEF provided guidance to partners (i.e., local NGOs conducting activities in WGFS) on how to keep these services running during the pandemic. Some of these measures included holding smaller group sessions and providing personal hygiene stations and masks.

The project-executing agency monitored gender impacts in various phases of project implementation. A KAP study¹⁶ on menstrual hygiene was carried out in seven administrative districts. The study took place in selected primary schools to assess social norms related to menstruation and to understand the range of personal challenges and needs girls face in their school environment during menstruation, as well as the level of support they receive. It was carried out in seven administrative districts, selected according to the criteria of representativeness of the country's main geographical, social and demographic characteristics as well as the diversity of ethnic communities in Juba, Torit, Yambio, Rumbek, Malakal, Bentiu and Wau. The results of the study were used to target the mobilisation campaigns to develop positive social norms in the communities, in particular to

¹⁶ Knowledge, Attitude, Practice. The study to collect target group-specific data on knowledge, attitudes and behaviour on the subject of menstrual hygiene in South Sudan was carried out in seven administrative districts and captures national, social, demographic and ethnic characteristics.

destigmatise menstrual hygiene. This procedure appears appropriate and effective in order to differentiate the target group's most urgent needs and, if necessary, to adapt the measures according to the administrative district.

In addition, the results of the safety audits were used to formulate a GBV action plan for the food security cluster and to develop GBV indicators as part of the Humanitarian Response Plan 2021.

Since the UN organisations are not government agencies, on-site inspection rights and physical controls on the use of funds are not contractually enforceable. Visa and travel permits still need to be issued by the partner countries. The local security situation may also prevent physical monitoring of how the funds are used. As a result, monitoring the use of funds, which was already restricted within the framework of UN cooperation (including the single audit principle, among other things), was further complicated. No programme-specific audit was carried out, as this is rejected by UNICEF due to high administrative expenses and with reference to the single audit principle.

The high staff turnover at the project-executing agency made it difficult to identify suitable contacts or interview partners at the time of the EPE. In order to ensure sufficient transparency and data availability during implementation and ex post, it is advisable to clearly communicate corresponding responsibilities as well as specific project locations and photo documentation of the implemented measures in advance.

Unintended consequences (positive or negative)

At the time of the evaluation, no unintended consequences from the project could be determined.

Summary of the rating:

In the absence of existing outcome indicators, output indicators are used to evaluate the effectiveness of the project. With the exception of one indicator, the output targets were (over)achieved on the basis of the values available at the final inspection. More recent data is not available. Based on this, the achievement of the intended outcome objectives is still evaluated as successful. However, it must also be stressed that it was not possible to assess the quality of the infrastructure created during the evaluation, and it is unclear to what extent the infrastructure is being used properly to this day. The very limited data therefore does not allow final verification of the results at outcome level. From today's perspective, the quality of implementation by the project-executing agency is still evaluated as successful, but a more extensive documentation of projects in the fragile context is recommended for the future.

Effectiveness: 2

Efficiency

Production efficiency

The total costs of the transitional development assistance measure were EUR 6.0 million. With regard to the division of the total costs between the individual components, there were only minor changes compared to the financing proposal, which are due to adjusted detailed planning at the start of the project and to needs-oriented adjustments (including integration of COVID-19 prevention measures and information). Approximately EUR 2.9 million was spent on financing gender-appropriate water and sanitation facilities (Output 1) and EUR 0.2 million was spent on raising awareness about gender-sensitive hygiene practices (Output 2). The component for reducing risks for GBV and strengthening prevention measures (Output 3) was financed with around EUR 0.44 million. In addition, around EUR 0.71 million was used to improve services for the care for survivors of GBV (Output 4) and a further EUR 0.4 million was spent on improving living conditions through small entrepreneur training and life skills courses (Output 5).

Implementation via the project-executing agency UNICEF was associated with indirect costs of the project of EUR 0.9 million (i.e., staff, logistics, rents, security concepts, etc.) and an administration fee of a further EUR 0.44 million. The management fee of 8% of the total costs is normal for implementation by multilateral UN organisations that coordinate large-scale programmes and the services of various donors. In addition, the security situation in the fragile context generally results in higher implementation costs. Accordingly, the project's management costs are evaluated as appropriate from today's perspective.

In the event of an outbreak of COVID-19 in the second half of the project implementation, the South Sudanese government took preventive measures to contain the further spread of the disease. Travel restrictions and social distancing measures were introduced in all ten administrative districts, and schools were closed for prolonged periods from April 2020. This had an impact on the project implementation as the face-to-face training sessions at community level could not be carried out as planned. In addition, construction costs increased, especially in the Torit district, due to travel and border restrictions. Against this background, the last WASH renovation package was delayed, and work started later than planned. UNICEF was therefore granted a cost-neutral extension of the project period from 31 December 2020 to 31 March 2021 in order to be able to conclude the renovation and building of latrines as well as the outstanding training courses at community level. The training sessions were conducted virtually due to contact restrictions during COVID-19. This meant that it was possible to implement almost all components¹⁷. Overall, the project's production and time efficiency are evaluated as satisfactory in view of the local security situation and the unexpected outbreak of COVID-19.

Allocation efficiency

It seems unlikely that the use of alternative technologies would have increased the impact of the project. Often, in a fragile context, there is insufficient capacity for operation and extensive maintenance and repair of modern technologies (e.g., water pumps). The project's promotion of simple, low-maintenance infrastructure was therefore expedient.

Due to the volatile security situation in the partner country, the use of an alternative project-executing agency would probably not have been much more cost-effective than implementation via UNICEF. In addition, UNICEF has already proved to be one of the few organisations in other fragile contexts (e.g., Yemen) that has permanent access to hard-to-reach areas and provides the population there with essential basic services. Due to its many years of experience in implementing WASH and GBV measures in a fragile context, UNICEF was the right choice as the project-executing agency for the evaluated project.

In 2020, an evaluation of UNICEF's global WASH programmes (2014–2019) in long-term crisis contexts (including South Sudan, Lebanon, Somalia and¹⁸Cameroon) was published. The evaluation concludes that UNICEF meets the targets for water supply in long-term crisis situations. The WASH services are largely functional and reliable and are used over a longer period of time. In the evaluation, coordination within the framework of the global WASH clusters and cooperation with local authorities are mostly highlighted positively. Points of criticism include the lack of clearly formulated objectives with regard to the effects of the measures (e.g., change in the population's living conditions) and the fact that data is mainly collected at output level. The limited data situation is also a challenge in the FC project evaluated here, as the results measurement at outcome and impact level is mainly based on the outputs achieved and data triangulation. Overall, the evaluation confirms the impression that the selected implementation modalities and implementation via UNICEF contributed positively to the project's efficiency.

Summary of the rating:

The management costs for implementation via UNICEF as the project-executing agency were appropriate in view of the security situation. The COVID-19 pandemic caused delays in project implementation and increased costs for building materials. Nevertheless, the project-executing agency managed to implement almost all of the planned measures with slightly adapted implementation modalities and a cost-neutral extension of the project duration. The production efficiency is therefore still evaluated as moderately successful. The selected investment types (mainly low-maintenance infrastructure) were also suitable from today's perspective to achieve the desired results (outcome and impact level). The project-executing agency's many years of experience in implementing

¹⁷ The security perception survey scheduled for the first quarter of 2020, which was designed to provide insight into how safe people felt when accessing services, was cancelled due to COVID-19. In addition, only 20 safety audits were possible (instead of 24).

¹⁸ Source: Global Evaluation of UNICEF's WASH Programming in Protracted Crises 2014–19, 2020 (UNICEF)

WASH programmes in fragile contexts suggests that the inputs were used in favour of the greatest possible impacts. The allocation efficiency is also evaluated as successful.

Efficiency: 2

Impact

Overarching developmental changes (intended)

The objective adjusted as part of the EPE was to strengthen the target group's physical and psychological resilience, in particular that of women.

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

Indicator	Status PA (2018)	Target value at PA	Actual value at FI (2021)	Actual value at EPE (2023)
(1) Prevalence of diarrhoea in urban and suburban areas*	7,973 cases (2019)	The number of diarrhoea cases has remained constant or is decreasing since PA: $\leq 7,973$ cases	51,889 cases (2020)	No current value available

*Sources: Reporting by the project-executing agency, final inspection of the project. The values refer to the four beneficiary counties.

Contribution to overarching developmental changes (intended)

Component 1: WASH

Poor access to WASH services and commodities, combined with food insecurity, leads to a high prevalence of undernutrition and waterborne diseases. In a nationwide survey in 2020, around 74% of households reported that household members were affected by a waterborne¹⁹ or vector-borne disease (e.g., diarrhoea or malaria). The number of reported cases of acute watery diarrhoea and acute bloody diarrhoea increased drastically in 2020. By the end of October, 593,000 cases of acute watery diarrhoea were reported, an increase of 60% compared to all of 2019²⁰. A significant deterioration in the health situation across the country is therefore discernible. These results already indicate a similar trend in the intervention areas. A look at the prevalence of diarrhoea cases in urban and suburban areas (Indicator 1) between 2019 and 2020 also reveals a clear deterioration in the health situation. This deterioration could be due to the operating restrictions that came about due to COVID-19 (e.g., school closures). With regard to the FC-funded infrastructure, it is assumed that the financed measures improved the health situation at municipal level. Since the commissioned WASH infrastructure was checked for water quality (see Effectiveness), the EPE assumes a reduced risk of waterborne diseases.

The lack of gender-segregated WASH facilities and services in schools as well as the lack of access to suitable hygiene items are causing girls to leave school either temporarily or permanently. In a study in South Sudan (2020), 83% of schools surveyed indicated that girls often miss school during their period. There is a lack of menstrual hygiene materials as well as suitable facilities for changing, washing and disposing of the used materials. The increased absence from class also increases the risk of permanent school dropouts. The study also found that many girls suffer from cultural and traditional taboos as well as stigmatisation. These problems have a negative impact on girls' education and psychosocial well-being, leading to social isolation and health problems²¹. Consequently, the WASH component additionally contributed to reducing the risks of GBV.

¹⁹ A vector is a living organism that transmits pathogens from an infected animal to a human or another animal. Vectors are often arthropods, e.g., mosquitoes, ticks, flies, fleas and lice. Source: European Food Safety Authority (EFSA).

²⁰ South Sudan Humanitarian Needs Overview 2021, January 2021 (OCHA)

²¹ Source: The Situation of Children and Women in South Sudan, 2021 (Ministry of Finance and Planning, Ministry of Gender, Child and Social Welfare and UNICEF)

As a result, the project contributed to improving the target group's physical resilience. However, one point of criticism to be mentioned is that the provision of WASH consumables (e.g., soap) and the regular maintenance of the sanitary facilities in the partner country are not guaranteed. As a result, the effect is only guaranteed on a temporary basis and therefore limited.

Component 2: C4D

It can be assumed that the hygiene practices taught have made a contribution to cholera prevention in South Sudan. Cholera is a deadly disease, but it can be prevented if people have access to clean drinking water and adequate toilets and are informed about prevention options. Cholera is transmitted through contaminated food and water, and can spread quickly in overcrowded, unclean areas. South Sudan has experienced multiple cholera outbreaks since 2014, affecting particularly vulnerable populations living in camps for internally displaced people, informal urban settlements, cattle camps and rural areas as well as on islands and in communities along the Nile. From 2014 to 2017, South Sudan reported over 28,600 cholera cases, resulting in 644 deaths. From 2018 to 2021, no cholera cases were confirmed. In May 2022 a cholera outbreak was reported in Bentiu, Unity, after the National Public Health Laboratory received a positive culture²². Strict adherence to food, drinking water and personal hygiene practices are the most important preventive measures. However, such practices can only be applied if access to safe WASH infrastructure and clean drinking water is guaranteed. As a result of the COVID-19 pandemic, schools were closed for a period of one year from April 2020 and evening curfews were imposed, so that the target group's access to the FC-funded WASH infrastructure was limited. As a result, important hygiene practices could only be applied if households had their own safe WASH infrastructure. For the most part, this cannot be guaranteed in fragile contexts. The positive effects of the hygiene practices taught were therefore limited at least temporarily by external framework conditions.

The situation is similar regarding the effectiveness of the menstrual hygiene practices taught, which have generally made a positive contribution to the health situation of the target group. To manage their period effectively, girls and women need access to water, sanitation and hygiene (WASH), affordable and appropriate menstrual hygiene materials, information about best practices, and a supportive environment in which they can manage their period without shame or stigma. The extensive school closures during the COVID-19 pandemic also meant there were fewer safe spaces and opportunities in general for girls to help them manage their periods. However, the information provided as part of the C4D component addressed not only women and girls, but the population as a whole. UNICEF launched a "Back to Learning Campaign". It distributed 8,000 printed communication materials such as banners and posters with key messages on the issue of menstruation in strategic locations throughout South Sudan. The visibility of these materials was highly likely to have positive effects, with materials raising awareness about positive social norms and destigmatising menstruation being particularly impactful.

The C4D component of the project played a central role in **strengthening the target group's physical and psychological resilience**. However, the results were diminished for a time due to external circumstances.

Component 3: GBV

The training of service providers (e.g., healthcare providers, social workers and police officers) in the clinical handling of rape, case management and psychosocial support made an important contribution to improving the health situation of GBV survivors. The training courses on various topics improved the provision of care and the expertise at the contact points. All of these measures helped to produce trained staff who were able to provide assistance services for those affected. Since there is still a high prevalence of GBV in South Sudan, it can be assumed that the offer will be used at community level. The training of community focal points played a key role in supporting women and girls, particularly with regard to the restrictions associated with COVID-19 and the adjustment of implementation modalities, such as reducing the number of attendees of face-to-face activities and providing remote case management. The referral routes for GBV survivors were updated at the beginning of the COVID-19 pandemic to increase the number of contact points and important information provided about COVID-19. This information was then disseminated through awareness-raising measures and contact points in the communities and displayed in the WGFS.

In particular, the established WGFS provide longer-term access to important information, e.g., in the areas of reproductive health, childcare, GBV prevention as well as care for GBV survivors, and how to obtain access to

²²Source: WHO (As at 2022). <https://www.afro.who.int/countries/south-sudan/news/aiming-stop-risk-cholera-transmission-juba> (last accessed on 19 October 2023)

humanitarian services. WGFS can also play a key role in strengthening women's support networks in communities by strengthening social relations between women and facilitating women's access to other support services within the community. In addition, the awareness-raising measures carried out by the WGFS serve to raise awareness among communities of the problems faced by women and girls. WGFS are safe spaces that promote the protection and empowerment of women, thereby helping to reduce the risk of GBV. UNICEF supported 2,290 people (593 girls; 1,697 women) through WGFS with referrals to specialised and non-specialised services as needed. All women and girls who had suffered from GBV received medical care according to their needs, as well as specialised GBV case management and PSS. Women and girls continued to participate in psychosocial and leisure activities to help the healing process as well as build networks and support systems. **It is assumed that strengthening local structures for GBV prevention as well as care for GBV survivors contributed to improving the mental and physical resilience of the target group.**

South Sudan has a Gender Inequality Index (GII) of 0.587, ranking 150th out of 170 countries (as at 2021)²³. Traditional gender roles and social norms increase gender inequalities, particularly in relation to girls' education, limitation of their mobility, limited decision-making powers and lack of access to as well as control over resources. The evaluation of a UNICEF programme to change social norms in South Sudan (Communities Care) shows that harmful social norms related to GBV can be successfully reduced through specific measures²⁴. It promoted community-based awareness-raising campaigns regarding GBV (including at schools), lobbying at government level and the involvement of local justice. It is assumed that the evaluated project also **contributed to the dissemination of positive social norms and practices as well as the reduction of gender inequalities at community level** through the promotion of similar measures. However, it is important to not dismiss the fact that the situation of women and girls in South Sudan remains precarious and that a lasting change in social norms and practices can only result from a lasting social change.

Contribution to (unintended) overarching developmental changes

No overarching unintended developmental changes are known.

Summary of the rating:

Based on the available data and the plausibility considerations derived from it, it is assumed that the project made a positive contribution to achieving the impact objective at least at the level of the beneficiary communities. The COVID-19 pandemic led to school closures and restrictions on movement, which at least temporarily hindered the impact of the promoted components with regard to the health situation of the target group. The country-wide development of the prevalence of diarrhoea cases in recent years is negative overall. Without the FC project, the development would most likely have been even worse, and it is assumed that the individual measures at least stabilised the situation in the project regions. Due to the close interaction between the project components, the effects of the C4D individual measures are also limited by the fact that access to WASH infrastructure was limited for a time. It is plausible that the GBV component contributed to an improvement in the care situation for survivors of GBV through community-based approaches. UNICEF found ways to ensure that ongoing (remote) support was provided despite the COVID-19 restrictions. Overall, the overarching developmental impact is rated as moderately successful.

Impact: 3

Sustainability

Capacities of participants and stakeholders

At the time of the project appraisal, UNICEF was to promote the operation and maintenance of the water and sanitation infrastructure to be financed through training for mechanics and user groups (WASH committees). The aim was that tariffs and payments made by the user groups would cover the costs. However, medium-term covering of the costs for the maintenance of the systems was not considered to be guaranteed at the time. The political risks of this individual project were also classified as very high due to the very unstable and unpredictable political

²³ The GII measures gender inequalities (the loss of human development due to unequal performance between women and men) in three key areas – reproductive health, self-determination and the labour market.

²⁴ Source: End of project evaluation. A Gender Analysis/Assessment of a Gender Based Violence (GBV). Project of CARE supported by UNICEF in Twic East & Duk Counties of Jonglei State, South Sudan, 2018 (UNICEF, CARE)

development of South Sudan. The capacities of the parties involved and those affected are limited in the fragile country context. In the water and sanitation sector, the institutional framework conditions for sustainable development are lacking. There is a serious shortage of qualified staff and expertise at all levels, from water companies to the responsible administrations and ministries. In the administrative districts of Juba, Torit, Yambio and Yei, similar measures to expand the WASH infrastructure and improve local capacities were already financed from FC and TC funds before the implementation of the evaluated project. Nevertheless, it is unlikely that the WASH committees will have the necessary financial resources to carry out their activities independently in the long term. The same applies to the trained service providers in the areas of GBV and WGFS. As a result, the continued existence of the created structures remains heavily dependent on promotion by international donors. At the time of the ex post evaluation, a limited sustainability claim is therefore explicitly formulated, and the project's connectivity is evaluated instead.

Contribution to supporting sustainable capacities

Ensuring the sustainability of WASH facilities is a serious challenge in South Sudan. The lack of competent institutions, human resources and replacement parts have hampered the proper operation and maintenance of boreholes in recent years, resulting in a large number of boreholes becoming unusable after a short period of time. As part of the evaluated project, 145 manual pump mechanics (98 men; 47 women) were trained in cooperation with the state water authorities to facilitate the future operation and maintenance of boreholes. The County Water Department and trained mechanics received standard tool kits. In addition, 130 people (teachers as well as members of parent-teacher committees and school administrations) were trained in the areas of hygiene promotion and WASH facility management in the target schools in order to foster ownership on the part of the communities. The ownership generated as a result of this has the potential to strengthen the target group's will and maintain the positive effects of the project over time. However, at the time of the evaluation, it is unknown to what extent the trained persons can actually fulfil their tasks and whether the beneficiaries are still in the project areas. In this fragile context, refugee-related population movements also play a role. There are around 330,000 refugees and asylum seekers in South Sudan (mainly from Sudan). There are also two million people who have been internally displaced within the country as a result of conflicts, uncertainty and the effects of climate change. In addition, more than 500,000 South Sudanese refugees have returned to the country since the renewed peace agreement was signed in 2018²⁵. Therefore, it is possible that the beneficiary population was no longer in the project areas by the time of the EPE. Furthermore, due to the volatile security situation at the time of the evaluation, it was not possible to visit the project sites, so the current condition of the infrastructure is unknown.

Durability of impacts over time

Overall, the sustainability of the impacts over time depends on the promotion of similar components in the project regions. Due to the ongoing emergency situation among the population, the project-executing agency of the evaluated project continues to be actively involved in the implementation of projects as part of humanitarian action plans in coordination with the relevant clusters. In the current South Sudan WASH Cluster Strategy (2022–2023), GBV is identified as an important cross-cutting issue that is to be addressed by corresponding measures in the WASH sector²⁶. Support from German FC and TC in South Sudan continues unchanged through corresponding follow-up projects (see Coherence).

In addition, long-term developments at the level of government institutions are needed to define clear structures and responsibilities for the provision of basic services in various sectors. Regarding WASH, in recent years, German TC has supported the South Sudanese government in the development of the National Water Bill. The law, which was also meant to clarify the mandates and responsibilities of the various administrative levels and institutions of the water sector in South Sudan, was still in the process of departmental coordination and has not yet been adopted, even after several years of negotiations²⁷.

Summary of the rating:

Overall, there is a high dependency on grants from international donors, which help to provide basic services via non-governmental organisations (e.g., UN organisations and NGOs). The project's connectivity is ensured, as the

²⁵ Source: United Nations Commission on Refugees (UNHCR) 2023.

²⁶ Sectoral Objective 4 (Mitigate gender-based violence): deliver specific activities to mitigate GBV risk for users of WASH facilities and services, especially women and children.

²⁷ As at Q1 2021.

promoted components can be further expanded and improved through similar follow-up projects. This applies in part to the promoted infrastructure and predominantly to local self-help capacities. The connectivity is evaluated as satisfactory.

Sustainability: 3

Overall rating: 2

The project was characterised by its high relevance in the crisis context and promoted the strengthening of local self-help capacities via structural approaches (transitional development assistance). The project was in line with other German DC projects, and the selected executing agency was well integrated into the local coordination mechanisms (clusters) through its role as co-lead agency. According to the project-executing agency's reporting, the planned outputs were implemented in coordination with local authorities and the needs of the target group, with women and girls in particular benefiting from the gender-sensitive measures. Based on the output indicators approximated in this EPE for the evaluation of the outcome objective, the improvement of access to safe gender-sensitive water, hygiene and sanitation facilities at schools, health centres and public institutions is rated as successful. In addition, the strengthening of local structures for GBV prevention as well as care for GBV survivors is evaluated as successful. However, due to the security situation, it was not possible for KfW to visit the project sites by the time of the evaluation. The quality of the created outputs and the medium-term utilisation rate of the infrastructure cannot be assessed at the time of the evaluation. According to the information available, the measures were implemented in a timely manner despite a slight delay due to COVID-19. It is highly likely that the improved access to safe, gender-segregated WASH infrastructure and the hygiene practices taught (C4D) made a positive contribution to the resilience of the target group. In addition, the project made an important contribution to improving the target group's physical and psychological resilience through the components for GBV prevention as well as care for GBV survivors and the local structures created as a result. Overall, a contribution was made to strengthening the target group's resilience in a crisis context. Nevertheless, one point of criticism to note is that the analysis of the prevalence of diarrhoea cases in urban and suburban areas indicates a dramatic deterioration in the health situation of the target group. However, this deterioration is related to the temporary movement and contact restrictions as well as school closures due to the COVID-19 pandemic. The extent to which the infrastructure is used at the time of the EPE and actually has health effects cannot be quantified without an attribution gap due to the extremely limited data situation. Due to the fragile context in which the project was implemented, no evaluation of the project's sustainability is carried out. Given the difficult situation of the target group, an exit strategy would not be feasible at the present time. The connectivity of the project is evaluated as satisfactory. Overall, the results of the project still met the expectations set at the time of the project appraisal.

Contributions to the 2030 Agenda

Universal validity: The project contributed to the achievement of the 2030 Agenda goals, in particular SDG 3 (Good Health and Well-Being), SDG 5 (Gender Equality), SDG 6 (Clean Water and Sanitation) and SDG 10 (Reduced Inequalities).

Shared responsibility: The project was implemented via a multilateral UN organisation and was embedded in the South Sudanese cluster system. The clusters are groups of humanitarian organisations (both UN and non-UN organisations) operating in the main areas of humanitarian aid. Accountability was based on the United Nations' single audit principle.

Interaction of economic, environmental and social development: The project was financed with the budget funds from the structure-building transitional development assistance and, in accordance with the OECD definition, was meant to contribute to strengthening the target group's resilience capacities at three levels: 1) stabilisation capacity, 2) adaptation capacity and 3) transformation capacity. Therefore, the project aimed at sustainable development in the project areas in the medium term at least. Social development was promoted in particular by measures to promote positive social norms and eliminate taboos with regard to topics such as GBV and menstruation. The project resulted in isolated interactions between social and economic development, particularly in the context of training courses on micro-entrepreneurship for women. The ecological dimension of the project is reflected in the provision of clean water resources for the target group and the associated review of the water quality at the new or renovated boreholes. The quality of the water resources also played a central role in stabilising

the health situation of the target group and is at the same time a basic prerequisite for creating potential within social and economic development dimensions.

Inclusiveness/leave no one behind: By focusing on vulnerable population groups (especially women and girls affected by conflict), the project put into practice the guiding principle of the 2030 Agenda “Leave no one behind”.

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

The project had the following strengths and weaknesses in particular:

- The selection of UNICEF as the project-executing agency proved to be particularly successful due to the very good embedding in the national cluster system and the rapid adjustment of the implementation modalities in the course of the COVID-19 pandemic. Even when conditions became even more difficult, the planned components were implemented promptly.
- The cooperation with the Communities Care programme helped WGFS to reach significantly more women and girls than originally planned.
- The severely limited data situation (i.e., no clearly identifiable contact persons at the project-executing agency, no specific information on the project locations, no photographic documentation of the individual measures) makes it difficult to measure the impacts of the project. The outcome and impact objectives can only be evaluated on the basis of the achieved outputs and the plausibility considerations derived from them.

Conclusions and lessons learned:

- The selection of a project-executing agency with many years of experience in the fragile context and very good involvement in the local coordination mechanisms has proven to be successful in ensuring efficient implementation of measures under difficult conditions.
- The use of synergies with similar projects makes a positive contribution to target achievement and enables a larger target group to be reached.
- The implementation of a comprehensive third-party monitoring system has proven to be expedient for impact measurement in the light of staff turnover at the project-executing agency and the generally limited data situation in the fragile context.

Evaluation approach and methods

Methodology of the ex post evaluation

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:

Internal project documents, strategy papers, context, country and sector analyses, UNICEF reports and impact evaluations of the project-executing agency in the relevant sectors or in South Sudan.

data sources and analysis tools:

UNICEF monitoring and indicators, interviews with former and current project managers in the WASH and GBV sectors, remote sensing data and their visualisation with the QGIS analysis tool.

Interview partners:

Project-executing agency, KfW operational department, TC, implementation partner of the project-executing agency.

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 evaluation concept 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:

The inadequate data situation in the fragile context and difficulty in finding suitable interview partners (due to the high staff turnover at the project-executing agency, among other things). The evaluation of the project's success is mainly based on the existing project documentation and the project-executing agency's reporting.

Methods used to evaluate project success

A six-point scale is used to evaluate the project according to OECD DAC criteria. 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

Contact:

FC E
Evaluation department of KfW Development Bank
FZ-Evaluierung@kfw.de

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KfW Group
Palmengartenstrasse 5–9
60325 Frankfurt am Main, Germany

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Target system and indicators annex

Project objective at outcome level		Rating of appropriateness (former and current view)			
During project appraisal: (1) to reduce the impact of water-related diseases on the population of the programme cities, especially children, by providing safe and reliable water supply in public facilities and implementing gender-sensitive hygiene and sanitation practices; and (2) to reduce the risk of gender-based violence by providing safe and gender-specific water, sanitation and hygiene facilities for schools, health centres and public institutions. The programme also includes gender-based violence prevention measures and aftercare.		From today's perspective, the project purpose at outcome level no longer corresponds to the current standard of objective setting, as the objective formulation is more of a description of a results chain			
During EPE (if target modified): Improving access to safe, gender-sensitive water, hygiene and sanitation facilities at schools, health centres and public institutions, as well as strengthening local structures for GBV prevention as well as care for GBV survivors.					
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 (2018)	Status at final inspection (2021)	Optional: Status at EPE (2023)
Indicator 1 (PA): Number of people, especially children, with access to a safe, gender-sensitive and custom-built water and sanitation supply in schools, health centres and community facilities in Yei, Yambio, Torit and Juba	Although the indicator measures the outputs achieved, it does not provide information on whether the new or rehabilitated infrastructure is actually being used. Due to the limited data available, the indicator is nevertheless retained as a proxy indicator at outcome level .	PA target level: 30,000 people	Baseline: 0	39,394 people (achieved)	See FI status
Indicator 2 (PA): Number of schools adopting positive behavioural practices such as hand washing, safe storage of drinking water and	The formulation of the indicator is generally appropriate for measuring the impact at outcome level. However, the data collected only refers to the number of schools that have promoted positive behaviour and the creation of gender-separated toilets was promoted. Therefore, it is actually an output indicator. Due to the limited data	PA target level: 48 schools	Baseline: 6	42 schools (not achieved)	See FI status

appropriate use of gender-specific toilets	available, the indicator is nevertheless retained as a proxy indicator at outcome level .				
Indicator 3 (PA): Percentage of community members, especially women and girls, who feel safe when using WASH, education or health services	The indicator provides information on the perceived risk when using WASH infrastructure and would generally be suitable as an indicator at outcome level. Unfortunately, the indicator probably cannot be used due to the missing data (see FI status).	PA target level: 70%	Baseline: not available	N/A: The planned survey could not be carried out due to the COVID-19 pandemic.	See FI status
NEW: Proxy indicator 4 (EPE): Number of UNICEF partners and community members trained with regard to GBV	The indicator is meant to serve as a proxy for strengthening local capacities for the prevention of GBV.	Target level (according to UNICEF final report): 300	Baseline: 242	/	A total of 394 people (232 women, 162 men) were trained in reducing the risk of violence against women according to the IASC guidelines.
NEW: Proxy indicator 5 (EPE): Number of local service providers with GBV-related training	The indicator is intended to serve as a proxy for strengthening local capacities with regard to the aftercare of GBV.	Target level (according to UNICEF final report): 100	Baseline: 30	/	A total of 130 people received training with regard to GBV and clinical practices when dealing with rape, case management and psychosocial support.

Project objective at impact level	Rating of appropriateness (former and current view)
During project appraisal: The aim of the regional approach to transitional development assistance for strengthening resilience in the Horn of Africa is to stabilise the necessary livelihoods of the populations in a need-based and context-oriented manner as well as strengthen their crisis resilience. At FI: at overarching (impact) level, UNICEF aims to reduce waterborne	The formulation of a dual objective must be reviewed for all projects in a fragile context. This means that it is necessary to examine whether the project had a peace-building or crisis-mitigating effect. Due to the still unstable political situation, a dual objective seems too ambitious for the evaluated project. The evaluation therefore refrains from formulating a dual objective. At the time of the PP, neither an impact objective nor indicators at impact level were defined for this project. Due to the fact that the amount of data available is very limited, the

diseases, gender inequalities and discriminatory norms and taboos with gender-specific WASH facilities.		assessment of the effects at the time of the evaluation is primarily based on plausibility considerations.			
During EPE (if target modified): strengthening the physical and psychological resilience of the target group, in particular women.					
Indicator	Rating of appropriateness (for example, regarding impact level, accuracy of fit, target level, smart criteria)	Target level PA / EPE (new)	PA status (2018)	Status at final inspection (2021)	Status at EPE (2023)
Indicator 1 (PA)	/				
Indicator 2 (PA)	/				
NEW: Proxy indicator 1: Prevalence of diarrhoea in urban and suburban areas	The indicator was reported by UNICEF and reflects the health results at impact level. UNICEF's formulated objective was to reduce diarrhoea by 25% compared to the baseline data (see Annex 1 in the FI). From today's perspective, this seems too ambitious, which is why the target level will be reformulated at the time of the EPE. Data source: WHO / Ministry of Health (MOH) weekly epidemiological report Data for 2017 and 2018 for the five suburban target zones is not available. Data for 2021 was prepared at the time of the project appraisal. In 2020, the number of diarrhoea cases was 51,889. This increase may be due to the difficult economic situation as a result of the pandemic and to the fact that some facilities could not be operated sustainably.	PA: 25% reduction from baseline. Adjusted at EPE: The number of diarrhoea cases has remained constant or has been declining since PA	7,973 cases (2019)	51,889 (2020)	/

Risk analysis annex

All risks should be included in the following table as described above:

Risk	Relevant OECD-DAC criterion
Environmental and social risks	Impact
Volatile security situation	Effectiveness, impact, sustainability
Delays and sustainability	Efficiency, sustainability
Political risks and ethnic conflicts	Impact

The risks mentioned in the financing proposal have largely not materialised. However, the global COVID-19 pandemic that also occurred in South Sudan from April 2020 delayed the implementation of training courses and surveys, as well as the finalisation of technical designs and construction work.

Project measures and their results annex

Overview of project measures by component:

Component 1: WASH			
Output No.	Planned measure (target) Project proposal (11/2018)	Results (actual) at the end of the project (03/2021)	Status / Adjustments
1	Construction/rehabilitation of water supply systems (boreholes) in communities, schools and health centers		
	- 6 new boreholes for smaller decentralized distribution networks - New construction or rehabilitation of 30 boreholes with hand pumps	- Construction of 4 new boreholes (3 at schools, 1 at WGFS) - Rehabilitation of 36 boreholes (11 in communities, 2 in health centers, 23 at schools)	Partially fulfilled.
	Sanitary facilities		
	- Construction/ rehabilitation of latrine blocks at up to 48 schools and health centers	- Rehabilitation of 30 latrine blocks (29 at schools, 1 at a health center) - Construction of 12 new latrine blocks (11 at schools, 1 at a health center)	Fulfilled.
	- Implementation of OLTS in communities around the project schools	- Sensitization of 52,946 people - New construction of 2,063 household latrines	Fulfilled.
	- Training measures for 40 community-based WASH committees	- Training measures for 40 WASH committees - Training and tools for 145 hand pump mechanics	Fulfilled.

Component 2: Communication for development and GBV prevention			
Output No.	Planned measure (target) Project proposal (11/2018)	Results (actual) at the end of the project (03/2021)	Status / Adjustments
2	Education and awareness-raising campaigns on menstrual hygiene, health protection and WASH		
	- Mobilization campaigns	- Mobilization campaigns for 37,893 households on menstrual hygiene - WASH awareness campaigns for 176,312 households	Fulfilled.
	- Establishment of 48 hygiene and health clubs at schools	- 77 Hygiene and health clubs	Fulfilled.
	- Training for 96 community helpers	- Training for 110 community helpers	Fulfilled.
	- KAP study conducted	- Nationwide KAP study conducted	Fulfilled.

3	GBV Prevention and risk minimization		
	- 24 Safety audits (surveys on the safety perception of women and girls)	- 20 Safety audits	Not fulfilled.
	- Training for 300 community members and implementation partners	- 394 Trainings	Fulfilled.
	- Raising awareness of the causes, risks and consequences of GBV for 30,000 people	- Awareness-raising and prevention messages for 54,677 people	Fulfilled.

Component 3: GBV			
Output No.	Planned measure (target) Project proposal (11/2018)	Results (actual) at the end of the project (03/2021)	Status / Adjustments
4	Aftercare for GBV through improved services		
	- Training of relevant service providers	- Training for a total of 130 employees of relevant service providers, including refresher training and integration of COVID-19 education - Training for a total of 449 community workers and members of local community networks on GBV, psychological support and case management	Fulfilled. Complementary COVID 19 Clarification.
	- Creation of 4 WGFS	- Construction of 3 new and renovation of one WGFS. Support for the provision of services for a total of 6 WGFS in the project districts.	Fulfilled.
	- Training programs for affected women and girls	- Education programs for 8,852 women and girls in WGFS.	Fulfilled.
5	Improved living conditions for vulnerable women and children		
	- Training courses for 200 female and 50 male participants (small entrepreneurship)	- Small business training for 115 women and girls incl. Start Up Kits.	Mostly fulfilled.
	- Courses on the production of sanitary towels for women and girls	- Life skills courses for 1,706 people.	Fulfilled.

Recommendations for operation annex

No recommendations for operation were formulated at the time of the FI.

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)	Rating	Weighting (- / o / +)	Rationale for weighting
Evaluation dimension: Policy and priority focus			2	o	/
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 did the project's objectives correspond to the German Federal Ministry for Economic Cooperation and Development's (BMZ) priorities in implementing transitional development assistance? To what extent was the project aligned with the country-specific priorities of the UN organisations active in the partner country?	Interviews with the operational department; project documentation German Federal Ministry for Economic Cooperation and Development (BMZ) Guidelines "Preventing Crises, Managing Conflicts, Building Peace" (2017); Practical Guidelines "Crisis Prevention, Conflict Management and Peacebuilding in a Joint Ministerial Approach" (2019); BMZ Strategy "Development for Peace and Security"; Follow-up Strategy for the Core Topic "Peace and Social Cohesion".			
Do the objectives of the programme consider 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 was the political conflict taken into account in the project design, and what were the consequences for implementation? To what extent was an analysis of gender power relations carried out in the beneficiary communities at the time of project planning?	Interviews with the operational department; project documentation			
Evaluation dimension: Focus on needs and capacities of participants and stakeholders			2	o	/

Are the programme objectives focused on the developmental needs and capacities of the target group? Was the core problem identified correctly?	How was it ensured that the promoted measures met the needs of the target group in the crisis context? Has the core problem been correctly identified at <i>regional</i> and <i>country</i> level?	Project documentation; plausibility considerations			
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?	How was the target group identified, and to what extent were differences between population groups within the target group (e.g. age, health, disabilities, financial situation) taken into account during project planning (e.g. selection and scope of the promoted measures)? How was the do no harm principle conceptually anchored in project planning? How was the do no harm principle conceptually anchored in target group surveys (e.g. KAP study)?	Interviews with the project-executing agency and the operational department			
Would the programme (from an ex post perspective) have had other significant gender impact potentials if the strategy had been designed differently? (FC-E-specific question)	Was the relationship between the selected WASH measures and GBV components fully illustrated? What aspects were missing or were insufficiently addressed?	Plausibility considerations			
Evaluation dimension: Appropriateness of design			2	0	/
Was the design of the programme appropriate and realistic (technically, organisationally and financially) and in principle suitable for contributing to solving the core problem?	To what extent was the programme's design generally suitable for helping to solve the core problem at <i>regional</i> level (low level of development, severe impact of long-lasting and recurring crises, fragile state institutions)? To what extent was the programme's design generally suitable for improving the target group's deteriorated physical and	Plausibility considerations			

	mental health situation (<i>country-specific core problem</i>)?	
Is the programme design sufficiently precise and plausible (transparency and verifiability of the target system and the underlying impact assumptions)?	Were the planned outputs generally suitable for achieving the intended effects at outcome/impact level? To what extent is the verifiability of the target system influenced by the limited data situation in the fragile context? To what extent were allocation gaps taken into account when defining the target system?	Plausibility considerations
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)	See visual Theory of Change.	The presented results chain is based on the financing proposal: Annex 1 (results matrix) and Annex 4 (analysis of the situation on site) as well as plausibility considerations.
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 did the project contribute to achieving the 2030 Agenda goals?	Internet research; plausibility considerations Significance of gender equality in achieving the SDGs: https://www.bundesregierung.de/breg-de/themen/nachhaltigkeitspolitik/rechtliche-gleichstellung-841120
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	To what extent did the WASH and GBV components of the project aim to contribute to achieving the regional approach's objective for transitional development assistance to strengthen resilience in the	Project documentation; German Federal Ministry for Economic Cooperation and Development (BMZ) strategy documents; plausibility considerations

impact level of the FC module meaningfully linked to the DC programme (e.g. outcome impact or output outcome)? (FC-E-specific question)	Horn of Africa? Were the underlying assumptions plausible?				
Evaluation dimension: Feedback on changes/adaptability			2	0	/
Has the programme been adapted in the course of its implementation due to changed framework conditions (risks and potential)?	To what extent was it planned or possible to adapt planned measures due to the volatile security situation in the partner country? How was the limited accessibility of some project areas dealt with during implementation? To what extent did unforeseen risks arise for the target group during implementation? How was this dealt with at project level?	Project documentation; interviews with the project-executing agency and the operational department			

Coherence

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Rating	Weighting (- / 0 / +)	Rationale for weighting
Evaluation dimension: Internal coherence (division of tasks and synergies within German development cooperation):			2	0	/
To what extent is the programme designed in a complementary and collaborative manner within the German development cooperation	To what extent did the project meet the definition of structure-building transitional development assistance? To what extent did the project fit meaningfully into the four fields of	German Federal Ministry for Economic Cooperation and Development (BMZ) strategy documents: Strategy on Transitional Development Assistance (bmz.de), plausibility considerations,			

(e.g. integration into DC programme, country/sector strategy)?	action of the Federal Ministry for Economic Cooperation and Development's (BMZ) transitional development assistance? → 1) Food security, 2) rebuilding basic infrastructure and services, 3) disaster risk management, 4) peaceful and inclusive coexistence	interviews with the operational department and, if necessary, with TC representatives			
Do the instruments of German development cooperation dovetail in a conceptually meaningful way, and are synergies put to use?	To what extent could synergy effects be exploited through the parallel implementation of transitional development assistance projects in South Sudan? To what extent did German TC promote the strengthening of resilience in the region / partner country during the implementation period? To what extent did the FC project complement TC activities?	Project documentation, interviews with the operational department			
Is the programme consistent with international norms and standards to which German development cooperation is committed (e.g. human rights, Paris Climate Agreement, etc.)?	To what extent was the project in line with the German Federal Ministry for Economic Cooperation and Development (BMZ) human rights concept? To what extent did the project support the coherence and complementarity between humanitarian aid and development cooperation, which Germany committed to as part of the first World Humanitarian Summit (2016)?	Plausibility considerations, German Federal Ministry for Economic Cooperation and Development (BMZ) strategy documents, internet research			
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 did the project support the strengthening of existing local administrative structures? To what extent did the project contribute to avoiding parallel structures in the supply of basic services to the population?	Interviews with the operational department and the project-executing agency
Is the design of the programme and its implementation coordinated with the activities of other donors?	Which other actors were active in the partner country at the time of project planning and implementation? How was it ensured that the FC project was implemented in a complementary manner to the activities of other donors and organisations? To what extent was an exchange of knowledge planned between the project-executing agency and other organisations active in the project country? How could the cluster groups contribute to better coordination between the actors?	Interviews with the project-executing agency, internet research
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?	To what extent did the project use the project-executing agency's existing systems and structures?	Interviews with the operational department and the project-executing agency
Are common systems (of partners/other donors/international organisations) used for monitoring/evaluation, learning and accountability?	/	The question is already covered one line above.

Effectiveness

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Rating	Weighting (- / 0 / +)	Rationale for weighting
Evaluation dimension: Achievement of (intended) targets			3	0	/
Were the (if necessary, adjusted) objectives of the programme (incl. capacity development measures) achieved? Table of indicators: Comparison of actual/target	To what extent has access to safe and reliable water and sanitation improved? To what extent has this been achieved in a gender-sensitive manner? How has the dissemination of gender-sensitive hygiene and sanitary practices been achieved? To what extent can local structures for the prevention and aftercare of gender-based violence be expected to be strengthened?	Interviews with the project-executing agency, plausibility considerations based on the indicators			
Evaluation dimension: Contribution to achieving objectives:			2	0	/
To what extent were the outputs of the programme delivered as planned (or adapted to new developments)? (<i>Learning/help question</i>)	To what extent were the outputs delivered according to the original design in the financing proposal? What adjustments were made and were these understandable from today's perspective? Has the planned number of beneficiaries been reached?	Project documentation			
Are the outputs provided and the capacities created used?	To what extent are the constructed or rehabilitated boreholes utilised with hand pumps? To what extent are the built or rehabilitated latrine blocks used at schools and healthcare facilities? Is the gender separation observed by users?	Interviews with the project-executing agency			

	Are the hygiene and health clubs established at schools still active? To what extent are the created Women and Girls Friendly Spaces (WGFS) still active? How did the beneficiary women and girls use the knowledge from the small business training courses to pursue income-generating activities?	
To what extent is equal access to the outputs provided and the capacities created guaranteed (e.g. non-discriminatory, physically accessible, financially affordable, qualitatively, socially and culturally acceptable)?	How does access to the promoted WASH infrastructure among the target group differ depending on age, health, disabilities and ethnic/religious affiliation? To what extent does the promoted WASH infrastructure have adequate drinking water quality at all project locations?	Interviews with the project-executing agency
To what extent did the programme contribute to achieving the objectives?	To what extent did the WASH or GBV components of the project contribute to achieving the outcome objectives?	Plausibility considerations
To what extent did the programme contribute to achieving the objectives at the level of the intended beneficiaries?	/	Already covered by the first question in this section.
Did the programme contribute to the achievement of objectives at the level of the particularly disadvantaged or vulnerable groups involved and affected (potential differentiation according to age, income, gender, ethnicity, etc.)?	What contribution did the project make to enabling particularly vulnerable groups such as IDPs to have improved access to WASH services?	Interviews with the 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)	Did the project fully achieve its gender impact potential? Were there any measures that could have been geared even more towards their gender impact potential? To what extent was the empowerment of the beneficiary women promoted?	Plausibility considerations			
Which project-internal factors (technical, organisational or financial) were decisive for the achievement or non-achievement of the intended objectives of the programme? (<i>Learning/help question</i>)	According to which criteria were the individual measures selected and how did they contribute to achieving the objectives at outcome level?	Project documentation (see criteria in DC programme proposal "Regional approach"), plausibility considerations			
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)? (<i>Learning/help question</i>)	How did the fragile security situation in South Sudan influence the implementation of the promoted individual measures?	Interviews with the project-executing agency and the operational department			
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 should UNICEF's administrative capacity be assessed? → e.g. guidance of UNICEF staff on site and collaboration with the cooperation partners To what extent was the contact between UNICEF and the target group sensitive to the possibility of conflict (e.g. during the implementation of training or study implementation / needs analysis)? Was there a project-specific complaint mechanism for the target group?	Interviews with the operational department; UNICEF documentation (especially Humanitarian Response Plan (HRP) and interviews with the implementation partners listed there)			

How is the quality of the management, implementation and participation in the programme by the partners/sponsors evaluated?	/	As the projects were implemented on a non-governmental basis, the quality of the implementation is primarily assessed on the basis of UNICEF's output (see one line above).			
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)	To what extent were the performed studies (e.g., KAP studies; safety audits and follow-up monitoring) used to record gender results/risks and implement appropriate measures?	Interviews with the project-executing agency			
Evaluation dimension: Unintended effects (positive or negative)			2	0	/
Can unintended positive/negative direct effects (social, economic, environmental and, where applicable, those affecting vulnerable groups) be seen (or are they foreseeable)?	To what extent did conflicts arise between population groups due to the provision of the promoted infrastructure or the GBV component?	Project documentation, interviews with the project-executing agency			
What potential/risks arise from the positive/negative unintended effects and how should they be evaluated?	To what extent did potential conflicts between population groups lead to security risks for certain population groups or contributed to their further marginalisation (e.g., women)?	Interviews with the project-executing agency			
How did the programme respond to the potential/risks of the positive/negative unintended effects?	Were the measures listed in the environmental and social management plan suitable for preventing adverse unintended impacts, reducing them to an acceptable level or compensating for them? How was it ensured that all relevant international environmental, social,	Interviews with the project-executing agency Relevant (international) standards include: KfW Sustainability Guideline; German Federal Ministry for Economic Cooperation and Development (BMZ) Human Rights Concept; World Bank Environmental and Social Standards; World Bank Environmental, Health and Safety (EHS) Guidelines; International			

	health, safety and labour standards were complied with during implementation? What concrete measures were implemented?	Labour Organisation (ILO) core labour standards; environmental and social standards of the project country, among others.
Other evaluation question 1	To what extent were there positive unintended effects for the beneficiary communities during the implementation phase?	Plausibility considerations
Other evaluation question 2	What potential arose due to the possible, unintended positive effects?	Plausibility considerations

Efficiency

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Rating	Weighting (- / o / +)	Rationale for weighting
Evaluation dimension: Production efficiency			2	o	/
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 is the FC financing contribution distributed among the selected measures in the areas of WASH, Communication for Development (C4D) and GBV? Is the distribution of inputs also understandable from today's perspective?	Project documentation			
To what extent were the inputs of the programme used sparingly in relation to the outputs produced (products, capital goods and	To what extent were the costs for building and rehabilitating simple WASH infrastructure (e.g., latrines, boreholes	Plausibility considerations based on the results of other EPEs			

services) (if possible in a comparison with data from other evaluations of a region, sector, etc.)? For example, comparison of specific costs.	and hand pumps) comparable to those of similar projects in the country region? To what extent were the costs of training with regard to hygiene and sanitation practices comparable with those of similar projects in the project region? To what extent were the costs of the GBV prevention and care component comparable with those of similar projects in the country region?			
If necessary, as a complementary perspective: To what extent could the outputs of the programme have been increased by an alternative use of inputs (if possible in a comparison with data from other evaluations of a region, sector, etc.)?	To what extent could the selection of a different project-executing agency have contributed to increased outputs?	Plausibility considerations based on the results of other EPEs		
Were the outputs produced on time and within the planned period?	Were the planned hygiene and awareness-raising campaigns as well as training courses implemented as planned? To what extent did the global COVID-19 pandemic influence the project's implementation (in terms of space/time)? Was the promoted WASH infrastructure created within the planned period?	Project documentation		
Were the coordination and management costs reasonable (e.g. implementation consultant's cost component)? (FC-E-specific question)	Were the high indirect project costs and administrative expenses of the project-executing agency appropriate taking into account the security situation?	Plausibility considerations		
Evaluation dimension: Allocation efficiency			2	0 /

In what other ways and at what costs could the effects achieved (outcome/impact) have been attained? (<i>Learning/help question</i>)	In what other ways could FC have contributed to mitigating the consequences of waterborne diseases in South Sudan? (Outcome) In what other ways could FC have contributed to reducing the risks and consequences of GBV in South Sudan? (Outcome) In what other ways could an FC have contributed to stabilising necessary livelihoods and strengthening crisis resilience? (Impact)	Plausibility considerations based on internet research (i.e. search for similar FC projects or the projects of other donors)
To what extent could the effects achieved have been attained in a more cost-effective manner, compared with an alternatively designed programme?	To what extent would a more cost-effective alternative to implementing the promoted measures have been possible in the context of the crisis?	Plausibility considerations based on internet research (i.e. search for similar FC projects or the projects of other donors)
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?	To what extent could the selection of a different project-executing agency have contributed to increasing the positive effects of the project? To what extent could the selection of other individual measures have contributed to increasing the positive effects of the project?	Interviews with the operational department, plausibility considerations

Impact

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Rating	Weighting (- / o / +)	Rationale for weighting
Evaluation dimension: Overarching developmental changes (intended)			4	–	The situation of the population in South Sudan

				has not improved since the project appraisal. The selected indicator (prevalence of diarrhoea cases in urban and peri-urban areas) indicates a deterioration in the health situation between 2019 and 2020. However, since this data does not exclusively reflect the situation in the project areas, the rating of this evaluation dimension is barely incorporated into the overall evaluation of impacts.
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.)	To what extent can a stabilisation of livelihoods and a strengthening of the resilience of the population in South Sudan be observed in the period 2018–2021?	Internet research (secondary data)		
Is it possible to identify overarching developmental changes (social, economic, environmental and their interactions) at the level of the intended beneficiaries? (Or if	/	Already covered by the question one line further up.		

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)	To what extent can a stabilisation of livelihoods and a strengthening of the resilience of women/girls in South Sudan be observed in the period 2018–2021?	Internet research (secondary data and reports), e.g.: https://www.UNICEF.org/southsudan/media/8191/file/UNICEF-South-Sudan-Situation-Analysis-2021.pdf		
Evaluation dimension: Contribution to overarching developmental changes (intended)			3	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 could the project plausibly contribute to stabilising livelihoods and strengthening the resilience of the population in South Sudan?	Plausibility considerations		
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 at impact level? (e.g. drinking water supply/health effects)	To what extent are positive health effects measurable that can be attributed to the project? To what extent can a positive change in social norms and practices be demonstrated and attributed to the project? To what extent is there an allocation gap between the measures and the impacts?	Internet research (secondary data), plausibility considerations		
Did the programme contribute to achieving its (possibly adjusted) developmental objectives at the level of the intended beneficiaries?	To what extent could the project plausibly contribute to stabilising the livelihoods of the target group and strengthening its resilience?	Plausibility considerations		

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 meant to contribute?	To what extent could the project plausibly contribute to stabilising the livelihoods of the beneficiary women/girls and to strengthening their resilience? To what extent do the results achieved differ among older women, women with disabilities and members of ethnic/religious minorities?	Interviews with the project-executing agency, plausibility considerations, other UNICEF documents (e.g. safety audits)
Which project-internal factors (technical, organisational or financial) were decisive for the achievement or non-achievement of the intended developmental objectives of the programme? (<i>Learning/help question</i>)	To what extent did the criteria for selecting the individual projects contribute to improving the livelihoods of the target group (e.g. do no harm)?	Project documentation, plausibility considerations
Which external factors were decisive for the achievement or non-achievement of the intended developmental objectives of the programme? (<i>Learning/help question</i>)	To what extent did the involvement of other actors in the area of DC or humanitarian aid (e.g. local/international organisations) help to strengthen the resilience of the target group? In what ways was the target group's acceptance of the project important for achieving the intended development policy objectives? In what ways was the quality of the water resources used important for achieving the intended development policy objectives? To what extent were water samples available in the project areas?	Interviews with the project-executing agency, plausibility considerations, internet research
Does the project have a broad-based impact? - To what extent has the programme led to structural or institutional changes (e.g. in	To what extent did the project contribute to structural changes? How did these changes increase the transformation potential?	Interviews with the operational department, project documentation, plausibility considerations

organisations, systems and regulations)? (Structure formation) - Was the programme exemplary and/or broadly effective and is it reproducible? (Model character)	How were important lessons learned developed as part of the project and used for further projects in South Sudan?				
How would the development have gone without the programme? (Learning and help question)	How would the development of the target group's health situation have gone without the project? How would development regarding GBV have gone without the project?	Plausibility considerations			
Evaluation dimension: Contribution to (unintended) overarching developmental changes			2	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 did the security situation in South Sudan develop over the course of the project and, if applicable, how did it affect the target group's living conditions?	Project documentation, plausibility considerations based on the available secondary data			
Did the programme noticeably or foreseeably contribute to unintended (positive and/or negative) overarching developmental impacts?	How did the project directly or indirectly contribute to exacerbating already existing lines of conflict? Did the project's implementation create new lines of conflict?	Interviews with the project-executing agency, plausibility considerations			
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	In what ways did the project create unintended, positive/negative changes for older women, women with disabilities and members of ethnic/religious minorities? To what extent has the project led to further stigmatisation of the target group?	Interviews with the project-executing agency, plausibility considerations			

harm, e.g. no strengthening of inequality (gender/ethnicity))?		
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Sustainability

Evaluation question	Specification of the question for the present project	Data source (or rationale if the question is not relevant/applicable)	Rating	Weighting (- / o / +)	Rationale for weighting
Evaluation dimension: Capacities of participants and stakeholders			Not relevant for evaluation, as the project has no influence on the (basic) capacities of the parties involved and those affected		/
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)?	To what extent is the target group able to carry out the maintenance and repair of the new or rehabilitated infrastructure after the end of the projects? Are the technical, staffing and financial capacities sufficient? What type of connectivity can be assumed on the part of the executing agency?	Interviews with the project-executing agency			

To what extent do the target group, executing agencies and partners demonstrate resilience to future risks that could jeopardise the impact of the programme?	To what extent is UNICEF able to mitigate possible risks to the medium-term stabilisation of livelihoods and the population's resilience?	Plausibility considerations			
Evaluation dimension: Contribution to supporting sustainable capacities:			2	o	/
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?	How did the project contribute to supporting the capacities for medium-term operation and maintenance of the financed infrastructure?	Project documentation; interviews with the operational department and the project-executing agency			
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?	How do the self-help capacities strengthened as part of the project contribute to ensuring that the project continues to produce results over the medium term?	Plausibility considerations			
Did the programme contribute to strengthening the resilience of particularly disadvantaged groups to risks that could jeopardise the effects of the programme?	/	The question is already covered one line above.			
Evaluation dimension: Durability of impacts over time			3	o	/
How stable is the context of the programme (e.g. social justice, economic performance, political	/	Is already addressed by the two questions below.			

stability, environmental balance)? (<i>Learning/help question</i>)		
To what extent is the durability of the positive effects of the programme influenced by the context? (<i>Learning/help question</i>)	To what extent does the crisis context influence the sustainability of the effects achieved?	Interviews with the project-executing agency, plausibility considerations
To what extent are the positive and, where applicable, the negative effects of the programme likely to be long-lasting?	To what extent did the project's structural development assistance help produce medium-term results in a crisis context? Which of the effects achieved are temporary and which are permanent?	Plausibility considerations
Other evaluation question 1	To what extent can the implemented positive social norms and practices with regard to gender can be seen as continuing over the long term?	Interviews with the project-executing agency, plausibility considerations