



**Third-Party Monitoring and Evaluation of Projects
in South Sudan and Sudan
Final Report**

IC Net Limited

Executive Summary

Japan Platform (JPF) has evaluated its response to the South Sudan humanitarian crisis and the third-party project monitoring and evaluation (TPM) of the two ongoing or recently completed projects under the South Sudan Refugees Emergency Assistance Program. JPF intends to use the evaluation's results to improve current and future projects. TPM targets two projects. The first is the "Prevention and Mitigation of the Conflict and Violence at IDP camps, Juba, Central Equatoria State" project implemented by the Japan Center for Conflict Prevention (hereafter referred to as the JCCP Project¹) in South Sudan. The second is the "Improving Sanitation and Health Facilities at Refugee Camps and Host Community in White Nile, Sudan" project implemented by Plan International Japan (hereafter referred to as the PLAN Project) in Sudan.

To achieve TPM's purpose, it assessed two different aspects of the projects: (1) their achievement and implementation processes, and (2) evaluation of the projects based on evaluation criteria. First, it assessed the projects' achievements by comparing their actual inputs, outputs, and project purposes with those specified in their project plans in the Project Design Matrix (PDM). Second, it reviewed the projects' implementation processes to determine if they carried out their activities according to the schedules delineated in the projects' plans. After assessing their achievements, the IC Net Limited (hereinafter IC Net) team analyzed the projects based on their respective evaluation criteria. In consideration of the evaluation's purpose, it selected seven criteria: 1) relevance/appropriateness, 2) connectedness/sustainability, 3) efficiency, 4) effectiveness, 5) coordination, 6) impact, and 7) adherence to the CHS/Sphere Standards. It conducted data collection using the following methods: (1) document reviews, (2) key informant interviews (KIIs) in Japan, and (3) field surveys by local consultants in each project. The COVID-19 pandemic did influence the data collection.

The JCCP project endeavored to develop a community-based system that provides support to victims, to solve issues related to SGBV and invisible violence (component 1), and to detect signs of potential local conflicts and violence (component 2) in the Gumbo and Mahad camps. Based on the achievement of the indicators, it is judged that the project achieved the Project Purpose by the end of the project period. Both component 1 and component 2 developed a community base system where leaders, YLs, and community workers contributed to the communities based on their roles in Mahad and Gumbo. Regarding the Way Station, although the training was conducted just two months before the end of the project, it also showed quantitative achievement. The project is relevant, because it is consistent with the development policies and development needs of South Sudan, JPF's policy, and the target areas' needs. There was high connectedness, as the project's design was based on the achievements of the previous project, given the continued great need for long-term support against SGBV and conflicts. However, the evaluators have observed major problems regarding the institutional, technical, and financial aspects of sustainability. Therefore, the project's sustainability seems limited. A strong monitoring mechanism managed the project efficiently, although the expenditure rate of its budget for direct project activities was low. With regard to achieving its purpose, the project was effectively implemented. Following the principles of the cluster working group allowed project activities to coordinate appropriately with other institutions. The project had both direct and indirect positive impacts, such as improving the relationships among tribes, and between the IDPs and the host communities. The project did not have any negative impacts. The project was consistent with CHS and Sphere standards, and took into account minimum mental health standards.

The PLAN project achieves its purposes by accomplishing its outputs, such as providing household latrines to improve the number of latrines per capita in the targeted IDP camps. In addition, the project enhanced sanitation awareness through hygiene campaigns and by providing sanitary tools for latrine maintenance. The project also

¹ Japan Center for Conflict Prevention (JCCP) is renamed to Reach Alternatives (REALs) on 25th March 2020.

improved people's access to health facilities by establishing semi-permanent health clinics, training 30 new community health workers (CHWs) in the target camps, and installing medical equipment in Kosti's District Hospital. The project should achieve its overall goal, which is to contribute to the Regional Refugee Response Plan (RRRP). The project's activities are consistent with this plan and it will maintain its outputs, although there are some concerns about its sustainability. The project is relevant to its target's needs, and its approach is appropriate to the target's situation. The project has taken actions to cope with medium- and long-term issues by being concerned with the activities of cluster members. It has also attempted to secure the sustainability of its intervention; however, the financial sustainability of the latrines and CHWs is unclear. The project was required to change its management system due to unexpected security issues. However, it is efficiently implemented via a partnership with local NGOs. The project coped with unexpected security issues and effectively achieved its goals. Coordination through cluster meetings with other organizations, including UNHCR, SMOH, and local authorities, helped achieve those goals. The project had positive impacts on sanitation and health conditions at the camps, and contributed to gender equality at a grassroots level. The project has committed to CHS in planning and implementing its activities, and to Sphere Standards related to WASH, safe settlement, and health.

There were some lessons learned from the implementation and management of the target projects. Regarding project funds, some flexibility in budget allocation among budget categories enabled projects that targeted unstable situations, such as humanitarian assistance, to distribute funds efficiently while maintaining transparency. The established network in the target area assisted both projects in implementing their activities, even though they had limited resources and time to prepare project activities. Considering the conflicts among its targets enhanced the project's implementation, in accordance with CHS. Partnerships with local NGO partners enabled the project to consider socio-cultural issues that are normally hidden from outsiders (non-local stakeholders). There was also some education about project planning and project length. Based on the TPM JPF and the NGOs that implemented the project, the project should take action to secure the sustainability of its activities. To enhance its humanitarian purpose, JPF suggested making its contributions more visible to the targets, such as carry banners with the JPF logo in the project activities.

List of Abbreviations

| | |
|-------|---|
| CHS | Core Humanitarian Standard |
| CHW | Community Health Worker |
| CoR | Committee of Refugees |
| DAC | Development Assistance Committee |
| EWER | Early Warning and Early Response |
| FGD | Focus Group Discussion |
| HAC | Humanitarian Aid Committee |
| IDP | Internally Displaced People |
| INEE | Inter-Agency Network for Education in Emergencies |
| JCCP | Japan Center for Conflict Prevention |
| JICA | Japan International Cooperation Agency |
| JPF | Japan Platform |
| JPY | Japanese Yen |
| KII | key informant interview |
| MOH | Ministry of Health |
| NGO | Non-Governmental Organization |
| OCHA | UN Office for the Coordination of Humanitarian Affairs |
| OECD | Organisation for Economic Co-operation and Development |
| ONAD | Organisation for Nonviolence and Development |
| PDM | Project Design Matrix |
| PDMe | Project Design Matrix for evaluation |
| PLAN | Plan International |
| PSS | Psycho-social support |
| RRP | Relief, Reintegration, and Protection |
| REALs | Reach Alternatives |
| SGBV | Sexual and Gender-Based Violence |
| SMOH | State Ministry of Health |
| TPM | Third-Party Monitoring & Evaluation |
| UNHCR | Office of the United Nations High Commissioner for Refugees |
| WASH | Water, Sanitation and Hygiene |
| YL | Youth Leader |

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1. INTRODUCTION

1.1. Background

Japan Platform (hereinafter referred to as “JPF”) is an international emergency humanitarian aid organization that offers the most effective and prompt emergency aid in response to global developments, focusing on refugee issues and natural disasters. JPF provides aid through a tripartite cooperation system where NGOs, business communities, and the government of Japan work as equal partners to make the most of each sector’s characteristics and resources.

To date, JPF has served as an intermediary support organization, providing assistance to 43 member NGOs in Japan that have delivered quick and comprehensive aid, in particular to refugees and victims of natural disasters. Thus far, JPF has given humanitarian assistance to 47 countries and regions through approximately 1,200 projects, with a total financial contribution of JPY 40 billion.

JPF has sought a consultancy to evaluate its response to the South Sudan humanitarian crisis, as well as project monitoring and evaluation of its two current or recently completed projects in South Sudan and Sudan. JPF intends to use the evaluation outcome to improve ongoing and future projects. This report covers the TPM of the two projects conducted by the IC Net evaluation team.

1.2. Objectives of Third Party Monitoring and Evaluation (TPM)

The main purposes of the TPM are to:

- Verify that project funds were used in accordance with the project proposal;
- Verify that humanitarian principles and standards (for example, CHS and Sphere²) were respected;
- Understand the satisfaction of the beneficiaries;
- Analyze the impact of the project with available data; and
- Provide feedback for project improvement.

1.3. Summary of Target Projects

The TPM targeted two projects under the South Sudan Refugees Emergency Assistance Program. Project 1 was “Prevention and Mitigation of the Conflict and Violence at IDP camps, Juba, Central Equatoria State,” implemented by the Japan Center for Conflict Prevention³ (hereafter referred to as the JCCP Project) in South Sudan. Project 2 was “Improving Sanitation and Health Facilities at Refugee Camps and Host Community in White Nile, Sudan,” implemented by Plan International Japan (hereafter referred to as the PLAN Project) in Sudan. Box 1 (1-1 and 1-2) lists the target projects, while Figure 1 specifies their locations.

BOX 1-1

Project Title: Prevention and Mitigation of the Conflict and Violence at IDP camps, Juba, Central Equatoria State

Implementing Agency: JCCP (On March 25, 2020, JCCP is renamed as REALs)

Cooperation Period: July 17, 2019 to March 31, 2020

Target Area: Mahad, Gumbo and Way Station (Way Station was added as the third project site in January 2020)

Target Group: Community workers for component 1 and leaders and youth leaders (YLS) for component 2

Budget: JPY 75,387,016

Project Purpose:

² In the TOR, NIEE was also included. However, this evaluation will not assess NIEE, because the target project did not cover the education sector.

³ Japan Center for Conflict Prevention (JCCP) is renamed to Reach Alternatives (REALs) on 25th March 2020.

In Mahad and Gumbo, where conflict and violence are imminent compared to other IDP sites in and around Juba, JCCP South Sudan aims to develop a community-based system that:

- 1) mitigate and solve problems and violence facing vulnerable people through training community members and providing psychosocial support (the training and support include mitigating and responding to sexual and gender-based violence (SGBV), especially physical and sexual violence); and
- 2) can detect the signal of local conflict in advance, and prevent conflict within the community.

Outcomes:

- (1) Community workers are trained to grasp problem and invisible violence such as SGBV in Mahad and Gumbo.
- (2) A system is established to grasp the psychosocial issues of the community through outreach, solve and mitigate problems, and refer the cases in Mahad and Gumbo.
- (3) Leaders and youth leaders are trained and a system is established to detect the signal of potential conflict in the community and solve issues in advance or prevent conflict in Mahad and Gumbo.

BOX 1-2: PLAN Project

Project Title: Improving Access of South Sudanese Refugees and host community to Sustainable WASH and Health Services in White Nile State of Sudan

Implementing Agency: Plan International Japan

Cooperation Period: May 1, 2019 to June 30*, 2020 (*One month extended from original)

Target Area: Refugee Camps in White Nile State (Al Redis 1 and Al Redis 2 for Outcome 1 and Jouri and Alagaya for Outcome 2), Host Community in Kosti

Target Group: Refugees in White Nile State (Al Redis 1 and Al Redis 2 for Output 1 and Jouri and Alagaya for Output 2), Host Community in Kosti

Budget: JPY 90,399,999

Project Purpose: improve access of households to latrines in refugee camps and access of people to health facilities in refugee camps and host communities

Outcomes:

- (1) Latrine/person ratio in the camps is improved in the target refugee camps (Al Redis 1 and Al Redis 2)
- (2) People receive quality health services through improvement of facilities of two health facilities in target camps (Jouri and Alagaya) and host community in Kosti.



Figure 1: Maps of South Sudan and Sudan (Source: Wikipedia)

2. METHODOLOGY

2.1. Evaluation Design

To perform its TPM, the IC Net team examined two different aspects of the projects: (1) their achievement and implementation processes, and (2) evaluation of the projects based on evaluation criteria. The team developed an evaluation grid for each project that included evaluation questions, required data, sources of information, and methods of information collection. Based on its analysis, the IC Net team examined each project comprehensively to identify good practices, lessons learned, and practical recommendations for enhancing the impact of future projects through JFP.

(1) Assessment of the Achievement and Implementation Process of Project

First, the IC Net team assessed project achievement by comparing its actual input, output, and project purpose to those in the project plan specified in the Project Design Matrix (PDM). The PDM is a tool that provides a logical framework for achieving project goals, and is usually used by JICA to manage the project cycle of technical cooperation projects. JPF requires its partner NGOs to develop a logical framework for their project proposals. The IC Net team developed a PDM of each project for evaluation (PDMe⁴) based on the information, narratives, and logic described in each project's logical frameworks. The PDMe of each project was attached as Annex 1.

Box 1-3: Development of PDMe based on the Projects' Logical Frame

- **Project Purpose** was derived from 'Project Objective' in logical framework;
- **Outputs** to achieve project purpose were derived from 'Expected Outcomes' in logical framework;
- **Indicators to assess achievement of Outputs** were derived from indicators of expected outcomes in logical framework;
- **Indicators to assess achievement of the Project Purpose** were derived from the achievement of 'Expected Outcomes';
- **Supplemental Indicators** were added to assess achievement of Outputs through consultation with the implementing NGOs;
- **Overall Goal** was newly set up through consultation with implementing NGOs about their envisioned long-term goal.

Second, the IC Net team reviewed each project's implementation process to determine if it implemented its activities according to the schedule delineated in the project plan. By assessing the implementation process, the IC Net team identified obstacles and/or enhancing factors that positively or negatively affected achieving the project's purpose. The projects were also assessed according to humanitarian principles and standards (e.g., CHS and Sphere).

(2) Analysis based on Evaluation Criteria

After assessing the achievements of the projects, the IC Net team analyzed each project based on certain evaluation criteria. After considering the evaluation's purpose, it selected seven criteria: 1) relevance/appropriateness, 2) connectedness/sustainability, 3) efficiency, 4) effectiveness, 5) coordination, 6) impact, and 7) adherence to CHS/Sphere Standards. Table 2-1 summarizes the definitions of each criterion.⁵

According to the selected evaluation criteria, the team developed an "Evaluation Grid" for each target project based on a document review and information shared by the partner NGOs.

⁴ A Project Design Matrix composed for an evaluation is called a PDMe.

⁵ Quoted from "Implementation and Funding Guideline 14, Measures taken for Evaluation."

Table 2-1: Seven Evaluation Criteria for JPF TPM

| | |
|--|---|
| Relevance | <ul style="list-style-type: none"> • Relevance examines whether the project goals meet the needs of the beneficiaries as planned. • Whether the project approach is appropriate to solve issues tackled by the project. • Whether it is consistent with the policy/strategy of JPF as well as the global response to the issue. |
| Connectedness/ Sustainability | <ul style="list-style-type: none"> • Connectedness examines whether the project connect short-term emergency assistance into long-term development activities. • Sustainability refers to the extent to which an implementing agency can continue and or expand the output of the project, and the benefits generated by the project can be sustained |
| Efficiency | <ul style="list-style-type: none"> • Efficiency examines whether the resources are being used effectively. • Whether the project is efficiently composed considering the relationship between project inputs and outputs, project cost and project period. Assess the implementation process as well. |
| Effectiveness | <ul style="list-style-type: none"> • Effectiveness examines whether the implementation of the project has achieved the project goals and provided benefits to the beneficiaries and the target areas. • Assess the achievement level will be evaluated both quantitatively and qualitatively. |
| Coordination | <ul style="list-style-type: none"> • Coordination examines emergency assistance is well coordinated among various stakeholders and implemented by using all the potential social, economic, human resources. |
| Impact | <ul style="list-style-type: none"> • Impact refers to direct and indirect, positive and negative impacts caused by the implementation of the project, including the extent to which the Overall Goal has been attained and indirect and/ or unexpected impact brought by the project. |
| Observance of CHS/ Sphere Standards | <ul style="list-style-type: none"> • Observance examines whether the project is implemented in line with the Humanitarian Charter, and pay attention to the Minimum Standards. |

2.2. Method of Data Collection

Data collection was conducted using the following methods: (1) document review, (2) key informant interviews (KIIs) in Japan, and (3) a field survey by a local consultant.

(1) Document Review

The IC Net team carried out a desk review on the relevant documents provided by JPF and the partner NGOs. The team summarized the findings from the document study and consolidated them into the evaluation grid, which is attached as Annex 2.

(2) Key Informant Interviews (KIIs) in Japan

The IC Net team conducted the KIIs in Japan with the NGO staff in charge of implementing the respective projects. The interviewees were the staff who were responsible for the project's field implementation and were in charge at the management level.

The KIIs were conducted with informants for each project twice. The first interview collected basic information. Criteria for Informants' selection were developed. Based on the information collected, questionnaires were developed for each informant, and the informants answered them. In accordance with those answers, the second interview collected supplemental information.

(3) Field Survey by Local Consultants

IC Net concluded a contract with a local consultant to collect information on each project, and had the consultant work as part of the IC Net team.

<JCCP Project>

An executive director from a local NGO, a male South Sudanese, was appointed as a data collection consultant at the local level. For the field survey, the local consultant assigned a translator and note taker, and formed an evaluation team to collect data.

The primary methods of data collection were FGDs, KIIs, and questionnaires. Focal persons and unpaid volunteers who supported and worked with community workers joined the FGD of community workers, and deepened the contents of the interviews. The evaluation team also conducted FGDs with five leaders and four YLs in Gumbo. In total, 61 informants were interviewed, and 57 participated in FGDs (29 in Gumbo and 28 in Mahad; see Table 2-2). Although affected by the COVID-19 pandemic, the data were collected in March 2020, in accordance with the original plan.

Table 2-2: List of Informants (JCCP Project)

| Category | Area | Target | Number | | | Method of Data Collection |
|----------|-------|--------------------------|--------|---|-------|---------------------------|
| | | | F | M | Total | |
| | Tokyo | JCCP Tokyo | 1 | 0 | 1 | Questionnaire, KII |
| | Juba | JCCP South Sudan | 1 | 2 | 3 | Questionnaire, KII |
| | | Leaders | 5 | | 5 | FGD |
| | | Youth leaders | 4 | | 4 | FGD |
| | | Community workers | 7 | 3 | 10 | FGD |
| | | Focal persons/Volunteers | 8 | 2 | 10 | FGD |
| | | Leaders | 7 | | 7 | FGD |
| | | Youth leaders | 10 | | 10 | FGD |
| | | Community workers | 2 | 3 | 5 | FGD |
| | | Focal persons/Volunteers | 3 | 3 | 6 | FGD |
| Total | | | | | 61 | |

<PLAN Project>

A male Sudanese consultant based in Khartoum collected the information. The data were originally planned to be collected through KIIs, FGDs, and site visits to Kosti and the target camps in March. However, the methods were changed because of COVID-19, which led to restrictions to in-country transportation and visitor access to camps. In total, the Sudanese consultant interviewed 50 informants, including the project staff, local authorities, related organization and the project's beneficiaries (Table 2-3) by telephone, except for a Japanese manager.

Table 2-3: List of Informants (PLAN Project)

| Category | Target | Location | Number | | | Method of Data Collection | |
|----------|----------------------------------|------------|--------|---|-------|---------------------------|---------------|
| | | | F | M | Total | Actual | Original Plan |
| | Plan International Japan | Japan | 1 | 0 | 1 | Questionnaire, KII | |
| | | Khartoum | 1 | 0 | 1 | Phone Interview | |
| | | Kosti | 2 | 0 | 2 | Phone Interview | |
| | Local Partner NGO (El Masaar) | Kosti | 1 | 1 | 2 | Phone Interview | KII |
| | Humanitarian Aid Committee (HAC) | Kosti | 0 | 1 | 1 | Phone Interview | KII |
| | Committee of Refugees (CoR) | Al Redis1 | 0 | 1 | 1 | Phone Interview | KII |
| | UNHCR Kosti Office | Kosti | 0 | 2 | 2 | Phone Interview | KII |
| | State Ministry of Health (MOH) | White Nail | 1 | 1 | 2 | Phone Interview | KII |
| | Recipient HH of Latrines | Al Redis1 | 4 | 2 | 6 | Phone Interview | |
| | Recipient HH of Latrines | Al Redis2 | 3 | 3 | 6 | Phone Interview | |
| | Community Health Workers | Alagaya | 2 | 2 | 4 | Phone Interview | |
| | Community Health Workers | Jouri | 4 | 0 | 4 | Phone Interview | |

| | | | | | | | |
|-------|-----------------------------------|---------|---|---|---|-----------------|--------------------------------------|
| | Doctor/Staff of Health Clinic | Alagaya | 1 | 2 | 3 | Phone Interview | <i>KII and Site visit to Clinics</i> |
| | Doctor/Staff of Health Clinic | Jouri | 1 | 2 | 3 | Phone Interview | |
| | Doctor/Staff of District Hospital | Kosti | 1 | 1 | 2 | Phone Interview | <i>KII</i> |
| | Visitors of Health Clinic | Alagaya | 4 | 1 | 5 | Phone Interview | |
| | Visitors of Health Clinic | Jouri | 4 | 1 | 5 | Phone Interview | |
| Total | | | | | | 50 | |

2.3. Challenges

(1) Challenge in Data Collection

- Influence of COVID-19
 - JCCP Project
 - ✧ The FGDs with leaders and YLs were conducted at the end of March 2020, which was earlier than planned because of the spread of COVID-19. The evaluation team reduced the number of interviewees in Gumbo in order to avoid a crowded environment.
 - ✧ FGD only targeted direct beneficiaries in Gumbo and Mahad; the Way station could not be included because of the limited condition of field survey. However the quantitative achievement was collected from all the three target area.
 - PLAN Project
 - ✧ The local consultant was required to conduct interviews by telephone. He received an informant list that included the telephone numbers of project staff informants. Remote communication between them delayed the start of data collection.
 - ✧ The plan was for a mixed team to perform the field survey. However, because of restrictions on direct communication, only one male senior consultant conducted interviews with all the informants. This might have affected the informants' answers because the majority of informants at the grassroots level were women who are not used to talk with male senior officer.
 - ✧ The changes to the interview method negatively affected accessibility. Some important informants, such as CoR officers, did not answer phone calls from unfamiliar numbers.
 - ✧ Government offices were closed during the field research. Therefore, some data were not available because the informants were not at their offices.

(2) Challenge in Data Analysis

- Evaluation timing
 - The PLAN project was planned to conclude at the end of May 2020. During data collection by the local consultant, the project's situation changed daily, in accordance with the end-stage progress of the project's activities. The project period was extended for one month because of the effect of COVID-19. The evaluation team had difficulties assessing the project's achievements in that unpredictable situation.

3. EVALUATION RESULTS

3.1. JCCP Project

3.1.1. Achievements

(1) Achievements of Outputs

The achievement of each Output is shown below.

【Component 1】

1) Achievement of Output 1

Output 1: Community workers are trained to detect problems and unreported violence such as SGBV in Mahad and Gumbo.

<Indicators>

- 1) *15 community workers each are selected in Mahad and Gumbo (Target: 30 in total).*
- 2) *A three-day outreach and referral training session is conducted for 15 community workers each in Mahad and Gumbo, respectively (30 community workers in total). The trained community workers score 70% or better in a comprehension test.*

Output 1 was achieved as planned in relation to fulfilling the indicators.

- (Indicator 1-1) Based on the selection criteria, 30 community workers were selected in Gumbo and Mahad by September 2019. In March 2020, 20 people who had worked as volunteers in Gumbo and Mahad became community workers who received incentives from the project. Moreover, 15 community workers were selected and trained at the newly added Way Station in February 2020.

Table 3-1-1: Number of community workers

| | Gumbo | | Mahad | | Way Station | |
|-------------------|--------|------|--------|------|-------------|------|
| | Female | Male | Female | Male | Female | Male |
| Community workers | 11 | 4 | 7 | 8 | 9 | 6 |

- (Indicator 1-2) The project conducted outreach and referral training with training materials that targeted community workers, focal persons,⁶ and leaders. The number of participants, and participants' rates, were as follows. After the training in Gumbo and Mahad, the average score of the participants in the comprehension test was over 80%. The project shared the training materials with participants who could not join the training, and JCCP field staff briefed them on the training and on how to work as community workers in the community.

Table 3-1-2: Number of training participants

| | Date | Contents | Target number | Actual number of participants | Participation rate |
|--|------------------|---------------------------|---------------|-------------------------------|--------------------|
| | Nov. 5-7 2019 | Outreach training | 27 | 26 | 96% |
| | Nov. 21, 2019 | Referral pathway training | 27 | 23 | 85% |
| | Nov. 11-13 2019 | Outreach training | 27 | 31 | 115% |
| | Nov. 22, 2019 | Referral pathway training | 26 | 25 | 96.1% |
| | Feb. 18-20, 2020 | Outreach training | NA | 72 | NA |
| | Feb. 21, 2020 | Referral pathway training | NA | 72 | NA |

⁶ Initially, focal persons were for Output 2, but JCCP changed the plan and had them work to support community workers in component 1.

2) Achievement of Output 2

Output 2: In Mahad and Gumbo, a system is established to understand psychosocial issues in the community through outreach, solve and mitigate the issues, and refer cases to proper institutions.

<Indicators>

2-1. A leaflet on the services provided by the JCCP with contact information including referral partners is produced, and 1,000 copies of the leaflet are distributed to raise awareness.

2-2. Visits to 1,000 households of IDPs and the host community are conducted by 30 community workers.

2-3. Psychosocial problems that are identified via the visits are solved or mitigated, or referred to proper institutions. In addition, four success stories are identified.

2-4. A monthly supervision meeting is held for 30 community workers to share challenges that they face, lessons that they learn, and maintain and improve their skills.

2-5. Data in the client form are recorded and managed in a database.

2-6. A report is prepared based on the aggregated results of the database.

<Additional qualitative view⁷>

2-7. Whether the community workers are aware of the referral system and contact information (names and mobile phone numbers) for referrals

2-8. Whether the community workers are working according to the steps of "outreach → hearing and recording of problems → sharing of problems → consideration of countermeasures → referrals"

Output 2 was mostly achieved as planned. A system was established in which community workers consulted clients and referred them to hospitals or related organizations in necessary cases.

- (Indicator 2-1) A leaflet with key messages for SGBV/PSS was developed. However, the development of the leaflet was delayed. It took six months to develop since the local designer was not familiar with gender and tribal issues, and it took more time to revise the contents. With the approval of the Ministry of Gender, Child, and Social Welfare, copies of the leaflet were distributed to community members by the end of the project.
- (Indicator 2-2) In total, 3,832 households in Gumbo and Mahad were visited by community workers and received consultation during the project period. (3,832/1,000 households=383% achieved)

Table 3-1-3: Number of households visited by community workers in Gumbo and Mahad

| | Nov. 2019 | Dec. 2019 | Jan. 2020 | Feb. 2020 | Mar. 2020 | Total |
|-------|-----------|-----------|-----------|-----------|-----------|-------|
| Gumbo | 176 | 196 | 381 | 844 | 396 | 1,993 |
| Mahad | 165 | 199 | 336 | 625 | 514 | 1,839 |
| Total | 341 | 395 | 717 | 1,469 | 910 | 3,832 |

As described, Way Station was newly added as the third project site in January 2020. A total of 15 newly appointed community workers visited 786 households in February and March.

Table 3-1-4: Number of households visited by community workers in Way Station

| | Nov. 2019 | Dec. 2019 | Jan. 2020 | Feb. 2020 | Mar. 2020 | Total |
|-------------|-----------|-----------|-----------|-----------|-----------|-------|
| Way Station | | | | 185 | 601 | 786 |

- (Indicator 2-3) A total of 13 success stories, such as medical support and counseling to personnel with depression, were extracted and reported in the monthly reports. (13 stories/4 stories, achieved.)
- (Indicator 2-4) From October to March, monthly supervision meetings with community workers, focal persons, and volunteers were conducted to share good practices and challenges. The supervision meetings

⁷ This was added for project evaluation.

from October to December were integrated with the follow-up meeting with leaders and YLs.

- (Indicator 2-5) The database including information about the clients of the project in Excel format was introduced to the project in January 2020. By that time, JCCP South Sudan had transferred data into hard copies.
- (Indicator 2-6) The analysis report based on the data was not ready. The report will be ready by the time of the submission of the Project Completion Report.
- (Additional qualitative view 2-7) Community workers are aware of the names of referral organizations, their services, and schedule for the service provision in Mahad and Gumbo. These were shared by the project in the referral pathway training.
- (Additional qualitative view 2-8) The community workers could work based on the procedure of “outreach-hearing and recording of problems-sharing of problems-consideration of countermeasures-referrals.”

【Component 2】

3) Achievement of Output 3

Output 3: In Mahad and Gumbo, leaders and youth leaders are trained and a system is established to detect signs of conflict in the community, solve issues in advance, or prevent conflict.

<Indicators>

- 3-1. A three-day early warning indicator training session is conducted for 44 leaders and 60 YLs (104 in total) in Mahad and Gumbo, and early warning indicators are developed.*
- 3-2. A form to monitor early warning indicators is developed.*
- 3-3. Four people in charge of monitoring early warning indicators are selected in Mahad and Gumbo.*
- 3-4. A three-day early response training session is conducted for 44 leaders and 60 YLs (104 in total) in Mahad and Gumbo.*
- 3-5. A conflict alert is raised according to the monitored indicators. Measures to mitigate and prevent conflict are taken by 44 leaders and 60 YLs (104 in total). In addition, two success stories are identified.*
- 3-6. Signs of conflict that trigger an alert and response are recorded in the monitoring form by four people responsible for monitoring early warning indicators. The monitoring form sheets are collected by JCCP South Sudan.*
- 3-7. A one-day meeting to share lessons learned is held for 44 leaders and 60 YLs (104 in total) in Mahad and Gumbo.*

<Additional qualitative view>

- 3-8. Whether early warning indicators and training sessions were effective in detecting signs of local conflict and preventing conflict in advance*

Output 3 was mostly achieved. A community-based system was established, and leaders and YLs can now detect the signals of potential conflict.

- (Indicator 3-1) The project held two days of “early warning indicator” training in October in Mahad and Gumbo. The participants were not only leaders and YLs, but also focal persons and community workers. The expected number of participants in early warning indicator training was 104. The actual number was 112 (46 in Gumbo and 66 in Mahad), including some community workers and focal persons (achievement rate: $112/104 = 107\%$).
- (Indicator 3-2) A monitoring form was not developed. An Excel database was developed and the possible indicators collected by the leaders and YLs were included in the database and monitored.
- (Indicator 3-3) In total, seven focal persons were selected (4 in Mahad and 3 in Gumbo). One of their main

responsibilities was to support the community workers in component 1, rather than component 2. In the Way Station, which was added in January, four focal persons were selected in February.

Table 3-1-5: Number of focal persons

| | Gumbo | | Mahad | | Way Station | |
|---------------|--------|------|--------|------|-------------|------|
| Sex | Female | Male | Female | Male | Female | Male |
| Focal persons | 1 | 2 | 1 | 3 | 2 | 2 |

- (Indicator 3-4) In Gumbo and Mahad, two days of “early response training” was conducted targeting leaders and YLs in October. The expected number of participants was 104, while the actual number was 102. JCCP South Sudan Staff distributed the training materials to those who missed the training and briefed them afterward ($102/104 \times 100 = 98\%$). In February, two days of “early response training” was also conducted at Way Station⁸.
- (Indicator 3-5) Six success stories⁹ were collected during the project period. (6 stories/2 stories, achieved)
- (Indicator 3-6) As previously mentioned, the monitoring form was not developed and focal persons mainly worked for component 1, not for component 2. However, every monthly meeting, leaders and YLs reported the signals of potential conflict and the JCCP added all data to the system and monitored it.
- (Indicator 3-7) The follow-up meeting was held in February and March. In addition, from October to December, the follow-up meetings for leaders and YLs were integrated with supervision meetings for community workers and focal persons.
- (Additional qualitative view 3-8) Early warning indicators were not finalized by the end of the project. Thus, the effectiveness of the indicators was not clear in this evaluation.

An initial plan was to develop early warning indicators and select some for monitoring training held in October 2019. However, indicators were not finalized during training. This is because it was difficult to reach a consensus in the project team before the training as to how far and the extent of project coverage on EWER, and provide technical support from the JCCP Tokyo office at that time owing to remote communication. Although this was a challenge, the JCCP tackled this issue flexibly to finalize the indicators. Every month, the JCCP collected the possible indicators from leaders and YLs. Then, the JCCP also gave feedback regarding which indicators are to be focused on, or which are available and which are systematically difficult to obtain. JCCP Tokyo will choose some indicators as the final version and share them with leaders and YLs through social workers after the project.

(2) Achievements of Goals

1) Achievements of Project Purpose

Project Purpose: In Mahad and Gumbo, where conflict and violence are more likely than other IDP sites in and around Juba, JCCP South Sudan aims to develop a community-based system that:

1: mitigates and solves problems and violence that face vulnerable people by training community members and providing psychosocial support (the training and support include mitigating and responding to sexual and gender-based violence (SGBV), especially physical and sexual violence); and

2: can detect signs of conflicts in advance, and prevent them from outbreaking in a community.

【Component 1】

<Indicators>

1) Number of unreported cases of physical and sexual violence that community workers identify

2) Number of unreported cases of physical and sexual violence that community workers refer to JCCP

⁸ The number of participants is under calculation by the JCCP.

⁹ Details of the good practices are compiled in the monthly reports.

3) *Number of unreported cases of physical and sexual violence that community workers solve*

【Component 2】

<Indicators>

4) *Number of signs of conflict that community leaders and youth leaders find*

5) *Number of signs of conflict that community leaders and youth leaders solve or mitigate*

Based on the achievement of the indicators, it is judged that the project achieved the Project Purpose by the end of the project period. Both component 1 and component 2 developed a community base system where leaders, YLs, and community workers contributed to the communities based on their roles in Mahad and Gumbo. Regarding the Way Station, although the training was conducted just two months before the end of the project, it also showed quantitative achievement.¹⁰

【Achievement of Component 1】

- Through the project, the focal persons and community workers were able to identify a wide range of signs of SGBV and other issues, and reach people who have problems such as access to hospital or school, or those with disabilities. They were also able to manage and respond to most of the SGBV/PSS at their level. Referral pathway services were also strengthened by clarifying the services of referral institutions and supporting the referral by the project, even though the percentage of resolved referral cases was still low (31%) in three areas because of the limited service provided by the referral organizations or transportation. As a result, community workers and focal persons identified 1,637 issues in the communities, including physical and sexual violence, conflict resolution, medical and educational support; 1,442 cases were resolved and 230 cases were referred.
- On the other hand, there was a gap in performance between female and male community workers. Female community workers, focal persons, and volunteers seem to be more committed to resolving problems in the communities, compared with male community workers. In many cases, the aforementioned could share their experience with the interviewer on SGBV and cases of violence with details at the household level. For example, the cases were about how they de-escalated family conflict situations, corporal punishment on children, and domestic violence, and then listened to couples' stories and provided counseling in a calm place, while ensuring confidentiality. On the other hand, few male community workers, focal persons, and volunteers shared their experiences with the interviewer on SGBV cases during the outreach, and some male community workers said that SGBV issues are beyond their power, and tend to share the experience of violence among tribes and between the host communities and the IDPs, rather than at the household level.

The achievement of each indicator is verified as follows.

- (Indicator 1) The total number of cases of physical and sexual violence identified by community workers: 1,637 cases including physical and sexual violence, conflict resolution, and medical and educational support. The JCCP will analyze the data that only focus on physical and sexual violence by submitting the completion report.

Table 3-1-6: Number of identified and resolved psychosocial problems in Gumbo, Mahad, and Way Station¹¹

| No. of cases identified | No. of cases resolved | No. of cases pending |
|-------------------------|-----------------------|----------------------|
|-------------------------|-----------------------|----------------------|

¹⁰ Meanwhile, the evaluator was not able to collect sufficient information to comprehensively judge the achievement in the Way Station.

¹¹ The number in Gumbo and Mahad is from November to March, while the number in Way Station was collected in February and March.

| | | |
|-------|------------|----------|
| 1,637 | 1,442(88%) | 195(12%) |
|-------|------------|----------|

- (Indicator 2) The total number of unreported cases of physical and sexual violence, which community workers solved: 1,442 cases (88%) including physical and sexual violence, conflict resolution, and medical and educational support.
- (Indicator 3) The total number of unreported cases of physical and sexual violence, which community workers referred to relevant institutions: 230 cases including physical and sexual violence, conflict resolution, and medical and educational support.

Table 3-1-7: Number of referral cases in Gumbo, Mahad, and Way Station¹²

| Number of referred cases | Number of referred cases resolved | Number of referred cases pending |
|--------------------------|-----------------------------------|----------------------------------|
| 230 | 71 (31%) | 159 (69%) |

【Achievement of Component2】

- After the EWER indicator training, leaders and YLs were able to detect the signs of local potential conflicts in advance and began to intervene in the issues when community members started to use expletives, gather according to their tribes, or if any stranger entered the camp. During the interviews, the majority of the leaders showed high confidence and both leaders and YLs appreciated each other's performance.
- Community networks were strengthened throughout the project. Leaders and YLs received conflict alerts from community members so that they could intervene in the issues. This did not happen before the project. In addition, the coordination and collaboration among leaders, YLs, and the JCCP was enhanced, which led to the improved EWER mechanism.

The achievement of each indicator is verified as follows.

- (Indicator 4) Number of signs that community leaders and youth leaders understood: (Total) 270
- (Indicator 5) Number of signs of conflicts that community leaders and youth leaders solved or mitigated: (Total) 179 (66%)

Table 3-1-8: Number of identified signs and signs that showed improvement

| No. of signs (indicators) recorded | No. of signs (indicators) which showed improvement | No. of signs (indicators) which did not show improvement |
|------------------------------------|--|--|
| 270 | 179 (66%) | 91 (34%) |

* Some of the indicators are duplicated. The JCCP Tokyo office will finalize the list of early warning indicators by the Project Completion Report.

2) Prospects of Achievement of Overall Goal

Overall Goal: In Mahad and Gumbo, where conflict and violence are more likely than other IDP sites in and around Juba, JCCP South Sudan aims to maintain a community based-system that:

- 1: mitigate and solve problems and violence that face vulnerable people by training community members and providing psychosocial support (the training and support include mitigating and responding to sexual and gender-based violence (SGBV), especially domestic physical and sexual violence); and*
- 2: can detect signs of conflict in advance, and prevent them from outbreaking in a community.*

<Indicators>

- 1. Whether unreported problems such as SGBV are expected to be mitigated or prevented by the personnel trained in the project*
- 2. Whether signs of conflict in a community will continue to be detected, solved, and prevented in advance*

¹² The number in Gumbo and Mahad is from December to March, while the number in Way Station was collected in February and March.

in a community by its leaders, and whether youth leaders detect signs of conflict in the community and solve them or prevent conflict

The prospects of achieving the Overall Goal seem limited.

A community-based system has been developed since 2016. However, after the completion of this project, it may be difficult to maintain a strong community-based system given the limited referral system, technical support, community's financial capacities, and government support.

Meanwhile, some leaders, YLs, and community workers have shown their willingness to continue to work even after the project, and social workers who are supported by the JCCP will continuously visit each location at least once a month. In addition, the demand in the communities regarding the support by leaders, YLs, and community workers for SGBV/PSS and EWER will increase because of COVID-19. As a result, more leaders, YLs, and community workers may continuously work as volunteers.

(3) Inputs

1) Budget

The total amount of the project's budget was JPY 75,387,016, and 60% of the project budget was used during the project implementation period. The main gap came from the line of direct activity and transportation. Travel of the international experts on PSS and EWER from Kenya and Japan, and senior social workers were canceled for security reasons. In addition, there was a plan to employ five new local officers.

Table 3-1-9: Project cost as of May 21, 2020¹³ (Unit: JPY)

| | Plan (JPY) | Actual (JPY) | Percentage of the actual expenditure |
|--|------------|--------------|--------------------------------------|
| 1. Project Site | 68,499,014 | 40,328,524 | 59% |
| 1) Direct Activity | 27,046,028 | 16,803,980 | 48% |
| 2) Transportation | 9,952,786 | 5,045,325 | 62% |
| 3) Management | 31,500,200 | 18,479,219 | 72% |
| 2. Management in Japan | 3,246,296 | 2,721,967 | 84% |
| 3. General and administrative expenses | 3,424,950 | 2,016,426 | 59% |
| 4. External Survey | 216,756 | 220,756 | 102% |
| Total | 75,387,016 | 45,287,673 | 60% |

2) Staff

The JCCP initially planned ten local staff, but they actually recruited five local staff members. This did not affect the project's implementation.

Table 3-1-10: Local Human Resources

| Plan | Actual |
|---|---|
| <International staff> 2 international staff members | <International staff> 2 international staff members |
| <Local staff> 2 senior project officers 2 project officers 4 field officers 1 financial officer 1 administrative assistant | <Local staff> 1 senior project officer 1 project officer 1 field officers 1 financial officer 1 administrative assistant |
| <u>Total 12 people</u> | <u>Total 7 people</u> |

¹³ This table is as of May 21, 2020 calculated by the JCCP. The amount can be updated or revised based on the actual amount by the completion report.

3) Equipment

Items costing more than 500 US dollars were listed below. Meeting desks and printers were arranged within the budget.

Table 3-1-11: Equipment

| Plan | Actual |
|------|---|
| PC | 2 desks 1 printer and its maintenance fee 1 laptop computer |

3.1.2. Evaluation based on Evaluation Criteria

(1) Relevance/Appropriateness

It is judged that the project is relevant as it is sufficiently consistent with the development policy and development needs of South Sudan, JPF's policy, and the needs of the target areas.

- **【Needs of target groups and areas】** The project met the needs of the target groups and areas.
 - At the time of project planning, 3,538 incidents of sexual- and gender-based violence (SGBV) were reported in South Sudan in the nine months from January to September 2018, and SGBV was a serious problem in South Sudan (OCHA, 2019).
 - The JCCP's 2018 survey revealed that there were 172 cases of conflict and violence in Gumbo, Mahad, and Way Station.
- **【Policy/Strategy of JPF】** The project addressed particular needs of the target communities where people are at high risk of violence. Thus, this project was in line with the three strategic objectives of the JPF's South Sudan Humanitarian Response Plan (March 2019–February 2020) and the JPF's plan for the protection sector.
- **【Policy of OCHA】** As the project aimed to provide PSS to vulnerable women who suffer from SGBV and prevent violence in the communities, it is in line with the strategic goal of the Humanitarian Response Plan 2019 of the OCHA.
- **【Selection of the target areas】** The selection of Mahad and Gumbo was appropriate. Regarding Way Station, the evaluator could not judge the appropriateness of including the Way Station just three months before the termination of the project. The JCCP considered that the project could implement activities very smoothly in the Way Station in January, February, and March¹⁴ since the training materials had been developed in advance, and then produce good quantitative outputs.¹⁵
- **【Selection of the target groups】** The selection of the target groups (leaders, YLs, and community workers) was appropriate.
 - In Component 1, community workers were newly appointed in this project to conduct outreach in the communities, as the eyes of the leaders, and did not have time to conduct home visits regularly. The selection was appropriate to some extent. When selecting community workers, the selection criteria were developed in advance to avoid bias toward specific tribes or gender.
 - The selection of men in the field of SGBV was also good because it deepened male community workers' understanding of SGBV in the communities. In addition, it made it easier for men to approach

¹⁴ According to the monthly report, the preparatory meeting was held with leaders and youth leaders in January, and selection of community workers and several training sessions were held in February and March. Substantial activity was conducted in February and March.

¹⁵ Meanwhile, the evaluator does not have enough information to decide whether the activities at the Way Station have produced all expected outcomes.

the perpetrators of SGBV compared with female community workers. Through interviews, it was established that this view was also shared by male community workers.

- Component 2 of this project aimed to enable leaders and YLs, who had been trained since 2016, to detect the signal of local conflict in advance, and prevent its outbreak. In terms of continuous capacity building, it was appropriate to target leaders and YLs.
- **【Appropriateness in meeting the needs of the target groups in the project development process】** The JCCP has supported Mahad, Gumbo, and Way Station since 2014. During the course of the project from 2014, the JCCP assessed the needs of the communities from time to time. In 2018, before the JCCP developed the proposal for this project, it conducted a field survey in the three areas to capture the change in ethnic compatibility before and after the project, and the current needs of the communities. The JCCP reflected the needs of the communities, especially for SGBV and domestic violence.

(2) Connectedness/Sustainability

There was high connectedness as the project was designed based on the achievements of the previous project, given the remaining high need for ongoing support against the SGBV and conflicts for a long time. However, major problems have been observed with regard to the institutional, technical, and financial aspects of sustainability. Therefore, the perspective of sustainability seem limited.

- **【Continuous needs】** The project activities were needed both in a short-term emergency period and a longer-term development period. “Humanitarian Need Overview South Sudan” from 2016 to 2020 showed that there were high needs in the protection sector in both the aforementioned periods. Even in the latest report for 2020, the support for the victims of violence was the most common need for IDPs, which accounted for 37% in South Sudan, and 1.9 million women needed support regarding SGBV.
- **【Connectedness from the previous project】** This project was designed based on the experience and achievements of the previous project. The outcomes of the previous project since 2016 were that leaders and YLs were able to peacefully mediate and resolve conflicts and violence that occurred in the camp. Leaders and YLs started to work for “early warning and early response (EWER),” which was a new component in this project.
- **【Political sustainability】** There is some sustainability from a political perspective.
 - (Component 1) South Sudan has a gender policy, and there is a political will toward gender issues. However, the implementation of laws and policies is a challenge. According to a report on SGBV in South Sudan, many law enforcement officials and medical personnel are not trained on how to handle SGBV cases, which was also identified in the referral services in the project (JICA, 2017¹⁶); this will affect the sustainability of the project.
 - (Component 2) The peace process remains precarious, but progress is being made. The establishment of the Transitional Government of the National Unity of South Sudan was declared in February 2020. Local peace building initiatives will also move forward.
- **【Institutional sustainability】** Informal institutions were developed to maintain the sustainability of the community-based system.
 - Communication and relationship
 - ◇ The project also tried to link community workers and focal persons to referral agencies. However, because of the weakness of the referral service provider’s capacity and the transportation mechanism¹⁷ caused by the unstable socioeconomic situation in South Sudan, this referral system

¹⁶ Source: “Country Gender Profile Republic of South Sudan Final Report” published by JICA in 2017.

¹⁷ Compared with other developing countries, lack of proper services by both the referral agencies and the transportation

will not be sustained. These obstacles may reduce the motivation of community workers and focal persons to identify and support clients. This highly affects the sustainable community-based system.

- ◇ Communication and working relationships among leaders, YLs, focal persons, and community workers were strengthened through the project to effectively coordinate and support each other even after the project.
- Roles and responsibilities: The roles of leaders, YLs, focal persons, and community workers were very clear, which is important for the community-based system.
- Rules: Consent, confidentiality, and respect regarding clients were emphasized by most of the interviewees.
- Decision making: “Leader” played a central role to be reported by community workers, focal persons, and YLs.
- Allocation of social workers: The JCCP assigned government staff who were transferred temporarily from the Ministry of Gender, Child, and Social Welfare to the JCCP as social workers, and developed the relationship between the government and the project.
- **【Technical sustainability】** The prospect of sustainability from a technical perspective is limited. In the first year of the project, leaders, YLs, and community workers gained the skills and knowledge of SGBV/PSS and EWER during the four-day training as planned. However, there is no technical training, which was initially planned in the second and third year of the project to sustain their skills and knowledge, after the termination of the project. In addition, manual and volunteer-based activities are not enough to sustain technical skills, and continuous support to develop and strengthen technical capacities such as through formal training and on-the-job training may be necessary.

On the other hand, some efforts by the JCCP were made for sustainability. The JCCP has a plan to send some social workers to three project sites and support leaders, YLs, focal persons, and community workers at least once a week. The JCCP financially supports the social workers on its own cost until the JCCP has a new project in the same communities even after the project. In addition, some JCCP South Sudan members are willing to support leaders, YLs, focal persons, and community workers on a voluntary basis even after the termination of the project. Moreover, some feedback from the project will be provided to the community beneficiaries from the project experts after the project. Technical manuals would also support them to some extent.

- **【Financial sustainability】** Financial sustainability is an issue after the implementation period because there is no financial support from other partners or NGOs to leaders, YLs, and community workers as monthly allowances. This issue was also raised by some of them. However, the activities would be continuously conducted voluntarily to some extent for a certain period since some leaders, YLs, and community workers showed their willingness to continue working as volunteers without payment even after the project.

(3) Efficiency

It is judged that the project was efficiently managed through a strong monitoring mechanism. However, there was a low expenditure rate for direct activity.

- **【Monitoring mechanism】** The project was implemented through a strong monitoring system. Two international staff visited and stayed in Juba to ensure project quality, and the JCCP conducted its own weekly monitoring in the field. The JCCP also engaged a local consultant and the protection cluster in the camp to

mechanism is a serious problem caused by the shortage of budget and capacities of local authorities.

monitor the progress of the project. From Tokyo, the JCCP monitored the project efficiently, communicating with project staff every day. Regarding financial management, there was a clear rule between Tokyo and the South Sudan office.

- **【Feedback from communities】** The project used to receive feedback or complaints from the communities through several meetings in the field and daily visits by the project staff. These were shared with the JCCP, and resolutions were relayed back to the community during field visits/monitoring and in monthly supervision meetings.
- **【Communication and relationship between the JCCP's South Sudan office and Tokyo office】** The communication between the JCCP South Sudan and Tokyo office was very smooth through the monthly reports and the weekly Skype meeting to update on the activities' progress and share any risk and mitigation strategies. There was a case in which JCCP South Sudan and Tokyo did not have a common understanding of the output of EWER indicator training. However, JCCP Tokyo could respond flexibly and change their plan to finalize and monitor the EWER indicators. In addition, the roles of the JCCP South Sudan and Tokyo office were clear. For this project, the JCCP appointed an international staff member as a project manager, and it worked well to organize the clear instruction system in the project. Many issues were discussed at the JCCP South Sudan level.
- **【Inputs】** Human resources and materials were implemented smoothly, while there was some financial issue. There was a huge gap between the budget and actual expenditure (expected budget expenditure rate: 59%). The main gap came from the project's direct and travel costs for international staff from Kenya, experts of PSS and EWER, and senior social workers. In addition, it was planned that five new local officers would be employed. Some of the budget was used for the activities at Way Station, which was added in January as the third site of the project.

(4) Effectiveness

Certain levels of effects were expressed through the implementation of the project, which was effectively implemented with regard to the achievement of the Project Purpose.

- **【Achievement of Outputs】** Both component outputs are fulfilled and the Project Purpose is achieved. However, the log frame was designed based on the JPF's template, however, it was more effective to include the Overall Goal in the logical frame and its indicators, and indicators of the Project Purpose. This would help to capture the achievement of the project's purpose and what the project aimed to achieve in the three years (Overall Goal) (this is one of the recommendations for JPF).
- **【Contributing and hindering factors】** The following factors contributed to the achievement of the Project Purpose.
 - (Component 1) There was a contributing factor that 12 volunteers, who did not receive any monthly allowance in Mahad and Gumbo, had supported the community workers and focal persons to understand and manage unreported violence. Even at Way Station, 15 unpaid volunteers were identified in February, who enhanced activities in the camp.
 - (Component 1) Lack of services of the referral partners, lack of transportation for referrals, and gender issues were identified as some of the negative factors to achieve the Project Purpose. There were few public transportation services, and it was difficult for the JCCP to support transportation since the transportation for referrals is out of the project's budget. However, on several occasions, some partners and NGOs took clients in their vehicles. Lack of services by the referral partners created a sense of hopelessness and confusion among the SGBV/PSS clients. Many referrals caused confusion and mistrust. In addition, some female community workers in both Gumbo and Mahad said that community

members tended to ignore what female community workers had to say.

- (Component 2) Language, lack of transportation, cultural barriers, and gender were hindering factors for Component 2. Both leaders and YLs in Gumbo said that language is one of the factors that inhibit these activities. Each tribe uses its own language and there were few people who understand Arabic, hence, it was hard for them to give advice to the people. In addition, lack of transportation during referrals, especially for injured people, was one of the negative factors. However, on several occasions, some partners and NGOs took them in their vehicles. Moreover, a culture barrier was identified. Some men and the elderly still found it hard to share their cases with the youth. According to some youth leaders in Gumbo, the community also tends to have a general perception that YLs cannot resolve community issues, even though this issue has already been recognized and the situation improved after introducing a mentorship program by the leaders in the previous project. Lastly, a JCCP South Sudan officer revealed that there were some barriers for women to work for EWER because the community tends to think that preventing and resolving conflicts and violence in the community is a role for men.

(5) Coordination

Project activities were sufficiently coordinated with other institutions by following the principles of the cluster working group.

- **【Collaboration with other institutions】** There was collaboration with other partners in the referral pathways for services such as medical services, transportation, legal services, and PSS. Those partners also referred clients to the JCCP for conflict mitigation or resolution as well as SGBV/PSS.
- **【Participation in the cluster working group】** The project regularly participated in coordination meetings among partners at the national level and also at each project site, such as monthly national protection cluster meetings, bi-weekly protection sub-cluster meetings at each project site, and monthly SGBV cluster meetings.
- **【Principles of the cluster working group】** The project followed the principles of the cluster working group, such as the conflict-sensitive approach, trust by communities as a mediator, and continuous situational monitoring.

(6) Impact

The project produced direct and indirect positive impacts, such as the improvement of relationships among tribes and between the IDPs and the host communities. The project did not produce a negative impact.

- **【Indirect positive impacts】** There are some indirect positive impacts.
 - One of the positive impacts is the improvement of relationships among tribes and between the IDPs and the host communities in Mahad. Regardless of their tribes, people started to share food or properties, and care for a neighbor's child, which had never happened before. In addition, clients from the host community started trusting the community workers from IDPs in conducting PSSs.
 - In both Gumbo and Mahad, some children were able to go to school with the support of community workers. Throughout the project, community workers have supported not only the SGBV cases, but also other issues in the communities.
 - The post for community workers was a learning opportunity for some female community workers who could not attend high school.
- **【Positive impact from the gender perspective】** There were positive impacts from a gender perspective.
 - Some of the women shared positive opinions in both Gumbo and Mahad. For example, one interviewee

said that women did not previously have voices in the community, however, people have started to realize that women are much better at solving problems than men.

- Male community workers have gradually started to change their views and discriminations toward women by working together with female community workers.
- Gender issues among the families of project beneficiaries were made apparent, which is one of the crucial steps for gender streaming. Many female leaders, YLs, focal persons, and community workers faced some challenges, such as a lack of understanding from their husbands to work for the project and slander from the locals. Some male community workers shared their opinions on the difficulties for female community workers to work in the community.

(7) Observance of CHS/ Sphere Standard

The project was consistent with the CHS and Sphere Standards and considered minimum standards of mental health.

- **【Consistency with CHS/Sphere Standards】** The project consisted of the CHS/Sphere standards.
 - [CHS 4-2] The project developed a leaflet with friendly pictures.
 - [CHS 4-3, 5-2, and 5-3] Any feedback and complaints were shared at the monthly meeting and reflected in the activities. Confidentiality was maintained.
 - [CHS 5-5] Good teamwork was developed.
 - To not expose women and communities to further violence, some key principals were implemented in the project, such as confidentiality, physical safety of the victims, and nondiscrimination.
- **【Focus areas as per the Minimum Standards】** According to the JCCP, the project focused on point 2.5 of the Minimum Standards with regard to mental health.
 - [Key action 1] The JCCP established a cross-sectional working group of experts on matters related to PSS.
 - [Key action 2] The JCCP identified the needs and resources available, such as referral partners, and developed an activity plan based on them.
 - [Key action 3] The JCCP worked with local people, including marginalized people, to strengthen the community's self-help and social support. In addition to the leaders and YLs, community workers were selected from community members with various backgrounds and trained so that the JCCP could reach out to those who have been marginalized.
 - [Key action 4] The JCCP trained volunteers on basic psychological first aid methods.
 - [Key action 6] The JCCP made psychological interventions available to people with long-term stress.
 - [Key action 9] The JCCP worked on building a sustainable PSS to help locals respond to long-term crises.

3.2. PLAN Project

3.2.1. Achievements

(1) Achievements of Outputs

The achievement of each Output is shown below.

1) Achievement of Output 1:

Output 1: The latrine/people ratio in the camps improves in the target camps (Al Redis 1 and Al Redis 2).

<Indicators>

- 1-1. Number of household latrines constructed (Target: 500).*
- 1-2. Number of people who have access to constructed latrines and maintain them with soap and cleaning tools provided by the project (Target: 2,650)*
- 1-3. Percentage of households that recognize improvement of sanitary conditions including access and cleanliness of latrines (Target 80%)*
- 1-4. Number of people who participate in hygiene promotion events (Target: 350)*

Output 1 will be achieved. The latrine/person ratio improved, and the project has improved the recipients' sanitation.

- (Indicator 1-1) The number of household latrines was increased and reached the target figure (500) in Al Redis 1 and Al Redis 2.
 - The project constructed 500 latrines in total, 250 each in Al Redis 1 and Al Redis 2.
 - Since December 2018, a total of 1,837 latrines have been constructed by the project and three other donors (UNHCR, SHF/OCHA, and GFFP) in the camps. The contribution of the project to this achievement was 27% (500/1837).
 - The ratio of population per latrines has improved from 633.16 (person) to 14.2 (person) in Al Redis 1 and from 117.90 (person) to 21.20 (person) in Al Redis 2.
 - Although the ratio was improved by the project, increasing the number of newcomers to the camps may negatively affect the achievement.

Table 2-2-1: Number of Household Latrines in Al Redis 1 and Al Redis 2

| | Before the project (Dec. 2018) | | | <i>From Jan. 2019 to Apr. 2020</i> | End of April 2020 | | |
|------------|--------------------------------|------------|---------------------------------|--|----------------------------|------------|------------------------|
| | Number of Latrines (Total) | Population | Population per Latrine (people) | <i>Number of latrine newly established</i> | Number of Latrines (Total) | Population | Population per Latrine |
| Al Redis 1 | 18 | 11,397 | 633.16 | <i>810</i> | 828 | 11,611 | 14.02 |
| Al Redis 2 | 210 | 24,761 | 117.90 | <i>1,027</i> | 1,237 | 26,233 | 21.20 |
| Total | 228 | 36,158 | 158.70 | <i>1,837</i> | 2,065 | 37,844 | 18.33 |

- (Indicators 1-2) Over 2,650 people accessed household latrines and sanitary items.
 - A total of 500 households received household latrines from the project. The number of beneficiaries has not yet been confirmed by survey. However, based on the average number of households, it can be assumed that the number of beneficiaries reached the target of 2,650.¹⁸
 - All the recipient households were also provided sanitary items (ebriq¹⁹, child potty, small shovels, and brushes) and soap to maintain their sanitation by hand washing with soap and cleaning their latrines. They were sensitized to the importance of sanitation in latrines.
- (Indicator 1-3) Households that received latrines recognized the improvement of sanitation of their houses. They also improved the accessibility and cleanliness of latrines.

¹⁸ According to data from MB research, a total of 5.9 in each household in 2019.

¹⁹ Watering can for handwashing

- Access to latrines was improved because all the latrines provided by the project were constructed in the recipients' houses. The location of the latrines was decided based on a discussion with the recipients. The specification of latrines improved from a temporary one made of local materials to semi-permanent ones made of concrete. This was decided based on safety and durability and has been accepted by cluster members, including UNHCR. According to the interviews, all 12 informants were satisfied with the location and specifications of the latrines.
- However, some recipients prefer permanent latrines to semi-permanent ones because the latter construction can be affected by rainwater during the rainy season.
- The percentage of households that recognize sanitary conditions has not yet been confirmed. However, according to the regular visits and observations by the project staff, it nearly reached the target (80%). According to telephone interviews, all 12 informants recognized improvement of the sanitation in their houses.
- (Indicator 1-4) A total of total 4,464 people were sensitized about the necessity of sanitation through participating in a hygiene campaign (1,688 in Al Redis 1 and 2,776 in Al Redis 2).
 - Popular songs and drama were used for the awareness campaign. To enhance participants' understanding, the local language was used to deliver the awareness messages (80% local language, 20% Arabic).
 - From the planning stage of the campaign, community leaders participated in discussions about the approach.
 - Since mid-March 2020, the project has been unable to hold a campaign meeting because of government policy to prevent the spread of COVID-19. The project provided messages about the importance of hygiene to sensitize people on proper hand washing with soap and waste management by installing IEC materials in public places.
 - According to observations of a local partner NGO (El Masaar), about 98% of the people use latrines, which proves the improvement of sanitation in the target community based on the distribution of latrines and hygiene campaigns.

Table 2-2-2: Number of Participants in the Hygiene Campaign

| | Number of Participants in Campaign | | | | |
|------------|------------------------------------|------|-------|-------|-------|
| | Female | Male | Girls | Boys | Total |
| Al Redis 1 | 456 | 270 | 524 | 438 | 1,688 |
| Al Redis 2 | 671 | 461 | 885 | 759 | 2,776 |
| Total | 1,127 | 731 | 1,409 | 1,197 | 4,464 |

2) Achievement of Output 2

Output2: People receive quality health services thorough improvement of health facilities in target camps (Jouri and Alagaya) and the host community in Kosti.

<Indicators>

2-1. Number of people who receive improved health services at improved health clinics (Target: 150 clients/day)

2-2. Number of households who improve knowledge on health through door-to-door visits by trained CHWs (Target: 3,000 households)

Output 2 will achieved. People increasingly have access to quality health services in new health clinics in Alagaya and Jouri and the District Hospital in Kosti.

<Health Clinics>

- The project constructed new health clinics in Alagaya and Jouri.
 - The health clinics were improved from a temporary one made of local materials to semi-permanent ones.

- The new clinics are clean and have better sanitary conditions.
- The number of rooms and the size has been increased. The clinics have a delivery room, a small surgical operating room, an immunization department, a nutrition department, and a management office. Waiting rooms have also been built for visitors to avoid waiting under direct sunlight. The delivery rooms were also well organized and cleanliness was maintained.
- The new clinics improved their services.
 - Services provided in health clinics also improved, even though there was no newly installed equipment. The clinics provide services free of charge 24 hours per day.
 - Since the COVID-19 outbreak, the clinics provide a hand washing service. When visitors enter and leave the clinics, they wash their hands with soap and water.
- The number of visitors to the renewed health clinics has increased in the new clinics.
 - The number of daily visitors to the new clinics has been 185 in average since January 2020.

Table 2-2-3 Average of visitors to Health Clinics (Daily) from January to March in 2020

| | | | Jan | Feb | Mar | Apr | May | Total | Average |
|---------------------------|----------------|--------|------------|------------|------------|------------|------------|------------|------------|
| | Refugee | ≥5year | 20 | 11 | 26 | 11 | 13 | 80 | 16 |
| | Host Community | ≥5year | 4 | 3 | 7 | 3 | 3 | 22 | 4 |
| | Refugee | ≤4year | 63 | 39 | 66 | 28 | 33 | 229 | 46 |
| | Host Community | ≤4year | 16 | 15 | 25 | 13 | 11 | 80 | 16 |
| | Total | | | 103 | 69 | 124 | 55 | 60 | 411 |
| | Refugee | ≥5year | 41 | 29 | 26 | 18 | 25 | 140 | 28 |
| | Host Community | ≥5year | 20 | 14 | 13 | 9 | 14 | 70 | 14 |
| | Refugee | ≤4year | 64 | 37 | 30 | 27 | 42 | 200 | 40 |
| | Host Community | ≤4year | 29 | 19 | 17 | 15 | 23 | 104 | 21 |
| | Total | | | 155 | 99 | 85 | 70 | 104 | 512 |
| Total of Two Camps | | | 258 | 168 | 209 | 125 | 164 | 923 | 185 |
| Total (Refugee) | | | 188 | 117 | 147 | 84 | 113 | 649 | 130 |
| % (Refugee) | | | 73% | 70% | 70% | 68% | 69% | 70% | 70% |
| Total (Host Community) | | | 70 | 51 | 62 | 40 | 52 | 275 | 55 |
| % (Host Community) | | | 27% | 30% | 30% | 32% | 31% | 30% | 30% |

- The number of pregnant women who visited the clinics to receive maternal care increased. The average is 52.6 for pre-natal care and 35.6 for delivery in monthly average from January to May in 2020. According to observations by health staff and project staff, the number of children visiting clinics to receive immunization and nutrition services also increased.

Table 2-2-4 Average of female visitors for natal care from January to May in 2020

| | | Jan | Feb | Mar | Apr | May | Total | Average |
|--|----------------|-----|-----|-----|-----|-----|-------|---------|
| | Pre-natal Care | 16 | 6 | 28 | 30 | 26 | 106 | 21.2 |
| | Delivery | 9 | 3 | 16 | 5 | 10 | 43 | 8.6 |
| | Referral | 10 | 6 | 5 | 3 | 1 | 25 | 5 |
| | Pre-natal Care | 27 | 30 | 33 | 27 | 40 | 157 | 31.4 |
| | Delivery | 33 | 31 | 24 | 27 | 20 | 135 | 27 |
| | Referral | 17 | 2 | 8 | 14 | 12 | 53 | 10.6 |
| | Pre-natal Care | 43 | 36 | 61 | 57 | 66 | 263 | 52.6 |
| | Delivery | 42 | 34 | 40 | 32 | 30 | 178 | 35.6 |
| | Referral | 27 | 8 | 13 | 17 | 13 | 78 | 15.6 |

- CHWs also encouraged people to visit clinics through their door-to-door visits.
- People who live in the host community also have access to health clinics. Thirty percent of the visitors

is from host community. They have gained new opportunities to receive free health services at the clinics in their neighborhoods.

<Community Health Workers (CHWs)>

- In total, 30 CHWs were newly appointed in Alagaya and Jouri (15 in each camp).
 - The project prioritized women and planned to select 70% female CHWs because the majority of the message content was targeted at women and they also tended to show strong commitment to their work.
 - The selection of CHWs, which prioritized female candidates, was conducted through discussions with community leaders, COR. Although the community leaders nominated mostly men as candidates for CHW, the project promoted women’s participation.
 - Finally, 30 CHWs were selected. About 80% of CHW are women from refugee camps.

Table 2-2-5: Number of CHWs

| | Total | Gender | | Religion | |
|---------|-------|-----------|----------|-----------|--------|
| | | Female(#) | Male (#) | Christian | Muslim |
| Alagaya | 15 | 11 | 4 | 15 | 0 |
| Jouri | 15 | 13 | 2 | 15 | 0 |

- The capacity of the CHWs was developed through the training curricula authorized by the SMOH.
 - A five-day training program was provided for the CHWs in the respective camp. The training and manual were provided by the State MOH. The main contents are child health, personal hygiene, vaccinations, family planning, vector control²⁰, water management, and hand washing with soap.
 - Checklists for household visits and necessary items, such as materials and textbooks for raising awareness, were also distributed to the CHWs.
 - The SMOH recognizes CHWs as responsible for delivering messages about nutrition, immunization, health awareness raising, and medical consultations in their own language.
 - A workshop was also organized for the prevention of COVID-19 in March 2020.
- The door-to-door visits by CHW have increased refugees’ knowledge of health.
 - Since November 2019, 21,408 households received door-to-door visits by CHWs. The message from CHWs reached 86,478 people.
 - CHW encouraged pregnant women to visit health clinics regularly. As a result, the number of pregnant women who visited health clinics increased 17-20% according to observation by the staff at the clinics. The number of patients who gave birth at the renewed health clinic also increased according to the observation of field staff. (Also see Table 2-2-4)
 - After the outbreak of COVID-19, awareness of prevention of COVID-19 was raised through door-to-door visits by CHWs, such as preventing handshaking, maintaining social distance, washing hands with soap and water for 40 seconds, and sneezing into a tissue.
 - Regardless of the high achievement rate, CHWs were recommended to reduce the number of visits and increase the length of one visit to improve the quality of their service instead of counting the number of visits as achievements by the project.

Table 2-2-6: Number of Door to Door Visits by CHWs

| | Number of households | Number of Participants | | | | |
|---------|----------------------|------------------------|--------|--------|--------|--------|
| | | Female | Male | Girls | Boys | Total |
| Alagaya | 10,698 | 11,385 | 7,884 | 13,083 | 13,279 | 45,631 |
| Jouri | 10,710 | 10,341 | 6,312 | 11,446 | 10,948 | 39,047 |
| Total | 21,408 | 21,726 | 14,196 | 24,529 | 24,227 | 84,678 |

²⁰ Vector control refers to any method to limit or eradicate the mammals, birds, insects or other arthropods (also known as vectors) that transmit disease pathogens.

<District Hospital in Kosti>

- The project provided a total of 20 kinds of medical equipment²¹ to the hospital.
 - All the equipment was for obstetrical care and selected in coordination with UNPFA.
 - The new equipment has improved the quality of obstetrical services, which has made CBC checkups faster and more accurate. It increased the safety of delivery and even reduced fear of health cadres and staff to deliver because they can identify abnormal cases from CBC checkups before delivery. According to the observation of the hospital's staff, the blood test capacity by CBC has increased to 60%. The hormone tester is a new piece of equipment in Kosti.
 - However, the implementation is delayed, and some equipment has not yet been installed.
- The capacity of the hospital has improved because of the installation of new equipment by the project.
 - The project has improved the quality of its maternal care, such as follow-up and checking of pregnant women, safe delivery and surgeries, and pre - and post-delivery care.
 - SMOH recognizes that maternity care has improved after the construction of health clinics and the provision of medical equipment to the district hospital.
- Capacity improvement of the district hospital increased the quality of maternal and child care.
 - The number of patients did not increase because the hospital accepts only referred patients. The COVID-19 outbreak also negatively affected the number of visitors to the hospital. However, the quality of service has improved. It can provide services with higher quality and take less time because CBC checkups used to take longer as they were conducted manually at the hospital.
 - Refugees benefited from the improved capacity of the hospital. According to observations by staff, about 55% (5 of 9 cases) of patients referred to the hospital in a critical delivery condition are from refugee camps.

(2) Achievements of Goals

1) Achievement of Project Purpose

Project Purpose: To improve access of households to latrines in refugee camps and access of people to health facilities in refugee camps and host communities

<Indicators>

1. *Increase in the number of people who have access to latrines in Al Redis 1 and Al Redis 2*
2. *Increase of the number of people who have access to health facilities in the target areas (Health Clinics in Jouri and Alagaya or District Hospital in Kosti)*

The Project Purpose will be achieved through the project's outputs.

Through activities in WASH component the provision of household latrines improved the population ratio per latrine in the target camps. The project also enhanced awareness of sanitation by providing sanitary tools for maintenance of the latrines and hygiene campaigns.

Through activities in health component the project improved people's access to health facilities through the establishment of semi-permanent health clinics and the development of 30 community health workers in the target camps in Jouri and Alagaya. It also installed medical equipment at the District Hospital in Kosti.

- (Indicator 1) The number of people who have access to latrines and good sanitation has been increased by the project in Al Redis 1 and Al Redis 2.
 - The project provided household latrines and sanitary items to 500 households (250 each) in Al Redis 1 and Al Redis 2. The number of household latrines increased from 228 in December 2018 to 1,837 in April 2020.

²¹ Vital signs monitors; theater lamb; transport chair; stretchers; dressing trolley; suction machine; minors surgical set; ambubag ventilator; ultrasound machine; fetal doppler; glucometer; microscope; autoimmune assays (tosoh); centrifuge; automatic pipit; scale machine; dry bath incubator; stool for lab; multipurpose operating table; and hematology analyzer

- The ratio of the population per latrine decreased to 18.33 from 158.70 on average for the two camps. The ratio fulfilled the minimum standard (20).
- In total, 3,234 people improved their knowledge about sanitation through participating in a hygiene campaign by the project.
- (Indicator 2) The number of people who access health facilities has increased.
 - New semi-permanent health clinics are constructed in Alagaya and Jouri. These clinics have a greater capacity to provide health services, especially support for pregnant women, and immunization and nutrition support to children. The number of visitors to health clinics has increased. The number of visitors was 183 daily in average from January to May 2020. The number of pregnant women who visited the clinics to receive maternal care increased. The average is 52.6 for pre-natal care and 35.6 for delivery in monthly average from January to May in 2020.
 - Fifteen (15) community health workers (CHWs) developed their capacity to provide health and hygiene education to community members and encourage them to visit health clinics to receive professional services. In total, 21,408 households received door-to-door visits by CHWs.
 - The district hospital installed new equipment related to obstetric care. Because of the improvement in equipment, the hospital enable to provide better support to pregnant women with regard of quality and quantity.

2) Prospect of Achievement of Overall Goal

Overall Goal: Contribution to achievement of the Sudan Refugee Response Plan for South Sudanese January 2019 - December 2020

<Indicators>

1. *Improvement in the percentage of refugee households who have better access to latrines, and better knowledge on the proper use of latrines and prevention of water borne diseases (WASH Sector)*
2. *Number of women who deliver with assistance of qualified personnel in Kosti (Including camps)*

The project is expected to achieve its Overall Goal, which is a contribution to the achievement of RRP. The project activities are consistent with the plan. The outputs are to be maintained, although there are some concerns about its sustainability.

- (Indicator 1) The project contributed to the improvement of the household/latrine ratio.
 - An average ratio of the population per latrine has decreased (improved) to 18.33 from 158.70 in two camps from December 2018 to April 2020 (see Table 2-2-1). This ratio has fulfilled the minimum standard requirement of one latrine for every 20 people.
 - New latrines were constructed by the project and the other three organizations, such as UNHCR. The project provided financial support to 500 latrines out of the 1,837 newly constructed in the camps. The project's contribution is about 27% of the improvement. According to the ratio the project's contribution to WASH cluster was big.
 - The project also contributed to raising awareness in the community about sanitation and hygiene in their daily life.
- (Indicator 2) The project contributed to increasing the number of women who delivered with assistance of qualified personnel.
 - Construction of health clinics improved women's access to pre- and post-natal care and safe delivery.
 - The number of delivery has not increased dramatically because of the influence of COVID-19 pandemic in the new clinics of Jour and Alagaya (see Table 2-2-4). However, the SMOH recognizes that the quality of delivery services has improved after the construction of health clinics and the provision of medical equipment to the district hospital in Kosti. This proved that the contribution of PLAN project to health

cluster was highly recognized by stakeholders.

(3) Inputs

The project's input was verified based on the budget and assignment of staff.

1) Budget

The total outlay of the project budget was JPY 95,544,384. Of this allocation, JPF's budget was JPY 90,399,999, and PLAN's budget was JPY 5,144,385. In other words, 94.6% was covered by the JPF budget. At the end of April 2020, the project has two months left until its termination, and 28% of the project budget was available to be used during the remaining period. Of the JPF budget, 61.4% of was used for direct project activities, and 38.6% was for indirect activities. The project's contribution was also affected by the restriction of transportation for international staff. Only 12% (JPY 0.6 million) of the transportation fee was expensed because of the cancelation of Japanese project staff. Allowance for international staff (JPY 3,692,400) was also waived. These amounts will be available for a direct activity for the cost of additional activity related to COVID-19.

Table 3-2-5: Project Budget (Plan and Actual) at the end of April 2020 (Unit: JPY)

| | Plan | | | Actual | | | Actual/Plan |
|------------------------|------------|------------|-----------|------------|------------|-----------|-------------|
| | | JPF | PLAN | | JPF | PLAN | |
| 1. Project Site | | 80,486,838 | 2,199,600 | | 58,801,450 | 1,067,264 | 73% |
| 1) Direct Activity | 55,499,355 | | | 47,298,645 | | | |
| 2) Transportation | 4,902,070 | | | 602,236 | | | |
| 3) Management | 20,085,413 | | | 10,900,569 | | | |
| 2. Management in Japan | | 4,513,820 | | | 4,139,151 | 0 | 92% |
| Subtotal | | 85,000,658 | 2,317,320 | | | | |
| 3. Administration | | 4,024,341 | 2,827,065 | | 62,940,601 | 1,067,264 | 92% |
| 4. External Survey | | 1,375,000 | 0 | | 2,364,932 | 0 | 0% |
| Total | | 90,399,999 | 5,144,385 | | 65,305,533 | 1,067,264 | 72% |

2) Staff

The project was managed and implemented by Plan International Japan, Sudan, and El Masaar, its local partner NGO. In total, 12.00 MM of human resources were allocated to the project. In the original plan, a Japanese staff member was to be assigned. However, Plan Sudan took over the responsibility of this staff member because this Japanese manager was not assigned for security reasons. The total MM was reduced from 12.10 to 11.60 MM.

Table 3-2-6: Project Input (MM)

| | Plan | | Actual | |
|---------------------|-------|----|--------|-------|
| | | | Sudan | Tokyo |
| Sudan Side | 11.00 | MM | 10.50 | 0.00 |
| International Staff | 1.00 | MM | 0.00 | 0.00 |
| Locally Hired | 10.00 | MM | 10.5 | 0.00 |
| Local NGO | 4.55 | MM | 4.55 | 0.00 |
| Plan Kosti | 4.00 | MM | 4.5 | 0.00 |
| Plan Khartoum | 1.45 | MM | 1.45 | 0.00 |
| Japan Side (Plan) | 1.10 | MM | | 1.10 |
| Total of Staff | 12.10 | MM | 11.60 | |

3.2.2. Evaluation based on Evaluation Criteria

(1) Relevance/Appropriateness

It is judged that the project is relevant to the needs of the target, and its approach is appropriate to the target's situation.

- **【Needs of the target area and society】** The project matches the needs of the target area and society.
 - Donor support to South Sudanese refugees in the camps in White Nile has provided for a multitude of humanitarian needs. However, financial support has not increased even though the number of refugees started increasing in the area in 2017.
 - The number of implementing partners of UNHCR and their activities was not enough to provide support to the refugees in White Nile State.
- **【Needs of the target group】** The project matches the needs of the target groups.
 - Because of limited support, the refugees had to stay in an impoverished environment in the area. The hygiene and health conditions were below the minimum standard set by the Sphere.
 - WASH component: Household latrines were critically needed because the ratio of population to latrine was 633.16 for every latrine in Al Redis 1, and 117.90 in Al Redis 2, which were far below the minimum standard. Because of the limited number of latrines, people had to use a communal toilet far from their house.
 - Health component: The condition of health clinics was very poor because the buildings were temporarily constructed with bamboo and straw in an open area (without a proper wall), and wastewater and other litter stayed on the floor. The quality and quantity of services provided to patients in clinics were also limited as they lacked facilities. There were limited opportunities for people to receive proper information regarding maintaining good health and sanitation. Many women had delivered children without medical facilities. District hospitals did not have enough technical capacity to provide medical support for high-risk deliveries, even though these hospitals were referred by camps and host communities in Kosti.
- **【Consistency with policies】** The project is consistent with the Sudan Refugee Response Plan (RRP) for South Sudan between January 2019 and December 2020, which was developed by UNHCR.
- **【Approach to meet the target area's needs】** The project is designed to improve the situation in the target area.
 - WASH component: The provision of household latrines improves not only the population to latrine ratio but also the refugees' hygiene condition. The provision of household latrines can motivate the users to maintain sanitation as their owner. They can secure the safety and privacy of the users and contribute to improving the sanitation of the target communities by reduction of open defecation.
 - Health component: There was a high demand for the construction of new health clinics in Alagaya and Jouri because the conditions of the existing clinics were appalling and required renovation. Door-to-door visits by CHWs can improve people's access to information about healthcare and health services. People lived in poor hygienic conditions, and pregnant women did not receive proper medical support because of limited knowledge and information in the camps. The provision of medical equipment for obstetric care strengthened the capacity of the district hospital. However, the hospital did not have enough capability to provide medical support to high-risk deliveries.

(2) Connectedness/Sustainability

It is judged that the project has taken action to cope with middle- and long-term issues by being connected with the activities of cluster members. It also takes action to secure the sustainability of its intervention. However, financial sustainability is unclear with regard to latrines and CHWs' activities.

- **【Connectedness with other projects】** The purpose of the project is to be connected with the ongoing health project implemented by Plan International Japan in the target area.
 - The project is associated with "Hygiene and health promotion activities" by Takeda Pharmaceutical Company Limited from 2018 to 2021 (Plan/TAKEDA project). The Plan/TAKEDA project enhances WASH, health, and nutrition services through the development of human resources, such as CHWs and nutrition volunteers.

- **【Connectedness of longer-term problem】** The project takes in the longer-term and interconnected problem of the target area into account.
 - Plan International is an implementing partner of UNHCR in 2019 and 2020 and an active member of the WASH and health cluster meetings. All activities, including the project in the camps, are organized in cluster meetings.
 - The approaches taken by the project are based on considerations of longer-term needs of the refugees, especially their need for sustainable facilities in better conditions, such as the provision of household latrines under the WASH component and construction of semi-permanent health clinics with durable materials in the health component.
- **【Sustainability of health activities】** All the activities will be monitored and followed up even after the termination of the project.
 - All activities, including the activities of the project in the camps, are organized in cluster meetings facilitated by UNHCR. The activities are consistent with the “Regional RRP for South Sudan.”
 - Plan International Japan will stay in the target area even after the termination of the project and continue working in the camps for the Plan/TAKEDA project.
 - The project may extend the project period as the Plan International Japan has been preparing proposal for an additional year.
- **【Sustainability of latrines】** Latrines will be maintained even after the project, although there is some concern about their financial sustainability.
 - Latrines were handed over to CoR and maintained daily by the recipient households under their supervision.
 - The project provided sanitary items (ebriq²², child potty, small shovels, and brushes) and soaps to the beneficiaries, who were trained to use the latrine, clean it with the distributed items, and wash hands. Soaps were regularly distributed by UNHCR.
 - The project implemented campaigns, raising awareness in the target camps (Al Redis 1 and Al Redis 2) and provided knowledge about maintaining hygiene control.
 - However, the financial sustainability of the provided latrines is not sufficiently ensured because the recipient households are required to bear costs for maintenance, and repair and replace sanitary items. To sustain the latrines without additional cost, the project has selected sustainable materials, and raised the awareness of recipients about the importance of daily maintenance.
- **【Sustainability of health clinics】** Health clinics will be maintained by respective organizations even after the project.
 - Health clinics were handed over to the SMOH and CoR immediately after construction. They are operated by medical staff hired by the SMOH and SRCS.
 - The medical staff members were not required to gain additional technical skills in the new health clinics because the project renewed the facilities but did not provide any medical equipment.
 - Health clinics are maintained by the SMOH and SRCS. According to the SMOH, it has allocated the required budget to maintain the clinics. However, a drastic increase in demand due to the influx of visitors from the host community may negatively affect its financial sustainability because the services are free of charge.
 - The increase in cost caused by the increasing number of refugees coming into the camps may negatively affect the capacity of the clinics’ operation as well.
- **【Sustainability of District Hospital】** Equipment provided to the Kosti District Hospital is to be maintained even after the project.
 - The medical staff members have the required technical skills to use newly provided equipment because

²² Watering can for handwashing

the project provided equipment items that complemented the existing ones, instead of providing different ones. Therefore, the staff members are not required to acquire any additional skills for the project's intervention.

- Financial sources include the medical fee paid by the patients and the budget allocated by the SMOH. According to the SMOH, the hospital possesses sufficient financial resources to maintain its facilities and educate its staff.
- The hospital has issued an official letter to Plan International Sudan to confirm its financial responsibility for the maintenance of the renewed equipment provided by the project.
- However, the increase in cost caused by the influx of refugees may exceed the hospital's financial capacity for maintenance because the services to refugees are free of charge.
- **【Sustainability of CHWs】** CHWs will be supported by the SMOH, but may not continue their activity if financial support is not provided as daily incentives.
 - CHWs are responsible for providing technical information to people in their language on behalf of the SMOH. CHWs are selected after consultation with local authorities and the SMOH. Then, the SMOH provides the training curriculum and materials to CHWs, who were certified by the SMOH. CHWs are even equipped with materials for the community's health education by the SMOH, funded by the project.
 - Therefore, CHWs have the technical capability to conduct their activities even after the completion of the project. However, their activities may not be sustainable because of the lack of funding after the project. CHWs receive monthly incentives from the project even though they are volunteers. The incentive is the only source of income for many CHWs.
 - The incentive for CHWs is covered by the project budget. By 2021, it can be covered by the Plan/TAKEDA project. After the Plan/TAKEDA project, CHWs may not be able to continue their project activities, such as door-to-door visits in camps because of lack of financial incentives. However, they will be able to use their technical knowledge and capability as a community leader, such as for providing medical advice to their neighborhood on a day-to-day basis.

(3) Efficiency

It was judged that the project was required to change its management system because of unexpected security issues. However, it has been efficiently implemented through the partnership with local NGOs.

- **【Implementation of activities】** The project activities were delayed because of security issues on account of COVID-19. The project period has been extended for a month and would be terminated by the end of June 2020.
- **【Monitoring system】** The project activities are monitored smoothly under the monitoring system agreed upon between Plan International Japan, Sudan, and the local partner NGO (El Masaar).
 - The inaugural (kick off) meeting was held in Uganda, the annual activity plan, the approaches for the plan, and indicators for monthly monitoring were agreed upon by the stakeholders.
 - Frequent field visits were conducted by the project staff (Plan International and El Masaar, the partner NGO) to monitor CHWs, clinic staff, and government officials to manage the activities.
 - Japanese manager and Sudanese staff conduct regular Skype meetings to discuss weekly plans, challenges, and long-term plans. Plan Sudan reports its progress weekly to Plan International Japan.
 - The project staff members also have weekly meetings with the El Masaar in Kosti.
- **【Partnership with a local NGO】** Cooperation with El Masaar was smooth.
 - In Sudan, all international organizations are required to associate with a local partner. The project has worked with El Masaar from the initial stage. El Masaar participated in the inaugural meeting of the project in Uganda and contributed to the selection of monitoring indicators and the establishment of a monitoring system.

- **【Challenges in management】** The project had to address security issues of its management system.
 - The project planned to assign a Japanese manager in Kosti. However, the project had to change its management system from direct management by the Japanese manager in Sudan to remote management from Japan. The Japanese presence has become a bit weak
 - The remote management strengthened the capacity of the Sudanese staff, even though it was not being monitored by a Japanese manager.
 - Plan International Japan communicates with Plan International Sudan through frequent reporting. The frequent reporting helps in smooth communication between the two organizations. However, Plan International Sudan perceives this frequency as high demand and a burden. Poor Internet connection sometimes adversely affects remote project management by Japan and Khartoum.
- **【Sufficiency of input】** The project activities have sufficient content to produce the outputs, and the project's input was sufficient to a certain extent.
 - The project activities were implemented within the financial allocation of Plan.
 - There is only one vehicle for the project, which covers four communities located on both sides of the river Nile. There is no bridge across the river to reach camps on the other side. Therefore, one car was not sufficient to conduct all the activities in the four target camps.

(4) Effectiveness

It was judged that the project coped with unexpected security issues and implemented its activities effectively to achieve its goals. Coordination with other organizations, including UNHCR, the SMOH, and local authorities through cluster meetings, helped achieve the goals.

- **【Achievement of goals】** The project goals are to be achieved based on the results and outputs following the planned logical framework. The project was affected by the issues listed as important assumptions to the achievement of the Project Purpose. However, it managed to overcome the negative impact and achieved its purpose with an extension of the project period by a month.
- **【Influence of important assumption and external factors】** The project activities were delayed because of security issues in Sudan. However, the project will overcome the delay in completing the activities.
 - The project activities were suspended for two months after a large armed operation was launched against the former government's demonstration groups, causing over 200 deaths in June 2019. The Japan-based project manager was affected by this issue and did not visit the project site.
 - The Japanese manager could not conduct field visits because of COVID-19, which affected monitoring and the evaluation of the project.
- **【Enhancing Factors】** The following factors enhanced the achievement of the project goals.
 - A well-established relationship with local government (SMOH) and camp management (CoR) authorities enhanced the project activities. This relationship was established from previous activities in the targeted areas.
 - Good coordination with other organizations through participation in the cluster meetings
 - Coordination between refugees and host communities to address and alleviate the root cause of community-level conflicts was an enhancing factor. Its features include support to the District Hospital, selection of CHWs, and acceptance of visitors to the new health clinics from host communities.
 - Improving ownership of the local authorities by handing over the facilities constructed by the project to them, such as latrines to CoR and health clinics to CoR and the SMOH
- **【Inhibiting Factors】** No factors are found that inhibited the achievement of the project.

(5) Coordination

It is judged that the project is well organized with other institutions through cluster meetings, based on PLAN's long-term experience in the target area.

- **【Coordination with other organizations】** The project activities are well coordinated with other institutions providing support to the refugees in the target camps through cluster meetings.
 - All activities in camps are coordinated under WASH or health clusters, which are co-headed by the UNHCR, CoR, and the SMOH. As the cluster system in White Nile is working well, the project was able to reach the most remote place and population through coordination with those cluster members.
 - The implementing organization, Plan International Japan or Sudan, implements two projects in the target camps: this project and the Plan/TAKEDA project. These two projects are implemented to complement each other and create synergy. The project strengthens infrastructure while the Plan/TAKEDA project enhances the capacity of human resources to ensure the sustainability of the technical capacity.
 - The project coordinates with international organizations such as WHO in the health sector at the state level, UNICEF in WASH Sector at the state level, and UNFPA in District Hospital.
- **【Cooperation in each activity】** The project works with other organizations at the activity level.
 - WASH component: Regarding specifications, the project selected latrines that are of high quality and durable, although expensive in comparison with the specifications provided by UNHCR. Therefore, the project coordinated with UNHCR for acceptance of the required specifications.
 - Health component: In Alagaya, home visits are also conducted by local NGOs, namely CAFOD. To avoid overwrapping of activities, the project met CAFOD and agreed to combine the messages in the health sector through door-to-door visits.

(6) Impact

The project produced positive impacts on sanitation and health condition and contributed to gender equality at the grassroots level.

- **【Expected positive impacts on sanitation】** The project produced positive effects by providing latrines.
 - Open defecation decreased after providing latrines, which contributed to the improvement of sanitation in the target camps.
 - Water-borne diseases among children decreased because of improvements in hygiene conditions. Flies were reduced because of frequent maintenance of latrines with sanitary kits.
- **【Positive impacts on gender equality】** The project elevated the social status of women who were disadvantaged.
 - Access to household latrines eliminated women's disadvantaged situations, such as risks of sexual violence while visiting remote communal latrines and or open defecation and the physical and emotional burden of defecating only twice a day.
 - In the new health clinics, construction of children's rooms and a waiting space under the shade reduced the burden faced by pregnant women and mothers with babies and children.
 - Female CHWs managed to reach out to more women to educate them about sanitation and health, especially about maternal healthcare and immunization of children. The contributions of the female CHWs helped identify the capability of women. The CoR had selected only men as CHWs at the initial stage of the project.
- **【Unexpected positive impacts】** The project produced the following unexpected positive impacts.
 - The project produced synergy effects between the two components. Beneficiaries of the WASH component indicated behavioral change and even enquired about health services such as family planning, immunization, and family planning tools.

- The stakeholders have recognized the project's contribution to the health sector. Therefore, the CHWs are assigned to distribute messages for raising awareness about COVID-19 on behalf of the SMOH even under curfew. CHWs contribute to raising awareness and prevention of COVID-19 by delivering information on COVID-19.
- The relatively wide coverage of the project activities, such as two components targeting four camps among seven, enhanced the recognition by the stakeholders, especially UNHCR and CoR.
- People in the host community have access to better medical services that are free of charge and closer to their residence owing to the establishment of new health clinics.
- **【Negative impact】** The project did not produce any negative effects.

(7) Observance of CHS/ Sphere Standard

The project has shown a commitment to CHS in planning and implementation of the activities, and Sphere Standards related to WASH, safe settlement, and health.

- **【Commitment to CHS】** The project was consistent with CHS, appropriate, and relevant as a humanitarian response, especially where the following standards were considered.
 - [C-1, C-4] The project was planned based on interviews with various stakeholders including the target community. The project's field activities were implemented by its local NGO partner. Each process was decided based on consultations with respective local organizations and community leaders, such as the selection of recipients of latrines in the WASH component and CHWs in health component.
 - [C-2] The project responded swiftly to COVID-19 and included sanitary education to the health activity (door to door visits by CHW).
 - [C-3] The project handed over the constructed facilities such as the health clinics to the respective local stakeholders such as CoR and the SMOH. During project activities, the most vulnerable people (female-headed households) were selected as recipients of latrines. The conflicts among different tribes were considered during the selection of CHWs and workshop venues.
 - [C-6] The project activities were coordinated with other organizations working in the camps through cluster meetings (WASH and Health) facilitated by UNHCR.
 - [C-8] For stakeholders such as project staff and the partner NGO (El Masaar), the project held a seminar on safeguarding children and youth and fraud prevention. The project also paid attention to the security of its staff members, especially CHWs. The project adhered to the state policy to secure the safety of service providers.
- **【Commitment to Sphere Standards】** The project is implemented to improve sanitation of target camps to meet Sphere Standards in the WASH, Shelter and Safe Settlement, and Health components.
 - [WASH] The project provided latrines and education on sanitation. In addition, the project provided additional sanitation information to prevent mass infection of COVID-19 in the target camps.
 - [Shelter and Safe Settlement] The project provided latrines to meet the standard on minimum population per latrine. The provision of latrines and sanitation education helped improve the residential environment in the camps.
 - [Health] The project improved health services by constructing semi-permanent health clinics and provided medical equipment to the District Hospital to provide better pre- and post-natal care to the refugees and people in the host communities. The sanitary education against COVID-19 has also contributed to health services for the target people. The provision of latrines improved people's health conditions by removing their burden to access remote communal latrines.

4. FINDINGS

4.1. Lessons Learned

4.1.1. Implementing Process

(1) Use of Project Funds

Both projects spent the funds from JPF in a transparent manner. However, it was difficult for both projects to follow their original plans developed at the stage of writing project proposals regarding expenses. The following lessons have been learned from the verification of the target projects' inputs.

- Need for increasing budget's fungibility while maintaining project's transparency
 - Although both NGOs implementing the target projects have had experience in the area and possess enough information and resources, it was difficult for them to establish the budget appropriately and implement required revisions.
 - The JCCP project could not use the allocated resources fully and executed only 59% of its budget for implementation at the project site. It added activities in an additional project site three months before its termination. However, this gap was caused by the cancellation of experts' transportation from Tokyo and Kenya for security reasons.
 - PLAN spent 72% of its budget within 11 months. Its project period has been extended by one month and will be terminated by the end of June 2020. The funds for the transportation of Japanese manager and international expert has not been utilized because of influence of security issues and COVID-19. During the extended period, the project will use the funds on its additional activity related to COVID-19 which is not included in the original project plan.
- Efficiency of project implementation in the longer term (multiple-year project implementation)
 - The JCCP project was implemented only for 8.5 months, from mid-July 2019 to the end of March 2020. The project aimed to develop the capacity of the target community and build a community-based system related to sensitive issues on SGBV/PSS and EWER. Although the project achieved its target, it was too short a period for the project to make it a sustainable system, which works without support from the project.
 - The PLAN project was to be implemented for 12 months. However, the security issue required the project to be suspended two months earlier, and prevented the Japanese manager from visiting the project site in June 2019. The project has also been affected by COVID-19 since mid-March 2020. One year is not long enough to fill the gaps caused by these issues. Therefore, the project requested a one-month extension to complete its activities by the end of May 2020.

Both projects, which are humanitarian assistance ones targeting unstable refugee camps and implemented within a year, faced external factors related to security. It also requires a sensitive approach to develop capacity in communities by taking time to consider various beneficiaries' needs. Therefore, it is better to accept a multiple-year (not single-year) scheme to allow the implementing NGOs to secure project funds to conduct activities and establish sustainability. While maintaining transparency, the flexibility of budget allocation among budget categories enables projects to target unstable situations efficiently.

(2) Commitment to Humanitarian Principles and Standards

Both projects were committed to the CHS in planning and implementation of the activities, and Sphere Standards. The following factors helped implement the projects' activities in line with the CHS and Sphere Standards.

- Established networking among stakeholders
 - Through previous projects in the target areas, both projects established networking among stakeholders

- such as target communities and other institutions.
- The established network enabled both projects to implement their activities even though they had limited time at the preparation stage. The network enabled the projects to collect information on the needs of people and the selection of the beneficiaries.
 - In the JCCP project the network enabled the projects' activities to set off the referral system for the victims of SGBV and violence. For example, some partners or NGOs transported clients by their vehicles several times, while they introduced SGBV victims to the project.
 - In the PLAN project, establishment of networks among support providers in the target area enabled the projects to coordinate with other institutions. The recognition of the activities by cluster members allowed the project to implement additional activities in response to the urgent need for preventing the spread of COVID-19 even through other project activities were banned in the target camps. CHWs were effectively selected through discussion among the projects, CoR, and community leaders by the facilitation of the local partner NGOs.
- Consideration of conflicts among targets
 - Each project adopted approaches that are appropriate to the location and situations by considering conflicts among target population.
 - In the JCCP project, the selection criteria of direct beneficiaries were developed in advance to avoid bias toward specific tribes. Moreover, the project encouraged leaders, YLs, and community workers to cooperate beyond their tribes or IDPs and host communities. Additionally, the project promoted direct beneficiaries to cooperate through the project. Therefore, there was a change in the communities, and people started sharing food or material goods and caring for a neighbor's children, which had never happened before.
 - In the PLAN project, the target tribal formations were considered for selecting CHWs and recipient households of latrines. The project made the selection process of CHWs transparent and involved people with various socio-cultural backgrounds. In Alagaya, the project selected a CHW from each block in the camp because blocks stand for the residential area of refugees in South Sudan. Even the number of CHWs was decided according to the population of each block.
 - The PLAN project also considered the tribal issues in the selection of the workshop site. The capacity development workshop for CHWs was to be implemented together for Alagaya and Jouri. However, it was implemented separately because of the conflict between the Shuluk tribe living in Jouri and the Nuer tribe living in Alagaya.
 - Partnership with a local NGO
 - In Sudan, all international organizations are required to work with a local partner. The PLAN project activities were implemented by its local partners. The partnership enabled the project to implement its activities considering local needs carefully, such as the consideration of tribal conflicts in the selection of the workshop site. Experience in understanding the target area and issues could be useful in the selection of the partner. It could also secure the sustainability of the project activities, even though the partner NGO did not have any plans of taking over and continuing the project activities.

The established network in the target area enabled both projects to implement their activities even though they had limited time at the preparation stage. Consideration of conflicts among target population enabled the projects' implementation in accordance with the CHS. The partnerships with local NGOs enabled the project implementation considering those socio-cultural issues hidden from outsiders (not local stakeholders).

4.1.2. Involvement of and Direct Impact to the Beneficiaries

(1) Beneficiaries' Satisfaction to the Projects' Outcomes

The information on the satisfaction of the projects' beneficiaries is scarce for this TPM because the team was not able to speak to the direct and indirect beneficiaries (end-users of provided services) face to face during data collection. Beneficiaries of the PLAN project expressed their satisfaction with the project's outcomes in the following responses to telephone interviews.

Table 4-1 Recipients' Perceptions of Latrines

| Satisfaction | Concern/Dissatisfaction |
|---|---|
| <ul style="list-style-type: none"> • (A1-M1) The latrine is good, strong, durable, and its room is spacious. There is a seat for the latrine hole, with the marked location of legs to help drop defecation directly to the pit through the hole. The hole of the latrine is neither too large nor too small. • (A1-F4) I am satisfied with the location of the latrine because I selected location of the latrine and it is far from the kitchen and living rooms. • (A2-M1) Yes, the specifications of the latrine are good, and I am satisfied with it, because the pit construction and concrete are strong and durable, much better than the previous latrines that broke in the Al Redis 1 camp. • (A2-F3) I am satisfied with the latrine location because it is far from the kitchen and home rooms, and my husband and I selected this location and the contractor engineer agreed to it. • (A2-F4) Now, I am happy, relaxed, and comfortable. I was tired of going regularly to practice open defecation, which is incorrect, unacceptable, and unhealthy. | <ul style="list-style-type: none"> • (A1-F3) Yes, I am satisfied with the latrine specifications. However, I expected the superstructure built with permanent materials to protect the toilet seat from rain. • (A2-M1) The latrine specifications are good, and I am satisfied. However, the superstructure is built with local materials that will last only one to two years. • (A2-F3) I requested the contractor engineer to make the depth of the latrine 4 meters instead of 3 meters. However, he said that I must make this request to the management, and the management denied the request. |

*Quoted from interview notes

Twelve latrine recipients were interviewed (six each in Al Redis 1 and Al Redis 2). According to the interviews, beneficiaries were satisfied with the specifications of the latrines constructed in their house. Although they expressed a preference for more durable ones, they were satisfied with the specifications. Direct consultation regarding their needs resulted in their satisfaction even though expectations were not fully met.

Table 4-2 Beneficiaries of Health Services

| | Satisfaction | Concern/Dissatisfaction |
|----------------------------|---|---|
| CHWs Door to Door Visits | <ul style="list-style-type: none"> • (J-F1) Yes, I feel so happy when CHWs visit me, because they provide me with information to prevent diseases and stay healthy, and I take the opportunity to ask them questions about daily health practices. | <ul style="list-style-type: none"> • none |
| Visitors to health clinics | <ul style="list-style-type: none"> • (A-F3) Yes, the clinic is very clean. The waiting place is a very comfortable shelter because it is protected from the sun. Previously, there was no proper waiting place, and people waited in the sun. It was crowded and there were few seats for waiting. • (A-F4) Since the COVID-19 outbreak, an awareness campaign has been conducted. Visitors are required to sit on the floor to avoid crowding and physical closeness. There are also services for washing hands with soap and water distributed at four wash points. • (J-F2) There are good treatment as well as drugs for pregnant women and immunization for children. | <ul style="list-style-type: none"> • (J-M4) Types of drugs available are insufficient. The clinic has no drugs for malaria; such drugs run out quickly if people buy them. • (J-F1) The health clinic provided me with services and met my need. However, there are some gaps such as the lack of free-of-charge drugs currently. In addition, when they diagnosed me for treatment, they advised me to buy drugs from a commercial pharmacy in the market. |

*Quoted from interview notes

There are ten recipients of CHW's door-to-door visits, and those who had visited the health clinics were interviewed for this TPM (five each in Alagaya and Jouri). The end users expressed satisfaction with the improved

health services by the project. The project focused on pre- and post-natal care and delivery among health services, which produced a positive impact on the beneficiaries. However, the users expressed dissatisfaction with the other services, such as malaria care. Malaria could also become the root cause of diseases in pre- and post-natal care. It could also directly benefit both women and men in the target area. In this case, “obstetrics care” was found to be a practical approach for a project using limited resources effectively, but comprehensive health care could produce greater satisfaction in the beneficiaries. It can be realized by cooperation with other projects.

(2) Direct impacts to the beneficiaries from gender perspective

Both projects produced various positive impacts, especially on gender equality in addition to the projects’ outcomes. The following are the factors promoting gender equality in the projects.

- Enhancement of women’s participation
 - The PLAN project planned to select 70% women as CHWs because much of the message content targets women. However, the CHWs nominated by CoR and community leaders were only men. The project discussed the selection criteria, which promoted women’s participation with the leaders and convinced them to accept it. Finally 80% of CHW was selected among women. Female CHWs could reach more women to deliver information on sanitation and health, especially regarding maternal care and immunization of children. Active contribution by female CHWs improved recognition of women’s capabilities by CoR.
 - In the PLAN project, disadvantaged groups, including households headed by women, are prioritized in the selection of latrines’ recipients. Access to household latrines removed women’s challenging situations, such as risks of sexual violence while visiting remote communal latrines and/or open defecation, and physical and emotional burden of defecating only twice a day. Women’s decisive participation in the construction of latrines and hygiene campaign also established their ownership of the latrines and motivated them to maintain sanitation.
- Involvement of both male and female beneficiaries
 - The JCCP project involved both male and female community workers although many projects working on SGBV tend to hire only female community workers. In the context of the areas where gender discrimination is severe, it was found that the involvement of male community workers in the SGBV issues is one of the useful approaches. In the seven months of the project, the performance of female community workers was better than their male counterparts. However, some male community workers gradually started to change their views about discrimination against women by working with female community workers.

To produce a positive impact on gender equality, women’s positive participation is crucial. However, intervention to both male and female targets is effective. Even in the selection of service providers, the mixed team of women and men could help reduce men’s biased perceptions about women’s capacity.

4.1.3. Others

(1) Project Planning

Capacity building and development of a sustainable community-based system often take time before producing a tangible impact. JPF may need to design a project that meets capacity development needs, which may require intervention that is on a longer-term basis than a single year. As capacity development is crucial in building resilient communities, JPF may need to consider a multi-year funding framework. However, the contract with JPF is only for a year in this program. Given these conditions, it is necessary to develop a proposal that can see the effects and impact of sustainability in a year.

(2) Evaluation criteria

Evaluation criteria must be set up to verify the achievements of a project realistically. In the JCCP project, capacity building was to be completed within a year. However, it was hard to see the impact and sustainability within the limited project's period. Thus, the JPF and an implementation agency must establish a project plan meeting the requirements to achieve the project's purpose and set up evaluation criteria realistically to assess the impact and sustainability produced by the project activities from its start.

4.2. Recommendations

(1) Recommendations to JPF

- Continuous support to the issues (SGBV) targeted by the JCCP project

The need for support among COVID-19 patients and victims of SGBV and other types of violence is expected to increase even after the project period. OCHA reported that women and young girls are at an increased risk of violence during the COVID-19 pandemic, and access to SGBV support will be minimized owing to restrictions in movement and resources being diverted to fight COVID-19. Conflicts among young people or tribes may also occur. The roles of leaders, YLs, and community workers are becoming crucial in the communities. It is recommended that JPF provide continuous support activities that prevent SGBV violence and securing victims of SGBV and other types of violence in the refugee and its surrounding communities. Because of the current high demand, remote management would be one of the options.

- Clarification of Overall Goal and Project Purpose by introducing standard PDM/log frame

The format describing a logical frame adopted by JPF do not have information enough to apply to project evaluation. The project activities were well described in details, and activities were logically linked to outputs in the format. However, the information regarding the impact and outcome is limited in the project proposal and other documents. In the case of JCCP project, the project was planned for three years by JCCP (REALs) and funded only for the first year by JPF. The evaluation team and JCCP agreed on understanding the comprehensive (three year) project's target as overall goal and the target of the first year funded by JPF as project purpose. However, it was not clear what was aimed to achieve within the target period. Therefore, JPF is suggest that it adopt comprehensive logical frame including information the Project Purpose and the Overall Goal and its indicators, such as Project Design Matrix (PDM) adopted by JICA. It will help not only the evaluators but also the project's stakeholders to understand the aims and verify its achievement.

(2) Recommendation to implementing NGOs

- Continuous support of Reach Alternatives (REALs: the former JCCP) to the activities

The activities implemented by the JCCP project would be essential for and demanded by the target communities. Access to SGBV-related services or other public services would be limited, as resources have been diverted to fight COVID-19. Leaders, YLs, and community workers are more important for the communities in this situation. Juba-based JCCP officers have shown their willingness to support the communities as volunteers, and JCCP keep recruiting social workers. REALs has agreed to continue their activities even without funding from JPF.

- PLAN's action to secure the sustainability of the project's outcomes

[WHS component]

Household latrines will be maintained by the recipients' households. The PLAN project built the latrines, and transferred their ownership the households so that they would maintain the latrines; the project provided the households with technical skills and tools for maintenance. The project should follow up on the condition of

latrines in the coming rainy season as it interferes with the sustainability if the harsh conditions deteriorates the latrines to a point where professional rehabilitation is necessary.

[Health component]

CHWs trained by the PLAN project are widely accepted by the community and other service providers, including the SMOH and CoR. It is recommended that the project initiate action to secure the sustainability of their activities in cooperation with the Plan/TAKEDA project. Financial security is crucial both for CHWs' activities and their daily life. Continuous support will motivate CHWs to maintain the technical skills acquired through the project and contribute to the community.

Attachments:

Annex 1: Project Design Matrix for evaluation

Annex 2: Evaluation Grid