



CARE International
Sudan



REDUCING MORBIDITY AND MALNUTRITION RATES AND INCREASING SELF-SUFFICIENCY THROUGH INTEGRATED WASH RESPONSES IN EAST AND SOUTH DARFUR

WASH Final Evaluation
Report

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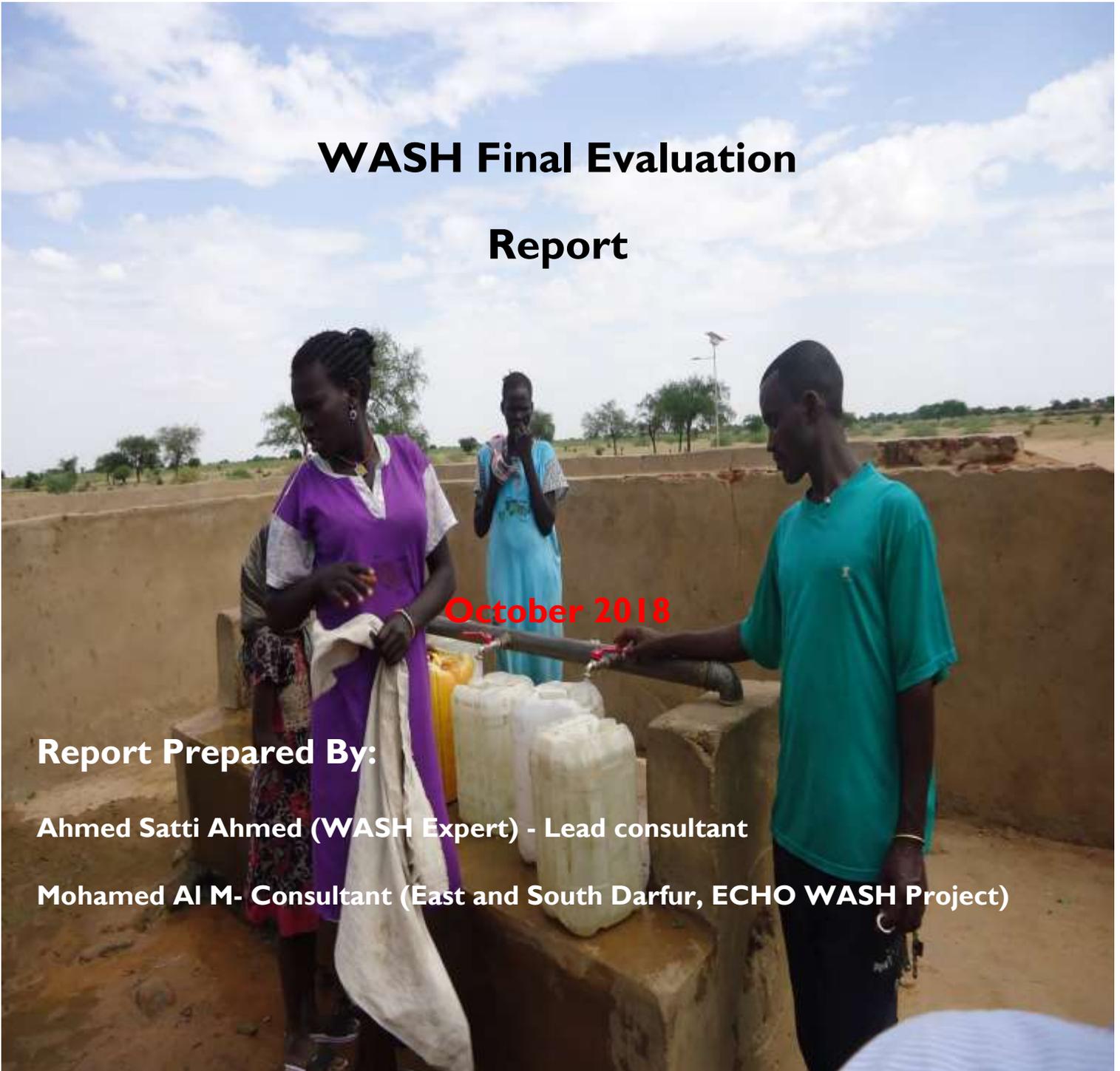


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I. List of Acronyms

CIS CARE International Sudan

CATS Community Approach to Total Sanitation

CDCs Community Development Councils

CHPs Community Hygiene Promoters

FGDs Focus Group Discussions

KAP Knowledge, Attitude and Practices

KIIs Key Informant Interviews

HHs Households

HKs Hygiene Kits

HP Hygiene Promotion

ODF Open Defecation Free

ToRs Terms of Reference

WASH Water, Sanitation and Hygiene

1.0. Executive summary

This end-of-project evaluation has been undertaken to determine whether the objectives of the project were achieved and to provide a learning tool for CIS and its partner organizations to enhance decision making at all levels for future program implementation. Therefore, it provides a comparison between what was planned and what has been achieved, suggesting recommendation for future interventions. The Evaluation was carried out between 19 October and 26 October, 2018 in East and South Darfur States. The evaluation had shortage of time and unable to visit South Kordfoan state.

The methodology included intensive document review, key informant interviews with CIS staff and partners (including CIS management teams), and interviews/FGDs with community stakeholders in 5 locations in the two states. The main limitations of the evaluation were the time allowed for the evaluation.

CARE International was able to sustain operation and maintenance of 6 water yards in Geredia (4 mortised and 2 solar pumps) and sustain O&M in Kalma (,6 solar pumps, one mortised system, rehabilitation of existing 12 water points and 9 hand pumps). In East Darfur, CARE contributed to the rehabilitation of one yards in Kairo for host community, O&M for 2 water yards in Kairo Refugees camps and 11 water distribution points in addition to 30 km of distribution network. CARE was able to construct and distribute 100 slabs household latrines in Gereida, and construction of 186 households' latrine in Kalma camp. All details including hygiene promotion activities issues are reflected in the body of discussion.

Thanks to CARE's actions, all water points visited were hygienic and protected from contamination with human and animals using separate water trough and drainage basins. The average water consumption per day is near 15 liters/consumption/day with proper distance. All plans were implemented as per the observation the team had in the visited sites and the reports received from the project staff and community representatives. In some cases, over plan accomplishment were reported.

2.0. Introduction

In Darfur, CARE has been focusing on providing assistance and support in the areas of health, nutrition, WASH, agriculture, food security, early recovery of market systems and peace building with various donors such as OFDA, ECHO, Dutch MoFA, UNDP UNICEF, WFP, and other private agencies.

CARE has been working through ECHO funding in East Darfur and South Darfur implementing emergency WASH activities since 2009. The 2018 funding covered the same areas of East and South Darfur as well as extension activities in South Kordofan, reaching refugees, IDPs and affected nearby host communities.

The evaluation is commissioned to an external consultant to get a brief reflection mainly to triangulate reported accomplishments by the project through sampled field visit, to get the impression of women and men participants, sector ministries on the overall implementation of the project plans, results observed and then provide recommendations for future improvement. The Evaluation was carried out between 19 October and 26 October, 2018 in East and South Darfur States.

3.0. Overall objective

This evaluation aimed to provide feedback, strengths and weaknesses about the quality of the WASH program implemented by CIS in Darfur, since the project has now ended. Specifically, it aimed to evaluate the consistency among the actions planned and the action implemented, and provide recommendations to enhance and facilitate future programs.

CARE had different internal monitoring and review sessions mainly on monthly and quarter basis, which helped to keep the project on track due to the high inflation and unavailability of supplies in the market. While all the project plans are implemented 100% in most cases and beyond in others, CARE team decided to get an external eye and review for future learning. Two announcements were made for the evaluation and CARE was unable to get competent consultants to lead the process. Finally, CARE decided to minimize expectation from the survey and focused on key areas such as verification of achievements, results seen on people's behavior and practices, and the participation of women and girls.

The Evaluation team then took over this responsibility and visited sampled sites in the two states between 19 October and 26 October, 2018 in East and South Darfur States. The evaluation had shortage of time and unable to visit South Kordfoan state.

3.1. Specific Objectives

- ✓ Assess correctness of reported achievements against plans (using the indicators on the log frame)
- ✓ Assess project participant's satisfaction, and women's participation in decision making process.
- ✓ Assess role of community in WASH services
- ✓ Review the voucher system in Gereida: how targeting happened, its benefits, functionality of the system, lessons from the scheme
- ✓ Provide recommendations for future actions

4.0. Methodology

The initial requirements of the evaluation were laid down in the Terms of References. A meeting was held with members of the reference team (Mr. Moges Tefera, Mohamed Adam and Sarah, the consultant who conducted the assessment) on the 19th of October, 2018. Related documents were shared and discussions were held by email with Mr. Moges.

We can distinguish different phases of the progression of this evaluation:

1) Carry out a desk review of the current status of the improved WASH facilities in two targeted Darfur areas (East and South Darfur) to assess availability, functionality and management modalities:

- Members of the assessment team were engaged in facilitating the desk review of the current status of the improved WASH facilities in (South – East Darfur targeted areas);
- Relevant government agencies, UN agencies, NGOs were approached to obtain information and data for the desk review. Annual Reports, assessments and evaluations and follow up and monitoring documents were collected and examined;
- Besides the availability and functionality aspects, the review also focused on the community role and participation in running their systems (water pricing system/tariff, technology options, spare parts supply chain, capacity development of the community to run their facilities). Moreover, types of financial support provided by the government and NGOs was also examined, such as existing organization structure and gender aspects, exit strategy if the system is running by CIS, and water quality. Issues related to the responsibility of regular monitoring of the services at the camps were also considered;
- The review has been done in Khartoum with extensive contacts and consultations with the CIS WASH team at zonal level in the three states.

2) Undertake an in-depth field assessment for the targeted locations in South and East Darfur

- Three members of the assessment team (headed by the team leader) traveled to the two states in Darfur to facilitate an in-depth field assessment of the targeted locations in each state –Kalma and Gereida in South Darfur, Kario, Yassin and Keligl in East Darfur;
- The team members made short visits (courtesy call) to the key sector partners in each state for orientation on the objective of the assignment besides obtaining additional data and information in this regard. The visits included mainly State Water Corporation, NGOs, Humanitarian Aid Commission, Water and Environmental Sanitation Project, and Environmental Health Project;
- Inspection and Technical Observation of the WASH Services at the camps: The assessment team conducted site visits/transect walks to assess and inspect water supply systems, and hygiene facilities in the camps and targeted location. The activity included, among others, examining the work quality, functionality and operational status of the water facilities in addition to the operation and maintenance system and the role of communities in managing and running their existing WASH services;
- The field inspection also considered aspects related to types of hand- and motorized pumps, prolonged drought (aquifer type, depletion of ground water and liability of changing water quality especially during the dry season) and supply chains (spare parts availability, quality and distribution);
- Focus Group discussions (FGDs) conducted with Community leaders, women groups, youth group in the camps/settlements to get first impressions about the availability of water supply,

functionality of the systems, technology options, gender equity, challenges and opportunities among other issues (each group were represented by 10 persons including males and females);

- Meetings and interviews were done with community leaders and community members including men, women, adolescent boys and girls, disabled and minorities;
- Key Informant Interviews (KIIs) were conducted with at least 10-17 persons representing WES, NGOs, and community leaders. The interviews focused on challenges facing the O&M issues besides capturing their perspectives regarding broader strategy. community mobilization and WASH Committees training;

We conducted meetings in Ed Daien CIS office with Tesfy Office in charge together with Abuelgasim Yagoub-environmental health officer and Mohamed Gabriel –WASH officer.

5.0. Kario refugees' camp

In Kario, the team conducted meeting in Ed Daien CIS office with Tesfaye, officer in charge and WASH and Public Health Country Coordinator together with Abuelgasim Yagoub, Environmental health officer and Mohamed Gibril –WASH Engineer.

Kario refugees camp hosted 21,904, based in UNHCR's biometric registration. Here, FGDs and KIIs were conducted and took place with 35 persons (12 male- 23 female) and focused mainly on hygiene promotion and water supply operations. Population of Kario camp is expected to exceed 30,000 as the relocation and the influx continues.

What emerged is that, although challenging, mobilization activities in hygiene promotion have been implemented properly and correct messages have been communicated through hygiene promoters and WASH staff. One water yards were successfully rehabilitated with elevated water storage tank of 50m³, a proper distribution network system and 11 water points have been rehabilitated as planned.

WES team was interviewed on CARE's interventions on their interaction and relation, they confirmed that, WES was fully involved, consulted together with HAC and SWC. The only issue they advised was for CARE and WES to work together on some water points on peaceful use and community ownership.

CARE conducted daily water chlorination and quality monitoring both at source and household level, with standard format. Free residual chlorine (FRC) testing was done as planned daily at all water points and the average water per person per day in Kario is between 18 -20 liters. Records are checked in this regard and found well documented.

The water user committees were trained to be responsible for managing the water points and interact with CARE and other offices as appropriate. The committee members expressed their responsibilities clearly and the membership gender representation was found to be good (seven women and nine men).

5.1. Water quality monitoring and water yard rehabilitation for host community

The water points are confirmed to be chlorinated on a regular basis by the government water corporation and CARE supervisors. The community awareness on chlorination and safe water was found high as the WUC members explained all the water quality activities CARE and WUC do. .

CARE also rehabilitated Kario water yard and handed over to the State Water Corporation, as planned by the project. The cooperation promised to keep the water yard functioning and a water tariff has been established to address any breakdown which may create burden for camp water supply. FGDs were used to triangulate activities implementation by the project.



Kario, photo after FGD meeting

During our home visits, and per our observations, latrines were clean, effectively and properly used by HHs members, this reflects good approaches used in hygiene messages, modalities and community participation at all levels. The role of men and boys seems low and only women are active in the sanitation works.

The awareness of the FGD participants on key activities such as hygiene, cleaning campaigns, ODF and solid waste management was acceptable and they know why these activities are implemented. They mentioned that if these activities were not done on a regular basis, more disease such as diarrhea would have been the major problem in the community.

5.2. Stand points

It was observed that communities in the camp are well organized for collection of water from the water points, no queues were observed and the water points were clean, successfully managed by women and men. Nevertheless, there are some observations in five of water points constructed by CIS:



Kario: improved standpoint, easing access

access

- Some stagnant water was observed around some of the water points which can act as breeding sites for mosquitoes and flies. However, it was observed and reported that this is a recent phenomenon and the WUC promised to correct them.
- Introducing solar or hybrid water system is highly recommended.

5.3. Sanitation in Kario camp

The latrines for the refugees are fully subsidized and they saw the intervention of a contractor to manufacture the slab and provide local construction materials. The rest is done by the refugees, who received the materials for both the construction and rehabilitation and they were given incentive for their labor work (200 SDG for construction and 40 for rehabilitation). Most of latrines look very clean and effectively used. Regular cleaning, covering the drop hole to prevent flies breeding and other aspects were found promising. The average depth of the latrines is 3m and it is expected to last between 2 - 3 years. Women FGD have confirmed that FHH get priority in the targeting of latrine construction including other vulnerable groups CARE's engineer were responsibly monitoring for quality control to ensure the safety of the users.



Kario latrine and bathing facilities looks clean and tidy

6.0. Yassin

In Yassin, water yard rehabilitation was handed over to State Water Cooperative (SWC) which will be responsible for the O&M in close coordination with CARE and the trained Water User Committees. SWC in East Darfur collects water users' fees (1.5 SDG per 20 liter jerry can) from every beneficiary including the most vulnerable IDPs, refugees and host community members as cost recovery. However, care must be taken as the poorest families may not afford and could be forced to collect less water than their need, which could have impact on their sanitation and hygiene situation.

6.1. Yassin WASH activities (hygiene promotion)

During FGDs and KIIs participants confirmed that there is no OD practices in Yassin due to comprehensive awareness sessions conducted by the health committees which have been trained by Alsawaaid Alkhadra Organization (AAO) supported by CIS. The committees organize weekly activities for household's visits, Jerry can cleaning, and cleaning campaigns, as confirmed by interviewees and the areas were clean during the visit the team had.

Regarding solid waste management, the communities visited have a continued commitment to clean their environment and solid wastes. . We have seen donkey carts donated to local communities to get rid of solid waste. This experience is considered a successful experience attributed to low cost and is considered an appropriate model that can be adopted and tested elsewhere as option for solid waste management by the community themselves.

Care has provided hygiene promotion activities for the communities along with AAO Partner in Yassin. In Yassin locality there are 5 water yards which provide services shared by host communities, IDPs and refugees. The project planned to rehabilitate one and that was done on time. Because the other points are not functional, it affected the CARE supported water point due to overpressure and frequent breakdowns. During the FGDs and KIIs discussions, the community mentioned that the issue was raised to the local government and CARE will also consider to rehabilitate in its next year plans, if budget is available.

From KII and FGD discussion with hygiene committees and community, we observe that:

- There are five settlements in Yassin 30 persons will not be enough for hygiene promotion activities, would be good to add more promoters.
- While the project has done its planned one water yard rehabilitation, there are more water points if maintained can serve the community adequately. CARE might need to consider this in its future plan.
- There is a regular program for HH visit, Jerry can clearing and garbage collection in the visited communities.



7.0. Gereida

In Gerieda, CIS team succeed to achieved all planned interventions and even went more than 100% in some activities due to exchange rate gains.

A total of 20 members of the Water User Committee (WUC) were trained, focusing mainly on cost recovery and management, social/community mobilization, conflict resolution and operation and maintenance of WASH infrastructures. Moreover, an exchange visit was organized by the project for members of the WUC from Kalma and Alsalam to Gereida camps to share knowledge and experience related to water voucher program, The FGDs appreciated as an interesting event for experience sharing and was mentioned as the first of its kind by the project. and.

Several campaigns were held in different sectors, in particular, community-led debris removal was conducted on proper disposal of solid-waste methods. A total of 20 campaigns were held, as planned, reaching around 74,973 people. FGDs couldn't tell the number of campaigns but indicated the regularity of campaigns ..



Gereida: photo after finalizing FGD with women and men

The following table shows the list of activities implemented per location as reported by CARE team and partly checked by the evaluation team. Except activities, #8 incentive payment for promoters, # 16 voucher feasibility, all activities are cross checked with FGDs and KIIs on their implementation. Some outputs are

visible such as visibility, facilities, environmental sanitation while others needed confirmation from the FGDs such as trainings.

Table 1: Target WASH CIS/ECHO program in South Darfur State (Gereida)

No	Activity	Unit	Target	Achievement	# beneficiaries	% of achievement
1	Train the Gereida water user committee focused on Cost recovery and management, social/community mobilization, conflict resolution and operation and maintenance of WASH infrastructures.	Train	1	1	20	100
2	Set up water voucher system in Gereida and distributed to the beneficiaries voucher	Month	5	6	5,000	120
3	Construct slab of HH latrines and distributed to most for vulnerable groups (Households headed by women, with caregivers of malnourished children and malnourished mothers, pregnant and lactating women, people with disabilities and elderly people widow, orphan,) with provided, technical assistance and on-the-job training for non-vulnerable IDPs on latrine construction	Latrine	100	200	1,200	200
4	Conduct community-led debris on proper disposal solid-waste including how to mobilize the community to participate on solid waste management and community actions at community leader, religious leaders and CHPs, how community managing their solid waste management	Campaign	20	20	74,973	100
5	Distribute 40 sets of cleaning were used during the cleaning campaign	Sets	40	40	74,973	100
6	Establish/strengthen 5 community	Community	1	1	11	100
7	Train Community Hygiene Promoter and enhanced their self-esteem and empower them to take actions to improve their hygiene behaviors, prevent diarrheal diseases, and encourage effective community based management of water and sanitation facilities.	Train	20	20	74,973	100
8	Community Hygiene Promoter monthly incentive	Incentive	20	20	20	100
9	Carryout sanitation and hygiene household visited by community hygiene promoters the visit focused on safe water good hand washing, food handling, proper excreta disposal, the danger associated with open defecation, and proper waste management, feminine-hygiene practices and access to essential services for the elderly and disabled	HH visits	2720	2800	32,653	103

10	Conduct 80 hygiene promotion campaign focus on interventions intended to reduce disease transmission and address critical health risks associated with poor hygiene practices through improved personal hygiene behaviors and management of infrastructure	Campaign	20	20	74,973	100
11	Printing IEC materials to hygiene promotion to help them to send their message	Sets	100	100	74,973	100
12	Exchange visits and knowledge WUC from Kalma and Alsalam visited Gereida they sheared their knowledge and experience.	visits	1	1	10,7031	100
13	Coordination meetings with partner CARE closely coordinates with key actors by attending weekly coordination forums and sharing weekly Early Warning Alert & Response (EWAR) reports.	meeting	5	10	10,7031	200
14	Study Voucher feasibility CARE conducted feasibility study and verification to 5000 BNF	study	1	1	5000	100
15	Visibility care posted visibility at water supply operation please sech as water point tanks and boreholes station	Location	22	15	10,7031	68
16	Motorized water supply infrastructure for 6 stations interventions focuses mainly on sustaining the water supply service through operation and maintenance of existing systems (2 solar powers hybrid and 4 generator powers schemes). Provided submersible pump, rehabilitation tanks, fencing water point maintenance generators	Month	10	10	10,7031	100
17	Water treatment supplies for conducting water quality in monthly basis and FRC.	Month	10	10	10,7031	100
18	Ground water monitoring was conducted in weekly basis to conservation groundwater	Month	10	10	10,7031	100

Reference: CIS south Darfor

7.1. Water Voucher System in Gereida Findings.

The water voucher system was tested in Gerida for the first time by CARE. It intended to give more responsibility for the community to manage their own water systems and at the same time the most vulnerable families get water through vouchers CARE pays to the WUC. WUC intended to develop an annual budget for WASH services provision, based on an agreed ToR and endorsed by a Voucher Board in which they agreed to set up the fees rate. Detailed monthly action plans were prepared by WUC and approved by the board.

According to the team observation, interesting successes are seen in the scheme in supporting the needy and vulnerable people..

WUC and beneficiaries hesitated and appeared not convinced of the processes followed for voucher families' selection in which the only criteria for identification of poor families is food ration. 5,000 families selected for voucher out of 10,000 families getting food ration while the other 5,000 families with similar situation paying monthly fees for water (10 SDG/family/month). It is recommended to do detailed discussion and analysis on some of these challenges related to vulnerabilities. Otherwise, the scheme is innovative and supports community ownership of their own water facilities.

One of the issues that emerged about the Voucher System is that no women are present in the board structure out of six members. Only two women have been nominated as members of WUC, one of them assigned as procurement chief and the other one takes lead in sanitation and hygiene promotion interventions out of the total 11 members of WUC. However, the chair has indicated that decision was already made to increase representation in the voucher board. In fact, since women are traditionally the members of communities responsible for fetching water, their presence and role in WUCs could be a useful resource as they could provide interesting insights and sharing experience and constraints.

7.2. Gereida Sanitation and Hygiene promotion findings

FGD groups indicated that the construction of slab for HH latrines were done and distributed to the most vulnerable groups. Latrine construction criteria were developed with the community leaders and consultation meetings were done in each area on the selection of individuals.

80 hygiene campaigns were held, focusing on interventions intended to reduce disease transmission and address critical health risks associated with poor hygiene practices. 70% of the FGD women members reported that there are improvements in hand washing practices mainly with water and cleaning their surroundings. The team observed latrines with water but no soap at all. Community hygiene promoter were firstly trained to empower their skills and knowledge on good hygiene practices, and then they had the task of conducting households visits, mainly to ensure that good practices such as hand washing, proper excreta disposal, proper waste management are followed. A total of 2,800 visits were conducted during the project life and the KIIs and FGDs confirmed the regularity of these activities.

Water treatment supplies for conducting water quality analysis on monthly bases were provided. CARE registered improvements in chlorination to ensure that the water being provided was of high quality.

FGDs confirmed that WUC had received complaints about water, which lead to the decision to not collect water at one moment and immediate action was taken by the project in response to the complaint. This was one of an interesting story for the team indicated beneficiaries are becoming aware of the importance of water treatment for their lives and health and also shows a functioning of complaint and feedback mechanism.

Motorized water supply infrastructure for 6 stations was ensured, focusing mainly on sustaining the water supply service through operation and maintenance of existing systems (2 solar powers hybrid and 4 generator powers schemes). Also, the project provided submersible pump, rehabilitation tanks, and fencing water point maintenance generators. Ground water monitoring was conducted on a weekly basis.

8.0. Kalma IDPs camp center

Kalma population served by CARE reached 42,800 individuals (7,133 HHs). FGDs were held with community to assess WASH in Kalma and address community feeling towards the project intervention.

Latrines for IDPs are selected in consultation with the community leaders and beneficiaries themselves based on their situation. Hygiene promotion has positively contributed in improving family member practices on hand washing, cleaning in addition to improved interaction the events created among women and men. The main approached in hygiene education messages is to address critical time for hand washing, feeding children's, preparation of food, food protection, latrines used, important of cleaning campaigns, garbage collection and treatment. In FGD,s they almost mentioned all including their added values.

8.1. Kalma Water supply

CIS carried out sustainable operations and maintenance for seven (7) water supply system schemes, 6 of them run with hybrid solar systems and one by generator alone. 5 water distribution points had been rehabilitated including fencing with red bricks, construction of tap stands platform and drainage system with animal basin. 9 hand pumps were observed functioning at the time of the visit. Activity plans and achievements were cross checked with the project staff, WES, community leaders and FGDs using the table below.

Table 2: Target WASH CIS/ECHO program in South Darfur State (Kalma)

No	Activity	Unit	Target	Achievement	# beneficiaries	Comment
1	Sustain operation and maintenance of 12 water system (4 motorized water-pumping & 8 solar systems) and 9 hand pumps , in Al Salam, Kalma and Gereida IDP camps.	System	7	7	42,800	6 solar system and 1 fuel power system completed
2	Operation and maintenance of hand pump	hand pump	9	9	4,500	
3	Rehabilitation of existing water point including fences	Water points	5	12	33,000	the achievement more than plan due to exchange rate gains
4	Conduct water-quality testing (FRC)at all water points , HHs and treatment	Sample	1,080	37.935	42,800	37882 FRC sample tested and 53 sample
5	Ground water monitoring at 10 boreholes on monthly basis	Borehole	3	2	24,000	xx The two are representative for the Kalma camp aquifer

6	Hand pump routine repair/ rehabilitation in Kalma	hand pump	9	9	4,500	
7	Distribution of cleaning tools (set)	Set	50	100	42,800	50 set distributed by JMCO (partner)&50 by the CIS, the achievement more than plan due to exchange gains
8	Conduct community-led debris clean up campaign	Campaign	26	28	42,800	increased during the NCE (no cost extension) 16 JMCO= 12 CIS
9	Establish and train new community hygiene promoters (CHP)	Training	2	2	50	one training conducted by CIS and one by JMCO(partner)
10	Establish and train 2 schools CHAST Clubs	Clubs	2	2	40	implemented through JMCO
11	Hygiene promotion camping's including hygiene awareness, sessions and water dialogues	Campaign	24	28	42,800	this activities are implemented by the CIS 16 & JMCO 12
12	Conduct households visits through CHPs	HH	2,140	2,300	11,500	this activities implemented by the CIS & JMCO including during the NCE period
13	Printing IEC materials including WASH in Nutrition education materials	PC	100	100	42,800	
14	construct household(HH) latrines	latrines	150	186	930	the achievement more than plan due to exchange rate
15	Establish/strengthen 5 community complaint/feedback mechanisms	Mechanisms	3	3	42,800	
16	Train and 4 strengthen Water User Committees (WUCs)	Training	1	1	11	
17	WASH committee members exchange visit from Kalam& Al Slam camp to Gerieda camp	Visit	1	1	6	
18	Coordination meetings with partners and community members to review progresses	Meeting	1	1	42,800	

Reference: CIS south Darfor

Water quality was daily and regularly monitored by FRC through WUC members who target 8 samples from each water resources and 10 samples from surrounding HHs. The results show that all samples lies within the recommended limited rates and ground water monitoring is conducted at weekly bases in two bore holes.

Water chlorination was continuously carried out through a system that uses chlorine tablets and ground water monitoring for 10 boreholes were held on monthly bases.

8.2. Kalma Sanitation & Hygiene promotion

CARE supported the construction of 186 household latrines (more than planned), and provided concrete slab, supporting beams and sages for lining. The target plan exceeded by 16 latrines, which were allocated for disable groups. The over achievement was made possible due to the exchange gains which gave rooms for more latrines construction.

In carrying out general cleaning campaign CARE supported in-kind incentives such as soap for donkey carts. Several campaigns were conducted: 28 community-led debris clean up campaigns, 28 hygiene promotion campaigns including hygiene awareness and water dialogue. The FGD appreciated the commitment by the community on debris cleaning but still most of the burden is on women, while some changes are being seen in some areas where 5 to 8 men are seen in a group of 50 to 60 campaigners.

25 Community Hygiene Promoters (CHPs) have been selected and trained to carry out daily home visit, dialogues, and group discussions at water point and in the school. 2.300 visits were held, more than planned.

During home visits, participants have indicated that CARE provides concrete slabs and two support beams for each latrine, while HHs contribute through transportation cost, supply of local materials such as (sticks, poles, bamboo), digging the latrine pits and erecting the superstructures. These cost sharing has developed sense of ownership, responsible use of facilities, and involvement of both men and men. A sense of competition was also seen among families in terms of keeping facilities clean and in good condition.

The selection process of CHPs has tried to follow a gender balanced approach. Four women chaired the hygiene promotion team and only two men were nominated as CHPs team leaders. Same is true for Water User Committees, which were selected and trained. Among them, four women have been selected in WUC out of 11 members, however women were not appointed in main positions of WUC structure. The chairman and secretary of WUC accepted and recognized the importance of women's participation to play a vital role in discussion-making and management, but the current women members are lacking the capacity to play such role and insisted to enhance gradually the women to take lead in the future.

3 mechanism of community complaints/feedback were established and strengthened. Complaints boxes are located near the water points and M & E officers created awareness to build communication channels between services providers and the customers. Furthermore, sign

boards show names and contact list of WUC and CARE team members and other local government offices.



Kalma, visiting water point after FGD with men and women group



Kalma, KII with evaluation team visiting water

The following table shows the list of activities implemented in Kamla as reported by CARE team and most are checked by the evaluation team on their accomplishment.

9.0. Conclusion and recommendations

The project has accomplished all plans in the targeted sites where the team visited, and have cross checked with the FGDs and KIIs where possible. As per its objectives, the project has supported the needy poor refugees and IDPs through provision of safe water, sanitation facilities and promoting appropriate hygiene practices reducing mortality and unnecessary human suffering. Besides the achievements on the project plans, some interesting trends are seen in relation to women participation and empowerment.

Women participation

Women play important role and are consulted in most project cycle and in decision-making. They participate on latrines site selection, water user committees, and treasures. Some women are seen playing the role of social mobilizers for other women groups in their neighborhood initiating

their active participation in WASH activities issues. This is out of the norm and practices in the community and need to be recognized and supported.

During the field visit and observations, the team was able to meet a water point managed by a young girl. She is leading effectively and was expressing her views boldly. We also appreciate if CARE work more on such young women and scale good practices. More and special support for such girls and women will bring huge success on the overall WASH program and we know CARE is globally committed for this kind of initiatives.

Furthermore, still representation of women and workload need more attention in WASH program delivery. Some efforts are already there such as engaging men and boys in cleaning campaigns and jerrcan cleaning. The normal practice was men were mobilizing women and girls for cleaning and dump the debris only after collection while women and girls clean and collect.

While most of the project activities are as planned, the following are some of the recommendations to further improve WASH interventions effectiveness and impact:

1. Project review meetings with key community leaders or structures will help during the project period to capture improvement areas and correct timely.
2. More support is needed to East Darfur team as there is an observed difference in the monitoring and documentation compared to South Darfur performance.
3. More work needs to be done to support women's representation and capacity building to participate in leadership roles and decision making related to WASH interventions.
4. To enhance communities' ownership, and sustain services, it will be important to continue focusing on capacity building and strengthening by working together with other actors.
5. Frequent FGDs and KII discussions will always help to ensure information flow and awareness raising across different groups. For instance, due to inflation there were number of challenges faced by the project but communication to the target population was limited.
6. Maps would be a useful tool in determining the maximum walking distance to a water point and in planning future construction or optimization in out of camp situation. No maps of the targeted areas showing the different water distribution points were available in the office at the time of the visit (apart from design schemas of the distribution systems).

10.0. References

CIS . (2017). "Assessment report WASH project." [Internal Document]

CIS. (2018). "WSASH Assessment." [Internal Document]

Field monitoring records, CIS committees at SD and ED field levels

11.0. Appendices

Annex 1: Consultancy activities list

Date	Activities
19.10.2018	Travel from Khartoum to Nalaya Daein –briefings split to team 1 SD and team 2ED
20.10.2018	Visit Kalam (team1-ED)
21.10.2018	Visit Gereida (team1-SD) -Visit Kario (Team 2 -SD)
22.10.2018	Visit Yasin and Klegig (team 1 ED)
23.10.2018	Travel from Daien to Nyala (team 2 _SD)
24.10.2018	Meeting team 1&2 with CIS Nayal team
25.10.2018	Back to Khartoum
26.10.2018	Submitting of Draft Key finding
27.10.2018	Submitting of Draft Final report
28-29.10.2018	Submitting of the final report

Annex 2: The project Results and indicators

Result 1: 268,191 IDPs, South Sudanese Refugees and conflict affected vulnerable people in East and South Darfur states have access to sustained safe and equitable water supply.	
Indicator 1	Percentage of test results with 0 fecal coliform per 100 ml sample from secondary sources
Indicator 2	Number of people having access to sufficient and safe water for domestic use
Indicator 3	% of clean water points functioning 3 months after completion (and monitored every 3 months afterwards)
Indicator 4	Number of boreholes that have their ground water monitored on a monthly basis
Indicator 5	Number of community consultation meetings set up with the targeted communities throughout the implementation period to review the action and address WASH related issues at least once in every two months per community (Alsalam, Kalma, Gereida, Kario Al Nimir, El Ferdous, Yassin, Abu Jubeiha and El Liri)

Result 2: 290,686 IDPs, South Sudanese Refugee and conflict affected vulnerable people in East and South Darfur states have access to improved environmental sanitation services.	
Indicator 1	Number of people with access to dignified, safe, clean and functional excreta disposal facilities
Indicator 2	Number of people living in settlements with a functional solid waste management system
Indicator 3	Number of mechanisms set up to support and to ensure the participation of vulnerable groups, in the design and targeting and monitoring of interventions.
Indicator 4	Number of vector control activities carried out
Result 3: 290,686 IDPs, South Sudanese Refugees and conflict affected vulnerable people in East and South Darfur states receive hygiene information.	
Indicator 1	Number of people receiving direct hygiene promotion (excluding mass-media campaigns and without double-counting)
Indicator 2	% of the target population who can identify critical hand washing times
Indicator 3	Number of active school WASH clubs carry out activities in schools and outside schools at least one time each month
Indicator 4	% of households with undernourished children and/or undernourished PLW that visited health/nutrition centers and received WASH in Nutrition education materials.

Annex 3: FGDs list

Key person by Position	Level	Subtotal
Female group	Non-Beneficiary	5 (1 in each state)
Female group	Beneficiary	5 (1 in each state)
VHC - If not applicable then natural community leaders randomly selected male residents	Beneficiary	5 (1 in each state)
Total		15

Annex 4: KII list

Key person by Position	Level	Subtotal
DG of State Water Corporation-(Rural)	State level	1
Head Environmental Health Dept	State level	1
State MoE representative	State level	1
2 International Donors	State level	1
Head WES Project	State level	1

National NGO -East Darfur: Alsawaaid Alkhadra Organization (AAO) South Kordofan: Global Aid Hand (GAH)	State level	2
Omda /sheikh in at least 1 or 2 field location	Field level (camp)	10 (2 in each of the primary data)
Total		17

References

CIS . (2017). "Assessment report WASH project." [Internal Document]

CIS. (2018). "WSASH Assessment." [Internal Document]

Field monitoring records, CIS committees at SD and ED field levels

Annex 4: Consultancy ToRs



CARE International Switzerland Sudan



Terms of Reference (TOR) for Project Final Evaluation

Required:	National Consultant (re-advertised)
Project Title:	Reducing morbidity and malnutrition rates and increasing self-sufficiency through integrated WASH responses in East and South Darfur and South Kordofan
Donor:	EU Humanitarian Aid
Duration of Appointment:	10days
Expected Start Date:	25th October 2018

1. Background on CARE

CARE has been operational in Sudan since 2009, with humanitarian, early recovery and peace building interventions. Sectors involved include Peace building, WASH, Health & Nutrition, livelihood diversification and Economic Empowerment. Through UNDP DCPSF and other donors funding, CARE has been supporting peace building and governance programs in East and South Darfur since 2013. The programs have been supporting community based resolution of conflict, inclusion of youth and women in community decision making and leadership and engagement in economic empowerment. CARE strongly supports and works with national NGOs, Community Based Organizations, government line ministries and universities.

2. Background to the project:

CARE has received funding from the EU Humanitarian Aid to work in East Darfur (Assalya, Bahr Al-Arab, El Ferdous and Yassin localities), South Darfur (Belail and Gereida localities) and South Kordofan (Abu Jubeiha and El Liri localities). The project was aimed at supporting IDPs, South Sudanese Refugees and affected host communities humanitarian needs related to water sanitation and hygiene promotion. The project period was 1 June 2017 to 31 May 2018. The project statements are summarized in the table below:

Overall Objective	To contribute to improving the health of 290,686 IDPs, South Sudanese Refugees and conflict affected vulnerable people in East and South Darfur and in South Kordofan states.		
Specific Objective	To sustain equitable access to integrated gender sensitive WASH services that includes WASH in Nutrition and increase self-reliance of 219,630 IDPs and host community members that reside in East and South Darfur where there are no refugees (this is part of the first agreement); provide emergency WASH services to 67,656 South Sudanese Refugees and 29,400 IDPs and vulnerable host community members that reside integrated with or around the refugee camps or settlement areas both in East Darfur and South Kordofan.		
Results	<ol style="list-style-type: none"> 268,191 IDPs, South Sudanese Refugees and conflict affected vulnerable people in East and South Darfur and South Kordofan states have access to sustained safe and equitable water supply. 290,686 IDPs, South Sudanese Refugee and conflict affected vulnerable people in East and South Darfur and South Kordofan states have access to improved environmental sanitation services. 290,686 IDPs, South Sudanese Refugees and conflict affected vulnerable people in East and South Darfur and South Kordofan states receive hygiene information. 		
Locations	State	Locality	Area/camp
	East Darfur	Assalya	Al Nimir refugee camp
		Bahr Al-Arab	Kario Refugee camp
		El Ferdous	El Ferdous reception center
		Yassin	Yassin
	South Darfur	Belail	Al Salam IDP Camp
			Kalma IDP Camp
		Gereida	Gereida IDP Camp
	South Kordofan	Abu Jubeiha	Abu Jubeiha
		El Liri	El Liri
Note: The evaluation to take place in East Darfur and South Kordofan			
Project period	1 June 2017 to 31May 2018 (with possible extension).		

Implementing partners	<p>East Darfur: Alsawaaid Alkhadra Organization (AAO)</p> <p>South Darfur: Jabal Marra Charitable Organization (JIMCO)</p> <p>South Kordofan: Global Aid Hand (GAH)</p>
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3. Purpose/objectives of the Final Evaluation Survey:

3.1 Overall objective

The overall objective of the evaluation is measure the following:

- Correctness of reported achievements against plans (using the indicators on the log frame)
- Project participants satisfaction, women participation in decisions
- Role of community in WASH services
- Voucher system in Gereida: how targeting happened, are the poor benefiting, functionality of the system, lessons from the scheme
- Recommendations for future actions

Objectives and scope

4. Methodology

The evaluation will take place in project operational areas in East and South Darfur The consultant will work with relevant members of CARE Program Quality (PQ) Team in Khartoum, program managers, project staff, field staff and partners to develop or choose evaluation methodology. Key tasks should be taken following the below methodology; the consultant can suggest any supplementary approaches that could support the generation of more and accurate data and may be considered by CARE. At least one to two operational areas will be visited in each state. Focus group discussion and KII may be employed.

Document Review (Secondary Data): The consultant will review project documents: project proposals;

5. Profile of the Consultant

The consultant should be specialized in the areas relevant to public health and WASH with excellent experience in monitoring and evaluation. The consultant will have the primary responsibility for conducting the assessment and writing the final report. The consultant (team) should possess strong statistical skills and will be expected to coach data enumerators, lead and coordinate the data collection, entry and analysis of data and report writing to a publishable standard. All leadership of the tasks and expenses are to be covered by the consultant. **Having gender experts in the team will be an added advantage.**

Specific requirements:

- An advanced degree in relevant field - health science or other relevant discipline

- Demonstrated skills in statistics.
- Expertise in quantitative and qualitative research methodology
- Proven track record of conducting evaluation surveys, especially in enhancing capacity of institutions and their members
- Advanced knowledge of theoretical concepts and practical issues in M & E and data collection
- Experience in M & E and management of projects in an NGO setting will be a distinct asset
- Fluency in English and Arabic.
- Strong interpersonal and communication skills
- Experience in Sudan and preferably in East and South Darfur

Other conditions

- The consultant must adhere to the CARE Code of Conduct¹ and CARE Security Protocol during the entire duration of work.
- CARE may provide the consultant accommodation in the field in its guesthouse, if available. Other items CARE will avail are: office space, internet connectivity in CARE premises.
- CARE will not provide per-diems or allowances. All out-of-pocket expenses must be taken into consideration while proposing daily fees.
- The consultant should budget all expenses in the quote

6. Reporting Requirements/outputs and deliverables

- The final output of the assessment will be responding to the key questions listed above reported in both quantitative and qualitative formats.
- Adding photographs will help.
- The report should be submitted in English and should be of high quality (publishable).
- The consultant is expected to present key findings in CARE office and incorporate inputs to be provided by CARE experts

7. Work Plan and Time Schedule

The entire evaluation will take no more than 10days. The schedule below is a guide which can be modified as appropriate.

#	Activity	Days	Output
1	Desk review and Preparatory activities: field trip plan	2 days	Finalized: Questioners; field plan; enumerators; methodology
2	Incorporate feedback on the inception report	1 day	Documents and tools reviewed and agreement with CARE to start the task

¹Available upon Request

3	Data collection including coaching of data enumerators:	4 days per state	Qualified enumerators identified and trained, Data collected
5	Data analysis and compiling	2 days	Data analysed in line with the key thematic areas
6	Share draft report and de-briefing	1day	Draft report shared
Total		10 days	

Note: The applicants are required to form two separate teams to visit the two states at the same time as we have shortage of time to conclude the evaluation. Hence, the 10 days is for each team to finalize the assessment.

8. The Cost of the Evaluation: should be presented as follows

No.	Details	Unit	Rate	# of Units (Quantity)	Cost
1	Consultant's fees				
2	Transport cost				
3	Subsistence costs (e.g. accommodation, communication, meals, etc.)				
4	Any other costs that aren't not provided for by CARE				

9. Other notes:

The consultant is responsible to pay the enumerators, printing and data entry and analysis cost.

The consultant will be responsible of any tax or other fees related.

The payments will be in two instalments, 30% at the time of signing the contract and 70% after the completion of the task and submission of final acceptable report to CARE.

Interested candidates are invited to submit their applications together with curriculum vitae and one high level expert on gender with 'Final Project Evaluation Application' mentioned in the subject to the following addresses:

Procurèrent (Badraldeen.Musa@care.org);MEAL: Sara.Azhari@care.org; PQ: Moges.Tefera@care.org.

As this is re-advert, the same consultants who applied in the first round, will be approached and submission has to be on the 16th October 2018.

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Total		15

Annex 6: KIs list

Key person by Position	Level	Subtotal
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Head Environmental Health Dept	State level	1
State MoE representative	State level	1
2 International Donors	State level	1
Head WES Project	State level	1
National NGO -East Darfur: Alsawaid Alkhadra Organization (AAO) South Kordofan: Global Aid Hand (GAH)	State level	2
Omda /sheikh in at least 1 or 2 field location	Field level (camp)	10 (2 in each of the primary data)
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References

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CIS. (2018). "WASH Assessment." [Internal Document]

Target WASH CIS/ECHO program in South Darfur State (Kalma)

Target WASH CIS/ECHO program in South Darfur State (Gereida)