

# **CARE Endline Evaluation Report**

Ministry of Foreign Affairs – Czech Republic

# **Internal Final Evaluation**

**Project title:** Restoration of water infrastructure and prevention against COVID19 for conflicted affected population in west Mosul, Iraq

**Donor:** Ministry of Foreign Affairs – Czech Republic

Location: Galawat and Nabi Sheet Neighbourhoods – West Mosul (Ninewa Governorate)

**Date of evaluation:** October 2021

Project funded by

Implemented by





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# **LIST OF ACRONYMS**

MoFA Czech The Minister of Foreign Affairs - Government of Czech Republic

HSE Health, Safety and Environment

DoW Directorate of Water
FGD Focus Group Discussion
IDP Internally Displaced Person

COVID-19 Coronavirus Disease

PDM Post Distribution Monitoring
WHO World Health Environment
WTP Water Treatment Plant

# **Executive Summary:**

#### Introduction

With funding support from the Ministry of Foreign Affairs, Government of Czech Republic (MoFA Czech), CARE Iraq implemented a six-month project, starting from May 1 to October 31 2021, and aimed to provide an uninterrupted supply of potable water to vulnerable communities for drinking, personal hygiene, and other domestic use through rehabilitation of non-functional parts of the water treatment plant and restoration of water the networks in two neighborhoods (Nabi Sheet and Galawat) of West Mosul. It further aimed to increase the resilience of vulnerable communities to COVID-19 by providing hygiene kits and increased risk and safety awareness, improving hygiene behavior and environmental sanitation services. The project is implemented in West Mosul, Galawat, and Nabi Sheet neighborhoods, targeting IDPs, host communities, and returnees.

The project directly supported the rehabilitation/construction of three water infrastructures (i) the water treatment plant Al Ayman AL jaded and (ii) Water networks in Galawat and Nabi Sheet neighborhoods of West Mosul to provide clean water in sufficient quantity and quality in West Mosul while supporting the Directorate of Water (DoW) staff to build their capacity by providing different trainings to strengthen their capacity.

The project further supported the COVID-19 risk and preventions and hygiene awareness to improve hygiene behavior among the community according to WHO guidelines and engaged the community in hygiene promotion activities, mobilizing them towards greater ownership to sustain improved hygiene practices, efficient water use.

CARE MEAL team conducted the endline evaluation in October 2021 to assess the project's achievements and formulate action-oriented recommendations for future programs. Data collection for the evaluation occurred in Galawat and Nabi Sheet neighborhoods through face-to-face interviews beneficiaries and key informants interviews of Ninawa DOW and Mukhtars.

The evaluation reports show that all the project targets were achieved. The summary of achievements is attached in "Annex A" to this report, and it shows that 100% of the overall project target beneficiaries have been achieved (100,000 targets planned versus 100,000 reached). Almost all the project indicators were met with the exception of one indicator, which was the 1,000 hygiene awareness house visits/sessions planned against 973 actual visits conducted. Overall, 97% (316) of the survey respondents were satisfied with the hygiene awareness program, including the distribution of hygiene kits, and 96% (313) of the respondents were satisfied with the quality and quantity of water after rehabilitating Ayman Al Jaded water treatment plant and Galawat and Nabi Sheet Water networks.

Overall, the key stakeholders, including the Directorate of Water in Ninawa and Mukhtars, had different opinions about the effectiveness and impact of the WASH project. The key informants and 93% (303) of the surveyed respondents reported that the water network rehabilitation projects contributed towards better and smoother water supply systems in the neighborhoods. The rehabilitation of Al Ayman Al Jaded water treatment plant provided clean water in enough quantity and quality for 100,000 vulnerable women, girls, men, and boys in West Mosul. The rehabilitations helped with better water supply to the neighbourhoods and minimized the health risks associated to quantity and quality of water. The construction of water networks in Galawat and Nabi Sheet neighbourhoods provided clean water in sufficient quantity and good quality through preventing future contamination caused by leaks in the system to 3,000 vulnerable, women, girls men and boys. Additionally, the distribution of COVID-19 prevention kits and promote hygiene awareness allowed improving hygiene and environmental sanitation practices.

The tested samples of water at the supply station and the spot checks at the neighbourhoods were within the recommended ranges, free residual chlorine (0.2-0.5 mg/l at households), and the biological results show E.coli Ocfu/100ml.

The endline evaluation finding reveals that nearly 97% (316) (97% F, 98% M) in Nabi Sheet and 95% (310) (96% F, 94% M) in Galawat neighbourhoods were satisfied with their water infrastructures rehabilitations and believed that the quantity and quality of water were increased due to CARE's intervention. The remaining 3% and 5% of the respondents were not satisfied mainly due to the interruption of water during the rehabilitation works; the main complaints were that some of the areas had lower water pressure (especially in Galawat), since the main pipeline capacity was not increased. The other complaint was that some residents did not get access to water during the rehabilitation of water network for a couple of weeks and they had to use water tracking.

House visits as a method for hygiene promotion was the most preferred, as it saves the household members from the hassle of going to the session's location, which is usually time-consuming. In addition, house visits allow for enhanced privacy, especially for women hygiene topics. Also, school sessions for students were desirable by 83% (270) of the respondents, as parents are relieved knowing that their children are receiving additional awareness at school with their peers. Hygiene promotion sessions were popular amongst participants, effective in improving their understanding of personal hygiene, and caused most participants to think that their community handled the COVID-19 pandemic better because of support. Hence, it's recommended to continue HP in future projects to get positive change in the community.

# **Project interventions and implementation modalities**

The following is a summarized list of the project objectives which MoFA Czech programming streams have aimed to deliver. These objectives have informed the survey and sampling strategy of the endline evaluation with respect to the beneficiaries consulted and indicator definitions adopted.

The project's overall objective is to reduce the risks of diarrheal diseases and COVID-19 among conflict-affected communities of West Mosul, Iraq, by increasing their access to safe drinking water, enhancing the capacity of local institutions and improving hygiene behaviour of target returnees and host populations.

The project addressed five main gaps in Water, Sanitation and Hygiene Promotion (WASH) sector, water infrastructure and equipment rehabilitation and services in the two locations of West Mosul:

- Rehabilitation of water infrastructure (Al Ayman Al jaded Water treatment plant).
- Rehabilitation/construction of water networks in Galawat and Nabi Sheet neighborhoods.
- Capacity building training on (SCADA HMI, HSE and water safety plan) to Director of Water (DoW) staff.
- According to WHO guidelines in West Mosul, providing public health, personal hygiene, and COVID-19 prevention awareness messages.
- Distribution of COVID-19 prevention kits in Galawat and Nabi Sheet neighborhoods.

The rehabilitation was estimated to benefit 100,000 individuals (27,800 Women, 24,200 girls, 25,900 Men, and 22,100 Boys). The treatment plant provides water to 20 neighborhoods in West Mosul, including Galawat and Nabi Sheet neighborhoods.

**Project Outcomes** 

**Project Outputs** 

Conflicted affected women, girls men and Output 1.1: Rehabilitation of Al Ayman Al Jaded water boys from returnee and host community in treatment plant is completed, providing clean water in West Mosul have equitable and sustainable enough quantity and quality for 97, 000 vulnerable, access to safe drinking water. women, girls, men and boys in West Mosul. Output 1.2 Rehabilitation/construction of water networks in Galawat and Nabi Sheet neighbourhoods are completed, providing clean water in sufficient quantity and good quality to 3000 vulnerable, women, girls men and boys. Director of Water (DOW) has improved Output 2.1: Capacity building training on simplicity SCADA capacity to provide sustainable water HMI, HSE (health, safety, and environment) and water services to conflict afflicted communities in safety plan are delivered to DOW staff. West Mosul. Conflict affected women, girls, men and boys Output 3.1: Vulnerable women, girls, men and boys from from returnee and host communities in West returnees and host community Mosul have reduced risk to diarrheal neighbourhoods are sensitised on public health, personal diseases and COVID-19 through improved hygiene and COVID-19 prevention according to WHO public health awareness and adoption of guidelines. positive hygiene practices. Output 3.2: COVID-19 prevention kits distributed to vulnerable women, girls, men, and boys from returnees and host community in targeted neighbourhoods.

# **Purpose of Endline Evaluation:**

The primary purpose of the endline Evaluation was to better understand the impact and progress made by the project against agreed indicators. The study also considered criteria such as coverage, appropriateness, coordination, and implementation processes to evaluate the quality of the intervention. The evaluation specifically aims to:

- Examine the efficiency, effectiveness, and sustainability of the project's WTP & Network rehabilitation, hygiene awareness, distribution of hygiene kits, and training done during the project implementation period.
- Document lessons learned about key intervention activities and MEAL tools used to measure these activities, draw conclusions, and develop recommendations for reference and use in future projects.

The evaluation seeks answers to the following questions:

#### **Effectiveness**

- To what extent has this project generated positive changes in the lives of targeted communities?
- To what extent did the project meet the WASH needs of communities? Are there any WASH issues that still need to be taken into consideration for future projects?
- What internal and external factors contributed to the achievement and/or failure of the intended project impact, outcomes and outputs? How?

#### **Efficiency**

How efficiently and timely has this project been implemented and managed in accordance with the project document (this also includes financial utilization), outputs and outcomes?

#### **Coverage, Coordination and Appropriateness**

- To what extent do all individuals, regardless of age, sex and ability, have access to improved water and sanitation services and practice safe hygiene?
- To what extent did CARE effectively coordinate with the Directorate of water, Mukhtars, Mayor, municipalities and clusters across the targeted locations and other WASH actors?

#### **Accountability**

- To what extent were beneficiaries and other stakeholders involved in the project's design, implementation and monitoring throughout the project cycle?
- Are beneficiaries aware of the availability of feedback mechanisms? Are they comfortable/willing and using them? Do they have other preferences in terms of using other ways of providing feedback? Are they satisfied with the response to their concerns?

#### **Impact**

- To what extent did the community's knowledge, attitude, practice and beliefs regarding hygiene and appreciation since the beginning of the project? What are the barriers to the uptake of key hygiene and sanitation practices, if any?
- Was the overall community promotion approach most appropriate to change knowledge, aptitude and practices on hygiene and sanitation services?

# **Methodology:**

## Sampling approach:

The following tools have been employed to inform the endline evaluation of MoFA Czech funded WASH Assistance:

# \*

#### Beneficiary Quantitative data collection survey and observation

Building on the baseline and Hygiene kits PDM approach adopted by CARE, this tool has been used to establish all quantitative indicators assigned by the approved project logframe and provide an outline for the qualitative Key Evaluation Questions to be supported by assistance-specific surveys.

The data collection team (enumerators) conducted the quantitative survey utilizing computer-assisted personal interviewing (CAPI) methodology<sup>1</sup>. Enumerators utilized tablets to collect data<sup>2</sup>.

The quantitative questionnaires consisted of mostly close-ended questions and direct observation questions/checklists, providing essential quantitative data related to project indicators and outcomes. Enumerators only asked questions to one person per household, selecting an adult family member who visited the targeted neighbourhoods.

# \*

#### **Qualitative data collection Hygiene FGDs**

By investigating the accessibility, availability, relevance, and knowledge retention associated with hygiene awareness sessions, these discussions have provided qualitative information validating the results of the quantified metrics described in the project's logical framework. Owing to the range of times at which different respondents had taken part in these awareness sessions, the responses gathered in

<sup>&</sup>lt;sup>1</sup> The CAPI methodology is an interviewing technique in which the respondent or interviewer uses an electronic device (mobile device) to answer the survey questions.

<sup>&</sup>lt;sup>2</sup> This methodology allows for logic checks, skip patterns, and validations during the interview, thus increasing the efficiency of the interview as well as the quality of data. Because data collected through the CAPI methodology can be uploaded daily, the MEAL assistant was able to conduct quality control at the end of every day.

these discussions have a direct bearing on the sustainability and longer-term impacts of the interventions on community behaviour.



#### **Training participants Survey and KIIs**

The project team and key stakeholders have provided higher-level and comparative insight into the conduct of elements of programming with which they have been directly involved.

Qualitative interviews, key informant interviews (KIIs) were used in the evaluation to provide rich and indepth information considering the context and objectives of the evaluation. Qualitative interviews were especially useful to gain an understanding of underlying reasons, opinions, and motivations among a group of people with regards to the topic under evaluation as well as to triangulated information with quantitative data collected.

#### **Proposed Sample**

The following table displays the sample proposed to evaluate all dimensions of MoFA Czech-funded programming in West Mosul. The numbers listed beneath each location denote the frequency-specific instruments used. The final column presents the number of people covered by the instrument across all the targeted neighbourhoods in West Mosul (the number of tool uses multiplied by the number of respondents peruse. For the selection of respondents based on two neighborhoods (Galawat and Nabi Al Sheet), a systematic random sampling technique was used.

Table 1 Sample size (Quantitative and Qualitative Methods)

Method	Source/Respondents	Quantity					
Secondary data collection							
Desk Review	Relevant project documents, including the and log-frame, hygiene kits PDM repoliterature about the WASH cluster strapports	N/A					
	Primary data collection – Q	uantitative method					
Neighbourhood	Project component	Proposed Sample size	Actual Sample size				
Al-Galawat neighbourhood	Beneficiaries benefited with hygiene and COVID-19 awareness sessions, rehabilitation of water networks, as	80 (28 M, 52 F)	110 (23 M, 87 F)				
Nabi Sheet neighbourhood	well as beneficiary getting COVID-19 prevents kits.	210 (75 M, 135 F)	216 (105 M, 111 F)				
	Sub-Total	326 (128 M, 198 F)					
	Primary data collection – (						
Method	Source/Respondents	Quantity					
Key informant Interviews	<ul> <li>Mukhtar in Galawat neighbourhood</li> <li>Mukhtar in Nabi Sheet neighbourhood</li> <li>Directorate of Water (DOW) (2 in total)</li> <li>West Mosul Municipality (1 in total)</li> <li>SCADA, HSE and WSP topics to DOW to 7 participants) (8)</li> </ul>	15 in total					
Focus Group Discussions <sup>3</sup>	<ul> <li>2 FGDs with female community mem FGD with women and girls (18 individual)</li> <li>2 FGDs with male community mem FGD with men and boys (15 individual)</li> </ul>	4 FGDs 33 (18 F, 15 M) individuals					

<sup>3</sup> Each FGD consist of 8-10 individuals and COVID-19 measures, including social distancing and wearing masks by participants were followed.

## Data Collection and analyzing Method

A mixed methodology combining quantitative and quantitative data collection techniques was used to answer the aforementioned end-line evaluation questions. This approach supports effective data collection on easily measurable outcomes and impacts and the abstract study of beliefs and attitudes.

The end-line evaluation survey data collection took place from October 21, 2021 to October 26, 2021 in Al-Galawat and Nabi Sheet neighborhoods – West Mosul (Ninawa governorate). The data collection tools include Key Informant Interviews (KIIs), and the Quantitative method see **Error! Reference source not found.** in the above sample size section.

The desk review analyzed internal and external documents to allow the evaluation team to better understand the context.

After completion of the data collection, clean-up and data analysis were done. The findings from the evaluation are triangulated and used to strengthen the recommendations for future programming.

The analysis focused on identifying the most significant findings using KOBO Toolbox and Microsoft excel.

# **Gender and Vulnerability Considerations**

Issues of gender, disability, and other vulnerability criteria were appropriately considered throughout all stages of the evaluation. Data collection tools were designed considering gender and disability and if the project applied a 'Do No Harm' approach.

This included ensuring interview locations were accessible by survey participants with disabilities, engagement of female enumerators interviewed women. In addition, data analysis considered disaggregation by gender and disability.

# **Ensuring data quality**

The evaluation team ensured that data received from enumerators during data collection was monitored on a live basis to maintain the fidelity and utility of the range of responses recorded. In addition to the mandatory and comprehensive training delivered to all enumerators prior to data collection, all responses with respect to a single location and a single enumerator were compared in order to ensure that the surveys took place according to the sampling strategy outlined above and all responses reflected each respondent's unique insight into project activities rather than the views of the enumerator. All issues encountered with respect to the terseness or lack of clarity of responses received were addressed in real-time, mitigating the scope of human errors to undermine the quality of field data collection.

Furthermore, throughout the data collection process, data quality was verified by the MEAL assistant who was supervising the process in order to ensure that it contained all needed data and that there had been no technical issues

- All enumerators were trained on how to administer the questionnaires prior to data collection.
- Orientation was provided to all enumerators on the evaluation methodology.
- Quantitative data were collected through a mobile data collection mechanism using Kobo Collect app to maintain data integrity and avoid unnecessary data entry, resulting in errors.
- Data cleaning was conducted to ensure correct and complete data prior to the analysis.
- Spot checks and supervision of the data collection and entry process were conducted by the consultant.

#### **Evaluation Challenges and Limitations**

The end-line evaluation has several challenges which are listed as below:

- In the Nabi Sheet neighborhood, the majority of males were outside the home during the time survey was conducted. Thus, it was challenging and took longer than anticipated to catch the male respondents and interview them.
- It was hard for the MEAL team to physically monitor the data collection process regularly, due to access permission issues between Duhok - Mosul governorates.
- Some of the project activities, including the water network rehabilitation of Galawat and Nabi Sheet neighbourhoods were completed shortly before the evaluation. Therefore, it was not possible to evaluate their long-term effectiveness; these included the Nabi Sheet water network rehabilitation and water safety training to DOW.

# **Findings:**

The evaluation uses OECD DAC guidelines and principles - relevance, effectiveness, efficiency, accountability and impact - to assess the performance of the project. Based on the findings, this report presents a set of recommendations and best practices to inform and guide the implementation of future projects.

# **Demographic information**

A total of 326 participants were interviewed to understand the current issues and access situation related to WASH in Galawat and Nabi Sheet neighborhoods. 110 (23 M, 87 F) in Galawat neighborhood, while 216 (105 M, 111 F) in Nabi Sheet neighborhood. Overall, out of 326 participants, 198 (61%) were female and 128 (39%) were male in Galawat and Nabi Sheet neighborhoods.

As shown in the below figure, in both targeted locations, the majority of respondents 48% (156) were within 41-60 age category, 43% (139) of respondents were between 18-40 age category, around 10% (32) were over 60 years old.

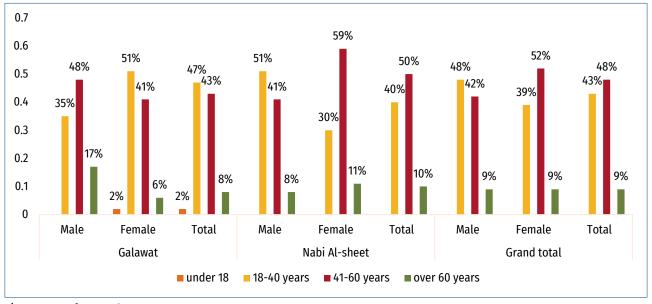


Figure 1 Age of respondents

The formal education level in Galawat and Nabi Sheet neighborhoods, an average the majority of respondents with more than half 51% (167) had completed a primary school, around of 28% (92) had no schooling completed, 14% (47) had completed high school, and only 6% (19) had completed university education and associate degree, as indicated in below figure.

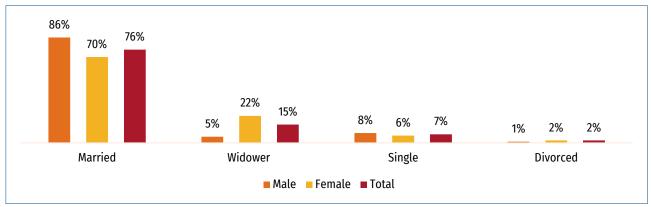


Figure 2 Education Level of the respondents

The marital status of the majority of respondents with 76% (249) was "Married", 15% (50) of surveyed respondents were "Widow", 7% (22) were "Single," and only 2% (5) were "Divorced). See (Figure 3).

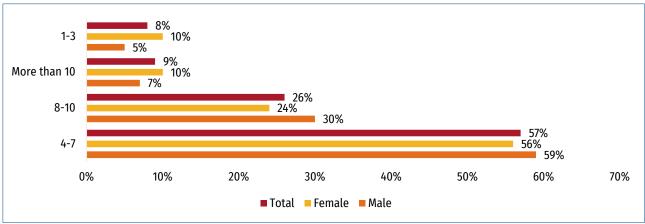


Figure 3 Marital status of respondents

The number of family members for 57% (185) of the surveyed households were between 4 to 7 members, 26% (86) of families had between 8 to 10 members, 9% (29) had more than 10 members, and about 8% (26) had 1 to 3 members, see below figure.

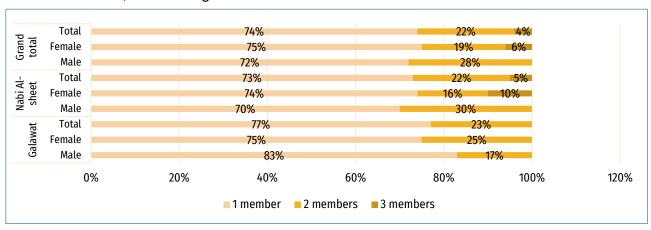


Figure 4: Total number of members in the family

The evaluation checked whether there is any member with a disability in the family; out of the 326 surveyed participants, 30% (99) answered 'yes' they have people with disabilities in their families, while the majority with 70% (227), stated "no". and among those respondents who answered having people with disabilities in their families, 74% (73) answered having only 1 member, 22% (22) of respondents answered 2 members, and only 4% (4) answered 3 members, as shown in the below figure.

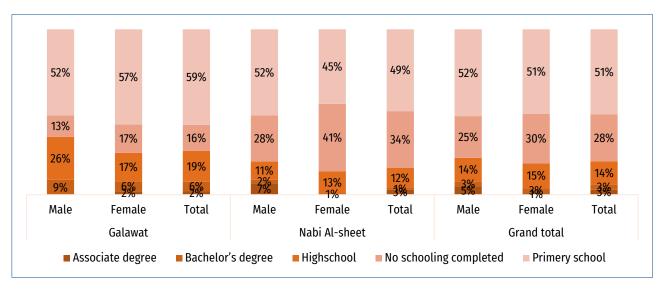
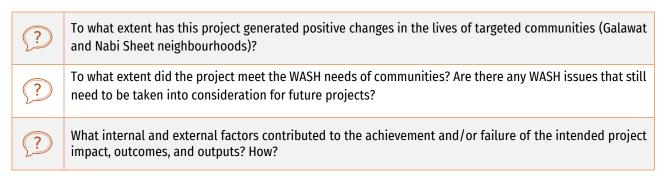


Figure 5: Total of people with disabilities in the family

#### Effectiveness

This chapter measures the extent to which the project achieved, or is expected to achieve, its objectives and results, including any differential results across male and female beneficiaries. Specific attention will be given to the following evaluation questions that were developed by the evaluation team:



The following table displays the degree to which outcomes monitored by the evaluation team were achieved (as calculated from responses to the quantitative Beneficiary Survey – End-line evaluation):

Indicator	Target	Achieved					
<b>Output 1.1:</b> Rehabilitation of Al Ayman Al Jaded water treatment plant is completed, providing clean water in enough quantity and quality for 97, 000 vulnerable, women, girls, men and boys in West Mosul.							
<b>Output 1.2:</b> Rehabilitation/construction of water networks in Galawat and Nabi Sheet neighborhoods are completed, providing clean water in sufficient quantity and good quality to 3000 vulnerable, women, girls men and boys.							
<ul> <li>90% of water samples tested and meet SPHERE Standards (free residual chorine - FRC ranges between 0.25 mg/l at consumer point, the sample of 100 ml with 0 coliforms at the outflow point of WTP.</li> <li>90% of water samples tested and meet SPHERE Standards (free residual chorine - FRC ranges between 0.25 mg/l, the sample of 100 ml with 0 coliforms at the HH level in Galawat and Nabi Sheet neighbourhoods.</li> </ul>	90%	Yes					

To measure the above two indicators, WASH team in coordination with DoW conducted Pre and post implementation water quality tests. Results from pre and post implementation samples were compared to measure improvement in water quality indicator.

The FRC safe drinking water standard has been followed, indicating FRC, 0.2 to 0.5 mg/l, 0 coliform/ 100ml and free from chemical contamination (arsenic). Furthermore, the endline evaluation result shows that the entire population of 5,134 of the targeted neighbourhoods are provided with the required quantity of 80 liters/person/day as per the estimation of the DoW and all the samples tested in the households were within the WHO limits (0.2 to 0.5 mg/l for the free residual chlorine (FRC) and 0 Coliform/100 ml). No chemical contamination was found in any testing points in Galawat and Nabi Sheet. The tests were conducted by the Central Laboratory of the DoW.

in dutable and habi sheet. The tests were conducted by the central Edboratory of the bow.					
Achieved	100%				
<b>Output 3.2:</b> COVID-19 prevention kits distributed to vulnerable women, girls, men, and boys from returnees and host community in targeted neighborhoods.					
% of women, girls and men, and boys are satisfied with the quality and content of COVID-19 prevention kits and are using its content.	80%	Yes			
For the measurement of this indicator, post-distribution monitoring (PDM) was conducted three weeks after the distribution in August 2021 and the PDM findings reveal that 96% (272) of women, girls and men, and boys surveyed respondents are satisfied with the quality and content of COVID-19 prevention kits and using items. The analysis of the findings shows that the output indicators have exceeded from the proposed 80% to 96%.					
Achieved	96% (979	% F, 95% M)			

Overall, the key stakeholders, including the Directorate of Water and Municipality in Ninawa and Mukhtars of the targeted neighbourhoods were divided with respect to the overall impact and effectiveness of the WASH project. The key informants (13) and 98% (316) of the surveyed respondents reported that the water network rehabilitation projects contributed towards better and smoother water supply system in the neighbourhoods. The rehabilitation of Al Ayman Al Jaded water treatment plant providing clean water in enough quantity and quality for 97,000 vulnerable, women, girls, men and boys in West Mosul helped with better water supply to the neighbourhoods and helped minimize the health risks associated to shortage of water. The construction of water networks in Galawat and Nabi Sheet neighbourhoods providing clean water in sufficient quantity and good quality to 3000 vulnerable, women, girls men and boys. Additionally, the distributed COVID-19 prevention kits and promote hygiene awareness allowed improving hygiene and environmental sanitation practices.

Participants of the CIMPLICITY SCADA HMI, Health, Safety, and Environment) and water safety plan training were eager to compile the plan for their stations to be submitted to the higher management for implementation. They felt that they obtained new knowledge and the implementation of the plans should reduce future risks related to the vital water supply.

Furthermore, the key informants were very optimistic about the effect hygiene promotion had especially on young children and especially with the COVID-19 prevention information.

#### Coordination

The key informant reported that the coordination between CARE and Directorate of Water, Municipality and Mukhtars of both targeted neighborhoods (Galawat and Nabi Sheet) worked well; CARE involved relevant stockholders from the design to end of the project's activities. CARE team ensured that services provided were used appropriately. In addition, the selection of staff for capacity building training was well coordinated with (DoW) to ensure the selection of appropriate staff for training to achieve desired results.

Overall, the evaluation found that CARE had well-coordinated approach with key stakeholders throughout the project. In particular. During implementation, CARE engaged and coordinated with the Ninewa Governorate, community leaders. In addition, CARE coordinated with WASH cluster and all NGO working in Mosul.

#### **Project Indicators and Objectives**

All the activities were implemented as per the project proposal. The "annex A" confirmed that project indicators have been achieved, which was cross verified by MEAL plans, and was further confirmed by the survey respondents and key informant interviews.

#### **Water Network rehabilitation**

CARE rehabilitated/replaced the non-functional/damaged parts of the West Mosul water treatment plant and rusty, leaking galvanized water networks in Galawat and Nabi Sheet neighbourhoods. The rehabilitation of the water infrastructures aimed at restoring the optimal performance of the water infrastructure.

The endline evaluation finding reveals that nearly 97% (316) (97% F, 98% M) in Nabi Sheet and 95% (310) (96% F, 94% M) in Galawat neighbourhoods were satisfied with the water infrastructures rehabilitations and believed that the quantity and quality of water was increased due to CARE's intervention. The remaining 3% and 5% of the respondents were not satisfied mainly due to some side-effects of water network rehabilitation works; the main complaints were that some of the areas had lower water pressure in the system after the network extension (especially in Galawat) since the main feeding pipe capacity was not increased.

#### **Hygiene kits distribution**

The distribution of COVID-19 hygiene kits were distributed among 1046 households (5,133 individuals), to improve the frequent hand washing practices and mitigate the risk of COVID-19 spreading among the target community.

The COVID-19 hygiene kits were distributed door to door using a blanket distribution approach, targeting the entire population of Galawat and Nabi Sheet neighborhood. The kits included the 12 bars of handwashing soap, 2 packs of laundry detergent, 2 bottles of antiseptic solution and 4 packs of sanitary pads.

The finding shows that the overall activity planning, beneficiaries registration, data validation, and verification and the door-to-door distribution approach went smoothly, with no major issues being raised by community members and stakeholders. During the distribution CARE's Covid-19 distribution SOP were followed and beneficiaries received kits in their houses.

The results reveal that, overwhelming majority 95% believe that the COVID-19 hygiene kits distribution was useful, relevant, timely and essential to improve the frequent hand washing practices and mitigate the risk of COVID-19 spreading among the target community.

(92%) of the surveyed HHs respondents believed the items distributed were relevant to their needs and kits were distributed at the right time. However, the remaining 8% (23) believed the items were insufficient to meet their needs. In addition, 100% (283) of surveyed respondents reported that the distributed items improved personal hygiene and enabled them to access hygiene items, focusing on essential items that mitigate the risk of COVID-19 spread like handwashing soap and safe pads.

The quality of hygiene items was rated (very good), and no major concerns were highlighted. Furthermore, 96% (272) of the respondents were aware and satisfied regarding the CARE beneficiary feedback mechanism.

#### **Capacity building training courses:**

To strengthen the WASH structure in DoW, CARE provided the three-capacity building training to strengthen the capacity of the institution to manage the water system in Mosul as a whole. CARE has coordinated with Dow and organized different types of training on WASH for their staff (SCADA, HSE, WSP). The evaluation findings show that, out of the (10) training participants interviewed and key informants, all (98%) felt their knowledges were increased from "Fair" to "Very Good" to enhance the institution's capacity to manage the water infrastructure and the overall provision of quality water to residents of Mosul.

Furthermore, all the surveyed training participants (100%) reported that they benefited from the training, and they were satisfied about the type of training, the way it was conducted, including the performance of the trainer. 68% of the respondents reported that the duration of the training was sufficient, the remaining 32% answered "No" due to the crowdedness of the place.

## Efficiency

This section measures the extent to which the project was able to deliver or is likely to deliver results in an economical and timely way. Specific attention will be given to the following evaluation question that was developed by the evaluation team:



How efficiently and timely has this project been implemented and managed in accordance with the project document

A review of financial information and relevant project documents indicates that unit costs were all well within acceptable ranges for relevant interventions. Project design sought to build upon lessons, relationships, and approaches developed in previous rounds of implementation. CARE, having a substantial track record in the delivery of WASH programmes, built upon these lessons and created a more efficient and effective intervention.

To evaluate the efficiency of the project interventions, the surveyed respondents were asked directly about the efficiency of the water infrastructure sites of Al-Ayman Al-Jaded water treatment plant (WTP) and water networks in Galawat and Nabi Sheet neighbourhoods, 95% (163) of Nabi Sheet respondents and 96% (115) of Galawat respondents thought that the works were completed efficiently compared to similar projects that they have had experience with (see below figure). On average, the remaining (4%) respondents had two main complaints: the quality of the contractor's work was not good, especially with regards to repair work that the areas they had excavated were left for the residents to mend or delayed for a long period of time; and the fact that the water pressure was reduced in some of the residences due to the increased load on the network unfavourable land slope conditions, with the feeding main pipes remaining the same without increasing their capacity (pipe diameter and water pressure).

Many of the project modalities and actions (e.g., having signed MoU with DoW that states the responsibilities of DoW after the project implementation, technical and needs assessments in consultation with the relevant informants to identify WASH gaps to ensure effectiveness intervention) are strong examples of relevant learning informing improved approaches in this round of implementation.

Of the (3) key stakeholders interviewed with respect to the efficiency of resources (financial and otherwise) employed for the project, there were no suggestions by anyone that money had been wasted during the project.

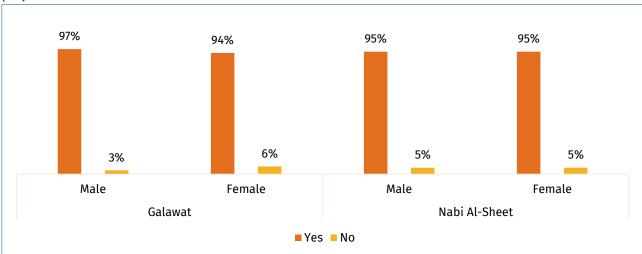
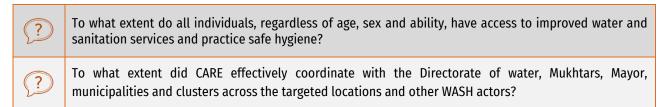


Figure 6: Was the project implemented in the most efficient way compared to its alternatives

## Coverage, Coordination and Appropriateness

This section measures the degree to which the assistance provided considered the different needs of salient demographics within the beneficiary communities, including gender and age, and coordinated this response appropriately with the Directorate of water and sanitation. Specific attention will be given to the following evaluation questions that were developed by the evaluation team:

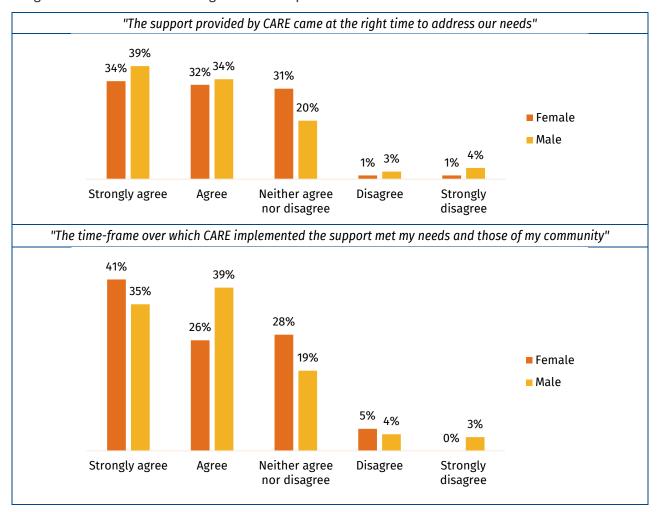


As part of the consulting team's Beneficiary Survey, all those who received support from CARE were invited to comment on the timeliness, promptness, and relevance of the assistance they received. The following two tables demonstrate broad positive consensus with respect to these dimensions of programming:

Gender equality was taken into consideration in selecting the hygiene promotion volunteers equal number of female and male volunteers participated (5 females and 5 males).

The participants of the water safety training were also all men, since most of the technicians and operators' positions are predominantly held by men.

Regarding the activities that involved the government directorates, the key informants were very satisfied with the coordination of the project team with them at the different stages of the project, starting with the design of the activities and ending with their implementation.



These responses to questions of the timing, promptness, and relevance of the support overall reflects the target communities' belief that they were in chronic need of help with respect to WASH project offered by CARE. In a few cases in which respondents expressed disagreement with respect to one of these dimensions, the explanation has been that they have witnessed others in their community receiving benefits from CARE's programming for which they considered themselves to be more entitled.

According to the qualitative survey with the key informants, most individuals, irrespective of their age and gender had the ability to benefit from the offered services. The hygiene promotion served the specified locations, but all family members had the opportunity to benefit from the information provided.

The finding results shows that almost all the surveyed respondents with 99% (230) thought that the WASH intervention, including the rehabilitation of three water network infrastructures, was provided at the appropriate time. The remaining 1% (9) thought that the intervention needed sooner. The quality of the WASH intervention and especially the water network rehabilitations and distribution of hygiene kits was ranked "high" by 89% of respondents in Nabi Sheet and 87% in Galawat.

The respondents were asked about their overall satisfaction with the assistance they received through the project and 97%, were fully satisfied, 2% were partially satisfied, only 1% were not satisfied.

#### **Hygiene Awareness**

Although concerns with the extent of coverage of hygiene awareness sessions have been addressed with respect to the project's effectiveness, 95% of hygiene beneficiaries surveyed believed that the sessions included those in the community who stood to benefit the most from them. Those who disagreed (or neither agreed nor disagreed) did so because they believed that community members failed to take advantage of the opportunity offered to them to take part, rather than that they were not provided with the opportunity to do so. All respondents were satisfied with the number of topics covered by the sessions and were able to recall the coverage of COVID-safe practices as part of the session content, indicating the appropriateness of the sessions for supporting the behaviour required over the course of programming.

Only one respondent reported that women experienced additional problems in attending sessions beyond men, and this was attributed to conservative cultural barriers leading to certain women feeling uncomfortable attending the sessions in person. However, the impact of this cultural barrier has been reduced in all programming areas by offering supplementary home visit sessions to support female access.

#### **Hygiene Kits Distribution**

In Nabi Sheet neighbourhood, almost all beneficiary respondents (all men and 99% of women) confirmed receiving adequate notification of distribution dates and location prior to implementation. The majority (86%) of these notifications were reported to have come from CARE team and Mukhtars for hygiene kits distribution, with the remaining 14% attributed to their neighbours. The degree of coordination with recipients was somewhat lower in Galawat neighbourhood, with only 86% of respondents claiming to have received adequate notification (90% from Mukhtars and 10% from CARE). However, much of this discrepancy can be attributed to the likelihood that a different family member was notified of the distributions than the one who was interviewed on behalf of the household.

Regarding the appropriateness of distribution of hygiene kits, only 5 beneficiaries in Nabi Sheet and 4 from Galawat neighbourhood noted that the distributing staff were somewhat unfriendly. The other 131 were happy with the process and the friendly nature of the distribution staff. Considering the approved and confirmed methodologies of the hygiene kits distribution in the area which was implemented by door-to-door distribution. In a few cases, team members did not have the required time for explaining the hygiene kits component selection criteria to the people who were not selected outside of the targeted neighborhoods showing up at the distribution sites Consequently, team members were sharing hotline number "complaint cards" in case of any feedback and/ or complaint.

## Accountability

This section measures the extent to which CARE is communicating with the DOW and Municipality and communities in which they work and whether they adjust the project based on feedback from beneficiaries. Specific attention will be given to the following evaluation questions that were developed by the evaluation team:



To what extent were beneficiaries and other stakeholders (Ninewa DoW) involved in the project's design, implementation, and monitoring throughout the project cycle?



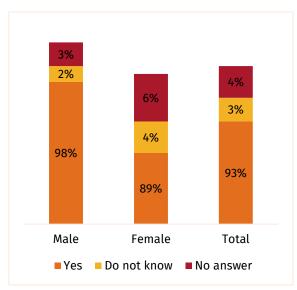
Are beneficiaries aware of the availability of feedback mechanisms? Are they comfortable/willing and using them? Do they have other preferences in terms of using other ways of providing feedback? Are they satisfied with the response to their concerns?

CARE places a high value on learning through the participation and feedback of beneficiaries, which is partly based on the Core Humanitarian Standards (CHS). This did not cause issues since CARE has established a mechanism for collecting feedback under this project.

Responses received from beneficiaries and key stakeholders, suggest that the accountability of the CARE project was effective. The Directorate of Water (DoW) reported, the overall project activities were designed in coordination with the related directorate departments, from the needs assessment, development of the activity implementations until the relevant of project handovers. As such, CARE had a feedback mechanism in place from the start of the project. CARE mainly holds itself accountable to communities through assessment and other types of monitoring and evaluation activities and through project teams visiting neighbourhoods during implementing the activities.

In addition, project locations were selected based on community needs and vulnerability as described by communities themselves as well as a technical WSH assessment of existing facilities in consultation with DOW.

Furthermore, from the beneficiaries' perspective, an average of 93% (98M, 89F) were satisfied with the information received about CARE services, the remaining 7% were unsure about their response. 73% (84 M, 65 F) of the survey respondents were aware where to give feedback/complain if they have any problems, and the rest of the participants had no idea/unsure about the answer.



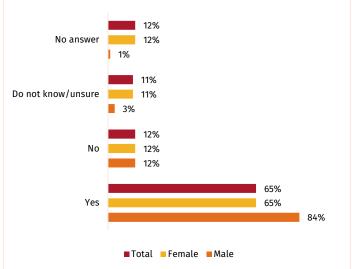


Figure 8 Satisfaction about received information about CARE services

Figure 7 Awareness about where to complain if there is any problems

75% (84 M, 71 F) of the surveyed respondents answered that they use "Hotline" for providing feedback/complaints about CARE services, 13% did not answer, 10% were not sure about the answer, while

only 2% answered "Face to face". And regarding where the beneficiaries currently receive information about the service available in CARE, the majority 48% (58M, 41F) answered: "Community leader", 33% (27M, 36F) answered "Community volunteers" while 12% answered from "Community events", only 7% did not answer they were unsure. The last question was about satisfaction about CARE services they have received, 90% (95M, 87F) of the respondents were "Fully satisfied, while the remaining 10% were "partially satisfied".

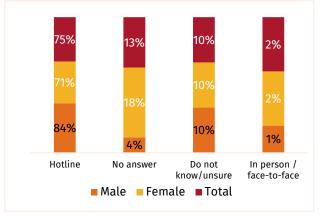


Figure 9 usage of CFRM channels

#### **Impact**

This section measures the extent to which the intervention has generated or is expected to generate significant positive or negative, intended or unintended, higher-level effects. Specific attention will be given to the following evaluation questions that were developed by the MEAL team:



To what extent did the community's knowledge, attitude, practice and beliefs regarding hygiene and appreciation since the beginning of the project? What are the barriers to the uptake of key hygiene and sanitation practices, if any?



Was the overall community promotion approach most appropriate to change knowledge, aptitude and practices on hygiene and sanitation services?

Overall, the key stakeholders, including the Directorate of Water in Ninawa and Mukhtars had different opinion about effectiveness and impact of the WASH project. The key informants and 93% (303) of the surveyed respondents reported that the water network rehabilitation projects contributed towards better and smoother water supply systems in the neighborhoods. The rehabilitation of Al Ayman Al Jaded water treatment plant provided clean water in enough quantity and quality for 100,000 vulnerable women, girls, men, and boys in West Mosul. The rehabilitations helped with better water supply to the neighbourhoods and minimized the health risks associated to quantity and quality of water. The construction of water networks in Galawat and Nabi Sheet neighbourhoods provided clean water in sufficient quantity and good quality through preventing future contamination caused by leaks in the system to 3,000 vulnerable, women, girls men and boys. Additionally, the distribution of COVID-19 prevention kits and promote hygiene awareness allowed improving hygiene and environmental sanitation practices.

#### **Hygiene promotion**

The respondents were asked four major questions about the topics discussed during the hygiene promotion visits, and they were: What topics were covered, which were the most useful topics, which were the least useful and which topics content are remembered the most.

93% of respondents to the hygiene survey believed that the hygiene awareness sessions had made a practical difference to people's behaviour. Furthermore, even though programming in the target neighbourhoods of Galawat and Nabi Sheet concluded during the COVID-19 pandemic, 91% of respondents agreed that the hygiene and COVID-19 awareness sessions contributed to a reduction in the transmission of COVID-19 in their community. This was because people followed the frequent handwashing, maintained social distancing, improved their own personal hygiene, and informed their children about the contents of the sessions with which they had been involved.

While these figures point to the success of hygiene awareness programming in short to medium term, knowledge retention of topics covered in hygiene awareness sessions provides a good indication of the degree to which the programming will reliably continue to influence people's hygiene-related behaviour

The top covered topics according to the 298 respondents were COVID-19 related session (86%), handwashing (70%) and personal hygiene (52%). The top topics that they could remember their contents were similarly matched, for the 297 respondents that answered the question, COVID-19 related topics were remembered by the most (76%), personal hygiene (46%) and handwashing (43%).

Regarding the usefulness topics, 297 respondents answered this question, and rated COVID-19 related session as the most useful topic by (69%), personal hygiene (36%), followed by handwashing sessions (30%). While the least useful topics were rated by 263 respondents as handwashing (49%), solid waste management (37%) and extra water storage (17%).

#### **Impact of WASH intervention**

CARE in coordination with the Directorate of Water, rehabilitated/replaced the non-functional/damaged parts of the water treatment plant which serves the West Mosul and rusty, leaking galvanized water networks in Galawat and Nabi Sheet neighbourhoods. The rehabilitation of the water infrastructures, including capacity building of DOW aimed at restoring the optimal performance of the water infrastructure.

The endline evaluation finding reveals that nearly 97% (316) (97% F, 98% M) in Nabi Sheet and 95% (310) (96% F, 94% M) in Galawat neighbourhoods were satisfied with their water infrastructures rehabilitations and believed that the quantity and quality of water were increased due to CARE's intervention. The remaining 3% and 5% of the respondents were not satisfied mainly due to interruption of water during the rehabilitation works; the main complaints were that some of the areas had lower water pressure (especially in Galawat), since the main pipeline capacity was not increased. The other complaint was that some residents did not get access to water during the rehabilitation of water network for a couple of weeks and they had to use water tracking.

The COVID-19 hygiene prevention kits were distributed using a blanket distribution approach targeting Galawat and Nabi Sheet neighborhood citizens reaching 1,046 households (5,133 individuals) with a focus on the essential items as a response to COVID-19 to improve the frequent hand washing practices and mitigate the risk of COVID-19 spreading among the target community. The results revealed of the families that were surveyed (283), the overwhelming majority believe that the COVID-19 hygiene prevention kits distribution (95%) was useful, relevant, timely and essential to respondent's households to improve the frequent hand washing practices and mitigate the risk of COVID-19 spreading among the target community.

People who are availing of the services provided by the CARE team are "highly satisfied" or "somehow satisfied" with the services. The below figure shows the satisfaction levels of the community with the services provided by CARE. 90% (95%M, 87F) of the surveyed respondents were "Fully satisfied", while the remaining 10% (6% M, 12%F) were "Partially satisfied" about the WASH intervention.

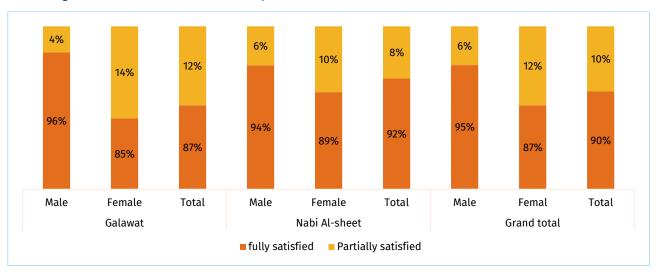


Figure 10 Satisfaction of surveyed families with WASH intervention

#### **Enhanced skills of DoW**

To strengthen the WASH structure in DoW, CARE provided the three-capacity building training to strengthen the capacity of the institution to manage the water system in Mosul as a whole. CARE has coordinated with Dow and organized different types of training on WASH for their staff (SCADA, HSE, WSP). The evaluation findings show that out of the (10) training participants interviewed and key informants, all (98%) felt their knowledges were increased from "Fair" to "Very Good" to enhance the institution's capacity to manage the water infrastructure and the overall provision of quality water to residents of Mosul. All of the surveyed training participants (100%) reported that they benefited from the training, and they were satisfied about the type of training, the way it was conducted, including the performance of the trainer. 68% of the respondents reported that the duration of the training was sufficient, remaining 32% answered "No" due to crowdedness of the place.

## **Conclusions and Recommendations**

- The activities related to the rehabilitation of the water purification and rehabilitation of Ayman Al Jaded water treatment plant and (Galawat and Nabi Sheet) water networks increased the quantity and quality of water and were well designed within the allocated budget and aligned well within the most acute needs of the Directorate of Water in the targeted area.
- The rehabilitation of the networks will have long-term health benefits by reducing the problem caused by metal corrosion and contamination related to leaking pipe fittings. It also has a positive impact in reducing the maintenance load on the authorities as the old networks need frequent maintenance.
- House visits as a method for hygiene promotion are the most preferred. It saves the household members from the hassle of going to the session's location, which is usually time-consuming. In addition, house visits allow for enhanced privacy, especially for women's hygiene topics. Also, school sessions are desirable, as parents are relieved knowing that their children are receiving additional awareness at school with their peers.
- Hygiene promotion sessions were popular amongst participants, effective in improving their understanding of personal hygiene, and caused most participants to think that risk of COVID-19 reduced due to frequent handwashing practices and hygiene awareness. Hence, it's recommended to continue HP and kits distribution in future projects to get positive change in the community.
- The training enhances the skills of DoW staff towards bringing more resilience to the water supply system. The water safety training changed the attitude of the related personnel at the DoW and its stations towards bringing more resilience to the water supply system; however, its effectiveness is bound to the availability of future funds from the government or external fund to put the developed safety plans into actions.
- The distribution of hygiene kits prevention kits benefited the targeted community to prevent themselves from Covid-19 pandemic. Almost all the surveyed respondents with 97% (275) of hygiene kit, surveyed respondents respectively reported the items had been used in only a month, Therefore, it is highly recommended to increase the number of items to ensure the uninterrupted access to items.
- Based on the demographics of the area in question, more customized hygiene kits may be designed to address the needs of each household more appropriately. For instance, households that have no female members can have a kit with sanitary pads replaced with another item.
- The coordination between CARE and key stockholders worked well, without having any negative feedback from the stockholders.

# Annex A – Project logical framework Matrix – October 2021

<b>~</b>	Target is reached (100% or above)	×	Target is not reached (0-50%)
0	Target is partially reached (50-99%)	?	Data not available to draw conclusion

	PROJECT DESCRIPTION (Intervention logic)	INDICATORS	TARGET	ENDLINE STATUS	RESULT	DATA SOURCES	
OUTCOME	The overall objective is to reduce the risks of diarrheal diseases and COVID-19 among conflict effected community of West Mosul, Iraq by increasing their access to safe drinking water enhancing capacity of local institutions and improving hygiene behaviour of target returnees and host populations.						
	Output 1.1: rehabilitation of Al Ayman Al Jaded water treatment plant is completed, providing clean water in enough quantity and quality for 97, 000 vulnerable, women, girls, men and boys in West Mosul.	1.1.1 Non-functional/damaged parts of water treatment plant are rehabilitated/replaced.	1	<b>1 non-functional/damaged</b> parts of water treatment plant rehabilitated/replaced in coordination with DOW.	>	Work completion and monitoring certificate.	
		1.1.2 90% of water samples tested and meet SPHERE Standards (free residual chorine - FRC ranges between 0.2 - 0.5 mg/l at consumer point, sample of 100 ml with 0 coliforms at the outflow point of WTP	90%	The endline evaluation result shows that the entire population of 5,134 of the targeted neighbourhoods are provided with the required quantity of 80 litters/person/day as per the estimation of the DoW and <b>all (100%)</b> of the samples tested in the households are within the standard (0.2 to 0.5 mg/l for the free residual chlorine (FRC) and 0 Coliform/100 ml). No chemical contamination was found in any testing points in Galawat and Nabi Sheet.	<b>\</b>	Pre and post water quality test results conducted by the Central Laboratory of the DoW	
	Output 1.2: rehabilitation/construction of water networks in Galawat and Nabi Sheet neighbourhoods are completed, providing clean water in sufficient quantity and good quality to 3000 vulnerable, women, girls men and boys.	1.2.11 Rusty, leaking galvanized water networks in Galawat and Nabi Sheet neighbourhoods are replaced/rehabilitated and functional.	1	<b>2 Water networks</b> in Galawat and Nabi Sheet neighbourhoods rehabilitated/replaced and are fully functional	<b>~</b>	Work completion and monitoring certificate / reports	
		90% of water samples tested and meet SPHERE Standards (free residual chorine - FRC ranges between 0.25 mg/l, sample of 100 ml with 0 coliforms at the HH level in Galawat and Nabi Sheet neighbourhoods.	90%	The endline evaluation result shows that the entire population of 5,134 of the targeted neighbourhoods are provided with the required quantity of 80 litters/person/day as per the estimation of the DoW and <b>all (100%)</b> of the samples tested in the households are within the standard (0.2 to 0.5 mg/l for the free residual chlorine (FRC) and 0 Coliform/100 ml). No chemical contamination was found in any testing points in Galawat and Nabi Sheet.	<b>~</b>	Pre and post water quality test results conducted by the Central Laboratory of the DoW	
	<b>Output 2.1:</b> Capacity building training on simplicity SCADA HMI,	2.1.1 10 DOW staff trained on Simplicity SCADA HMI training	10	<b>10 (10 M, 0 F)</b> DoW participants trained on October 2021 about Simplicity SCADA HMI training	<b>~</b>	Attendance records	

	PROJECT DESCRIPTION (Intervention logic)	INDICATORS	TARGET	ENDLINE STATUS	RESULT	DATA SOURCES
	HSE (health, safety, and environment) and water safety plan are delivered to DOW staff.	12.1.2 10 Stall Of DOW trailled Oil USE	10	<b>10 (10 M, 0 F)</b> DoW participants trained on September 2021 about HSE training	>	Attendance records
		2.1.3 10 staff of DOW trained on WSP training.	10	<b>13 (12 M, 1 F)</b> DoW participants trained on September 2021 about WSP training	>	Attendance records
	Output 3.1: Vulnerable women,	3.1.1 a 3.1.2 (8) of gender-balanced Community Hygiene Volunteers are identified and trained and employed.	8	<b>8 (4M, 4F)</b> Participants from CARE Community Hygiene Volunteers were trained and employed on June 2021	>	Attendance records
	girls, men and boys from returnees and host community in targeted neighbourhoods are	boys received hygiene and COVID-19	6000 (W, G, M, B)	<b>6,312 (3124 M, 3188 F)</b> individuals in Galawat and Nabi Sheet neighbourhoods received hygiene and COVID-19 awareness messages.		MEAL Plan, October 2021
	sensitized on public health, personal hygiene, and COVID-19 prevention according to WHO guidelines.  Output 3.2: COVID-19 prevention kits distributed to vulnerable women, girls, men, and boys from returnees and host community in targeted neighbourhoods.	3.1.4 1000 of Covid-19 and hygiene awareness house visits are conducted.	1000 Sessions	<b>973 (97%)</b> hygiene awareness house visits are conducted by the end of the project in Galawat and Nabi Sheet neighbourhoods.		MEAL Plan, October 2021
		3.1.5 CHVs and HP team is using PPE for the field visits in the target neighbourhoods	10 (M, F)	10 (5 M, 5 F); 99% (53 f, 86 m) of the survey respondents from both neighbourhoods confirmed that all CHVs were using PPE with field visits		Endline Evaluation, October 2021
		3.2.1 6000 beneficiaries' men, women, girls and boys get COVID19 prevention Kit in targeted neighbourhood	6000 (W, G, M, B)	A door-to-door, blanket and in-kind COVID-19 hygiene prevention kits distribution was undertaken with reaching <b>6,049 (3,024 M, 3025 F)</b> individuals in Galawat and Nabi Sheet neighbourhoods		Endline Evaluation, October 2021
		3.2.2 (80%) women, girls and men, and boys are satisfied with the quality and content of COVID-19 prevention kits and are using its content.	80%	The PDM findings reveal that <b>92% (261)</b> of women, girls and men, and boys surveyed respondents are satisfied with the quality and content of COVID-19 prevention kits and are using its content.		Endline Evaluation, October 2021