Final evaluation report Integrated WASH and EFSL project in Baladweyne, Hiran region of Somalia

May, 2020





Location Shandow Beledivey ne District Somalia Funded by: Danish People Aid Implemented by KAALO Aid Sevelopment Brg Date: March 2020







List of acronyms

- WASH- water sanitation and hygiene
- EFSL- Emergency food security and livelihood
- HH: household
- **OD: Open defecation**
- NGO: nongovernmental organization
- KIIs: Key informant interviews
- FDG: Focus group discussions
- DAC: Development Assistance Committee
- UTC: unconditional cash transfer.

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Executive summery

This evaluation report details the achievements of the DERF under CISU funded emergency WASH and EFSL project implemented by KAALO Aid with cooperation with Danish People's aid in Baladweine, Hiran region, Somalia and ended on April 30th 2020. This synopsis precedes the details of the project and the evaluation as contained in the report.

Based on the analysis of qualitative and quantitative data collected, project site visits and documentary review, the evaluation team gained a wholistic picture of the situation and is, in general, satisfied that the project was successfully implemented and achieved its targets on the scheduled end date.

This evaluation finds the project to be relevant, appropriate, and timely addressed the emergency needs of the flood affected vulnerable community (CHS Commitment #1&2). However, the team has noticed some considerable work remain in terms of strengthening the community's resilience to withstand future climate shocks.

Efficiency: Project management was very good, in terms governance and community participation in decisions that affect them (CHS Commitment #4), but some areas left room for improvement, and this affected knowledge-sharing. Collaboration and coordination mechanisms left room for improvement.

Effectiveness: The project contributed to expected results, and in general was effective in terms of completing the activities and in terms of contributing to the goals and objectives outlined in the project document.

The constructed latrines and rehabilitated shallow wells were assessed to be in good condition, and in line with SPHERE standards. The hygiene kit recipients who participated in the survey all confirmed receiving the kits and reported no challenges with the distribution. 86% of the hygiene promotion beneficiaries interviewed could recall at least three of the key hygiene messages disseminated. The beneficiaries of the project's livelihood services interviewed were also positive about the support received from the project through both in conditional and unconditional cash transfers.

For unconditional cash transfer beneficiaries, Households receiving unconditional cash transfers had higher household consumption, asset holding, monthly income, and better food security and psychological well-being. While lump sum transfers led to higher levels of asset holdings, monthly payments were more likely than lump sum transfers to increase food security were. 73.3% of the beneficiaries indicated that the cash transfer project addressed their immediate needs, mainly securing their access to food. The project also improved the income level, the purchasing power as well as contributing towards debt reduction. The cash was well used to purchase food (26.9%), debt reduction (9.8%) as well as some (3.8%) using the cash to initiate business ventures.

In addition, the project implemented Condition Cash transfer. The Conditionality pertains only to prerequisite or qualifying conditions that a beneficiary must fulfil in order to receive a cash transfer or voucher; i.e. activities or obligations that must be fulfilled before receiving assistance. In this modality KAALO targeted and reached 100 HHs for agricultural inputs using conditional vouchers.

Sustainability

The project was also intended towards structural changes and capacity development of local actors and the target group which are important factors in achieving sustainability. This evaluation, after reviewing documents and interviewing all stakeholders have identified that, due to the weak governance structures in the town, the nature of the urban setting and the constant floods makes the sustainability of this intervention more at risk.

The project team worked closely with community leaders to effect structural changes, For example, the established KAALO WASH and hygiene committees, Village and community selection committees, that have been trained to promote project ownership among the community which will thus ensure that established structures, remain functional.

There are a few areas, however, where improvements can be made, or that require attention to ensure the effectiveness of the remainder of the project. These recommendations are listed below.

Lessons learnt: The evaluation also reveals some lessons learnt that could be useful for the following purposes: (a) to improve the process of design and inception of interregional projects; (b) to develop better implementation plans; (c) to improve monitoring and reporting.

Recommendations: There are six recommendations arising from this evaluation that are explained in more detail in the main report and which highlight the priorities, those in charge and some possible elements of an action plan for the management response. These recommendations relate to: (a) improving the process of designing interregional projects; (b) developing better implementation plans; (c) improving monitoring and reporting; (d) better consideration of the implications of an interregional project in terms of sector, governance, coordination, collaboration and financial management; (e) improving exit strategies and knowledge management at the activity and project levels to ensure sustainability; and (f) better integration of gender throughout the project cycle.

Introduction

With cooperation of Danish people's aid, Kaalo was implemented an integrated WASH and livelihood project in Beledweyne, Hiran region of Somalia aimed to improve access to WASH facilities and provision of economic opportunities to flood affected communities. The affected communities in Beledweyne District in Hiiraan and Somalia were needed urgent assistance in WASH activities and EFSL (emergency food security and livelihood). The intervention took place in Beledweyne town and the outskirt Villages (Nasib IDPs, Kooshin) and Ceeljaale Villages 3 km. away with the goal is to reach 15,100 persons with the assistance. Therefore, the project was meant to actively contribute to the SDG. The priorities of the project were to fill the gaps and to provide resources to the end-beneficiaries who lack adequate water supplies, any kind of sanitation facilities and have a low awareness of important hygiene behaviors. The water facilities selected are particularly appropriate for the multi-use needs of IDPs Families including their domestic and agriculture-livestock needs. The project period was from November 2019 to April 2020. The project beneficiaries included direct beneficiaries consisting of 15,100 individual Beneficiaries.

Project deliverables

The expected accomplishments of the project were as follows:

- Improved WASH services for 13.000 persons Flood affected communities in B.weyne District, through provision emergency safe drinking access by voucher, rehabilitation of 3 shallow wells, constructions of 30 latrines, distribution of Hygiene kit and hygiene promotion campaigns.
- Improved quality of life for 2.370 (395 HH) persons through access immediate unconditional cash transfer.

Purpose of the consultancy

This evaluation conducted by lasting consultancy.

The primary objective of evaluation exercise was conducted to assess the impact of the 'Provision of emergency lifesaving integrated WASH and EFSL services to15,100 persons in crises affected communities in Beledweyne District in the Hiran region of Somalia' implemented by KAALO and supported in cooperation with Danish People's Aid and funded by DERF under CISU..The project was being implemented for 6 months (from November 2019 to April 2020) and involved the provision of livelihood and WASH services for IDPs and flood affected communities in Beletwene . The consultant engaged with some of the intended beneficiaries to establish the relevance, effectiveness, efficiency, impact and sustainability of the project activities. The consultant conducted a desk review of all relevant literature, conducted consultation with the project staff, stakeholders and other indirect beneficiaries to establish the level of achievement against the set the objectives of the project.

As per the ToR, the specific objectives of the assignment were as follows:

- To evaluate and verify the project's impacts achievement against anticipated target in the livelihood and WASH sectors in the targeted area of Hiran region of Somalia.
- To provide feedback on what worked and what did not as planned and to give detailed recommendations.
- To assess the accessibility of the project activities for the people of all socio-economic characteristics
- To access whether project resources are effectively used for the target communities and households.
- To evaluate the project's appropriateness in responding to the needs on the ground.
- To access and determinate the progress in the key cross cutting themes for programming such as protection, gender, children and people with the disabilities emergencies.
- To evaluate the extent to which the project activities are aligned to the existing national plans and strategies.
- To verify and document the location of 30 constructed and 3 rehabilitated latrines with their GPS data.
- To review complaint and feedback mechanism for beneficiaries at different sites

This report covers a final evaluation of the integrated WASH and EFSL project which was implemented in Hiran region from November 2019 to April 2020. The field work for this evaluation was conducted between 5/5/2020 and 12/5/2020, after the training of enumerators on 4/5/2020 in Beletweyne, Hiran region, Somalia.

2. Evaluation methodology

2.1 Criteria for evaluation

The evaluation process was done based on the Principles for Evaluation of Development Assistance as set out by OECD's Development Assistance Committee (DAC) and the Core Humanitarian Standards (CHS) on quality and accountability.

2.2 Qualitative data collection

KAALO evaluators Abdirahman Mohamud and Omar Ahmed – were responsible for the qualitative component of the fieldwork, in addition to the supervision of enumerators for the quantitative survey. Between them, they conducted key informant interviews (KIIs) and focus group discussions (FGDs) in Hiran region, Somalia.

All interviewees and FGD participants signed consent forms to take part in the exercise, and agreed for the data collected to be included in this report. Although the project beneficiaries also signed the consent forms, they will be kept anonymous. The hygiene kit, conditional and unconditional beneficiaries were also targeted for the quantitative survey, but the use of FGDs and KIIS as well allowed for a more in-depth discussion of key issues related to the project. The Field Researchers also identified members of FGDs who had something of significance to say about the impact of the project on their lives and livelihoods. Through the application of the 'Most Significant Change' approach, they interviewed these beneficiaries separately (with their consent) and encouraged them to talk about their motives while engaging in activities, and the ways in which the interventions have made significant differences to them and their families.

2.2 Project Site Visits

The Field Researchers conducted site visits to the following project sites:

- Nasib IDPs
- Shabelow village
- Ceel jaale village

2.3 Documentary Review

To supplement the data collection in the field, the project evaluation team conducted a review of supporting documents provided by KAALO project team. A list of documents reviewed can be found under Annex F.

2.4 Quantitative data collection

In addition to the KIIs and FGDs, the evaluation consultancy conducted a survey using survey questionnaire. Prior to the administration of the survey, the evaluator trained four enumerators (2M/2F Muse Ibrahim Ahmed, Osman Haji Ali, Saciido Ali and Ifrah Adan Yusuf who were selected in consultation with KAALO management. The enumerators were trained on how to fill in the questionnaires, and the survey questionnaire was thoroughly tested – a process monitored. The following project beneficiaries were targeted for the survey hygiene kit beneficiaries, hygiene promotion beneficiaries and latrine beneficiaries, conditional cash transfer beneficiaries and un-conditional cash transfer beneficiaries as well. A sample size of 375 was calculated, with a margin of error of 5%, confidence level of 95% and a sample proportion of 50%. This also took into account the fact that there was a considerable degree of overlapping between beneficiaries for different activities.

For instance, the 2765 unconditional cash transfer beneficiaries were among the beneficiaries benefitted from the provision of safe drinking water trucking, accordingly 3000 latrine beneficiaries were among the beneficiaries of the shallows wells.

Ratio analysis method was applied to obtain a sample size representation for each activity. For instance, the 2100 conditional cash beneficiaries represent 14% of the total number of reported project beneficiaries (15,100). So the target number of conditional cash beneficiaries to reach with the survey was 53 (14% of 375 sample size). The breakdown of the target samples for each activity was as follows:

Type of Beneficiary	Number of Beneficiaries	Percentage of Total	Sample Size
Shallow wells beneficiaries	6000	40%	150
Water trucking beneficiaries	7000	46%	172
Conditional cash transfer beneficiaries	2100	14%	53
Total	15,100	100%	375

Table 1: Planned sample sizes for the quantitative survey

However, although the enumerators were instructed to target the beneficiary numbers above, the actual numbers of survey respondents under each category of beneficiary was varied due to the extent of the overlap between the project activities. The use of skip logic in the questionnaire meant that each survey respondent was asked an initial question about each project activity.

2.4.1 Survey Demographic Statistics

180 of the respondents were residents of Beletweyne town, Somalia. Of these, about (70%) were IDPs, and 1 said that they were a member of the host community. 93.2% of all 182 respondents were female, and only about 7% were male – a reflection of the fact that the majority of the project's beneficiaries are female. The following graph illustrates the ages of the respondents;

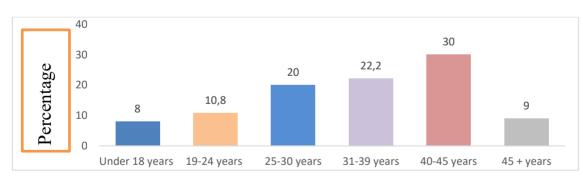
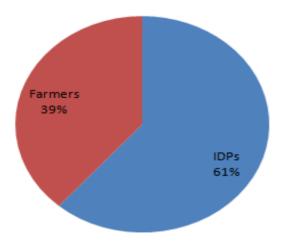


Chart 1: age of the respondents

39% of the respondents said that they were the head of their household, while of those who were not the head of their household, 57% said that their household was headed by a male.

30% of the respondents reported that the head of their household had a factor of vulnerability. When asked to elaborate, the majority (58%) said that the head of their household was divorced. 28% said that the head of their household was widowed, followed by disabled (16%), blind (1%), youth (1%) and depressed (5%). (The respondents could select more than one factor of vulnerability). The following were the main clusters of livelihoods of the respondents:

Chart 2: Cluster of the livelihood of the respondents



39% of the respondents were farmers who reside in the areas where the people fled while the majority of the respondents were internally displaced persons who have lost everything before the project intervention.

3. Main findings

This section presents findings and discussions of results per key indicator as reflected in the project log frame (see annexes). The key findings in this report relate specifically to the project relevance, effectiveness, efficiency, impact and sustainability of the Emergency Relief humanitarian project. In addition, to the quantitative data results, the focus group discussions provided more insights into processes, challenges and opportunities. The findings are systematized in relation to purpose, objectives and envisaged outputs under each of the expected result areas of the project. They are a representation of the input from the different study participants (KAALO staff, household members, hygiene promoters, other stakeholders, WASH, Village, cash beneficiaries and Community committees) as well as Consultants' analysis amplified by the literature review in the progression of the study.

3.1 Relevance and appropriateness (CHS1)

The context outlined in the Beletweyne highlights project relevance of this livelihood/WASH project, taking in to consideration in particular, the high number of displaced people in the district, as well as the large proportion of displaced and non displaced population with an insufficient access to adequate water, sanitation and materials facilitate.

The project proposal to Danish people's Aid provides was also a very relevant source of information for establishing the context within which the project was started in November 2019. The project underlines saver floods hit in Beletweyne town. The lack of government leadership and regulation had a strong impact on livelihood and crisis management and there was no government funding to emergency flooding in Beletweyne at the response from beneficiaries and project staff. In their interview with both project officer and WASH officer were confident that the project addressed significant and appropriate needs of the targeted communities and

they emphasized the fact that Beletweyne district was inhabited mainly by internally displaced persons (IDPs) who have lost their assets and livelihoods due to the recurrently floods.

In the respective FGDs, the beneficiaries of the project stated that they would not have been able to afford the cost of drinking water without the support of the project during the floods. The beneficiaries also stressed the significance of the dissemination of the hygiene promotion messages and to improve their understanding of the transmission of diseases. Members of district authorities participated in the FGDs, also touched on the relevance of the project and reported that the project has been doing lifesaving interventions (humanitarian relief) through WASH activities, and unconditional cash transfers since the community is Flood affected and they have lost their assets and therefore project has helped to save their lives.

Another member who participated in the FGD reported also that the community was heavily dependent on unconditional cash transfers given by the project when they fled from their homes. The project therefore was very timely in responding to the livelihood needs of the community. This helped reduce the need for further migration of people as a coping mechanism. The project helped to meet different needs including health, education, water and food.

3.2 Efficiency

An appreciation of the quality of project management, in terms of coordination between promoting and implementing partners, work planning, competencies of staff, funding towards determining value for money.

3.2.1 Overview

Overall, the KAALO emergency integrated WASH and livelihood project has operated efficiently and has achieved significant progress in delivering its objectives within tight constraints of resource availability and short project duration. The political sensitivities of a locally unfamiliar agency working within the resettlement of internally displaced persons led to initial resistance and delays from authorities. Since the program's inception KAALO has been very successful in building the trust of the authorities and communities which is necessary to operate within these areas and is now an established and accepted partner.

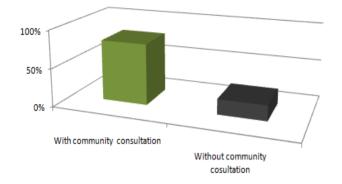
The key findings related to efficiency of the project, and recommendations for enhancing efficiency in future projects of a similar nature, are summarized below.

3.2.2 WASH activities

The project supported flood effaced communities with the necessary basic needs namely access to clean water, rehabilitated shallow wells, construction of latrines with hand washing facilities, hygiene kits with the hygiene promotion awareness. 90% had at least received 7.5 liters of clean water per day from the rehabilitated water points and 83% of the latrines beneficiaries said that they were consulted about the location of the latrines before they were constructed, while the remaining 17% said that they were not consulted. 80% thought that the constructed latrines were enough for their community, while 20% said that they were not enough. The vast majority (98%) said that they were satisfied with the quality of the construction of the latrines. All three of the respondents who were not satisfied said that it was because there was no water to wash their hands.

The majority of the respondents (88%) reported receiving the hygiene kits consisting of 1 jerry can, 1 bucket, 3 bars of soap and 200 aqua tabs for 500 HHs in the IDP centers, while 8% said that they received the hygiene kits at the KAALO office, 3% said in the Nassib IDP and 1% said that they could not remember.

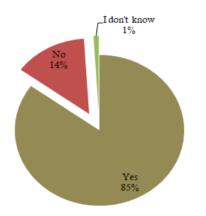




About 80% of all the survey respondents reported that latrines had been constructed by Kaalo with the community consultation, while 10 % said that they did not know whether latrines had been consulted with the community or not. The most of the respondents said that latrines had been constructed by KAALO.

99% said that the latrines were in use by their communities and 1% said they were not in use because of no water. When asked whether there were signs on the latrines clearly indicating whether they were exclusive for use by women, 87% said 'Yes', 7% said 'Don't know' and 6% said 'No'.

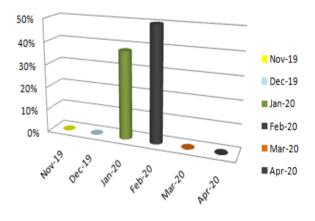




As illustrated by the following graphs, 85% said that mentioned the accessibility of the Wash washing facilities with the latrines, 14% responded that they didn't know about the hand washing facilities. 100% of the latrine beneficiaries interviewed confirmed that the latrines were lockable.

Chart 5: When did you receive the hygiene kits?

About the distribution of the hygiene kits, the majority of the beneficiary's interviewed responded that they received the hygiene kits beneficiaries in January and February 2020. 88% reported receiving the hygiene kit at the IDP center, while 8% said that they received the kit at the Kaalo office, 3% said in the Nassib IDP and 1% said that they could not remember. The respondents were asked to list all the items in the hygiene kit and 95% mentioned three bars of laundry soap, 94% mentioned one bucket, 90% mentioned one jerry can and 80% mentioned 200 water purification tablets. The vast majority (99%) reported using all the items, while only 1respondent said that they traded them for something else (without specifying).



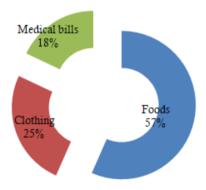
3.2.3 Unconditional Cash Grants

KAALO through Hormuud telecom Somalia enabled that the beneficiaries receive the unconditional cash grants via electronic voucher to 395 effected HHs (2 round/month rate of 65 dollars per HH). Although the vast majority of beneficiaries (95.9%) received their grants on time, a few (4.1%) experienced delays due to technicalities problem coming from Hormuud. There was one report of a beneficiary who failed to receive one payment (\$65) due to missing the distribution, and who did follow-ups but never received the cash. Complaints procedures involved phone calls or visits to KAALO office by beneficiaries as many beneficiaries were between 5 to 15 km from the office, this is onerous, involves financial costs, and lacks accessibility. Appeals and complaints procedures should be able to be easily completed locally by the beneficiary, possibly though nominated independent focal persons, or members of KAALO field staff.

In general, cash aid is considered to be a more appropriate resource transfer vis-à-vis food aid and an effective way of offering choices to protect or restore livelihoods. Unconditional cash transfer enabled beneficiaries to make choices about the type of food households preferred and required. The cash transfers enabled purchases / investments in livelihood needs beyond food. Generally cash aid may have a more rigorous impact and be more successful in maintaining an economic perspective for recipient households. It offered choices and allowed households to focus on their own priorities.

98.4% reported no problems in accessing the goods they needed to purchase, and 99.2% reported no impacts on prices due to the project. There were one-off reports of nearby shops increasing prices, problems related to "buying in bulk", and having to travel a long way to buy basic food items.

Chart 6: what have you spent with the cash grants you received from KAAO?



On how different households were using the cash transfers received from the project. Most households 56.6% were using the cash transfers to meet their basic foods, this was followed by clothing 25.4%, medical bills were at 18%, school fees 0%, electricity bills 0%, house rent 0%.

The appropriateness of cash aid was largely linked to the fact that it provided a choice to beneficiaries in making purchases according to their own prioritized livelihood needs. Cash transfers provide a more effective alternative for resource transfers compared to other humanitarian emergence relief operations.

The choice in deciding on the type of requirements to be purchased is highly relevant. In the context of Hiran food aid to beneficiaries may include such food items that may be inappropriate to their customary diet requirements.

The project also supported the staff and volunteers to do their job effectively with a relevant response to the needs of the Hirsh belle states communities. KAALO project Staff were well informed of the humanitarian intervention. The staff had been oriented in different areas including; CHS, cluster and result based management, Do no harm principles, and security training, (CHS 8)

Summary of problems identified by beneficiaries:

- Beneficiaries felt the transfer amount was insufficient to meet basic needs. Some resorted to piece work, casual labor, and food for work programs, borrowing or begging to supplement income.
- Resentment from those excluded.

3.2.4 Conditional Cash Grants

All of the beneficiaries interviewed felt the conditions attached to the grant were clearly explained, fair and easy to comply with. However, they all felt that below listed agricultural inputs were not adequate.

#	Agricultural inputs	Quantities per HH	Remarks
1	Urea fertilizer	25KG	No quality defects
2	Fuel	31 L	reported by the
3	Shovel	1	beneficiaries.
4	Ное	1	
5	Garden Rake	1	
6	Mize seeds	5kg	
7	Sorghum seeds	5KG	
8	Cowpeas seeds	3KG	
9	Sesame seeds	3KG	
10	Tractor/TILLAGE	0.5 Hectare	

Most (70.2%) travelled less than 2 km to receive the inputs and none travelled more than 4 km. All walked to the site. Most walked for not more than one hour (51%), and 93% walked not more than 10 minutes. A minority (7%) took between 2 and 4 hours to walk to the site. Beneficiaries were quickly and efficiently dealt with at the agricultural inputs distribution site, with 41% taking less than 1 hour to receive their agricultural inputs, 82% less than 1.5 hours, and only 3.6% took more than 2 hours. All beneficiaries rated the help they received in establishing their inputs as "good" (10.7%) or "very good" (89.3%). 83.3% were able to pursue their preferred inputs, although 16.7% reported being unable to do so due to the provided agro inputs being insufficient.

A key issue was distances to viable markets for selling produce and sourcing inputs. In remoter areas. the development and expansion of IGAs is hampered by the long distances to viable markets, poor road infrastructure and transport services, and a lack of coordination amongst beneficiaries (e.g. in transporting inputs and outputs from / to markets). This has enhanced the gains from the conditional cash transfers component and should be continued in future projects.

Summary of problems identified by beneficiaries:

- Problems finding markets and distances to viable markets resulting in high transport costs were a problem for many beneficiaries.
- Disease and death of chickens. This was treated with indigenous chemicals or bought medicines.
- Lack of sufficient funds to cover other inputs, and an adequate agro inputs.
- Conflicts with police due to lack of vendors licenses.
- The need to borrow money / do casual labor / sacrifice other expenditures to address these issues.
- Low prices for thin cattle and debt from cattle purchase led one beneficiary to move from cattle to goat production.

Key Recommendations

Beneficiaries participating in conditional cash transfer, market linkages and other projects involving vendor activities need to be supported to obtain the required trading permits / licences to avoid the project putting them into conflict with the law.

Consider potential for supporting beneficiary-led solutions to accessibility / transport difficulties though joint input sourcing and transportation of produce.

3.3 Effectiveness

An assessment of the extent to which envisaged outputs (facilities and services put in place) are being achieved and the appropriateness of the implementation strategies being implemented.

A clear strategy to deliver relevant inputs to target participants in line with their needs, and assumptions-based scenarios for outcome targets, need a strong link with a theory of change. In fact, outcome values were easy to predict and the context analysis informs the logic based on previous contextual assessments and experiences that can strengthen the assumptions behind cumulative changes.

The choice of indicator to measure cost-effectiveness is well elaborated in the project documents. The way this ratio is generated relies on a clear idea of outcome-level milestones, how they are sequenced and linked to costs. When assumptions of how benefits translate into monetary value are clear, a cost/benefit analysis can be conducted; otherwise a simple cost-effectiveness calculation is sufficient.

Overall, the project was successful in its primary goal of contributing to the durable resettlement and integration of internally displaced people and returnees by improving their food security and access to livelihoods opportunities.

- 92% of the beneficiaries described lifesaving intervention through access to safe water and rehabilitated shallow wells. Improved access to latrines was another major project milestones.
- 84% of beneficiaries reported increased acceptance of IDPs / returnees within the host community.
- 99.6% of beneficiaries rated the type of assistance they received as "good" (11%) or "very good" (88.6%) at meeting their needs.
- 84% of beneficiaries reported consuming an increased quantity of food, and 77% reported consuming an increased variety of food. Most of those not reporting an increase were agricultural inputs recipients where income benefits have not yet been realized.
- Average number of meals eaten per day is estimated to have risen from 1.9 to 2.6.
- 26% of beneficiaries reported an increase in the number of assets owned. In 1% of cases assets declined, mainly due to the need to provide inputs for livestock project (e.g. medicines / feeds).

The period of implementation of the initial project (6 months) was not adequate to achieve all the intended impacts. In some cases, this resulted in them terminating before they were yielding the intended benefits.

Key Recommendations

A longer-term approach is needed to increase the tangible benefits secured. A holistic 'life cycle' approach would be better able to consolidate gains and / or provide support beneficiaries up the productive phase of the livelihood activity.

3.4 Impact

There was evident visibility of the KAALO Relief project amongst the different sectors of humanitarian intervention within Hiiran region. The visibility reflected KAALO as source of humanitarian emergence relief that saves and impacts on the lives and livelihoods of the vulnerable groups. Provision of safe water, distribution of hygiene kits to households, and cash reliefs helped the community to endure the flood affected people. The hygiene awareness campaigns and trainings, and established garbage collection points helped to reduce disease outbreaks thus achieving the overall expected project results.

Table 6: Impact of project

Primary impact	Secondary impact
WASH and Livelihood	Rights and access
 Improve provision of safe water though rehabilitation strategic water sources Reduction in open defecation Hygiene kits have led to improved hygiene and sanitation 	The vulnerable groups have been empowered to meet household needs (like medical bills, electricity bills, food, and housing rent).
 Contribute life-saving interventions through conditional and unconditional assistance to flood affected communities Trainings and awareness campaigns 	Equity and inclusion The programme has directly and indirectly responded to the needs of the girl child. The cash
There is diversity in the interventions implemented which enables communities to have more information, capacity and skills to act on WASH and livelihood demands.	relief provided helped to increase retention of the girl child in schools. The dignity kits distributed also contributed to improving self-esteem and self- worth among the females and school going girl child.

3.5 Sustainability

The assessment of sustainability of a project is deriving from the question of whether the activities were set up to produce long lasting effects, created durable structural, institutional and organizational changes and what the risks for sustainability there are.

The project approach is geared towards structural changes, capacity development and the institutionalization of capacity development measures which are important factors in achieving sustainability. Communities and leaders operate with harmonized project structures, and government grassroots extension system. For example, the established KAALO WASH and hygiene committees, Village and community selection committees have been trained to promote project ownership among the community which will thus ensure that established structures remain functional.

Limitations

The ongoing covid 19 pandemic restrictions had negative impact of planed evaluation process.

The security situation coupled with beneficiary migratory nature could not permit comparison between beneficiaries and non-beneficiaries in each project.

Prevailing security situation hindered consultant movement to the community thus hampering close field supervision and support. Site visit observations were made in village in which the latrines were constructed as well as interviews and discussions with hygiene kit beneficiaries for better and clearer understanding of the projects.

In one village (kooshin) the authorities denied the enumerators the chance to complete the interviews. To counter this, the sample size in other districts was increased to cater for the deficit created.

Some FGDs could not be conducted due to lack of quorum in the category. This was mainly experienced with the cash transfer project; where some beneficiaries had moved to other settlements or back to their regions or yet still others had gone to the town. Alternative beneficiaries were found to replace them in the sampling frame.

Lessons learnt

For improving the design and inception phases of projects

- If a project's programme theory is not well defined, explicit, and well linked during the design or inception phase, this leads to unclear linkages between activities and results for the contribution to objectives. A stronger inception phase in complex interventions produces a stronger implementation plan in which actions are clearer, more effectively prioritized and interlinked and interregional motivation is stronger.
- There are factors that contribute to the sustainability of this kind of emergency intervention, such as strong coordination with other agencies, local authorities, the prioritization of needs at the affected communities, the clear criteria of beneficiary selection of sites.

For improving monitoring and reporting

- It is necessary not only to implement assessment tools such as surveys at workshops or other events, but also to use them for monitoring and management purposes by drawing on the assessment results to inform decision-making and general progress reports.
- The lack of harmonization of the assessment tools with in organization projects and the lack of formal implementation of follow-up tools makes it more difficult to monitor and evaluate.

Recommendations

- I. Improve the process of the projects; the project design and the implementation plan were not clear/sufficiently developed, which affected the relevance. The project designer should clearly understood CHS in the implementation phases and consulted hand in hand with the guidance notes and indicators in the implementation of the humanitarian project since the guidance notes help to provide more insights and explanations in the implementation of the humanitarian assistance.
- 2. Developing better implementation plans; Given the huge needs and the scarcity of resources for this kind of projects, it will always be necessary to explore the most relevant and strategic work plan in relation to the project timeframe.
- 3. Improve monitoring and reporting; the progress reports were appropriate but failed to capture existing information on the quality of the vents, such as workshops.
- 4. Better consideration of the implications of an interregional project in terms of sector , governance, coordination, collaboration and financial management;
- 5. Improving exit strategies and knowledge management at the activity and project levels to ensure sustainability.
- 6. Better integration of gender throughout the project cycle.

Annexes

Annex A: General equations

Theme	Questions
Relevance	Is the project addressing significant?
	and appropriate needs of the
	Community? In what ways?
Efficiency	 Would you say that project activities?
	 Are being implemented on time? If not, why not?
	 Has there been a budget revision?
	 Has a no-cost extension (NCE) been requested / approved? If so, what is the new project end date?
	 What steps, if any, are being taken to coordinate with other agencies in the area/same sector? Have these efforts been successful? If not, why not?
	 Have sufficient funds been allocated
	• to the project? Please explain.
	 Have the funds been made available on time? Do you have staff with the right skills to carry out the tasks of the project?
	 How are project activities reported on (and how frequently)?
	 Have you experienced any challenges in reporting?
	 Do you have a beneficiary feedback and
	complaints mechanism in place? If so, please outline how it works, and whether you've had any positive or negative feedback so far.
Effectiveness	Have community members been involved in planning, implementing or monitoring the
	project? If so, how?
	 To what extent, if at all, are local leaders/local authorities involved in planning, implementing or manitaring the ansist?
	monitoring the project?
	 What challenges have been encountered in ensuring the participation of: (a) Local authorities; and (b) community members?
	How have you involved women in the project?Is the project delivering the services that it said it
	would deliver?
	 Are there things that the project could be doing differently to be more effective has insecurity hindered implementation at all? If so, how?

	 What other challenges has the project faced? 	
Impact/degree of change	What kind of benefits will the project have on families and	
	the community?	
	 Do you think there could be any negative impacts? 	
	If so, what could be done to mitigate them?	
Sustainability	How will the planned/implemented activities	
	ensure that the project is sustainable?	
	 How can the project transition to a more 	
	sustainable approach?	
	 What could be the exit strategy? 	
	 What lessons have been learnt so far that can be 	
	applied in any future intervention of this kind?	
	 Are there any issues of concern that should be 	
	followed-up?	

Annex B: FGD Questionnaire: Hygiene Kit Beneficiaries

- Is the project addressing your needs and those of your community?
- Please describe how it is doing so (ask them to list the project activities they are aware of, and how they are benefitting from them)
- Can you all confirm that you have received a hygiene kit from KAALO as part of their /WASH project from November 2019 to date?
- When did you receive this hygiene kit? Please give the month and year? In which location did you receive the hygiene kit?
- How were you informed about the distribution?
- Did you have to sign or fingerprint a document to confirm that you received the hygiene kit?
- Please list all the items included in the hygiene kit.
- Did the Hygiene promoters who gave you the hygiene kit give you any instructions on the use of the items in the kit?
- Were these instructions clear enough or do you think they should have gone into more detail? If so, which items in particular did you need more instructions for?
- Were you satisfied with the types of items included in the kit?
- Were you satisfied with the numbers of items included in the kit?
- Are there any other items that you needed and felt should have also been included in the kit?
- Did you use all of the items in the kit yourself or for your household, or did you do
- Something else with them (eg sold them, traded them, or kept them but didn't use them)?
- Did you face any challenges collecting the hygiene kit (e.g travelling a long distance to reach the collection point, or waiting for a long time in a queue)?
- Were the selection criteria clearly communicated and fair in your opinion?
- Where do you currently get your drinking and household water from? do you pay for this water?
- On average, how much time does it usually take you to reach the main water supply?
- Are you satisfied with the quality of water from the available water sources?
- Are you satisfied with the quality of water from the available water sources?
- What do you currently use to carry or store your water?
- Have you received any counseling on hygiene promotion awareness of water borne diseases? If Yes, when did you receive this training? Please list all the key messages that you remember from this training.
- Have you found these messages useful, and followed the advice on a daily basis in your household?
- Have you spread any of these hygiene promotion messages to other members of your household or community?
- Have the hygiene messages and kits distributed to you reduced the frequency of diarrhea in your young ones?
- Are there any changes you have noticed that the project has already brought about? If not do you think the project will bring about any changes?
- Do you think the project could have any negative impacts? If so, what are these?
- Do you think your community will be able to continue necessary activities on its own once the project is completed?
- What are the challenges for you to do so?
- Do you have any suggestions to make the project more effective?
- Are there any other issues related to this project, not already covered in this survey, that you would like to report to the evaluation team? Thank you for your time

Annex C: Site Visit for 30 constructed latrines

Record the GPS Coordinates of all 30 visited latrines:

- Has the construction of all the latrines been completed, and is the construction of high quality? If not, which latrines are incomplete, and what work is still left to be done?
- Does each latrine include a women-friendly latrine? If so, please describe what makes it women-friendly.
- Does each women-friendly latrine have a clear sign that it is only for female use?
- Does each latrine include a disability-friendly latrine? If so, please describe what makes it disability-friendly.
- Does each disability-friendly latrine have a clear sign that it is only for disabled use?
- Is each latrine lockable?
- Does each latrine have a hand-washing facility? Please describe the facility. Does each block of latrines have sufficient lighting? What about at night?
- How many of the latrines are currently in use?
- Who is responsible for the management of each latrine?
- Is each latrines well located? (In line with SPHERE standards a maximum of
- 50 meters from households?)
- Do the users of the latrines have to travel far to access them?
- Any other notes from your observations during the site visit:

Annex D: Checklist for KII with senior KAALO project staff

Outcome 1: 13.000 persons have accessed emergency WASH services through rehabilitation water source, Construction of emergency Latrines, distribution of hygiene kits to effected communities, AWD awareness Campaign;

- (Outcome Indicator 1) what percentage of the targeted Beneficiaries use rehabilitated water points
- (Outcome Indicator 2) what percentage of the targeted Beneficiaries utilizes and use the emergency latrines constructed quality, timeliness and relevance of assistance received satisfactory
- (Outcome Indicator 3) what percentage of the targeted Beneficiaries received Hygiene Kits

Outcome 2: 395 HHs have accessed immediate unconditional cash transfer and restored their livelihood related to food and income source.

- (Outcome Indicator 1) What percentage of the targeted target vulnerable Households spend their money on basic food necessities
- (Outcome Indicator 2) What percentage of the targeted beneficiaries utilized and use the Agricultural inputs distributed for in local communities as a standard practice.

Output 1: Improved WASH services for 13.000 persons Flood affected communities in B.weyne District.

- 1.1. Distribution of hygiene kits
- How many households have received hygiene kits to date?
- On which date(s) were the hygiene kits distributed?
- Where did the distribution of the hygiene kits take place?
- How were beneficiaries informed about the distribution? How was it organized?
- Were gender-disaggregated and signed/fingerprinted lists of recipients used for the distribution of the hygiene kits? Please list all the items included in each of the hygiene kits.
- Were any challenges faced related to the procurement and distribution of the hygiene kits?

1.2. Hygiene promotion and awareness-raising

- How many community health workers (CHWs) have been trained and are working under this project?
- Please list the dates of any training sessions for the CHWs, the key topics covered and the participant numbers (gender-disaggregated).
- Are the CHWs paid or is their work voluntary? If they are paid, how much are they paid per month?
- Have the salaries of the CHWs been paid on time every month?
- In detail, please describe the hygiene promotion activities conducted under this activity.
- Have any reports been produced specifically covering the hygiene promotion activities?
- If the hygiene promotion activities have been conducted as group sessions within target
- Communities,
- Who are the participants of the hygiene promotion sessions? (E.g. host community elders,
- Community representatives within IDP camps, elders, women, children, etc)
- What are the key messages disseminated during these sessions?
- Are any manuals or information, education and communication (IEC) materials used during the sessions? If so, please describe these manuals/IEC materials.

1.3. Latrine construction

Please indicate the number of latrines constructed to date and their locations/IDP camps.

- How were these latrine locations selected, and who was involved in the site selection?
- What is the catchment population for each latrine?
- Does each latrine have a hand washing facility? If so, please describe the
- Hand washing facility.
- Does each latrine have a working lock?
- Please outline how the latrines are 'women-friendly'.
- Please outline how the latrines are 'disability-friendly'.
- How many of the latrines are currently in use?
- Could you estimate how many people are currently using each latrine?
- Who is responsible for the management of the latrines?
- 1.4. Rehabilitated Shallow wells.

Please indicate the number of shallow wells rehabilitated to date and their locations/IDP camps.

- Who was participated selection process of these wells?
- What is the catchment population for each shallow well?
- Please describe shallow wells that you had rehabilitated (width, depth and type of Hand pump you installed?
- Could you estimate how many people are currently using each shallow well?
- Who is responsible for the management of the shallow wells?

Output 2: improve the quality of life for 2.370 (395 HH) persons through access immediate unconditional cash transfer and restored their livelihood related to food and income source.

2.1 Unconditional Cash Transfers.

- How many households have received unconditional Cash transfer to date?
- On which date(s) month(s) they we received?
- How much money received per HH?
- How were beneficiaries informed about transfer method? How was it organized?
- Is there a feedback mechanism for beneficiaries? Please describe selection process.
- Were any challenges faced related to the selection process?

2.2. Agricultural input distributions.

- How many households have received Agricultural inputs to date?
- On which date(s) were the Agricultural input distributed?
- Where did the distribution of the Agricultural input take place?
- How were beneficiaries informed about the distribution? How was it organized?
- Were gender-disaggregated and signed/fingerprinted lists of recipients used for the distribution of the Agricultural input?
- Please list all the items included in each of the Agricultural input.
- Were any challenges faced related to the procurement and distribution of the Agricultural input?

Annex E: Survey questionnaires

Introduction

Good morning/afternoon. My name is I am working with to assess the progress of a Livelihood /WASH project they are implementing in Baladweyne. You have been randomly selected to participate in a short survey. All the information you provide is confidential, and your participation is voluntary. The survey should take around 20 minutes. Are you willing to take part?

Instruction to enumerators: Confirm whether the beneficiary is willing to take part, and if so, begin the survey. If not, thank them for their time and move on to the next beneficiary.

Please fill in the questionnaires as accurately as you can base on the interviewees' responses.

Questionnaire number:	
Date of interview:	
Name of enumerator:	
In which district and village/IDP camp do you	
currently live?	1. District:
	2. Village/IDP Camp

A1	Respondent name:		
A2	Residency status:	1=Host community	
		2=IDP	
		3=Other (please specify)	
A3	Gender:	1=Male	
		2=Female	
A4	Age of the respondent:	1=Under 18 years,	
		2=19-24years,	
		3=25-30years,	
		4=31-39years,	
		5=40-45years,	
		6=45+ years	
A5	Size of Household:	1= Male:	Total
		2= Female:	
A6	Are you the head of the	0=No,	
	household?	1=Yes	
	If NO, what is the gender of the	1=Male	
	head of your household?	2=Female	

A7	Does your head of HH have any	1= Yes	
~/	factors of vulnerability (e.g.	2=No	
	disabled, widowed, divorced or	2-110	
	youth)?		
A8			
Ao	If Yes, please specify		
A9	Cluster of livelihood of your	1= Agro pastoralist	
7.0	household:	2= Pastoralist	
		3= Urban resident	
		4= IDP (provide details)	
A10	Is it OK if were cord phone	1=Yes	
/(10	number, in case we have any	2=No	
	follow-up questions?	3=They do not have a phone	
	How many family members live		
	with you in your HH?		
A11	How many family	1= Children under 5. Male,	
~11	members live with you in	Female	
	your households?	2= Youth 13-18 years	
	you nousenous!	Male, Female	
		3= Adults > 18 years	
		Male, Female	
		4= Disabled	
 \//\\CLIL	ygiene kit beneficiaries	Male, Female	
B1		0=Yes 1=No	
DI	Have your received a hygiene kit from KAALO?	0-163 1-100	
	NAALU!		
B2	When did your receive the hygiene kit?	0=Sept-Dec 2019	
52		1=Jan-APRIL 2020	
		1 30117111122020	
B3	Where did your receive the hygiene	0=Kaalo office Clinic 1=At the	
	kit?	IDPS my house =Other (please	
		specify) 2=Can't remember	
B4	Please list all the items that	List of items included in each hygiene	
	were included in the hygiene kit.	kit (to be confirmed by KAALO prior to	
		the data collection)	
	(Guidance for enumerators: wait to		
	see which items the respondent		
	mentions and tick them off the list.		
	You can also prompt them for any		
	items that they may have		
	forgotten)		
	Jurgottenj		

B5	What did you do with these items?	0=Used them 1=Sold	
	,	them	
		2=Traded them for something else	
		3=Kept them but did not use them	
		4=Other (please specify)	
	Was the quantity of the items in	0=Yes 1=No	
В9	the hygiene kits insufficient for the		
	size of your household?		
	If No, what were the items that	List of items included in each hygiene	
B10	were not enough?	kit (to be confirmed by KAALO prior to	
		the data collection)	
B11	Are there any other items that	0=Yes (please specify) 1=No	
	you would have liked to have		
	been included in the hygiene kits?		
B12	Did you receive any training or	0=Yes 1=No	
	instructions on how to use the		
	items in the hygiene kits?		
B13	If yes ,did you consider these	0=Yes 1=No	
	instructions to be clear enough?		
	Did you face any challenges collecting	0=Yes 1=No	
B14	the hygiene kit?		
B15	If Yes, what challenges?	0=Poor treatment by staff 1=Lack of	
		information on the use of the hygiene	
		kit 2=Long queues	
		3=Insecurity	
D 46		4=Others (please specify)	
B16	Where do you currently get	0=From shallow wells rehabilitated by	
	your drinking and HH water	KAALO	
	from?	1= water tracking from KAALO	
		2= From a neighbor	
D17	De very new far this water?	3= Others (please specify)	
B17	Do you pay for this water?	0=Always 1=Sometimes	
		2=Never	
B18	On average, how much time does it	3=Other (specify) 0=0-15 minutes	
D10	usually take you to reach the main	1=15-30minutes	
	water supply?	2=30-45minutes	
		3=45 minutes – 1 hour	
		4=Over 1 hour	
B19	Are you satisfied with the quality	0=Yes 1=No	
919	of water from the available water	0-163 1-100	
	sources?		
	5001005:		

B20	What do you currently use to carry or	0=An open bucket	
	store your water?	1=A jerry can	
		2=No storage items	
		3=Others (specify)	
WASH- H	lygiene promotion beneficiaries	· · · · ·	
D1	Have you received any training on hygiene promotion awareness of water borne diseases?	0=Yes 1=No	
D2	If yes, when did you receive this training?	0=November-Dec 2019 1=Jan-March2020 2=Can't remember	
D3	Where did you receive this training?	0=At the Kaalo office 2=At Hotel 3= others (please specify)	
		4=Can't remember	
D4	Please list all the key messages that you remember from this training. (Guidance for enumerators: only select the messages in the list that they mention. Do not prompt them with any messages that they may	List of all messages disseminated by CHWs during the hygiene promotion sessions (to be provided by KAALO prior to the data collection)	
	have forgotten)		
D5	Have you found these messages useful, and followed the advice on a daily basis in your household?	0=yes 1=No	
D6	If No, why not?	0=I don't have the necessary resources (eg cleanwater) 1=I can't remember the hygiene messages 2=Other (pleasespecify)	
D7	Have you spread any of these hygiene promotion messages too thermembers of your household or community?	0=Yes 1=No	

WASH – Latrine beneficiaries

E1		0=Yes
	Has a latrines been constructed by	1=No
	KAALO in your community?	
		2=Don't know
E2	Are you and your neighbors currently using	0=Yes
	these latrines?	1=No
E3	If No, why not?	0=There is no water
		1=The construction is
		incomplete
		2=Other (please specify)
E4	(Continued from a 'No' response from	0=Yes
	QuestionE2)Do you currently have a	1=No
	toilet within your home?	
E5	If Yes, do people use it?	0=Yes
		1=No
E6	If no, where do family members go to	0=In a neighbour's house
	the toilet?	1=At school
		2=At a public toilet 3=Outside
		in the open 4=Others (please
		specify)
E7	Is there assign on this latrine clearly	0=Yes
	indicating that it should only be used by	1=No
	women?	2=Don't know
E8	If no, is there any other way the HHs can	
	know which to inlet is to be used by men	
	or women?	
E9	Is one of the five latrines disability-	0=Yes
	friendly?	1=No
		2=Don't know

E10	I fYes, please describe how it is disability-friendly	
E11	Are all of the latrines lockable?	0=Yes 1=No 2=Don't know
E12	Does the latrines have a hand- washing facility?	0=Yes 1=No 2=Don't know
E13	Were you consulted about the location of the latrines before they were constructed?	0=Yes 1=No
E14	Do you think that the number of latrines constructed is enough for your community?	0=Yes 1=No 2=Don't know
E15	Are you satisfied with the quality of the construction of the latrines?	0=Yes 1=No 2=Don't know
E16	Do you/ will you feel safe using these latrines?	0=Yes 1=No 2=Don't know
E17	If No, why not?	
E18	Do you wash your hands after going to the toilet?	0=yes 1=No
E19	If Yes, do you use soap?	0=Yes 1=No
E20	If No, why?	0=Because soap is unavailable 1=Because soap is expensive 2=Because washing hands with soap is unnecessary
E21	Do you face any restrictions when accessing the latrines?	0=Yes 1=No
E22	If Yes, what are these restrictions?	

Livelihood – Agricultural Inputs

F1	Have you received agricultural Inputs	0=Yes	
	from KAALO?	1=No	
F2	When did you receive the Agricultural	0=Sept-Dec 2019	
	Inputs?	1=Jan-APRIL 2020	
F3	Where did you receive the Agricultural	0=Kaalo office	
	Inputs?	1=At the IDPS my house	
		=Other (please specify)	
		2=Can't remember	
F4	Please list all the items that were	List of items included in each	
	included in the Agricultural Inputs.	hygiene kit (to be confirmed by	
		KAALO prior to the data collection)	
	(Guidance for enumerators: wait to see		
	which items the respondent mentions		
	and tick them off the list. You can also		
	prompt them for any items that they		
	may have forgotten)		
F5	What did you do with these inputs ?	0=Used for	
		farming 1=Sold	
		them	
		2=Traded them for something else	
		3=Kept them but did not farm	
		them	
		4=Other (please specify)	
	Was the quantity of the items in the	0=Yes	
F6	Agricultural Inputs sufficient for farm?	1=No	
	If No, what were the items that were	List of items included in each	
F7	not enough?	Agricultural Inputs (to be	
		confirmed by KAALO prior to the	
		data collection)	
F8	Are there any other items that you	0=Yes (please specify)	
	would have liked to have been	1=No	
	included in the hygiene kits?		

F9	Did you receive any training or	0=Yes	
	instructions on how to use the inputs	1=No	

F10	If Yes, did you consider these	0=Yes
	instructions to be clear enough?	1=No
	Did you face any challenges collecting the	0=Yes
F11	Agricultural Inputs?	1=No
F12	If Yes, what challenges?	0=Poor treatment by staff 1=Lack
		of information on the use of the
		Agricultural Inputs 2=Long
		queues
		3=Insecurity
		4=Others (please specify)

Livelihood – Unconditional CASH transfer

G1	Have you received un-conditional cash	0=Yes
	fromKAALO?	1=No
G2	When did you receive the unconditional	0=Sept-Dec 2019
	cash?	1=Jan-APRIL 2020
G3	How did you receive unconditional	0=EVC
	cash (transfer method?	1=EDAHAB
		2= =Other (please specify)
		3=Can't remember
G4	What did you do with these moneys?	0=buy essential
		food item
		farming 1=Pay
		house rent
		2=Pay school fee
		3= Other (please specify)
	Was the money you received	0=Yes
G5	sufficient?	1=No

Annex F: List of project recommendation reviewed

Among other documents, below listed documents were reviewed in a desk study;

- Project proposal
- Project log frame
- Project incept report
- Monthly reports
- Midterm report
- Activity reports
- Distribution report
- Final evaluation report