

EVALUATION REPORT

April 2021

Evaluation of the UNICEF Response to the South Sudan Humanitarian Crisis (2016-2019)



Part 2: Emergency Education, Child Protection and related issues

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EVALUATION OF THE UNICEF RESPONSE TO THE SOUTH SUDAN HUMANITARIAN CRISIS (2016-2019)

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The report was prepared by independent consultants - James Darcy (team leader), Francesca Ballarin, Sophie Busi, Rui da Silva, and Volker Huls. Jane Mwangi managed the overall evaluation process with active engagement and support from UNICEF South Sudan country office.

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PREFACE

This report contains the results of Part Two of the evaluation of the UNICEF Level 3 emergency response in South Sudan (from January 2016 to December 2019). The focus of Part Two is on child protection and emergency education, although it also covers some cross-cutting issues including the humanitarian-development nexus and the centrality of protection principle. It also updates the analysis of 'child survival' sectors from Part One of the evaluation (Nutrition, Health and Water, Sanitation and Hygiene). While the formal cutoff date for the evaluation is the end of 2019, the report also makes reference to the more recent situation, particularly as affected by the coronavirus (COVID-19) pandemic and related control measures. The report's recommendations are framed with this in mind.

Although much of the work on the evaluation was undertaken in 2019, completion was delayed by a number of factors, including changes in personnel on the evaluation team and in the South Sudan country office, and more recently by the COVID-19 situation. This necessitated some mid-term revision of the terms of reference: in particular, some of the more management-related and operational aspects of the response were not considered, and the overall timeframe was extended to the end of 2019. The core focus on child protection and emergency education has remained constant.

The evaluation team was led by James Darcy, an independent consultant, who was also the team leader for Part One of the evaluation. He was joined by Francesca Ballarin, an independent specialist in child protection and education in emergencies, and by Sophie Busi, an independent consultant who assisted particularly with data analysis. A specialist in education, Rui da Silva, formed part of the team in 2019. Volker Huls, who was involved with the Part One team, also supported Part Two remotely with document collation and data analysis. The team was joined on the inception mission by Jane Mwangi from the UNICEF Evaluation Office, who also provided support and oversight to the evaluation process from New York. I would like to convey my sincere appreciation to James and the rest of the team for the evaluation team for undertaking the two-part evaluation and generating useful recommendations that will enable UNICEF to enhance its programming for children of South Sudan.

I would like to express our thanks to the UNICEF South Sudan, and in particular Hyun Hee Ban and her team in the social policy, planning, monitoring and evaluation department, and the Deputy Representative (Andrea Suley) for generously hosting the evaluation and supporting it over such an extended period. Their patience throughout has been much appreciated.

Thanks finally to colleagues in the Evaluation Office in New York for enabling and supporting the whole two-part process, namely, Jane Mwangi for managing the evaluation; Carlotta Tincati and Laura Olsen for technical inputs and support; and Celeste Lebowitz, Geeta Dey and Dalma Rivero for providing administrative support throughout out the evaluation process.

Fabio Sabatini
Evaluation Director a.i.

ABBREVIATIONS AND ACRONYMS

AoR	Area of Responsibility
BTL	Back To Learning
C4D	Communications for Development
CAAFAG	Children Associated with Armed Forces and Groups
CBCM	Community-Based Complaint Mechanism
CBO	Community-Based Organization
CCCs	Core Commitments for Children in Emergencies
CEAP	Corporate Emergency Activation Procedure
CFS	Child-Friendly Space
CLTS	Community-Led Total Sanitation
COAR	Country Office Annual Report
COVID-19	Novel coronavirus
CP	Child Protection
CPD	Country Programme Document
CPiE	Child Protection in Emergencies
CSO	Civil Society Organization
EiE	Education in Emergencies
EO	Evaluation Office
ESARO	Eastern and Southern Africa Regional Office
FAO	Food and Agricultural Organization
FO	Field Office
FSNMS	Food Security and Nutrition Monitoring System
FTR	Family Tracing and Reunification
GAM	Global Acute Malnutrition
HACT	Harmonized Approach to Cash Transfer
HCT	Humanitarian Country Team
HNO	Humanitarian Needs Overview

HRP	Humanitarian Response Plan
IASC	Inter-Agency Standing Committee
ICF	Interim Cooperation Framework
ICMN	Integrated Community Mobilization Network
IDP	Internally Displaced Person
IMO	Information Management Officer
IOM	International Organization for Migration
IPC	Integrated food security Phase Classification system
IRRM	Integrated Rapid Response Mechanism
IYCF	Infant and Young Child Feeding
KAP	Knowledge Attitude and Practices
KII	Key Informant Interview
L2	Level 2 emergency
L3	Level 3 emergency
M&E	Monitoring and Evaluation
MAM	Moderate Acute Malnutrition
MHPSS	Mental Health and Psychosocial Support
MRE	Mine Risk Education
MRM	Monitoring and Reporting Mechanism
NGO	Non-Governmental Organization
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
ODF	Open Defecation Free
OTP	Outpatient Therapeutic feeding Program
PCA	Programme Cooperation Agreement
PfRR	Partnership for Resilience and Recovery
PoC	Protection of Civilians
PSS	Psychosocial Support

ABBREVIATIONS AND ACRONYMS

PTA	Parent-Teacher Association
RAM	Results Assessment Module
SAM	Severe Acute Malnutrition
SMC	School Management Committee
SNAP	Strategic National Action Plan
SPLM	Sudan People's Liberation Army
SPLM-IO	Sudan People's Liberation Army In Opposition
SPPME	Social Policy Planning Monitoring and Evaluation
SSCO	South Sudan Country Office
SWfPR	Sustainable WASH for Partnership and Resilience
TLS	Temporary Learning Space
ToC	Theory of Change
TSFP	Targeted Supplementary Feeding Programme
TWG	Technical Working Group
UASC	Unaccompanied and Separated Children
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNMISS	United Nations Mission in South Sudan
UN-Women	United Nations Entity for Gender Equality and the Empowerment of Women
WASH	Water, Sanitation and Hygiene
WFP	World Food Programme
WGFS	Women- and Girls-Friendly Space
WHO	World Health Organization
WHS	World Humanitarian Summit



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EXECUTIVE SUMMARY

BACKGROUND TO THE EVALUATION

1. This evaluation was commissioned by the UNICEF Evaluation Office at its headquarters in New York, in consultation with the South Sudan Country Office (SSCO) and the Eastern and Southern Africa Regional Office (ESARO). It constitutes the **second part of a two-part evaluation**. Part One considered the UNICEF Level 3 (L3) response to the crisis in South Sudan in the period 2016–2018, focusing on the ‘child survival’ sectors (water, sanitation and hygiene, health, nutrition). This Part Two of the evaluation focuses on the **emergency-related child protection and education elements** of the UNICEF programme, and brings the overall programme analysis up to the end of 2019. As with Part One, Part Two of the evaluation is intended to fulfil both accountability and learning purposes. It provides an evaluative account of the relevant areas of the UNICEF programme, highlights the main conclusions and lessons arising for UNICEF over this period, and provides recommendations for the conduct of the future programme.

TIMEFRAME, PROCESS AND METHODOLOGY

2. The evaluation was originally expected to cover the period 2016 to early 2019. However, given various interruptions to the process (including most recently those caused by the COVID-19 pandemic), it was agreed to extend the analysis to the end of 2019 and to include an updated review of the child survival sectors. While some reference is made to the current context in South Sudan (to late 2020), and the recommendations

take account of that context, the evaluative component covers the UNICEF programme from early 2016 to the end of 2019. The evaluation followed a modified version of the original terms of reference, revised to reflect the passage of time since it was commissioned. It is based on a review of documents and relevant literature, informant interviews and site visits conducted during a field missions in late 2018 and early 2019; subsequent extended consultation with the relevant sections and other staff in the SSCO and the ESARO office in Nairobi; and feedback obtained from partners and donors through interviews in Juba.

SOUTH SUDAN CONTEXT

3. The period from 2016 marked the **re-emergence of widespread conflict** in South Sudan, with disastrous consequences for the security and welfare of the civilian population. The displacement (internal and external) of around one in three South Sudanese has separated families from their homes, land, livelihoods and community networks. Around 1.6 million remain internally displaced, while 2.2 million are refugees in surrounding countries. Levels of food insecurity grew to critical levels over the evaluation period, at times tipping into famine conditions. Economic collapse and price inflation have made it hard for families to meet their basic needs, and fear of violence has constrained freedom of movement and action. Many families have been forced to live for years in camps. Periodic natural disasters, including major flooding in 2019 and 2020, have compounded the conflict-related crisis, as more recently has

the COVID-19 epidemic. Basic government services have remained severely under-resourced and related infrastructure (including schools and health facilities) has been badly damaged by conflict and looting. The period following the **renewed peace** process in 2018, leading up to the formation of a coalition government in 2020, **held the prospect of greater stability and security.** Yet this has not materialized, and access to services continues to be eroded. The distinction between 'emergency' needs and regular needs is not a clear one in this context, given the combined effects of short-term instability and of long-term institutional and developmental deficits on lives, livelihoods and services.

4. Children have been particularly vulnerable through this period, facing multiple threats to their security, health and welfare. Despite the intermittent peace process, **the safety and security of children** in South Sudan deteriorated consistently between the start of the civil war in 2013 and the end of 2019. Women and girls have been disproportionately affected by violence and rights abuse, and incidents of gender-based violence, including domestic violence, while greatly under-reported, are known to be widespread. Boys too have been highly vulnerable. By the end of 2019, over 19,000 children (boys and girls) were thought to have been associated with armed actors, while many more were unaccompanied, separated or missing. The mental health and psychosocial wellbeing of children and their families have all suffered as a result, with only limited support services available to them. Meanwhile, landmines and explosive remnants of war continue to kill and injure civilians, including children. South Sudan has rightly been labelled a 'protection crisis' over the evaluation period.

5. Even before the current crisis, South Sudan suffered from a **massive educational deficit** that pre-dates its independence in 2011. By 2014 the net enrolment rate stood at just 41 per cent (35 per cent for girls) and primary completion rates are amongst the lowest in the world. Most primary school children attending school do not achieve foundational literacy, numeracy and life skills. **The conflict-related crisis post-2016 exacerbated an already very damaging situation.** Children have been affected both directly and indirectly by the impact of conflict on schools and other learning spaces (a situation now compounded by the COVID-19-related school closures in 2020). Hundreds of thousands of displaced children have had to be taught in temporary learning facilities by volunteer teachers. The quality of education is a matter of major concern both in these and mainstream (government-run) schools, with many teachers themselves lacking basic education. Lack of funds to pay teachers is one of the main constraints here.
6. The other major threats to children's well-being relate to **nutrition, health and water, sanitation and hygiene (WASH)**, as detailed in Part One of the evaluation.
7. Underlying all of this has been the **fundamentally insecure and unstable environment** resulting from conflict and insecurity, political instability and economic breakdown. That instability severely limited the delivery of government services in opposition-held areas during the conflict and has created **an extremely challenging operating environment** for agencies seeking to provide essential services. Securing safe access has been an ongoing challenge, compounded in 2020 by the COVID-19 situation as well as by renewed floods. The political

settlement and uneasy peace that accompanies it has not resolved many of the underlying causes of instability, and limited access has remained a major constraint on essential service delivery. Throughout 2020, local insecurity and conflict remained a reality for many, and this coupled with lack of services has prevented mass return of displaced people and refugees. But more than any other factor over the past two years, the economic collapse triggered by the loss of oil revenue to the government and the inflation that followed increases in the money supply have had a dramatic impact both nationally and at local and household levels. Lack of government funding to social services has led to a high level of dependence on United Nations agencies and their partners using international funds to provide routine as well as emergency services. Most recently, the COVID-19 epidemic and particularly the measures taken to control it (notably school closures and the suspension of measles vaccination programmes) have had a major impact on children's well-being and this is likely to worsen. Yet for most South Sudanese, at this point, COVID itself is just one among many adverse factors with which they have to contend. The overall humanitarian situation continued to deteriorate through 2020, so that **the need for emergency services remains high and growing** – while the need for more concerted efforts on prevention and resilience building is correspondingly great.

UNICEF ROLE AND STRATEGY IN SOUTH SUDAN

8. The development aspirations of the years following South Sudan's independence in 2011 had largely evaporated by 2016. The UNICEF programme since 2016 has been

dominated by its emergency response to the crisis, as reflected in both the 2016-2018 and the 2019-2021 country programme documents (CPDs). Although the crisis response was re-classified from L3 to Level 2 (L2) in 2018, this related more to the organization's own capacities to manage the response in country and region rather than to the severity of the crisis itself. Over the latter part of the evaluation period, as the peace process has evolved, there has been a **broadening of the strategy** from predominantly responsive towards more preventive and resilience-oriented approaches – something that is reflected in the 2019-2021 CPD. This has been accompanied by greater efforts to plan for transition from humanitarian to more sustainable developmental approaches, and hence from a 'substitution' toward a more 'auxiliary' role for UNICEF. The protracted nature of the crisis – and the potential for enduring peace and stability – seems to demand such a transition. Yet it remains unclear what the end point of that transition may be, or what more sustainable approaches may be viable in practice. It sometimes appears that UNICEF and others are trying to build bridges across a river whose far bank they cannot yet see.

9. UNICEF has faced major **strategic challenges** in South Sudan. The protracted and multi-faceted crisis of the past few years has created acute vulnerabilities and support needs for millions of children. Yet the national and local governmental institutions and systems that would normally be expected to address those needs and to protect children have been (largely) weak or absent, and civil society has had only very limited capacity to provide substitutive services. As a result, direct support to large-scale emergency service delivery – mainly through non-governmental partners – has



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constituted a clear strategic priority for UNICEF over the evaluation period. But the system-strengthening and capacity-building agenda that is the necessary complement to direct service delivery (and crucial to the localization agenda) has only fragile foundations to build on, both in terms of governmental systems and civil society capacity. Donor support to this agenda, and particularly to government system strengthening, has been constrained by lack of trust and by scepticism about political will and the potential for progress.

10. Any assessment of UNICEF work in this context has to recognize this **dual challenge**: the need to address the immediate and acute needs of millions of children while helping to build the systems and capacities needed to do so on a sustainable basis. That challenge exists both within and beyond the humanitarian agenda. In the medium and longer term, the added value

of UNICEF must be judged in terms of its support to building effective and resilient systems, institutions and capacities for children as much as in terms of enabling quality service delivery. Yet doing so presents an immense strategic and programmatic challenge for UNICEF and its partners, and one which (largely for reasons beyond its control) it has to date been able to address only to a limited extent. It is important to reiterate the sovereign responsibility of the Government of South Sudan for the safety and welfare of the population, and its role as primary duty-bearer for upholding the rights of children. UNICEF must continue to reinforce that sense of responsibility as well as providing support to the institutions on which its fulfilment depends.

UNICEF CRISIS RESPONSE – GENERAL AND CROSS-CUTTING CONCLUSIONS

11. The evaluation found that **the overall UNICEF response to immediate priority needs for children** – the main focus of this evaluation – **has been both appropriate and largely effective** over the evaluation period. The evaluation found that UNICEF and its partners had been able to deliver essential services to a substantial proportion of the population in most need, within the constraints of the insecure context, limited access and significant funding deficits (particularly in 2019). The organization deserves great credit for its efforts in this regard, which have often been crucial to the well-being and life chances of those it has reached. This has been true in the sectors that were the main focus of this evaluation – education and child protection – as well as in the ‘child survival’ sectors of WASH, health and nutrition. **It must however be recognized that a high proportion of chil-**

dren in need of emergency assistance (well over 50 per cent in most sectors) have remained without support. Although UNICEF has done its best to target areas and groups of children with the highest priority needs, this has not always been possible in the prevailing context.

12. Delivering its own programme has been the dominant feature of UNICEF work in South Sudan over the evaluation period. Its role as an **advocate for children** has been less prominent. While it has defined an advocacy plan and targets, the implementation of that plan appears lacking. UNICEF should remember that delivering its own programme forms only a part of its responsibilities, and that its mandate as the leading international agency for children means that it has a responsibility to speak consistently on child rights, and in particular to highlight major threats to children's security and welfare. This responsibility extends beyond the formal United Nations Monitoring and Reporting Mechanism. While funding of the UNICEF programme is clearly an important advocacy goal, more consistent communication and advocacy beyond that agenda is needed.

13. On the application of the '**centrality of protection' principle** and the mainstreaming of protection concerns throughout its programme, UNICEF (in common with many other agencies) appears to have made little progress. The evaluation found that staff see protection almost exclusively in terms of child protection, but it is important to locate this within a wider protection framework. Although elements of the 'do no harm' principle were found in much of the UNICEF programme in South Sudan (see Part One of the evaluation), the evaluators conclude that UNICEF and its partners could

do more to ensure that families can access the services they provide in safety and dignity. More fundamentally, the UNICEF approach could be better grounded in an understanding of the wider security context and people's response to that context.

14. UNICEF has done well to build a portfolio of **civil society partnerships** to enable its emergency programme to cover both conflict-affected and more stable areas over time. It has found a pragmatic balance between international, national and local implementing partnerships alongside ongoing partnerships with government and United Nations bodies. Although the quality of services has been variable, this approach has substantially paid off in terms of programme delivery and, to a lesser extent, in terms of building local and national capacity. However, given the high level of dependency of smaller agencies on UNICEF financial and technical support, and the volatility of funding flows to South Sudan, this is also a **very fragile set of arrangements**. Gaps or delays in funding such as occurred in 2019, as well impacting vital services for children, are extremely damaging for smaller civil society organizations. Staff and technical know-how are lost, and the loss of local capacity makes sustainability and local ownership harder to achieve.

UNICEF could help reduce this fragility by streamlining and speeding up its partnership agreement process, changing its approach to risk management and agreeing multi-year partnerships wherever possible. It could also do more to acknowledge the primary service delivery role of its partners, recognizing its own role as being essentially an enabling rather than an implementing one. Beyond being a source of funding for partners (it is often perceived as a 'donor'), the UNICEF role in providing technical sup-



port and capacity-building to civil society is essential in its own right and is widely appreciated by partners.

15. Maximizing the synergies between the different sectors in which UNICEF works is rightly thought to be essential to an effective response. Yet although UNICEF has made efforts to build an **integrated programme**, the evaluators concluded that the multi-sectoral model of programming is not yet ‘natural’ within the organization. Sectors are siloed, not least because of the UNICEF administrative and financial processes, and multi-sectoral programming is not incentivized. Nor does the partner contracting process encourage such integrated approaches. While the coherence of the UNICEF programme (and of the United Nations response as a whole) has improved over the evaluation period, the essential interconnections between sectors are not yet as strong as they should be. Given its cross-sector portfolio, UNICEF should provide leadership in this area.

16. While some progress has been made over the evaluation period with regard to **data-gathering and monitoring**, much remains to be done – both on contextual and

programme-related data. UNICEF should continue to work with government and others to increase the availability and reliability of outcome data, notably with regard to educational outcomes for girls and boys. Filling needs assessment and data gaps in areas like gender-based violence, children associated with armed forces and groups (CAAFAG) and other areas of child protection should be a matter of renewed effort and should involve more regular use of (sensitively conducted) surveys and focus group discussions. UNICEF must ensure proper monitoring, reporting and information management for its work on child protection, which has been deficient both from a management and accountability perspective. This has significantly affected the evaluability of this area of UNICEF work.

UNICEF PROGRAMME RESPONSE – EDUCATION

17. **UNICEF did well to expand its education work over the evaluation period in the face of evolving needs and new opportunities**, although **progress has stalled** more recently (2019/20) – and the COVID-19 crisis,

coupled with lack of funding (government or donor) for teacher salaries and erosion of the value of teacher incentives now threatens to reverse the gains made. The evaluation found that the UNICEF education programme has been grounded in regular assessment and has responded to priority needs as far the situation and access has allowed. The response rightly focused on providing **emergency education in the most conflict-affected states**, with priority given to areas in which the number of out of school children was highest. The integrated rapid response mechanism (IRRM) was used effectively as a last resort in supporting education in areas that were otherwise very hard to reach, although the sustainability of its interventions remains uncertain.

In this context, it must be recognized that the **scale of the internationally-funded programme** (i.e. that of UNICEF and other cluster members) **remains insufficient to cover the emergency education needs**: UNICEF addressed 30 per cent of the assessed education needs in 2016, 24 per cent in 2017, 30 per cent in 2018 and 26 per cent in 2019. Moreover, inclusion of some of the most vulnerable – including children with disabilities, pastoralist children, over-age students and girls facing early marriage – is addressed only to a limited extent.

18. Overall, the UNICEF emergency education programme has achieved **substantial results** throughout the evaluation period, within the limitations noted here. This is particularly true with regard to access to education (enrolment and retention) for internally displaced persons in protection of civilians sites and hosted in communities; establishing safe education facilities (temporary learning spaces); provision of essential education materials; teacher training; and community mobilization. However,

despite all efforts, **serious questions remain over the quality of teaching – and therefore about educational outcomes for children**. Many teachers themselves have only limited education and limited literacy. Short duration training and limited follow-up and supervision are in themselves not sufficient to produce the desired change in teaching quality. Crucially, **until the payment of teacher salaries and incentives is put on a more sustainable footing, progress on this issue is likely to remain severely limited**.

UNICEF PROGRAMME RESPONSE – CHILD PROTECTION

19. Part One of the evaluation noted that the gap between **vulnerabilities and the ability of humanitarian agencies to reduce them has been more apparent in relation to child protection than any other agenda**. This remains true. The child protection in emergency response was rightly focused on enabling critical child protection services: delivering family tracing and reunification services for unaccompanied and separated children, comprehensive case management services for children victims of abuse, gender-based violence prevention and response, psychosocial support (PSS), release and reintegration of CAAFAG, and awareness-raising on the risk of landmines and explosive remnants of war.

20. Within its limits, the UNICEF child protection programme was found to be **highly relevant** to the most critical vulnerabilities and protection needs of children, and to have made a significant contribution to reducing children's exposure to the related threats. The capacity development effort toward local partners (through training and technical guidance) has been

particularly appropriate and necessary. The challenge for the child protection programme is partly one of scale and consistency of coverage. The UNICEF programme has suffered from severe funding shortages in the latter part of the evaluation period. Some of the elements of the programme in which UNICEF has most obviously added value – notably the gender-based violence, CAAFAG and PSS programmes – have been cut back. This appears to the evaluators to be a major retrograde step, and one that UNICEF should try by all means to reverse.

21. The child protection response could be strengthened in other ways, particularly through better integrated programming: while child protection elements are well integrated in the education programme, they are much less so in other sectors. Beyond this, UNICEF lacks an overall child protection mainstreaming strategy, i.e. a way of building a child protection perspective into all areas of the programme. It needs to find a way of doing so, along with a more general protection perspective.

UNICEF PROGRAMME RESPONSE – WASH, NUTRITION AND HEALTH

22. In 2019, UNICEF made some progress on system-strengthening, community engagement, and building partnerships for sustainable **WASH**. Yet despite the extent of continuing WASH needs, UNICEF results showed a major drop-off in ‘safe water’ results achievement in 2018 and 2019. This appears to be related to **lack of available funding** as much as to access and other challenges, and it represents a **major setback**. The COVID-19 pandemic is reported

to have placed additional constraints on the programme in 2020. WASH in schools remains a priority area for collaboration and scale-up, particularly given its crucial links to health and nutrition (including school feeding programmes), and its significance for girls’ attendance at school.

23. With regard to **health**, UNICEF and its partners have achieved significant **vaccination results**, but they have struggled to maintain vaccination coverage in areas affected by conflict and other humanitarian crises. Together with its WASH work, UNICEF preventive work on vaccination and distribution of treated bed nets – together with related community mobilization and health promotion – provides an essential public health contribution. On the curative side, UNICEF has been able to expand the number of child health consultations and its treatment of children with severe acute malnutrition (SAM) remains crucial.

24. Despite an apparent improvement over the years since 2010, the **nutrition** situation remained critical by the end of 2019 – particularly for children under five and pregnant or breastfeeding women. UNICEF and its partners have done well to maintain their treatment programme for children with SAM over the evaluation period. UNICEF has also significantly expanded provision of counselling on appropriate infant and young child feeding and helped to maintain high levels (69 per cent) of exclusive breastfeeding – although the quality of counselling services appears to be a significant constraint on progress in this area. More broadly, its work in partnership with the World Food Programme, the Food and Agricultural Organization, the Ministry of Health and a range of other partners on nutrition-related

resilience is an important contribution to the prevention and preparedness agenda.

Summary of recommendations

25. The evaluation makes a number of recommendations. In summary, these are as follows:

Recommendation 1: Education

UNICEF should thoroughly review its strategy and planning on education in the light of the COVID-19 pandemic. It should work with the government (and specifically MoGEI) to forge stronger policy and planning links between emergency education interventions and the mainstream education system. It should work to strengthen inclusion in education for the most vulnerable, and to strengthen inter-sectoral links between education, nutrition, health and WASH. And it should continue to promote a localization agenda for EiE, including investment in CSO capacities and education support partnerships with local authorities.

Recommendation 2: Child protection

UNICEF child protection work in South Sudan can be strengthened in a number of ways. A child protection perspective needs to be mainstreamed across its whole programme, and specific CP elements should be integrated into UNICEF work on nutrition, health and WASH (as they are with education) as part of an integrated multi-sectoral approach. Funding should be sought as a matter of priority for continuing work on gender-based violence, PSS and CAAFAG, where UNICEF has shown it can make a unique and effective contribution. Finally, UNICEF should be more prepared to use its mandate to pursue high-level advocacy for South Sudanese children.

Recommendation 3: Centrality of protection

Application of this principle is the responsi-

bility of all UNICEF sections. UNICEF needs to ground its field programme more clearly in an analysis of the evolving security situation as it bears on the security of children and their families, their decisions and the choices available to them. More regular perception surveys (conducted by UNICEF or others) could provide a substantial basis for this analysis. In order to better ensure that families can access its services safely and in dignity, an explicit safety review should be part of both the project approval and routine monitoring processes for the relevant services.

Recommendation 4: Partnerships

UNICEF should review its partnership agreement processes with a view to streamlining the process and avoiding damaging gaps in the funding pipeline to partners. It should also change its approach to risk management in its implementing partnerships, adopting a more 'downstream' focus involving closer mentoring, oversight and quality control. The time of specialist staff in the Juba country office should be freed up from some of the current contract-related process to focus on providing technical support and mentoring to field offices and partners. UNICEF should as far as possible increase capacity-building support to local and national CSO partners and try to secure predictable multi-year funding. It should also foster local collaborative arrangements between CSOs and local government.

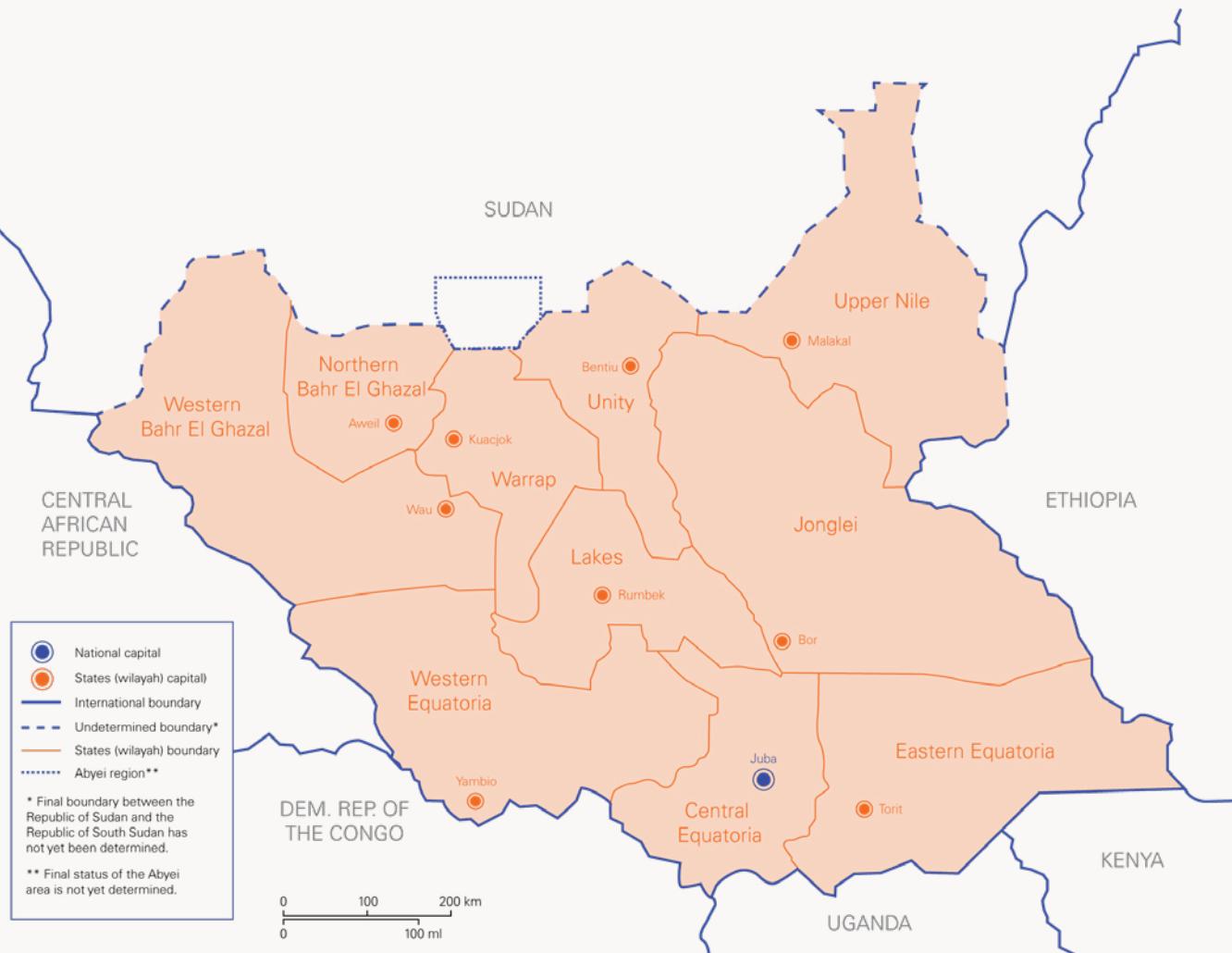
Recommendation 5: Data and monitoring

UNICEF should continue to work with government and others to increase the availability and reliability of outcome data, notably with regard to educational outcomes for girls and boys. Filling needs assessment and data gaps in areas like gender-based violence, CAAFAG and other areas of child protection should be a matter of

renewed effort and should involve more regular use of (sensitively conducted) surveys and focus group discussions. UNICEF must ensure proper monitoring, reporting and information management for its work on child protection, which has been deficient both from a management and accountability perspective. Inconsistencies and gaps in the data and reporting have significantly affected the evaluability of this

area of UNICEF work. The SSCO should also strengthen its data quality assurance processes to prevent a recurrence. It is suggested that to achieve improvements in this area, dedicated support may be required for the child protection section in the form of an information management officer.

Map of South Sudan



Source: United Nations

1

INTRODUCTION



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1.1 BACKGROUND TO THE EVALUATION

1.1.1 This second part of the evaluation of the UNICEF crisis response in South Sudan between 2016 and 2019 was commissioned by the UNICEF Evaluation Office (EO) in New York, in discussion with the South Sudan Country Office (SSCO). It forms a supplement to Part One of the evaluation, completed in 2018, which covered the UNICEF Level 3 response¹ from 2016 to the end of 2018 and was focused mainly on the child survival aspects (water, sanitation and hygiene, health, nutrition) of that response. This Part Two evaluation extends the timeframe to cover the organization's subsequent L2 crisis response to the end of 2019. It has a different focus, looking in particular at the crisis-related child protection and education components of the response. It also considers the wider UNICEF programme and reviews progress on the water, sanitation and hygiene (WASH), health and nutrition agendas.

1.1.2 While the field work for Part Two was undertaken in 2019, completion of the evaluation was delayed by a number of internal and external factors, including the global coronavirus (COVID-19) pandemic. In order to update the analysis, it was decided to extend the period covered to the end of 2019. While some reference is made to more recent developments (including the impact of COVID-19), and these are taken into account in the recommendations, the analysis is essentially confined to the period 2016 to end 2019, with particular emphasis on the latter part of that period.

The original terms of reference for Part Two of the evaluation are included in the Annex A. The evaluation team's interpretation of those terms of reference was set out in detail in an inception report, and the approach, guiding questions and methodology are summarized below. The delays in completion of the evaluation led to a re-framing of the terms of reference, extending the timeframe while changing the focus somewhat. As a result, the 'centrality of protection' agenda is not treated here in depth, although the evaluation includes analysis of this and other cross-cutting issues.

1.1.3 The subject matter of this second part of the evaluation overlaps to some extent with other evaluation and learning processes concerning the organization's crisis-related work in South Sudan. Notably for our purposes, these included evaluations of the Back-to-Learning initiative; of UNICEF gender-based violence in emergencies work, and of the UNICEF role in re-integrating children released from armed forces into communities as part of the children associated with armed forces and groups (CAAFAG) process.² The present evaluation draws on the findings from those evaluations and highlights their key conclusions. With regard to the essential baseline of children's needs and vulnerabilities, it draws in particular on UNICEF reports on the situation of women and children carried out in 2015 and updated in 2017, while recognizing that the context for children has changed since then, in ways that are only partly understood and documented.

¹ Since March 2018, the programme has been re-designated an L2 (regionally-led) corporate response.

² Mott MacDonald, 'Evaluation of the Back to Learning initiative in South Sudan, Cambridge, 2019; United Nations Children's Fund, 'Multi-country Real-time Evaluation of UNICEF Gender-Based Violence in Emergencies Programmes, South Sudan Country Report', UNICEF, New York, 2016; United Nations Children's Fund, 'Community-based Reintegration Programme for Children Released from Armed Forces and Armed Groups in Boma State (former Greater Pibor Administrative Area), 2015-2018', UNICEF, New York, 2019.

1.1.4 The rest of this section gives a summary of the scope and purpose of this evaluation and of the methodology adopted, including the key guiding questions. In the sections that follow, we begin by reviewing below the most salient features of the humanitarian crisis in South Sudan, in particular as it has affected children, and we consider the evolution of the overall UNICEF response to that crisis. We then assess the education and child protection responses in detail, based on questions of strategy and relevance, effectiveness, quality, connectedness and sustainability. This is followed by an updated analysis (to end 2019) of the WASH, health and nutrition responses and a review of some of the key cross-cutting issues for the UNICEF programme as a whole. The final section summarizes the evaluation's conclusions and makes a number of related recommendations.

1.2 EVALUATION PURPOSE, SCOPE AND INTENDED USE

1.2.1 The evaluation is intended to fulfil two functions:

- A summative *accountability* function, reflecting the need to account (internally and externally) for one of the organization's largest and most life-critical country programmes.
- A formative *learning* function, reflecting the need to capture lessons from a programme of this duration and significance, to inform the country programme and UNICEF global programming.

Having focused on the 'child survival' sectors in Part One of the evaluation, this second part focuses primarily on emergency education and child protection. In addition, it considers a number of cross-cutting issues, including the 'central-

ity of protection' principle and how it is applied by UNICEF in South Sudan; resilience and the humanitarian-development nexus; programme balance and integration; and questions of operational modality, in particular partnerships.

1.2.2 As noted in Part One of the evaluation, the two functions described above each demand rather different approaches. Accountability requires a relatively broad scope that covers the UNICEF response as a whole over the review period, judged against certain basic criteria. Practical learning requires a narrower focus on specific sectors and topics of particular interest or concern, allowing greater depth of analysis. Thus, while Part Two updates the whole programme analysis of Part One, it goes into much greater detail on the education and child protection responses, and the recommendations reflect this focus.

1.2.3 Part One of the evaluation concluded that although UNICEF has performed well in many aspects of its programme over the evaluation period (given the immense challenges involved), the threats to children remain worryingly high. It suggested that UNICEF needs to continue to find better ways, with its partners, to increase coverage of basic services and to extend its reach and impact in this regard. It also addressed the challenge of ensuring a reasonable degree of sustainability of impact. In Part Two of the evaluation, we consider the specific threats to children's safety, security and well-being and to their access to basic education; the extent to which UNICEF and its partners have been able to address those threats; and ways in which the relevance, coverage, quality and effectiveness of the related programmes might be strengthened. It also places greater emphasis on resilience and sustainability, issues which the passage of time have only served to make more pressing.

1.2.4 Just as the humanitarian-development distinction was often hard (and sometimes unhelpful) to draw in relation to the child survival sectors, so it is in relation to education and child protection. In both cases, the focus of this evaluation is on the emergency-related agenda, but the evaluation also considers the relationship between the emergency and development agendas, and specifically, the relationship between service delivery, capacity-building and system strengthening. Although the evaluation reviews the UNICEF response from January 2016 to the end of 2019, particular emphasis is given to the more recent part of that period, including the question of whether lessons learned over the course of the programme (which spans two country programme documents) have been applied in practice. Recommendations are based

on our understanding of the current and future challenges likely to face UNICEF and the wider humanitarian system in South Sudan, including those already presented by the COVID-19 pandemic and related measures.

1.2.5 It is intended that the evaluation should be of use and interest to a range of stakeholders. The primary intended audience is UNICEF staff in South Sudan, as well as staff in the Eastern and Southern Africa Regional Office (ESARO) and headquarters in New York. It is hoped that it will also be of interest to UNICEF partners in South Sudan, governmental and non-governmental, to UNICEF donors and members of its Executive Board, and ultimately to those communities that UNICEF seeks to assist in South Sudan.



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1.3 EVALUATION PROCESS, APPROACH AND METHODOLOGY³

1.3.1 Part Two of this evaluation has had four main phases: (i) an inception and initial fact-finding phase, including preliminary visit to the SSCO in November 2018; (ii) a fact-finding mission to the country in March 2019; (iii) follow-up remote interviews and consultation on early draft sections of the report, principally with the SSCO and ESARO (April to September 2019); and (iv) analysis, write up and presentation of findings, conclusions and recommendations. In the event, the last phase was halted in September 2019 for a range of internal and external reasons. The evaluation process had been intended to resume in Spring 2020, but this proved impossible due to the COVID-19 outbreak. Work on the evaluation was not fully resumed until September 2020 and has been carried out (with interruptions) through the latter part of 2020.

1.3.2 The approach of the evaluation has been consultative, looking to identify lessons and ways forward in collaboration with the staff involved in the response while maintaining independence of judgement. The evaluation has been conducted in accordance with the United Nations Evaluation Group Ethical Guidelines for Evaluation.⁴ We note here in particular the provisions concerning obligations to participants, and respect for dignity and diversity. As a general rule, views expressed by informants to the evaluation team have not been attributed to the individuals or organizations concerned, other than to distinguish views expressed by internal (UNICEF) sources from those expressed by external sources.

1.3.3 Following the approach outlined above, the primary methods used in the evaluation were key informant interviews (KIs), both with UNICEF staff and those from other organizations, and documentary review, using mainly UNICEF materials. These were supplemented by programme site visits, direct observation and consultation with affected communities and local partners. The selection of sites and key informants was based on the principle of obtaining a reasonably representative sample of intervention types and contexts, together with a broad range of stakeholders. These choices were agreed after extended consultation with the SSCO. A short online survey was also conducted with two stakeholder groups: in-country partners and UNICEF country staff. However, too few responses were received to allow detailed analysis, although some comments received have been used to help substantiate other sources of evidence.

Guiding questions

1.3.5 The overall guiding question for the evaluation is: ***How well has UNICEF responded to the short-to medium-term threats to children's well-being and development in South Sudan in the period January 2016- December 2019?*** This question is addressed with particular reference to child protection and education. The main supplementary questions are shown in *Box 1 below*. Our main concern is with short-term threats to children's security, safety and well-being, i.e. their freedom from violence and fear, from coercion and deliberate deprivation, and with their ability to access at least basic (primary level) education or life skills training as appropriate.

³ A full methodology for the evaluation can be found in the inception report.

⁴ March 2008. Clearance for the proposed protocols and questions for the field component (partner interviews and community-level focus group discussions) was obtained through the UNICEF ethical review process.

The main focus throughout is on those threats that derive primarily from conflict and insecurity in South Sudan, and from the related deficits in basic government services. In other words, we are primarily concerned with emergency-related threats and the UNICEF response

to them, rather than with development deficits. The evaluation does, however, consider the relationship between the shorter-term humanitarian response and the longer-term development agenda, including questions of synergy, consistency and convergence.

Box 1

Summary of guiding questions for the evaluation

A. Programme relevance and appropriateness to context and needs

- A1. What have been the main threats to children's security, well-being and development?
- A2. What has been the scale, coverage and reach of the UNICEF programme relative to needs?
- A3. Were the forms of intervention chosen by UNICEF the right ones? How well did they adapt?
- A4. Were targets set proportionate to need, in light of other capacities, funding and resourcing issues?

B. Strategy and programme design

- B1. What sectoral strategies exist, how clear are they and how strong is their logic?
- B2. How well designed are the corresponding interventions? Involvement of partners and communities?
- B3. How well integrated have the various programme components been? Coherence of programme?
- B4. Has UNICEF found the right balance in its programme between camp, static, outreach approaches?

C: Programme performance: results and effectiveness

- C1. To what extent has UNICEF achieved its targets in each sector?
- C2. How effective have UNICEF interventions been, measured against stated objectives?
- C3. What have been the outcomes from UNICEF and partner interventions?

D. Programme quality: compliance with CCCs and other standards/principles

- D1. To what extent did UNICEF deliver against its CCCs?
- D2. How accountable have UNICEF and its partners been to affected populations? Community engagement?
- D3. Has the response been consistent with core principles of humanitarian action?

◀ Box 1

D4. Has the UNICEF response been equitable? Have gender and human rights issues been addressed?

D5. Compliance with external sector-specific and general standards?

E. Performance on cross-cutting agendas

E1. How well has UNICEF mainstreamed protection (applying the 'centrality of protection' principle)?

E2. To what extent has UNICEF contributed to resilience of individuals, communities and systems?

E3. How far has UNICEF met its WHS commitments? Other organizational commitments?

E4. How effective has the communications and advocacy aspect of the response been?

F: Data quality, needs analysis, programme monitoring, reporting

F1. How strong has been the situational and needs analysis underpinning the UNICEF programme?

F2. How well has UNICEF monitored the delivery, quality and effectiveness of its programme?

F3. How well has UNICEF managed information and reported on its programme?

G: Operational modalities: C4D, partnerships, IRRM

G1. How well has the C4D function worked to ensure appropriateness, effectiveness, accountability?

G2. How well have UNICEF implementing partnerships worked?

G3. How effective has UNICEF direct service delivery (CPiE, EiE) been through the IRRM mechanism?

H: Coordination and collaboration with others

H1. How well has UNICEF performed its roles as cluster co-lead and AOR focal point?

H2. How well has UNICEF collaborated with others on these agendas (CPiE, EiE, GBV)?

I: Efficiency, timeliness, resourcing and programme support

I1. How timely has the delivery of UNICEF programme been?

I2. How well has the supply and logistics function supported the programme?

I3. How well have resource mobilisation, human resources and other support functions worked?

I4: How efficient has the programme been?

1.3.6. The *context* for asking these questions is crucial to understanding the significance of the related emergency interventions by UNICEF and its partners. There are two main reasons for this. The first is that the scale of acute needs and vulnerabilities is enormous, and in many cases these vulnerabilities relate not just to the effects of conflict and insecurity, to economic collapse or human displacement, but to long-standing factors (including chronic lack of investment in key services, structural capacity deficits and ingrained cultural practices) that humanitarian response cannot by itself be expected to address.⁵

The second reason is that the real-world challenges to effective response have been so great that expectations of ‘effectiveness’ in each sector have to be qualified. The scale of vulnerabilities is such that the humanitarian response has often been able to address only the most immediate needs, and the barriers to response – including secure access and resource constraints – have been such that it has not always been possible to meet even the highest priority needs. The UNICEF response has to be judged accordingly. How well has it prioritized its interventions? Has it played a role in South Sudan that both fulfils its organizational mandate and provides real added value to the collective response?

Data gathering and analysis methods

1.3.7 **Direct observations and on-site consultations** were held in a number of programme locations around the country. These included the Juba protection of civilians (PoC) site; Bentiu (Unity state) PoC and surrounding area;

Yambio (Western Equatoria) PoC and surrounding area; Pibor (Jonglei) town; and Wau (Western Bahr el Ghazal) town and surrounding area. Consultations were held in each location with UNICEF staff, partners, other international agency staff (United Nations and non-governmental organization), as well as with teachers, local government officials and staff at the relevant education and child protection (CP) facilities. During these visits, a limited number of **focus group discussions** were held with local communities (including children), based on an approved protocol.

1.3.8 In addition to these field-level consultations, **key informant interviews** were conducted with individuals within and outside UNICEF judged to be best placed to help answer the guiding questions above, together with the subsidiary questions set out in the evaluation matrix in *Annex B*. The guiding questions provided a framework around which interviews could be conducted, rather than a questionnaire to be followed for all interviews. In total, around 85 interviews were held, involving around 140 informants. A list of informants is included in *Annex C*.

The majority of the informants were UNICEF staff and partners involved in the relevant parts of South Sudan response, including staff and partners at both Juba and field levels, staff in ESARO, and at UNICEF headquarters in New York. Implementing partner organizations, both national and international (i.e. those with which UNICEF has concluded programme cooperation agreements) were interviewed, together with staff from other United Nations bodies, including the United Nations Mission in South

⁵The link to development and resilience-building is apparent and raises issues that we consider further in Section 6.



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Sudan (UNMISS). The relevant ministries and government departments were also consulted, predominantly at the Ministry of General Education and Instruction and the Ministry of Gender, Child and Social Welfare. The evaluation team also met in Juba with major donors to UNICEF education and CP work.

1.3.9 Two short web-based surveys were also conducted in 2019, directed at UNICEF partners and UNICEF staff. The latter included relevant staff in field offices who because of time constraints were only reached to a limited extent through direct consultations. These were intended to complement the field- and Juba-level direct consultations. Though the response rate was relatively low, the responses have helped inform the evaluation's analysis and served as a useful complement to the KIs.

1.3.10 Analysis of key documents and data formed a core part of the evaluation.⁶ These were used both as information sources in their

own right and as a basis for triangulating information gained through key informant interviews.

Limitations on evaluability

1.3.11 A number of factors have limited the evaluability of some of the evaluation questions listed above. Some of these relate to gaps in the available data, either from UNICEF itself or from other sources; where these gaps occurred, this has been noted in the text. The overall shortage of outcome data is perhaps the greatest limitation in this regard, and this limits the evaluability of the 'effectiveness' criterion (EQ C2 and particularly C3). This is true even in the sector (education) where data availability has otherwise been a relative strength. It generally reflects weaknesses in national systems that are largely beyond UNICEF control, although it suggests an important future agenda of data system strengthening in which UNICEF can play an important support role.

⁶ Documents and data sources included: Overview and general analysis documents from UNICEF and external sources; UNICEF country programme documents and related files; needs assessments – joint (HNO) and UNICEF-specific; response plans (HRP, cluster plans as well as UNICEF-specific plans); UNICEF appeals and sitreps; UNICEF programming documents, including work plans, sector strategies, and related documents; implementation data extracted from the UNICEF results assessment module (RAM); and relevant studies and evaluations.

Other data limitations – such as those relating to programme delivery and results against targets – are more directly within UNICEF control, though they also depend on consistent and accurate reporting from partner organizations. Notably, gaps and inconsistencies in the data records for CP have significantly affected the evaluability of this component of the UNICEF programme, and appear to have led to sometimes inaccurate reporting of results.

1.3.12 As noted above, multiple delays and obstacles to progress on the evaluation were encountered, and as a result the original terms of reference were somewhat modified. This included an extension of the timeframe covered to the end of 2019, and a review of findings and recommendations in the light of the subsequent COVID-19 pandemic and related control measures. It also involved a re-focus on the strategic and programmatic issues arising rather than operational and management issues. One result was that much of the data originally gathered in late 2018 and early 2019 had to be refreshed and updated to the end of 2019.

Partly as a result of the delays and modifications to the process noted above, some particular evaluation questions listed above could only be partially answered, or in some cases could not be answered, in the course of the evaluation. Those questions are as follows:

- **B4** concerning the balance in the UNICEF programme between different operational modalities (camp, static, outreach approaches). Insufficient data were available to address this question.
- **C3** concerning the outcomes from UNICEF and partner interventions. As noted above, very limited outcome data were available across the relevant parts of programme.
- **D3/4** concerning principles, human rights and equity. While issues of principle have been addressed implicitly, they have not always been explicitly framed in these terms – reflecting how these terms are used in UNICEF South Sudan. For example, issues of gender and disability have been addressed but are not always framed in terms of rights and equity.
- **E3** concerning the extent to which UNICEF met its World Humanitarian Summit (WHS) commitments. Again, this has largely been addressed implicitly rather than explicitly, chiefly for reasons of space.
- **J1-4** concerning efficiency, timeliness, resourcing and programme support. These questions have only been partially addressed in the evaluation. Delays in the evaluation process led to loss of available time for addressing this component, and those delays also meant that much of the available operational data were significantly out of date by the time the evaluation was completed.

2

CONTEXT: THE SOUTH SUDAN CRISIS⁷ AND THE UNICEF RESPONSE



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2.1 THE SOUTH SUDAN CRISIS

2.1.1 UNICEF has worked in South Sudan since the country gained independence in 2011, and for many years prior to that in what was then the southern part of Sudan. UNICEF played a leading role in Operation Lifeline Sudan during the second Sudanese Civil War (1983-2005) and in the negotiation with the Sudanese government and Sudan People's Liberation Movement (SPLM) of the Ground Rules for delivery of humanitarian assistance to all communities in need. Following the signing of the Comprehensive Peace Agreement in 2005, greater security and a return of many of those displaced in the war saw a gradual reduction in the need for humanitarian assistance. When the South Sudanese people voted overwhelmingly for independence in 2011, the new country of South Sudan was created in a mood of great optimism – matched by a very large investment of international funds.

2.1.2 The optimism did not last. In December 2013, a political power struggle broke out between President Kiir and his former deputy Riek Machar, following which a civil war broke out that continues to the present. While principally a conflict between the SPLM government and Machar's SPLM-in Opposition (IO), fighting between several factions on multiple 'fronts' across the country makes the course of the conflict hard to read. The conflict has had a strong ethnic dimension, fuelled by long-standing tensions between Dinka and Nuer tribal groups in particular, and politicians have been quick to exploit those divisions. But growing insecurity and violence across the country has affected all communities, with both government and op-

position parties engaging in ethnically-targeted killing, rape, torture and forced displacement. As a 2018 report from the United Nations Commission on Human Rights in South Sudan made clear,⁸ these acts constitute war crimes and crimes against humanity. The role of the United Nations Chapter VII-mandated protection force (UNMISS) has in practice been largely confined to securing the various PoC sites across South Sudan, although UNMISS has played an important role in protecting aid deliveries beyond the camps.

Compounding the national-level armed conflict has been inter-communal violence and looting, often centred on competition for land and resources (including cattle). This more localized violence continues to the present time and constitutes a major destabilizing factor in the lives of ordinary South Sudanese families.

2.1.3 **Mass displacement** has been one of the defining features of the conflict over the evaluation period. Despite the peace agreement signed in 2015, violence erupted again in July 2016 in Juba and spread across the Equatoria and to Unity state. The pace and scale of displacement subsequently escalated. In total around 4 million people were displaced from their homes, or about one third of the entire population. Of those, over half fled to neighbouring countries as refugees. Although around one million of those displaced are reported to have returned to their home areas since 2017 – including refugees unable to access basic services in neighbouring countries – fear of violence and instability, loss of property and livelihoods, and lack of available services (including education) all appear to contribute to people's reluctance to return to their home areas.⁹

⁷ A fuller description of the context relating specifically to education and child protection is given in Sections 3 and 4 below.

⁸ See <https://reliefweb.int/report/south-sudan/report-commission-human-rights-south-sudan-ahrc37crp2>

2.1.4 From a humanitarian perspective, the **protection agenda** is paramount in South Sudan. After the re-emergence of conflict in 2016, the security situation for children deteriorated over 2017, with continued incidents of recruitment by armed forces and armed groups (despite assurances from the parties to the conflict),¹⁰ abuse, exploitation and other grave violations. In 2017, there were 3,220 documented grave violations affecting 77,000 children, including more than 6,000 verified cases of children recruited into armed groups and more than 1,200 documented cases of sexual violence.¹¹ Despite limited releases of children, many have remained associated with armed forces and armed groups (CAAFAG). Meanwhile, even larger numbers of children have been separated from their families and left unaccompanied and are therefore especially vulnerable.

The protection agenda has strong age and gender dimensions. As the 2018 human rights report notes: “*Conflict-related sexual violence is endemic. Rape... and other forms of sexual violence, targeting girls, boys, women and men, are often committed in front of children, humiliate the victims, their families and their communities and destroy the social fabric, leaving behind a traumatized people and the seeds of yet more violence.*” Girls are especially at risk of sexual violence, child marriage and exploitation. Although underreported due to fear of retaliation and social stigma, gender-based violence was (and continues to be) widespread. It has been exacerbated by harmful traditional practices – including early and forced marriage –and lack of access to adequate support services.

2.1.5 The threats to children and their families over the evaluation period have derived from both the **direct and indirect effects of conflict** – as well as from **massive under-development** and chronic lack of investment in state services and institutions.¹² South Sudan has been at war for most of the past sixty years, with no history of stable governance and little investment in infrastructure or systems. The effects of the current conflict have to be understood against this backdrop. As primary duty-bearers for providing protection and basic services, government ministries have had limited capacity and reach. Donors have not been willing to provide development assistance in a context of weak and unstable governance, high levels of corruption and widespread human rights abuse. Opportunities for development have been correspondingly few, despite the potential for agricultural expansion, and the economy of the country has largely collapsed. Vital revenues from oil production have fallen, agricultural production – particularly in the fertile southern states – has been severely disrupted, and inflation has rapidly eroded the value of the South Sudanese pound. Traditional livelihoods are being lost as a result of insecurity and displacement of farmers. The result is that millions of South Sudanese have been left destitute and acutely food insecure.

2.1.6 Acute food insecurity brought large parts of the country to the brink of famine over the evaluation period – and indeed pockets of famine were seen in 2017. In southern Unity, around 100,000 were reported to be living in famine conditions.¹³ Over half of the population was suffering acute food insecurity by Decem-

⁹United Nations, ‘South Sudan Humanitarian Needs Overview, 2020’, UNOCHA, Geneva, 2019.

¹⁰ See for example https://www.unicef.org/southsudan/media_21563.html.

¹¹ United Nations, ‘Monitoring and Reporting Mechanism South Sudan Country Report’, United Nations, New York, 2017.

¹² South Sudan was ranked third last out of 189 countries in the 2018 Human Development Index.

ber 2017, an unprecedented situation.¹⁴ Levels of **acute malnutrition** have been correspondingly high: prevalence of global acute malnutrition (GAM) among children increased from 13 per cent in 2018 to 16 per cent in 2019, exceeding the global emergency threshold of 15 per cent. Given poor sanitation and lack of access to clean water sources, low levels of vaccination, lack of health services and high exposure to disease, the **threats to young children's health** have been particularly severe.

2.1.7 South Sudan suffers from a **major educational** deficit that long pre-dates its independence in 2011. Children's physical security and well-being have been directly endangered by attacks against schools. Even before COVID-19 forced the closure of schools in 2020, the conflict had forced many schools to close, particularly in Unity, Jonglei, Upper Nile and Lakes states.

2.1.8 By the end of 2018, although the general situation of children and their families remained critical, some opportunities for progress presented themselves. The revived peace process, based on the agreement signed by the main parties to the conflict in September 2018, brought hope of sustained cessation of hostilities, reduction in conflict-related violence and greater access for the provision of basic services. Those hopes were only very partially realised. In **2019**, while residual areas of conflict between government and armed opposition groups (non-signatories to the peace agree-

ment) were largely confined to the Equatorial region, intra- and inter-communal violence persisted across much of the rest of the country. Meanwhile, as the humanitarian needs overview (HNO) for 2020 described "*Delayed cantonment of former fighters, full integration of forces, decisions concerning the number of states and their boundaries, and unresolved issues between [peace agreement] signatories around security arrangements*" as being among the sources of uncertainty concerning the country's short-term future.¹⁵ This in turn continued to affect displaced people's decisions about returning home.

2.1.9 In both 2019 and 2020, the effects of continuing conflict were compounded for many by extensive flooding – a crisis within a crisis – which demanded its own response. Food insecurity was the main driver behind the number of people in need, with nearly 6.4 million people or 54 per cent of the population classed as being acutely food insecure in August 2019, according to the Integrated Food Security Phase Classification (IPC) analysis.¹⁶ In **2020**, communities were described as being hit by the "*triple shock of intensified conflict and sub-national violence, a second consecutive year of major flooding, and the impacts of COVID-19*".¹⁷ More children were acutely malnourished than in the past three years, and women and girls continued to face extreme levels of gender-based violence and psychosocial distress. "*People's coping mechanisms weakened as a consequence of the cumulative shocks, leading families to adopt negative*

¹³ United Nations Children's Fund, 'UNICEF South Sudan Country Office Annual Report, 2017', UNICEF, Juba, 2017.

¹⁴ United Nations Children's Fund, Humanitarian Action for Children 2018, UNICEF, Geneva, 2018, citing the IPC classification for November 2017.

¹⁵ United Nations Office for the Coordination of Humanitarian Affairs, 'Humanitarian Needs Overview, 2020', UNOCHA, Juba, 2019.

¹⁶ Ibid.

¹⁷ United Nations Office for the Coordination of Humanitarian Affairs, 'Humanitarian Needs Overview, 2021', UNOCHA, Juba, 2021.

practices such as forced labour and child marriage. The economy continued to spiral downwards, pushing people to the brink, especially in urban areas.”¹⁸

2.2 UNICEF AND THE WIDER INTERNATIONAL RESPONSE TO THE CRISIS

2.2.1 As described in Part One of the evaluation, the ambitious development agenda defined in the wake of the country’s independence in 2011 had by 2016 been replaced by something much more tentative. The United Nations’

Interim Cooperation Framework (ICF) with the government replaced the United Nations Development Assistance Framework in January 2016,¹⁹ with an emphasis on building resilience and social services for the most vulnerable. This new framework was intended to consolidate and build on the peace agreement of 2015, in anticipation of a full-scale development framework based on the Sustainable Development Goals. The resumption of conflict in 2016 meant that the ICF too proved largely unworkable.

In effect, the long-term development agenda stalled in 2013 and remains in abeyance. Despite the formation of a new coalition government in 2020, international donors remain extremely



¹⁸ Ibid. People’s physical and mental well-being, living standards and coping mechanisms were expected to further deteriorate in 2021. Some 8.3 million people in South Sudan are estimated to be in need of humanitarian assistance in 2021, an 800,000 increase from the 7.5 million people in need in 2020. The increase in needs is largely driven by rising food insecurity.

¹⁹ UNICEF had intended its programme to contribute to all four of the original UNDAF outcomes: (a) core governance and civil service functions are established and operational; (b) chronic food insecurity is reduced and household incomes increase; (c) key service delivery systems are in place, laying the groundwork for increased demand; and (d) violence is reduced and community security improves.

reluctant to provide development assistance. Humanitarian assistance remains the primary mode of aid engagement, although this too has come under increasing pressure in the past two years. While some agencies like UNICEF maintain strong links with government ministries and with local authorities, most of the humanitarian effort by-passes government authorities altogether.

2.2.2 The re-orientation of the UNICEF programme from development to emergency response at the onset of the current crisis in 2016 was reported to have been a major challenge, and UNICEF relied heavily on surge deployments in the earlier stages. The response had already been designated a 'Level 3' (L3) response in 2014 under the UNICEF Corporate Emergency Activation Procedure (CEAP). That designation remained until June 2018, at which point it was deactivated and the response re-designated a Level 2 (L2) response.²⁰

2.2.3 The 2016-2018 country programme document (CPD) anticipated continued instability. As the 2016 country programme management plan noted, "*the 2016-2018 CPD was already designed to operate in a volatile operating environment*" and the related programme budget review included three elements that reflected this, namely: (i) a decentralization of UNICEF capacities outside of Juba, (ii) the development of cross-sectoral interventions linking humanitarian relief, recovery and stabilization, and (iii) the strengthening of a country team with 'versatile capacities' to switch from humanitarian response to development work as needed.

The July 2016 crisis further highlighted the importance of decentralization so that UNICEF could remain able to operate across the country through its ten field offices (FOs).²¹ Since that date, the UNICEF network of FOs has proved an essential platform for the implementation of the UNICEF programme and for provision of the necessary support and oversight of partners.

2.2.4 The subsequent 2019-2021 CPD is essentially based on a continuation of the same approach. It notes that "*a decentralized presence in South Sudan has enabled UNICEF to establish long-term relationships with communities and authorities at the local and national levels*." It places emphasis on a multisectoral approach, which "*facilitates linkages and synergies to tackle the multiple deprivations faced by children in South Sudan*", although as discussed in the following sections, this is an area where UNICEF has sometimes struggled to turn theory into practice. The new CPD states the organization's intention to seek "*local solutions and community engagement using innovative approaches to access communities*", something the evaluation found that it had indeed consistently tried to do. Efforts would also be made to "*ensure that the sectors mainstream protection and that the 'do no harm' principle is fully respected*", though this was found to be much less evidenced in practice. UNICEF strengths in procurement and supply of emergency items is stressed – and while the evaluation does not evaluate this and other operational aspects of the programme in any depth, it found that this was indeed a key part of the organization's actual and perceived added value in South Sudan.

²⁰The explanatory memo from the Executive Director (25 June 2018) said that although the humanitarian situation continued to deteriorate, "UNICEF's capacity to respond has been significantly strengthened over the past years and the country office has the requisite capacity to sustain the response" – although support to South Sudan remained an "organizational priority".

²¹The number of field offices rose to 13 for the 2019-2021 CPD period.



2.2.5 As the 2016-2018 CPD stated, “*while UNICEF will continue to engage in system strengthening at the local and national levels, lessons from past crises have shown it is unlikely that long-term national level policy development work be possible under the volatile political and security environment. The country programme will therefore focus on its humanitarian, recovery and resilience components, adapting them to the changing and fragile context*”. This it continued to do throughout the evaluation period, and it proved to be not only appropriate to the context but the only viable approach. Nevertheless, as the following sections show, both the humanitarian and the recovery/resilience components have proved very challenging to sustain in practice. Lack of safe access, lack of adequate funding, logistical challenges, limited partner capacity and sometimes lack of UNICEF capacity all compounded the challenge at various stages of the response.

3

UNICEF AND THE EDUCATION RESPONSE



3.1 THE EDUCATION CONTEXT AND NEEDS ANALYSIS²²

3.1.1 South Sudan suffers from a massive educational deficit that pre-dates its independence in 2011. By 2014 the net enrolment rate stood at just 41 per cent (35 per cent for girls), falling to around 35 per cent in 2015.²³ Primary completion rates are among the lowest in the world at just 10 per cent. Most primary school children attending school do not achieve foundational literacy, numeracy and life skills, and the quality of education provided is a major concern across all schools. This is closely related to the issue of lack of payment, incentives and career development prospects for teachers. The conflict continued to restrict children's access to education over the evaluation period: in 2016 the estimated number of children requiring emergency education support was 1,100,000, rising to 2,800,000 in 2019.²⁴ Although the percentage of school-aged children (6-17) out of school declined slightly between 2011 and 2018 (from 64 per cent to 60 per cent), those modest gains are now seriously challenged by the COVID-19 pandemic with an estimated average learning loss of at least 0.6 years of schooling per child and increasing drop-out rate.²⁵

3.1.2 Children have been affected both directly and indirectly by the impact of conflict on schools and other learning spaces. Their physical security and well-being **have been**

directly endangered by attacks against schools (113 documented incidents of military use and attacks on schools, affecting 36,748 children in 2016, with 30 per cent of primary schools being attacked in 2017) **and indirectly by the closure of learning spaces**, the majority of them in Unity, Jonglei, Upper Nile and Lakes states. By the end of 2018, the education cluster needs assessment found that on average, schools lost three to four weeks of education in the preceding academic year, and over 50 per cent of the assessed schools reported that this interruption was due to insecurity. Some 21 per cent of assessed schools were non-functional, with insecurity being the major cause of school closure. Of the assessed schools, 15 per cent reported having experienced an attack on the school, teachers or pupils, and theft or looting by armed forces and groups.²⁶

3.1.3 Schooling for children in South Sudan is provided through both official and voluntary or private channels and includes both formal and non-formal education. In 2017, there was a total of over 6,000 schools countrywide, including both government and non-government schools, of which 4,000 were primary schools. In 2016, roughly 60 per cent of schools were governmental, and 40 per cent were non-governmental (run by communities, non-governmental organizations, faith-based groups, or for-profit providers). **The quality of education provided is a major concern across all schools.** As noted above, learning achievement among

²² The main sources for this section are the 2016 Education Cluster Assessment South Sudan, November; UNICEF Country Office Annual Reports , the 2018 Assessment of Early Grade Learners in Literacy and Numeracy; UNICEF Education Strategy Notes 2016-2018 ; and UNICEF Education Strategy Notes 2018-2021

²³ United Nations Educational, Scientific and Cultural Organization, Country Database, UNESCO, see <http://uis.unesco.org/en/country/ss>.

²⁴ United Nations, *Humanitarian Response Plan*, South Sudan, UNOCHA, Geneva, 2016 & 2019.

²⁵ World Bank "Simulating The Potential Impacts Of Covid-19 School Closures On Schooling And Learning Outcomes: A Set Of Global Estimates" June 2020 <http://pubdocs.worldbank.org/en/798061592482682799/covid-and-education-June17-r6.pdf>

²⁶ Education Cluster need assessment survey, September-October 2018. UN OCHA Humanitarian Needs Overview 2019

primary school-aged children remains low: at the end of Grade 3, most learners cannot identify a single written word in their native languages or English.²⁷ Without basic literacy skills, it is expected that South Sudanese learners will struggle to engage with other subjects on the curriculum and will be at higher risk of dropping out of school.

3.1.4 The relationship between education and child protection is particularly strong in South Sudan, with out-of-school and displaced children particularly vulnerable to abuse and exploitation. Adolescent boys and young men remain particularly vulnerable to participation in dangerous activities and recruitment into armed groups. Adolescent girls are at risk of early and forced marriage. Adolescent girls and young women also run the risk of gender-based violence, including sexual abuse and exploitation from armed groups and other members of society, reflecting the low value placed on the girl child. In 2020, the closure of schools because of COVID-19 has created particular (but as yet largely unassessed) vulnerabilities, including teenage pregnancies.

3.1.5 The government budget for education in South Sudan was below 4 per cent of the total government budget for 2011-2017. Actual expenditure often lags far behind approved budgets.²⁸ Since independence, South Sudan has developed two general education strategic plans to guide the sector. The Government has not been able to adequately resource these plans, and funding gaps have been larger than the worst-case scenario anticipated in the plan. Sectoral expenditures are concentrated on sal-



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aries, but with the collapse of government oil revenue post-2016, salaries of both officials and teachers have not been paid regularly and have lost value due to hyperinflation. **This issue of teachers' salaries and incentives is one of the main constraints to progress on the education agenda.** In addition, two-thirds of teachers are untrained and there are major shortages of teaching and learning materials.²⁹ The impact on quality of education is evident.

3.1.6 While the mainstream educational system is so greatly overstretched, under-resourced and subject to insecurity, the distinction between 'emergency' needs and regular needs is not a clear one. The mainstream state

²⁷ South Sudan Early Grade Reading and Mathematics Assessment Report – Montrose: September 2016, p. 5.

²⁸ See UNICEF Education Budget Briefs for 2019 and 2020: <https://www.unicef.org/southsudan/reports/education-budget-brief-20192020>; <https://www.unicef.org/esa/media/4301/file/UNICEF-South-Sudan-2019-Education-Budget-Brief.pdf>

²⁹ Universalia, 'Summative GPE Country Program Evaluation, Republic of South Sudan', Universalia, Montreal, 2019.

education system, under huge pressure, has only partially been able to meet the needs of children. Beyond the medium- to longer-term system-strengthening agenda, the crisis has created major direct support needs for children who would not otherwise be able or willing to attend school. The education needs of children in displaced camps (PoC sites) have been met through creation of temporary learning spaces (TLS), while access to education for children displaced outside camps was provided through strengthening of mainstream schools in host communities. In conflict-affected areas, the formal education system continued to provide services in theory, but in practice, the education needs of children in areas outside the Government's control have been supported through ad hoc support to schools (including through UNICEF rapid response missions to inaccessible areas). **Taken together, children in these settings constitute the main 'education in emergencies' (EiE) caseload.**

UNICEF needs analysis and data quality

3.1.7 The UNICEF education emergency response strategy is largely based on continuous country-wide needs assessments, coordinated through the education cluster led by UNICEF.³⁰ In addition, UNICEF and its partners regularly carry out assessments and studies on education needs in PoCs and in other (accessible) at-risk areas. The overall education strategy was also informed by the United Nations Educational, Scientific and Cultural Organization

(UNESCO) 2018 out-of-school children study under the Back to Learning (BTL) initiative, the assessments of early grade learners in literacy and numeracy in 2017 and 2018, and the 2018 annual education census on school infrastructure and management and finances.³¹

Assessments confirmed the need to focus on:

- Access to safe education opportunities, especially for girls
- Improving basic quality of education
- Providing integrated services at schools (particularly health, child protection and nutrition)

While the UNICEF education response strategy³² clearly tackles the priorities around access, safety and quality, integration of services appears to have remained limited – with the exception of child protection services. More recently, considerable progress in integration of services through learning spaces is reported to have been made, although this has been interrupted by the COVID-19 control measures.³³

³⁰ Education cluster assessments 2015, 2016, 2017, 2018; United Nations Children's Fund and Ministry of General Education and Instruction, 'Assessment of Early Grade Learners in Literacy and Numeracy in South Sudan': Assessments 1 and 2', UNICEF & MoGEI, Juba, 2017 and 2018; United Nations Children's Fund, 'Exploring the Linkages Between Education Sector Governance, Inequity, Conflict, and Peacebuilding in South Sudan', UNICEF, New York, 2016.

³¹ These are critically important to improving the government's capacity for policy formulation, as well as monitoring and evaluation.

³² UNICEF education programme strategy notes 2016-2018 and 2019-2021.

³³ SSCO feedback on the first draft of this report.

Box 2**The wider education agenda: key externally-funded initiatives in South Sudan****Global Partnership for Education**

UNICEF South Sudan acts as the managing entity for Global Partnership for Education (GPE) in South Sudan. Since 2011, the Global Partnership for Education programme has invested in the recovery and development phases of education system-building. It has supported the construction of schools, development of national curriculum for both primary and secondary education, development and procurement of textbooks, teaching and learning materials, and capacity-building of teachers, school development committees, education managers and supervisors. GPE aims to strengthen the capacity of the Ministry of General Education and Instruction at various levels, including in planning, budgeting, leadership and data collection.

Back To Learning Initiative

Back to Learning (BTL) is an initiative of the Government of South Sudan, supported by UNICEF. The initiative was launched in February 2015 and was designed to bridge the humanitarian-development divide, aiming to provide 400,000 children with access to education opportunities (200,000 in conflict-affected and 200,000 in less-affected areas), whether through the formal or non-formal system. All ten states and GPAA had Back to Learning committees comprised of members from national and international NGOs and led by the MoGEI to plan and monitor activities.

EU Emergency Trust Fund for Africa - IMPACT South Sudan

In the context of South Sudan, maintaining equitable access to quality primary education is especially important in reducing ethnic tension and discrimination, and ultimately in building the foundations for inclusive growth and development. Through the provision of incentives to primary school teachers and voluntary teachers nationwide, the fund is intended to increase teacher attendance and thus improve the delivery of services at school level, ultimately giving children an opportunity to realize their potential. Specific objectives of the programme are: (1) increase teachers' attendance, and (2) the establishment of a teacher human resource information system. IMPACT South Sudan was managed by the EUD and acted in synergy with other initiatives (including the BTL on teacher incentives).

3.2 UNICEF ROLE AND STRATEGY IN EDUCATION

3.2.1 The UNICEF education programme from 2016 to 2019 included both humanitarian and development elements.³⁴ This included a range of approaches, spanning EiE, system strengthening, and peacebuilding/conflict-sensitive approaches. These have been combined in different ways in the course of the response to address the evolving education needs in this fragile and unpredictable environment. Box 2 above shows the main externally-funded frameworks through which the work of UNICEF and its partners have been financed.

The country programme management plan for the 2016-2018 country programme explains the UNICEF approach as follows: “[UNICEF] will not drop development activities, but will use a nuanced approach to maintain development interventions when feasible, depending on the context of field locations”³⁵ This approach would focus on:

- Implementing life-saving interventions and early recovery when feasible, which should be expanded toward stabilization and resilience work as situation and access improve.
- Reaching more vulnerable populations outside of POC camps.
- Using national partners for implementation as much as possible, understanding

the need to build their capacity given that international non-governmental organizations (NGOs) have limited access and implementation capacity, and that many left the country.

- Strengthening political-economy analysis and field monitoring in the context of strengthening harmonized approach to cash transfer (HACT) implementation.
- Delaying and adjusting activities linked to upstream policies given the ongoing changes at the national level. When feasible, working with subnational levels and prioritizing community-based systems, as opposed to statutory national systems.

As noted above, for the education programme, this approach translated into three main components that were intended to create a coherent response: national education system strengthening (including early recovery and resilience programming), emergency education, and a crosscutting peacebuilding/conflict-sensitive education approach. However, despite attempts to create coherence between the strands of the programme, the link between emergency education and system strengthening appears weak.

3.2.2 The EiE component is not clearly defined as such in the programme documents before 2019.³⁶ For the purpose of this evaluation, education in emergency programming is understood as the set of activities aimed at pro-

³⁴ The 2012-2013 (extended to the end of 2015) CPD emphasized strengthening national education systems in anticipation of a more stable political situation in the country. The 2016-2018 Country Programme reflected the stalemate in the implementation of the 2015 peace agreements and renewed conflict by adopting a ‘risk-informed and flexible programming’ approach. That meant increased focus on the EiE component of the programming and diminished relative emphasis on the system strengthening component of the education response.

³⁵ Including supporting the design of the expected new national development framework to ensure it places social development as a central component and promotes the rights of children.

³⁶ Country Programme Document 2016-2018; Country Office Annual Reports 2016, 2017, 2018; education strategy notes 2016. The Country Programme Document, 2019-2021 and education strategy notes 2019 show a clear separation between system strengthening and emergency outputs.

viding access to quality and inclusive education opportunities³⁷ in those areas (including opposition-held areas) where the Government has been largely unable to provide education over the evaluation period, namely Lakes, Unity, Jonglei, Upper Nile, Central and Eastern Equatoria. Emergency education activities targeted children inside PoC camps, host communities and communities in hard-to-reach conflict-affected locations. Emergency education services have largely been delivered either through national and international NGO partners or as direct service provision by UNICEF through integrated rapid response mechanisms (IRRMs).

3.3 UNICEF EDUCATION IN EMERGENCIES STRATEGY: CLARITY, COHERENCE, LOGIC

3.3.1 As noted above, the UNICEF education response strategy from 2016 to 2021 contained humanitarian and development elements that were combined in different ways to address the evolving education needs. The operational dimensions of the three main components – national system strengthening, emergency education, peacebuilding/conflict-sensitive approaches – were not clearly spelled out in the 2016-2018 strategy notes and theory of change (ToC), nor in the related sector outcome, outputs and indicators of the CPD. This created a disconnect between the needs analysis, ToC and programmatic objectives. In particular, the ToC appears to be a results structure more than a representation of the links between needs, causes and the expected results of intervention.

3.3.2 This was corrected in the 2019-2021 sector strategy, where a more comprehensive ToC was elaborated. This represented a significant departure from the 2016-2018 framework, with much greater emphasis placed on the humanitarian context and emergency education needs. Two outputs contributing to the overall outcome (*see Figure 1 below*) were defined, distinguishing between the emergency and more development components of the programme. However, in the view of the evaluation team, these should be understood as sub-outcomes rather than ‘outputs’, since their achievement does not lie within the power of UNICEF and its partners to ensure. In this sense, the logic of the programme is still missing an important link between outputs (properly understood) and outcomes.³⁸



³⁷ Such definition is derived from the analysis of the SSCO programme documents and is in line with the CCCs. The INEE definition of education in emergencies however is broader.

³⁸The distinction between sub-outcomes and outputs is important both in performance management and accountability terms. Failure to recognize the distinction risks blurring the lines between what UNICEF and its partners do and what external outcomes may (or may not) be enabled by their actions. This appears to reflect a more general problem with the way in which UNICEF constructs the logic of its programmes: the same confusion between outputs and sub-outcomes was found in a recent evaluation of the Turkey country programme.

Figure 1**Components of the UNICEF education programme, 2016-2019****Strengthening the National Education System and Early Recovery/Resilience programming****Supporting Ministry of General Education and Instruction on:**

- a. Strengthening monitoring and data collection systems (i.e. developing and carrying out national literacy and numeracy assessments; operationalising education sector monitoring –Education Monitoring Information System and study on out-of-school children;
- b. Strengthening school supervision and inspection;
- c. Developing national systems to support early childhood development, including coordination mechanisms;
- d. Mainstreaming peacebuilding and conflict-sensitive education programming within the formal education sector;
- e. Modelling school systems – model schools construction/rehabilitation and management;
- f. Basic education package to support the re-enrolment and retention of children –especially girls in stable/less conflict-affected areas.

Emergency Education

- a. Accelerated learning programmes with mainstreamed life skills and peace education, targeting girls, IDPs, demobilized CAAFAG, children in pastoralist communities;
- b. Setting up / rehabilitation of temporary learning spaces (including WASH);
- c. Provision of emergency teaching and learning materials;
- d. Teachers' incentives and capacity development (i.e. teacher training on pedagogy, peacebuilding, life skills and psychosocial support);
- e. Capacity development of school management committees and parent-teacher associations;
- f. Back-to-school campaigns, including advocacy for girls' education;
- g. Life skills training for peacebuilding and livelihoods opportunities for adolescents and youth.

Support to national and state level coordination mechanisms (education cluster).

Peacebuilding/conflict-sensitive education

3.3.3 The results assessment module (RAM) indicators for the emergency component (Output 2) of the new strategy better captured the whole spectrum of the emergency education operation – see Table 1 below. **The link between emergency education and system strengthening remains weak**, however, despite attempts to achieve coherence between the two strands of the programme. The attempt to harmonize teachers'/volunteers' conditions of work provides one example of the challenge. An integration strategy between education and other

sectors is also lacking, especially with nutrition and health. Elements of integration exist in the programme implementation (especially with CP and WASH) but these are not fully articulated and planned for. One example concerns WASH in schools: whereas separate WASH facilities for girls and boys were built in schools and TLS, their maintenance was not adequately planned for between WASH and education. This is one of the factors contributing to girls dropping out of school.

Table 1

UNICEF outcome, outputs and indicators, 2019-2021

UNICEF Education Programme 2019-2021 Result statements	Key indicators
Outcome By 2021, 1.1 million children, adolescents and youth aged 3-18 years, affected by conflict and other emergencies, have increased and equitable access to life-saving quality education with improved learning outcomes.	a. # of children aged 3-6 in humanitarian situations enrolled in ECE centres b. # of children aged 7-18 in humanitarian situations enrolled in formal primary or alternative education system c. Primary education completion rate
Output 1 By 2021, government and other national partners have increased capacity at national and subnational levels for improved implementation, monitoring and inclusive sector planning	a. # of diagnostic studies and policy reviews conducted b. # of policies implemented, tracked and monitored to the beneficiary level for review. c. % of targets (equity, efficiency, learning) in the annual education sector plan achieved d. % of schools implementing new conflict-sensitive curriculum.
Output 2 By 2021, Children and young people in humanitarian situations have access to protective, quality basic education services	a. # of children provided with safe and protective learning environment. b. # of children receiving cost-effective quality TLMs. c. # of teacher trained (education in emergency, pedagogy, life skills, peace building). d. # of PTA / SMC members trained on school management and gender

3.3.4 The UNICEF emergency education strategy is consistent with the education cluster strategy (co-led by UNICEF and Save the Children) and largely consistent with the Core Commitments for Children in Humanitarian Action (CCCs). Partners reported increasing involvement with UNICEF in discussion about strategy over the evaluation period, though some felt that strategy was essentially determined in advance of consultations.³⁹ However, while UNICEF became increasingly responsive to the feedback of partners, the level of community involvement in strategy development and planning appeared limited.⁴⁰

3.4 DESIGNING THE RESPONSE: COVERAGE, FOCUS AND TARGET-SETTING

3.4.1 The emergency education component of the education programme focussed on providing access to safe and quality emergency education opportunities in the most conflict affected states: Lakes, Unity, Bahr-El Ghazal, Jonglei, Upper Nile, and Central and Eastern Equatoria⁴¹ and Greater Upper Nile.⁴² Within these states, priority was given to areas in which the number of out-of-school children was high and access to partners (or service provision through IRRM as a last resort) was ensured. As a result of access constraints and the need for prioritization, the emergency education programme between 2016 and 2018 was not entirely based on the level of needs: some areas with high vulnerability and needs remained inaccessible in practice.

3.4.2 Since 2019, as a result of the peace agreement and the formal cessation of hostilities, UNICEF and the education cluster have been able to expand the programme from six to all ten states. Despite the considerable increase in access, the operational context has continued to be challenging. Political tensions remain unresolved, and localized inter-communal conflicts and banditry mean that insecurity is high in many areas. Natural disasters (particularly floods) have continued to hamper access while causing human displacement and damage to the education system. In general, access constraints, natural disasters and limited resources have significantly impacted implementation of the programme.⁴³

3.4.3 Since 2016-2017, the rationale for the organization's target-setting has been based on a progressive reduction in the number of children who are out of school⁴⁴ and retention of those enrolled. In particular, the RAM targets show a progressive increase of approximately 200,000 children per year to be reintegrated in the school system or provided with emergency education opportunities. However, the scale of the programme appears insufficient to cover the education needs (UNICEF covered 30 per cent of the estimated emergency education needs in 2016, 24 per cent in 2017, 30 per cent in 2018 and 26 per cent in 2019).

3.4.4 The rationale for UNICEF targets in relation to those of the wider education cluster is not fully clear. For example in 2018, the education sector response plan in the humanitarian response plan (HRP) states that for targeting

³⁹ KII Juba with international NGOs.

⁴⁰ United Nations Children's Fund, 'UNICEF Contribution to Education in Humanitarian Situations, Jan 2020: South Sudan Country Matrix', UNICEF Juba, 2019.

⁴¹ These states were targeted under the BTL initiative.

⁴² Prioritised in the Education Cluster Strategy 2019-2020.

⁴³ UNICEF Contribution to Education in Humanitarian Situations. Strikingly, in 2019 the funding gap was 69%.

⁴⁴ Estimated at 55% of the primary school population in 2016.

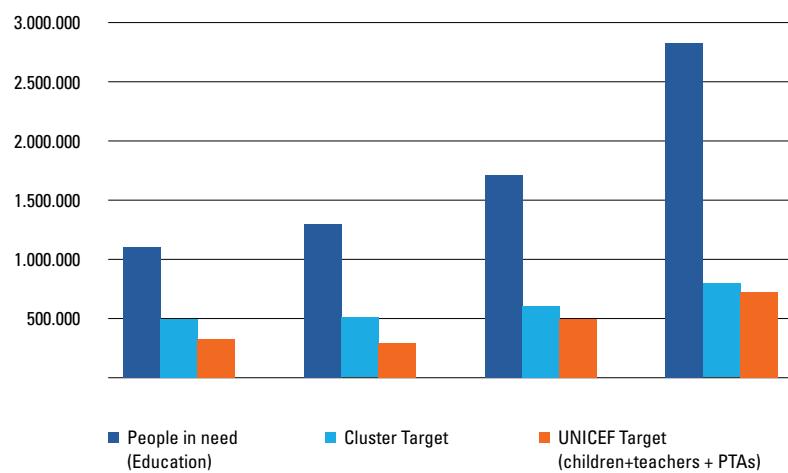
and prioritization: “The response will target some 50 per cent of the most vulnerable people in need of education. The cluster will target communities where more than 1,500 children have been displaced or otherwise affected by the humanitarian crisis for more than six weeks – with a lower threshold of 1,000 children in [displaced]-only communities – and where there has been no major security incident in the three weeks preceding the planned intervention”. Over the years 2017, 2018 and 2019, UNICEF set targets of (respectively) 84 per cent, 61 per cent and 92 per cent of the education cluster target (corresponding to between 24 per cent and 30 per cent of the total people in need for education). Figure 2 shows the needs against targets set. It appears that the overall response has over this period covered a diminishing proportion of the total assessed need – amounting to only a quarter of assessed need by 2019. While the level of response has grown modestly over the period, levels of assessed needs have grown dramatically.⁴⁵ The gap be-

tween assessed need and targets is particularly high for 2019.

3.4.5 The targeting strategy for equal access and inclusion of the most vulnerable is not clearly spelled out in strategy documents.⁴⁶ While UNICEF rightly targeted the most affected areas with higher numbers of out-of-school children, inequity of access remains a major issue. This increases the vulnerability of children and adolescents, thereby contributing to social exclusion, protection risks, the propensity for ‘negative coping behaviours’ and exploitation of children and adolescents. Those most disadvantaged are girls, children with disabilities, socially-excluded children from urban poor, pastoralist, and internally displaced person (IDP) communities (including returnees), over-age children and adolescents.

3.4.6 Limited data on targeting (and implementation) through camp/PoC, static and outreach approaches do not allow conclusions

Figure 2 UNICEF and education cluster targets vs. assessed needs, 2016-2019



⁴⁵ While it is not clear to the evaluators why this is so, it may be that improved access has revealed the true extent of needs.

⁴⁶ UNICEF Education Strategy Notes 2016 and 2019; CPD 2016-2018 and 2019-2021; UNICEF Contribution to Education in Humanitarian Situations”.

on the balance between these different programme modalities.

3.5 EFFECTIVENESS AGAINST STATED OBJECTIVES

3.5.1 As noted above, the results structure from 2016 to 2018 does not enable a clear link to be established between emergency education interventions and stated results. However, UNICEF has achieved important gains throughout the evaluation period, in particular with

regard to access to education (enrolment and retention) for IDPs in PoCs and in communities; establishing safe education facilities (temporary learning spaces); provision of essential education material; teacher training; community mobilization and engagement through school management committees (SMCs) and parent-teachers associations (PTAs); and linking education with child protection approaches and to some extent WASH in schools.

3.5.2 Table 2 shows the results achieved by UNICEF and its partners against key indicators

Table 2 UNICEF results against targets in education

Indicators	Year	UNICEF Target	UNICEF Results	UNICEF % achieved
# of children and adolescents 3-18 years provided with access to education in emergencies*	2016	325,000	313,832	97%
	2017	300,000	319,962	107%
	2018	500,000	559,450	112%
# of children accessing quality formal or non-formal early learning, pre-primary, primary or secondary education*	2019	729,000	618,174	85%
# of teachers and members of parent-teacher association (PTA) and school management committee (SMC) trained*	2016	10,000	9,269	93%
	2017	10,000	13,007	130%
	2018	5,200	7,189	138%
# of teachers trained on education-in-emergencies basic pedagogy and learner-centred methodologies*	2019	5,500	6,360	116%
# of temporary learning space (TLS) classrooms established **	2016	883	689	78%
	2017	1,048	556	53%
	2018	1,183	460	39%
	2019	750	322	43%

* Source: HAC ** Source: RAM

⁴⁷ For a fuller record of key UNICEF results, see Annex D



and related targets for emergency education.⁴⁷ As these figures show, levels of achievement have been consistently high, with targets regularly exceeded. The exception is in the number of TLSs established. This was reportedly due to the increasing costs of construction materials, together with transportation and access issues related to conflict and climatic factors. In general, the evaluation confirms the findings on effectiveness from the evaluation of the Back-to-Learning Initiative⁴⁸ and the recent South Sudan case study within the wider evaluation of the “UNICEF Contribution to Education in Humanitarian Situations”, January 2020.⁴⁹ These findings are considered by topic in the following paragraphs.

Access, enrolment and retention

3.5.4 Despite the extremely challenging environment, UNICEF has done well to help maintain and extend access to education in the less accessible areas of the country through emergency education interventions. There is clear

evidence that **UNICEF and its partners have brought large numbers of conflict-affected children into schools** where they can learn and access other services. Significant **improvement has been achieved in the enrolment of girls** (up from 20 to 40 per cent) supported by specific incentives for girls' attendance (cash and food), provision of dignity kits, and gender-segregated latrines. As the BTL evaluation reported, **by 2018 girls were also showing higher primary school completion rates than boys. However, overall drop-out rates remain high**, and strong cultural and economic barriers remain. Girls work at home and tend to be married young. The presence of female teachers as role models is an important factor in encouraging girls to remain in schools, although this has increased only modestly (from 15 to 21 per cent in primary schools), affected by attractive opportunities that exist elsewhere for educated women. Overall, the BTL evaluation found that the teacher incentive scheme had a positive influence on teacher attendance, discipline and commitment.

⁴⁸ Mott MacDonald, Evaluation of the Back to Learning Initiative.

⁴⁹ UNICEF Contribution to Education in Humanitarian Situations.

South Sudan has the highest rate of out-of-school girls in the world (76 per cent) and marriage is the most common reason for girls dropping out. A 2019 Oxfam study on early and forced marriage in Nyal revealed that adolescent girls express a strong desire to continue with their education. Indeed, in one focus group, adolescent girls said they motivated themselves to perform well in school to avoid the risk of early marriage, since it could motivate their parents or relatives to support their further education.

Barriers for children with disabilities also prevail. In 2015, children with disabilities accounted for only 1.7 per cent (approximately 21,300 pupils) of total primary school enrolment. The three main barriers preventing children with disabilities from accessing education are long distances to school (84 per cent), negative attitudes (52 per cent), and lack of teacher experience (42 per cent). Teasing and bullying were mentioned in 24 per cent of cases.

Sources: Oxfam, '*Early and Forced Marriage in Nyal, South Sudan*', Oxfam, Juba, 2019; UNICEF and MoGEI Assessment of Early Grade Learners.

3.5.5 The BTL evaluation found that the basic education package for schools in IDP camps had been effective in providing the basic physical conditions for learning and teaching, although water, secure storage and maintenance remained concerns. Different elements of the basic package had been delivered to all of the sampled schools in safer areas, but some of these schools lacked the necessary infrastructure for WASH and school feeding. Learning and teaching texts and materials were provided to schools. The supplies sometimes run out. In many cases the resources were not used.

3.5.6 The establishment and training of PTAs and SMCs was successful according to the BTL evaluation. However, the model of one-off delivery lacked adequate implementation and maintenance follow-up and support. Evidence from the field of school development research shows that short training interventions in school management and classroom practice require regular on-site reinforcement in order

to have an impact, especially in schools with a high turnover of leaders and teachers. Also, by 2019, it was evident that certain recently built classrooms and WASH facilities had been poorly maintained and had become unusable. Similarly, in many instances BTL-supplied books and education materials were either inaccessible to teachers or poorly managed and maintained.

Teacher training, quality of education and learning outcomes

3.5.7 While increasing access to education has been an essential focus for education in emergencies, and in this respect UNICEF has extended its reach considerably in otherwise inaccessible areas, the quality and durability of results achieved through this approach is often questionable. Education quality depends on having a suitable classroom, the necessary teaching and learning materials, and having a motivated teacher who has been fully

trained. These factors are reflected in learning outcomes.

UNICEF has invested significantly in provision of teaching and learning materials and education supplies (see below) as well as in basic training and the payment of incentives to teachers and teaching volunteers. Yet despite these efforts, questions over quality of teachers and teaching remain. Many teachers only have limited education with limited literacy. Short-duration training and limited follow-up and supervision are not sufficient to produce the desired change in teaching methodologies, though they may be all that is possible in an emergency context. For example, in inaccessible areas, or where partners were not in place, UNICEF worked through the IRRM mechanism as direct implementers, but with only seven days in-situ to mobilize teachers and learners, provide training and establish PTAs. The 2017 baseline assessment of literacy and numeracy and the 2018 follow-up⁵⁰ indicated that the foundations for reading, writing and understanding in English are extremely weak among the pupils sampled.

Temporary learning spaces

3.5.8 UNICEF contributed to the increase in availability of physical learning structures: 2,027 TLS were constructed between 2016 and 2019, although this was fewer than planned. While initially structures were too temporary (e.g. using bamboo fences, tents, mud floors) and lasted less than a year given the climate and heavy use, thanks to the advocacy of national NGOs, semi-permanent materials have been used in TLS construction since 2017. Although stakeholders equally questioned the relevance of fully permanent school construction given inflated costs and the risk of destruc-

tion, this compromise appears to be more cost effective than renovating every year. Provision of separate WASH facilities for girls and boys has had a positive impact on girls' enrolment and retention as well as on the attendance of female teachers (though these are still very few). However, poor maintenance had at times reversed these gains. The ever-increasing costs of construction materials – together with transportation and access problems – have seriously challenged TLS construction throughout the evaluation period.

Teaching and learning materials

3.5.9 UNICEF and its partners have distributed educational kits over the evaluation period, including dignity kits, school-in-a-box, teacher and recreational kits. These were unanimously considered vital for schools and students to resume learning activities. The content and quality were considered good, although lack of quantity remains a problem. Reaching remote schools was also reportedly problematic, especially during the rainy season. The move in 2016 to customize children's and teachers' school-in-a-box kits to the South Sudan context and to procure them locally helped ensure the sustainability of this approach: building national capacity to procure education supplies in a cost-effective manner, while ensuring the items are better customized based on local consultations, demand and preferences. It also significantly reduced the procurement lead time, from four or five months to one.⁵¹

In 2017, in line with national language policy, teachers' guides and supplementary materials were developed in five national languages (Bari, Dinka, Nuer, Zande and Toposa). This decision is controversial: to some, it discriminates

⁵⁰ UNICEF and MoGEI Assessment of Early Grade Learners.

⁵¹ UNICEF assessment of the health and education supply chain in South Sudan, 2017.

against many (as populations are mixed in any location), while to others it is pragmatic given the low English proficiency of many teachers.

Community mobilization and engagement

3.5.10 The BTL evaluation findings showed that BTL interventions had been effective in respect of social mobilization, especially regarding girls. Community engagement through PTAs and community mobilization campaigns leads to increased enrolment and retention of girls in PoCs and targeted communities. Training and mobilization of communities through communications for development (C4D) approaches also contributed to the safety and protection of children on their way to education facilities, as well as in schools. The safe schools strategy⁵² has worked to a limited extent. The low level of parental education and challenges

in mobilizing PTAs (besides attending PTA trainings) limited the effectiveness of the strategy.

3.6.1 The emergency education programme has largely delivered against the child protection CCCs (summarized in Box 4). The main challenges to fulfilling the CCCs have been the limited scale of the programme in relation to needs and access constraints. Inter-sectoral co-ordination (both internally and externally with partners) has been variable across the sector. As noted elsewhere, it worked well with CP (including child protection messaging, psycho-social support and mine risk education) and WASH, although maintenance of facilities has been a problem. Coordination with health and nutrition, by contrast, appears to have been very weak, particularly with regard to school feeding programmes.



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⁵² In which schools were declared “zone of peace” in 2017. Parents and communities were supposed to mobilize to maintain schools as “safe learning spaces” protected from conflict and other risks.

Box 4**UNICEF Core Commitments for Children in Humanitarian Action
(Education)*****Commitment 1**

Effective leadership is established for education cluster/inter-agency coordination (with co-lead agency), with links to other cluster/sector coordination mechanisms on critical intersectoral issues.

Commitment 2

Children, including preschool-age children, girls and other excluded children, access quality education opportunities.

Commitment 3

Safe and secure learning environments that promote the protection and well-being of students are established. Address all gaps without duplication.

Commitment 4

Psychosocial and health services for children and teachers are integrated in educational response.

Commitment 5

Adolescents, young children and caregivers access appropriate life skills programmes and information about the emergency, and those who have missed out on schooling, especially adolescents, receive information on educational options.

*Summary of CCCs as revised in 2010. A newly-revised version of the CCCs has been produced in 2020.

The extent of compliance with the CCCs, as judged by the evaluation team, is shown in the table contained in Annex E. In summary, compliance was found to be as follows:

- **High** compliance with respect to **Commitment 1** (coordination leadership) and the integration of psychosocial support (PSS) in education (Commitment 4)
- **Moderate** compliance with respect to **Commitments 2, 3 and 5** (access to quality education, safe learning environ-

ments, life skills). External constraints – primarily insecurity and lack of access – have been the main limiting factor here.

- **Low** compliance with respect to the integration of health and nutrition with the education programme (**Commitment 4**). Notably, coordination challenges with the World Food Programme (WFP) in establishing criteria for school feeding resulted in a small proportion of feeding programmes mounted in TLCs.

3.6 UNICEF AND THE EDUCATION CLUSTER

3.6.1 UNICEF contributed significantly to the education cluster over the evaluation period, both at national and sub-national/state levels. Coordination of the national education cluster is shared with Save the Children, and this co-leadership is reported to have been working well.⁵³ During the evaluation field visits, all the respondents from NGOs showed a high degree of satisfaction with the national cluster performance. A recent paper⁵⁴ confirms this perception, stating that the cluster “*works as a positive coordinating body between both the national and sub-national levels, as well as between the Ministry of General Education and Instruction (MoGEI), donors, and implementing partners.*”

At the sub-national/state level, the co-leadership is shared with an NGO operating in that state. At this level, it was observed during field visits that UNICEF co-leadership was not as strong as at the national level, leaving NGOs to take on more of the coordination role. This is a challenge for these organizations because they face funding constraints and most of them are almost entirely dependent on UNICEF programme cooperation agreements (PCAs) to maintain their operations.

3.6.2 While this evaluation does not cover the performance of the education cluster itself, the cluster has reportedly performed its core functions well. The information management process within the cluster appears to have been consistent and effective: the wider humanitarian community has had access to a wide range of relevant information, including maps and

infographics, assessment reports and updated meeting minutes. In South Sudan as elsewhere, UNICEF has had to reconcile its institutional dominance in the sector with the need to provide impartial cluster leadership as well as the need to form equitable partnerships. Its strong technical and policy capacities, together with its dominant position in the education response and as the primary channel of international funding for education,⁵⁵ have sometimes made this difficult. This is as much about perceptions as reality – see further section 6.2 on the partnership dimensions of this.



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⁵³ Interviews with agencies and cluster staff in Juba.

⁵⁴ Tolani, N. et al., ‘Rapid Education and Risk Analysis: An innovative approach to understanding how sustained violence impacts learning systems in South Sudan’, NORRAG Special Issue 02, April 2019, NORRAG, Geneva.

⁵⁵ UNICEF receives around 80% of international funding for education in South Sudan, much of which is used to finance programme cooperation agreements (PCAs) with partners in the education cluster.

3.6.3 With regard to coordination and collaboration with other sectors, this has seen most progress, through inter-cluster coordination facilitated by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) on the issue of the teacher incentives and salaries. It appears that the payments made to technical staff in other sectors have been much higher than payments made to teachers, and this has created tensions between sectors. This issue is not yet resolved and continues to create challenges for UNICEF partners and programmes, particularly in cases involving the closure of schools or classes.

3.7 CAPACITY DEVELOPMENT, SUSTAINABILITY, RESILIENCE AND FUTURE PROSPECTS

3.7.1 The education programme was planned to include elements of resilience at individual, community and systems levels. Although the latter falls out of the scope of this evaluation, the link between the system-strengthening and emergency education component appears weaker than it might.⁵⁶ While this is largely explained by the context, including weak MoGEI capacity and limited education financing, there is scope for building a model for education sector development as recommended by the BTL evaluation.⁵⁷ The BTL evaluation management response plan⁵⁸ included a clear timeline and actions to this end. While recognizing the impact of the COVID-19 pandemic on the education sector, the evaluators believe that the pandemic may offer an opportunity to develop a 'build

back better' strategy embedded in the emergency response strategy – with the involvement of MoGEI, donors, partners, communities and children.

3.7.2 As far as resilience within the emergency education programme is concerned, UNICEF has worked on two different levels:

- i. Individual resilience of children. UNICEF impact in this regard has largely been achieved through access to education, incorporating child protection and PSS programming in education, distribution of learning material and dignity kits for girls. Separate WASH facilities when properly maintained also contributed to girls' resilience. Inclusion of the most vulnerable, as for example children with disabilities and children in pastoralist communities, over-age students and girls facing early and forced marriage was poorly addressed.
- ii. Resilience-related teacher training. This involved training teachers on child-friendly teaching methods, PSS, child protection and peacebuilding, thereby contributing to the professionalization of teachers. However, the short duration of training and limited follow-up and supervision have not been sufficient to produce the desired change in teaching approaches. Crucially, in the absence of a sustainable teacher salary scheme and public education financing, it will be difficult to retain teachers (especially females) in the education system. The related investment in skills training risks being lost.

⁵⁶ 'UNICEF Contribution to Education in Humanitarian Situations.

⁵⁷ Mott MacDonald, Evaluation of the Back to Learning Initiative.

⁵⁸ UNICEF BTL Evaluation Management Response Plan, June 2019.

3.7.3 As noted above, creation of SMCs and PTAs has contributed both to strengthening the school system and to mobilizing communities, leading to increased enrolment and retention of girls in PoCs and targeted communities. But despite these positive achievements, sustained community mobilization was constrained by the low level of parental education and weak community participation in education planning. This remains an enduring challenge for access to quality education.

UNICEF also invested in building the capacity of its national NGO and community-based organization (CBO) partners, partly in response the localization agenda. However, more needs to be done to strengthen the national NGOs and CBOs (including faith-based organisations) to deliver quality education programming, both in terms of building their technical capacity and in helping them address contextual challenges.

3.7.4 Without an active education partner or government authority, education activities are not sustainable. Under the IRRM model of operation, NGO partners were encouraged to (re-) establish a presence in many locations. Where re-establishing a permanent presence was not possible, UNICEF and partners worked to mobilize and train local volunteers, so that learning spaces could be handed over to be managed by the communities themselves. However, sustained access to education remained essentially dependent on continued provision of external resources.⁵⁹ More recently, increased access to formerly inaccessible areas has lessened the reliance on the IRRM modality, and this should make consistent follow-up visits and re-supply of schools more feasible.



⁵⁹ Interviews with UNICEF section staff, Juba.

4

UNICEF AND THE CHILD PROTECTION RESPONSE



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4.1 CHILD PROTECTION CONTEXT AND NEEDS ANALYSIS⁶⁰

4.1.1 Despite the intermittent peace process, the safety and security of children in South Sudan consistently deteriorated between the start of the civil war in 2013 and the end of 2019. Mass violations of child rights continued in the country throughout the evaluation period, especially in the in the Greater Upper Nile region, Greater Equatoria and Wau. Although precise data are lacking, between December 2013 and April 2018, the conflict is estimated to have caused 382,000 excess deaths, approximately half from violence.⁶¹ The pattern of violence has included widespread sexual violence, targeted killings and the destruction of livestock and property. Since 2014, some 2,700 incidents of grave violations against children have been verified by the United Nations, affecting over 81,000 children. The United Nations' Monitoring and Reporting Mechanism (MRM) has reported more than 3,677 incidents of grave violations between 201 and the end of 2019.⁶²

4.1.2 Women and girls are disproportionately affected by violence and rights abuse, for reasons related to limited decision-making power, mobility restrictions, and lack of access to and control over resources. Incidents of gender-based violence, including sexual violence, are under-reported by survivors due to a number of factors, and there are cultural norms that can be an impediment to addressing gender-based violence, including accessing

the already limited support services.⁶³ The full magnitude of the problem is unclear. However, studies indicate that some 65 per cent of women and girls in South Sudan have experienced physical and/or sexual violence in their lifetime, and some 51 per cent have suffered intimate partner violence. Some 33 per cent of women have experienced sexual violence from a non-partner, primarily during attacks or raids. The majority of girls and women who have experienced sexual violence were under the age of 18 when they first experienced such violence.⁶⁴

4.1.3 Since 2013, over 12,700 violations against children have been verified by the country task force on monitoring and reporting, including over 6,200 cases of children who were associated with armed actors. During the same period, over 3,300 of the recruited children were released and handed over to UNICEF for social and economic reintegration. While the actual number of children still associated with armed actors is unknown, these figures highlight the urgent need for advocacy and support by United Nations agencies and others to protect children from further harm, and specifically to put in place measures to protect children in conflict-affected areas from recruitment and abuse.

4.1.4 The problem of unaccompanied, separated or missing children (UASC) is on an even greater scale. More than 26,000 have been registered in South Sudan since December 2013, more than 8,000 of whom required fam-

⁶⁰ Besides UNICEF annual reporting, the main sources for this section are the United Nations Humanitarian Needs Overview (HNO) for 2018 and 2019 and the UNICEF Update on the Situation of Children and Women in South Sudan, August 2017.

⁶¹ UNICEF COAR, 2018.

⁶² United Nations Children's Fund, 'The Monitoring and Reporting Mechanism on Grave Violations Against Children', briefing note, UNICEF South Sudan, Juba, 2019.

⁶³ Interviews with UNICEF CP section staff, Juba.

⁶⁴ United Nations Children's Fund, 'Gender-based Violence', briefing note, UNICEF South Sudan, Juba, 2019.

ily tracing and reunification services. Much of this caseload continues to be concentrated in Unity, Jonglei and Upper Nile States. Access to affected children in many areas remains hampered by security concerns, and funding gaps mean that support is mainly being provided to unaccompanied children and the most vulnerable separated children.⁶⁵

4.1.5 The hardships and violence associated with the conflict have had pervasive effects on the mental health and psychosocial well-being of children, their families and communities. UNICEF estimates that since 2013 over a million children have been affected by psychosocial distress. Failure to meet critical safety and basic needs also overstretches caregivers' coping skills, ultimately affecting the capacity of adults (parents, community members and teachers) to protect and take care of their children. **Many South Sudanese children and adolescents are displaced and experiencing profound psychological distress**, including nightmares and suicidal thoughts (seen in girls and boys aged 12–17 years), as well as incidents of abuse, neglect, exploitation, child/forced marriage, teenage pregnancy, and recruitment. Parents and temporary caregivers in PoCs have had difficulty caring for children appropriately, and girls and boys are struggling to cope due to feelings of hopelessness and limited freedom of movement. A wide range of mental health problems exists, including problems caused by conflict-related violence, displacement and multiple losses. Meanwhile, **the provision of mental healthcare services** to promote and protect psychosocial wellbeing and prevent and treat mental disorders **is well below accepted international standards**.

4.1.6 Landmines and explosive remnants of war are killing and injuring civilians, threatening communities and limiting people's mobility. As well as those leftover from decades of conflict, both sides in the recent conflict have also been re-mining. The exact magnitude of the problem is unknown. As of August 2018, records existed of 569 known contaminated areas across 55 counties in South Sudan, nearly half of which are located in Juba, Yei, Magwi, Torit and Terekeka counties. The contamination in South Sudan represents over 42 million square metres and affects roads, arable land, schools, clinics and water points, rendering them unsafe for use.⁶⁶

4.1.7 The situation for vulnerable children in South Sudan is compounded by the weak state of national and local social services. Government expenditure on the social sectors has been minimal, and even the modest allocation has been undermined by the reduction in government oil revenues and the de-prioritization of funding to the social sectors, leaving the salaries of critical workers unpaid. The very limited state capacity means that international aid agencies and civil society deliver most social services countrywide, both in emergency and non-emergency situations. The social service and case management system in South Sudan is almost entirely driven by the humanitarian sector.

UNICEF needs analysis and data quality

4.1.8 Part 1 of the evaluation report stated that "*accessing reliable contextual data about needs is a problem across the UNICEF programme in South Sudan. An underlying weakness of data in South Sudan is the lack of a recent*

⁶⁵ United Nations Children's Fund, 'Country Office Annual Report, South Sudan', UNICEF, Juba, 2019.

⁶⁶ Humanitarian Needs Overview 2019.

census and national survey data and the poor birth certification system. The last population census was undertaken in 2008 and the most recent household and health survey took place in 2010. Without these key denominators, much of the data is unreliable, with the exception of some trends analysis."

This remained true through 2019 to the present. In addition to this overall challenge, population movements, limited accessibility, variegated social norms and intercommunal dynamics, makes it difficult to make accurate estimates of child protection and gender-based violence vulnerabilities across the country.

4.1.9 Despite the challenge of obtaining reliable CP data, the evaluation finds that the CP programme has been grounded in a solid understanding of the overall child protection challenges in South Sudan. The Child Protection Strategy, 2016-2018 and 2019-2021 is based on analyses of the situation of women and children carried out in 2015 and updated in 2017. A baseline assessment of the quality of child protection services⁶⁷ commissioned by UNICEF in 2015 contributed to shaping the child protection services, although recommendations from this process were not always followed up in a timely way.⁶⁸

The UNICEF strategy and approach has also been informed by various thematic situation analyses and evaluations carried out during the evaluation period. For gender-based violence in particular, the multi-country real-time evaluation of UNICEF gender-based violence emergency programmes issued in September 2016 provided the foundation for the gender-based violence strategy and programmatic approach,⁶⁹ including a management response plan.⁷⁰ For CAAFAG, the programme evaluation in 2018⁷¹ made a number of recommendations for course correction of the programme that are gradually being implemented, although progress has been slow both because of limited funding in 2019/2020 and because of COVID travel restrictions.

4.1.11 The collective humanitarian needs overview process and information sharing within the clusters (protection cluster, child protection sub-cluster and gender-based violence sub-cluster) have also informed the UNICEF strategy and approach, including its approach with partners. However, information-sharing within the child protection sub-cluster co-led by UNICEF was mentioned by child protection actors as a concern,⁷² and information on the CP website is significantly out of date.

⁶⁷ Kokonya, Achieng and Helen Johnson, 'Promising Quality: An independent baseline assessment of child protection services in South Sudan, UNICEF, Juba, 2015.

⁶⁸ An example of is the development of a comprehensive case management system that was finally developed only in 2019.

⁶⁹ United Nations Children's Fund, 'Multi-Country Real-Time Evaluation of UNICEF Gender-Based Violence in Emergencies Programmes: South Sudan Country Report', Management Response Plan, UNICEF, New York, 2017.

⁷⁰ UNICEF GBVIE Evaluation Management Response.

⁷¹ UNICEF Evaluation of Community-based Reintegration Programme for CAAFAG in Boma State.

⁷² KII in Juba and survey responses. Partners expressed the concern that while UNICEF puts a lot of emphasis on gathering programme data on a monthly basis, that information does not appear to inform shared analysis. Partners reported that while they share their assessments with UNICEF and the CP sub-cluster, these are not circulated nor made available through the CP sub-cluster website (that website appears not to be used to share information).

In 2017, UNICEF carried out a partner capacity assessment in CP, which contributed to shaping the type of technical support and capacity development effort needed by partners. Feedback from the partner survey conducted for this evaluation suggests that UNICEF has been responsive to needs on this agenda.

The UNICEF child protection programme

4.1.12 Figure 3 above shows the main components the UNICEF child protection programme in South Sudan. The programme has aimed to help reduce the number of children and young people exposed to, or at risk of, violence, exploitation and abuse in emergency

and non-emergency settings. It has been focused on delivering critical child protection services, promoting positive behaviours and strengthening policies and systems to build a protective environment for children. Priority issues have included responses to child rights violations, including gender-based violence and child marriage; birth registration and justice for children; family tracing and reunification; and safe release, care and reintegration of children associated with armed groups, alongside efforts to prevent recruitment. Children formerly associated with armed groups and other at-risk young people are provided with education and life-skills and are trained as community agents of change. All of this has been done in partner-

Figure 3

Overview of the UNICEF child protection response (2016 to 2019)

Strengthening the Child Protection Systems (System-building)

Supporting Ministry of Gender, Child and Social Welfare, the Ministry of Health, Ministry of Justice and other ministries concerned to:

1. Develop child protection laws and regulatory frameworks
2. Strengthen delivery systems to improve children's access to justice
3. Strengthen delivery systems to improve children's birth registration services.

Child Protection in Emergency (Service delivery/enabling service delivery)

1. Comprehensive case management
2. Unaccompanied and separated children: Family Tracing and Reunification (FTR)
3. GBV risk mitigation, prevention and response
4. Mental health and psychosocial support (PSS) — including EVD preparedness
5. CAAFAG Release & Reintegration
6. Mine risk education (MRE)
7. Monitoring & reporting mechanism (MRM)

Support to national and state-level coordination mechanisms (Child Protection Sub-Cluster).

ship with other actors, including government, other United Nations agencies, national and international NGOs and community groups.

4.1.13 Under the programme, survivors of gender-based violence are provided with psychosocial support and specialised case management services. The risk of gender-based violence is mitigated by addressing harmful social norms, ensuring safe access to services such as women- and girls-friendly spaces (WGFS) and ensuring measures are in place to address the risks identified. Mine risk education (MRE) has been supported through community capacity development and the school curriculum. UNICEF continued to monitor and report on grave violations of child rights, pursuing cross-border collaboration and coordination.

4.2 UNICEF CPIE STRATEGY: CLARITY, COHERENCE, LOGIC

4.2.1 The child protection programme is based on a clear overall strategy, summarized in Table 3 below.⁷³ Theories of change were developed in 2016 and in 2018. The overall strategy is aligned with that of the CP sub-cluster and consequently with the broader protection cluster strategy and the overarching protection strategy of the humanitarian country team (HCT). The strategy includes a hybrid humanitarian and development approach with a system strengthening component and an emergency child protection service delivery component. Although this evaluation focuses on the latter, the evaluation recognizes the im-

portance of the continued effort to build an enabling environment, especially when it comes to birth registration services.

In addition to the overarching CP strategy, separate strategies were developed for specific thematic areas: comprehensive case management, unaccompanied and separated children, gender-based violence, children associated with armed forces and groups and mine risk education. Those strategies are important to explaining programmatic approaches and the links to implementation modalities.

4.2.2 The 2016 and 2018 ToCs both have a clear logic in the results chain. Specifically, the logic linking the child protection outcomes and outputs (and indicators) in the two programme cycles is a strong one. It is important to note that in the 2016-2018 programme cycle, UNICEF technical support and capacity development constituted a stand-alone output, reflecting the anticipated limited technical capacities of UNICEF implementing partners and of the wider child protection systems in South Sudan.^{74, 75} In the subsequent programme (2019-2021) this output was incorporated into Output 2.

This clearly reflects the added value UNICEF provides through its technical expertise. However, as the CP section described to the evaluators, capacity development depends on more than providing tools and training: it requires coaching and mentoring of NGO staff who often start work with very limited experience in this field. While it has fulfilled this role to some degree, UNICEF acknowledges that it has not

⁷³ UNICEF Child Protection strategy notes, 2016-2018; CPD, 2019-2021.

⁷⁴ UNICEF partners in child protection consisted mainly (70%) of national and local NGOs, many of which started their partnership with UNICEF as CBOs.

⁷⁵ Kokonya and Johnson, Promising Quality. As noted in the report, “child protection is a people-intensive process and necessitates an iterative process of recruiting, training and developing project staff, equipping them with the necessary skills to deliver high quality services.”

Table 3

UNICEF child protection results structure (2016-2018 vs 2019-2021 CPDs)

2016-2018 Country Programme Document	2019-2021 Country Programme Document
Outcome: South Sudanese children and adolescents at risk of or exposed to violence, exploitation and abuse have their risk reduced, mitigated and where possible, their safety, dignity and health restored by 2018.	Outcome: By 2021, 2.4 million South Sudanese children and young people at risk of violence, exploitation and abuse, in emergency and non-emergency settings, use integrated basic social services
Output 1: System-building: Ministry of Gender, Child and Social Welfare, the Ministry of Health and selected state ministries have the laws and regulatory frameworks and service delivery systems in place to adequately improve children's access to justice and birth registration services	Output 1: System Building: Ministry of Gender, Child and Social Welfare, the Ministry of Health and the selected state ministries have laws, regulatory frameworks and service delivery systems in place to adequately improve children's access to justice and birth registration services.
Output 2: Emergency CP service delivery: Children at risk of, or exposed to violence, exploitation and abuse are increasingly able to access and benefit from higher quality core child protection and gender-based violence in emergency and non-emergency settings by 2018	Output 2: Child protection services in emergencies: Key actors are able to provide improved core child protection and GBV services for children at risk of or exposed to violence, exploitation and abuse in emergency and non-emergency settings.
Output 3: CP programme and technical support: CP programme results effectively implemented and technical support provided at national and state levels by CP section.	

been able to do enough in this regard, lacking both the (social-work experienced) staffing capacity and the funds necessary to fulfil this important role.

Given the centrality of capacity development to the UNICEF strategy, the evaluation found the indicators for this area of work to be inadequate.⁷⁶ They do not reflect the multi-faceted

technical and capacity development support that UNICEF provides to partners, cluster/AoR members and state actors. As a result, technical support and capacity development achievements are not systematically reported in country office annual reports (COARs).⁷⁷ UNICEF needs to develop indicators that would allow them to better gauge progress in this area, including both output and outcomes indicators.

⁷⁶The only indicator for this output in the result monitoring framework is "% programmatic visits conducted against plan".

⁷⁷Annual reports give examples of achievements in different technical areas of work, but this is not sufficient to build the full picture of UNICEF efforts.

4.2.2 UNICEF lacks a child protection mainstreaming⁷⁸ strategy across its sections and sectors of intervention. This has led to an ad hoc approach to child protection mainstreaming which has not always been seen as a priority in the implementation of the programme. An exception to this is found in the management response to the gender-based violence evaluation, which provided a clear strategic framework for mainstreaming gender-based violence concerns in other sectors – including appointing gender-based violence focal points within the UNICEF sections and a dedicated gender-based violence specialist to mainstream gender-based violence issues across the sectors.

Related to this, **integration of child protection⁷⁹** in UNICEF sections and sectors is not fully articulated, with the exception of C4D,⁸⁰ education and lately nutrition. Elements of integration are occasionally described in the thematic area strategies, as for example in the ToC in the CAAFAG strategy,⁸¹ MRE strategy and the in-school PSS strategy. A gender-based violence-WASH, health and nutrition integration strategy was also developed and proved to be a success.⁸² Whenever a clear integration strategy exists, UNICEF appears better placed to demonstrate that wider protection outcomes could be achieved through the synergies between various sectors. Examples of this are the impact at community level of CAAFAG reintegration programmes and that of the WASH and gender-based violence integrated programme.

4.3 DESIGNING THE RESPONSE: COVERAGE, FOCUS AND TARGET-SETTING

Coverage and scope

4.3.1 UNICEF emergency programming on child protection has focused on Unity, Upper Nile, Jonglei, Western and Northern Bahr el Ghazal, and Western, Central and Eastern Equatoria. This is in line with the evolving protection needs assessed in the HNOs⁸³ and with priorities set within the protection cluster and child protection sub-cluster across the evaluation period.⁸⁴ The maps below show that in 2018, UNICEF and its partners were present in all of the counties with highest level of protection needs, as well as most of the next tier, although not always with a high level of presence or consistent access.



⁷⁸ Child protection mainstreaming is the process of ensuring that child protection considerations inform all aspects of humanitarian action, including promoting meaningful access, safety and dignity in compliance with the ‘do no harm’ principle.

⁷⁹ For the purpose of this report, ‘integration’ refers to the intentional combination of child protection and GBV services within other sectors; for example, incorporation of MRE as a subject in the education curriculum.

⁸⁰ An integration strategy was developed in 2017 (document not available) and in 2018 as part of the 2019-2021 workplan

⁸¹ Integrated strategy with WASH, education, livelihoods and social development.

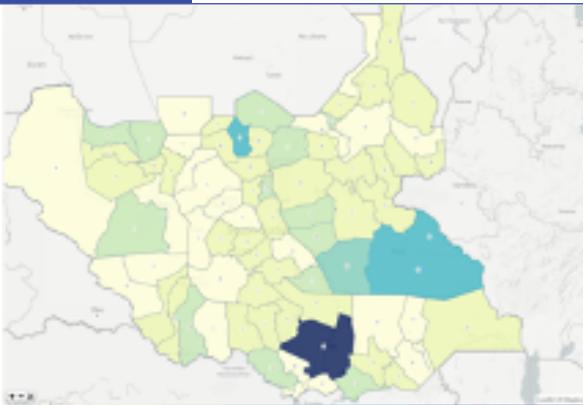
⁸² UNICEF Multi-country RTE of GBVIE, South Sudan.

⁸³ South Sudan Humanitarian Needs Overview 2015, 2016, 2017, 2018.

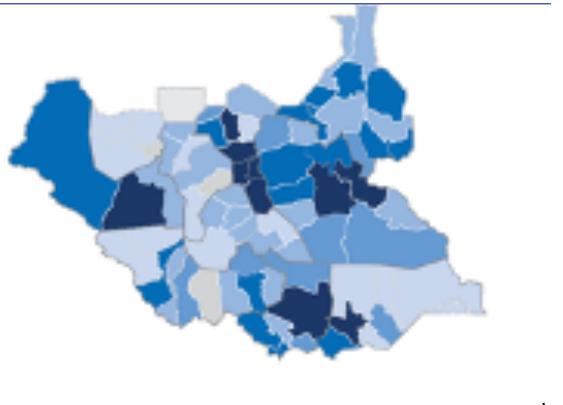
⁸⁴ South Sudan Humanitarian Response Plan 2016, 2017, 2018, 2019.

Figure 4

UNICEF focus areas for CP emergency programming



Source: Active Partnership in South Sudan
(3 September 2018)



Source: HNO 2016 Protection

Local factors – including the ability to gain secure access⁸⁵ and the presence and capacity of implementing partners – remain the key drivers for deciding locations and scale of the programming.⁸⁶

4.3.2 Although geographical coverage has broadly mirrored the areas of most acute need, the scale of the programme has been insufficient to cover the large child protection needs. It should be noted, however, that this is true for the entire protection response: in 2018, for example, the overall United Nations-coordinated protection response reached only 34 per cent of the people defined as being in need in 2018.⁸⁷ In 2019, lack of funding was also a major factor limiting the scope of the programme: the funding gap in that year was very large (63 per cent) and lack of funding continues to be a major constraint.

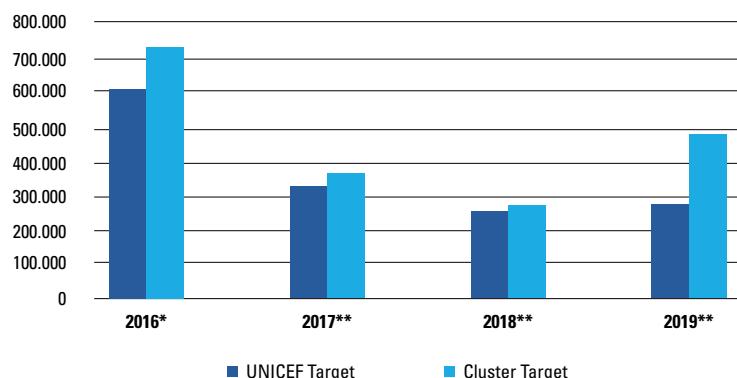
Target-setting strategy

4.3.3 The rationale for UNICEF target-setting has not been fully clear. In particular, the rationale for reducing the target in 2017 in the face of increasing protection needs (and apparent overachievement against target in the preceding years) was not clear to the evaluators; nor was the rationale for UNICEF targeting in relation to the child protection sub-cluster. In particular, the UNICEF proportion of the target within the cluster fell significantly in 2019 (see *Figure 4*).

⁸⁵ United Nations Children's Fund, 'South Sudan Country Office Annual Report, 2018', UNICEF, Juba, 2019: "Of the 7 million people in need of assistance, approximately 1.5 million (including 920,000 children) live in counties with high access constraints".

⁸⁶ KII with UNICEF staff, Juba.

⁸⁷ HRP 2019. On average, the overall protection response targeted only around 50% of defined needs in the period 2017-2019.

Figure 5**UNICEF vs CP sub-cluster targeting 2016-2019**

* # of children and adolescents reached with critical child protection services

** # of children reached with PSS

4.3.3 The rationale for targeting through different operational modalities (static, outreach, mobile and IRRM/RRM) is also unclear to the evaluation team. *Figure 5* below shows the numbers of people reached through IRRM missions over the years 2016 to 2019.⁸⁸ It seems that not all people reached in this way have been included in the UNICEF results on CPIE,

but it remains unclear which part of the population reached through IRRM/RRM mechanisms are considered to have been reached by critical CP and gender-based violence services. This appears to be a weakness in the way in which UNICEF designs and ultimately evaluates the impact of its CPIE interventions.

Figure 5**People reached through RRM/IRRM missions**

	# of IRRM/ RRM missions	people reached	# of children below 15*	# women and girls from 15 to 54**
2016	19	225,000	99,000	56,250
2017	51	781,128	343,696	195,282
2018	50	544,969	239,786	136,242
2019	32	318,868	-	-

⁸⁸ UNICEF and WFP have substantially reduced the use of the IRRM modality over the course of 2019 and 2020 as access to previously conflict-affected populations has improved and the ability to preposition food stocks has grown. The mechanism continues to be used in some cases (e.g. to reach those affected by flooding) and remains available for more extensive use should the need arise (KII Juba).

4.3.4 A wide consultative process for the 2019-2021 CPD was carried out with partners in different locations on the different thematic areas of the child protection response.⁸⁹ However, several partners noted in interviews for this evaluation that the strategy development process was ‘top-down’ and that there was limited space to influence what was perceived as

a pre-determined strategy for the coming year. There was also a widespread perception that the UNICEF strategy was based on funding, not necessarily on needs. UNICEF itself recognises the impact of the lack of funding on its programming, a factor that goes some way to explaining the major results shortfall in 2019 (see Table 4).⁹⁰

Table 4

UNICEF achievement against key CPIE indicators 2016-2019

Child Protection Indicators	Year	UNICEF Target	UNICEF Results	UNICEF % Achieved
# of children and adolescents reached with critical CP services (as per the RAM)	2016	600,000	693,067	116
	2017	647,000	896,720	139
	2018	510,000	470,519	92
	2019	587,000	667,515	114
# of children reached with PSS (as per HAC and RAM)	2016	363,000	311,462	86
	2017	327,000	266,711	82
	2018	250,000	257,482	103
	2019	275,000	244,261	89
# of people receiving GBV prevention/response services	2016	120,000	124,023	103
	2017	160,000	197,947	124
	2018	140,000	190,992	136
	2019	146,000	90,415	62

Source: HAC & RAM

⁸⁹ United Nations Children’s Fund, ‘Child Protection Annual Review and Multi-Year Planning For 2019-2021’, meeting minutes, UNICEF, Juba, 8 October 2018.

⁹⁰ “Lack of long-term funding commitments remains a challenge in ensuring the sustainability and continuity of programmes” UNICEF “2018 RAM ‘Output’ Reports” 2018

4.4 IMPLEMENTING THE STRATEGY

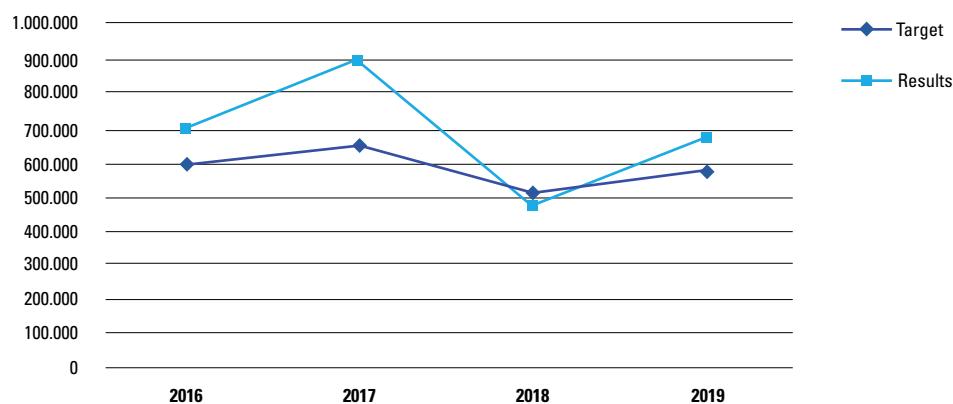
Delivery against targets

4.4.1 Analysis of the UNICEF results against the targets shown in Table 4 raises significant questions. The drop between 2016 and 2017 can be explained in terms of the change in indicator used. However, the apparent overachievement against the overarching ‘critical services’ indicator is hard to explain,⁹¹ especially in 2016 and 2019 when the CP programme was underfunded by 61 per cent and 63 per cent, respectively. In particular, in 2019, the 114 per cent of achievement does not seem to correlate with the level of achievements in the thematic components (PSS 89 per cent; UASC 8 per cent;

GBV 62 per cent; MRE 91 per cent; CAAFAG 8 per cent).⁹² Targets and results disaggregated by modalities of intervention (static, outreach, mobile and IRRM) were not available. This makes it impossible to evaluate the effectiveness of the different operation modalities.

4.4.2 Evidently there is a basic inconsistency in the way in which results data have been compiled by UNICEF for child protection. *Figure 6* shows an apparent overachievement against target across the evaluation period against the ‘critical services’ indicator (according to UNICEF RAM data). This seems to be at odds with the known constraints relating to funding and access, and is contradicted by the results for individual programme components.⁹³

Figure 6 # of child and adolescents reached with critical child protection services



⁹¹ For PSS and MRE, this overachievement can be explained by their integration with Education programming

⁹² See Annex B for the complete set of indicators

⁹³ Correspondence with the SSCO suggests that this is due to ‘double counting’ of services provided.

4.4.3 The funding gap for child protection was particularly large in 2019, which goes some way to explaining the results deficits. Funding gaps were also recorded in previous years, but this picture is complicated by the fact that from 2016-2018, major underspends meant that around 40 per cent of the programme funds were carried over to subsequent years.⁹⁴ **This raises major questions about the country office's ability to programme with the CP funds it had available.** Although the practical constraints on programming were significant in this period, the evaluators were not able to get a clear explanation of the reasons behind this.

Effectiveness against stated objectives

4.4.2 Overall, CP programming appears to have been reasonably effective – in the sense of achieving its stated objectives – within the major constraints under which UNICEF and partners operated. Particularly, UNICEF has succeeded in balancing support to child protection system building, service delivery, capacity development of partners and changing of social norms (especially on gender-based violence). This effort in system and capacity-building has not yet fully borne fruit, although there are some encouraging achievements to date, notably on gender-based violence. Indeed, the gender-based violence programme in South Sudan is considered a model for good practice globally and is used as example in the UNICEF global gender-based violence in emergencies helpdesk.⁹⁵ Here positive achievements on social norms change through the community care programme, capacity development of civil society (e.g. Voice of Peace) and the develop-

ment of the South Sudan Strategic National Action Plan to End Child Marriage (SNAP), which are three fundamental pillars to creating a protective environment against gender-based violence. In 2020, unfortunately, due to the COVID-19 pandemic and a continued shortage of funding, it is to be expected that some of the gains achieved so far will set back. In particular, the combined effect of economic hardship and closure of schools may have increased child protection risks, including early marriage, exploitation and abuse.

4.4.3 Child protection services were most effective in PoCs and in situations in which the engagement with communities, families and children could be more systematic, allowing a balanced programme of prevention and response services for child protection and gender-based violence. Prevention services included child-friendly spaces (CFS), WGFS, the gender-based violence community care programme, synergies with C4D (e.g. including gender-based violence messaging in the C4D community mobilization programme), mainstreaming of CP in education and gender-based violence risk mitigation efforts. Response services included case management, family tracing and reunification (FTR) services, gender-based violence response services (including victim assistance for victims of sexual exploitation and abuse), PSS, CAAFAG reintegration services, and MRE.

4.4.4 Thematic areas show different degrees of effectiveness.⁹⁶ Family tracing and reunification of UASC proved to be highly effective at the beginning of the programme, especially in

⁹⁴ Funds carried forward in 2017 and 2018 were around \$10m annually

⁹⁵ Multi-country Real-Time Evaluation of UNICEF GBV in Emergency Programme – 2017; UNICEF GBV Evaluation Management Response 2018; Ministry of Gender, Child and Social Welfare; End Child Marriage In South Sudan: Strategic National Action Plan (Snap) 2017-2030; UNICEF GBViE HELPDESK Systems Strengthening and GBViE Programming 2018

⁹⁶ Annex F shows the level of effectiveness by thematic area in terms of outputs delivered.

reaching the most vulnerable children. Similarly, CAAFAG reintegration achieved important results, although few girls were reached by the services and more needs to be done on integrating mental health support. The effectiveness of the outstanding gender-based violence programme has been constrained by the limited coverage, again related to lack of funding.

Delays in setting up a comprehensive case management system made this component fully implemented in 2019 only. The psycho-social support component of the programme involves a number of different elements including awareness-raising, establishment of community-based child protection committees and help desks in schools. The implementation of PSS activities has initially suffered from the very weak technical capacities of partner staff. This resulted in challenges to going beyond recreational activities and implementing the higher-level mental health interventions necessary to support victims of gender-based violence or CAAFAG children.

Technical support and capacity development

4.4.5 UNICEF technical support and capacity development interventions through training and coaching are highly appreciated by government,⁹⁸ especially at state level, and by implementing partners, especially at field level. Some 80 per cent of the national NGOs responding to the partner survey conducted

for this evaluation mentioned capacity development and technical assistance as the most valued component of their partnership with UNICEF. Partners also very much appreciated the flexibility and support of UNICEF child protection staff at field level in coaching on technical issues and assisting with the implementation of the programming.⁹⁹

The reduction of partnerships in 2019, due to lack of funding, led to important loss of technical expertise and strategic partnerships (e.g. in gender-based violence) and limited UNICEF staff capacity to support implementation. Although technical support and capacity development are a central component of UNICEF CP programming, efforts in this area are poorly reported and systematized.

4.4.6 UNICEF has played a leading role in developing tools and guidance for specific thematic areas,¹⁰⁰ and in coaching and training partners and CP and gender-based violence sub-cluster members. Such efforts are essential to ensuring the quality of partner interventions. Notable in this regard has been the intensive effort of training and guidance on gender-based violence. Unfortunately, similar efforts in other thematic areas are not tracked (e.g. FTR, MRE, PSS, prevention of sexual exploitation and abuse and CP basics). The evaluators believe that this gap in programme monitoring does not allow UNICEF to capture its key added value in the response.

⁹⁸ Field visit to Pibor and KII.

⁹⁹ KII in Bentiu, Pibor and Yambio.

¹⁰⁰ Annex G provides an overview of the thematic guidance and standard methodological approaches developed in the course of the response. These are also critical elements of quality.

Programme quality and the CCCs

4.4.7 The CP programme has largely delivered against the CP CCCs. All thematic areas show progress toward improving the quality of services through provision of thematic guidance and standard methodological approaches, even if some areas are more advanced than others. For example, gender-based violence

prevention and response services and FTR demonstrated high levels of quality and compliance with the CCCs and minimum standards for CP in humanitarian action from the initial stages of the response. Comprehensive case management and psychosocial support components were initially delayed but were almost fully in place in 2019.

Box 5

UNICEF Core Commitments for Children in Humanitarian Action (Child Protection)*

Commitment 1

Effective leadership is established for both the child protection and gender-based violence cluster areas of responsibility, with links to other cluster/sector coordination mechanisms on critical inter-sectoral issues. Support is provided for the establishment of a MHPSS coordination mechanism.

Commitment 2

Monitoring and reporting of grave violations and other serious protection concerns regarding children and women are undertaken and systematically trigger response (including advocacy).

Commitment 3

Key child protection mechanisms are strengthened in emergency-affected areas.

Commitment 4

Separation of children from families is prevented and addressed, and family-based care is promoted.

Commitment 5

Violence, exploitation and abuse of children and women, including GBV, are prevented and addressed.

Commitment 6

Psychosocial support is provided to children and their caregivers.

Commitment 7

Child recruitment and use, as well as illegal and arbitrary detention, are addressed and prevented for conflict-affected children.

Commitment 8

The use of landmines and other indiscriminate or illicit weapons by state and non-state actors is prevented, and their impact is addressed.

* CCCs as revised in 2010.

Annex E contains full findings on the compliance of the Child Protection programme with the CCCs. These can be summarized as follows:

- ▶ **High** compliance with respect to **Commitments 4, 5 and 7** (separated children, violence against children/ gender-based violence, child recruitment), although more recent cuts to the programme reduce the extent of compliance
- ▶ **Medium** compliance with respect to **Commitments 1, 3, 6 and 8** (coordination leadership, child protection mechanisms, PSS, landmines)

Lack of time and available evidence meant that the evaluation was not able fully to gauge compliance with Commitment 2 (MRM). But it notes that UNICEF makes a number of contributions to the MRM mechanism, which has been in place since 2007 and is hosted by UNMISS child protection. Over the evaluation period, this has included contributions on data and reporting, joint UNMISS-UNICEF advocacy with the parties to conflict (thereby reportedly helping secure a number of CAAFAG releases) and a signed action plan with one of the parties to the conflict. UNICEF also contributed to numerous MRM capacity-building trainings for humanitarian actors in 2018 and early 2019.

4.4.8 Participation of girls and boys, families and communities in the programming has not always been ensured throughout the programme. While the community care programme and child protection prevention through the C4D integrated community mobilization network (ICMN) offer examples of good practices, child participation and feedback on

CFS and the CAAFAG reintegration programme, and women and girls' participation in WGFS¹⁰¹ has been much more limited. Good practices were found in Wau, Malakal and Leer, where international implementing partners integrated community feedback mechanisms through protection desks, weekly feedback forums and suggestion boxes. Community-based complaint mechanisms (CBCMs) for the prevention of sexual exploitation and abuse in Malakal and PoC sites in Juba provided channels for reporting abuses.

Mainstreaming of child protection and gender-based violence

4.4.9 Mainstreaming of CP in the education sector is advanced in a context in which attacks on schools, students, teachers and other education personnel became normal. Key elements of protection and risk analysis are included in the education needs assessment, and the response made a consistent effort to protect children from possible attack, including gender-based violence. One example is the inclusion of MRE in the curriculum.

There is room for improvement, however. Protection of educational institutions and education personnel from possible attack and inclusion of disaster risk reduction measures – particularly relevant for areas affected by floods in the rainy season – could be further strengthened. The education response also tackled the provision of psychosocial support in schools, protection of children in schools through the child help desk and a code of conduct for teachers and other education personnel, inclusion of child protection elements in teacher training (e.g. non-violent classroom management), and creation

¹⁰¹ Despite efforts to ensure participation of women and children in establishing CFS locations and multiple safety audits.



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and training of PTAs. However, the education monitoring system does not yet include fundamental child protection indicators¹⁰² that would help fully mainstream child protection.¹⁰³

4.4.10 Overall, the evaluation could not find evidence of mainstreaming of CP in health, WASH or nutrition (before 2019). Insufficient

child protection mainstreaming efforts in these sectors may potentially result in a serious harm to children. **This aspect of the programme has to be tackled as a matter of urgency.**¹⁰⁴ By contrast, mainstreaming of gender-based violence in health, WASH, nutrition and education has been consistent throughout the response.¹⁰⁵ Appointing dedicated gender-based violence focal points within UNICEF sections and dedicated gender-based violence staff and consultants to integrate gender-based violence concerns across the sectors was crucial to ensuring that gender-based violence considerations were taken into account from programme development to implementation and monitoring. Section staff were trained on the Interagency Standing Committee (IASC) Guidelines on Integrating Gender-based Violence Interventions in Humanitarian Action and the gender-based violence pocket guide for effective referrals and dedicated tools were developed,¹⁰⁶ including for IRRM. In 2019, a gender-based violence risk mitigation action plan was launched to incorporate gender-based violence funding into sectorial proposals to donors. This fully reflects the UNICEF corporate commitment to prevention of and response to gender-based violence and prevention of sexual exploitation and abuse.

¹⁰² As suggested in the INEE and CPMS standards these could be:

OUTCOME INDICATORS: Percentage of assessed formal and informal learning environments that are considered safe for boys and girls of different ages; Percentage of boys and girls of different ages (including children with disabilities) able to access schools and other learning opportunities;

OUTPUT INDICATORS: Percentage of active-duty educators trained on child protection threats and strategies to tackle threats; Percentage of surveyed active-duty education staff who have signed the adopted code of conduct; Percentage of formal and informal education environments that are regularly monitored with the aim of deciding whether both girls and boys are protected from abuse, neglect, exploitation and violence in that environment; Percentage of educational facilities identified as unsafe that were moved to a safe area; Number of children identified as at risk and referred to CP case management by education staff each month; Number of formal and informal education facilities, students, teachers and other education personnel that have been attacked during the past month; Barriers to enrolment and retention, such as lack of documents or other requirements, removed for boys and girls of all ages.

¹⁰³ See Annex H for a review of CP mainstreaming in education.

¹⁰⁴ It was suggested to the evaluation team in feedback from the SSCO that this may in part be a matter of trying to ensure that budget provision is made for including CP dimensions in other programme (as nutrition has done quite successfully).

¹⁰⁵ United Nations Children's Fund, 'GBV Risk Mitigation Programmatic Highlights 2017', UNICEF, Juba, 2017.

¹⁰⁶ United Nations Children's Fund, 'RRM GBV Guidelines for Non-GBV Specialists', UNICEF, Juba.

4.5 COORDINATING THE CP RESPONSE: UNICEF, THE PROTECTION CLUSTER AND CP SUB-CLUSTER

Child protection sub-cluster

4.5.1 UNICEF has contributed significantly to CP coordination mechanisms both at central and state levels. This included providing technical expertise to lead technical working groups on thematic areas, developing standards and guidance, and supporting technical capacity development of cluster members.

4.5.2 The sub-cluster, while it meets the minimum staffing requirements for clusters, is in reality critically understaffed¹⁰⁷ compared to the coordination needs in the country, especially at state level. The information management system and (more generally) data analysis and information-sharing were found to be weak.¹⁰⁸ This is a major gap that needs to be urgently addressed.¹⁰⁹

Limited evidence was found of mainstreaming child protection in other sectors, including inter-cluster trainings, developing and disseminating tools for child protection mainstreaming in other sectors, collecting and disseminating lessons and best practices.

Mental health and psychosocial support

4.5.3 UNICEF co-leads with the International Organization for Migration (IOM) the mental

health and psychosocial support (MHPSS) technical working group (TWG) and leads the PSS TWG within the CP sub-cluster. Relations between the PSS working group within the CP sub-cluster and the MHPSS working group within the health cluster have not always been smooth. This led to the creation of the MHPSS coordination group chaired by IOM with actors from health, education and child protection. In 2019, efforts have been made to strengthen the collaboration between the MHPSS TWG and the CP sub-cluster, including harmonization of PSS indicators. Prior to that, the evaluation found limited evidence of guidelines, standards and other technical support provided by UNICEF on MHPSS. MHPSS strategies are not developed and situation analysis is very limited. As noted above, data are hard to access and appear not to be systematically analysed or disseminated.

Gender-based violence

4.5.4 Despite globally withdrawing from the role of co-leader of the gender-based violence sub-cluster in 2017, UNICEF South Sudan played an important role in leading gender-based violence risk mitigation efforts across the cluster system and particularly in UNICEF-led clusters. It did this through trainings, training of trainers and the development of guidance and tools to almost 3,000 clusters members, aid workers, partners, and volunteers. UNICEF also continues to lead the gender-based violence sub-cluster working group in Upper Nile State (Malakal).

UNICEF has also developed and formalized minimum packages for gender-based violence

¹⁰⁷ The sub-cluster is lead by two full time coordinators (UNICEF and Save the Children) and one part-time IMS specialist based in Juba.

¹⁰⁸ <https://www.humanitarianresponse.info/en/operations/south-sudan/child-protection> consulted on 22nd of April 2019

¹⁰⁹ The evaluators recognize the fact that the CP sub-cluster in South Sudan is co-led with Save the Children. The above considerations particularly focus on the role that UNICEF played in the sub-cluster and are not meant as an evaluation of the performance of the sub-cluster as such.

risk mitigation in WASH and supported the development of cluster-specific action plans to mitigate gender-based violence in 2017 and 2018.¹¹⁰ Between 2017 and 2018, UNICEF conducted 29 gender-based violence ‘safety audits’¹¹¹ to inform the HNO, HRP and other planning and advocacy efforts. UNICEF also provided financial and technical support to gender-based violence coordination and to the implementation of the real-time accountability partnership on gender-based violence in emergencies, the United Nations Joint Programme on gender-based violence, the joint communique to end conflict-related sexual violence, and protection from sexual exploitation and abuse to enhance this work.

4.5.6 UNICEF has been an active member of the inter-agency task force on the prevention of sexual exploitation and abuse co-chaired by the United Nations Population Fund (UNFPA) and the United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), and contributed to the development

of the task force terms of reference, standard operating procedures and system-wide strategy. UNICEF also takes part in the inter-agency CBCMs, and supports the implementation of CBCMs in Malakal and Juba PoCs.

4.6 CAPACITY DEVELOPMENT, SUSTAINABILITY AND FUTURE PROSPECTS

4.6.1 UNICEF in South Sudan has largely succeeded in the difficult task of balancing support to child protection system building, capacity development of partners, support to delivery of critical child protection services, and efforts to change social norms. This effort has not yet fully borne fruit, but encouraging achievements to date indicate some progress.

4.6.2 As noted above, government systems for child protection are weak and under-resourced. In particular, the necessary social workforce is lacking and strengthening this –



¹¹⁰ United Nations Children’s Fund, ‘GBV Programme Brief, March 2018’, UNICEF, Juba.

¹¹¹ Ibid.

especially given low government expenditure in this area – represents a major challenge. UNICEF is therefore faced with the task of continued professionalization of the existing social workforce supplied by NGOs and CBOs, while at the same time supporting the government child protection system to build a more adequate social workforce. A strategy for this dual approach has been lately developed and will be implemented in 2021.

4.6.3 As noted under 4.4.5, UNICEF has contributed significantly to strengthening local capacities in child protection. Yet despite these efforts, child protection capacities in countries remain low and additional effort are needed to make sure that national NGOs and CBOs gain sufficient child protection in emergency capacities.

4.6.4 According to an internal document from 2014 entitled “Mainstreaming Resilience into Sector Programming”, *“strengthening resilience means addressing complex and interactive sets of risks. The structural causes of vulnerability cannot be overcome without a multisectoral, integrated and coordinated programme approach. Child protection is an entry point for integrated programming in humanitarian response through the establishment of child friendly spaces and other ‘community safe spaces’ that can act as a hub for safe access to cross-sectoral service delivery”*.¹¹²

Integrated programming however appears hard to achieve in practice. Partners have

consistently reported difficulties in including multi-sectorial objectives in their programmes. Multi-sectoral programming often appears to involve partners developing different programme cooperation agreements (PCAs) with different UNICEF sections. This poses challenges for implementation, with PCAs starting at different time depending on the efficiency of the sections in reviewing and finalizing the agreements, and the timeliness of the PCA reviewing committee.¹¹³ More importantly, this way of functioning creates a disconnected picture in which UNICEF itself is not able to gauge the impact and multiplier effects of multi-sectoral programming on the protection of girls and boys, families and communities.

4.6.5 As discussed above, a positive exception to this can be found in UNICEF gender-based violence programming in South Sudan. In other areas, cross-sectoral integration needs further effort. For example, in PSS the potential for CFSs to function as multi-sectorial hubs has not been realized in practice and key informants also suggested a disconnect with other sectors.¹¹⁴ Although the CAAFAG programme integrates health and WASH, and the link between CP and education programmes is relatively strong, there is an overall a sense that the multi-sectorial integrated model of programming is not ‘natural’ within the organization. Sectors are siloed, not least because of the UNICEF administrative and financial processes, and multi-sectorial programming, although encouraged as a matter of policy, is not incentivized in practice.

¹¹² United Nations Children’s Fund, ‘Mainstreaming Resilience into Sector Programming’, internal working document, UNICEF, New York, 2014.

¹¹³ The PCA review process has reportedly sped up considerably since 2019, and the SSCO now does well in relation to the UNICEF global benchmark.

¹¹⁴ Child protection partners in Juba mentioned an apparent gap in the nutrition services for children who are orphans at birth or abandoned before 6 months. These children are obviously amongst the more vulnerable. Despite that UNICEF was not able to address this gap through a joint child protection and nutrition programming.

5

UNICEF AND THE WASH, HEALTH AND NUTRITION RESPONSES



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5.1 BACKGROUND

5.1.1 Part One of the evaluation, conducted in 2018, focused on the organization's crisis-related response in the 'child survival' sectors of WASH, health and nutrition. In this section, we provide an updated analysis for these sectors to the end of 2019, with some reference to the more recent situation. This is a limited analysis: it does not cover the whole of UNICEF work in each sector, and it is based largely on a reading of UNICEF-reported results rather than interviews or other sources. However, in each case the evaluation team consulted with the relevant section in the SSCO to help validate the account given and to highlight key points.

5.1.2 The analysis below is focused on key areas of intervention in each sector. For WASH, this includes provision of access to safe water and to sanitation facilities, as well as provision of information critical to preventing disease outbreaks. For health, it includes measles vaccination coverage, distribution of treated (anti-malarial) bed-nets, and health consultations with children under the age of five. For nutrition, it includes treatment of severe acute malnutrition (SAM) in children under five, and counselling of pregnant and lactating women on infant and young child feeding (IYCF). For a fuller analysis of UNICEF work in each of these sectors, see Part One of the evaluation.

5.2 THE WASH RESPONSE

Context

5.2.1 The COAR for 2019 notes that only half the population of South Sudan has access to a basic water service (i.e. an improved source

within 30 minutes), while a further 28 per cent have access to limited services. An estimated 35 per cent of water sources are non-functional increasing the risk of water-borne diseases. Only 10 per cent of the population has access to improved sanitation, while 61 per cent practice open defecation.

These are the same figures as were available in 2018 (and cited in the Part One evaluation), which were taken from a 2015 joint monitoring programme by UNICEF and the World Health Organization (WHO) and subsequent knowledge, attitude and practices (KAP) surveys conducted in Juba in 2016-2017. This suggests that no more recent data were available by the end of 2019. Part One of the evaluation (section 4.1.1) noted that "data on water and sanitation in South Sudan are out-dated and seen as unreliable" and it seems this is still the case – indeed with the passage of time, the data are even more out of date.

5.2.2 Although some limited progress has been made on water supply, this has slowed considerably over the past two years. The context remains essentially as described in Part One, which noted that this comparatively low coverage (of improved water supply and sanitation) leaves South Sudan's population particularly vulnerable to waterborne diseases and other water and sanitation-related threats, including the documented effects on child nutrition.¹¹⁵ Annual outbreaks of cholera have been documented since 2005, with a particularly severe outbreak in 2016-2017.

Part One evaluation findings

5.2.3 The earlier evaluation noted that available data pointed to a widely under-developed sector with significant structural deficits. Large-

¹¹⁵ In recognition of this, a joint strategy for WASH and Nutrition was produced by the Clusters in early 2018



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scale development programmes in the sector, begun at the time of independence in 2011, were effectively curtailed by the outbreak of conflict in 2013 and had steadily shrunk since that time, being replaced by humanitarian (emergency) WASH responses. Part One noted the overlap of these two agendas (development and humanitarian) in terms of infrastructure and stressed the need for a common inventory of WASH infrastructure. But it also noted that the two agendas were not well connected in practice. The 2019-2021 UNICEF strategy for WASH showed ‘positive evolution’ to a more integrated approach to the humanitarian-development nexus in South Sudan.

5.2.4 Overall, Part One found that:

- ▶ UNICEF achieved its targets on access to water (2016-2018) but fell short of its targets on access to sanitation. These were

perhaps over-ambitious given the structural and developmental deficits. New approaches to community engagement appeared to be needed.

- ▶ The quality of work delivered by UNICEF WASH partners was of some concern. UNICEF needs to invest more in technical oversight and quality assurance.
- ▶ Engagement with REACH on WASH baseline assessments is essential and should be prioritized.

The related recommendations included:

- Integration of ‘humanitarian’ and ‘development’ programming for WASH infrastructure, ensuring minimum standards of implementation throughout.
- Ensuring sustainability of WASH facilities: construction quality, operations and maintenance.
- Transition from hygiene campaigns to ‘hygiene change’ where possible, and applying a more ‘invested’ means of delivery, e.g. community embedded social mobilizers and hygiene promoters.
- Joint community worker approaches with other sections for cross-sector behaviour-change.
- Strengthening engineering supervision, holding partners to account on quality.
- Requiring partners to systematically document all relevant water source data and make data available at all levels. Advocate through the WASH cluster for others to do the same, and for a central database to be established for this purpose.
- Require partners to strengthen operations and maintenance by training water committees on (a) the value and use of water source data; (b) design and use of basic management plans.

Table 5

UNICEF WASH results against targets 2016-2019

Indicators	Year	UNICEF Target	UNICEF Results	UNICEF % Achieved
# of people provided with access to safe water as per agreed standards (7-15 litres per person per day)	2016	610,000	742,221	122
	2017	800,000	811,462	101
	2018	800,000	520,221	65
	2019	800,000	496,574	62
# of people provided access to appropriate sanitation facilities* (* indicator changed in 2018)	2016	365,000	252,764	69
	2017	400,000	242,411	61
	2018	300,000	158,274	53
	2019	300,000	202,208	67
People received critical WASH - related information to prevent disease outbreaks	2018	4,200,000	4,200,000	100
	disease outbreaks	300,000	185,350	62

Source: HAC

UNICEF progress to end 2019

5.2.5 As the COAR for 2019 noted, “challenges in the water sector remain critical due to poor maintenance of the limited facilities, fragmented and weak government institutions, and a lack of adequate funding”. Safe water had been provided through rehabilitation of major town water supply systems, construction of new water facilities, rehabilitation of dysfunctional boreholes, and establishing surface water treatment systems in PoC and IDP camp settings. UNICEF also explored affordable technologies for provision of safe water such as manual drilling, particularly in Northern Bahr el Ghazal and Warrap State.

Despite the continuing extent of WASH needs and related vulnerabilities, the results shown in Table 5 above show a major drop-off in ‘safe water’ results achievement between 2016-2017 and 2018-2019. This appears to be related to lack of available funding¹¹⁶ as much as to access and other challenges – and it represents a major setback in tackling one of the major areas of vulnerability for South Sudanese children and their families. Meanwhile, the capacity of rural water departments at state level has remained low in terms of finance and human resources, with heavy reliance on NGOs and donors.

¹¹⁶ In 2018, the funding gap was 50%; in 2019, this rose to 71%.

5.2.6 Data are lacking on sanitation facilities progress for these years, and there was a change in the indicator used to gauge progress on the sanitation agenda, from creation of sanitation facilities to WASH messaging. With regard to messaging, even though the target was dramatically reduced in 2019, achievement against target also fell. This can only partly be explained in terms of funding availability, but the evaluation team was unable to obtain a fuller explanation for this drop.

5.2.7 In 2019, UNICEF made some progress on the system-strengthening aspects of the WASH agenda, and on better integrating its WASH response with other aspects of its work. With UNICEF support, the Ministry of Water Resources and Irrigation continued the scale up of work on open defecation-free (ODF) communities through community-led total sanitation (CLTS). According to the COAR 2019, over 100 villages used CLTS, of which 64 achieved ODF certification, meeting the 2019 target.

Some progress is also reported on other agendas highlighted in Part One. Capacity to monitor and undertake quality assurance of construction works has been increased through recruitment of engineering expertise. Capacity to document data on water sources “is currently been strengthened”.¹¹⁷

5.2.8 The 2019 COAR described how all UNICEF programmes supported communities with social and behaviour change, “which enables programme interventions to be more effective and impactful, especially for the most marginalized”. UNICEF in collaboration with civil society organizations (CSOs) and United Nations agencies was “initiating a new para-

digm shift of prevention first, through a multisectoral approach. This includes scaling up and integrating WASH services, improving food security interventions, and strengthening community engagement and health service delivery”. Within the UNICEF programme, the 2019 COAR reported progress on integration of the WASH programme with other sectors, including CP, education and nutrition, including the mainstreaming of gender approaches. Examples included integration of WASH and nutrition interventions tailored specifically to reduce stunting in young children in high-prevalence states and integration of gender-based violence risk mitigation into health, WASH and nutrition cluster activities.

5.2.9 UNICEF has made significant efforts to achieve a balance in its WASH interventions between humanitarian response and building community resilience. It has engaged in the Partnership for Resilience and Recovery (PfRR), which “coordinates and integrates complementary humanitarian and development assistance activities and allows donors, United Nations entities, and NGOs to adjust as communities increase resilience over time” (COAR 2019). Within this, the programme “Sustainable WASH for Partnership and Resilience” (SWfPR) has been initiated in four hubs of stability (Yambio, Torit, Rumbek, Bor).¹¹⁸

The approach common to both the SWfPR and PfRR is a focus on resilience and risk management, including climate-sensitive infrastructure and conflict sensitivity in programming. The SWfPR focuses particularly on the transition from humanitarian response to more sustainable approaches through the development of the supply chain for household sanitation and

¹¹⁷ Correspondence with SSCO WASH section, November 2020.

¹¹⁸ The SWfRP is funded by the Government of Netherlands, which is also part of the PfRR programme.



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water treatment products, as well as capacity-building of local water committees and of government partners and. One particular example of this ‘transitional’ approach is the Juba Water Scheme that will serve both the former PoC (now IDP) camp as well as vulnerable communities in Juba with piped water, and provide benefit even after the lifetime of the camp.

5.2.10 At the time of writing, the COVID-19 epidemic is reported to have placed additional constraints on the programme in 2020.¹¹⁹ In particular, it has affected community-based interventions such CLTS in which people are brought together and disrupted supply of essential treatment chemicals, posing a potential risk to continuity of (already limited) urban water supplies. Floods continue to recur regularly, particularly in Jonglei, resulting in areas becoming inaccessible and potentially reversing previous WASH gains.

Given the current socio-economic situation, the emphasis is now on sustainability. Collaborative approaches are being prioritized, and

new technologies (solar) and ways of financing water supply (vouchers, cost recovery in urban areas) are being explored.¹²⁰ WASH in schools is a priority area for collaboration and scale up. But despite dedicated funding for this purpose from the African Development Bank and from Germany, lack of funding overall remains a severe constraint.

5.3 THE HEALTH RESPONSE

Context

5.3.1 Part One noted that South Sudan had some of the worst health indicators in the world. “High levels of vulnerability are compounded by multiple factors: conflict and displacement, multiple causes of morbidity, weak or absent health services, poor nutrition, inadequate water supply and sanitation, and the more general effects of poverty”. To this should be added factors like the low levels of vaccination coverage. By way of illustration, only 43 per cent coverage was reported to have been achieved for the crucial PENTA 3 vaccination.¹²¹

The 2018 COAR described how destruction of health facilities and disruption of services had made it impossible to provide continuous basic primary healthcare in many locations, as well as to carry out routine expanded programmes of immunization and vaccination campaigns. In the context of treatment for SAM, the COAR for 2019 reported significant improvement in health system capacity, with the “number of health facility and community service delivery points almost doubling (591 in 2018; 1,145 in 2019) and a significant increase in the number of trained frontline healthcare providers (2,831

¹¹⁹ Correspondence with SSCO WASH section (November 2020).

¹²⁰ Ibid.

¹²¹ Humanitarian Needs Overview 2020.

in 2018; 4,189 in 2019). The health care system nevertheless remains extremely patchy and overstretched. Ultimately this is a function of chronic lack of investment and related capacity deficits in the governmental health systems as much as it is of years of conflict and instability.

5.3.2 For children under five, and particularly infants, the greatest health risks over the evaluation period were posed by malaria, diarrhoea and pneumonia, the main causes of under-five mortality. The 2018 evaluation noted that levels of immunization in South Sudan were still dangerously low despite some recorded progress.

5.3.3 The distinction between ‘emergency’ and ‘development’ interventions is not a clear one in this context. The more useful distinction is between responsive and planned interventions, both of which may be crucial to children’s health in the short term. A key example of this is in the relationship between routine immunization programmes and vaccination campaigns in response to disease outbreaks. The years 2018 and 2019 saw unprecedented levels of measles outbreaks, requiring major targeted vaccination campaigns, but the outbreaks themselves were related to low levels of routine immunization. Compounding the health threats in 2019 was the major outbreak of Ebola in neighbouring Democratic Republic of Congo, for which a major prevention and preparedness campaign was mounted in South Sudan.

5.3.4 Reliable data on child mortality are hard to come by. In 2018, the United Nations inter-agency group for child mortality estimation “decided to hold these estimates constant since the start of the country’s crisis in 2013” given

the scarcity of available data and the challenge of estimating impact due to the protracted conflict.¹²² Maternal mortality rates are among the highest in the world and are reported to have increased between 2014 and 2017 from 789 to 1,150 per 100,000 live births – double the average for sub-Saharan Africa.¹²³

Conclusions and recommendations from Part One

5.3.5 Conclusions on health included the following:

- ▶ Given the low coverage of routine immunization, increasing coverage was a priority. A more regular mobile outreach solution was needed (e.g. the proposed integrated outreach initiative).
- ▶ Only a small proportion of adolescent girls were accessing antenatal care. UNICEF should explore ways to increase this proportion.
- ▶ The delivery of health promotion at community level needed to be expanded. The potential expansion of coverage by the proposed consolidation of community nutrition, health and WASH volunteers would go some way to addressing this.
- ▶ The prevention (as well as treatment) of malaria should be a priority for UNICEF. In particular, UNICEF should explore all available means for increased distribution of treated bed-nets.
- ▶ Acute malnutrition treatment activities should be integrated into the new mobile health outreach initiative in order to increase nutrition coverage.

¹²² 2018 COAR.

¹²³ 2019 COAR.



UNICEF progress to end 2019

5.3.6 Although measles has posed an increasing health threat to children over the evaluation period, UNICEF and others have struggled to maintain vaccination coverage in areas affected by conflict and other humanitarian crises, largely for the context-related reasons outlined above. The results against target figures in Table 6 below show both the extent of the achievement and the challenge. Targets for measles vaccination coverage grew over the period 2016-2018, but while the target was greatly exceeded in 2017, only around half of the 2018 target was achieved. In 2019 the target set was much lower, less than one third of the previous year. While almost double the target was achieved in 2019, the overall picture appears to be one in which vaccination coverage has fallen substantially since 2017 and subsequently levelled off at a time of increasing vulnerability.¹²⁴

5.3.7 In the circumstances, UNICEF and its partners have done well to achieve the levels of measles vaccination that they have, but the challenge remains to achieve sufficient coverage through routine vaccination programmes (coverage of which remains very low) as well as through campaigns in response to outbreaks.

5.3.8 Beyond vaccination and other preventive measures, UNICEF and its partners played a significant role in curative interventions. It slightly exceeded its target in 2019 for curative consultations for children under five, and significantly improved coverage of treatment of children with SAM.¹²⁵ These results were reportedly possible due to the increase noted above in the number of health facility and community service delivery points, together with greater numbers of trained healthcare providers.¹²⁶ In addition to this, 32 integrated rapid response missions reached 318,868 people, including

¹²⁴ This fall is reported to be due in large part to widespread insecurity and looting – especially in Jonglei, Upper Nile and Unity states – and the related loss of both access and of assets (fridges etc.) critical to the EPI programme (communication with SSCO health section staff).

¹²⁵ This rose from 77 per cent in 2018 to 91 per cent in 2019, reaching 237,123 children (123,722 girls) in 2019.

¹²⁶ The COAR also notes that “Prepositioning of nutrition supplies in the dry season provided continuity of life-saving treatment for children with SAM and was critical [given] increased admissions in 2019”.

63,750 children under five, in hard-to-reach areas. During these missions, UNICEF identified and treated acute malnutrition in under-fives with Vitamin A supplementation, administration of de-worming tablets, and malaria testing and treatment.

5.3.9 Overall, Part One found that UNICEF had played a central role in immunization and cold chain provision, as well as maintaining the core pipeline for supplies. With its partners, it

had also played a significant role in preventing the wider spread of cholera in 2017, through targeted WASH interventions and support to oral vaccination campaigns. In 2019, severe flooding caused the displacement of communities and had a major effect on the delivery of health services and the implementation of the project activities. Health facilities were destroyed, essential drugs and supplies including cold chain equipment were submerged in water. Loss, damage and limited access due to insecurity

Table 6

UNICEF health results against targets 2016 to end 2019

Indicators	Year	UNICEF Target	UNICEF Results	UNICEF % Achieved
# of children aged six months to 15 years in conflict areas / humanitarian situations areas vaccinated against measles	2016	1,171,904	609,855	52
	2017	1,232,000	1,812,693	147
	2018	1,514,734	814,890	54
	2019	475,000	919,160	194
# of children under five years, pregnant women and other vulnerable people receiving a long-lasting insecticide treated net (LLITN) (for 2018: number of bed nets distributed)	2016	400,000	235,374	59
	2017	450,000	255,100	57
	2018	250,000	374,845	150
	2019	200,000	186,744	93
# of preventive and curative consultations provided to children under five years at facilities or through community-based care	2016	600,000	557,588	93
	2017	476,250	899,015	189
	2018	700,000	1,161,446	166
	2019	910,000	779,623	86

Source: HAC

has been a persistent theme throughout the evaluation period, and continued insecurity in some areas due to intercommunal clashes (notably in Pibor, Boma and Maiwut counties) has continued to have a major disruptive effect through 2019.¹²⁷ Lack of funds for some interventions (notably malaria prevention) has been a further constraint on the programme.¹²⁸

5.3.10 Although the indicators in Table 6 are concerned with service delivery by UNICEF and its partners, the added value of UNICEF must also be judged in relation to health system strengthening. UNICEF has helped train health workers (e.g. in rapid diagnostic testing of children for malaria) and with WHO it supported the Ministry of Health with Ebola preparedness and operational readiness activities in 2019.¹²⁹ Yet while some modest progress was made in system strengthening, weak human resource capacity at health facility level continues to be one of the biggest challenges in the provision of health services. Absence of qualified midwives, nurses, anaesthetists, and laboratory scientists and the unwillingness of the scarce qualified health workers to work in remote locations at the Ministry of Health-harmonized incentive scale has severely hindered the provision of health services and has resulted in a less than optimum quality of services.¹³⁰ These are structural problems requiring sustained investment as well as political stability.

5.3.11 These human resource deficits are compounded by inadequate referral capacity.

Access challenges have made referrals from primary to higher levels of care (including for obstetric emergencies) very challenging. Lack of ambulances or speed boats have made emergency referrals dependent on the ability of families and communities to get critically ill patients to the nearest primary health centre or hospital, e.g. using canoes or in some cases carrying the patient on their back and walking for hours. Available funds in the UNICEF programmes have not allowed for procurement of vehicles, speedboats and communication systems to support referrals.¹³¹

5.3.12 Ongoing efforts by UNICEF and partners to reduce the levels of adolescent pregnancy (usually related to early marriage) have been accompanied by increased efforts to increase adolescent girls' access to antenatal care. This has included awareness raising through health facilities and community-based forums, as well as recruitment and training of skilled birth attendants, although the latter effort is inevitably affected by the general human resource constraints noted above.

5.3.13 A standardized package of health promotion activities has been rolled out since 2019 through community health workers, hygiene promoters for WASH, community nutrition volunteers and a strengthened integrated community mobilization network for C4D across the country. The ICMN has proved important in addressing new threats like Ebola, measles outbreaks and latterly COVID-19, as well as

¹²⁷ Correspondence with SSCO health section staff.

¹²⁸ UNICEF has most recently worked with the Government to launch (in December 2020) a four-year strategic plan to combat malaria. This will form part of the new country programme starting in 2021, supported in part by the Global Fund.

¹²⁹ This included support to training of rapid response team members, providing isolation and screening facilities, printing and distribution of guidance material, as well as EVD vaccination of targeted health workers. Through partners, UNICEF provided infection prevention and control WASH supplies in 70 of 110 health facilities across EVD high risk locations and reached around 1 million people reached through hygiene promotion and EVD messaging.

¹³⁰ Correspondence with SSCO health section staff.

¹³¹ Ibid.

providing consistent messaging on chronic threats to children's health (notably malaria) and the importance of routine immunization,¹³² bed nets and other preventive measures. Prevention and treatment of acute malnutrition is also integrated into health programmes both at static health facilities and as part of mobile health outreach activities.

5.4 THE NUTRITION RESPONSE

Context

5.4.1 The nutritional situation of children in South Sudan and the UNICEF response was discussed in detail in Part One. While in many ways the situation of children has deteriorated since the time of independence in 2011, the nutritional indicators for children and their mothers appeared to have substantially improved by 2018 – although this was from a very low base indeed. The 2018 COAR reported that, despite increasing levels of food insecurity, the overall situation of acute malnutrition had “improved slightly in 2018, with no county reporting extreme critical levels.” Between 2015 and 2018, UNICEF supported an increase in coverage of quality care for severely malnourished children from 60 to 77 per cent, contributing to reducing prevalence of SAM among children aged 0-59 months from 9.9 per cent in 2010 to 2.3 per cent in 2019.

5.4.2 Over the longer timeframe of 2010 to 2018, the 2019 COAR noted that the food security and nutrition monitoring system (FSNMS) had revealed significantly reduced prevalence

of global acute malnutrition (GAM) among children (from 23 per cent in 2010 to 13 per cent in 2018). The same held for child stunting (from 31 per cent in 2010 to 17 per cent in 2018).¹³³ Despite this relative improvement, the nutritional situation remained critical by the end of 2019 – particularly for children under five and pregnant or breastfeeding women. In 2019, the GAM figure was 11.6 per cent, while SAM was 2.3 per cent).¹³⁴

Conclusions and recommendations from Part One

5.4.3 Reviewing the period from early 2016 to mid-2018, Part One found that UNICEF had risen well to the challenge of providing vital nutrition services in the midst of the ongoing conflict. Where targets were not achieved, this could largely be explained by the outbreak of conflict. The HAC results presented below suggest that UNICEF continued to build on this success and was able to significantly extend the reach of its nutrition services in 2019 compared to the previous year.

5.4.4 Part One did identify some areas for improvement. These included the need for:

- More ambitious target-setting in IYCF programmes.¹³⁵
- An increased effort to prevent moderate cases of malnutrition (MAM cases) becoming acute cases.
- Inclusion of adolescent and school-age children (particularly girls) in nutrition programmes.

¹³² In 2020, the uptake of vaccination services is reported to be improving after declining over recent years of conflict.

¹³³ 2019 COAR.

¹³⁴ Figures from the July 2019 Food Security and Nutrition Monitoring System report.

¹³⁵ This is particularly important with regard to complementary feeding, for which the related indicators are very low (Minimum Acceptable Diet score of less than 5%).

- The development of approaches to address chronic malnutrition.

The evaluation noted that many of these agendas required concerted effort across agencies, particularly between WFP and UNICEF. Collaboration with WFP and the Food and Agricultural Organization (FAO) had been strong and should be built on, for nutrition and resilience more generally. It also suggested that a ‘life cycle’ approach suggested some critical points of nutrition intervention that were currently under-served.

UNICEF progress to end 2019

5.4.5 In 2019, analysis of bottlenecks relating to nutrition interventions reportedly helped to inform a more targeted approach at state level, resulting in substantial improvements to service delivery, according to the 2019 COAR 2019. An ‘evidence-based approach’ to plan-

ning underpinned partnership agreements with 40 CSOs for scaled up delivery of nutrition services, including quarterly assessment and star rating of nutrition facilities – described in the COAR as a “significant innovation” that encouraged continuous quality improvement.

5.4.6 In 2019, coverage of treatment of children with SAM was reported to have significantly improved from 77 per cent in 2018 to 91 per cent in 2019 (based on UNICEF targets), reaching 237,123 children (123,722 girls) in 2019 (COAR 2019). These results were said to be possible due to the number of health facility and community service delivery points almost doubling and a significant increase in the number of trained frontline healthcare providers. According to the 2019 COAR, repositioning of nutrition supplies in the dry season “provided continuity of life-saving treatment for children with SAM and was critical against a background of increased admissions in 2019.”

Table 7

UNICEF health results against targets 2016 to end 2019

Indicators	Year	UNICEF Target	UNICEF Results	UNICEF % Achieved
# of Children aged 6 to 59 months with SAM admitted for treatment	2016	253,605	203,335	80
	2017	207,257	206,993	100
	2018	215,312	206,673	96
	2019	220,700	237,123	107
# of pregnant and lactating women with access to infant / young child feeding (IYCF) counselling for appropriate feeding	2016	567,366	975,330	172
	2017	590,134	1,028,804	174
	2018	1,013,536	950,376	94
	2019	984,700	1,672,942	170

Source: UNICEF HAC and SitReps

5.4.7 Significantly expanded provision of counselling on appropriate IYCF helped to maintain high levels (69 per cent) of exclusive breastfeeding. But the 2019 bottleneck analysis revealed that the quality of counselling services was a key constraint on progress in this area.¹³⁶ This was due to a number of factors including lack of staff capacity, lack of availability of culturally-appropriate counselling and training materials, and lack of proper recording and reporting. Though access improved substantially after the renewal of the peace process in 2018, intercommunal conflicts have reportedly caused the suspension of nutrition services in some pockets of the country.¹³⁷

5.4.8 Work in response to the recommendations in Part One has proceeded, although progress in some areas has been slow (and more recently hampered by the COVID-19 pandemic).¹³⁸ The number of Targeted Supplementary Feeding Programme (TSFP) sites increased in 2019, and progress on this and the number of Outpatient Therapeutic feeding Program (OTP) sites has reportedly been maintained in 2020.¹³⁹ A cadre of 6,221 community nutrition volunteers has been engaged, building on existing community volunteer cadres in various sectors (health, WASH and C4D community mobilizers). However, training and mentoring of those volunteers has been delayed by COVID-19. Similarly, the inclusion of adolescent and school-age children (particularly girls) in nutrition programmes has been hampered in 2020 by the COVID-related closure of schools. One area where informant interviews suggested that more work was needed was in the coordination of UNICEF work in schools with



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¹³⁶ Feedback from SSCO nutrition section.

¹³⁷ Key informant interviews during field visits in for the present evaluation also suggested some gaps in service, e.g. for supplementary feeding of infants 0-6 months in Bentiu PoC (2019).

¹³⁸ The update in this and the following sections is based on feedback from SSCO.

¹³⁹ In 2020, SAM admissions have reportedly fallen by around 20% (January to October).

that of WFP on school feeding programmes. The latter depends heavily on the availability of suitable infrastructure (notably WASH), which as noted above is not always present or properly maintained. Informants suggested that this constituted a constraint on the ability to expand the school feeding programme with all its attendant benefits regarding not just nutrition but school attendance, child protection and otherwise.

5.4.9 With its partners and in collaboration with the Ministry of Health, UNICEF started working on resilience-building and lean season response planning in late 2019 and 2020. This included creation of common programming framework and coordinated (preventive) food security and nutrition assistance to the most vulnerable over the lean season. The overall approach is to “widen the resilience strategy and approaches to shock-sensitive social protection”¹⁴⁰, with a focus on behaviours and targeted local support, including regular needs monitoring to avoid the need for negative coping strategies.

In addition to working with the Ministry of Health, WFP, FAO, WHO and CSOs (national and international), UNICEF is building strategic partnerships with the United Nations De-

velopment Programme (UNDP) around resilience-building and the United Nations Office for Project Services (UNOPS) on cash for work and non-conditional cash incentives. Both of these partnerships are designed to help families cope better during periods food shortage.

5.4.10 In 2018 and 2019, UNICEF led a national nutrition assessment – the first for two consecutive years since 2010. As noted above, this assessment indicated a significant reduction in levels of stunting and acute malnutrition, as well as improvements in IYCF and Vitamin A coverage. UNICEF supported data quality improvements of the nutrition component of the FSNMS, which enabled the monitoring of trends in nutrition indicators at national and state level. UNICEF also contributed to development of a multisectoral nutrition strategic plan, 2022-2030 and implementation roadmap, which was endorsed by the Ministry of Health. The nutrition cluster has been leading the exercise of integrating nutrition into the health system. The development of framework of integration was one of key activities of the annual work plan of the nutrition cluster. However, this exercise has been constrained due to shortage of funding and other competing priorities, including responding to COVID-19.

¹⁴⁰ UNICEF, South Sudan resilience-building and lean season response planning, 2019–2021. Juba.

6

CROSS-CUTTING ISSUES



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6.1 'CENTRALITY OF PROTECTION' AND PROTECTION MAINSTREAMING

6.1.1 In this section we consider the extent to which UNICEF has successfully integrated wider protection concerns into its overall programme in South Sudan. Some aspects of this agenda were included in the sectoral analysis in Part One of the evaluation. Here we focus more on the question of whether and how UNICEF work (programme and advocacy) is informed by a wider protection and security perspective.

Background and definition

6.1.2 The centrality of protection agenda is one to which the IASC principals (including the Executive Director of UNICEF) have explicitly committed themselves.¹⁴¹ It also constitutes the

second of three objectives in the South Sudan Humanitarian Response Plans for 2017, 2018 and 2019. Thus, the 2017 plan "recognizes that South Sudan is first and foremost a protection crisis and underscores the centrality of protection of civilians to the response". For UNICEF, as a member of the South Sudan HCT, this implies obligations that go beyond its mandated child protection role and extend to its wider humanitarian role.

This extract from the 2019 HRP sums up the joint commitment:

“ Through specialized and joint, integrated services, all humanitarian actors will advocate for and respond to the protection needs of conflict-affected people with due regard to international norms and standards and reduce the protection risks faced by most vulnerable groups, including women at risk.

”



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¹⁴¹ Inter-Agency Standing Committee, 'The Centrality of Protection in Humanitarian Action', statement by the IASC Principals, 17 December 2013, IASC, Geneva. The UNICEF understanding of the centrality of protection principle is now articulated in the new (2020) version of the CCCs in comprehensive terms: "Protection is the purpose and intended outcome of humanitarian action and must be central to preparedness efforts, as part of immediate and life-saving activities, and throughout the duration of humanitarian response and beyond. UNICEF commits to design and implement a humanitarian response that helps keep people with vulnerabilities from harm, protect them from violence, coercion and abuse, reduce the threats they face, minimize their exposure to these and increase their capacity to cope. The protection of all persons affected and at risk is central to UNICEF decision making and response, including UNICEF engagement with states and non-state parties to conflict".

Box 6**Mainstreaming protection: Four key elements**

Protection mainstreaming is the process of incorporating protection principles and promoting meaningful access, safety and dignity in humanitarian aid. **The following elements must be taken into account in all humanitarian activities:**

- 1. Prioritize safety and dignity, and avoid causing harm:** Prevent and minimize as much as possible any unintended negative effects of your intervention which can increase people's vulnerability to both physical and psychosocial risks.
- 2. Meaningful access:** Arrange for people's access to assistance and services – in proportion to need and without any barriers (e.g. discrimination). Pay special attention to individuals and groups who may be particularly vulnerable or have difficulty accessing assistance and services.
- 3. Accountability:** Set up appropriate mechanisms through which affected populations can measure the adequacy of interventions, and address concerns and complaints.
- 4. Participation and empowerment:** Support the development of self-protection capacities and assist people to claim their rights, including – not exclusively – the rights to shelter, food, water and sanitation, health, and education.

6.1.3 While the evaluators were informed that UNICEF SSCO had a centrality of protection strategy,¹⁴² this was not made available and did not appear to have been implemented in practice. Awareness on this topic was found to be low among UNICEF staff, for whom protection appeared to be essentially defined by the child protection agenda. As noted in Section 4, however, mainstreaming of child protection throughout the programme was also weak (particularly in health, WASH and nutrition), suggesting a more general limitation in UNICEF application in practice of the concept of protection across its whole programme.

6.1.4 Of the four elements of protection mainstreaming identified by the global protection cluster (Box 6 above), the first two relate most

directly to the ways in which UNICEF designs and delivers its services, while the second two relate more to people's ability to claim their rights. The 'participation and empowerment' concept in particular is one which is fundamental to creating genuine local ownership, as well as to fostering accountability. This concept extends beyond 'protection' as it is traditionally conceived and is an agenda to which UNICEF and other United Nations agencies have given increasing attention over the latter part of the evaluation period.

6.1.5 Although elements of the first ('do no harm') principle were found in much of the UNICEF programme in South Sudan (see Part One evaluation), this was found to be inconsistent and patchy. **The evaluators conclude that**

¹⁴² UNICEF KII, Juba.

UNICEF could do more to ensure that families can access the services it provides through its partners in safety and dignity, and that a safety audit should be part of both the design and monitoring processes for the relevant services.¹⁴³ Over the evaluation period, the SSCO increased its attention to the question of access, and brought in a specialist in this area to complement work done by OCHA, WFP and others. This was a valuable initiative, and important for UNICEF to engage fully in coordinated action on access. The access specialist is reported to have played an integral role within the OCHA-led access working group and helped shape much of the United Nations access strategy.¹⁴⁴ It was less clear to the evaluators how this work fed into the design and implementation of the UNICEF programme.

6.1.6 Most fundamentally, the UNICEF approach does not appear to be consistently grounded in an analysis of the wider security context – and of people’s response to that context. Much of the threat analysis of UNICEF and of the wider United Nations system (e.g. as articulated in the HRP)s) is based on the IPC system of ‘phase classification’, highlighting threats to people’s ability to secure basic needs (food, health, etc.). While the IPC framework is essential to capturing shifts in the overall humanitarian situation and informing the prioritization of responses, it does not in itself explain the causal factors determining why a given area might be in (say) IPC Phase 4 or 5. In the context of South Sudan over the evaluation

period, this is more likely attributable to the direct and indirect effects (including economic impacts) of local conflict and people’s response to it than it is to climatic factors.

In particular, the IPC classification does not capture the factors driving people’s behaviour: why, for example, they may choose to leave home and abandon their fields, or choose to return to their home areas from the relative safety of IDP camps. This is often about families weighing risks, and in particular about weighing (perceptions of) security and related safety fears against the desire to return to normality while ensuring they can meet basic needs, pursue livelihoods, access services, including schooling for children.¹⁴⁵ To concerns about physical security must be added the economic pressure caused by the loss of livelihoods, land and property, and the wider context of price inflation and national economic decline.

6.1.7 During the evaluation period, UNICEF commissioned a survey to assess perceptions of risk and challenges in accessing services.¹⁴⁶ As far as the evaluators could determine, this was a one-off assessment, and again it is not clear how it helped inform the programme response. More regular review of these risk perception factors, through KAP surveys or otherwise, could provide a more geographically nuanced and time-sensitive picture.¹⁴⁷ From the surveys that have been conducted (e.g. in Juba PoC), one of the factors emerging concerning return of displaced people was that people’s

¹⁴³ Building on the work on PSEA already being undertaken and on earlier GBV safety audit work. The ‘safety perceptions’ study conducted by Forcier Consulting for UNICEF in 2017 provides a useful benchmark in this regard (Safety Perceptions Assessment: UNICEF-supported interventions in selected communities in South Sudan, June 2018).

¹⁴⁴ Feedback from SSCO on first draft report.

¹⁴⁵ Perception studies and multiple KIIs from field visits and with agencies (UN and NGO) in Juba.

¹⁴⁶ See for example Forcier, Safety Perceptions Assessment.

¹⁴⁷ In this context, it should be noted that UNICEF uses a variety of means to gauge people’s perceptions, not just its own KAP surveys, and that programme strategy is informed by “baseline, mid-line and end-line studies which supports planning, course correction and evaluation” (communication with SSCO).

fears were exacerbated by the lack of available information about the security situation in home areas. The 2018 perceptions study also suggested that disabled people and children were the groups facing most difficulty in accessing services.

6.1.8 The result of the above is that while data on nutrition and food security are relatively strong, **information about safety (security incidents and perceptions), social cohesion and factors like ethnic partitioning, is less consistently gathered**, and the particular implications of these factors for UNICEF programming are less systematically considered. For example, incidents reported as ‘cattle raiding’ often appear on further investigation to be more complex and to involve particular threats to children. A number of respondents to the evaluation suggested that UNICEF was not as responsive to such incidents as it should be, either through the MRM or the regular programme.¹⁴⁸

One example given by a respondent to the evaluation concerned a CFS in Pochalla (in Jonglei), where children of ten years and above ‘all appeared to have guns’. The children in question were required to leave their guns at the door of the CFS, but the issue was not otherwise taken up by UNICEF, being reportedly explained away as “being to do with cattle raiding”. The evaluators could not confirm the accuracy of this particular account, but this and other examples point to a potentially dangerous normalization of a type of situation that should immediately have been investigated and actioned further.

6.1.9 The evaluators were not able to review in detail UNICEF advocacy on child protection

issues, nor to evaluate the functioning of the MRM. However, **a number of external informants suggested that UNICEF should be more consistent in raising child protection issues directly at the highest level**,¹⁴⁹ rather than relying on their being reported up through the protection cluster led by the United Nations High Commissioner for Refugees (UNHCR), which reportedly tends to be dominated by displacement issues. UNICEF should remember that delivering its own programme forms only a part of its responsibilities, and that its mandate as the leading international agency for children means that it has a responsibility to speak consistently on child rights, and in particular to highlight major threats to children’s security and welfare. This responsibility extends beyond the MRM, and UNICEF has a unique role to play here.

6.1.10 Child protection and gender-based violence – both of which are thought to be dramatically under-reported – have their own dynamics, including cultural factors, that can only be properly understood in the wider protection context. All elements of UNICEF programming need to be informed by this wider understanding, pointing to the need for assessment and ongoing monitoring of the protection context in each location in collaboration with other actors. While work by UNHCR, IOM and OCHA on this agenda is of great relevance, UNICEF needs to find ways to consistently monitor the protection situation from the perspective of children and their families, and to report and act consistently on critical incidents involving children. It should use this wider analysis to inform both its advocacy and its programming, including its work on access.

¹⁴⁸ External informant interviews in Juba and field locations.

¹⁴⁹ Ibid.

6.2 UNICEF PARTNERSHIPS IN SOUTH SUDAN

6.2.1 UNICEF has worked with government institutions, United Nations agencies, NGOs and CSOs in the delivery of its programme in South Sudan. The relative lack of capacity in government social systems and institutions noted in earlier sections – coupled with limited government reach in areas that turned from ‘green’ to ‘red’ after 2016 – has led to the need for a high degree of involvement by civil society in the social sectors. For the service delivery component of its work in particular – **and so for the bulk of the ‘emergency’ element of its programme – UNICEF has relied on implementation partnerships with NGOs**, local, national and international. There has been heavy reliance on local CSO and national NGO partnerships, partly because international NGOs have often had limited ability and access to work in South Sudan, and partly through a desire to pursue a ‘localisation’ agenda.¹⁵⁰ This has raised a number of issues that we explore here.

‘Implementing’ partnerships

6.2.2 The relationship between UNICEF and its partners is multifaceted, but for many of the NGO partners it has been predominantly a financial relationship. This is partly a matter of perception: many of the South Sudanese NGO partners interviewed said that UNICEF was their ‘donor’ rather than their partner.¹⁵¹ But it reflects the reality that **for many of the local and national NGOs, the bulk of their funding (for some, 100 per cent of their funding) has**



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come to them through UNICEF. At the core of that relationship for most has been a contract (the PCA), based on the delivery of agreed services in line with related programme documents. Partners are accountable to UNICEF for delivery against commitments under those agreements, including defined reporting requirements. Partners are vetted for their ability to comply with HACT, prevention of sexual exploitation and abuse and other UNICEF requirements, something that can be very onerous for smaller NGOs and CSOs.¹⁵² This issue is not unique to South Sudan.

The great majority of UNICEF service delivery work is implemented by and through its partners. Given this reality, the question for the evaluation is partly how well UNICEF has performed the contract management aspects of its partnerships, including the efficiency of the contracting process, and the related supply,

¹⁵⁰ The balance of UNICEF partnership work over the evaluation period has been roughly 50:50 between national and international NGOs. A higher number of national partnerships is balanced by the higher value of INGO contracts.

¹⁵¹ Interviews with NGOs in Juba and field locations. One informant from a major national NGO partner commented that “the reality is that UNICEF is the donor and we are the implementer”.

¹⁵² The importance of due diligence in the selection of partners should be acknowledged here, particularly in the highly conflict-affected and politicized environment in which CSOs operate and of which they form part.

quality control and monitoring functions. Beyond that lie questions about the organization's wider value and performance as a partner and aid intermediary, and about the nature, value and sustainability of the partnerships in question.¹⁵³

6.2.3 Although the funding and contractual aspect of the partnership relationship with NGOs has tended to dominate, the **UNICEF role in providing technical support, guidance and capacity-building** to partners is a major component of the relationship (particularly for the smaller and less experienced NGOs) and one that is **widely appreciated**.¹⁵⁴ This is the clearest aspect of the organization's 'added value' as a partner beyond its financial support role. Indeed, one of the main requests from partners is for greater support to and mentoring of local CSOs.¹⁵⁵ This has both short- and potential longer-term benefits in terms of building CSO capacity. The evaluation found that the bureaucracy entailed in the PCA process ties up specialist staff whose time might be better spent in providing technical support, quality control and implementation support to partners (see further below).

6.2.4 As noted in earlier sections, although partners have been involved to some extent in **strategy formulation**, this was felt by many respondents to be an essentially top-down process, depending to some extent on the particular UNICEF section involved.¹⁵⁶ In general, NGO partners have followed an agenda set by UNICEF, although the implementation of that

agenda has been a matter of sometimes protracted negotiation. This might be seen as an inevitable consequence of the requirement for UNICEF to fulfil its mandate and to comply with specific organizational policies and commitments, including the CCCs, but while partners understood this, some felt that the application of these commitments to the context could have been better contextualized through more strategic dialogue.¹⁵⁷ Some of the larger NGOs reported an improvement over time in their engagement with UNICEF in this regard, particularly in respect of joint forward planning, but some also felt there was much more scope for genuine mutuality in this area.

6.2.5 The tension between the perception of UNICEF as a 'donor' and as a 'partner' is sometimes exacerbated by the organization's promotion and marketing of its own role. As noted above, this is linked to the way in which UNICEF acknowledges – or fails to acknowledge – the role of its partners. "It's demoralizing that UNICEF just takes credit" said one respondent to the evaluation.¹⁵⁸ Some expressed the view that donors were under the impression that UNICEF did direct implementation "and were shocked to find that it does not." The evaluators saw enough evidence through its field visits and interviews to confirm the validity of these concerns. **Failure to properly acknowledge the central role of partners, and the joint ownership of the related programme, is corrosive of the sense of genuine partnership and risks undermining attempts at localization** and the building of a sense of local ownership. UNICEF

¹⁵³ While we limit our discussion here to the South Sudan context, these are organization-wide concerns.

¹⁵⁴ Interviews with partners in Juba and field locations; responses to online partner survey for the evaluation.

¹⁵⁵ Ibid.

¹⁵⁶ This perception is shared by some of the UNICEF staff interviewed in field offices, who were frustrated that after agreeing joint approaches through consultation with partners, these were overridden in Juba.

¹⁵⁷ Ibid.

¹⁵⁸ At least one respondent felt that WFP and UNHCR were better at acknowledging the role of their partners.

needs to be particularly careful in its external communications to fully acknowledge the role of its partners, and it needs itself to recognize that **its own role is essentially an enabling rather than a direct implementation one.**¹⁵⁹

6.2.6 More than any other issue, the **contracting and partnership agreement process** was raised as a concern by those consulted for this evaluation.¹⁶⁰ For the most part, the issues raised related to the time taken to negotiate a new or revised PCA, and the gaps between PCAs that left smaller CSOs in particular financially vulnerable and sometimes struggling to meet staff and other costs, sometimes over several months. Some of the comments to the evaluators from UNICEF partners illustrate the concerns: "Delays in payment can last 6-9 months. This is drastic, particularly for smaller NGOs... and the 7 per cent support costs have been withdrawn". "We don't have the same problem with UNHCR, WFP, or UNDP" "We have a very positive relationship with UNICEF technical staff, but the relationship gets soured by the expectation that we will do things at own cost during gaps in funding."

6.2.7 The partner contracting process appears to be an enduring problem for UNICEF. While the larger NGOs (particularly the INGOs) are generally able to 'weather' the extended process involved, smaller NGOs and CSOs have much less capacity to do so. The evaluators conclude that **UNICEF needs both to streamline its partnership agreement process**

and to take a different approach to risk management. Rather than try to micro-design the programme in advance and to try to manage implementation and accountability risks up front, UNICEF should invest more in the downstream processes of support, quality control and oversight. Timely production of (imperfect) PCAs and then proper monitoring of their implementation is likely to produce better results than the current highly extended PCA negotiation process, with all of its attendant opportunity costs.¹⁶¹ To this end, UNICEF should free up time of technical specialists who currently spend a large proportion of their time in drafting and reviewing contract and programme documents. Some of the related process inefficiency appears to lie in the dual processes of field-level and Juba-level negotiation. Although this is not an area that the evaluation was able to review in detail, it demands further consideration if UNICEF is to build on and strengthen its current partnership portfolio.

6.2.8 With regard to other aspects of contact management and support, the **supply function** is another key area of UNICEF added value, and one that is greatly valued by partners. However, problems with supply were raised by a number of NGO partners, national and international. While the supply process had worked relatively better for education – allowing for challenges posed by contextual factors – it was raised by partners as a persistent problem. One major national NGO partner noted that supplies were "always late, especially for more remote lo-

¹⁵⁹ Space forbids further discussion of this topic, but UNICEF should reflect on its own guiding principles for civil society partnerships and consider the danger that its relationship with its partners becomes one of principal-agent, or indeed of patron-client. While the disparity of size and power may place some inevitable limits on the equity and mutuality of partnerships, the demands of urgent service delivery should not be allowed to frustrate the goal of local ownership and sustainability.

¹⁶⁰ External informant interviews in Juba and field locations, conducted between November 2018 and March 2019. Some of these same concerns were noted in Part One of the evaluation.

¹⁶¹ In common with many large organisations, UNICEF is not always good at reckoning the effects of delayed or extended process – which tend to be largely 'invisible' costs. Yet as argued here, those delays can be highly damaging both with regard to outcomes for children and with regard to the local organisations that serve them.

cations." An international NGO partner agreed, saying "we end up paying for our own logistics, we have to fundraise separately to airlift the UNICEF supplies. National NGOs probably don't have that luxury, so things stay in Juba." Such problems were particularly acute in 2017 and early 2018, with the supply picture appearing to improve through to 2019.

Other partnerships

6.2.9 With the descent into conflict in 2016, areas where UNICEF had formerly been able to work in partnership with government fell under the control of opposition forces, demanding a switch of focus in those areas towards more direct implementation, largely through CSO partners. With the advent of the renewed peace process in 2018, UNICEF made increasing efforts to help regenerate a sense of local engagement with and shared ownership of its programme. This applies not just to the CSOs discussed above but crucially to **local government** bodies. This 'localization' approach is an essential part of attempts both to ensure the sustainability of the related programme elements and to build political accountability for ensuring children's security and well-being (as discussed in Part One). However, as with CSOs, the lack of local government capacity and resources – and varying degrees of political and institutional commitment – present a major challenge to this strategy. The evaluation was not able to consider this issue in detail, but it notes that UNICEF is much better placed than most international agencies to build partnerships with local authorities, and indeed to help foster collaboration between those authorities and local CSOs. Despite the challenges involved, this should remain a central part of the UNICEF approach.

6.2.10 At the **central (ministry) level**, collaboration with the Ministry of General Education and Instruction was reported by both parties to be strong and constructive. As with the other social sectors, the ministry has been under-resourced and therefore has been particularly reliant on internationally-funded programmes and on UNICEF and other partners to supplement its work and extend its effective reach in contested areas of the country. The partnership with the Ministry of Gender, Child and Social Welfare – the main government body responsible for child protection and welfare – has been less obviously effective, in large part because the ministry itself is severely under-resourced and because the child protection agenda has not been consistently prioritized by the Government.

6.2.11 UNICEF has had a range of more broadly defined partnerships and joint programmes with **other United Nations agencies**. Interviews conducted for the evaluation suggest that these partnerships have generally worked well, although in almost all cases there is scope for greater collaboration – particularly on the resilience agenda and approaches like multi-purpose cash distribution. Probably the most significant of these partnerships has been with WFP. Here, the direct collaboration on IRRMs was felt to have been excellent and has considerably extended the reach of both agencies.¹⁶² Some other areas of work still required stronger joint efforts, notably in relation to school feeding and WASH in schools. WFP informants noted that the areas that had worked best were those conceived as a jointly delivered package between UNICEF and WFP – as with the joint European Union-funded education in emergencies programme. Different targeting criteria between the two agencies was noted as one barrier to closer collaboration.¹⁶³

¹⁶² External KII, Juba.

¹⁶³ Ibid.



Among other agencies interviewed, FAO also noted the need for more joint programming on resilience and for closer collaboration with UNICEF on nutrition education and specifically education for pastoralist children, stressing its significance for the peace process.

Conclusion

6.2.12 UNICEF has done well to build a portfolio of civil society partnerships to enable its emergency programme to cover both conflict-affected and more stable areas over time. It has found a pragmatic balance between international, national and local implementing partnerships alongside ongoing partnerships with government and United Nations bodies. Although the quality of services has been variable (as discussed in previous sections of this report), this approach has substantially paid off in terms of programme delivery and to a lesser extent in terms of building local and national capacity. However, given the high level of dependency of smaller agencies on UNICEF financial and technical support, and the vola-

tility of funding flows to South Sudan, this is also a very fragile set of arrangements. Gaps or delays in funding such as occurred in 2019, as well impacting vital services for children, are potentially disastrous for smaller CSOs. Staff and technical know-how are lost, and the loss of local capacity makes sustainability and local ownership harder to achieve.

6.2.13 The challenge for UNICEF in the medium term is to assist the transition to a more resilient and sustainable set of national and local institutions for children (government and CSO), including more predictable and reliable funding and technical support. In the short term, meeting ongoing acute needs requires continued direct support and oversight – and securing the necessary programme funding, preferably on a multi-annual basis. The latter in turn depends in part on donor confidence in the partnership arrangements with both government and CSOs to deliver vital services effectively and accountably. But it also depends on advocacy with the donors about the consequences of lack of funding, both for the immediate well-being and security of children, and for the viability of the local and national institutions on which they are likely to depend in the future.

6.3 THE GENERATION AND USE OF CHILD-RELATED DATA AND EVIDENCE

6.3.1 Part One of the evaluation highlighted the scarcity of data on some key aspects of the 'child survival' sectors (WASH, health, nutrition). Some of this concerned a lack of reliable and up-to-date contextual data, for example on people's access to improved water sources, but in some cases, it also concerned gaps or uncertainties in the programme-related data. As noted in Section 5, this remains an area of

concern for the child survival sectors, and the availability both of reliable contextual and programme-related data is also a matter of concern in the CP and education sectors that are the focus of the present evaluation. In this section we consider some of the challenges involved, as well as questions about the management and utilization of data by UNICEF.

6.3.2 Given the general lack of updated contextual data for South Sudan, the scope for monitoring progress at outcome level has been very limited. The last national household survey was done in 2010 and an update of the situation of women and children done in 2017/2018. Population data were last collected in the 2008 census and the country has been using population projections since. Gender-disaggregated data for most programmes are either not available or are not consistently generated, and the lack of availability of outcome-level data has been a problem for most elements of the UNICEF programme. With the gender-based violence programme for example, data are available concerning the population reached with prevention and response services, but they are not sufficient to draw conclusions on the impact of the programme on the incidence of gender-based violence, nor to shed light on trends for issues like domestic violence.

6.3.3 Gaps in the available information have limited the evaluability of the child protection elements of the programme in particular. Only limited data from the MRM process were available to the evaluators, but even data for CAAFAG were incomplete in the HACs for 2017-

2019. For data reported through the RAM there were no target figures, making it hard to make inter-year comparisons or to draw substantive conclusions about results. At the child protection sub-cluster level, data are reportedly analysed and shared with partners, at least for accessible areas, but the information available (dating back to 2016) on the sub-cluster website is not updated.¹⁶⁴ Besides assessments conducted by NGOs, it was not clear to the evaluators whether there was an annual assessment process led by the sub-cluster to feed into the HNO.

6.3.4 The data situation is better in the education sector. Enrolment and access data are collected regularly through UNICEF partners. There is also an annual education census and update of education management information systems data, while programmes like BTL and the Girls' Education South Sudan programme (GESS) also provide interim updates on the overall education situation. **Gaps remain, however, particularly with regard to data on education outcomes for girls and boys**, for which the latest available information dates back to national educational assessments in 2016/2017.¹⁶⁵ There are also gaps in the enrolment data for secondary education. The education cluster has a website with reasonably up-to-date information on various aspects of the education cluster's work, including updates of education-related data.¹⁶⁶ An annual education needs assessment feeds into the HNO, and this is supplemented by NGO assessments on specific aspects of education in emergencies.

¹⁶⁴ <https://www.humanitarianresponse.info/en/operations/south-sudan/child-protection>

¹⁶⁵ UNICEF & MoGEI Assessment of Early Grade Learners in Literacy and Numeracy in South Sudan- Assessments 1 (2017) and 2 (2018) Final Reports

¹⁶⁶ <https://www.humanitarianresponse.info/en/operations/south-sudan/education>

UNICEF target-setting and choice of indicators

6.3.5 Target-setting and outcome monitoring are areas of some concern for the programme as a whole, with questions arising about the rationale for (and realism of) targets set and the focus on reporting outputs (typically ‘numbers reached’ with a given service) with little reference to actual outcomes. The child protection programme is of particular concern in this regard, compounded by the data gaps noted above. Moreover, UNICEF CP-related programme data were found to be quite radically inconsistent between sources (HAC and RAM) and between years (indicators and targets). No satisfactory explanation for these inconsistencies could be provided to the evaluators. **This is an area that demands remedial action, since it has a significant bearing on the organization’s ability to manage and account properly for its work in this area.** This should include strengthening the data quality assurance process in the SSCO.

6.3.6 With regard to technical capacity development of partners working on child protection, the indicator for the relevant outputs (“quality technical support to CP programme delivery”) does not adequately reflect the content of the capacity development work, which includes provision of guidelines, training, coaching and other elements. More importantly, since it is entirely output-based, it does not provide a basis to gauge the effect of these interventions.

For its education in emergencies work, the education section has (since 2018) harmonized its use of indicators with that of the education clus-

ter for its reporting, thereby avoiding the confusion created by the use of different indicators. But here the evaluators felt that UNICEF should have some indicators relating specifically to its own performance, e.g. in its role as cluster lead agency (for example, ensuring a functional and regularly updated cluster website).

Programme monitoring and reporting

6.3.7 The primary source for programme-related data is UNICEF implementing partners,¹⁶⁷ via the PCA monitoring and reporting process. Despite capacity-building in this area, **local partner capacity to monitor and report accurately and in a timely way time is said to have remained limited.**¹⁶⁸ With the recent emphasis on ‘localization’ and engagement of more national NGOs, capacity constraints in this area have become both more apparent and more significant. While some improvements in local partner reporting (especially in child protection) were observed over the evaluation period,¹⁶⁹ timely reporting is still a problem and questions remain about the accuracy of the data reported (see below).

6.3.8 Through field monitoring visits, UNICEF staff follow-up on PCA implementation and quality assurance. The education section appears to have a well joined-up approach to monitoring. Its field monitoring plan incorporates a HACT quality assurance process and is based on a standard field monitoring checklist/programme visit report that allows the staff to collect standardized data. Action points arising from these field visits are discussed on a weekly basis and the action tracker is shared with the field offices for follow-up and implementation.

¹⁶⁷ UNICEF has 131 CSO partners and of these 44% are national NGOs receiving 28% of UNICEF funding (2018 COAR).

¹⁶⁸ KII UNICEF SSCO staff, Juba.

¹⁶⁹ Field visits and KIIs.

Reported results help determine the length of the PCA and the periodicity of reporting.

Programme data: Coverage, reliability

6.3.9 A number of questions were raised by UNICEF staff during the evaluation about the reliability and accuracy of the results reported by partners. Security and other challenges have meant that oversight work and monitoring by UNICEF staff has often been frustrated. The result is a relatively low level of confidence in

the data received. Some of the questions concern the completeness of the data reported: for example, where data have been reported for the sub-national or state level, the evaluation found that numbers reported on 'reach' did not always represent coverage data for the whole state or county.

6.3.10 To help fill programme performance and context-related data gaps, the social policy, planning and monitoring and evaluation (SPPME) section launched a sentinel moni-



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¹⁷⁰ KII Juba. Other important tools being used to improve the quality of contextual data include Lot Quality Assurance Sampling (LQAS) for health service performance and outcomes; satellite imagery to help make population estimates, and infrastructure mapping and similar techniques for sector-specific research activities.

toring system in 2019 using selected schools and health facilities to routinely collect data on women and children, and to build a picture of trends and disparities over time to support programme implementation.¹⁷⁰ SPPME also undertook an office-wide data mapping exercise in 2018. A centralized database was established in 2019 to serve as a repository for results data, disaggregated by field location and including monthly reporting against the relevant indicators. It was unclear to the evaluators to what extent the database had been used in practice for programme management purposes.

More generally, steps were taken from 2018 to strengthen the monitoring and evaluation (M&E) function both at Juba and field office levels. For example, an M&E specialist for the CP section was recruited in 2019, and the education section also has its own M&E capacity. This represents an important advance, although the evaluation was not able to judge the effects of specific measures taken.

Information management and the use of data

6.3.11 UNICEF has considerably strengthened both its own information management capacity and that of the relevant clusters. The education and CP Sections have their own information management officers (IMOs), as well as providing IMOs for the education cluster and (from 2018) the CP sub-cluster. At Juba level, between 2016-2018, the arrangement was such that the information management officer for the sub-cluster would split his time 50/50 with the UNICEF CP section to provide M&E support, but this was found to be insufficient.

6.3.12 Within the education section, there is an M&E team that has since 2018 developed a monitoring network to enable data collation and sharing between the partners, field offices and the M&E team in Juba. Quality assurance and consolidation of all the data is done by the M&E team within the section. The information collected through these dashboards is reported to be useful for donor reporting, feedback discussion with partners and addressing the strategic monitoring questions. Implementing partner monitoring also done through one of the M&E dashboards involves tracking of all indicators from the project documents. This system is reported to have worked well and to have allowed the section to monitor and follow-up issues relating to programme implementation.

Utilization of data

6.3.13 While UNICEF collects a lot of data, especially related to programme outputs, it is not clear how much of that evidence is used, particularly in informing real-time emergency responses and to influence ongoing programming. The IRRM mechanism has been useful in extending assessments and monitoring some of these remote locations and also providing a glimpse on what more can be done in terms of response to these hard to reach populations. However, it is unclear how systematically the resulting data have been collated and used.

7

CONCLUSIONS AND RECOMMENDATIONS



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7.1 OVERALL CONCLUSIONS ON THE UNICEF RESPONSE, 2016-2019

7.1.1 UNICEF has faced **major strategic challenges** in South Sudan. On the one hand, the protracted and multi-faceted crisis of the past few years has created acute vulnerabilities and support needs for millions of children. On the other hand, the national and local governmental institutions and systems that would normally be expected to address those needs and to protect children have been (largely) weak or absent, and civil society has had only very limited capacity to provide services. As a result, direct support to large-scale emergency service delivery – mainly through NGO partners – has constituted a clear strategic priority for UNICEF. But the system-strengthening and capacity-building agenda that is the necessary complement to direct service delivery has only fragile foundations to build on, both in terms of governmental systems and civil society capacity. Donor support to this agenda, and particularly to government system strengthening, has been constrained by lack of trust and scepticism about political will and the potential for progress.

Underlying all of this has been the **fundamentally insecure and unstable environment** resulting from conflict, political instability and economic breakdown that has severely affected the physical, social and economic security of millions of children and their families. That instability has also affected the institutions on which families rely, including the school system, a situation now compounded by the COVID-19 epidemic control measures. And it has created an extremely challenging operating environment for agencies seeking to support essential services.

7.1.2 While this evaluation focuses on the period up to the end of 2019, **the year 2020 has seen major developments**. The political settlement and uneasy peace that accompanies it has allowed greater access for service delivery but has not resolved many of the underlying causes of instability. Local insecurity and conflict remain a reality for many. In system terms, these factors and continued lack of investment in the social sectors have meant ongoing major deficits in essential services for children. The COVID-19 pandemic and related control measures have had a significant impact in some areas, notably through the closure of schools, and education progress made up to 2019 is in danger of being reversed. Yet for most South Sudanese, COVID it is just one among many factors with which they have to contend. The need for emergency services remains high and the resilience agenda remains a vital one.

7.1.3 **The overall UNICEF response to immediate priority needs for children** – the main focus of this evaluation – **has been both appropriate and largely effective** over the evaluation period. The evaluation found that UNICEF and its partners had been able to deliver essential services to a substantial proportion of the population in greatest need, within the constraints of the insecure context, limited access and significant funding deficits (particularly in 2019). The organization deserves great credit for its efforts in this regard, which have often been crucial to the well-being and life chances of those it has reached. This has been true in the sectors that were the main focus of this evaluation – education and child protection – as well as in the ‘child survival’ sectors of WASH, health and nutrition. **It must however be recognized that a high proportion of children in need of emergency assistance (well over 50 per cent in most sectors) have remained without support.**

Although UNICEF has done its best to target areas and groups of children with the highest priority needs, this has not always been possible in the prevailing context and with the resources available.

7.1.4 Any evaluation of UNICEF work in this context has to recognize the **dual challenge** noted above: the need to address the immediate and acute needs of millions of children while helping to build the systems and capacities required to do so on a sustainable basis. That challenge exists both within and beyond the humanitarian agenda. In the medium and longer term, the added value of UNICEF must be judged in terms of its support to building effective and resilient systems, institutions and capacities for children as much as in terms of enabling quality service delivery. Yet doing so presents an immense strategic and programmatic challenge for UNICEF and its partners, and one which (largely for reasons beyond its control) it has to date been able to address only to a limited extent. Specifically, UNICEF efforts at system strengthening and capacity-building have been challenged by the structural capacity deficits noted above, themselves in many ways a result of chronic under-investment.

7.1.5 Over the latter part of the evaluation period, as the peace process has evolved, there has been a noticeable change of emphasis by UNICEF, a broadening of the strategy from predominantly **responsive to more preventive (resilience) approaches**. The joint 2019-2023 UNICEF-WFP multi-sectoral resilience programme illustrates this evolution. This has been accompanied by **greater planning for transition from humanitarian to more sustainable developmental approaches**. The protracted nature of the crisis – and the prospects for enduring

peace and stability – demands such an evolution, yet it remains unclear what the end point of the transition may be. It sometimes seems that UNICEF and others are trying to build bridges across a river whose far bank they cannot yet see, and to construct solid foundations on a bed of shifting sand.

7.1.6 Delivering its own programme has been the dominant feature of UNICEF work in South Sudan over the evaluation period. Its role as an **advocate for children** has been less prominent. UNICEF should remember that delivering its own programme forms only a part of its responsibilities, and that its mandate as the leading international agency for children means that it has a responsibility to speak consistently on child rights, and in particular to highlight major threats to children's security and welfare. This responsibility extends beyond the MRM and the CAAFAG agenda, where UNICEF has demonstrated the power of advocacy. Responding to the formidable challenges of implementing its own programme has meant that UNICEF may at times have lost sight of the bigger picture concerning children – or has at least not been as vocal about the vulnerabilities and service deficits as might be expected. While funding of the UNICEF programme is clearly an important advocacy goal, more consistent communication and advocacy beyond that agenda is needed.

7.1.7 On the application of the '**centrality of protection' principle** and the mainstreaming of protection concerns throughout its programme, UNICEF (in common with many other agencies) appears to have made little progress. The evaluation found that staff see protection almost exclusively in terms of child protection. Although elements of the 'do no harm' principle

were found in much of the UNICEF programme in South Sudan (see Part One evaluation), the evaluators conclude that UNICEF and its partners could do more to ensure that families can access the services they provides in safety and dignity.

Most fundamentally, the UNICEF approach does not appear to be consistently grounded in an analysis of the wider security context – and of people's response to that context. Much of the threat analysis of UNICEF and of the wider United Nations system (e.g. as articulated in the HRP)s) is based on the IPC system of 'phase classification', highlighting threats to people's ability to secure basic needs (food, health, etc.). The IPC classification does not capture the factors driving people's behaviour.

The result of the above is that while data on nutrition and food security are relatively strong, information about safety (security incidents and perceptions), social cohesion and factors like ethnic partitioning is less consistently gathered, and the particular implications of these factors for UNICEF programming are less systematically considered.

7.1.8 UNICEF has done well to build a portfolio of **civil society partnerships** to enable its emergency programme to cover both conflict-affected and more stable areas over time. It has found a pragmatic balance between international, national and local implementing partnerships alongside ongoing partnerships with government and United Nations bodies. Although the quality of services has been variable, this approach has substantially paid off in terms of programme delivery and – to a lesser extent – in terms of building local and national capacity. However, given the high level of dependency of smaller agencies on UNICEF financial and technical support, and the volatility

of funding flows to South Sudan, this is also a very fragile set of arrangements. Gaps or delays in funding such as those that occurred in 2019, as well impacting vital services for children, are disastrous for smaller CSOs. Staff and technical know-how are lost, and the loss of local capacity makes sustainability and local ownership harder to achieve. Loss of key gender-based violence partners is one example of this.

UNICEF can help mitigate this fragility by streamlining its partnership agreement process, adjusting its approach to risk management and agreeing multi-year partnerships. In the short term, meeting ongoing acute needs requires continued direct support and oversight – and securing the necessary programme funding. The latter in turn depends in part on donor confidence in partnership arrangements with both government and CSOs to deliver vital services effectively and accountably. It also depends on advocacy with the donors about the consequences of lack of funding, both for the immediate well-being and security of children, and for the viability of local and national institutions on which they are likely to depend in the future.

7.1.9 Maximizing the synergies between the different sectors in which UNICEF works is rightly thought to be essential to an effective response. Yet although UNICEF has made efforts to build an **integrated programme**, the evaluators were left with a sense that the multi-sectoral model of programming is not 'natural' within the organization. Sectors are siloed, not least because of UNICEF administrative and financial processes, and multi-sectoral programming is not incentivised. Nor does the PCA process encourage such integrated approaches.

7.1.10 While some progress has been made over the evaluation period with regard to **data-gathering and monitoring, much remains to be done** – both on contextual and programme-related data. UNICEF should continue to work with government and others to increase the availability and reliability of outcome data, notably with regard to educational outcomes for girls and boys. Filling needs assessment and data gaps in areas like gender-based violence, CAAFAG and other areas of child protection should be a matter of renewed effort, and should involve more regular use of (sensitively conducted) surveys and focus group discussions. UNICEF must ensure proper monitoring, reporting and information management for its work on child protection, which has been deficient both from a management and accountability perspective. Inconsistencies and gaps in the data and reporting have significantly affected the evaluability of this area of UNICEF work.

7.2 CONCLUSIONS ON EDUCATION AND CHILD PROTECTION

Education

7.2.1 The evaluation found that the UNICEF programme has been grounded in regular assessment and has responded to priority needs as far the situation and access has allowed. The emergency education response rightly focussed on providing **emergency education in the most conflict-affected states**, with priority given to areas in which the number of out of school children was highest. The IRRM mechanism was used as a last resort for areas that were otherwise very hard to reach. In 2019 as a result of the peace process, UNICEF and the education cluster have expanded the programme to all states. Despite that, the context remained very challenging: high levels of localized insecurity and displacement continue, while rains



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and floods are significant constraints on access. As with many other sectors, a major funding shortfall 2019 limited programme coverage in that year.

7.2.2 The evaluation concludes that **UNICEF did well to expand its education work over the evaluation period in the face of evolving needs and new opportunities**, although progress has stalled more recently (2019/20) – and the COVID-19 crisis now threatens to reverse the gains made. Since 2016-2017, UNICEF target-setting had been based on an attempt to progressively reduce the number of children out of school while retaining children already enrolled. Target figures show a progressive increase of approximately 200,000 children per year to be reintegrated in the school system or provided with emergency education opportunities. **However, the scale of the programme remains insufficient to cover the emergency education needs:** UNICEF covered 30 per cent of the assessed education needs in 2016; 24 per cent in 2017, 30 per cent in 2018 and 26 per cent in 2019. Moreover, inclusion of some of the most vulnerable – for example children with disabilities, children in pastoralist communities, over-age students and girls facing early and forced marriage – is addressed only to a limited extent. Most recently, efforts to extend access to education have been massively compromised in 2020 by school closures due to COVID-19. These will extend into 2021 and threatens to reverse the progress made over the evaluation period.

7.2.3 The UNICEF education response strategy from 2016 to 2019 has been built on a **combination of humanitarian and development elements**. The two main components (education in emergency, and system strengthening) were linked through a cross-cutting approach to conflict-sensitive education and peacebuilding. The result has been a programme that **was**

able to respond flexibly to the evolving education needs found in South Sudan's highly challenging environment. However, although the links between the three components have become clearer over the course of the evaluation period, more work is needed to spell out those links in programmatic terms.

7.2.4 The UNICEF emergency education strategy has been consistent with the education cluster strategy and generally also with the CCCs (2010 version). UNICEF has become increasingly responsive to the feedback of partners, although community involvement in strategy development and planning has been limited.

7.2.5 The emergency education programme has achieved **very substantial results** throughout the evaluation period. This is particularly true with regard to access to education (enrolment and retention) for IDPs in PoCs and hosted in communities; establishing safe education facilities (temporary learning spaces); provision of essential education material; teacher training; and community mobilization and engagement through SMCs, PTAs, and mobilization campaigns.

However, despite all efforts, **serious questions remain over the quality of teaching – and therefore about educational outcomes for children**. Many teachers themselves have only limited education and limited literacy. Short duration training and limited follow-up and supervision are in themselves not sufficient to produce the desired change in teaching quality.

7.2.6 **The main challenge to direct fulfilment of the CCCs** – given the limits to government capacity – **has been the limited scale of the programme compared to needs, and limited coverage due to access constraints**. On the core objective of increasing enrolment, there is

clear evidence that UNICEF has been effective in bringing large numbers of conflict-affected children into schools. Some improvement in the enrolment of girls (from 20 per cent to 40 per cent) has been supported by specific incentives for girls' attendance (cash and food), provision of dignity kits, and separate latrines for girls. However, high drop-out rates remain as well as strong cultural and economic counter-factors.

7.2.7 Coordination of the education programme with other sectors within UNICEF has been variable. It has worked well with child protection (including child protection messaging, psychosocial support and mine risk education) and relatively well with WASH, although maintenance of WASH facilities in schools has been a weakness – something that appears to have knock-on effects with regard to extending school feeding programmes. Coordination with health and nutrition appears very weak.

7.2.8 UNICEF has contributed significantly to the education cluster both at national and state level. This included coordination of interventions, addressing gaps without duplication, information management, needs assessments, providing technical expertise, developing standards and guidance, and supporting the technical capacity development of cluster members. The ability of students from the PoCs to take part in national exams can be attributed largely to the work of the cluster.

Co-leadership of the national/central education cluster with Save the Children has worked well. During field visits, all the respondents from NGOs expressed a high degree of satisfaction with the national cluster response. Information management and information-sharing by the education cluster appear to have been consistent and effective, and the humanitarian

community have had access to a wide range of relevant and well-presented information.

7.2.9 The emergency education programme has worked on building the **resilience** of children and communities as well as teachers and other education personnel. Despite important gains (e.g. improvement of girls' enrolment), more needs to be done to make sure that conditions for resilience are sustained. This includes the availability of functioning separate WASH facilities in schools for girls and boys, coaching and supervision for trained teachers and involvement of communities in education planning. **Crucially, it also includes sustainable schemes for paying teachers' salaries and incentives.**

7.2.10 UNICEF has invested in partnerships with national NGOs and CBOs, in line with the localization agenda. More needs to be done to strengthen the delivery capacity of these CSOs (including faith-based organisations). Community mobilization and engagement through campaigns and work with PTAs has contributed to increased enrolment and retention of girls in PoCs and targeted communities. Awareness-raising of communities through C4D approaches also contributed to the safety and protection of children on their way to education facilities and in schools. Despite these positive achievements, sustained community mobilization has been constrained by the low level of parental education and weak community participation in education planning.

7.2.11 UNICEF has invested substantially in provision of TLS, education supplies, basic training, and incentives for teachers/volunteer teachers. While these have been essential areas of intervention in an emergency context and have extended the UNICEF reach considerably in otherwise inaccessible areas, there are inevitable questions about the quality and sustaina-

bility of results achieved through this approach. While UNICEF and its partners need to maintain direct support to fill critical gaps for crisis-affected populations not otherwise catered for by the mainstream education system, it also needs to plan for transition to a more sustainable approach in the medium to longer term.

Child protection

7.2.12 Part One of the present evaluation noted that "***more than in any other 'sector', the gap between vulnerabilities and the ability of humanitarian agencies to reduce them is apparent in relation to child protection***". Many of the threats to children have come not from the direct effects of conflict, but from the more indirect effects of (for example) living in displaced camps, the breakdown of law and order, increased criminality and the disruption of community protection mechanisms. Some threats, particularly for girls, arise from the intensification of existing cultural practices such as early or forced marriage.

7.2.13 Despite the constraints in terms of **data-gathering**, the UNICEF child protection programme in South Sudan appears to have been based on a sound understanding of the protection issues involved and their inter-relations. The response was informed by regularly updated situation of women and children surveys, protection and child protection assessments as part of the HNO process, and thematic situation analysis for child protection in emergency areas. A partner capacity assessment in child protection (2017) has contributed to shaping the type of technical support and capacity development effort needed by partners.

7.2.14 The **scale of the UNICEF programme remains modest compared to the extent of the protection needs** in the country and the prioritisation and targeting strategy are not fully clear.



Limited access and availability of national and local capacities have challenged prioritization. More recently, and most notably in 2019, limited funding has had a dramatic adverse impact on the scale and scope of the programme delivered.

7.2.15 Within its limits, the child protection programme was found to be highly relevant to the most critical vulnerabilities and protection needs of children, and made a significant contribution to reducing the number of children and young people exposed to, or at risk of, violence, exploitation and abuse in emergency and non-emergency settings. The programme has balanced delivering critical child protection services, promoting positive behaviours and strengthening policies and systems to build a protective environment for children. The capacity development effort toward local partners (through training and technical guidance) has been particularly appropriate and necessary.

7.2.16 The child protection in emergency response was rightly focused on enabling critical child protection services and based on a clearly defined overall **strategy**. Theories of change

have been clearly articulated for each programme cycle, as well as for individual thematic areas. The overall strategy is aligned over time with those of the child protection sub-cluster, the gender-based violence sub-cluster and consequently with the protection cluster strategy and the overarching protection strategy of the HCT. The strategy includes a mixed humanitarian and development approach, combining a system-strengthening component with an emergency child protection service delivery component. Although this evaluation focuses on the latter, the evaluation acknowledges the importance of the continued effort to build an enabling environment, and more immediately of building capacity to deliver consistent and good quality services for child protection.

7.2.17 UNICEF lacks an overall **child protection mainstreaming** strategy across UNICEF sections and sectors of intervention. The exception to this is the management response to the gender-based violence evaluation, which provided a clear strategic framework for mainstreaming of gender-based violence concerns in other sectors.

Integration¹⁷¹ of child protection in UNICEF sections and sectors is not fully articulated, with the exception of C4D and education. Whenever a clear integration strategy exists, UNICEF has shown that wider protection outcomes could be achieved through the synergies between various sectors. Examples of this are the impact at community level of CAAFAG reintegration programmes and that of the WASH and gender-based violence integrated programme.

7.2.18 Overall, the child protection programme has been **effective within its limited scope**, given the severe constraints under which

UNICEF and its partners have operated. Within those limits, UNICEF managed to balance service delivery with support to system-building, service delivery, capacity development of partners and changing of social norms (especially on gender-based violence). This effort has not yet fully borne fruit, although some encouraging results have been seen. It is to be expected that some of the gains achieved so far will set back in 2020, given the effects of COVID-19 and continuing funding constraints. In particular, the combined effect of economic hardship and closure of schools may have increased child protection risks, including early marriage, exploitation and abuse.

7.2.19 In 2019 in particular, child protection services were challenged by a **major lack of resources**. This has mostly affected the CAAFAG reintegration, PSS activities, gender-based violence and MRE. More generally, operational constraints and shifting vulnerabilities have meant that UNICEF has often had to operate in ‘fire-fighting’ and responsive mode, and has not always been able to take advantage of opportunities as they arise. Child protection services were most effective in PoCs and in situations in which engagement with communities, families and children could be more systematic, allowing a balance of prevention and response services. As noted in Part One of the evaluation, CP services delivered through the IRRM probably had relatively limited impact. That said, targets and results disaggregated by modalities of intervention (static, outreach, mobile and IRRM) are not available. This makes it impossible to evaluate the effectiveness of the different operation modalities.

7.2.20 The child protection programme has largely delivered against the CCCs. All the-

¹⁷¹ For the purpose of this report “integration” refers to the intentional combination of child protection and GBV services within other sectors. For example incorporation of MRE as subject in the education curricula.

matic areas show progress towards improving quality of services through provision of thematic guidance and standard methodological approaches. There remain areas of weakness. For example, participation of girls and boys, families and communities in the programming has not always been ensured throughout the programme. This requires further work.

Overall the mainstreaming of child protection has been weak in nutrition, health and WASH, although much stronger in education. The gender-based violence agenda, by contrast, has been consistently mainstreamed throughout the response.

7.2.21 UNICEF has significantly contributed to child protection **coordination** mechanisms both at central and state levels. This included providing technical expertise to lead technical working groups on thematic areas, developing standards and guidance, and supporting technical capacity development of cluster members. However, the coordination capacity of the sub-cluster is low compared to the coordination needs in the country, especially at state level. Amongst other effects, this contributed to major gaps in information-sharing.

7.2.22 UNICEF has made a significant contribution to strengthening local CP capacities through technical support and capacity development. These efforts were greatly appreciated by partners, especially national NGOs. Its work on national system strengthening (including social workforce strengthening) remains important, though the nature of the context is such that only limited progress has been possible in this area.

UNICEF needs to increase its focus on multi-sectoral programming as a way of building resilience. Gender-based violence and CAAFAG integrated programming showed very positive

outcomes. Yet as noted above integrated programming appears hard to achieve in the current organizational culture. This way of working creates a disjointed picture in which UNICEF itself cannot fully read the impact and multiplier effects of multi-sectoral programming on the protection of girls and boys, families and communities.

7.3 CONCLUSIONS ON WASH, HEALTH AND NUTRITION

7.3.1 In 2019, UNICEF made some progress on the system-strengthening aspects of the WASH agenda, and on better integrating its WASH response with other aspects of its work. It also made some progress on community engagement and on building partnerships for sustainable WASH initiatives.

Yet despite the extent of continuing WASH needs, UNICEF results showed a major drop-off in 'safe water' results achievement between 2016-2017 and 2018-2019. This appears to be related to lack of available funding as much as to access and other challenges – and it represents a major setback in tackling one of the major areas of vulnerability for South Sudanese children and their families. The COVID-19 pandemic is reported to have placed additional constraints on the programme in 2020. WASH in schools remains a priority area for collaboration and scale-up, particularly given its crucial links to health and nutrition as well as its significance for girls' attendance at school.

7.3.2 With regard to **health**, UNICEF and its partners have achieved significant vaccination results, but they have struggled to maintain **vaccination coverage** in areas affected by conflict and other humanitarian crises. Together with its WASH work, UNICEF preventive work

on vaccination and distribution of treated bed nets is perhaps its most important health contribution.

UNICEF continues to play a significant role both in curative and preventive interventions. The treatment of children with severe acute malnutrition remains a vital necessity, while health promotion work at community level – including work through the integrated community mobilization network – is important to the wider public health agenda in South Sudan as well as specifically to the promotion of child health.

7.3.3 Despite an apparent improvement over the years since 2010, the **nutrition** situation remained critical by the end of 2019. UNICEF and its partners have done well to maintain and grow its treatment programme for children with SAM over the evaluation period. UNICEF has also significantly expanded provision of counselling on appropriate IYCF and helped to maintain high levels (69 per cent) of exclusive breastfeeding – although the quality of counselling services appears to be a significant constraint on progress in this area. More broadly, its work in partnership with WFP, FAO, the Ministry of Health and a range of other partners on nutrition-related resilience is an important contribution to the prevention and preparedness agenda.



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7.4 RECOMMENDATIONS

These recommendations are made on the basis of analysis of UNICEF emergency work in South Sudan up to the end of 2019 and mostly derive from analysis that holds true for the whole of the evaluation period (2016-2019). In other words, they reflect more structural issues that the evaluators believe UNICEF needs to address in order to increase the coverage, relevance, effectiveness and quality of its emergency-related work in South Sudan, and to help build the foundations for stronger local and national institutions to protect and educate South Sudanese children in the future.

While the evaluators believe that the recommendations remain valid and relevant at the time of writing (end of 2020), they will need to be interpreted and applied in the light of the current context in South Sudan and the situation currently faced by UNICEF and its partners. The ongoing COVID-19 pandemic and its impact is one of the main variables here, and some of the recommendations take specific account of this. But other factors arising in 2020 – including the political and economic context, as well as the donor funding picture – will also have changed the operating landscape.

Recommendation 1: Education

UNICEF should thoroughly review its strategy and planning on education in the light of the COVID-19 pandemic. It should work with the government (and specifically MoGEI) to forge stronger policy and planning links between emergency education interventions and the mainstream education system. It should work to strengthen inclusion in education for the most vulnerable, and to strengthen inter-sectoral links between education, nutrition, health and WASH. And it should continue to promote a localization agenda for EiE, including investment in CSO capacities and education support partnerships with local authorities.

R1.1 Adapting to the impact of COVID-19

UNICEF should revise and adapt the education programme strategy and plan – including implementation of the BTL evaluation management response plan – in light of the COVID-19 pandemic, its ongoing effects and likely future impact on children’s education. This should take account of the effect of school closures on children’s safety and welfare as well as on their education.

R1.2 Linking emergency and mainstream education

Given the importance of forging stronger links between emergency education responses and the mainstream education system, UNICEF should advocate for – and support MoGEI to produce – an education sector development plan that includes emergency education responses within it. It is suggested that this should include:

- i. Education in emergency protocols within the policy framework, so that these can be quickly activated in response to future emergencies (e.g. displacement, COVID-19, flooding, areas of conflict) with defined transitional pathways back to the mainstream education system;
- ii. An action plan to ensure sustained access for all children to good quality education opportunities in emergencies. Priority areas here – as for the mainstream education system – are education financing (teacher salaries/incentives), quality of teaching and learning (including teacher development) and inclusion.
- iii. In pursuing this agenda, UNICEF should be careful not to enable bureaucratic or political obstacles in the way of responsive action on education in emergencies. The key role of civil society organisa-

tions in emergency education should be stressed, and partnership between CSOs and government promoted.

R1.3 Inclusion

UNICEF should prioritize work to enable access to education for the most vulnerable children in emergencies (and generally), including children with disabilities, children in pastoralist communities, over-age students and girls facing early and forced marriage.

R1.4 Inter-sectoral strategies

UNICEF should work to ensure stronger links at policy, planning and implementation levels between the education programme and nutrition, health and WASH, while building on current close links with child protection. Opportunities are currently being missed both to educate children and their families on these health-related agendas, and to have a direct impact on children’s health and nutrition through better integrated services. This applies both to the UNICEF programme and at the inter-agency level, where UNICEF should champion a more integrated approach through the clusters and HCT.

R1.5 Community mobilization and local capacities for education

UNICEF should continue to strengthen community engagement with the education programme at design, planning, delivery and monitoring stages. This should include stronger local accountability mechanisms as well as continued efforts to promote direct parent involvement in education, e.g. through PTAs and SMCs. UNICEF should continue to invest in the capacity of national NGOs and CBOs to ensure continued capacity at local level, and to this end should formulate a capac-

ity development strategy in partnership with international NGOs and the education cluster.

Recommendation 2: Child protection

UNICEF child protection work in South Sudan can be strengthened in a number of ways. A child protection perspective needs to be mainstreamed across its whole programme, and specific CP elements should be integrated into UNICEF work on nutrition, health and WASH (as they are with education) as part of an integrated multi-sectoral approach. Funding should be sought as a matter of priority for continuing work on gender-based violence, PSS and CAAFAG, where UNICEF has shown it can make a unique and effective contribution. Finally, UNICEF should be more prepared to use its mandate to pursue high-level advocacy for South Sudanese children.

R2.1 Re-invest in gender-based violence, PSS and CAAFAG programming

UNICEF has made a considerable investment in CP work spanning the short and the medium/long terms, in particular the gender-based violence programme (with its social norm change component) and the CAAFAG programme (with its reintegration component). Those programmes were discontinued before they could fully achieve their results, and PSS has suffered from reduced funding. The evaluation strongly recommends that UNICEF continue to re-invest in these programmes, and to re-engage donors with these crucial agendas.

R2.2 Child protection mainstreaming

A child protection lens should inform every element of the programme. UNICEF should develop and implement a child pro-

tection mainstreaming action plan across all sectors, similar to the gender-based violence action plan. This should span needs assessment, programme design, implementation and monitoring.

R2.3 Programme integration and inter-sectoral strategies

UNICEF should develop and implement a child protection integration plan, building on lessons learned from work on CAAFAG and gender-based violence. Including essential child protection measures in all sector funding applications could help to overcome CP funding shortfalls and gaps.

R2.4 Impact of COVID-19 pandemic

The impact of COVID-19 pandemic control measures – especially the closure of schools – on the protection of children should be closely monitored and assessed. This may offer an opportunity for renewed joint strategic planning between the education and other sections.

R2.5 Strengthening child protection systems and capacities

UNICEF should continue to invest in strengthening child protection systems and capacities with communities, civil society and government, and should seek to foster CP partnerships between these different actors. That should include raising awareness on issues related to child labour as well as early marriage and domestic abuse. This is especially important in light of heightened child vulnerability as a result of the COVID-19 and school closures.

R2.6 Child protection advocacy

Given its mandate and experience, UNICEF occupies a unique position as an advocate for children. But the evaluation

found that its voice was not heard consistently or strongly enough, given the extraordinary level of abuse suffered by children in South Sudan. UNICEF and its partners must avoid the trap of ‘normalizing’ serious incidents affecting children, and it should not rely solely on the MRM in this regard. UNICEF SSCO and ESARO senior management should be prepared to raise child protection issues directly at the highest levels rather than relying on others (including the protection cluster) to do so.

R2.7 Strengthen CP sub-cluster coordination effort

Strengthen the coordination and information-sharing capacities of the CP sub-cluster according to the coordination needs in the country and besides the staffing requirements recommended for the cluster.

Recommendation 3: Centrality of protection
Application of this principle is the responsibility of all UNICEF sections. UNICEF needs to ground its field programme more clearly in an analysis of the evolving security situation as it bears on the security of children and their families, their decisions and the choices available to them. More regular perception surveys (conducted by UNICEF or others) could provide a substantial basis for this analysis. In order to better ensure that families can access its services safely and in dignity, an explicit safety review should be part of both the project approval and routine monitoring processes for the relevant services.

Recommendation 4: Partnerships

UNICEF should review its partnership agreement processes with a view to streamlining the process, and avoiding damaging gaps in

the funding pipeline to partners. It should also change its approach to risk management in its implementing partnerships, adopting a more ‘downstream’ focus involving closer mentoring, oversight and quality control. The time of specialist staff in the Juba country office should be freed up from some of the current contract-related process to focus on providing technical support and mentoring to field offices and partners. UNICEF should as far as possible increase capacity-building support to local and national CSO partners and try to secure predictable multi-year funding. It should also foster local collaborative arrangements between CSOs and local government.

Recommendation 5: Data and monitoring

UNICEF should continue to work with government and others to increase the availability and reliability of outcome data, notably with regard to educational outcomes for girls and boys. Filling needs assessment and data gaps in areas like gender-based violence, CAAFAG and other areas of child protection should be a matter of renewed effort and should involve more regular use of (sensitively conducted) surveys and focus group discussions. UNICEF must ensure proper monitoring, reporting and information management for its work on child protection, which has been deficient both from a management and accountability perspective. Inconsistencies and gaps in the data and reporting have significantly affected the evaluability of this area of UNICEF work. The SSCO should also strengthen its data quality assurance processes to prevent a recurrence. It is suggested that to achieve improvements in this area, dedicated support may be required for the child protection section in the form of an information management officer.

