

COUNTRY CASE STUDY

Evaluation of WASH Programming in Protracted Crises

May 2020

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Cameroon



EVALUATION OFFICE

Global Evaluation of UNICEF's WASH Programming in Protracted Crises, 2014-19 Lebanon Country Case Study

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This Cameroon country case study report is one of four country case studies conducted as part of a global evaluation of UNICEF's WASH Programming in Protracted Crises, 2014-19. The global report and country case studies for this evaluation were conducted by Itad. The Cameroon case study report was prepared by Enrico Leonardi (Deputy Team Leader), Cheryl McDonald and Sébastien Ngueuwou. Jeremie Toubkiss, Koorosh Raffii, and Mona Fetouh of the Evaluation Office supported the management of the evaluation including inputs to quality assurance.

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LIST OF ACRONYMS

AAP	Accountability to Affected Populations
ACAP	Assessment Capacity Project
ACDC	Association Citoyenne pour le Développement du Cameroun
ADRA	Adventist Development and Relief Agency
AIDER	Association des Ingenieurs pour l' Assistance au Developpement Rural
ASOL	Afrique Solidarité
C4D	Communication for Development
CAR	Central African Republic
CCS	Country Case Studies
CCCs	Core Commitments for Children
CERF	Central Emergency Response Fund
CLTS	Community-Led Total Sanitation
CO	Country Office
CPAP	Country Programme Action Plan
CPD	Country Programme Document
EAG	Evaluation Advisory Group
EO	Evaluation Office
EPP	Emergency Preparedness Policy
EPRP	Emergency Preparedness and Response Planning
EQ	Evaluation Question
ERT	Emergency Response Team
ET	Evaluation Team
FO	Field Office
GWC	Global WASH Cluster
HAC	Humanitarian Action for Children
IAMP	Interagency Mapping Project
IDP	Internationally Displaced Person
IM	Information Management
INGO	International Non-Governmental Organization
IP	Implementing Partner
KI	Key Informant
KIIs	Key Informant Interviews
KM	Knowledge Management
L1–L3	Levels 1–3
LHD	Linking Humanitarian and Development
LTA	Long-Term Agreement
MDG	Millennium Development Goal
MHM	Menstrual Hygiene Management
MIC	Middle-Income Country
MINSANTE	Regional Delegations and Districts of Health
MoWRE	Ministry of Water Resources and Energy (MINEE; Ministère de L'eau et de L'énergie)
NGO	Non-Governmental Organization
OCHA	Office for the Coordination of Humanitarian Affairs
ODF	Open Defecation-Free
OR	Other Resources
ORE	Other Resources Emergency
PLR	Provider of Last Resort
PM&E	Participatory Monitoring & Evaluation
RAM	Results Assessment Matrix
RO	Regional Office
RR	Regular Resources

RRRM	Regional Rapid Response Mechanisms
SBP	Standby Partners
SDG	Sustainable Development Goal
SEQ	Sub-evaluation Question(s)
SMQ	Strategic Monitoring Question(s)
TA	Temporary Assignment
ToR	Terms of Reference
TPM	Third-Party Monitoring
UNHCR	United Nations High Commissioner for Refugees
WAP	WASH Assessment Platform
WASH	Water, Sanitation and Hygiene
WiPC	WASH in Protracted Crises

1. INTRODUCTION

Background to the evaluation

The global WASH in Protracted Crises (WiPC) evaluation was commissioned by the UNICEF Evaluation Office (EO) following commitments made in the Global Evaluation Plan (GEP) for 2018–21. This WiPC evaluation was deemed to be important given the increased scale of vulnerability and needs in protracted crisis and consequent significant increases in funding to WASH humanitarian action – both within UNICEF and the wider sector. It includes UNICEF's emergency-related work before and after crises and the organization's related development activities, strategies and coordination work.

The new global WASH strategy for 2016–2030¹ reflects the shift from the Millennium Development Goals to the more ambitious Sustainable Development Goals. The WASH strategy is set within the broad context of SDG 6, while also articulating how WASH contributes to the achievement of other Sustainable Development Goals relevant to UNICEF's 'priority cross-sectoral interventions'.

The number of Level 2 (L2) or Level 3 (L3) emergencies that UNICEF responds to each year has increased from 3 or fewer between 2011–2015² to up to 10 in a single year between 2016–2018. This is in addition to numerous Level 1 (L1) responses. L2 and L3 emergencies are primarily armed conflicts that have an average duration of the emergency phase of more than three years. Of these crises, responses in 20 countries were deemed to be protracted (defined in the terms of reference for this evaluation as 'major humanitarian situations in which a large proportion of a population in a country is vulnerable to death, disease or disruption of

their livelihood over a significant period of time'). WASH was a major component in every emergency response of this type. This evaluation focuses on those 20 crises classified by UNICEF as L2 or L3 for a duration of at least 18 months as of September 2018. It also considers three protracted emergencies that were classified as L1 during time frame of the evaluation.³

All country offices with a WASH in protracted crises (WiPC) programme contributed to the evaluation through an online survey. Eight of these countries covered in the evaluation are the focus of country or thematic case studies. Cameroon is one of four country case studies that inform this global evaluation.

Due to the multiple crises affecting the country, described in Chapter 2 of this document, and their respective duration and relevance to the scope of this exercise, the Evaluation Team (ET) agreed with UNICEF Evaluation Office and the Cameroon CO to focus mainly on the Central African Republic (CAR) refugee crisis in the East region and the Boko Haram emergency in the Far-North region. Some attention has been directed to the cholera crisis, given the importance of the WASH response in this public health context, and some information has been gathered from the recent events in the Northwest and Southwest regions to contextualize the evolution of the emergency preparedness and response approach by the CO.

Purpose of the global evaluation

This evaluation is both formative and summative. It is intended to provide learning (for UNICEF and the wider sector) on WASH action in protracted crises between 2014–2019

¹ UNICEF's Strategy for Water, Sanitation and Hygiene 2016–2030.

² 2011 was when the 'L' classification system was introduced.

³ The 20 protracted crises declared by UNICEF as L2 and L3 emergencies since 2014 are the following: Nigeria and Lake Chad Basin (Cameroon, Chad, the Niger); Central African Republic; the Ebola virus epidemic in West Africa

(Guinea, Liberia and Sierra Leone); the Democratic Republic of the Congo (Kasai province); the Horn of Africa (Ethiopia, Kenya, Somalia); South Sudan; Syrian Arab Republic and the neighbouring countries (Egypt, Jordan, Lebanon and Turkey); Iraq; and Yemen. In addition to these countries, the evaluation has included Afghanistan (only declared as L1), Bangladesh and Haiti within the scope of the evaluation.

and also provide accountability for UNICEF's performance in this area. Some areas of enquiry cover both functions. However, the evaluation team recognizes that there are some areas (most notably linking humanitarian and development programming, or LHD) for which, although there was a clear commitment from UNICEF, there was no universally agreed standard or framework applied to UNICEF programming in the period 2014–2019.

The evaluation questions (EQs) finalized during the inception phase are:

- **EQ1** To what extent has UNICEF achieved quality, including equity and inclusion, in WiPC?
- **EQ2** How well has UNICEF exercised its leadership and coordination roles for WiPC?
- **EQ3** How well has UNICEF monitored and reported the results of its WASH programming in protracted crisis?
- **EQ4** To what extent has UNICEF had the capacity to implement a timely and effective WiPC response and coordination?
- **EQ5** To what extent has UNICEF ensured linkages, coherence and mutual reinforcement of its WASH action in protracted crises with longer-term development objectives?

The most commonly discussed expectation for this evaluation during key informant interviews during the evaluation's inception phase was that it should assess how well UNICEF is using its humanitarian and development programming in countries affected by protracted crises to reduce risk and build resilience. This includes making links between the ongoing response mainly funded using emergency funds and longer-term development work, which is funded primarily through UNICEF's regular country programme.

Purpose of the country case studies as part of the global evaluation

The main objective of the country case studies is to build evidence from a field-level perspective about specific questions and

problems and contribute to the findings of the global evaluation report.

This report will not make recommendations for the Cameroon Country Office, although the evaluation team was asked by this country office to give views during the final debrief. This second country case study visit was also designed by the Evaluation Office to test the premise of the evaluation as well as its tools.

This country case study describes the protracted context in which the Cameroon Country Office is working; the history and nature of the WASH response in Cameroon; and the approach and tools taken by the evaluation team. It discusses the findings against each of the EQs and presents conclusions.

The evaluation team's visit to Cameroon took place from 15 to 27 September 2019.

General comments for this report

All figures and references to staff in this report should be interpreted as specific to the Cameroon Country Office unless otherwise stated. For example, senior staff means the senior staff of this country office and not of UNICEF globally. Budgets provided are those for the Cameroon Country Office and not the overall UNICEF WASH budget. All dollar amounts are in US dollars unless otherwise indicated.

2. CRISIS AND EVOLUTION OF CONTEXT AND NEED IN CAMEROON

For decades, Cameroon had been a relatively stable country, with reliable institutions and government. In 2004–05, due to the conflict in neighbouring Central African Republic, approximately 100,000 refugees crossed the border and started to settle in the East and Adamawa Regions of Cameroon. A second wave followed in 2013–14, when an additional 150,000 refugees crossed into the same areas; 35 per cent of these refugees were settled in structured camps, while the rest were either integrated within local communities or informally settled around local villages and towns. Following the initial humanitarian response by the international community in 2013, and subsequent interventions in the refugee camps and other areas in 2014–16, the situation progressively stabilized.

By 2016, assistance to the camps started shifting towards more permanent services and infrastructure, in some cases also benefiting nearby villages. Similarly, interventions in the informal refugee settlements gradually moved towards medium- and long-term approaches. These aimed at maintaining a balance between supporting the refugees and supporting the local and host communities. By the end of 2018, the more than 250,000 refugees were divided between the East Region (172,000), the Adamawa Region (59,000) and the North Region (22,000). A voluntary repatriation plan, designed by UNHCR in collaboration with the Cameroon and Central African Republic governments, has recently begun, but only a minority of the refugees (25 per cent) has shown any interest in returning to the ongoing troubles in their country of origin. The remainder plan to stay in Cameroon.

In December 2014, the first cross-border attacks by Boko Haram triggered the displacement of 60,000 people in the Far-North Region. The following month, the first wave of 35,000 refugees from Nigeria crossed into the same region. By the end of 2016, the number of refugees from Nigeria had increased to 86,000: 60,000 of these were settled in the Minawao camp (west of the city of Maroua), a site that was originally planned for 20,000

people. By the end of 2018, approximately 100,000 Nigerian refugees were still present in the Far-North Region, along with 244,000 internally displaced persons. About 101,000 people managed to return to their village of origin, thanks to the improvement of the security situation in some of the border areas. These returnees still required assistance to resettle.

The initial humanitarian response in 2014 addressed the immediate needs of the refugees settling down in camps or within host communities. It also aimed to help the those who were internally displaced by the recurrent Boko Haram attacks. Currently, UNHCR plays a key role in managing the Minawao camp and supporting refugees living in informal settlements or with host families. Other organizations partially collaborate with UNHCR and target their response to the internally displaced and local populations. While there has been a shift from a purely humanitarian response providing medium- to long-term types of interventions to increasingly addressing chronic problems, the situation is far from stable; attacks on villages along the Nigerian border still occur, triggering new displacements.

Among other consequences, these two crises are characterized by limited access of refugees and internally displaced persons to basic social services. The host and local communities also have limited access to these basic services because the four regions affected were the least developed in the country even before the crises. In October 2017, clashes between the Anglophone communities and government forces began in the North-West and South-West Regions, followed by some initial displacement of the population. After one year, in October 2018, 437,000 people were displaced in the two regions, and more than 30,000 Cameroonians crossed the border into Nigeria as refugees.

In addition to these political crises, the country faces chronic food insecurity that affects 2.6 million people, including nearly 289,000 in an

emergency situation. Finally, in July 2018, a cholera epidemic affected several regions, including the Far-North Region; by December 2018, nearly 1,000 cases of cholera had been diagnosed and 59 people had died. 2019 data from the Ministry of Public Health this year report that since July 2019, 123 suspected cholera cases have been reported in

Cameroon's Far-North Region, including seven deaths. The Far-North Region and the neighbouring North Region are highly susceptible to cholera, due to poor hygiene practices, limited access to drinking water and high population movements linked to the Boko Haram insurgency in the Lake Chad basin.⁴

3. DESCRIPTION OF UNICEF'S WASH RESPONSE

Country office structure

UNICEF has been present in Cameroon since the mid-1970s, working primarily on a development programme in close collaboration with the government. Besides the main country office in the capital Yaoundé, there are field offices in Bertoua (East Region, covering also the Adamawa Region) for the Central African Republic refugee crisis, in Maroua (Far-North Region, covering also the North Region) for the Boko Haram crisis, in Bamenda (North-West Region) and Buae (South-West Region) for the Anglophone crisis, as well as an office in Douala (Littoral Region) where a large part of the UNICEF supplies directed to several West and Central African countries are received and forwarded.

The humanitarian crises of the last six years obliged UNICEF Cameroon to dramatically increase its focus on emergency response. The Boko Haram crisis in the Far-North Region triggered the activation of an L2 humanitarian response (requiring support from the West and Central Africa Regional Office) from March 2015 until June 2018. Similarly, an L2 response was activated for the Anglophone crisis in the North-West and South-West Regions between December 2018 and August 2019.

WASH cluster coordination

A formal cluster system was never activated for the East Region and the North Region crises in

Cameroon, although WASH sector coordination was adopted in Yaoundé and strengthened during the Central African Republic refugee and Boko Haram crises, with local coordination structures established in Bertoua, Maroua and Kousséri. Cluster coordination was activated in Bamenda and Buae for the 2018 Anglophone crisis in the North-West/South-West Regions (not covered by this evaluation) and UNICEF took the lead for the WASH cluster. The Office for the Coordination of Humanitarian Affairs (OCHA) has been assisting with inter-sector coordination in Yaoundé, Maroua, Bamenda and Buae. The Ministry of Water and Energy – including its delegates at the regional level – is formally leading WASH sector coordination, although UNICEF plays an important role in assisting the ministry to varying degrees depending location. Because coordination and leadership are the focus of one of the main evaluation questions (EQ2), a more in-depth review of these aspects is available in Chapter 5, below.

Budget for WASH activities

Cameroon has been independently included in UNICEF's Humanitarian Action for Children (HAC) since 2014, following the influx of refugees from the Central African Republic and the progressive deterioration of the situation in the north due to the Boko Haram crisis. Unfortunately, the country never received the required attention from donors,⁵

⁴ ACAPS, Cholera in Far-North, Cameroon (19 August 2019), briefing note.

⁵ Key informants gave several reasons for this lack of donor attention, including generally limited interest in the region

(specifically, limited interest in Cameroon) and a focus on higher-profile crises in the Middle East (Syrian Arab Republic and Yemen) and in South Asia (Bangladesh).

and funding for this humanitarian appeal has always been limited (see **Error! Reference source not found.**, below). The recent Anglophone crisis in the North-West/South-West Regions has further decreased certain donors' keenness to contribute funding, because the government plays a role in the local conflict.⁶ Throughout the crisis, together with the health and child protection sections, WASH has been the least-funded sector for UNICEF Cameroon.

Table 1: Percentage of Cameroon HAC funded, by year (source: UNICEF HAC and SitReps)

Year	% funded	Date of information
2019	20%	June 2019
2018	20%	December 2018
2017	44%	October 2017
2016	32%	October 2016
2015	24%	October 2015
2014	25%	July 2014

For this reason, the Cameroon Country Office has been obliged to utilize other resources to implement its programmes in the emergency-affected areas in the East and Far-North Regions. The evaluation team had some challenges gathering detailed information about the different types of funds (regular resources [RR], other resources [OR], other resources emergency [ORE]) utilized for the WASH response, as well as their utilization for different crises within Cameroon.

Table 2 shows resources used for the WASH response in protracted humanitarian crises.

Table 2: WASH funding (OR, ORE and RR) in protracted crises by year, US\$ (Source: UNICEF Cameroon CO)

Year	Other resources (OR)	Other resources emergency (ORE)	Regular resources (RR)	Total amount
2013	454,650	3,227,805	663,310	4,345,765
2014	2,039,560	1,811,067	642,892	4,493,519
2015	2,700,230	2,490,107	524,310	5,714,647
2016	1,293,988	1,945,202	458,847	3,698,037
2017	945,497	1,411,981	838,662	3,196,140
2018	1,246,749	1,446,896	1,160,952	3,854,597
2019	1,611,201	1,318,126	992,037	3,921,364

⁶ The country office offered the example of France. This traditionally important donor in Cameroon (to both government and international organizations) reduced its

contributions in order to distance itself from the political implications of the Anglophone crisis.

Table 3 below, shows how financial resources are split for specific areas of the WASH response: water, hygiene and sanitation.

Table 3: Total WASH funding in protracted crises by area of intervention and by year, US\$ (Source: UNICEF Cameroon CO and UNICEF HAC pages)

Year	Water	Hygiene	Sanitation	Totals	HAC WASH requirements (for comparison)
2013	1,882,458	1,544,584	918,723	4,345,765	N/A
2014	2,184,304	1,021,569	1,287,646	4,493,519	8.2M
2015	2,973,332	1,371,386	1,369,929	5,714,647	11.7M
2016	1,730,904	980,075	987,058	3,698,037	7.3M
2017	1,465,182	808,127	922,831	3,196,140	6.4M
2018	1,839,619	1,029,015	985,963	3,854,597	7.2M
2019	1,871,484	1,046,839	1,003,041	3,921,364	10.4M

A simple comparison of the above totals with the WASH requirement for humanitarian response by year (last column) clearly indicates that, notwithstanding the shifting of consistent amounts of OR and RR, the country office faced a constant shortage of funding for its WASH response in the crisis-affected areas.

Partners

In the framework of its response to the crises in the East and Far-North Regions, the WASH section of UNICEF Cameroon used different types of partnerships. As indicated, the main partners have been the Ministry of Water and Energy and the Ministry of Public Health, with which UNICEF WASH developed its country strategy and implementation plans. This close collaboration continued during the humanitarian crises, with the involvement of delegates from the two ministries in most of UNICEF's interventions and initiatives.

More immediate humanitarian needs in the East and Far-North Regions required the WASH section to expand its network of implementing NGOs, both national and international. This approach was quickly phased out in the East Region, where the peak of the crisis was over by 2016 and UNICEF WASH reverted to its collaboration with governmental counterparts. In the Far-North Region, NGO partnerships have changed since the initial acute phases, and progressively decreased in number; partnership length and scope has been

directly influenced by the availability – or lack thereof – of funding for the emergency response. Some of the partners moved the focus of their response to the recent anglophone crisis, further reducing overall response capacity in the North. As of October 2019, UNICEF WASH still had four programme cooperation agreements (PCAs) active in the Boko Haram crisis area.

UNICEF WASH has been making very extensive use of private national and international companies for its WASH interventions that require infrastructure building and/or rehabilitation (water points, pumping stations, distribution networks, latrine blocks, etc.). While there is a financial rationale in utilizing these service providers instead of NGOs, the involvement and buy-in by local communities was limited in the projects implemented, and reliability and sustainability of the approach were in some cases compromised. The country office recognizes this limitation. The decision to use private sector companies was made based on the need to speed up the response in the face of the emergency.

UNICEF WASH management and the effectiveness of its partnership network in the two protracted crises is extensively covered under evaluation question 4 (EQ4), below.

Programming

The context of WASH in Cameroon is characterized by slowly improving access to drinking water over time, but it is still critical in UNICEF's areas of operation in the North and East regions. The latest MICS survey⁷ shows 73 per cent access to improved water nationally, compared with the UNICEF areas of operation in the North Region (56.5 per cent), Far-North Region (63.7 per cent) and East Region (67.9 per cent).

Access to improved sanitation facilities reached 52 per cent in 2014 for the whole country, compared to 23.4 per cent in rural areas, with the lowest access in the Far-North, North and East Regions. Open defecation is still present in rural areas (13 per cent) and is highest in the Far-North Region (21.8 per cent). Inadequate hygiene practices affect family health and nutrition and contribute to the deaths of children under age five. About 20 per cent of children are affected by diarrhoea (23.2 per cent in rural areas compared with 15 per cent in urban zones). From May 2009 to August 2016, the country reported 37,551 cases of cholera, with 1,695 deaths, of which 45 per cent were recorded in the Far-North Region.

4. CASE STUDY METHODOLOGY

Description of case study approach

During the inception phase of the evaluation, the evaluation team developed a set of criteria (building on the evaluation terms of reference) for selecting country case studies. The team sought input from Evaluation Advisory Group members on which countries and/or regions should be considered for case studies. These criteria and an analysis of relevant countries against these criteria are presented in the inception report (section 5.3).

From this analysis, Cameroon was selected as a possible country case study in the West and

Low access to WASH is not helped by the humanitarian crises in the North and East Regions. UNICEF's goal of providing safe drinking water, sanitation and hygiene is threefold: i) to contribute to the realization of the rights of the child to survival and development by raising awareness of the issues in this area; (ii) providing support to national programmes for broad population coverage for equitable and sustainable access to drinking water and basic sanitation; and (iii) promoting better hygiene conditions.⁸

The WASH section contributed to all humanitarian responses, building on its strong collaboration with the Ministry of Water and Energy and the Ministry of Public Health in Yaoundé and their respective delegations at the regional level. Collaborations with local and international NGOs, as well as private companies, were established in numerous instances, for variable periods of time. All three areas of water, sanitation and hygiene were included in the responses, to varying degrees.

Central Africa Region. The primary rationale for selecting Cameroon was as follows:

- **Geographical diversity** – it was deemed essential to cover one emergency in West Africa;
- **Ongoing crisis** – Cameroon had an ongoing crisis. Countries in which the crisis was not ongoing, and it was therefore unlikely that the evaluation team would be able to meet with relevant staff or observe programming (primarily countries that were part of the Ebola response in West Africa) were excluded;
- **Access** – Most parts of Cameroon are accessible to evaluators. Countries where

⁷ MICS survey 2014, found at <https://mics.unicef.org/surveys>, accessed Oct 2019.

⁸ UNICEF WASH Strategy 2006–2015.

extreme access issues would make it difficult for the evaluation team to undertake field work in the relevant areas (the Central African Republic, the Democratic Republic of the Congo, the Niger) were de-prioritized.

The final determinant was the availability of the UNICEF country office to host the evaluation team visit.

A representative of the Evaluation Office accompanied the evaluation team throughout its country visit in Cameroon.

Generic terms of reference were developed for field-based country case studies and key interviewees were agreed prior to each field visit because these were a priority.

Ethical approval was obtained for all data collection tools prior to the visit. Evaluation team members were provided with a set of communication tools to use at the field level to explain the ethical framework in which UNICEF required them to operate. Standardized in all UNICEF evaluation work, these tools help inform stakeholders of the purpose of the work, the identity of the team and relationships to UNICEF, the boundaries of the work and the guidelines in place for their protection (i.e., how their anonymity will be maintained). The evaluation team was dutiful in ensuring that this communication took place at the start of every engagement. The evaluation team carried out 34 key informant interviews with a total of 42 interviewees from UNICEF and other organizations.⁹ The team visited four locations and undertook five transect walks.

Ahead of the field visit, the Cameroon Country Office was invited to complete a self-assessment. This was intended to support country office participation and ownership. The self-assessment was designed to better focus the field data collection work and make the best use of the time of the UNICEF country office staff members and other stakeholders. The self-assessment allows the office to state how its approach to WASH in protracted crises

has evolved over time and to comment on successes and challenges, standards followed, relevant partnerships, working with government, etc. The self-assessment forms were issued to the focal person in the country office approximately three weeks before the evaluation team's visit and were completed about one week before the arrival of the team.

Prior to the country case study visit, the country office provided key documents to the evaluation team, which reviewed them in order to establish evidence gaps related to the evaluation questions and compared them with the self-assessment. The intention was to inform the evaluation team and allow it to prepare for an initial workshop with the country office and focus initial key informant interviews.

The evaluation team intended to hold an initial workshop with Cameroon Country Office management and technical staff in Yaoundé; however, the tight schedules of the evaluation team and the country office staff made this impossible. Instead, a briefing meeting was held with the WASH section, with the Chief of Planning, Monitoring & Evaluation acting as focal person for the evaluation. The focus was on the purpose of the global evaluation and the country case studies; the evaluation questions underpinning the global evaluation and their relevance to the context; and planning and logistics for the visit. At this stage it was further discussed and agreed that the evaluation team would focus on the Central African Republic refugee crisis in the East Region and the Boko Haram crisis in the Far-North Region. Additional information related to the cholera response was to be collected to improve the understanding of the role played by the WASH section in that public health crisis and, similarly, from the more recent Anglophone crisis in the North-West and South-West Regions, in order to assess changes in the contextual dynamics of the country office emergency preparedness and response processes and initiatives.

⁹ Some interview sessions included multiple people, with only one person in the group expressing the group's opinion, thus 42 interviewees and 34 interviews.

Key informant interviews began immediately following this briefing and continued throughout the visit. The members of the evaluation team agreed on the focus of the individual interviews. The interviews were documented by note taking, after which the evaluation team extracted content from the interview notes to input into an Excel spreadsheet evidence matrix organized by evaluation question and sub-evaluation question. Some of the most important key informant interviews were recorded and subsequently transcribed into the evidence matrix.

A three-day field mission was organized to the East Region to visit sites relevant for the Central African Republic refugee crisis.

On the first day, after arrival in Bertoua, the evaluation team held several key informant interviews in town with external actors. On the second day, the team visited the Gado refugee camp, which hosts approximately 25,000 people. Although UNICEF WASH interventions here ended in 2016, the visit offered an opportunity to see some of the old water and sanitation infrastructures still being utilized. The team could see how these had set the basis for a medium- and long-term response by UNHCR and its partners. It was also an opportunity to understand the dynamics of the crisis, which peaked in 2014–15 and progressively stabilized into a chronic underdevelopment context. Two transects were carried out by two four-person groups, with one or two evaluation team members in each group, in addition to representatives from the local WASH management committee and a local NGO working on WASH. One woman was present in each group. The transects allowed visits to numerous water and sanitation installations (including some old UNICEF-installed water pumps and latrine blocks), some catering to both refugees and the local population from Gado village. The transect walks also provided the opportunity to talk with beneficiaries.

During the third day, the evaluation team visited the village of Garga Sarali, where approximately 9,000 refugees live side by side with around 5,000 locals, either within host families or in clusters on the edges of the

village. The first refugees from the Central African Republic arrived here during the first crisis in 2004–05; the majority, however, arrived in 2013. UNICEF started a WASH response in the village in 2013. At the beginning, UNICEF focused on humanitarian interventions: drilling boreholes, installing handpumps and building latrines. Soon, UNICEF began shifting its approach to a more medium- and long-term perspective, installing a solar-powered pumping station to serve 10 water points within the village (better placed for locals than for refugees) and setting up a reasonably reliable management and maintenance system for it. A similar solar-powered system was set up by UNICEF, also at the hospital level, to support the cold-chain room and a nearby barber/phone charging booth. Additionally, UNICEF expanded the coverage of its countrywide Community-Led Total Sanitation (CLTS) hygiene promotion programme to the village and the refugee communities. One transect walk, carried out by the evaluation team together with two representatives from the local WASH management committee (including one woman) and the president of the refugee committee, allowed visits to several installations and initiatives. It also provided an opportunity to talk with several beneficiaries and a chance to gain an understanding of the evolution of the UNICEF response.

During the second week, the evaluation team flew to Maroua, in the Far-North Region, where the core of the response to the Boko Haram crisis is located. Due to limited availability of UNHAS flights, the team was only able to spend around 30 hours in the area. Notwithstanding this time constraint, the team was able to meet and interview several UNICEF and external actors. One evaluation team member was able to join a half-day UNICEF visit to the Minawao refugee camp (with 60,000 people) and to the village of Zamai, where a number of refugees are integrated with the local population.

The evaluation team dedicated its last two days in Yaoundé to reviewing and beginning the preliminary analysis of the information and data collected during the visit, finalizing some key informant interviews and preparing a presentation for the exit debriefing. The latter,

attended by the UNICEF Representative and the Chief of WASH and Chief of Planning, Monitoring & Evaluation, was an opportunity for the evaluation team to share the preliminary findings of the visit, have them endorsed by the UNICEF attendees and expand the discussion with additional contextual and technical information.

Details of any country-specific challenges, limitations and changes

Overall, the visit was quite successful, and no major problems compromised its roll-out. The overall time spent by the evaluation team in Cameroon was 11 days, including the weekend; this naturally limited the number of sites visited and people met. Specifically, the option of visiting the Far-North Region during the first week was hindered by logistical problems, a resulting reduced flight schedule and a backlog of passengers on the flight waiting list. With increased flight availability, the team may have had more chance to undertake field visits in the Boko Haram-affected areas. Additionally, ITAD security

constraints prevented the evaluation team from visiting some of the border areas with Nigeria, where numerous WASH interventions are implemented.

Unfortunately, the evaluation team did not have the chance to observe any CLTS and hygiene awareness initiatives at field level, which, given the importance of this approach and the way it has been adapted to include refugees and displaced people from the two humanitarian crises, proved to be a constraint. The ability to better understand the strengths and weaknesses of the application of CLTS would have enhanced the team's ability to address the evaluation questions.

Finally, the government cancelled the team's meeting with the Regional Delegations and Districts of Health (MINSANTE) in Maroua. This would have contributed to an understanding of quality aspects of programming, because these groups support monitoring of the boreholes and the declaration of 'Open Defecation-Free' (ODF) villages.



5. FINDINGS AGAINST EACH SUB-EVALUATION QUESTION

EQ1 To what extent has UNICEF achieved quality, including equity and inclusion, in WiPC?

When looking at this question of quality, it is useful to bear in mind the objective from the WASH CPAP (Country Programme Action Plan) logframe, which was “vulnerable populations in the target municipalities have equitable and sustainable access to drinking water supply, adequate basic sanitation infrastructure and appropriate good hygiene practices.”¹⁰ The following section looks at how aware UNICEF and its partners are of standards; coverage; equity and protection; context appropriateness; and reliability and use.

SEQ1.1 To what extent have UNICEF staff and partners been made familiar with and able to apply the relevant normative frameworks and agency and sectoral standards for WiPC?

All the partners and UNICEF staff who were interviewed were aware of some sectoral standards. The primary one mentioned was SPHERE. The indicators interviewees most frequently mentioned were volume of water and the number of people per latrine. What was more important to partners was the quality of construction of the infrastructure that they were responsible for. There was no mention of the Core Commitments for Children (CCCs) by any of the actors interviewed.

In the case of the number of people per water point, the government standards (up to 300 people per water point) are higher than SPHERE standards (500 people per water point). SPHERE is used in refugee and internally displaced person sites and the government standards are used in host communities. The UNICEF country office has also worked alongside the government to develop guidelines. For example, in 2015, UNICEF supported the elaboration and endorsement of a national strategy on CLTS, a national water

policy, a national hygiene policy and a methodology for the execution and control of drinking water infrastructure construction. Currently, UNICEF provides technical and financial support for the development of a national sanitation marketing strategy paper.

The sectoral meetings are an important place for UNICEF to agree on and share standards. The WASH sector co-lead confirmed that they use SPHERE standards in emergencies. One UNICEF staff member said, “We use WASH cluster coordination tools for access to water, sanitation and hygiene WASH. Those standards are part of the GWC tools.” They also added that UNICEF supported an important event for the WASH sector: “There was a training carried out at the beginning of the crisis with the support of the regional office for all stakeholders and partners where we agreed the tools we would use.” In addition to this, during each crisis in Cameroon the WASH sector has convened a workshop to get partners together to agree on common approaches, including emergency WASH strategies.

SEQ1.2 Service level: In its WASH programming in protracted crises, to what extent has UNICEF achieved adequate provision of WASH services for men, women and children?

The main data to track WASH programming in Cameroon are found in the UNICEF Results Assessment Matrix (RAM) reports. The indicators track progress against the Country Programme Action Plan, which runs from 2013 to 2017. The country plan was written before the different emergencies began to have an impact on programming. It appears that, for certain indicators, the new emergency WASH outputs were added to existing development targets, making it even more difficult to extract meaningful data.

¹⁰ WASH logframe from the 2013–2017 CPAP document.

The evaluation team was provided with RAM data. Looking through the data, it is not possible to plot trends or determine coverage, because each year is presented in a different format. This is due to changes in the RAM formats that are sent from headquarters to the country office to complete. For some years, in annual country reports against the indicators' targets have been given as a percentage of an unknown baseline number; in later years targets are actual numbers (not percentages). It is also unclear how the country office measures improvements for each indicator, because the project areas have seen big changes in population numbers due to the influx of internally displaced persons and refugees. The country office did not provide progress against the CCCs, because these were not part of the country programme indicators.

UNICEF asks implementing partners with contracts linked to the emergency programme to report against indicators that are consistent with SPHERE. One partner reported, "We have standards to reach, such as 20 litres of water per day per person and 30 people per latrine to reach that are given to us by UNICEF." These are made clear in the Programme Cooperation Agreement (PCA) along with reporting commitments. The same partner was also honest in their assessment that they didn't reach these standards.

As well as reporting outputs, the partners carry out bacteriological analysis of borehole water at the Pasteur Centre in Yaoundé, which is a government requirement before quality can be endorsed. Other physicochemical parameters are also tested.

The government plays a significant role in applying and monitoring standards and has staff that accompany or carry out their own field visits to check the quality of UNICEF partner installations. In April 2015 there was a two-day workshop convened by the Ministry of Water and Energy, with support from UNICEF and UNHCR, to consolidate data on WASH

coverage in seven refugee sites. The workshop was attended by the key WASH development partners who were responding to the emergency. The report from this meeting provided a snapshot of the service level of key WASH indicators, such as volume of water per person, number of latrines and number of bathrooms.¹¹

The activities of UNICEF seemed to fall short in the refugee camp in Kolofata. One key informant said that UNICEF's response was unsatisfactory. UNICEF received Central Emergency Response Fund (CERF) funding in 2018 to drill boreholes to allow Médecins sans Frontières to phase out water trucking. The project was due to take six months but eventually took more than a year to finalize because of issues with contractors and administration details. Another informant also felt that UNICEF was not well set up to deal with emergencies, and that their efforts in Minawao camp before 2015 – when UNICEF handed over its responsibilities for WASH to UNHCR – were of poor quality. The small field office in Maroua was focused on development at the time and struggled to scale up to the demands of the emergency. An evaluation report on Nigeria drew the same conclusion: "The programme was too focused on development, especially in 2015."¹²

SEQ1.3 Equity and protection: In its WASH programming in protracted crises, to what extent has UNICEF achieved safe and equitable access to WASH services and facilities?

Cameroon is known for its high level of gender inequality and is ranked 132 out of 151 countries in the UNDP gender inequality index,¹³ which undoubtedly has an impact on achieving equitable access to WASH services. The main objective of the WASH strategy is to provide equitable access to vulnerable populations.¹⁴ However, given this, it is difficult to see how these populations are targeted and measured. Reports from partners do not

¹¹ UNICEF, *Rapport atelier harmonisation et planification 2015 du secteur WASH dans les régions de l'Adamaoua, de l'Est et du Nord*.

¹² Nigeria+ crisis: draft annex 4 on Cameroon (in French).

¹³ UNDP, *Table 5: Gender Equality Index*.

¹⁴ WASH logframe from the 2013–2017 CPAP document.

provide disaggregated data, and there is no mention of any adaptations for people with disabilities. This is backed up by data from the UNICEF self-assessment, stating, “the collection of data disaggregated by gender and disability is not always done for projects implemented by the WASH programme.”

In March 2016, as part of the response to the Nigerian refugee influx, UNHCR and UNICEF hosted a meeting to harmonize approaches to latrine design. As part of this workshop, there was a group that looked at the design of institutional latrines. It was agreed that latrines should be gender sensitive, accessible for all (ramps where required) and have a locking device.¹⁵ However, discussions with UNICEF partners showed that equity was limited to providing separate latrines for men and women. One partner commented that, “UNICEF recommended equitable access to newly built latrines, but it was not always possible.” Representatives from the government said that UNICEF does not provide latrines for people with disabilities, and transect walks in the camps and villages did not reveal adaptations or designs for people with particular needs.

School latrines were of a standard design, and during the transect walk most of them were locked. The ones that were accessible did not have any specific adaptations for children. Other evidence supporting this observation is provided in a recent evaluation: “The inclusion of vulnerable people is the main criterion for WASH intervention. However, there are vulnerable people in vulnerable communities whose needs are not clearly reflected in WASH interventions, nor for access to drinking water, nor for the construction of latrines. No specific action or recommendation has been put into effect.”¹⁶

The emergency latrines visited in the camps and villages were not equipped with locks or lighting, but in the limited time available it was not possible to get a deeper understanding of whether this was a problem for vulnerable

groups (see Figure 1: Emergency communal latrine, village of Zamai, Mayo-Tsanaga). The latrines were all built within a short distance to living spaces (<20m), and access was not raised as an issue.

A key approach for UNICEF improving access to sanitation is to support CLTS. This is a national strategy which is supported by the government. It has been used in emergency settings in partnership with the NGO ADRA, among others. The CLTS approach makes each person responsible for digging their own latrine and provides the materials necessary to construct it. A reflection from the partner is that there are “challenges for vulnerable households to comply with the CLTS approach.”

Figure 1: Emergency communal latrine, village of Zamai, Mayo-Tsanaga, Far-North Region



It was noted in Garga Sarali that the new water points were built next to the road and served the existing community and that the furthest distance to walk was for the refugee

¹⁵ UNICEF, *Rapport des travaux de l'atelier d'harmonisation des types de latrines en faveur des réfugiés Nigériens à l'extrême-Nord (Cameroun)*, March 2016.

¹⁶ UNICEF, *Evaluation du Programme UNICEF WASH Cameroun 2013–2016, rapport d'évaluation finale*, 2017.

community. However, access to water was within the SPHERE standards of less than 500m to the furthest household. Water points in the camps all had the same design.

There was limited evidence available of the implementation of a menstrual hygiene management (MHM) programme. When speaking to a female key informant about MHM in schools, she said that there were no considerations for this, and when girls had their period they had little choice but to stay at home. The main provision for MHM is the inclusion of disposable hygiene products in the hygiene kits distributed to internally displaced persons. It was not possible to assess whether the items were culturally appropriate or used. A positive aspect of inclusion was the involvement of women in the water point committees. During the visit to Garga Sarali, the evaluation team met the female treasurer who collected funds from the users. In a socio-cultural context where participation of women in decision-making activities is not the norm, this is an achievement.

SEQ1.4 Context appropriateness: In its WASH programming in protracted crises, to what extent has UNICEF achieved relevant and appropriate responses that meet the needs of the population?

In the village of Garga Sarali, where a large influx of refugees from the Central African Republic had overwhelmed the existing facilities, additional water points had been installed. The water committee met with families to decide where to put the tap stands. Consultation with populations was also noted in projects in Adamawa and the East Region for CLTS and latrine building. There was general involvement of the local population in positioning and awareness initiatives, according to the partner Afrique Solidarité.

As mentioned in Section 1.1 above, the government plays a strong role in programme design and monitoring. This was the case in developing hygiene promotion tools for CLTS

projects. The Ministry of Public Health and the Ministry of Water and Energy were consulted in the design of the hygiene promotion tools to ensure that the software was adapted to the context. A UNICEF staff member reported that, "The regional delegation helps to transform messages that the population can understand."

Another example of positive involvement of the community was given by partner Association Citoyenne pour le Développement du Cameroun working in the Far-North Region, where they carried out a preliminary assessment with local administration and local leaders to help to understand local customs. This led to success with their CLTS programme, with coverage of latrines increasing from 42 per cent to 100 per cent, and construction of 8,133 household latrines.

The national strategy on CLTS is that sanitation should not be subsidized in most cases, although subsidies can be used to ensure that the poorest are reached. A number of key informants questioned the appropriateness of using the CLTS approach in an emergency setting where – even though there is acceptance that materials such as a squat plate can be provided – actors do not have the ability to pay for materials. The evaluation report from 2017 noted that "The materials used for the household latrines are not sustainable and are destroyed, even more importantly the physical context is very hard. The early destruction or non-functionality of latrines does not encourage others to construct their own latrine."¹⁷

A greater challenge seems to be the integration of sanitation and hygiene promotion activities with water supply activities, which was noted during visits to schools. A short case study is given in Box 1, below.

¹⁷ UNICEF, *Evaluation du Programme UNICEF WASH Cameroun 2013–2016, rapport d'évaluation finale*, 2017.

Figure 2: Broken rainwater harvesting system at a school



The evaluation team looked at how the community could provide feedback on the services they had received. The best example of this is the water point committees, which still seemed to be functioning. At a school level there is no obvious mechanism which allowed users to contribute to design decisions or provide their views. One example was at the school visit in Garga Sarali, where a new toilet block had been constructed with funding from the Ministry of Water and Energy. It was locked and remained unused, because no one knew where the keys were. UNICEF would be in a good position to advocate with the ministry to get the latrines into service, given the current high ratio of users to available latrines.

Box 1. WASH in schools case study

Data collection: Transect walk

Location: Garga Sarali, Department of Lom-et-Djérem, East Region

Person interviewed: Head teacher

School details: 563 children aged 6–14 years. 143 of the children are refugees.

Toilets available: 4 doors. Ratio of latrines to users: 1:140

Observations: Latrine constructed by UNICEF. Girls and boys use the same latrine. Toilets could be locked from the outside. Teachers had a separate latrine. Cleaning carried out by a rotation of the schoolchildren. Parents collect money for repairs to latrine but the water collection system is broken. Handwashing not working. Broken tap and toilets were unclean.

SEQ1.5 Reliability and use: To what extent have WASH services provided/supported by UNICEF been reliable?

Water points

The water point installations had the best provision for maintenance, either through contractors or water committees. All the water points visited were installed or rehabilitated by contractors who were responsible for maintaining them for a year after the work was completed. The types of handpumps installed by contractors are India Mark II and Vernier; both are makes that are familiar to repair technicians (see Figure 3). This is a key factor in ensuring reparability and continued use.

The handpumps visited in Gado camp had been in place for five years and were still functioning. The role of the water committee was to collect money from each family who accesses water (100 CFA/family/month) and to arrange the necessary repairs. The same system was seen in the village of Garga Sarali. The handpump in the photo had been repaired twice in the last month using money collected by the water committee. The treasurer showed the accounts for operating and maintaining the water points.

Over time, UNICEF has advocated for individual water points to be replaced by small-scale water systems that store large volumes of water in a water tower. Solar power has been introduced for the water pumps to replace reliance on fuel-powered generators. This has increased the sustainability of the system. “Things improved significantly when a water supply tower was installed in 2015,” one key informant noted during the transect walk.

Figure 3: Handpump in the village of Garga Sarali



Another key initiative to ensure the reliability of boreholes is their mapping by UNICEF. In Cameroon there are not many aquifers, but those that are present are large. After several failed attempts at drilling boreholes, UNICEF stepped in to support the government in mapping boreholes. This helped the government obtain better information regarding the level of the aquifers and plan water supply interventions more effectively.

Latrines

In Gado camp, the emergency latrines built by UNICEF in 2014 still have some capacity and are in use. It was reported that up to five families use each communal latrine. The size and design of the latrines has ensured their sustainability. However, when asked what happens when the latrine becomes full, the key informant did not know whom to contact. The design of the emergency latrines in the village of Zamai in Mayo-Tsanaga in the Far-North Region were of a far more temporary nature. Given that the refugees had been there for more than four years, it was unclear why a more permanent solution had not been sought. Although UNICEF has since handed over responsibility for WASH facilities in the camp to other partners, it was suggested that UNICEF was unable (at the time or subsequently) to fund more sustainable solutions. As the photo below shows, the slab is no longer supported properly by the substructure. This was caused by soil erosion during the rainy season. When the partner was

asked what plans they had to address this issue they said it was unlikely to improve due to lack of funding.

Figure 4: Emergency latrine in Zamai, Mayo-Tsanaga, Far-North Region



EQ2 How well has UNICEF exercised its leadership and coordination roles for WiPC?

SEQ2.1 At individual crisis level in-country, to what extent has UNICEF provided effective coordination of the WASH Cluster, and effective support to nationally led WASH sector coordination mechanisms?

Prior to the crises in the East and the Far-North Regions, UNICEF WASH had a close working collaboration with the Ministry of Water and Energy and the Ministry of Public Health at the national level, and with their respective delegates at the regional level, for the implementation of its development-oriented programme. UNICEF's leadership in the WASH sector in Cameroon was underscored by its role in the elaboration of the national strategy for Community-Led Total Sanitation (CLTS) and its guidelines (2015), support for the development of the National Water Policy (2017), the inventory of WASH infrastructures, the development of the WASH database, and, more recently, technical and financial assistance for the elaboration of a national sanitation marketing strategy paper.

With the beginning of the two crises in 2013–14, the need to coordinate the growing number of actors in the humanitarian response increased. Notwithstanding the arrival of OCHA in the country in 2014 and UNICEF activation of an L2 response for the Boko Haram crisis in the North Region in March 2015, no formal cluster system was activated in Cameroon for the two crises.¹⁸

In a country with relatively strong and stable institutions, the Ministry of Water and Energy took the lead for WASH sector coordination, both in Yaoundé and in the regions, through its delegates. UNICEF has been co-leading the process and assisting Ministry representatives to various degrees, based on their capacities and experience. Double-hatting of UNICEF programme staff contributing to sector coordination has been the norm; the same is valid for other sectors' leading agencies/organizations.

In Yaoundé, the UNICEF WASH specialist works closely with the Ministry of Water and Energy on preparing, chairing and following up on monthly sector coordination meetings. His role and performance as co-lead have been appreciated, although his limited decision power during the meetings has occasionally slowed down some processes when the WASH Chief was unable to attend. Several key informants underlined UNICEF's successful performance as WASH sector co-lead and indicated this as an area where UNICEF has been able to demonstrate its sector leadership.

The main 4Ws ('who, what, where, when' reporting) cover the whole country. For the East and Far-North crises, this reporting happens in the field and is consolidated in Yaoundé before being shared at the regional level. This component of the coordination work done by UNICEF WASH has been quite comprehensive and appreciated by participating organizations. Inevitably, however, without the formal activation of the

cluster system, the coordination format for the sector is less strict, and the 6+1 core functions¹⁹ of the full-fledged cluster approach have been implemented on an ad hoc basis. Tools for information sharing and assessment were provided by the Global WASH Cluster; the latter also organized a sector-wide training on field assessment. Additionally, the UNICEF WASH Regional Advisor supported a training for the cholera response, and UNICEF collaborated with UN Women for the delivery of a training on menstrual hygiene. While these capacity-building initiatives were clearly appreciated, they appear limited, given the time span of the two crises of nearly six years.

In Bertoua, the Ministry of Water and Energy delegate has been quite active, leading WASH sector coordination at the regional level. In September 2019, UNICEF did not have a WASH specialist in Bertoua, because the position was vacant;²⁰ when the position was occupied, it was reported that this person worked closely with the Ministry delegate to co-lead the sector. Given the presence of refugees, UNHCR – which through its partners runs all operations within the Gado camp (with around 25,000 people) – plays an active role in WASH sector meetings. Because the humanitarian crisis stabilized into a protracted under-development context by 2016, OCHA was never present in Bertoua. UNICEF soon ended its partnerships with NGOs to re-focus on development-oriented collaborations with the Ministry of Water and Energy and the Ministry of Public Health. For these reasons, the relevance of WASH sector coordination somehow decreased. The effort by the Ministry of Water and Energy delegate to keep it running should be appreciated, however, because in light of possible new problems in the Central African Republic, a new influx of refugees is a potential scenario. This could eventually require an expansion of operations.

In Maroua, general coordination has been the responsibility of UNHCR for a long period of

¹⁸ As indicated, cluster coordination was activated in Bamenda and Buae for the 2018 Anglophone crisis in the North-West/South-West Regions (not covered by this evaluation). UNICEF took the lead for the WASH Cluster.

¹⁹ These are: i) supporting service delivery; ii) informing strategic decision making; iii) planning and strategy

development; iv) monitoring and reporting; v) contingency planning, preparedness and capacity building; and vi) advocacy. The +1 is accountability to affected populations (AAP). From GWC website: <https://washcluster.net/about-us>.

²⁰ The position was subsequently filled in November 2019.

time. In 2018, following complaints by several actors about “UNHCR coordinating only its implementing partners and not focusing on non-refugee beneficiaries,” as well as the strengthening of OCHA capacities in the country and in the Far-North Region, the latter took over general coordination responsibilities outside camps. Additionally, here UNICEF co-leads the WASH sector coordination; given the limited capacities of the local Ministry of Water and Energy delegate, UNICEF’s role and leadership have been broadly appreciated. The WASH specialist based in Maroua double-hats for programme implementation and coordination; given the large size of the area covered by the response (the North and Far-North Regions) and the security challenges affecting movements on the ground, his capacities appear overstretched.

WASH sector coordination exists also in Kousseri, in the Far-North Region, just across the border from N’ djamena (Chad). This setup was initiated due to the presence of several local WASH organizations – some of which have been or are UNICEF implementing partners – working in areas close to Lake Chad that are very difficult to reach from Maroua, for logistical and security reasons. The UNICEF WASH specialist from Maroua normally leads these monthly coordination meetings, traveling to N’ djamena and crossing the border back into Cameroon with the support of UNICEF Chad. While this effort is important, it adds to the overstretching of his capacities.

The provider of last resort concept, embedded in the cluster approach guidelines, states that UNICEF would fill any identified gap in the humanitarian response. This is not well understood and has not been properly discussed in Cameroon. Given the less strict structures and processes of the local WASH sector coordination, the 4Ws approach helps identify programmatic gaps, and, to a certain extent, potential candidates for filling these gaps. Yet this is far from holistic. Certainly the major financial constraints which affect the UNICEF response, and that of the broader international community, have limited the capacity to fill all gaps and meet all needs.

EQ3 How well has UNICEF monitored and reported the results of its WASH programming in protracted crises?

SEQ3.1 How well has UNICEF monitored and reported WASH outputs and outcomes, and what does this tell us about changes in the lives of affected populations associated with WASH actions?

UNICEF has comprehensive systems in place to ensure that partners make regular reports about their project activities. The type and frequency of partner monitoring is agreed on when contracts are negotiated. One partner confirmed, “Monitoring is discussed with implementing partners from negotiation phases, and MoH/MoWRE [Ministry of Public Health and Ministry of Water and Energy] are involved.”

The report formats that were seen from partners were all in different formats. Given the diversity of formats and difficulty of aggregating these data, it is hard to see how analysis could be carried out that could inform programming decisions. However, the reason and logic for reporting is understood well by field staff. As one staff member described, “We have an annual work plan. We have the results that we want to achieve; these are linked to indicators (baseline and expected outcome). We have tools for monitoring so can say at the end of the year where we are and if we reach the target.” Data are therefore being collated on an annual basis and used to measure progress against baselines.

The frequency of reporting during the emergency phase was reported by some partners as being up to weekly, which, depending on detail, is quite onerous for them. More frequently, reporting is monthly or every quarter, depending on the length of the programme.

From the example reports seen by the evaluation team, the level of reporting was at the output rather than outcome level. As one partner pointed out, this is normal during an emergency phase, because they only had short contracts of 4–6 months’ duration. There was limited evidence from which to draw any

conclusions about the changes in the lives of the affected population. One drawback in the sites visited is that a long period of time has elapsed since implementation. There was some anecdotal evidence from one partner, who said that there were “lower disease rates thanks to UNICEF WASH interventions, and other communes are asking for the same type of intervention.” A representative from the Ministry of Water and Energy also said that changes in lives are “not formally recorded but the population are obviously happy as they have water!” They said that health data could be checked at health centres, but this was outside the scope of the evaluation team’s visit.

Each partner the evaluation team spoke to said that UNICEF carried out regular monitoring visits. One partner reported that “UNICEF carries out field visits to confirm inputs are as reported. We provide monthly reports on progress. They have visited three times since October 2018.”

One of the limitations to adequate monitoring is current staffing levels, especially in Meroua, which has one WASH specialist to cover both the North and Far-North Regions. A senior staff member said, “We don’t do enough monitoring post-project either with IPs [implementing partners] or private contractors.” Another reflection of UNICEF staff was that data collection is too development-oriented, which is not effective for humanitarian interventions. There have also been challenges in trying to obtain accurate internally displaced person and returnee figures. Another UN representative expressed a similar view about UNICEF’s capacities to monitor WASH interventions in the refugee camp, saying that it was very poor and that there was only a scarce presence in the field. It is to be noted that UNICEF stopped operating in refugee sites in 2015 after an agreement with UNHCR.

The government plays an important role in monitoring standards and has a role in inspecting quality during construction and at the handover stage of WASH infrastructure projects. One partner said, “Government came to the field to check.” UNICEF staff also backed up this viewpoint in interviews, stating

that they work with the Ministry of Water and Energy nationally and regionally. Each facility constructed by a partner or contractor must be endorsed by the relevant ministry.

In the case of verifying that a village has obtained ODF status, Ministry of Public Health delegates would be part of the team that carries out this task. A UNICEF staff member said, “The government is strong and has their strategy. You don’t have a choice but to work through them. Everything we do is with them. This is helpful as if the government doesn’t endorse a facility you have a problem. If they do then you have their support.”

EQ4 To what extent has UNICEF had the capacity to implement a timely and effective WiPC response?

SEQ4.1 To what extent have UNICEF Preparedness, HR, WASH Field Support Team and surge capacity systems been fit for purpose in responding to WASH in protracted crises?

At the beginning of the Central African Republic refugee crisis and the Boko Haram crisis, in 2013–14, UNICEF Cameroon was largely implementing a development programme, in close coordination with various governmental counterparts. UNICEF’s capacities for emergency preparedness and response were limited; the same was true for other UN agencies and local and international NGOs. Preparedness was integrated within the country programme cycle in 2014, when the office initiated some work on preparedness, based on the old Emergency Preparedness and Response Planning (EPRP) policies and the Early Warning/Early Action platform. However, according to senior country office staff, it was more a ‘tick the box’ approach than a real staff-engaging internal process.

In the East Region, the situation shifted rapidly back into a chronic under-development crisis. No corporate activation of L2 or L3 response took place, and preparedness was never addressed in a consistent way. A small contingency stock exists in Beroua, within the Ministry of Water and Energy warehouse; this can be activated during the rainy season for

small-scale WASH responses to local floods. While the situation in this area is currently stable, the crisis in the Central African Republic is far from over and re-emergence of violence with consequent displacements of people, including across the border into Cameroon, is still a realistic scenario.

In the Far-North Region, the WASH section established some small-scale contingency stocks in Maroua, partially shared with and managed by the Ministry of Water and Energy, and started developing a network of long-term agreements (LTAs) with local providers for WASH items and materials. This initiative was not specifically linked to any holistic, multisector UNICEF preparedness and response plan. These stocks proved to be an asset for responding to sudden floods and also to cholera outbreaks; while useful, however, and still in use, their size in terms of numbers of beneficiaries potentially covered is considered too small for a possible medium- to large-scale humanitarian response.

The activation of an L2 corporate response in March 2015 (with increased access to funds, human resources and technical assistance from the regional office) offered UNICEF the opportunity to shift gears into a comprehensive humanitarian programme and more consistent preparedness initiatives (essential, given the volatility of the situation in Nigeria). This happened only to a certain extent, though. The country office, and specifically the WASH section, made hardly any use of the potentially available human resource surge (see below) and developed a humanitarian response based on its limited available resources. WASH interventions took place in partnership with national and international NGOs, although, to a very large extent, infrastructure-building initiatives (boreholes, water networks, etc.) were commissioned to private companies, with no involvement of local communities (see below), and with variable success.

The Chief of Field Operations and Emergency attempted in 2016–17 to work with programme sections to develop specific humanitarian strategies, including associated costs, but this approach was flagged by an audit as potentially creating a parallel process to the

Country Programme Document (CPD). As a consequence, this initiative ended.

The situation changed in 2018, with the beginning of the Anglophone crisis in the North-West/South-West Regions (an L2 was activated for this from December 2018–August 2019), and the concomitant roll-out of UNICEF's new Emergency Preparedness Policy (EPP) and platform. A five-day training on L2 standard operating procedures was organized for the office, and the human resources surge mechanism began to be utilized to staff the new field offices in Bamenda and Buae.

Although due to its nature the EPP is still considered a parallel process to the regular country programme cycle, and it is not formally linked to it in terms of financial planning, this became the main approach for scenario analysis and preparedness. Emergency focal points in all programme sections got more involved, and in some cases even more than their respective chiefs. With this dedication, a reasonably solid preparedness plan was built on the EPP platform for 2018–19. The WASH section contributed to this, underlining, however, the priority to keep working closely with its governmental counterparts. There is no contradiction here, and the close collaboration should be an opportunity to engage the relevant line ministries in additional preparedness processes and initiatives and eventually provide them with capacity-building support.

Notwithstanding the activation of the L2 response for the Boko Haram crisis, no human resources surge was utilized in either the North or the East Regions for the Central African Republic refugee crisis. The only exception was a two-month mission by an information management specialist provided by the Global WASH Cluster in 2016. Instead of filling initial staffing gaps with one or more of the available surge mechanisms (emergency response team, standby partners, regional rapid response mechanisms, etc.), the country office opted to look immediately into medium- to long-term human resources solutions to strengthen the capacity of the teams in Bertoua and Maroua, and it established temporary assignment (TA) positions. The main rationale for this decision was the reluctance of

the country office to bring in people with limited knowledge of the local context and with a likely high degree of turnover.

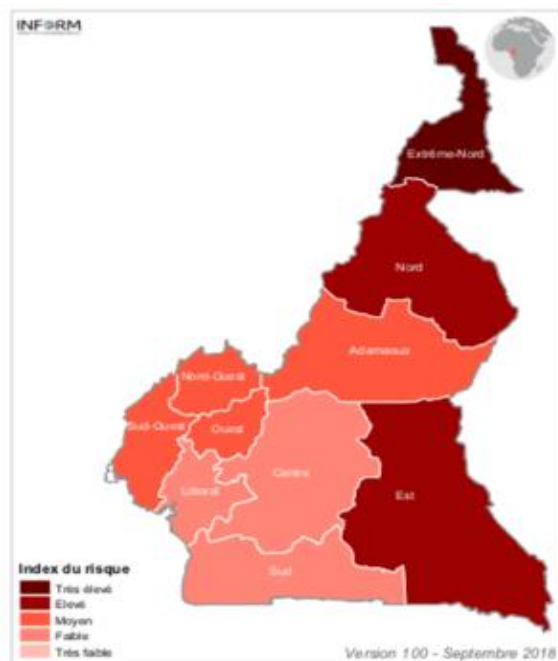
This prompt recruitment of staff on TA was a successful decision and allowed the relatively quick deployment of a stable sector-specific presence in the field office, including for WASH. However, given the size of the areas affected by the crises in the East and Far-North Regions, the security and logistics constraints and the responsibilities related to WASH sector coordination, it appears that the capacities of these staff were soon overstretched. Support from Yaoundé was sometimes available, but with only one P3 Emergency WASH specialist in Maroua (between 2015–17) and one WASH specialist per field office, implementation and monitoring of the humanitarian response was partially affected. Given the high level of risk of new humanitarian crises, especially in the Far-North Region, this human resource capacity overstretching has been described as “a bomb ready to go off.”

The rapid identification of medium-term staffing needs in the emergency areas should be recognized as a best practice; it also reflects some of the guidance provided by the L2 standard operating procedures. It can be argued, however, that the country office could have adopted a more nuanced approach, especially at the beginning of the two crises, by making strategic use of key surge mechanisms available, while pursuing the recruitment of the TA positions. This would have offered the opportunity to activate a stronger humanitarian response. Additionally, by continuing to utilize a key surge mechanism like the standby partner mechanism (these deployments can last up to six months and can be extended to one year, if required), especially in the Boko Haram crisis (for which the L2 activation lasted more than three years), the WASH section could have maintained an increased capacity to expand, implement and monitor its humanitarian programme in the affected areas.

In 2018, with the beginning of the Anglophone crisis in the North-West/South-West Regions, and the consequent activation of an L2 response, the country office adopted a different approach and started making use of

surge deployments to strengthen capacities in the Bamenda and Buae field offices. Ultimately, although somewhat reluctantly, the WASH section also agreed to start tapping into some of these mechanisms for both sector coordination and programme implementation; as a result, five surge deployments were initiated for the WASH sector.

Figure 5: Humanitarian risk analysis by region (from Aperçu des Besoins Humanitaires: Cameroun, OCHA, January 2019)



The crisis in the North-West/South-West Regions (see Figure 5) triggered a more formal humanitarian response (use of EPP and surge capacity) and contributed to an initial change of culture in the office; however, it also shifted some of the already limited humanitarian focus and resources away from the Boko Haram crisis in the Far-North Region. Considering that the latter is still the most at-risk region, as well as the one with the greatest humanitarian needs,²¹ there is room for UNICEF Cameroon to address preparedness and response in a more holistic way, looking at different scenarios for different regions and involving the whole office. UNICEF Cameroon should consider tapping strategically into support from the regional office, standby partners in Geneva and other surge mechanisms.

SEQ4.2 To what extent have UNICEF country offices appropriately developed and managed their partnership portfolio so that it remains efficient, effective and context-appropriate?

Over the years, the WASH section of UNICEF Cameroon developed a close and successful collaboration with the Ministry of Water and Energy and the Ministry of Public Health for the implementation of its development programme. This was centred around a large-scale Community-Led Total Sanitation (CLTS) approach and hygiene awareness initiatives, strengthening access to drinking water and cholera prevention. At the beginning of the crises in the East and North Regions, the need to activate a humanitarian response led the WASH section to establish partnerships with new actors.

In the East Region, purely humanitarian interventions lasted until 2016, progressively shifting into a chronic under-development response. During this initial period, UNICEF WASH established various partnerships with national (i.e., AIDER, ASOL) and international (i.e., ADRA) NGOs for interventions aimed at addressing the needs of refugees from the Central African Republic either in camps or

living within or close to local communities. Pit latrines, water points with handpumps and hygiene initiatives were among the main components of these interventions. Most of these partnerships ended by the end of 2016; some small-scale interventions with ADRA continued until January 2018.

Following discussions with UNHCR, WASH activities in the camps for the Central African Republic refugees were handed over to UNHCR and its partners by 2016, after which UNICEF limited its focus to only refugees living with host communities and the host communities themselves. Progressively, WASH reverted to its regular programme approach, based on collaborations with the line ministry delegates at regional level. Some of the humanitarian interventions were adapted and upgraded into more sustainable initiatives, successfully connecting them to the development programme. By the time of the evaluation team's visit, UNICEF Cameroon had no WASH partnerships in the East Region with either national or international NGOs.

In the Far-North Region, the Boko Haram crisis required a more extensive and longer-lasting network of partners for the implementation of the WASH humanitarian programme. In line with their close collaboration, UNICEF established a committee with Ministry of Water and Energy and the Ministry of Public Health to select three NGOs using UNICEF selection criteria (technical capacity, human resources capacity, methodological approach, geographical coverage, etc.). As in the Central African Republic refugee crisis, UNICEF initially collaborated with UNHCR for some WASH interventions within the main camp of Minawao, which was hosting Nigerian refugees, but pulled out in 2017 to focus on 'out-of-camp' refugees, internally displaced persons, returnees and host communities in the affected areas.

No specific strategy was developed by UNICEF WASH to adapt its partnership network to the volatile situation in the North and Far-North Regions, and the availability of funds was the

²¹ OCHA, *Aperçu des Besoins Humanitaires: Cameroun*, January 2019.

https://reliefweb.int/sites/reliefweb.int/files/resources/cmr_hno_2019_vf_light.pdf

main driving force defining the number, entity, scope and duration of active Programme Cooperation Agreements (PCAs). Because a large share of WASH funding came from the OCHA's Central Emergency Response Fund (CERF), some NGOs complained about the lack of transparency by UNICEF in involving other partners in this approach; besides this and occasional small administrative glitches, however, NGOs were broadly satisfied with UNICEF partnership performance.

To a very large extent, and in agreement with its two line ministry partners, UNICEF WASH used private contractors to carry out interventions requiring construction of water or sanitation infrastructure (institutional latrines, water points, pumping stations, distribution networks, etc.). UNICEF Cameroon WASH has developed a roster of potential contractors for these types of interventions. The rationale for this approach seems to be the lack of valid alternatives (although this has been partially contradicted by the presence in the Far-North Region of a local NGO – Fondation Bethléem – which was apparently able to carry out such interventions); the need to optimize the use of limited funds (similar NGO-supported interventions are normally more expensive); and pressure from government counterparts.

Performance by these private contractors has been variable, with some successful interventions (i.e., solar-powered pump and water network in Garga Sarali) and some unsuccessful ones (a CERF-funded project in Kolofata camp, several cases of short-lived water points). The main argument against these private-sector interventions, mentioned by several interviewees, is the almost total absence of local community involvement in the projects. To a large extent, this lack of involvement jeopardized people's buy-in to the initiatives and their support of the establishment and functioning of the required WASH management and maintenance committees. Ultimately, it affected the sustainability of some of these interventions. The evaluation team had the impression that this reliance on private companies worked better when utilized in parallel and in coordination with NGOs, with the latter focusing on the community involvement

components of the interventions. However, this happened only to a limited extent.

In the East Region, thanks to the stabilization of the Central Africa Republic refugee crisis, UNICEF WASH was able to adapt its partnership network to the contextual changes and to a certain extent progressively include the beneficiaries from the humanitarian crisis (refugees and host communities) in its development response. In the Far-North Region, this adaptation was more difficult, largely opportunistic and driven by availability of finances – or lack thereof. The current situation in the emergency areas is characterized by some partnerships with solid organizations (i.e., Association Citoyenne pour le Développement du Cameroun implementing important WASH projects, in some cases within a broader cross-sectoral framework, locally expanding the CLTS approach to the humanitarian contexts). However, this is coupled with some large coverage gaps due to insufficient resources. Additionally, the excessive use of private contractors – justifiable in some contexts – has partially affected UNICEF's reputation as a humanitarian agency. If financial resources become available, UNICEF should consider a more balanced approach in partnering with NGOs and private companies for its WASH response in the Boko Haram crisis areas.

EQ5 To what extent has UNICEF ensured linkages, coherence and mutual reinforcement of its WASH action in protracted crises with longer-term development objectives?

SEQ5.1 How well has UNICEF's commitment to linking humanitarian and development programming been reflected in its programme planning and design at crisis level?

UNICEF WASH's long-term collaboration with the Ministry of Water and Energy and the Ministry of Public Health for a countrywide development programme influenced its humanitarian work in the East and the Far-North Regions in different ways, both positively and less-positively. While the country office received materials and documents on linking humanitarian and development (LHD) from

headquarters, the WASH team felt that information and guidance was provided specifically for the WASH sector was limited. The information that they did receive largely “confirms what we are already doing” and that “guidance for LHD is ourselves.”

During its field visits, the evaluation team found a mixed set of examples of successful and less successful cases of LHD implementation. In the East Region, where the humanitarian crisis rapidly shifted into an under-development situation characterized by general lack of access to basic services, UNICEF adapted its WASH approach to the new context. For example, in Garga Sarali, long-term water structures and systems were built (i.e., the solar-powered water station and its associated distribution network benefiting the local population and, less efficiently, the refugee community); the involvement and capacities of local communities and water management committees were strengthened, and ultimately the countrywide CLTS approach was expanded to integrate the refugee households. The approach still has some glitches and room for improvement, and it is unclear how extensive its coverage is beyond the main road axis north of Bertoua – where access is greatly complicated by bad roads and impassable during the rainy season.

In the Far-North Region, some initiatives can be considered as best practices for LHD. Thanks to the more assiduous presence in the Far-North Region for the humanitarian response requirements, UNICEF WASH increased its understanding of specific problems and chronic issues affecting the region. A major gap in the knowledge of existing and functioning water facilities led the WASH section to carry out – in collaboration with the Ministry of Water and Energy – an assessment of these facilities. This overlapped with the mapping of cholera hotspots, providing detailed information to guide both water rehabilitation and cholera prevention initiatives. This successful approach was further expanded to cover all four emergency regions (the East, Adamawa, North and Far-North Regions). These maps currently represent a key baseline document for long-term WASH interventions.

A chronic high-fluoride content problem in the majority of water sources in the North and Far-North Regions led to a collaboration between UNICEF WASH and some universities that aimed at identifying long-term, affordable solutions for future interventions. According to UNICEF Cameroon WASH staff, this initiative is still in its initial stages.

Based on its extensive collaboration with private companies for the majority of its WASH infrastructure interventions in the emergency-affected areas, UNICEF developed and shared with key governmental counterparts specific guidelines and monitoring tools for these type of projects.

Finally, in some of its humanitarian interventions in the Far-North Region, in partnership with local NGOs, UNICEF WASH managed to partially bridge the humanitarian-development gap by optimizing the CLTS programme within communities hosting either internally displaced persons or returnees. Longer-term collaborations (PCAs) allowed these NGOs to comprehensively involve the local communities from the initial phases of the project and attain high levels of CLTS coverage, including among internally displaced persons and returnees. Additionally, CLTS has been used as an entry point for cross-sector collaborations with education (school latrines) and health (cholera awareness and prevention). Additionally, communication for development (C4D) tools such as leaflets, posters and videos were developed to promote good practices. Sustainability is enhanced with the responsibility of the line ministry delegates to monitor and certify ODF villages. The reactivation of village ‘cleanup’ days had a positive impact on CLTS.

On the negative side, the over-reliance on private companies to undertake most of the water infrastructure projects – some of which were poor quality and unreliable over the long term – sometimes jeopardized the effective involvement of local communities and the establishment of efficient management and maintenance systems or committees. As indicated (see EQ 4.2, above), while in some cases the utilization of these companies had a valid rationale, the sustainability of the approach was occasionally partially compromised.

In some cases, the expansion of the countrywide CLTS approach to emergency-affected areas was carried out without proper ways (such as cash or food for work) to encourage refugees or internally displaced persons to take it on. This limited the success of these interventions in terms of household latrine numbers and coverage.

The evaluation team gathered the impression that the WASH sector responded to the Cameroon emergencies in a timely manner, with some successful and effective initiatives, but never scaled up a comprehensive humanitarian response. The sector has been relying extensively on its close collaborations with Ministry of Water and Energy and the Ministry of Public Health, even in the framework of its emergency response. This offered the opportunity to rapidly adapt some of the humanitarian interventions into more reliable and sustainable ones and partially bridge the LHD link. However, the tendency to shift rapidly back to development somehow contributed to further lowering the profile of the emergency operations, a problem compounded even more by the chronic shortage of funding.

The Cameroon context – a stable government, relatively strong institutions – coupled with UNICEF's long-term presence and close, effective collaboration with key ministries, could be a testing ground for LHD initiatives and broader strategies. There is probably room for UNICEF WASH to engage its main counterparts in both key line ministries in discussions about the broad perspective of LHD, eventually assisting them and supporting their capacities in areas where weaknesses exist, such as humanitarian preparedness and response.

SEQ5.2 To what extent has UNICEF followed key elements of LHD when implementing WASH action in protracted crises?

UNICEF corporate strategy and guidelines for LHD²² include, among others, a set of aspects

and approaches – specifically covered by this evaluation of WASH in protracted crises – which should be taken into consideration when designing, implementing and monitoring a comprehensive LHD programme. These main aspects and approaches are: i) risk-informed programming; ii) assessment, analysis or resilience plans; iii) flexible/adaptive funding modalities; iv) beneficiaries' participation; v) system strengthening and capacity building of local actors; and v) use of cash-based interventions.

In the case of Cameroon, and, as indicated previously, the performance of the WASH sector, success has been mixed:

1. The evaluation team saw no evidence of formal risk-informed programming.
2. In terms of assessments, the comprehensive mapping exercise carried out first in the Far-North Region and eventually in all four emergency-affected regions, and its consequent overlapping with mapping of cholera hotspots, established an important baseline document for future planning and implementation of WASH interventions within both humanitarian and development responses.
3. The WASH programme had to adapt to chronic funding shortages. The evaluation team saw no evidence of any funding strategy to move LHD forward. It appears that LHD interventions were funded on an ad hoc basis.
4. Beneficiaries' participation was partially successful in interventions implemented by NGOs; in some cases, management and maintenance WASH committees has been set up in a sustainable way. However, the over-reliance on private service providers for WASH infrastructural projects jeopardized to a large extent involvement and buy-in by the local communities.
5. Although some responders mentioned cash-for-work or food-for-work initiatives as a way to better engage refugees and internally displaced persons and returnees

²² UNICEF procedure on linking humanitarian and development programming, PD/PROCEDURE/2019/001. Effective Date: 3 May 2019.

in CLTS interventions, UNICEF WASH did not implement these modalities.

6. CONCLUSIONS

In 2014, UNICEF Cameroon, which for many years had been used to working closely with the government on a long-term development programme, faced big challenges in adapting its culture and approach to scale up the humanitarian response in the East Region for the Central African Republic refugee crisis and in the North Region for the Boko Haram crisis. Both emergencies, with some differences, turned into protracted crises. In the East Region, since 2016 the context has progressively shifted into a chronic under-development situation. In the North Region, while the peak of violence has subsided, humanitarian needs are still evident among the refugee, internally displaced and returnee populations, and among the host communities. In addition, the northern regions are considered the most at-risk areas in the whole country for new crises.

The evaluation looked at how UNICEF Cameroon WASH performed in five broad areas – as defined by the five evaluation questions – in its interventions for these two protracted crises. Acknowledging the limited time available for the country case study, some broad conclusions follow that build on the main findings described in the preceding pages.

EQ1 To what extent has UNICEF achieved quality, including equity and inclusion, in WiPC?

UNICEF provides an essential role in creating space for dialogue around emergency approaches and standards. It has been instrumental in supporting the Ministry of Water and Energy to host workshops where key agencies can meet and agree on current coverage rates and design of WASH infrastructure. There is no official document from the WASH sector that summarizes the standards for WASH in emergencies, but SPHERE is accepted by partners as the key

guidance document. There is no awareness of the CCCs among partners.

It is clear that UNICEF collects a large amount of data from partners to measure coverage against key indicators. What is less clear is how these data are used to plot progress over time, because data across annual reports cannot easily be compared. There are snapshots of information to show that UNICEF is meeting SPHERE coverage targets, but it is not possible to conclude that coverage is consistent over time.

UNICEF has good intentions for implementing equitable programmes, and this is reflected in its WASH strategy. As part of its role as WASH sector co-lead, it has created opportunities for partners to discuss gender-sensitive and disability-friendly designs for infrastructure. These good intentions have not translated into partner programmes, however, and there were limited examples of good practice in this area. One exception is the inclusion of women in water point committees, which is an achievement considering the socio-cultural context of Cameroon.

Water supply is a strong area for UNICEF, and water points which have been in place for more than four years are still in use and performing well. In addition to this, solar panels have been retrofitted to some systems in order to increase their reliability and sustainability over time. The main approach to village-level sanitation is CLTS, which is a sustainable approach and allows refugees and internally displaced persons to make their own design decisions. However, it can provide some challenges for those who are less able to dig or pay for the materials for their sanitation solution. Some partners had success with this approach, whereas others struggled to implement it successfully. The integration of sanitation and hygiene promotion activities alongside water supply activities was not a strong element of programming, and this was especially evident in schools.

By UNICEF's own admission, the use of feedback mechanisms for girls, boys, women and men, including older people and people with disabilities, is an area for improvement.

EQ2 How well has UNICEF exercised its leadership and coordination roles for WiPC?

In terms of leadership, UNICEF WASH clearly plays an important role through its strong and long-lasting collaboration with the Ministry of Water and Energy and the Ministry of Public Health and has been influencing countrywide strategies and initiatives, notably the CLTS approach. The cluster approach was never formally activated in the country, leading to reduced coordination standards and requirements. Nonetheless, the Ministry of Water and Energy and its delegates have been active in setting up and leading WASH sector coordination structures both in Yaoundé and at the regional level. The WASH section has broadly been successful in supporting these structures and processes, in some cases playing a key role wherever this Ministry showed weaknesses. The main focus of the WASH sector coordination has been on the 4Ws, aiming at avoiding duplications and tentatively filling gaps. In addition, UNICEF was responsible for some capacity-building initiatives for the whole sector. Notwithstanding the double-hatting of WASH specialists for this coordination role, and the clear overstressing of their capacities, especially in the North Region, governmental counterparts and other organizations recognized and appreciated UNICEF performance.

EQ3 How well has UNICEF monitored and reported the results of its WASH programming in protracted crises?

UNICEF has comprehensive systems in place to ensure that partners regularly report on their project activities. The reports the evaluation team saw were varied in format, making analysis and interpretation of the data difficult. The majority of data reported was at output level. Given that many contracts were for six or fewer months, it would be difficult to collect any meaningful data on the changes in the lives of the affected populations.

A strength of UNICEF's monitoring approach is the inclusion of government. The government is especially involved in ensuring the quality of WASH infrastructure. This helps to ensure that there is ownership and greater interest in sustaining programme inputs after a project is over.

No examples of how the UNICEF WASH sector used data to change programming were offered by country office staff.

EQ4 To what extent has UNICEF had the capacity to implement a timely and effective WiPC response and coordination?

Before the beginning of the two emergencies, UNICEF Cameroon capacities for preparedness were limited. The WASH sector set up small ad hoc contingency stocks for WASH in collaboration with Ministry of Water and the Environment. These enabled a response to some flood emergencies and a cholera outbreak. The activation of a corporate L2 response for the Boko Haram crisis in the North Region offered the opportunity to scale up the capacity and culture of the whole country office for humanitarian preparedness and response. This happened to a very limited extent, however, because the country office did not implement many of the options and simplifications encompassed in L2 activation and its standard operating procedures. Some attempts to start comprehensively addressing country office and sector-specific preparedness during 2016–17 were not successful. The situation changed only in 2018, with the beginning of the Anglophone crisis in the North-west/South-west Regions of the country and the concomitant roll-out of the new UNICEF Emergency Preparedness Policy (EPP) and platform. At this time, UNICEF Cameroon started working on sounder preparedness plans and better use of options and simplifications linked to this new L2 activation.

Notwithstanding the activation of the L2 in the North Region for more than three years, the WASH section made hardly any use of the human resources surge capacity mechanisms available within the organization. They instead opted to quickly establish medium- to long-

term WASH specialist positions for Maroua and Bertoua field offices. This proactive approach can be considered as a best practice; however, it was insufficient to comprehensively cover the humanitarian needs in the vast affected area, especially in the North Region. The WASH specialists were and still are overstretched. A more extensive, more strategic and more nuanced use of surge mechanisms, especially standby partners, would have offered the opportunity to plan, implement and monitor a more comprehensive WASH response. WASH and other sections started utilizing surge capacity only in 2018, for the Anglophone crisis in the North-west/South-west Regions.

UNICEF WASH's performance in preparedness and surge utilization has been insufficient, especially during the period of the L2 activation in the North Region. Recent developments in the context of the response to the North-west/South-west Regions crisis show a move towards a stronger approach and better utilization of available corporate resources for humanitarian response. However, focus on the North-west/South-west Regions has also meant a shift in the humanitarian focus away from the northern regions, where beneficiary needs and the risk of a new crisis are still very high. There is room for UNICEF WASH to engage key governmental counterparts in WASH preparedness initiatives and processes, including building their capacities. There is also a rationale to start using surge, especially standby partner deployments, to assist in the response to the Boko Haram crisis.

UNICEF WASH's long-term collaboration with its key line ministries has been the stable basis of an otherwise variable partnership networks adopted and adapted during different phases of the two crises. In the East, partnerships with national and international NGOs were largely phased out by the end of 2016, as UNICEF WASH reverted to its collaboration with governmental counterparts. This made sense and allowed it to partially adapt its regular programme to cover these areas. In the North Region – where working with NGOs is still very much a necessity for implementing the UNICEF WASH programme – the numbers, sizes and scopes of partnerships were largely driven by the availability of financial resources. UNICEF

did not follow any strategic plan to adapt to contextual changes. Some of the partnerships were very successful and partially addressed convergence and LHD in a sustainable way. However, due to the magnitude and extent of the crisis in the North Region, large gaps in the humanitarian response coverage remained. With the exception of some CERF-funded projects where UNICEF transparency on distribution of funds to other organizations was questioned, NGOs were satisfied by UNICEF WASH's performance in managing these partnerships.

Private service providers were contracted to implement the bulk of projects involving water infrastructure building. Their use had some rationale from the financial and technical perspective, and in some cases these projects were successful. However, UNICEF WASH relied too heavily on private service providers. Due to their strict product-delivery approach, the involvement and buy-in by the local communities was drastically reduced, and the establishment of water management and maintenance committees was jeopardized. In some cases, the reliability of the approach was gravely affected. This reliance on private contractors should have been better balanced, with NGO collaborations addressing the indispensable involvement of beneficiaries and local communities.

The evaluation team found that the existing strong collaboration with Ministry of Water and Energy and the Ministry of Public Health is an important asset for UNICEF WASH. In future reviews of its humanitarian and development programmes, as well as the increasingly important link between the two, UNICEF should involve these two actors even more closely and eventually assist them in expanding their capacities in areas where weaknesses persist (i.e., preparedness and response, LHD, accountability to affected populations).

EQ5 To what extent has UNICEF ensured linkages, coherence and mutual reinforcement of its WASH action in protracted crises with longer-term development objectives?

The long-term collaboration with the relevant key line ministries – with their desire to revert to the regular development programme –

influenced the way the WASH programme dealt with LHD in the two crises that are the focus of this evaluation. The expansion of the countrywide CLTS programme to emergency-affected areas and to include refugee and internally displaced populations had variable results: where it was implemented with the right partners, it set the basis for successful, sustainable outcomes; in other instances, the evaluation team had the impression that the urgency to implement it led to less reliable results. The mapping of water facilities and cholera hotspots, as well as work on de-fluorination of water in the North Region, can be considered as best practices for LHD. On the other hand, over-reliance on private companies for the construction of water infrastructures limited the participation and involvement of local communities, and thus the chances for a sounder LHD approach in some of the community-level interventions. The evaluation team found that the Cameroon context, with relatively strong and stable institutions and UNICEF's well-established collaboration with key ministries, could offer the opportunity to design and expand a comprehensive LHD strategy and approach.

The evaluation team gained the general impression of reluctance from the country office, including the WASH sector, to shift into comprehensive humanitarian mode when necessary, notwithstanding the L2 activation and the opportunity to strengthen its field presence and capacity. Several good initiatives were implemented but they were never framed by a holistic cross-sectoral strategy. The desire to shift operations back to the usual collaboration with governmental counterparts and tentatively connect the humanitarian interventions with the broad development programme was, to a certain extent, positive and in some cases successful. The Anglophone crisis and the utilization of the

EPP began changing the country office's attitude and culture towards emergency interventions, although it also had the side-effect of shifting part of the humanitarian focus and resources to the North-west/South-west Regions while needs and risks were still very high in the North Region.

A decentralization process (under discussion for several years) is about to be implemented in Cameroon. It will increase delegation of financial and administrative autonomy to municipalities. Given the long-term and solid collaboration between UNICEF and various ministries, as well as with delegates at regional level, this new administrative structure could potentially offer an opportunity to expand both the scope and the coverage of UNICEF's programme at the municipal level. The UNICEF country office is following this process to understand how UNICEF needs to reposition itself, but it is not yet clear how the final decentralized structure will work. By working more closely with municipalities managing their own budget, UNICEF should be in a position to build their capacity for ground-level interventions (monitoring, maintenance, awareness), expanding in this way the coverage of the response – including the WASH response – and strengthening its reliability and sustainability.

ANNEX A: LIST OF KEY INFORMANT INTERVIEWS

Name	Organisation	Position
Arsène Azandossessi	UNICEF	Deputy Representative
Wally Badiane	UNICEF	Chef de Sous Bureau (Chief Field Office)
Manatcheo Baldagai	UNICEF	WASH Officer
Augustin Birba	UNICEF	Deputy Representative Operations
Imane Cherif	UNICEF	Chief of Field Office
Faustin Ekah Ekwele	UNICEF	WASH Specialist
Antoine Haba	UNICEF	Human Resource Office
Belyse Halmata Ngum	UNICEF	Child Survival & Development Specialist
Gregoire Kananda	UNICEF	Chief of Health
Sarah Karimbhoy	UNICEF	Chief Field Operation and Emergency
Jeanne d'Arc Katengwa	UNICEF	Human Resource Specialist
Carol Kungu	UNICEF	Supply and Logistics Specialist
Hubert Onibon	UNICEF	Chief of WASH
Modeste Tiemgni	UNICEF	WASH Officer
Serge Zanga	UNICEF	Chief of Planning, Monitoring and Evaluation
Serge Dia Fopa	MINEE	Chef de Service
Aristide Etoundi	MINEE	Point focal WASH
René Haiwang	MINEE	Regional Delegate of Ministry of water resources, Maroua
Evelyne Nkoantel Mampang	MINEE	Regional Delegate of Ministry of water resources
Ousmane Daibou	AAEDC	Coordonateur
Victor Feujio	ACF	Expert de WASH
Chaneline Makuate	ADES - GADO	Team member (Field visit), WASH Ingeneer at ADES
Josias Chefang Noubi	ADRA	Responsable WASH
Victor Josué Nang Kigwe	ADRA	Comptable
Jules Hubert Tchio	AIDER	Promoteur de l'ONG
Nnjock Salomon	ASOL	Représentant national Afrique Solidarité ASOL
Moussa Adamou	COMITE DES REFUGIES	Team member (Field visit), Président du Comité des réfugiés
Julienne Bazama	COMITE WASH	Team member (Field visit), Trésorier du Comité de gestion
Gaston Bounguene Zoulde	COMITE WASH	Team member (Field visit), Président du Comité de gestion GADO
Adamou Hawoua	COMITE WASH	Team member (Field visit), Vice-présidente du comité WASH
Firmin Ismaël Pounande	COMITE WASH	Team member (Field visit), Commissaire au compte comité WASH
Boukar Beladane	ECDC	Promoteur de l'ONG
Ahidjo	FONDATION BETHLEEM	Responsable des projets
Solaybou Bayero	GADO REFUGEES CAMP	Team member (Field visit), Chief of WASH Committee

Marcelin Kongbo	GADO REFUGEES CAMP	Team member (Field visit), Secrétaire du Comité WASH de GADO
Mylene Ahaounou	HCR	Head of Sub Office, UNHCR, Maroua
Jean Marie Awono	HCR	Associate Protection Officer (Comm. Based)
Kadessou Djarmatna	HCR	WASH Officer
Modou Adji	IDPs	Team member (Field visit) IPDs
Jean Sébastien Munie	OCHA	Chargé des affaires Humanitaires, Chef de Sous-Bureau Maroua
Modibo Traore	OCHA	Chef de Bureau
Mbele Kombo	n/a	Team member (Field visit), Chef canton Mbodomo Ngoura

ANNEX B: LOCATIONS OF FIELD VISITS

Site description	Region	Coordinates	Population of site	Comments
Gado refugee camp	East/ Est	5.74985150N 14.43657193E	~25,000 refugees	including nearby pumping station catering for camp and close-by local community UNICEF WASH interventions ceased in 2016
Garga Sarali village	East/ Est	5.32922908N 14.04825147E	~9,000 refugees ~5,000 host population	including refugee areas adjacent to village
Minawao refugee camp	Far-North / Extrême-Nord	10.5583333N 13.8583333E	~60,000 refugees	
Zawai village	Far-North / Extrême-Nord	n/a	n/a	



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