

Country Programme Evaluation of the 2019-2022 & 2023–2025 UNICEF South Sudan Country Programmes of Cooperation

Inception Report – Final

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ABBREVIATIONS

Abbreviations	
ACF	Action against Hunger
AFD	Agence Française de Développement/ French Development Agency
AFENET	African Field Epidemiology Network
AVSI	Association of Volunteers in International Service
BCV	Breaking the Cycle of Violence
BHI	Boma Health Initiative
BTL	Back to Learning
CEA	Cost-Effectiveness Analysis
CBA	Cost-Benefit Analysis
CFC	Child-Friendly Communities
CMA	Christian Mission Aid
CMD	Christian Mission for Development
CMMB	Catholic Medical Mission Board
CMOC	Context-mechanism-outcome configurations
COAR	Country Office Annual Report
CO	Country office
CNV	Community Nutrition Volunteers
CP	Country Programme
CPE	Country Programme Evaluation
CRPD	International Covenant on Economic, Social, and Cultural Rights (ICESCR), the Convention on the Rights of Persons with Disabilities
CSOs	Civil Society Organizations
CSV	Comma Separated Values
DAC	Development Assistance Committee
DRC	Democratic Republic of Congo
ECD	Early Childhood Development
ECE	early childhood education
EPI	Expanded Programme on Immunisation
ERG	Evaluation Reference Group
ESARO	Eastern and Southern Africa Regional Office
ET	Evaluation Team
FAO	Food and Agriculture Organisation
FDG	Focus Group Discussion
FSNMS	Food Security and Nutrition Monitoring System
GAM	Global Acute Malnutrition
GAVI	Global Alliance for Vaccines and Immunization
GEROS	Global Evaluation Reports Oversight System
GEWE	Gender equality and women's economic empowerment
HIV/AIDS	Human immunodeficiency virus /acquired immunodeficiency syndrome
HR	Human Resources
ICESCR	International Covenant on Economic, Social, and Cultural Rights
ICCM	Integrated community case management
ICCPR	International Covenant on Civil and Political Rights
IMC	International Medical Corps
IRC	International Rescue Committee
KRC	Key Result for Children
MGCSW	Ministry of Gender, Child and Social Welfare

MICS	Multiple Indicator Cluster Survey
MoGEI	Ministry of General Education and Instruction
MoH	Ministry of Health
MSH	Management Sciences for Health
MTCT	Mother to child transmission
MWRI	Ministry of Water Resources and Irrigation
NDS	National Development Strategy
NGOs	Non-governmental Organization
NSPPF	National Social Protection Policy Framework
OAG	Oversee Advising Group
OCHA	Office for the Coordination of Humanitarian Affairs
OECD	Organisation for Economic Co-operation and Development
OLAP	Online analytical processing
PBF	UN Peacebuilding Fund
PFM	Public financial management
PHC	Primary Health Care
PMER	Programme monitoring evaluation and reporting
PMTCT	Prevention of mother to child transmission of HIV
PTAs	Parents and Teacher Associations
RAM	Results Assessment Module
R-ARCSS	Revitalized Agreement on the Resolution of Conflict in South Sudan
RMNCAH	Reproductive Maternal New-born Child and Adolescent Health
RRT	Rapid Response Teams
SCI	Save the Children International
SFE	French Evaluation Society
SDGs	Sustainable Development Goals
SRHR	Sexual and reproductive health and rights
SSCO	South Sudan country office
SSHF	South Sudan Humanitarian Fund
SMCs	School Management Committees
ToC	Theory of change
TOR	Terms of Reference
UN	United Nations
UNICEF	United Nations Children's Fund
UNDAF	United Nations Development Assistance Framework
UNIDOR	Universal Intervention and Development Organization
UNEG	United Nations Evaluation Group
UNFPA	United Nations Fund for Population Activities
UNIDOR	Universal Intervention and Development Organization
UNMISS	United Nations Mission in South Sudan
UNSCR	United Nations Security Council Resolution
UNSDCF	United Nations Sustainable Development Cooperation Framework
USA	United States of America
USAID	U.S. Agency for International Development
VAC	Violence against children
VfM	Value for Money
WASH	Water, Sanitation and Hygiene
WCAR	West and Central Africa
WFP	World Food Programme
WHO	World Health Organisation

1. INTRODUCTION

In accordance with the coverage norms of UNICEF's Evaluation Policy 2018, every UNICEF Country Programme must undergo evaluation at least once during every two programme cycles. As the Government of the Republic of South Sudan - UNICEF Country Programme (2023-2025) nears the end of its implementation, subsequent to the completion of the 2019 – 2022 Country Programme, the Overseas Advising Group (OAG) has been commissioned to conduct an independent evaluation of the two Country Programmes. This evaluation aims to provide empirical evidence of UNICEF's contributions to national development initiatives, as well as assess the effectiveness of UNICEF's strategies in facilitating and leveraging national efforts towards achieving developmental outcomes, whilst addressing humanitarian needs.

This inception report serves as a working document developed in compliance with the contractual commitments and the Terms of Reference (TOR: Annex 1). It delineates the evaluation process, presenting the methodology to be employed, along with the tools and the work plan.

The first activity executed was an extensive document review (see documents consulted in Annex 6), to comprehend the context, rationale, implementation strategy, objectives, and anticipated results of the two country programmes (2019 – 2022 and 2023 - 2025). This comprehensive review facilitated the reconstruction of the programme's Theory of Change (ToC) (section 3.4). The reconstructed ToC was subsequently presented during a workshop and revised based on feedback received, culminating in its validation.

Scoping interviews were also conducted to elucidate the expectations of key stakeholders and to gather their suggestions on focal topics and geographical prioritizations for primary data collection.

Based on the TOR, the validated ToC and the expectations of the stakeholders consulted, the evaluation questions (EQs) were formulated (see Section 7), alongside identifying the most relevant information sources and data collection methods (see section 8.3). This is encapsulated in the evaluation matrix (Annex 2), which specifies the evaluation criteria, indicators, information sources, and methods of data collection and analysis.

The sampling strategy was devised based on information regarding the geographical coverage of the various interventions under the South Sudan CPs and suggestions gathered during preliminary interviews (see section 8.4), with the objective of ensuring efficient data collection.

The submission and validation of this report mark the initial step in the evaluation process. Once validated, the inception report will serve as a guiding document for the evaluation team. The subsequent steps will involve field data collection, data processing and analysis, and the preparation of the evaluation report.

2. COUNTRY CONTEXT

This section provides a comprehensive overview of the general country context, reflecting pertinent situations that have impacted South Sudan during the implementation of the two Country Programmes of Cooperation. It also highlights relevant governmental policies and priorities, as well as the status and needs of the beneficiaries targeted by the Country Programme interventions.

2.1. General country situation

South Sudan is the youngest nation in Africa, having gained independence from Sudan in 2011 following a prolonged civil war and a subsequent referendum that supported secession.^{1,2} The country spans an approximate area of 644,330 square kilometres,³ representing around 30 percent of the pre-2011 Sudanese territory, although the exact demarcation remains to be confirmed.⁴ It is a landlocked nation bordered by Sudan to the north, Ethiopia and Kenya to the east, Uganda and the Democratic Republic of Congo to the south, and the Central African Republic to the west.⁵

With an estimated population of 14,746,496,⁶ South Sudan is characterized by its youthful demographic (74.2 percent under the age of 30), abundant natural resources, and largely agricultural economy. Women constitute 49 percent of the total population.⁷ It is classified as a low-income country, with 63% of the population living below the national poverty line,⁸ and approximately 85% engaged in subsistence farming.⁹

The administrative structure of South Sudan comprises 10 states, which correspond to the three historical regions of pre-2011 Sudan: Bahr el Ghazal, Equatoria, and Greater Upper Nile.¹⁰ These states are further subdivided into Counties, Payams, and Bomas. Upon gaining independence in 2011, the primary administrative divisions included 10 states, which are divided into 86 counties, further subdivided into Payams and Bomas (see figure 1).

¹ ISPI working paper <https://land.igad.int/index.php/documents-1/countries/south-sudan/conflict-5/974-post-independence-south-sudan-the-challenges-ahead/file>

² The World Bank in South Sudan <https://www.worldbank.org/en/country/southsudan/overview>

³ Africa Development Bank. Major Challenges Facing the South Sudan Economy

⁴ World Bank. Report No. 63786-SD Republic of South Sudan: Issues in Urban Development Phase 1 – An Overview of the Urban Landscape in South Sudan Final Report, November 2011

⁵ [Republic of South Sudan - African Union CIEFFA](#)

⁶ 2023 National Bureau of Statistics (NBS) Estimation

⁷ South Sudan UN Common Country Analysis (CCA)

⁸ South Sudan Poverty Profile, World Bank, 2015

⁹ UNICEF Country Programme Document (2019-2021)

¹⁰ Africa Development Bank. Major Challenges Facing the South Sudan Economy <https://www.afdb.org/fileadmin/uploads/afdb/Documents/Generic-Documents/South%20Sudan%20Infrastructure%20Action%20Plan%20-%20%20A%20Program%20for%20Sustained%20Strong%20Economic%20Growth%20-%20Chapter%201%20-%20Major%20Challenges%20Facing%20the%20South%20Sudan%20Economy.pdf>

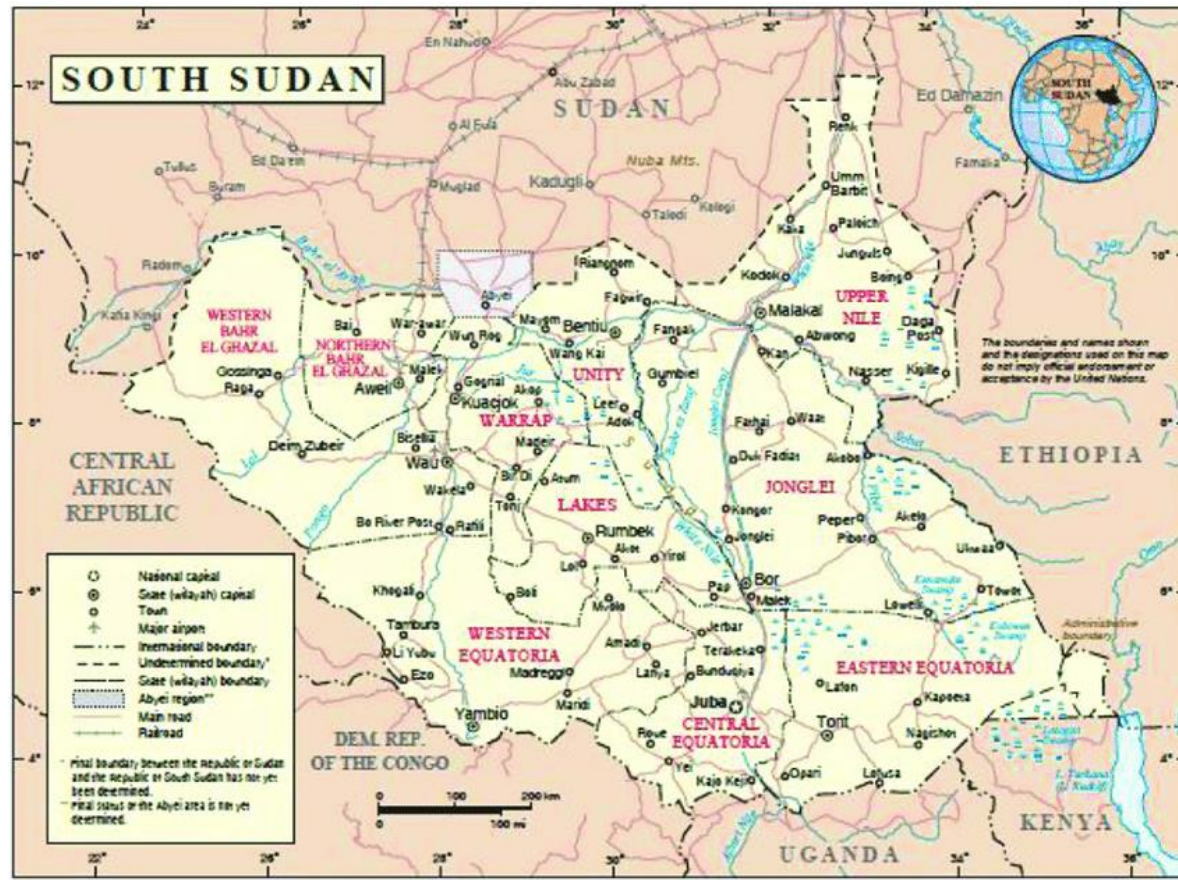


Figure 1: Map of South Sudan

The civil conflicts of 2013 and 2016, along with persistent subnational violence, ineffective management of public resources, and political contestation, have significantly eroded post-independence developmental gains and exacerbated humanitarian needs in South Sudan.^{11,12,13} Despite more than a decade of independence, the nation remains entrenched in fragility, economic stagnation, and instability. Pervasive poverty, amplified by conflict, displacement, and external shocks, continues to be a critical challenge.¹⁴ The signing of the Revitalized Agreement on the Resolution of the Conflict in the Republic of South Sudan (R-ARCSS) in September 2018¹⁵ and the formation of the Transitional Government of National Unity in February 2020 have contributed to incremental stability.^{16,17} The Agreement on the R-ARCSS signed by the parties to

¹¹ The World Bank in South Sudan. 2025 <https://www.worldbank.org/en/country/southsudan/overview>

¹² African Center of Strategic Studies. Envisioning a Stable South Sudan Africa Center Special Report No. 4. 2018. Available from URL: <https://africacenter.org/wp-content/uploads/2018/08/ASR04-EN-Envisioning-a-Stable-South-Sudan-Africa-Center-for-Strategic-Studies.pdf>

¹³ World Bank. Fragile and Conflict-Affected Situations. 2018. Available from URL: <https://documents1.worldbank.org/curated/en/855631522172060313/pdf/124654-WP-PUBLIC-MaximizingImpactLowresFINAL.pdf>

¹⁴ The World Bank in South Sudan. 2025 <https://www.worldbank.org/en/country/southsudan/overview>

¹⁵ IGAD South Sudan Office 2018. [Signed Revitalized Agreement on the Resolution of the Conflict in South Sudan](#)

¹⁶ Accord. Conflict Trends. The Formation of the Revitalized Transitional Government of National Unity in South Sudan. Available from URL: <https://www.accord.org.za/conflict-trends/the-formation-of-the-revitalized-transitional-government-of-national-unity-in-south-sudan/>

¹⁷ African Center of Strategic Studies. Taking Stock of the Revitalized Agreement on the Resolution of the Conflict in South Sudan. Available from URL: <https://africacenter.org/spotlight/taking-stock-of-the-revitalized-agreement-on-the-resolution-of-the-conflict-in-south-sudan/>

the agreement on 4 August 2022 extended the transitional period of the Revitalized Agreement by 24 months, until 22 February 2025¹⁸.

Since 2015, rapid currency devaluation and shortages of basic commodities have resulted in hyperinflation, further compounding the economic hardships faced by the population. In numerous regions of South Sudan, conflict has severely disrupted agricultural production and other economic activities.¹⁹ Poverty is evident in multiple dimensions, including lack of access to life-saving information, clean water, healthcare, education, and the absence of a safety net to support the most vulnerable populations. High poverty levels, coupled with instability, have led parents to prioritize home-based economic activities over education, thus perpetuating an inter-generational cycle of poverty and illiteracy.²⁰ Most child protection, health, nutrition, education, and WASH (Water, Sanitation, and Hygiene) services are predominantly provided by non-governmental organizations (NGOs).²¹

However, the modest economic recovery observed post-peace agreement has been significantly disrupted by the COVID-19 pandemic, unprecedented flooding, the conflict in Sudan, and public financial management challenges.^{22, 23, 24} The economic outlook for South Sudan is now overshadowed by severe shocks to its predominantly oil-dependent economy, underscoring the urgent need for economic diversification.^{25, 26} Given South Sudan's reliance on Sudan as the primary conduit for oil exports to international markets, the conflict in Sudan has notably impacted South Sudan's macroeconomic stability.²⁷ Despite active peace processes, South Sudan remains highly volatile and faces a humanitarian crisis of significant magnitude, particularly affecting the lives of numerous children.^{28, 29} Two principal challenges exacerbating the response efforts are restricted humanitarian access and the inadequate availability and reliability of data.³⁰ In 2017, humanitarian organizations reported 1,159 access incidents in South Sudan, a substantial increase from the 908 incidents in 2016 and 909 incidents in 2015.³¹ Of the 7 million individuals needing assistance in 2018, over half of whom are children, approximately 800,000 lack consistent access to humanitarian aid.³² The inadequacy or absence of up-to-date data further complicates the planning and monitoring of programmes.

¹⁸ Resolution of the RJMEC 2nd Extraordinary Meeting, Beijing Juba Hotel, 1st September 2022, Juba, South Sudan

¹⁹ United Nations in South Sudan. WFP: Economic fallout of Sudan war deepens hunger crisis for millions. 2024. <https://sudan.un.org/en/265976-wfp-economic-fallout-sudan-war-deepens-hunger-crisis-millions>

²⁰ UNICEF. 2020. Strengthening community resilience in South Sudan's urban settings. Pg. 8

²¹ Ibid

²² The World Bank in South Sudan. 2025. Available from URL: <https://www.worldbank.org/en/country/southsudan/overview>

²³ United Nations Human Rights Office of the High Commissioner. Emerging Impacts of COVID-19 on the Human Rights Situation and Peace Process in South Sudan. 2020. Available from URL: <https://www.ohchr.org/en/news/2020/06/emerging-impacts-covid-19-human-rights-situation-and-peace-process-south-sudan>

²⁴ International Monetary Fund. African Dept. and International Monetary Fund. Strategy, Policy, & Review Department. Republic of South Sudan: 2022 Article IV Consultation And Second Review Under The Staff-Monitored Program. Available from URL: <https://www.elibrary.imf.org/view/journals/002/2022/266/article-A001-en.xml>

²⁵ Ibid

²⁶ The World Bank in South Sudan. 2025. Available from URL: <https://www.worldbank.org/en/country/southsudan/overview>

²⁷ International Monetary Fund. African Dept. and International Monetary Fund. Strategy, Policy, & Review Department. Republic of South Sudan: 2022 Article IV Consultation And Second Review Under The Staff-Monitored Program. Available from URL: <https://www.elibrary.imf.org/view/journals/002/2022/266/article-A001-en.xml>

²⁸ UNICEF. Evaluation of the UNICEF Response to the South Sudan Humanitarian Crisis (2016–2019)

²⁹ UN OCHA. 2023 The Sudan crisis exacerbates humanitarian suffering in South Sudan. Available from URL: <https://reliefweb.int/report/south-sudan/sudan-crisis-exacerbates-humanitarian-suffering-south-sudan>

³⁰ Food Security Cluster. Humanitarian Programme Cycle 2022. Humanitarian Needs Overview South Sudan. Available from URL: https://fscluster.org/sites/default/files/documents/ssd_hno_2022_26feb2022.pdf

³¹ UNICEF South Sudan Country programme document 2018

³² Africa Health Organization. South Sudan Humanitarian Response Plan 2023–2025. <https://aho.org/emergencies/south-sudan-humanitarian-response-plan-2023-2025/>

South Sudan has a human development index (HDI) of 0.385 and is ranked 191/191(2021) globally³³. With 7 in 10 people living in extreme poverty this has been exacerbated by inflation, low agricultural production, rising food commodity prices and currency depreciation. Meanwhile, sub-national violence, recurrent floods and deepening economic crisis have left 9 million people – including 5 million children, 2.3 million women and 1.4 million people with disabilities – in dire need of humanitarian assistance in 2023, an increase from 8.9 million people in 2022³⁴. In addition, climatic shocks have escalated in frequency and severity, with concurrent occurrences of extensive droughts and significant flooding. According to the UNICEF Children's Climate Risk Index, South Sudan is ranked as the seventh most at-risk country globally.³⁵ The implications of climate change are profound, affecting approximately 95 percent of the population who rely on climate-sensitive livelihoods.³⁶ This has heightened risks related to inadequate access to water and sanitation, food insecurity, and health outbreaks induced by climatic variations. The increased vulnerability to climate change also poses serious implications for peace and security in the region. Furthermore, these challenges have been exacerbated by public health emergencies, including the COVID-19 pandemic.³⁷

2.2. Government policies and priorities

In 2011, the government developed the South Sudan Development Plan (SSDP) to guide national development from 2011 to 2013.³⁸ The primary objective was to ensure that South Sudan became a "united and peaceful new nation, building strong foundations for good governance, economic prosperity, and an enhanced quality of life for all" by 2014. Following the December 2013 crisis, the SSDP was extended to 2016 and subsequently replaced by the South Sudan National Development Strategy (SSNDS) 2018-2021. Currently, the Revised-National Development Strategy (R-NDS) 2021-2024 has been developed as a planning and development tool in accordance with the provisions of the Revitalised Agreement on the Resolution of Conflict in South Sudan (R-ARCSS). The R-ARCSS provides a national vision for sustainable development and a roadmap for the Revitalised-Transitional Government of National Unity (R-TGoNU) to govern South Sudan until national elections are held in December 2024, resulting in an elected government. The R-NDS (2021-2024) will be succeeded by the National Development Plan II (NDP II) covering the period from 2024 to 2028.³⁹

The R-NDS (2021-2024) is thus the current development blueprint and reinforces South Sudan's Vision 2040, which aims to achieve freedom, equality, justice, peace, and prosperity for all citizens. The R-NDS seeks to consolidate peace, stabilize the economy, and lay the foundation for sustainable development. It emphasizes the principle of enhancing support for the social sector to develop human capital and protect vulnerable populations, ensuring that no one is left behind.⁴⁰ The R-NDS has incorporated the challenges encountered during the implementation of the SSDP and SSNDS. It has also adopted the guidelines provided by the R-ARCSS to ensure political stability, economic growth, and sustainable development for the benefit of South Sudan's population, whose lives have been affected by decades of conflict tracing back to the Sudan era.⁴¹ The TGoNU considers the R-NDS as a tool to continue the implementation of the R-ARCSS, enhance a shift

³³ South Sudan Demographics 2023 (Population, Age, Sex, Trends) - World meter.
<https://www.worldometers.info/demographics/south-sudan-demographics/>

³⁴ UNICEF, Country Office Annual Report 2023, page 1

³⁵ United Nations Children's Fund (UNICEF), *The Climate Crisis is a Child Rights Crisis: Introducing the Children's Climate Risk Index*, New York, August 2021

³⁶ Ibid

³⁷ WHO (2021). COVID-19 Situation Report.

³⁸ Government of South Sudan. (2011). South Sudan Development Plan (SSDP) 2011-2013.

³⁹ United Nations. 2023. South Sudan Critical Country Analysis

⁴⁰ Government of South Sudan. (2021). Revised National Development Strategy (R-NDS) 2021-2024.

⁴¹ World Bank. (2020). South Sudan Economic Update.

from an oil-dependent economy to diversification, reduce dependence on humanitarian aid, and promote close collaboration with development partners.⁴²

The R-NDS focuses on building the resilience of people, communities, and institutions across South Sudan. This objective is intended to be achieved through adopting a triple nexus approach that combines Peace, Humanitarian, and Development (PHD) initiatives to achieve sustainable development.⁴³ The financing strategy is based on a cumulative national budget of US\$7.2 billion, with US\$2.2 billion allocated to year 1, US\$2.48 billion to year 2, and US\$2.55 billion to year 3.⁴⁴ The TGoNU committed to following this financing strategy as the basis for all government policies and programs.

The R-NDS priorities are aligned with the R-ARCSS and are planned to be implemented according to five clusters: governance, economic development, services/social development, infrastructure, and gender and youth.⁴⁵ Priorities in the services cluster are numerous. After extensive consultations, it was agreed that during the period of the R-NDS the government and its partners would focus on key priorities that would accelerate recovery in the sectors while addressing the dire needs of many of the citizens.⁴⁶ These include:⁴⁷

For education

- National capacity assessment and surveys
- Infrastructure and equipment
- Teachers' education and training curricula

For health

- Strengthening of health systems and access to quality care
- Repairing and upgrading health infrastructure (hospitals and primary health care units)
- Increased access to health resources

For social protection (social safety nets)

- Establishment of hierarchy of social safety nets
- Disaster response for the vulnerable
- Multidimensional poverty index
- Social security funds
- Pension fund
- Future generation fund

The R-NDS also aligns with the **Sustainable Development Goal (SDG) 2030** Agenda and Africa Agenda 2063. The strategy resonates with an integrated, prosperous, peaceful, and secure Africa and the 17 Goals and 169 targets of the SDG 2030 Agenda, which focus on advancing development that respects planetary boundaries while ensuring no one is left behind. The R-NDS prioritizes Gender Equality and Women's Empowerment (GEWE) through gender mainstreaming in the R-ARCSS and Roadmap.⁴⁸ While the R-ARCSS guarantees 35% women's representation in government, political parties have been reluctant to comply,

⁴² United Nations Development Programme (UNDP). (2021). South Sudan National Development Strategy (SSNDS) 2018–2021.

⁴³ UNICEF. (2022). Building Resilience in South Sudan.

⁴⁴ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

⁴⁵ Government of South Sudan. (2021). Revised-National Development Strategy (R-NDS) 2021–2024.

⁴⁶ Republic of South Sudan, Revised National Development Strategy

⁴⁷ Republic of South Sudan, Revised National Development Strategy

⁴⁸ Government of South Sudan (2021). Revised-National Development Strategy (R-NDS) 2021–2024.

and oversight mechanisms are lacking to enforce this quota.⁴⁹ As of 2023, women's representation remains limited in the executive, state governorships, cabinets, commissions, and parliament.⁵⁰

In preparation for the SDG Summit in September 2023, the Government of South Sudan, with support from the United Nations Development System, prepared the SDG Rescue Plan.⁵¹ The plan focuses on seven SDG targets aligned with the R-ARCSS and the roadmap, deemed critical for South Sudan's future. These targets include:

- SDG Target 16.6: Develop effective, accountable, and transparent institutions
- SDG Target 8.5: Full employment and decent work with equal pay
- SDG Target 9.2: Promote inclusive and sustainable industrialization
- SDG Target 2.4: Food systems
- SDG Target 3.3: Health
- SDG Target 4.7: Education
- SDG Target 13.1: Climate and security action

The SDG Rescue Plan identified cross-cutting areas and enablers for SDG acceleration, including:⁵²

- Integration and mainstreaming of Gender Equality and Women's Empowerment (GEWE) and Youth Empowerment in all programming, emphasizing a human-rights-based approach and leaving no one behind (LNOB).
- Durable solutions for internally displaced persons (IDPs) and South Sudanese refugees, focusing on humanitarian assistance, protection, conflict resolution, and reintegration.
- Financing the SDGs by strengthening Public Financial Management (PFM) reforms, increasing non-oil revenue, and pursuing policies that generate resources for SDG acceleration, such as tax reform, debt for SDGs, blended finance, and accessing financial markets.
- Developing a Dashboard for SDG Acceleration indicators and appointing SDG Champions to track progress and inform corrective actions.

2.3. Status and needs of the rightsholders/beneficiaries of the intervention

The status and needs of the rightsholders are reviewed according to the programme components – health, nutrition, WASH, education and social protection. Gender is highlighted as a cross-cutting element.

Health

A central pillar of social services is health, with indicators in South Sudan being strikingly inadequate. For instance, life expectancy at birth remains one of the lowest globally, recorded at 55.4 years in 2020, with females having a higher life expectancy (57 years) compared to males (54 years).⁵³ Although there has been

⁴⁹ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

⁵⁰ Ibid. Pg 55

⁵¹ South Sudan SDG Rescue Plan, SDG Summit September 2023

⁵² South Sudan SDG Rescue Plan, SDG Summit September 2023

⁵³ World Bank (2020). "Life expectancy at birth." World Bank Database

a slight improvement since 2011, when life expectancy was 54 years for men and 56.6 years for women, the figures remain concerning.⁵⁴

This low life expectancy is highly influenced by mortality rates, which are particularly dire even by Sub-Saharan Africa standards. For example, the maternal mortality ratio has significantly reduced from 2,054 deaths per 100,000 live births in 2006 to 1,223 deaths per 100,000 live births in 2020, yet it remains the highest in the world.⁵⁵ Additionally, the adult mortality rate between ages 15 and 60 years was an estimated 321.4 deaths per 1,000 population in 2016, with males experiencing a higher mortality rate (335.2) than females (307.8).^{56, 57} The under-five mortality rate is also among the highest globally and remains at 98.69 deaths per 1,000 live births as of 2021.⁵⁸ Furthermore, the total fertility rate is estimated at 4.5 births per woman in 2020.⁵⁹ The persistent health crisis is exacerbated by multifaceted factors including conflict, displacement, poverty, and climate change. Similarly, the under-five mortality rate is a stark indicator of the country's health challenges, with one in ten children dying before their fifth birthday.⁶⁰ Figure 2 displays some maternal health indicators.

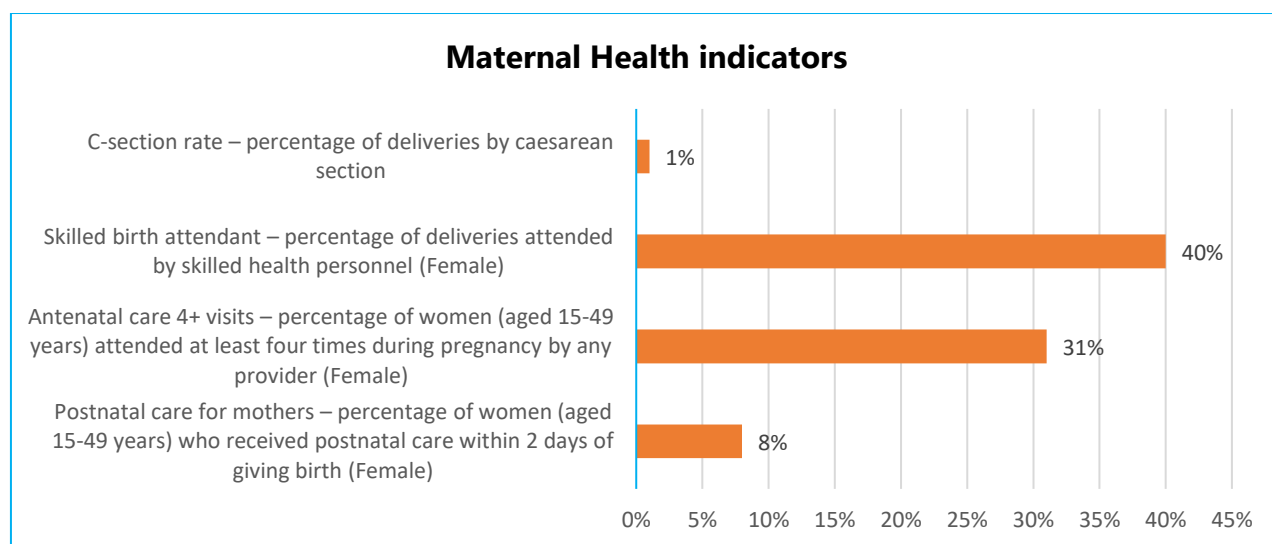


Figure 2 Maternal health indicators

Source: UNICEF, 2022

In 2022, only 8% of women aged 15-49 received postnatal care within two days of childbirth, significantly increasing the risk of postpartum complications.⁶¹ Additionally, only 31% of women attended at least four antenatal care visits during pregnancy, limiting the early detection and management of potential health issues.⁶² The situation is further exacerbated by the low coverage of skilled birth attendants, which stands at 40%, substantially raising the risk of maternal and newborn mortality.⁶³ The caesarean section rate is

⁵⁴ World Bank 2011. World Development Indicators.

⁵⁵ Trends in maternal mortality 2000 to 2020: Estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA. 2023

⁵⁶ World Health Organization Global Health Observatory Data

⁵⁷ UNDP (2016). "Adult Mortality Rate." UNDP Database

⁵⁸ UNICEF (2021). "Under-Five Mortality Rate." UNICEF Database

⁵⁹ World Bank. 2020. <https://data.worldbank.org/indicator/SP.DYN.TFRT.IN?locations=SS>

⁶⁰ United Nations Under-Five Mortality Estimation Inter-Agency Group, September 2019

⁶¹ UNICEF South Sudan Country Profiles, 2020. Available at: <https://data.unicef.org/country/dji/>

⁶² Ibid

⁶³ UNICEF South Sudan Country Profiles, 2020. Available at: <https://data.unicef.org/country/dji/>

extremely low at 1%, highlighting the limited access to emergency obstetric care, which is crucial for managing complicated deliveries.⁶⁴ The proportion of health facilities providing basic emergency obstetric and newborn care (BEmONC) services is only 39%,⁶⁵ highlighting the critical gaps in access to life-saving interventions for major obstetric and newborn complications.

Several factors contribute to the poor health indicators in South Sudan. Firstly, approximately 44% of households reported that at least one family member suffers from physical, mental, or physiological disabilities due to the protracted conflict in the country.⁶⁶ Secondly, the healthcare system remains extremely underfunded, falling significantly short of the 15% national budget allocation for health as stipulated in the Abuja Declaration.⁶⁷ Consequently, many state/administrative areas fail to meet the target of having 10 out of 13 essential medicines available, often experiencing stockouts.⁶⁸

Furthermore, South Sudan has not met the target of 10 healthcare workers per 10,000 population, which is already below the globally recommended minimum standard of 23 healthcare workers per 10,000 population.⁶⁹ The inadequacies extend to the training and capacity of human resources for health, with a notable deficit in physicians (1 per 65,574 population) and midwives (1 per 39,088 population).⁷⁰

The limited resources available in South Sudan's healthcare sector have been severely strained over the years due to the prevalence of diseases such as malaria, Ebola, polio, and HIV/AIDS. Malaria remains the leading cause of morbidity and mortality in South Sudan, with a gradually increasing incidence from 277.8 cases per 1,000 population at risk in 2017 to an estimated 286.9 cases per 1,000 population at risk in 2020.⁷¹ Mortality from malaria has also risen, from 65.59 deaths per 100,000 population in 2017 to an estimated 66.39 deaths per 100,000 population in 2020.⁷² The 2022 World Malaria Report estimates that 59.3% of the population has access to an insecticide-treated net (ITN), and the number of malaria cases treated with Artemisinin-based combination therapies (ACT) has increased to an estimated 1,618,709 in 2022.⁷³ The 2018 Service Availability and Readiness Assessment (SARA) survey indicated high availability of malaria services (95%) in the country, although only 6% of facilities assessed had all malaria service tracer items, with an average of 49% of malaria service tracer items available per facility.⁷⁴

According to WHO estimates, by 2019, HIV/AIDS was the third leading cause of death for both males and females in South Sudan.⁷⁵ By 2022, the country had seen a 35% decline in the number of new HIV infections since 2010, compared to a 53% decline in the Eastern and Southern African region.⁷⁶ However, a 2022 HIV and TB program review revealed a significant overdependence on external resources for funding, resulting in low prioritization of primary HIV prevention.⁷⁷

⁶⁴ Ibid

⁶⁵ DHIS2, 2021, BEmONC Services Coverage.

⁶⁶ South Sudan Health Facility Survey, 2021

⁶⁷ External sources of funding contribute the largest share of the total health expenditure, with high expenditures on health compared to less than 10% recommended by WHO for most countries to prevent catastrophic health expenditure. WHO 2020.

⁶⁸ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

⁶⁹ WHO (2016). "Healthcare Workforce Minimum Standards."

⁷⁰ South Sudan Health Facility Survey, 2021.

⁷¹ World malaria report 2022. Geneva: World Health Organization; 2022. Licence: CC BY-NC-SA 3.0 IGO

⁷² Ibid

⁷³ World malaria report 2022. Geneva: World Health Organization; 2022. Licence: CC BY-NC-SA 3.0 IGO

⁷⁴ WHO (2018). Service Availability and Readiness Assessment (SARA).

⁷⁵ WHO 2020

⁷⁶ UNAIDS (2022). HIV and TB Program Review.

⁷⁷ Ibid

Immunization coverage in South Sudan has remained suboptimal for over a decade, leaving many children unprotected against vaccine-preventable diseases. The WHO-UNICEF joint immunization coverage estimate showed that the percentage of children under one year reached with the third dose of the DPT-containing vaccine hovered around 45% to 73%, while between 51% and 74% received the first dose of the measles vaccine between 2013 and 2022.⁷⁸ In 2022, 24% of children under one year of age were zero-dose children, having not received the first dose of the DPT-containing vaccine.⁷⁹

It is estimated that about 53% of South Sudanese experience some form of mental health-related issue.⁸⁰ Notably, there is widespread post-traumatic stress disorder (PTSD) as a consequence of civil war, physical and psychological trauma, forced and unwanted pregnancies, sexually transmitted infections (STIs), and stigma associated with being a rape survivor or suspected of being infected with HIV.⁸¹ In 2018, it was estimated that 26% of adolescent girls in South Sudan had considered suicide.⁸²

Nutrition

Food insecurity and malnutrition in South Sudan are driven by a complex interplay of conflict, subnational and localized violence, macroeconomic instability, low agricultural productivity, and climatic extremes. The country has endured four successive years of unprecedented flooding, which has resulted in widespread displacement, destruction of livelihoods, and a significant reduction in arable land.⁸³ These risks and vulnerabilities are compounded by the ongoing Sudan Crisis and the global implications of the war in Ukraine.⁸⁴

Malnutrition, exacerbated by recurrent humanitarian crises and pervasive food insecurity, significantly contributes to poor health outcomes in South Sudan. The country continues to grapple with a persistent nutritional crisis, notably affecting children and women. According to the World Health Organization (WHO), the global acute malnutrition (GAM) rate among children under five years old is estimated at 16.1%, surpassing the WHO emergency threshold of 15%.⁸⁵ This rate, however, has shown a decline from 18.1% in 2016.⁸⁶ Furthermore, the prevalence of stunting is estimated at 16.3%, with severe stunting at 3.9%. Stunting rates between 10% and less than 20% are considered of medium public health significance according to WHO classification.⁸⁷ Approximately 1.4 million children were affected by wasting in 2022, including 303,000 suffering from severe wasting.⁸⁸ Additionally, micronutrient deficiencies are widespread among children, adolescent girls, and women, exacerbating their health challenges.⁸⁹ The primary drivers of acute malnutrition in South Sudan include high food insecurity, elevated disease prevalence, and inadequate

⁷⁸ WHO-UNICEF (2022). Joint Immunization Coverage Estimates.

⁷⁹ Ibid

⁸⁰ USAID (2019). South Sudan Trauma Assessment Findings, Conclusion and Recommendations. Available from PA00WBJJ.pdf (usaid.gov)

⁸¹ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

⁸² Plan International (2018): Adolescent Girls in Crisis – Voices from South Sudan

⁸³ World Food Programme (WFP), 2021. Impact of Flooding on Food Security in South Sudan.

⁸⁴ Food and Agriculture Organization (FAO), 2022. Global Impacts of the War in Ukraine on Food Security.

⁸⁵ World Health Organization. (2020). Global Database on Child Growth and Malnutrition.

⁸⁶ World Health Organization. (2016). Global Database on Child Growth and Malnutrition.

⁸⁷ World Health Organization. (2020). Global Database on Child Growth and Malnutrition.

⁸⁸ UNICEF. (2022). South Sudan Annual Report.

⁸⁹ World Food Programme. (2022). South Sudan Food Security and Nutrition Analysis.

hygiene, health, and environmental sanitation services.⁹⁰ Poor maternal and childcare practices further compound these issues.⁹¹

Infant and young child feeding (IYCF) practices significantly impact the health, development, and nutritional status of children under two years of age, ultimately affecting child survival rates.⁹² A summary of breastfeeding related indicators are displayed in figure 3. In South Sudan, a majority of infants (51%) are breastfed within the first hour of life, however, the rate of exclusive breastfeeding for the first six months is lower at 45%.⁹³

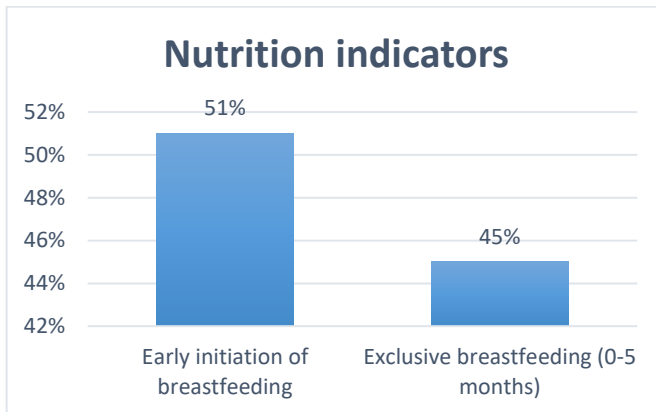


Figure 3 Breastfeeding related indicators - South Sudan

Source: UNICEF 2022

Estimates indicate that approximately 738,000 pregnant or lactating women in South Sudan are likely to experience acute malnutrition, necessitating immediate treatment.⁹⁴ Malnutrition in the region is primarily driven by the worsening food security situation, inadequate diets, and the prevalence of diseases, compounded by limited access to health and nutrition services due to resource constraints, insecurity, and ongoing violence in conflict-affected areas.^{95,96} Additional factors contributing to malnutrition include suboptimal maternal, infant, and young child feeding practices, inadequate access to safe drinking water, and harmful sociocultural practices.^{97,98}

WASH

South Sudan faces significant challenges with some of the poorest water, sanitation, and hygiene (WASH) indicators globally. Since gaining independence, progress in WASH improvements has been undermined by ongoing conflict and the impacts of climate change. According to the WHO/UNICEF Joint Monitoring

⁹⁰ WHO. Advancing resilient health systems and services in South Sudan Annual Report 2023

⁹¹ UNICEF, 2022.

⁹² WHO (2021), Indicators for assessing infant and young child feeding practices: definitions and measurement methods

⁹³ UNICEF 2022

⁹⁴ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

⁹⁵ World Food Programme (WFP), 2021. Impact of Flooding on Food Security in South Sudan.

⁹⁶ Food and Agriculture Organization (FAO), 2022. Global Impacts of the War in Ukraine on Food Security.

⁹⁷ Office for the Coordination of Humanitarian Affairs (OCHA), 2023. South Sudan Humanitarian Response Plan.

⁹⁸ (UNICEF), 2023. Infrastructure Challenges in South Sudan.

Programme estimates for SDG 6.1 and 6.2 (water and sanitation), access to basic water supply has stagnated at 41% over the past 13 years, while open defecation has only decreased from 71% in 2011 to 61% in 2020.⁹⁹ However, the 2020 National Household Health Survey by the Ministry of Health indicates that open defecation stood at 75%.¹⁰⁰ The same survey reported that handwashing practices was as low as 5.6% nationally. High rates of open defecation and inadequate handwashing practices contribute to a high prevalence of diarrhoeal diseases among children under five years of age, which was reported at 31%.¹⁰¹ Diarrhoeal diseases, stemming from insufficient access to clean water, sanitation, and hygiene, remain one of the main causes of death for children under five years of age.¹⁰²

Climate change is significantly affecting WASH services in South Sudan, with extreme temperatures, floods, and droughts.¹⁰³ According to UNICEF's 2021 Children's Climate Risk Index (CCRI),¹⁰⁴ South Sudanese children are highly exposed to heatwaves and vector-borne diseases. South Sudan ranks 7th globally on the CCRI, yet it contributes only 0.004% to global greenhouse gas emissions.¹⁰⁵

There is a substantial disparity between urban and rural populations in terms of access to basic water services. Overall, 41% of the population has access to an improved water source within a 30-minute round trip (35% in rural areas; 65% in urban areas), and just 16% of the population has access to a private improved sanitation facility (9% in rural areas, 42% in urban areas).¹⁰⁶ During the dry season, it takes an average of over two hours to reach a water point. From 2011 to 2022, access to basic water services by rural populations declined by 5.18 percentage points, while urban access increased by 17.96 percentage points.¹⁰⁷ The WHO/UNICEF JMP 2021 WASH estimates are displayed in figure 4.

⁹⁹ WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply, Sanitation and Hygiene (2021). Progress on household drinking water, sanitation and hygiene 2000–2020.

¹⁰⁰ Ministry of Health, South Sudan (2020). National Household Health Survey.

¹⁰¹ Ibid

¹⁰² WHO (2018–2023). Water quality testing and quality assessment of targeted water points.

¹⁰³ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹⁰⁴ UNICEF. (2021). Children's Climate Risk Index (CCRI)

¹⁰⁵ UNICEF. (2022). Global Greenhouse Gas Emissions Report.

¹⁰⁶ WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply, Sanitation and Hygiene (2021). Progress on household drinking water, sanitation and hygiene 2000–2020.

¹⁰⁷ Ministry of Health (MoH), South Sudan. (2022). National Household Health Survey.



Figure 4 Water Sanitation and Hygiene Service level in South Sudan, 2022 estimates

Source: JMP 2021

Inadequate water, sanitation and hygiene (WASH) facilities and practices all contribute to the poor health and nutrition conditions. About 86 per cent of the population is not using safely managed water and 63 per cent of drinking water at households is contaminated with *E. coli*. Only 2 per cent of households reported having access to a protected water source. Some 75 per cent of households practice open defecation, with only 10 per cent having an improved sanitation facility and 6 per cent having a designated place for handwashing, with water and soap available.¹⁰⁸ A lack of spare part supply chains, insufficient operations and maintenance, and/or inappropriate technologies are some of the challenges affecting the WASH sector in South Sudan. In addition, lack of access to roads, particularly after storms and flooding or during conflict, also block access to WASH services. For sanitation, the lack of affordable, reliable materials for latrines means that households rely on local materials, which can easily wash away during heavy rains and flooding. Once latrines wash away, households are less motivated to rebuild, particularly those living in or near conflict areas.

Inadequate WASH facilities and practices substantially contribute to the poor health and nutritional conditions observed in South Sudan. According to the WHO/UNICEF JMP, approximately 86% of the population does not have access to safely managed water services, and 63% of household drinking water sources are contaminated with *E. coli* bacteria.¹⁰⁹ Furthermore, only 2% of households report having access to a protected water source.¹¹⁰ The WASH sector in South Sudan faces numerous challenges, including the lack of supply chains for spare parts, insufficient operations and maintenance, and the implementation of inappropriate technologies.¹¹¹ Additionally, limited access to roads, particularly post-storms, flooding, or during conflict, further hampers access to essential WASH services.¹¹² The lack of affordable and reliable materials for constructing latrines forces households to rely on locally available materials, which are prone

¹⁰⁸ South Sudan Ministry of Health, National Household Health Survey, May 2021

¹⁰⁹ WHO/UNICEF Joint Monitoring Programme (JMP) for Water Supply, Sanitation and Hygiene (2021). Progress on household drinking water, sanitation and hygiene 2000–2020.

¹¹⁰ Ministry of Health (MoH), South Sudan. (2022). National Household Health Survey.

¹¹¹ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹¹² Ibid

to being washed away during heavy rains and flooding. This results in a reluctance among households, especially those in or near conflict zones, to rebuild their latrines once they are destroyed.

Education

Ensuring equitable access to education for both girls and boys is a fundamental human right and a critical component of human development. In South Sudan, there are notable disparities in enrolment rates between males and females, particularly in primary and secondary education.¹¹³ Although the number of operational schools has increased since 2015, a substantial proportion of schools remain closed or non-operational. According to the 2021 Annual Education Census, approximately 12% of pre-primary, 19% of primary, and 17% of secondary schools are closed. The predominant reason for school closures is the lack of students, accounting for an average of 42.4% of cases. Additionally, conflict was a significant factor for primary and secondary schools, while the absence of teachers was the primary reason for pre-primary and Alternative Education System (AES) centers.¹¹⁴

The ongoing crisis has aggravated an already-difficult education situation. The deterioration of systems and services has led to poor educational outcomes, limited participation by girls and insufficient school infrastructure. South Sudan, compared to neighbouring countries and other conflict-affected nations, has one of the lowest literacy rates. According to the World Bank (2022), adult literacy rates in South Sudan stand at 34.52%, showing an increase of 7.52 percent since 2008.¹¹⁵ Early marriage is widespread, with estimates indicating that 52% of South Sudanese girls between the ages of 15 and 18 are married, and some as young as 12.¹¹⁶ This practice contributes to the high adolescent birth rate, with one-third of women aged 15-19 having already begun childbearing.¹¹⁷ Early marriage and childbearing are primary factors leading to girls' dropout from school, which in turn contributes to the overall lower levels of education, as reflected in the literacy rates.¹¹⁸

Spending on the education sector increased to 17.1 per cent in fiscal year (FY)2021/2022 from 14 per cent in FY2020/2021, showing progress towards achieving the international and national commitments of 20 per cent¹¹⁹. However, more than half of the school-age population - over 2.8 million children - are out of school, with 53 percent of these being girls.¹²⁰ The Gender Parity Index remains below parity at 0.95 for pre-primary, 0.89 for primary, and 0.77 for secondary education.¹²¹ While primary education is free, the indirect costs associated with keeping children in school can be prohibitive. Many parents perceive child marriage for girls and marginally gainful employment and cattle rearing for boys as more prudent life choices.¹²² Safety and security in and around education facilities, along with insufficient and inadequate school infrastructure, also constrain attendance.¹²³

South Sudan does not participate in any regional or international assessments but has participated in the Early Grade Reading Assessment (EGRA) and the Early Grade Mathematical Assessments (EGMA)¹²⁴. A 2016

¹¹³ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹¹⁴ MoGEI. 2021. Annual Education Census

¹¹⁵ World Bank (2022). Government Expenditure on Education and Health in South Sudan

¹¹⁶ UNICEF (2021). Early Marriage in South Sudan

¹¹⁷ UNFPA (2021). Adolescent Birth Rates in South Sudan.

¹¹⁸ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹¹⁹ UNICEF South Sudan, Country Annual report, 2022 page 1

¹²⁰ UNESCO (2021). Gender Parity Index in Education.

¹²¹ Ibid

¹²² UNICEF South Sudan, Country programme document, 2023-2025

¹²³ UNICEF South Sudan, Country programme document, 2023-2025

¹²⁴ UNESCO South Sudan: Education Country Brief, 2024

study found that most primary schoolchildren attending early grades were not achieving foundational literacy, numeracy or life skills.¹²⁵ The situation is likely to have further worsened because of school closures due to the COVID-19 pandemic, which resulted in significant learning losses. Without basic literacy skills, it is expected that learners will struggle to engage with other subjects on the curriculum and will be at higher risk of dropping out.¹²⁶

Inadequate WASH facilities in schools act as significant barriers to adolescent girls, especially during menstruation, contributing to prolonged and recurrent absenteeism, and ultimately leading to dropout.^{127, 128} The ongoing humanitarian crisis has forced thousands of children to flee their homes, abandoning their education and armed conflict continues to pose significant access constraints.¹²⁹ Additionally, South Sudan's geography, being home to the second-largest wetland in Africa, coupled with four consecutive years of widespread flooding, has amplified children's exposure to climate change and environmental shocks.¹³⁰ In 2022, floods resulted in the closure of 877 schools, disrupting education for 427,743 children.¹³¹

Social Protection

Social protection programmes in South Sudan are designed to support vulnerable groups, prioritizing the elderly, children, women, people with disabilities, and those living in poverty. Despite the approval of the National Social Protection Policy Framework (NSPPF) in 2015, the coverage of social protection in South Sudan remains extremely low, with needs far exceeding available resources.¹³² Major donor-funded programmes that feed into the NSPPF include Girls' Education South Sudan (GESS), the School Feeding Program, Productive Safety Nets, Women's Empowerment, and initiatives to end Gender-Based Violence (GBV) and child marriage.¹³³ These programmes are implemented by the UN (e.g., FAO, UNOPS, UN Women, WFP, UNFPA) in partnership with NGOs and contractors.¹³⁴ The National Ministry of Gender, Child and Social Welfare (MGCSW) oversees child protection, gender equality, social justice, and the rights of women, persons with disabilities, and other vulnerable groups, in coordination with state-level MGCSWs. Reviewing the NSPPF and reactivating the National Social Protection Sector Working Group are currently key priorities of the MGCSW.

Nevertheless, the sector remains underfunded. The Government committed to allocating 1% of its annual budget to finance the NSPPF through MGCSW, yet it allocated about USD \$376,000 in 2018 (about 0.06% of the FY2018–2019 national budget).¹³⁵ Current annual expenditure on social protection activities stands at approximately USD \$117.6 million. Over 99.7% of current annual expenditure on social protection is provided by donor funding to fill the financing gap.¹³⁶

Poorly coordinated policy frameworks, limited financial, human, and technical resources, rising needs due to persistent conflict, and climate and economic shocks, combined with coordination challenges between

¹²⁵ Montrose, "South Sudan Early Grade Reading and Mathematics Assessment Report", September 2016.

¹²⁶ UNICEF South Sudan, Country programme document, 2023–2025

¹²⁷ UNICEF (2022). WASH in Schools

¹²⁸ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹²⁹ UNHCR (2021). Access to Education amidst Armed Conflict.

¹³⁰ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹³¹ UNOCHA (2022). Impact of Flooding on Education in South Sudan

¹³² United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹³³ National Social Protection Policy Framework of South Sudan. Annual Report 2020

¹³⁴ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹³⁵ World Bank (2020). South Sudan Social Protection Overview.

¹³⁶ Ibid.

government, humanitarian, and development partners, continue to prevent the effective delivery of social assistance services.¹³⁷ Poor economic and social infrastructure and access to services further reinforce marginalization and entrenched inequity, especially for the most vulnerable groups, resulting in increased costs for humanitarian operations and service delivery while hindering the possibility of reaching economies of scale.¹³⁸

The lack of identification documents is another major constraint to accessing services. This issue is exacerbated for the most vulnerable groups; for example, in IDP sites, only 45.3% of individuals across Juba Town, 5.9% in Wau Town, 5.9% in Bentiu Town, and 11.9% in Malakal Town reported possessing some form of identification document.¹³⁹ The lack of reliable and accurate data disaggregated by sex, age, and disability amplifies existing vulnerabilities and hampers beneficiary targeting; and there is a noted need for the birth registry system to be strengthened to ensure proper documentation.¹⁴⁰

Civil society (notably NGOs) and humanitarian and development partners have become significant de facto providers of basic social services in South Sudan. However, the magnitude of needs far outpaces existing means and available resources, forcing non-government actors to make difficult prioritization choices.¹⁴¹ Funding gaps persist with only about 71% of the 2022 Humanitarian Response Plan (HRP) funded, and 9.4 million people reported to be in need of humanitarian assistance in 2023.¹⁴²

It is pertinent to highlight that in South Sudan, the NSPPF, envisages a national social protection system with strong coordination and a range of social protection programs¹⁴³. The concept of social protection is enshrined in the Bill of Rights provided for within the transitional Constitution of the Republic of South Sudan (protection for vulnerable, orphans, elderly, disabled, pregnant and lactating women, access to education and health). Support for a social protection system also exists in the Child Act (2009); the Local Government Act (2009); and the War Disabled, Widows and Orphans Commission Act (2011). That said, although there is support for the concept of social protection in these laws, there is no explicit reference to a social protection system as such.

Gender

Demographic Structure, Gender, and Youth

The demographic profile of South Sudan shows a predominantly young population, with approximately 58.96% under 18 years, 22.4% adolescents aged 10–19 years, and 74.2% under 30 years. Women constitute 49% of the population and the working-age population (aged 15–64) makes up 47.8%.¹⁴⁴ The demographic structure has contributed to rapid urbanization, as the youth migrate to urban areas in search of employment and economic opportunities. Approximately 80.4% of the population is rural, with limited access to services, including education and security, resulting in high youth unemployment, estimated at 29% in 2019.¹⁴⁵ Figure 5 illustrates South Sudan's age-sex population pyramid.

¹³⁷ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹³⁸ World Bank (2020). South Sudan Social Protection Overview

¹³⁹ UNICEF (2021). IDP Identification Document Survey

¹⁴⁰ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹⁴¹ Ibid

¹⁴² UN OCHA (2023). Humanitarian Response Plan 2022

¹⁴³ South Sudan Advancing Social Protection Information Management System (MIS) Mapping report

¹⁴⁴ 2023 National Bureau of Statistics (NBS) Population projection,

¹⁴⁵ World Bank. (2019). South Sudan Economic Update

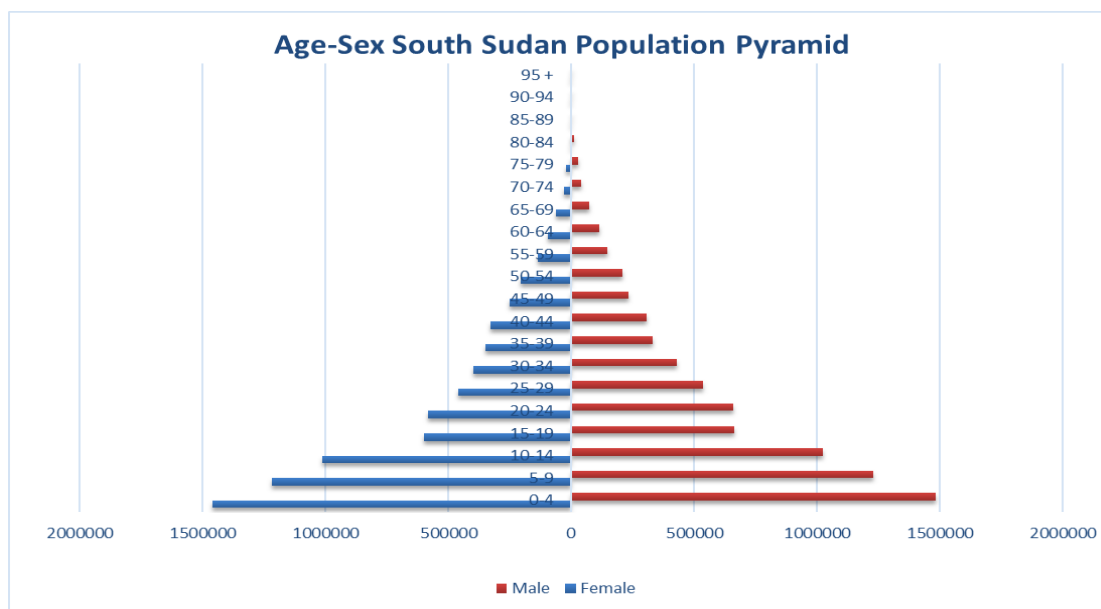


Figure 5 South Sudan Age-Sex Population Pyramid

Challenges and Gender Inequality

South Sudan has a Gender Development Index of 0.842, meaning it has low equality in human development achievements between women and men, ranking 185 of 189 countries.¹⁴⁶ Men dominate most social spheres and are accorded most productive assets, powers, privileges and authority under a patriarchal system. Meanwhile, women are relegated to the private sphere and the care economy in which they are assigned time-consuming household responsibilities¹⁴⁷. The deeply entrenched patriarchal culture restricts women and girls' participation, exacerbating child marriage and teenage pregnancies.¹⁴⁸ In 2020, the proportion of women aged 20–49 years who were married or in a union before age 18 was 45% (compared to 35% in East Africa or 21% globally)¹⁴⁹. As they rarely have access and the opportunities to use contraceptives,¹⁵⁰ the adolescent birth rate (aged 15–19 years) per 1,000 women in that age group in 2020 was 158 (compared to 93 in East Africa and 44 globally)¹⁵¹.

Significant gaps in education and training services exist, with pronounced gender disparities. The conflict, violence, and repeated crises, including COVID-19, have intensified inequalities, exposing women and girls to various forms of sexual violence, exploitation, and abuse.¹⁵² Excluded from community and political structures, women and girls face additional challenges in accessing opportunities for upward mobility. The pandemic has further compromised girls' education, increasing the likelihood of child marriage.¹⁵³

¹⁴⁶ UN Women (2022) South Sudan National Gender Statistics Assessment. Available from URL:

<https://africa.unwomen.org/sites/default/files/2022-03/02%20South%20SudanGender%20Statistics%20Assessment%28web%29.pdf>

¹⁴⁷ UNICEF South Sudan situation analysis 2021

¹⁴⁸ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹⁴⁹ UNFPA (2021). <https://www.unfpa.org/data/world-population-dashboard>

¹⁵⁰ Contraceptive prevalence rate is 1.7%, compare to East Africa's 38% and 58% at global level. UNICEF (2020).

<https://data.unicef.org/resources/data-explorer>

¹⁵¹ UNICEF (2020). <https://data.unicef.org/resources/data-explorer>

¹⁵² Ibid

¹⁵³ UNICEF. (2023). Child Marriage and Education in South Sudan

Approximately 65% of women and girls have experienced physical and/or sexual violence in their lifetime, with 27% suffering intimate partner violence.¹⁵⁴ About 33% of women have experienced sexual violence from non-partners, primarily during attacks or raids, with most incidents occurring before the age of 18.¹⁵⁵ Children comprise around 25% of reported conflict-related sexual violence cases, though actual numbers may be higher due to under-reporting.¹⁵⁶

Legislative Efforts and Gender Empowerment

These indicators do not really reflect the country's constitutional, legal, and policy framework for gender equality and women's economic empowerment (GEWE), which is broadly progressive.¹⁵⁷ South Sudan is a signatory to all major international and regional treaties and protocols, including the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social, and Cultural Rights (ICESCR), the Convention on the Rights of Persons with Disabilities (CRPD), and the Maputo Protocol.¹⁵⁸ Additionally, the government has committed to implementing its Second National Action Plan for United Nations Security Council Resolution (UNSCR) 1325 on Women, Peace, and Security (2022–2027) and the Ministry of Gender, Child, and Social Welfare's Strategic Plan (2022–2027).¹⁵⁹ However, these frameworks are inadequately enforced and implemented.

South Sudan has enacted several pieces of legislation to mainstream gender across sector policies, laws, plans, and programs. Key legislative frameworks include the 2011 Transitional Constitution, the National Gender Policy, and the Revitalized Agreement on the Resolution of Conflict in South Sudan (R-ARCSS), which mandates at least 35% women's participation in governance.¹⁶⁰

Progress and Representation

Women's political representation is notably insufficient at both community and national levels and fails to meet the 35% target of political representation stipulated by the R-ARCSS. For example, the proportion of seats held by women in the reconstituted transitional legislative assembly in 2021 was approximately 21%.¹⁶¹ Nevertheless, South Sudan has made some progress in gender mainstreaming over the past decade, with women holding high decision-making positions, including the Vice President, Speaker of the Transitional National Assembly, and Deputy Speaker of the Council of States. Women have led several strategic ministerial portfolios, such as Defence, Foreign Affairs, Higher Education, Health, Environment, Youth and Culture, and Gender, Child, and Social Welfare. Despite these advances, more efforts are needed to ensure the inclusion and representation of women, youth, and people with disabilities in governance and democratic processes, including the constitutional making process and upcoming elections.¹⁶²

¹⁵⁴ UNFPA. (2023). Gender-Based Violence in South Sudan

¹⁵⁵ Ibid

¹⁵⁶ UNMISS. (2023). Conflict-Related Sexual Violence Report

¹⁵⁷ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹⁵⁸ UN Women. (2023). Gender Equality and Women's Empowerment in South Sudan

¹⁵⁹ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹⁶⁰ United Nations. 2023. South Sudan Critical Country Analysis (CCA)

¹⁶¹ UN Women (2021).

¹⁶² UN Women. (2023). Gender Equality and Women's Empowerment in South Sudan

3. OBJECT OF THE EVALUATION – UNICEF Country Programmes of Cooperation

Table 1: Presentation of the Programmes

Title of the programme	UNICEF South Sudan Country Programmes of Cooperation (2019 – 2022 & 2023-2025)
Country	South Sudan
Budgets	2019-2022 – 147, 838, 000 USD 2023-2025 - 518 650 000 USD
Duration	2019 – 2022 & 2023-2025
General objective	The programme's goal is to ensure that all children, including those with disabilities, as well as adolescents and women, particularly the most vulnerable, are protected and can fully enjoy their rights. The initiatives aim to strengthen systems to provide access to high-quality and resilient services. Furthermore, the programmes address the structural causes of fragility and vulnerability through a combination of humanitarian assistance and development cooperation.
Components	- Health - Nutrition - Water, sanitation and hygiene - Education - Child protection - Social policy - Programme effectiveness
Partners	United Nations organizations, including the United Nations Mission in South Sudan (UNMISS), the World Bank, local and international civil society organizations, and global initiatives such as the Global Partnership for Education (GPE), Gavi, the Vaccine Alliance, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and the Scaling Up Nutrition (SUN) Movement

3.1. Overview

The UNICEF Country Programmes for South Sudan (2019 -2022 & 2023-2025) are comprehensive initiatives aimed at addressing critical child survival, development, and protection challenges. In 2022, UNICEF's Executive Board approved a new Country Programme Document (CPD, 2023-2025) endorsed by the Government of South Sudan and structured around six outcomes' areas: Health, Nutrition, Climate-resilient water, sanitation and hygiene, Education, Child protection, Social policy in alignment with the Organization Global Strategic Plan (2022-2025). This Programme, developed in the spirit of the "Delivering as One" initiative, was designed to contribute towards achievement of the National Development Strategy 2021-2024 and the country's long-term development vision – South Sudan 2040 –, the Sustainable Development Goals (SDGs 2030), the 2023-2025 United Nations Sustainable Development Cooperation Framework (UNSDCF) and, the UNICEF Strategic Plan (2022-2025) and Gender Action Plan (2022-2025), the African

Union's Agenda 2063; the Sustainable Development Goals (SDGs), with its principle of "Leaving No One Behind" as domesticated in the Revised National Development Strategy (2021-2024) to create a better world for all South Sudanese, and the African Union Agenda for Children 2040.

3.2. Expected results of the Programmes (2019 – 2022 & 2023-2025)

The two Programmes (2019 – 2021 and 2023 – 2025) are systematically organized around seven key components: Health, Nutrition, Water, Sanitation and Hygiene (WASH), Education, Child Protection, Social Policy, and Programme Effectiveness. The expected outcomes for both the 2019 – 2021 Country Programme and the 2023 – 2025 Country Programme are similar, focusing on increased access to improved social services. However, the expected outputs are more service provision-oriented in the 2019 – 2021 Country Programme, with a particular emphasis on health and education components. In contrast, the 2023 – 2025 Country Programme incorporates service delivery strengthening across all components. Similarly, system strengthening, which was a focus primarily in health and education in the earlier programme, is an integral part of all components in the later programme. Tables 2 and 3 display the expected outcomes and outputs of the two country programmes.

Table 2 : Expected outcomes and outputs of UNICEF South Sudan country programme, 2019-2021

Expected outcomes	Outputs
1. Health Children under five years and pregnant women use more equitable and better quality essential maternal, newborn and child health services	1.1 Government and other partners have increased capacity to deliver routine and supplementary immunization and respond to disease outbreaks
	1.2 Front-line health and community workers have increased capacity to provide quality, essential maternal and neonatal care
	1.3 Front-line health and community workers have increased capacity to provide flexible, integrated case management services for common childhood illnesses
2. Nutrition Girls and boys under age five, young girls and women in South Sudan increasingly use more equitable and better-quality nutrition services	2.1 Girls and boys under age five, school-age children, young girls and women have increased and more equitable access to quality preventative nutrition services
	2.2 Girls and boys under age five have increased and more equitable access to better quality nutrition services for early detection and treatment of severe acute malnutrition
	2.3 Girls and boys under five years old and caregivers affected by humanitarian crises have increased and timely access to quality nutrition services in line with UNICEF Core Commitments for Children in Humanitarian Action (CCCs)
	2.4 Government and non-governmental actors have improved capacity in governance, nutrition information systems and knowledge-generation to facilitate scale-up of nutrition interventions
3. WASH Vulnerable people, particularly children in conflict-affected, underserved and epidemic-prone communities in South Sudan, use improved, equitable and sustainable WASH services	3.1 Vulnerable and emergency-affected people have access to basic sanitation facilities
	3.2 Vulnerable and emergency-affected people have access to safe drinking water
	3.3 Target communities have increased capacity for effective emergency preparedness and response for WASH, aligned with the CCCs

4. Education Children and young people aged 3–18 years affected by conflict and emergencies use increased and equitable life-saving quality education services, resulting in improved learning outcomes	4.1 Government and other national partners have increased capacity at national and subnational levels for improved implementation, monitoring and inclusive sector planning
	4.2 Children and young people in humanitarian situations have access to protective, quality basic education services
5. Child protection Children and young people at risk of violence, exploitation and abuse, in emergency and non-emergency settings, use integrated basic social services	5.1 Government and national partners have laws, regulatory frameworks and service delivery systems in place to improve children's access to justice and birth registration services
	5.2 Key actors are able to provide improved core child protection and gender-based violence services for children at risk of or exposed to violence, exploitation and abuse in emergency and non-emergency settings
6. Social policy South Sudan increasingly implements child-sensitive policies and social protection programmes	6.1 Government and partners have enhanced capacity to generate equity-focused data, evidence and analytical studies on children
	6.2 Government and partners have enhanced capacity to design and implement child-sensitive social protection programmes
7. Programme effectiveness: Country programmes are efficiently designed, coordinated, managed and supported to meet quality standards in achieving results for children	7.1 Staff have enhanced capacity to provide timely assistance to programmes in line with office key performance indicators.
	7.2 Staff have enhanced capacity to effectively communicate on child rights
	7.3 Communities have access to information on positive behaviours and life-saving practices and an inclusive feedback mechanism for informed decision-making and resilience

Source: 2018- UNICEF- Country programme document

Table 3 : expected outcomes and outputs of UNICEF South Sudan country programme 2023 - 2025

Expected outcomes	Expected outputs
Health More neonates, infants, children, adolescent girls and women survive and thrive, benefiting from improved access to and use of quality and equitable health services and practices, including in emergencies.	Front-line health and community workers demonstrate improved capacity to provide flexible, integrated services for management of common childhood illnesses
	Front-line health and community workers demonstrate improved capacity to provide quality, essential maternal and neonatal care to pregnant women and adolescent girls and their babies
	Government and other partners demonstrate increased capacity to deliver routine and supplementary immunization and respond to disease outbreaks
Nutrition More children, including adolescents, and women have improved nutrition, benefiting from increased access to and use of quality services and practices, including in emergencies.	The Government, at national and state levels, has strengthened capacities to deliver a quality multi-system approach to reduce all forms of malnutrition
	More children, adolescent girls and women benefit from equitable access to integrated and quality preventive nutrition services and adopt positive nutrition practices, including in emergencies
	More children benefit from equitable access to quality services for the management of wasting, including in emergencies

WASH More children, women and their families, particularly the most vulnerable populations, have equitable and sustainable access to and use safe and climate-resilient water and sanitation services and practice safe hygiene behaviours, including in emergencies.	The Government, at national and state levels, has strengthened institutional capacity to improve and sustain access to safely managed WASH services
	More children and their families affected by humanitarian crisis have access to safe water, good sanitation and improved hygiene services
	More children and their families living in rural communities have more resilient WASH infrastructure and services and are better prepared to withstand disasters and climate change impacts
Education More children aged 3–18 years, particularly girls and the most vulnerable, access equitable, inclusive and quality education with improved learning outcomes, including in emergencies.	The education sector is better able to deliver inclusive and quality early learning
	More children including adolescents, and particularly girls, access basic-quality formal, non-formal or alternative learning opportunities
	The education system is better able to transform the delivery of quality basic education that rapidly improves learning outcomes and the development of foundational skills
Child protection Children and women are safe and protected from violence, exploitation, abuse and harmful practices.	The national and local governments have enhanced capacities to develop and manage a sustainable shock-responsive system for the delivery of preventive and responsive child protection services.
	More women, children, including adolescents, and their caregivers in humanitarian situations are safer and access better-quality protection services
Social policy More children and families benefit from better government services that reduce monetary and multidimensional poverty and strengthen resilience.	The Government has enhanced capacity to measure and monitor child vulnerability and use the evidence to design appropriate policies, plans and budgets
	National and state governments have enhanced capacity to mobilize, allocate, spend and report on resources for social services
	The Government has enhanced capacity to design, coordinate, implement and monitor child-sensitive and shock-responsive social protection policies and programmes
Programme effectiveness	Planning, monitoring and reporting Field Operations Social and Behaviour Change

Source: 2022- UNICEF- Draft country programme document

3.3. Implementation strategies of the programmes

While the expected outcomes of the 2018-2022 Country Programme and the 2023-2025 Country Programme are similar, focusing on increased access to improved social services, the strategies envisaged for achieving these outcomes differ considerably. The 2018-2022 Country Programme emphasized delivering targeted services that were flexible and adaptable, employing methods such as mobile outreach to respond to evolving security conditions.¹⁶³

¹⁶³ 2018 UNICEF Country programme document

In contrast, the 2023-2025 Country Programme¹⁶⁴ articulates a shift from a predominantly service-delivery approach to one focusing on systemic and capacity-building efforts. This includes enhancing service delivery capacity, particularly in sectors with limited government capacity, such as nutrition and protection. Service provision remains a key element, especially in emergency situations, such as lifesaving nutrition interventions,¹⁶⁵ and for populations not reached by public services, such as alternative and flexible education models for children in pastoralist and nomadic communities or those affected by conflict.¹⁶⁶ Additionally, the programme aims to bolster weak public services, particularly in protection services, including the release and reintegration of children associated with armed forces and armed groups.¹⁶⁷

The 2023-2025 Country Programme also adopts the humanitarian-development-peace nexus approach.¹⁶⁸ This approach consists of responding to humanitarian needs by supporting national and state-level government and community capacity, while also delivering timely humanitarian assistance and meeting cluster coordination commitments. The approach aims to enhance community resilience by integrating risk mitigation measures into programme activities. There is a notable shift towards proactively addressing climate-related challenges, with an emphasis on community resilience to climate shocks and disasters.¹⁶⁹

Communication for behavioural and social change remains a critical component in both programmes, alongside coordinated and integrated service delivery to ensure improved effectiveness. Technological innovations are leveraged to enhance programme performance. Supply chain optimization through inter-agency collaboration, including centralized procurement and pre-positioning of humanitarian supplies, remains crucial. The 2023-2025 strategy places a stronger emphasis on pre-positioning supplies to prepare for future emergencies, reflecting lessons learned from the previous period's experience with climatic events.¹⁷⁰

3.4. The Theory of change reconstruction

A programme theory of change (ToC) was developed during this inception phase, based on an analysis of the type of interventions planned in each component and the expected product categories. The ToC was further refined in collaboration with UNICEF Country and Regional Offices' stakeholders via a ToC Validation Workshop. The illustration of the ToC (see figure 6) displays the following:

- The expected impact
- The expected results (outputs/outcomes)
- The assumptions and risks
- The strategies and approaches
- The cross-cutting themes
- The enablers

¹⁶⁴ 2022 UNICEF Draft country programme document

¹⁶⁵ UNICEF South Sudan Programme Strategy Notes 2023-2025

¹⁶⁶ 2022 UNICEF Draft country programme document

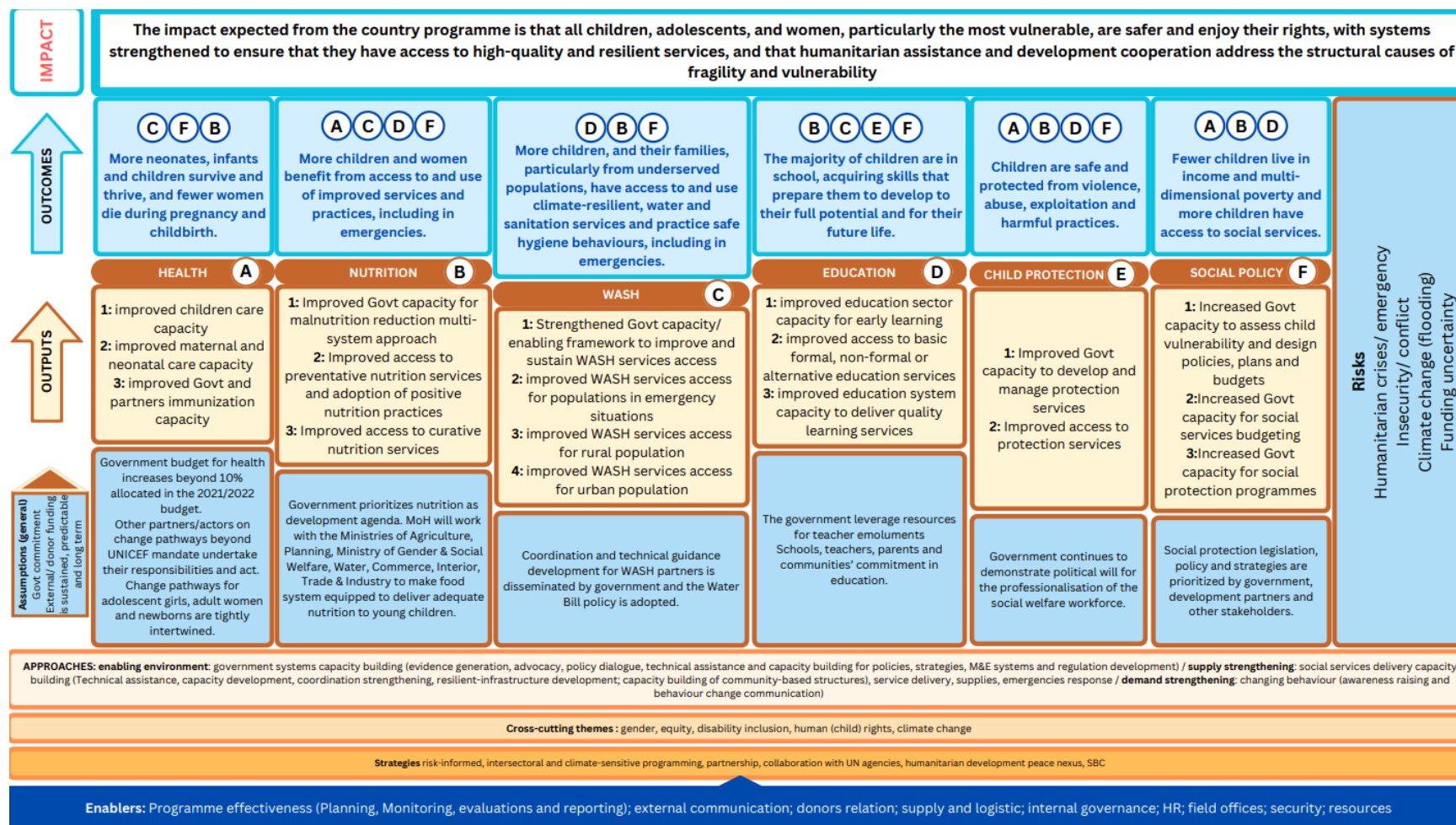
¹⁶⁷ Ibid

¹⁶⁸ Ibid

¹⁶⁹ Ibid

¹⁷⁰ UNICEF (2022) Draft country programme document

Figure 6 : Theory of change diagram



Theory of Change Statement

The impact expected by the programme is that all children, adolescents and women, particularly the most vulnerable, are safer and enjoy their rights, with systems strengthened to enable access to high-quality and resilient services; and that humanitarian assistance and development cooperation address the structural causes of fragility and vulnerability.

The programme has established structures, approaches and implementation strategies to achieve the expected outputs that should lead to expected outcomes and generate the expected impact.

The approaches adopted are:

- ▶ Promoting an enabling environment by convincing the government, using evidence generation, advocacy and policy dialogue, to adopt adequate policies and strategies; and supporting the development of legal framework and M&E systems through technical assistance and capacity building.
- ▶ Strengthening the social services supply through social services delivery capacity building; resilient infrastructure development; capacity building of community-based structures; coordination strengthening; as well as, when required, service delivery, supplies and emergencies response.
- ▶ Promoting demand for social services through SBC evidence generation, building institutional SBC capacity, implementing people centred approaches (Human Centred Design), community engagement, building partnerships and establishment of community feedback mechanism to understand service experience

The implementation strategy includes risk-informed, intersectoral and climate-sensitive programming, partnership, collaboration with UN agencies, and the adoption of humanitarian-development-peace nexus, with the cross-cutting themes of gender, equity, disability inclusion, human (child) rights and climate change.

These approaches are expected to achieve the following expected outputs:

- ▶ The government at national and at state levels, has strengthened institutional capacity and an enabling framework.
- ▶ The social services are improved and more accessible.
- ▶ The target population has Improved knowledge and empowerment to use social services including in emergency.

Those outputs should lead to the following expected outcome:

- ▶ Increased access and use of improved basic social services, including in emergency situations.

The achievement of expected results relies on the following key assumptions:

Assumptions

Assumptions (general)

- ▶ **Political stability** across the country enabling accelerated programming which is sustained and at scale.
- ▶ **Political commitment** from national and state governments (including government buy-in and focus on different sector priorities, public financing and accountability); and continued collaborations between national and state government ministries.
- ▶ **External/donor funding** for the different sectors will continue both for development activities and humanitarian activities and will be sustained, predictable and long-term in nature to allow for the strengthening of systems.

- ▶ **Macro-Economic stability:** Government establishes an environment of macro-economic stability (a complex framework for monetary and fiscal institutions and policies which will reduce volatility in key indicators such as prices, jobs, interest rates, investment and trade) enabling sustained and equitable economic growth in the country.

Assumptions health

- ▶ Government of South Sudan budget for the health sector funding increases beyond the 10 percent allocated in the 2021/2022 budget and is disbursed for appropriate use during the financial year.
- ▶ Other partners and actors (within and outside the health sector) on change pathways beyond UNICEF mandate will undertake their responsibility and contribute significantly to influence successful implementation.
- ▶ Investments, focus and priorities of the programme will include adolescent girls, adult women and new-borns since the change pathways are intertwined and tightly linked.

Assumptions nutrition

- ▶ The government of South Sudan prioritizes nutrition as development agenda
- ▶ National nutrition policies and multi sectoral strategies are developed, funded and implemented.
- ▶ The national and state Ministry of Health will work with the line ministries of Agriculture, Ministry of Planning, Ministry of Gender and Social Welfare, Water, Commerce, Interior, Trade & Industry to make food system equipped to deliver adequate nutrition to young children.

Assumptions WASH

- ▶ The long-awaited review of policies, including the Water Bill, are brought forward.
- ▶ The shift to include climate change at the core of the WASH programme will help identify funding sources.

Assumptions education

- ▶ The government of South Sudan will re-prioritise education as part of the national budget and leverage resources to invest in education.
- ▶ The Ministry of General Education is committed to improving public financial management and budget execution, particularly with regard to teacher emoluments.
- ▶ Schools, teachers, parents and communities will continue to be open to new ideas and engage effectively in intervention to improve education, especially for girls, children with disabilities, children in pastoralist communities, and children living in hard-to-reach and conflict/crisis-affected areas.

Assumption child protection

- ▶ Government continues to demonstrate political will for the professionalisation of the social welfare workforce.

Assumptions social policy

- ▶ Processes related to the drafting of the Social Protection Policy are initiated in 2025.
- ▶ The revised National Social Protection Policy Framework is costed with clear workplan and is approved by the Government and led by the Ministry of Gender.
- ▶ The proposed social protection instruments contained in the revised policy framework are child-focused and gender sensitive.
- ▶ The validation workshop of the revised policy framework is held in 2024 and approved by first quarter of 2025.

Assumptions Social Behaviour Change

- Communities will be receptive to norm changes in support of social services (WASH, Nutrition, Health, Education, Social Protection).

Inception report

- The Community Networks Integration strategy under the Boma Health Initiative will be finalised and approved by first quarter of 2025.
- A "systems approach" will be adopted that ensures strategic partnerships for close alignment of SBC with sector strategies and related advocacy for embedding SBC as an integral part of programme delivery and support.
- For SBC efforts in supporting demand generation for services to be effective, it is assumed that quality services will be in place and Social Protection provisions available to cover out-of-pocket expenditure for poor families to overcome economic barriers that prevent poor children from accessing services.

There are high level risks which if they occur will block or significantly divert the change pathways:

Risks

- ▶ Humanitarian crises and public health emergencies including natural and man-made disasters (e.g. sub-national conflicts, floods and famine) which affect access to services and strain the coping mechanisms and capacities of families and communities; and unpredictable events like COVID-19 pandemic with emergence of variants and disruptions of global order, economies, and supply chains.
- ▶ Increased insecurity and conflict within the country, exacerbated by rise in extremism and uncertainties around the peace process. These generate the additional risk of diversion of government's limited resources from social services to security.
- ▶ Climate change including the devastating flooding that has affected South Sudan continuously since 2019.
- ▶ Fiscal constraints including uncertainties around the disbursement of government allocations due to unstable economic situation, low level of fiscal discipline and liquidity in the country.
- ▶ Collapse of the economy or hyperinflation leading to macro-economic instability.
- ▶ Political instability due to disagreement on succession or elections.

3.5. Key stakeholders and partners of the programmes

To implement the country programmes, UNICEF established partnerships with South Sudan ministries at the national and state levels, government agencies, international organizations, NGOs, CSOs, academic institutions, donors, media organizations and private sector. The table below presents the different stakeholders per categories. Detailed description of stakeholders is presented in Annex 10.

Table 4 : Stakeholders of the programme

Stakeholders	Role/ interest in the CPD implementation
South Sudan ministries	UNICEF partners Capacity building and technical assistance beneficiaries Programme coordination, monitoring,, implementation
National Bureau of Statistics	UNICEF partners Capacity building beneficiary monitor and analyse child poverty and vulnerability, national development targets and the Sustainable Development Goals
South Sudan National Bureau of Standards	UNICEF partners Capacity building beneficiary Strengthen the food system's contribution to nutrition sector
University of Juba - Agricultural Science	UNICEF partners in the conduction of surveys on Nutrition

Inception report

South Sudan Urban Water corporation	UNICEF partners Capacity building beneficiary Programme coordination, monitoring,, implementation
International organisations (WFP, WHO, OCHA, IOM, UNDP, OHCHR, UNHR, FAO)	UNICEF partners
donors	Programme financing
NGO, INGO	UNICEF implementing partners
Private (construction Cies)	UNICEF implementing partners
Private agencies	intermediate beneficiaries
Community base structures	Capacity building beneficiaries Service provision
Children, adolescents, women, Vulnerable people, in emergency and non-emergency settings	Final beneficiaries

3.6. Geographical coverage

The CP's sectoral and cross-sectoral interventions under the 2019-2022 and 2023-2025 CP's in South Sudan has been implemented in all the ten states, in the two administrative areas and one area with special administrative status. The graph shows a schematic view of the counties where the program has been implemented. The accompanying graph (figure 7) provides a detailed schematic representation of the counties where the programmes have been implemented.



3.7. The Country Programmes' budgets

Figure 7 Country Programmes' geographical coverage

The country programme budget has two main funding sources: UNICEF and various donors. Table 5 presents the budgets for the two programme periods, and by components.

Table 5 Country Programme budgets

Period	Budget 2019-2022			Budget 2023-2025		
Programme component	Regular resources (M)	Other resources (M)	Total (M)	Regular resources (M)	Other resources (M)	Total (M)
Health	2 162	21 195	23 357	2 162	296 440	298 602
Nutrition	2 003	8 196	10 199	2 003	29 000	31 003
Water, sanitation and hygiene	2 003	21 764	23 767	2 003	69 000	71 003
Education	2 003	30 000	32 003	2 003	40 000	42 003
Child protection	2 525	17 149	19 674	2 525	16 000	18 525
Social policy	3 516	2 048	5 564	950	8 050	9 000
Programme effectiveness	14 960	18 314	33 274	16 014	23 500	48 514
Total	29 172	118 666	147 838	27 660	490 990	518 650

Source: Country Programme Document 2019-2022 and 2023-2025

The total planned budget for the 2023-2025 Country Programme is \$518.65 million, with a strong reliance on external donor funding (94.7%), and only 5.3% from UNICEF's core resources (see figure 8).

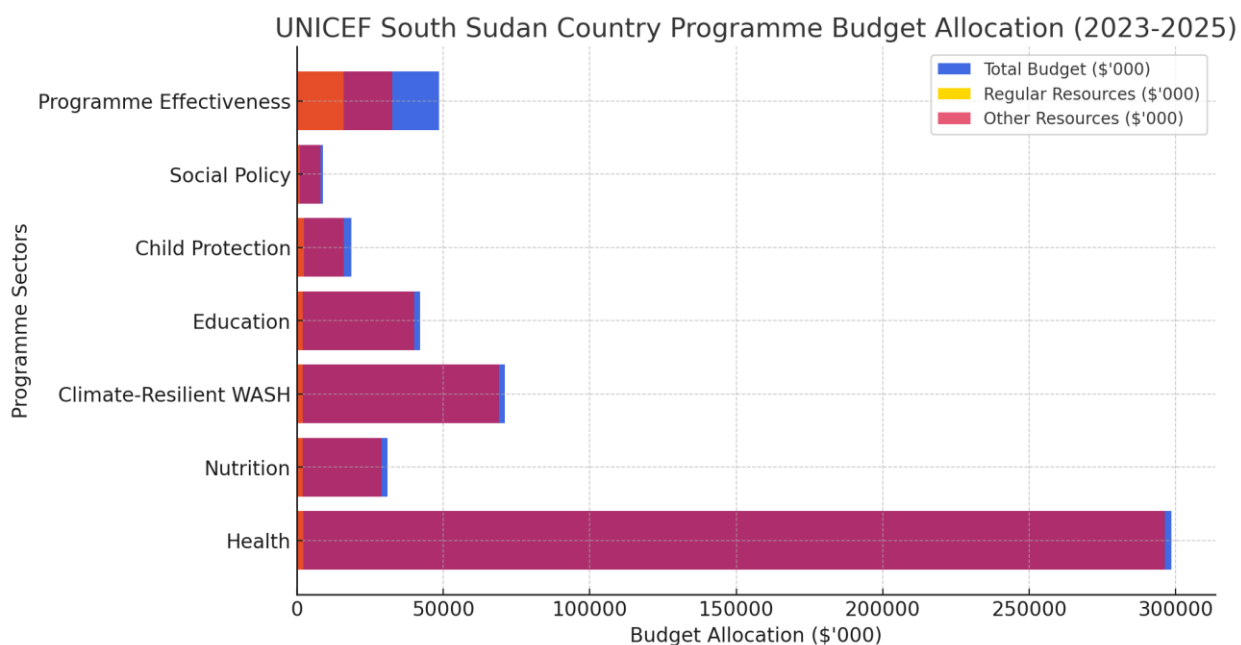


Figure 8 Budgetary allocation CP (2023-2025)

- **Total Budget** (in blue): The overall financial requirement for each sector.
- **Regular Resources** (in gold): UNICEF's core funding.
- **Other Resources** (in crimson): Funding that depends on external donors.

The budget review of the two programme cycles reveals some important trends (see table 6). Figure 9 also illustrates the difference in budgetary allocations by sector in the two programme cycles.

Table 6 Budget overview and key trends

Programme Sector	Total Budget (\$'000)	% of Total Budget (2023-2025)	% of Previous Budget (2018-2022)	Funding Trend
Health	298,602	57.57%	20%	▲ Significant Increase
Nutrition	31,003	5.98%	6%	↻ Stable
Climate-Resilient WASH	71,003	13.69%	14%	↻ Stable
Education	42,003	8.10%	20%	▼ Decrease
Child Protection	18,525	3.57%	10%	▼ Decrease
Social Policy	9,000	1.74%	5%	▼ Decrease
Programme Effectiveness	48,514	9.35%	15%	▼ Decrease
Total	518,650	100%	100%	↻ Adjusted Priorities

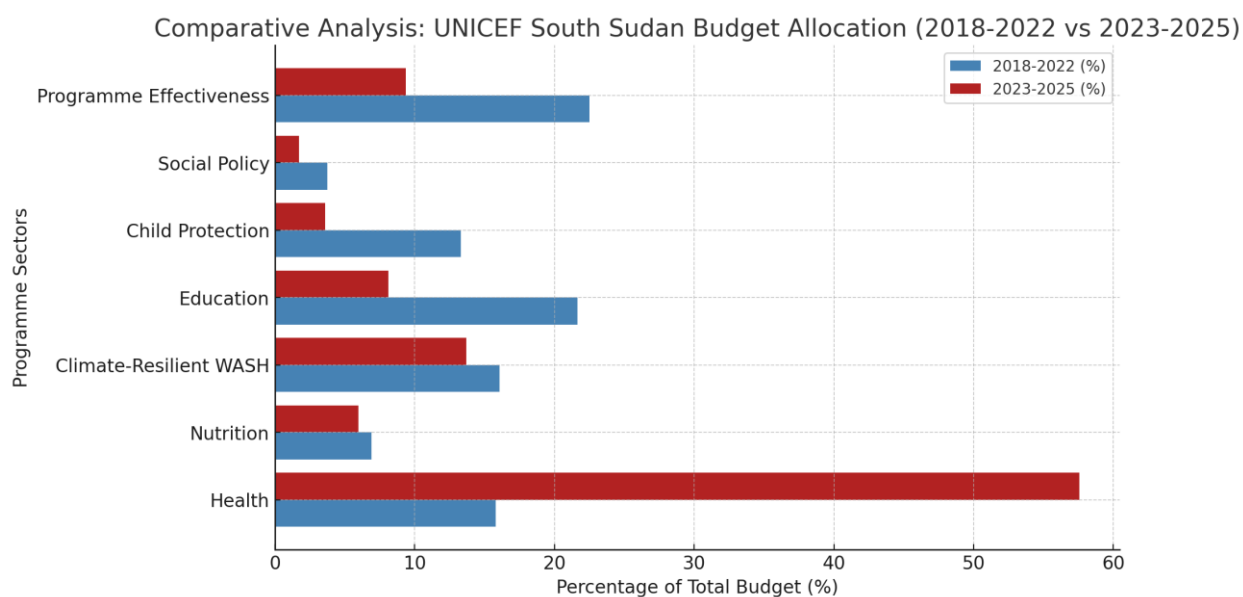


Figure 9 Budget allocation comparison (2019-2022 vs 2023-2025)

Budget comparison summary

A. Health (\$298.6 million | 57.57%)

- **Focus:** Primary healthcare, maternal-child health, immunization.
- **Funding Growth:** Significant increase (20% → 57%).

- **Priority Needs:** More funding for community health and emergency preparedness.

B. Education (\$42 million | 8.1%)

- **Focus:** School enrolment, literacy programmes, teacher training.
- **Funding Change: Significant drop (20% → 8%).**
- **Risk:** Possible long-term effects on literacy and education quality.

C. Child Protection (\$18.5 million | 3.57%)

- **Focus:** Birth registration, juvenile justice, mental health.
- **Funding Change: Sharp decline (10% → 3.57%).**
- **Risk:** Reduced protection for vulnerable children.

D. Climate-Resilient WASH (\$71 million | 13.69%)

- **Focus:** Clean water access, sanitation, hygiene facilities.
- **Funding Change: Stable allocation (~14%).**
- **Priority Needs:** Expansion of climate-resilient infrastructure.

E. Nutrition (\$31 million | 5.98%)

- **Focus:** Malnutrition treatment, maternal-child feeding programs.
- **Funding Change: Stable (~6%).**
- **Priority Needs:** Strengthen emergency food security support.

F. Social Policy (\$9 million | 1.74%)

- **Focus:** Child poverty analysis, financial protection systems.
- **Funding Change: Major decline (5% → 1.74%).**
- **Risk:** Weakening of social protection systems.

G. Programme Effectiveness (\$48.5 million | 9.35%)

- **Focus:** Monitoring, operational efficiency, evaluations.
- **Funding Change: Decrease (15% → 9.35%).**
- **Risk:** Reduced capacity for evidence-based programming.

4. EVALUATION PURPOSE AND OBJECTIVES

4.1. Purposes of the evaluation

The overarching purpose of the evaluation is to inform UNICEF of the relevance, effectiveness, efficiency, coherence, sustainability, connectedness, coverage, and impact of programme implementation strategies to reach the planned CPDs results (2019-2022 and 2023-2025) and shed light on potential corrective actions in the design and envisaged delivery modalities of the next CPD (ToC, change strategies, needed partnerships, and others). The evaluation aims not only to draw the main lessons from the current Programme (2023-2025) in order to inform and support the preparation of the future CPD, but also to provide evidence on the extent to which the expected results have been achieved, as well as the factors that have promoted or limited the achievement of results, notably by questioning the adaptability to the emergencies (such as those caused by the Covid-19 and the 2023 Sudan refugee crisis), to make the best use of UNICEF's change strategies, good practices, and innovations.

The evaluation has two operational goals: **accountability** and **organizational learning**, for a better use of results by all stakeholders, with a focus on emerging needs and the current programmatic landscape. Beyond UNICEF, the evaluation aims to generate sound evidence on the results of the 2019-2022 and 2023-2025 Programme of cooperation, document successful strategies for the most vulnerable and the impact of strategies implemented in different sectors. Also, the evaluation aims to make recommendations for potential strategies that could increase operational and strategic learning, service delivery and system strengthening in the sectors covered by the CP and other cross-cutting areas such as ECD, HIV, climate-sensitive programming, Adolescents & Youth, Communication, gender, disability inclusion, equity and human rights.

4.2. Objectives of the evaluation

The **main objective** of the evaluation is to identify lessons learned from the previous and current Country Programmes of Cooperation (2019-2022 and 2023-2025) to inform the design of the next country programme and to determine what needs to be done differently to help South Sudan achieve the SDGs by 2030.

By assessing and documenting what has worked so far, identifying key ingredients and areas that will require more focus (in terms of efforts, strategies, and funds), the evaluation is anticipated to stand as an important milestone for UNICEF Programme in South Sudan.

Specific objectives of this evaluation as clearly stated in the ToR are to:

- Assess the relevance, effectiveness, efficiency, coherence, sustainability, connectedness, coverage, and orientation towards impact of the previous and current South Sudan Country Programmes, with particular focus on the programme and operational strategies and UNICEF's positioning within the development community; with national partners, and field presence to respond to South Sudan's development and humanitarian needs.
- Identify and document key lessons from the 2019-2022 and 2023-2025 Country Programmes to make the best use of UNICEF's change strategies, good practices, and innovations.
- Provide a set of forward-looking and actionable recommendations to contribute towards course correction of the current Country Programme, strengthen programmatic and operational strategies in the design of the next South Sudan Country Programme, taking into consideration national and regional development priorities and the 2030 Agenda for Sustainable Development in the country.

4.3. Potential users of the evaluation

Lessons learned and strategic recommendations gained from this rigorous independent evaluation will be useful to the Government of South Sudan, UNICEF and development partners to reshape approaches, adopt responsive interventions, that can be used to influence design and implementation of the next CPD. Table 7 summarizes the categories of users of the evaluation.

Table 7 : Users of the evaluation

Evaluation Users	Uses of the evaluation (how the findings and recommendations will be used)
UNICEF ESARO	- To inform the design of the next South Sudan Country Programme - To inform the scope and scale of future assistance to the South Sudan Government - The evaluation will add to the knowledge base regarding the strategic contribution of the Country Programmes in advancing the agenda of SDGs in the country including in the vulnerable areas
UNICEF SSCO	- The evaluation is expected to generate recommendations that will strengthen programmatic and operational strategies in the design of the next South Sudan Country Programme - To provide insight into potential corrective actions of the current Country Programme. - Draw lessons on best practices
Government Level Stakeholders	- To identify progress and areas to strengthen within the current programme - The evaluation will enable evidence-based programming of strategic interventions to possibly inform future National Development Plans - The recommendations can be used for evidence-based public advocacy to leverage large scale public-private partnerships and adequate investment to different sectors - To scale up innovative strategies and approaches revealed by the assessment and accelerate progress towards the SDGs. - Draw lessons on best practices
Donors / Joint UN and Development Partners	- To inform future programming and investments. - Ensure better realignment of programme support and accountability at all levels.
INGO, NGO partners	- Identify progress and areas to strengthen - Draw lessons on best practices
Rightholders	- Improve accountability - Dissemination, youth engagement, feedback in communities to add value to how the CPs can be used

5. SCOPE OF THE EVALUATION

5.1. Thematic scope

This independent evaluation will focus on the **totality of the CPs portfolio**, including development and humanitarian interventions, cross-cutting issues and inter-sectoral support involving Communication for Development, data generation/child rights monitoring and gender. Essentially, as a country-level evaluation of UNICEF, the CPE will focus on the Government of the Republic of South Sudan and UNICEF CPDs approved by the Executive Board but also consider any relevant changes/revisions introduced during the

implementation. The scope of the CPE includes the entirety of UNICEF's engagement in the country, and therefore covers interventions funded by all sources, and includes any humanitarian or emergency response supported by UNICEF South Sudan during the period under evaluation. However, even though the CPE is expected to cover the entirety of the South Sudan CP, it is not meant to be an assessment of the full results framework. Therefore, the emphasis will be on assessing outcome level results while assessing individual programmes and operations change strategy's contribution to those results. The CPE will also examine the contribution of the South Sudan CP to advancing national development results (Revised National Development Strategy 2021-2024) and the SDGs through the United Nations Sustainable Development Cooperation Framework (UNSDCF), Convention on the Rights of the Child (CRC) and International Normative Frameworks. In principle, the CPE will not seek to conduct a full evaluation of individual programmes, project, or activities, but rather synthesize and build on the evidence already collected from evaluations/studies/research. Any gaps in the existing evidence will be bridged by primary data collection using quantitative and/or qualitative methods. The CPE will have a strong focus on gender, social and behaviour change, equity, and human (child) rights as cross-cutting theme across evaluation criteria and evaluation questions. In addition, the CPE will have a particular focus on UNICEF's positioning within the development community and national partners in relation to its child rights mandate.

The CPE will also examine the following areas:

- Identify missing areas in the current Country Programme that should be considered for inclusion in the upcoming CPD (key gaps in response; key beneficiaries missing, Key strategies to be used /employed UNICEF processes not being fully followed to be more effective).
- The core programming strategies SSCO to provide specifics);
- New programming areas (innovation, disability, children on the move, humanitarian, development, peace linkages).
- Operational management structures (matrix management and sub-national presence through field offices). Partnership management (ranging from traditional to non-traditional partners such as the government agencies, international organizations, NGOs, CSOs, academic institutions, donors, media organizations and private sector).
- Assess the implementation of multi-sectoral approaches under the current CPD.
- Analyze the extent to which impact for children and impact at scale can be demonstrated.

5.2. Geographical scope

The evaluation will concentrate on the CPs sectoral and cross-sectoral interventions in South Sudan's geographical areas with a particular focus on locations identified as priority areas under the 2019-2022 and 2023-2025 CP's.

5.3. Chronologic scope

This independent evaluation will cover the CP's period from **January 2019 to the present**, in alignment with UNICEF's 2019-2022 and 2023-2025 CPs.

6. EVALUABILITY ASSESSMENT

The evaluation team carried out a detailed scan of past, ongoing and planned programme approaches and strategies; which will enable insight into the context of the trend and causal analyses. The theory of change (ToC) and assumptions for the six programme components were reviewed; and an overall ToC was reconstructed collaboratively with the UNICEF stakeholders to enable us understand the explicit and implicit approaches that have been used by UNICEF so far. We also determined the availability of data / documents on which to base the evaluation. The documents received were analysed to verify the information and data

provided and the extent to which the data are gender and equity sensitive. The findings are summarized below and elaborated in the evaluability assessment table in Annex 8. Main findings and key recommendations from select evaluations are included in Annex 9.

Clear description of the baseline situation to measure change

The RAM reports provide baseline indicators and baseline studies were conducted by all the components. The strategy notes also provide baseline situation for the CP 2023 – 2025.

Clearly defined expected results

Expected outputs and outcomes are described in the RAM

Set of appropriate indicators to measure change

The RAM provide a set of indicators for each expected outputs and outcomes.

Monitoring system for the regular collection and analysis of performance data

Annual data collection are produced (RAM and COAR) presenting the results achieved.

Complementary surveys, studies and reports that provide data and information related to programme interventions, strategies, approaches, resources mobilised, qualitative progress and external factors/ barriers, bottlenecks

The information provided by complementary surveys, studies and reports reflect variable evaluability according to the components and the results. (see Annex 8 for more details)

The evaluability is classified as high for the following results:

- Communication at community level
- Capacity building of community- based structures
- Construction/ rehabilitation
- Social services provision and supplies distribution
- Advocacy / evidence generation
- Capacity building of institutions
- Positive behaviours adopted
- Community participation/ involvement
- Service delivery capacity
- Access of social services
- Use of social services

The evaluability is classified as medium for the following results, primarily due to incomplete or insufficient information. This includes gaps in data coverage over the evaluation period, limited coverage of only one or two components, and partial data. Additionally, there are challenges in collecting primary data from various sources and methods.

- Awareness or change in social norms
- Budget for social sector investments
- Design and Adoption of adequate policies/ strategies by institutions thanks to the programme
- Strengthened institutional capacity thanks to the programme
- Barriers and bottlenecks to the achievement of results analysed and addressed by UNICEF
- Strengthen coordination emergency preparedness and response plans
- Public expenditure reviews and tracking

Gender and equity-sensitive data/information:

The evaluability related to gender is classified as medium due to the insufficient disaggregation of data by gender in the RAM reports across health, WASH, education, and social policy components. Furthermore, the health and WASH components have produced a limited number of gender-sensitive study reports. Qualitative data on gender will primarily be obtained from programme stakeholders.

The evaluability concerning equity is determined to be low, as the RAM indicators lack equity sensitivity, and there are very few studies providing equity-sensitive information. Secondary quantitative data on equity will be gleaned from available national population based surveys (e.g. MICS, DHS) within the periodic scope.

7. CRITERIA AND EVALUATION QUESTIONS

The evaluation questions were guided by the Terms of Reference (TOR) and the OECD/DAC criteria. In total, there are eight evaluation criteria encompassing sixteen evaluation questions, four of which were incorporated by the evaluation team and subsequently ratified by regional and country-level UNICEF stakeholders. Additionally, evaluation sub-questions were developed in close collaboration with UNICEF stakeholders to ensure comprehensiveness.

The Evaluation Questions and Sub-Questions

1. Relevance

- 1.1 To what extent has the Country Programme remained relevant and aligned with national priorities, legislative frameworks, plans and strategies, UNICEF's Strategic Plan, and the UN joint programme in South Sudan?
 - 1.1.1 To what extent were the objectives of the Country Programme, the design and approaches appropriate (as relating to the CP 2019 – 2022) and have remained appropriate (in the current programme cycle) to respond to beneficiaries, country, and partner/institution needs, policies, and priorities?
 - 1.1.2 To what extent has the programme employed the mix of policy advice, systems strengthening and service delivery intensification appropriate for the country context?
 - 1.1.3 In the current cycle, has there been any significant changes to the Government strategies and priorities in the areas of UNICEF programming?
- 1.2 How responsive and adaptive has the Country Programme been to the changing context and emerging needs of children (including adolescents, young people, and the most marginalized, including persons with disabilities), particularly in view of the COVID-19 pandemic, the leaner funding landscape and shift from direct service delivery?
 - 1.2.1 What is the extent to which the Country Programme incorporates equity, HRBA, Humanitarian, Disability and GE goals in its design?
 - 1.2.2 How did the Country Programme respond to external changes and shocks, in particular COVID-19 pandemic, droughts / flooding, inflation, fluctuations in the funding landscape?
 - 1.2.3 To what extent is the Country Programme appropriate to ensure that the needs and the rights of children and women (including adolescents, young people, and persons with disabilities), especially the most marginalized, are met including after the effects of COVID-19?
 - 1.2.4 To what extent did the Theory of Change (ToC) in each of the country programme areas integrate key social and behavioural drivers to enable the achievement of sectoral and cross-sectoral results?
- 1.3 To what extent has UNICEF's positioning as a strategic partner contributed to the programme's achievements ?

- 1.3.1 What are UNICEF's comparative strengths in the country – particularly in alignment with other UN agencies and development partners – and how have these been harnessed to achieve synergetic effects and to position UNICEF where it can make the biggest difference?
- 1.3.2 What variations exist regarding UNICEF's comparative strengths and advantages for both upstream and downstream engagements and how are these adapted in the programme?
- 1.3.3 What are the influences of donors, via funding, on maintaining the programme focus of UNICEF? *Has UNICEF changed its priorities based on funding available, or was UNICEF compelled not to undertake priority actions due to unavailability of donor funds?*

2. Coherence

- 2.1 To what extent were meaningful partnerships or coordination mechanisms established with other key actors e.g. government at national and local levels, other UN agencies, civil society, NGOs, private sector, academia, etc. and how have they contributed towards addressing the predefined bottlenecks and contributing to the results at scale?
- 2.2 To what extent have key UNICEF strategies and international commitments been consistently integrated in all aspects of SSCO programming and implementation, including policy and advocacy, particularly vis-a-vis the Core Commitments for Children in Humanitarian Action and UNICEF's Gender Action Plans (2018-2021, 2022-2025)?

3. Effectiveness

- 3.1 To what extent has the Country Programme achieved its intended results, or is likely to achieve them, including any differential results across gender, disability inclusion, social behaviour change, income, ethnicities, etc.?
 - 3.1.1 To what extent were the outputs delivered to the standards expected and how do they contribute towards achieving outcomes?
 - 3.1.2 To what extent did the six key strategies adopted by UNICEF integrate crosscutting priorities (climate changes incidences, gender, social and behaviour change, disability inclusion, equity and human rights) and demonstrate a reasonable contribution at the Outcome level, including any differential results across groups?
 - 3.1.3 To what extent have the interventions, communications and advocacy efforts been gender responsive/transformational?
 - 3.1.3.1 How have UNICEF CO staff and implementation partners been capacitated to integrate and implement gender responsive/transformational programmes?
 - 3.1.4 In the current programme cycle, has there been any significant changes to the Government policies or strategies as a result of the UNICEF Country Programme?
 - 3.1.5 To what extent did the implementation of the country programme consider the views, perspectives and opinions of at-risk/affected people around their satisfaction with the quality, effectiveness and accountability of results?
- 3.2 To what extent has the programme relied on government and local NGOs in its implementation and how has that influenced the achievement of expected outputs and outcomes? What were the main challenges how was this managed?
 - 3.2.1 To what extent has the increased use of local partners /NGOs for service delivery (in the current programme cycle) influenced the achievement of the expected results?

- 3.3 What are the major factors influencing the achievement (or not) of the programme outcomes, including equity, behavioural and gender-related results?
What were the main challenges and how were they managed?

4. Efficiency

- 4.1 To what extent have the programme and the office structures supported the cost-effective and timely delivery of the Country Programme?
- 4.1.1 To what extent did the office structures provide the required resources/ inputs to implement the programme? (PMER, SBC; external communication; donors relation; supply and logistic; field offices; security; field operations, Admin and HR)?
- 4.1.2 To what extent are SBC interventions designed and implemented in coordination with other programme areas, and with other partners?
- 4.1.3 How have these structures facilitated or hindered resource mobilization and utilization of funds?
- 4.2 Were resources (funds, human resources, time, expertise etc.) allocated and utilized strategically to track and achieve results, including equity and gender-related objectives?
- 4.2.1 Which of the chosen programme strategies resulted in more value for money?
- 4.2.2 Were there alternatives that would have worked better and what are those?

5. Impact

- 5.1 What positive and negative (intended and unintended) long-term outcomes/impact are likely to be produced by the South Sudan CP interventions?
- 5.1.1 To what extent can the South Sudan programme demonstrate impact for children and impact at scale?
- 5.2 To what extent did the preceding Country Programme (or Country Programmes) contribute to positive long-term change on children, particularly the most marginalized and vulnerable?

6. Sustainability

- 6.1 To what extent has the country programme contributed to improving government systems, service delivery mechanisms, and service integration in a manner that the benefits for children would extend after the termination of UNICEF programmes?
- 6.1.1 To what extent has the Government of South Sudan show ownership of the CP, and is able and willing to fund the continuation of CP interventions?
- 6.1.2 To what extent have systems and capacity being strengthened within the Government of South Sudan to ensure the benefits of CP interventions are likely to continue?
- 6.2 To what extent have the programme strategies, plans, and tools, particularly those with an equity and gender focus, been institutionalised in systems, policies, mechanisms and strategies among government, NGO/civil society, and other partners and stakeholders?
- 6.2.1 To what extent was the development-humanitarian nexus considered in activities designed to build resilience of people, communities, and systems?

7. Connectedness

- 7.1 To what extent has the UNICEF response to humanitarian issues contributed to strengthening national preparedness and response efforts, including the humanitarian, development, and peace linkages?

7.1.1 What are the major external factors influencing the achievement (or not) of this result?

8. Coverage

8.1 How effectively has UNICEF managed to reach the most vulnerable populations, such as children, women, and those with disabilities?

8.1.1 To what extent did the country programme contribute to the reduction of inequities and exclusion and progress towards the achievement of greater gender equality?

Annex 2 details the evaluation matrix with the questions, sub-questions, indicators, methods of data collection and analysis including the sources of information.

8. METHODOLOGY

8.1. Evaluation approach

The evaluation approach and design have been closely informed by the ToR. We will follow a **participatory and consultative evaluation approach** ensuring meaningful participation of all relevant stakeholders. This perspective of evaluating is especially important to effectively inform future interventions and policy / decision makers. This approach was initiated during the inception phase to develop the theory of change, which was thoroughly discussed and validated with UNICEF. Initial scoping interviews were conducted with key personnel from UNICEF and the government to gather expectations and suggestions for sampling strategies for the CPE. The formulation of evaluation questions and the evaluation matrix were informed by this preliminary information, as well as the proposed sampling strategy. The participatory approach has been maintained through regular weekly meetings aimed at fostering continuous dialogue throughout the evaluation process. A debriefing session will be conducted at the end of the data collection phase, alongside two workshops designed to present and discuss the evaluation results. Additionally, a comprehensive stakeholder analysis was carried out to identify all relevant partners of UNICEF. This analysis ensured their inclusion in the data collection phase, thereby promoting a holistic and inclusive evaluation process.

Appreciative Inquiry will be carried out for this evaluation and complemented by a **realist evaluation approach and mapping of causal paths**^{171,172}. The realist evaluation approach sets out to explain what works, how, why, for whom, to what extent, and **in what circumstances**. It assumes that programme effectiveness will always be conditional, and it is oriented to improve understanding of the key contexts and mechanisms contributing to how and why programmes work. Key to realist evaluations is the assumption that nothing works everywhere or for everyone, and that **context is critical for programme results**. This requires a good understanding of the context, which will be ensured through a comprehensive context analysis to frame the CP results and performance.

As such, the **explanatory framework in the realist approach** will be based on the notion that outcomes are generated by the CP and its context as a full system. The robustness of the explanatory framework will be based on the broad range of data sources that will be triangulated. While a major strength of the realist evaluation approach for a theory-based evaluation is its recognition of assumptions which are context-based, drawing broader lessons-learned can be challenging as well as specific attribution of changes to the country programmes. The CPE will therefore complement the realist evaluation with a contribution assessment to map out causal paths based on the narratives collected during the primary and secondary data collection.

The theory of change analysis is wholly compatible with the principles of appreciative enquiry, realist evaluation and contribution assessment. It provides a framework for identifying the ways in which the UNICEF CP is expected to influence key outcomes, taking note of contributions required from other stakeholders, and highlighting the assumptions which must hold for the programme to be effective.

8.2. Evaluation design

The evaluation will follow a **non-experimental and utilization focused design**. The TOR emphasizes on assessing outcome level results while assessing individual programmes and operations change strategy's contribution to those results and examining the contribution of the South Sudan CP to advancing national development results. Since it is impractical for us to design an 'experiment' to test cause and effect of the programmes, we will use **contribution analysis** to assess the performance of the programmes towards

¹⁷¹ For introduction to the principles of Realist Evaluations see Better Evaluation "Realist Evaluation." Accessed 28 December 2020

¹⁷² For introduction of principles of mapping of causal paths see Copestake, J. et al (2019) "Attributing Development Impact - The Qualitative Impact Protocol (QulP) Case Book." Practical Action Publishing, Warwickshire.

outcomes and effects/impact. Contribution analysis was originally designed to deal with the attribution problem when working with existing routine monitoring data, but the approach has been broadened over time.¹⁷³ For this evaluation, we will focus on questions of ‘contribution’, specifically to what extent observed results (whether positive or negative) are the consequence of the CPs. Using contribution analysis will provide an alternative way for us to think about the problem of attribution since we cannot use the traditional positivist approach of proving causality via a pre-post intervention approach. We will not attempt to prove that one factor ‘caused’ the desired outcome, but rather we will explore the contribution of the operation change strategies, the CPs including the individual programmes are making towards the observed results. We will leverage the programme logic in the theory of change which shows the activities, outcomes and contexts; and the evidence collected from various sources to build a credible ‘performance story’. This will demonstrate whether the CPs are indeed an important influencing factor in **driving change**, perhaps along with other factors. We will explicitly explore the most likely alternative explanations, present evidence to discuss them, and where appropriate, accept or discount them. This will help reduce the uncertainty about the contribution made and strengthen the argument in favour of the programmes’ outcomes and effects. We will employ a **convergent (concurrent) design** for the systematic use of **mixed methods**. The primary quantitative and qualitative data will be collected in parallel, within the same time frame. Integration will be carried out during data analysis and interpretation of results.

The secondary and primary **quantitative** data will provide a starting point for analysis, and the qualitative data will be used to further explain the quantitative results. If areas of divergence emerge, we will ascertain the cause of the discrepancy before drawing conclusions. For instance, we will check if the difference is caused by answers given by stakeholders due to hierarchy or social desirability; or due to researcher error such as the framing of questions.

The **qualitative** research component will provide a rich understanding of relationships, trends, and patterns emerging from the quantitative component and will help us triangulate survey results to confirm, dispute, or provide answers to contradictory and unexpected results from the quantitative evaluation. Using this mixed-methods approach, quantitative outcome evidence will be complemented by narrative causal statements collected directly from relevant programme including UNICEF and government stakeholders, via key informant interviews (KIIs). The respondents will be asked about the strategies and main changes during the relevant recall period. They will be prompted to share what they perceive to be the main drivers of these changes, and to whom or to what they attribute these changes. Because these drivers might be of complex and multiple sources, these narrative causal statements are suitable for identifying linkages of programmes with their effects and their complex relationships.

Contribution analysis implementation

The evaluation team (ET) will use contribution analysis to assess causal questions and infer causality in the evaluation using the **six-step approach**.¹⁷⁴ The ToC with its assumptions and risks was developed collaboratively with UNICEF regional and country programme stakeholders during this inception phase. The ET in consultation with programme stakeholders will examine how the CPs are contributing to the envisaged outcomes and impact detailed in the re-constructed ToC. Contribution analysis will be conducted at two levels: that of the ‘internal’ (programme) stakeholders (supply side) and ‘external’ (beneficiaries) stakeholders

¹⁷³ Mayne J (2001) Addressing attribution through contribution analysis: using performance measures sensibly. Canadian Journal of Programme Evaluation 16; 1-24

(demand side). The internal stakeholders applied delivery of benefits through capacity building, tools, technologies, knowledge exchange, advocacy for beneficiaries to access education and reduce short-term hunger and nutritional benefits and improve learning outcomes. The external stakeholders as part of the demand side responded to interventions and are expected to produce the evidence that they achieved the intended results. This evidence will also be derived from existing population data, surveys and evaluations. Contribution analysis infers causality from that evidence.¹⁷⁵ The ET will work through a set of contribution stories that assist in answering the relevant evaluation questions as shall be constructed for contribution assessment and applied as a checklist with the KIIs and the perception survey. We will obtain relevant information from multiple sources (both primary and secondary) and validate findings through triangulation to inform evaluation results. Active participation of the programme stakeholders in the analysis will ensure that all critical aspects of the programme are covered and that the usefulness of the findings is not compromised. This approach will allow the programme stakeholders to learn from the process and own the findings, and facilitates effective improvement of programming.

8.3. Evaluation methods

Quantitative methods

Perception survey – a comprehensive perception survey will be conducted among key stakeholders to provide quantitative data on the relevance and effectiveness of the CP interventions. This survey will measure the stakeholders' satisfaction with the interventions and document their success stories. One potential limitation of this approach is the limited participation of key stakeholders in primary data collection efforts, whether through interviews, workshops, or the online perception survey. To mitigate this risk, the CPE team will maintain close communication with the South Sudan Country Office and the Evaluation Reference Group (ERG) established for the CPE. The perception survey questionnaire is elaborated in Annex 3.

Secondary quantitative data analysis – this will include analysis of routine data generated by the UNICEF monitoring mechanism (and / or those of line Ministries (DHIS data) or other implementing partners), and relevant population based data MICS, DHS, past programme reports etc. to determine trends and gain insight into coverage and effectiveness of the interventions.

Qualitative methods

Desk review - has been carried out on programme documents, including national and international literature; existing studies at national level and documents from government ministries: (organizational, country levels, etc.) and will continue to be used to inform different stages of the evaluation. This has been supported by preliminary discussions and scoping interviews with UNICEF regional and country stakeholders as well as the implementing partners to provide additional context and clarifications during the inception phase. Overall, the documents reviewed display a clear presentation of the objectives of the programme and the underlying programme logic. The stakeholders and their roles are clearly defined. The logframe indicators provides information on how progress towards the achievement of results have been measured. Desk review has been used in the inception phase, for the development of the theory of change, the analysis of the evaluability of the Programmes and the development of the methodology. In the data collection phase, the review will provides secondary data as a source of information to answer the evaluation questions.

Key Informant Interviews (KII) - semi-structured interviews using topic guides will be used to collect in-depth information from UNICEF, government, other implementing stakeholders including technical and financial partners, across all the evaluation criteria including evidences on interventions, results achieved, factors that may have interacted and challenges encountered. This method also makes it possible to obtain data related to

¹⁷⁵ The Canadian Journal of Program Evaluation Vol. 16 No. 1 Pages 1-

24<https://pdfs.semanticscholar.org/7501/501b7fb4ee9f31985540f3e1ca661f262ec6.pdf>

connectedness, as well as on gender, human rights and equity aspects. The informed consent forms and generic topic guides for the KII are detailed in Annex 3.

Participatory Appraisal workshops

1. **The 1-2-4-All method**¹⁷⁶ The evaluation team will apply the 1-2-4-All method to the CPE by organizing structured sessions with UNICEF and government stakeholders. Initially, individuals will reflect independently on specific programme strategies and issues identified during data collection. Participants will then form pairs to exchange insights and generate initial ideas. Subsequently, they will join groups of four to discuss shared observations and potential solutions in greater depth. The 1-2-4-All method, is a collaborative facilitation technique, and will be used to systematically encourage idea generation through a structured process. Ultimately, it leads to consensus or a shared understanding among participants. The structured approach of this method will be used to enhance the quality of observations and insights, promote collaborative interaction, and generate more comprehensive information on identified issues.
2. **After Action Review**¹⁷⁷ The evaluation team will implement the After-Action Review (AAR) method to ensure that the CPE benefits from a structured reflection on experiences, successes, and challenges encountered during the previous programme cycle (2019-2022). This method will also provide actionable insights for continuous improvement in the current programme cycle (2023-2025). During an AAR, facilitators will pose questions such as "What happened?", "What worked?", and "What can be improved next time?". These questions will guide discussions with key stakeholders, including UNICEF, government officials, and other partners. The aim is to analyze successes, identify challenges, and extract lessons learned. This structured reflection will generate actionable insights to enhance programme implementation, ensure alignment with objectives, and effectively address emerging issues.

8.4. Sampling strategy

Selection of the counties

Though the CPE is expected to cover the entirety of the South Sudan, primary data collection will not take place in all its counties. The counties for data collection were selected purposively in collaboration with UNICEF Country Office. The criteria for selection of the counties include:

- Intensity of the interventions - health / WASH/ nutrition/ education/ child protection/ social policy). Areas that had multiple interventions were prioritised in the sampling.
- Security status - insecure areas were considered based on the comprehensive sampling criteria. Insecure areas that may be able to demonstrate impact of the CP interventions were prioritised.
- Accessibility (influenced by geographical terrain / flooding / intercommunal conflict) – some priority was given to shock prone areas including areas prone to epidemics, floods, droughts, and food insecurity.
- Mix of rural and urban areas
- Areas where the interventions have been active in both programme cycles were prioritised
- Areas where child protection was achieved in the previous 2-3 years and where impact can be identified
- Existence of IDP / Refugee camps

Awiel East, Twic , Juba, Kapoeta East, Yambio, Leer, Malakal , Abiemnom were selected based on the aforementioned criteria and the evaluation team will finalize the selection of five counties for data collection in collaboration with the Country Office stakeholders.

Sampling of respondents for the qualitative interviews and the perception survey

¹⁷⁶ Liberating Structure developed by Henri Lipmanowicz and Keith McCandless <https://www.liberatingstructures.com/1-1-2-4-all/>

¹⁷⁷ <https://www.betterevaluation.org/methods-approaches/methods/after-action-review>

Purposive sampling will be employed for the selection of stakeholders for the KII and perception survey based on the criteria of function and interaction with the CPs. Stakeholder analysis will support the purposive selection of interviewees, aiming to maximize the value extracted from a limited number of interviews while ensuring a balanced representation across stakeholder groups.

A comprehensive stakeholder analysis, detailed in section 3.5 and Annex 10, will be utilized to identify specific stakeholders and ensure appropriate representation across various groups during the evaluation. The evaluation team will adopt a consultative approach, engaging a wide range of stakeholders within the available timeframe to ensure that the views of all key groups are considered, reflected, and triangulated. The initial list of potential interviewees will be provided by UNICEF, as outlined in the categories in Annex 10. During the fieldwork phase, this list will serve as a starting point, with snowball sampling employed to complement the selection process.

The evaluation team will maintain a log of interviewees, periodically reviewing it to ensure a balanced representation (internal versus external, policy versus implementing, sectoral spread, government versus other key actors, etc.). This approach ensures that the evaluation can make well-rounded and unbiased judgments.

8.5. Data analysis

Quantitative data analysis

Secondary and primary quantitative data will be analysed using Stata¹⁷⁸ for the most part. Originally, data captured using mobile phones will be exported as Comma Separated Values (CSV) in Excel before exporting to Stata. Basic statistical outputs will include frequency distributions with percentages, online analytical processing (OLAP) cube reports for measures of central tendency and cross-tabulations. Simple tests will be performed to assess similarities between groups using observable characteristics. This will be done using standard statistical inferential methods on the measures of central tendencies. The analysis will start with descriptive statistics, including key central tendency and dispersion measures, using data from individual or multiple survey items. These statistics will also be presented for sub-groups, including by sex, age, state, etc., depending on data sufficiency and representation. It is critical to note that this analysis will consider gender equality and the gender lens in data analysis where possible. As appropriate, descriptive statistics will be presented in tables, bar charts, histograms, and other visualisations. The choice of analysis will depend on the nature of the variable and its relevance in addressing the assignment's key objectives.

Qualitative Analysis

FGD and SSIs (including KII) will be audio-recorded and transcribed. Data will be analysed using the qualitative data analysis software, NVivo 12 Pro.¹⁷⁹ An inductive approach and open thematic coding will be used. Transcripts will be read and coded by two qualitative researchers, using common themes and sub-themes according to the evaluation matrix. A third qualitative researcher will code a few transcripts to ratify the codes and themes/sub-themes identified. Analysis will be conducted iteratively using a three-pronged approach: "noticing, collecting, and thinking".¹⁸⁰ The ET will also identify emerging themes while coding and labelling of qualitative data. Analysis of the findings will be guided by the evaluation matrix.

¹⁷⁸ StataCorp (2021). Stata: release 17 - Statistical software, College Station, Texas, StataCorp LP.

¹⁷⁹ © QSR International Pty Ltd.

¹⁸⁰ Seidel J.V Qualitative Data Analysis 1998 <http://eer.engin.umich.edu/wpcontent/uploads/sites/443/2019/08/Seidel-Qualitative-Data-Analysis.pdf>

The analysis will use a **realist approach** to understand “how, why, for whom, and under which conditions” interventions work,¹⁸¹ with the aim to be pragmatic by producing policy-relevant findings at a high level of abstraction.¹⁸² To do so, the ET will use context-mechanism-outcome configurations (CMOC) to identify particular patterns of interaction. Essentially, the analysis describe how specific contextual factors (C) work to trigger particular mechanisms (M), and how this combination generates various outcomes (O). By exploring these mechanisms of change, the evaluation will improve the understanding of how the programme works within specific contexts, and what conditions hinder or promote successful outcomes.

Contribution analysis (elaborated in section 8.2) will be used to answer the evaluation questions related to effectiveness, efficiency, impact, sustainability, connectedness and coverage evaluation criteria, including cross-cutting priorities (climate changes incidences, gender, disability inclusion, equity and human rights). The contribution analysis will assess whether the envisaged approaches were implemented, led to expected outputs and induced expected outcomes and impact and, when needed, the reasons why it did not happen as expected, taking into account external factors.

The evaluation will systematically integrate **gender equality and equity analysis**. This assessment will primarily concentrate on assessing the inclusion of an equity and a gender approach in the design, implementation and monitoring of the CPs. The evaluation will seek input from various stakeholders to identify **gaps** and explore how gender-transformative approaches, which address norms as the root causes, can enhance the programme's effectiveness and long-term sustainability in the context. The analysis will rely both on available secondary data (UNESCO Institute for Statistics (UIS), World Development Indicators (WDI) etc.) and on primary data (KIs). The analysis will:

- Identify gender and equity -related issues that emerged that were overlooked in the programme design and implementation.
- Detect which data allows monitoring of gender-related effects of the programme.
- Assess if the programme has no potential unintentional negative gender effect.
- Detect opportunities to enhance future CPs in promoting GEWE through a gender-transformative approach.

The **financial analysis** component of the evaluation of the UNICEF South Sudan Country Programme (2019–2022 and 2023–2025) will assess the efficiency, effectiveness, sustainability, and financial accountability of the programme. The approach will integrate cost-effectiveness analysis, financial risk assessment, and budget execution reviews to provide an evidence-based financial performance assessment that will inform strategic decision-making. The financial analysis will apply a multi-faceted approach, leveraging both quantitative and qualitative methodologies. This ensures a comprehensive assessment of financial efficiency, fund utilization patterns, and the sustainability of programme investment.

The financial analysis will be structured around the following key frameworks:

- **Cost-Effectiveness Analysis (CEA):** Measuring programme costs relative to achieved outcomes, determining the cost per unit of impact (e.g., cost per child vaccinated or cost per improved WASH facility).
- **Cost-Benefit Analysis (CBA):** Assessing the return on investment for key interventions by comparing programme costs with projected socio-economic benefits.

¹⁸¹ Pawson R., Tilley N. (2004). *Realist evaluation*. England, London: Sage.

¹⁸² Salter K. L., Kothari A. (2014). Using realist evaluation to open the black box of knowledge translation: A state-of-the-art review. *Implementation Science*, 9, 115.

- **Value for Money (VfM) Assessment:** Evaluating financial efficiency across four dimensions—economy, efficiency, effectiveness, and equity—based on the OECD-DAC evaluation criteria.
- **Budget Execution and Absorption Analysis:** Examining budget allocation vs. actual expenditure trends, identifying variances, delays, and deviations.
- **Financial Sustainability and Risk Analysis:** Evaluating risks related to donor dependency, inflation, foreign exchange fluctuations, and fiscal instability in South Sudan.
- **Comparative Benchmarking:** Assessing UNICEF South Sudan’s financial performance against similar programmes in fragile settings, such as Central African Republic, DRC, and Somalia.
- **Equity and Gender Budgeting:** Investigating whether financial allocations prioritize marginalized populations, including women, children, and persons with disabilities.

8.6. Quality assurance

The CPE will be guided by and will be consistent with the United Nations Evaluation Group (UNEG) Norms and Standards¹⁸³, the UNEG “Ethical Guidelines”¹⁸⁴ and UNEG Code of Conduct¹⁸⁵, as well as with the UNICEF Procedure on Ethical Standards in Research, Evaluation and Data Collection and Analysis¹⁸⁶, UNICEF corporate guidance for equity focused evaluations¹⁸⁷, UNICEF guidance on integrating gender in evaluations¹⁸⁸, and the UNICEF Adapted UNEG Evaluation Reports Standards¹⁸⁹.

Ensuring the quality of the evaluation products will be taken very seriously by the evaluation team. This started from clarifying the needs and expectations of UNICEF ESARO during the inception phase through email communications and Microsoft Team meetings. All products will be shared with UNICEF’s Regional Office Evaluation Manager and the Regional Evaluation Adviser for feedback and approval. Quality checks will be included at all stages of the process. We will utilize data triangulation to increase the validity of the evaluation.

The evaluation questions and study instruments will be harmonized and understood unanimously by the evaluation team. All field staff (supervisors, data collectors and facilitators, note takers) for the additional KIIs will receive an intensive training facilitated by the international and local experts. The training will be conducted using a training manual with information on the purpose and objectives of the evaluation; designed for enhancing interviewing skills, data quality control and adherence to ethical consideration; and familiarizing the field staff with the data collection tools. The training will be participatory, including presentations and mock interviews.

The KII topic guides will be tested to ascertain the practicability of the methodology, as well as the fluidity and ease of administering them. Thus, the instruments will be tested for completeness, ambiguity, appropriateness, etc. Pilot testing will also serve as a rehearsal for the OAG team to fine-tune their approaches and techniques. The local and international evaluation experts will follow-up the field data collection process and ensure adherence to the quality requirements set by the ToR and inception report.

We will carry out **data triangulation** using a variety of data sources to corroborate findings. Any weakness in one type of data will be compensated for by the strengths of other data, thereby increasing the validity and reliability of the results. Primary quantitative and qualitative data will be triangulated with secondary quantitative data.

¹⁸³ United Nations Evaluation Group (2016) “Norms and Standards for Evaluation.”

¹⁸⁴ UNEG (2008) “UNEG Ethical Guidelines for Evaluations.”

¹⁸⁵ UNEG (2008) “UNEG Code of Conduct for Evaluation in the UN system.”

¹⁸⁶ UNICEF (2015) “UNICEF Procedure for ethical standards in Research, Evaluation, Data Collection and Analysis”

¹⁸⁷ UNICEF (2011) “How to design and manage equity focused evaluations. UNICEF (2011) “How to design and manage equity focused evaluations.”

¹⁸⁸ UNICEF (2019) “UNICEF Guidance on Gender Integration in Evaluation.”

¹⁸⁹ UNICEF (2017) “Adapted UNEG Evaluation Reports Standards.”

We will also conduct **methods triangulation** – using multiple methods to study the situation. Different methods will work better for some of the evaluation questions than others. For instance, in the assessment of coverage and effectiveness, secondary quantitative data analysis will provide a comparative advantage; the perception survey will provide an advantage in assessing the stakeholders views and satisfaction with the CPs; while the KIIs will provide more insight into connectedness, relevance including programmatic design and issues.

As with all its evaluation, OAG has a 3-level quality control mechanism, during mission preparation, during the data collection phase, during the data processing, analysis and reporting phase. Quality assurance mechanisms used include effective coordination and communication during field work; regular weekly calls with UNICEF to discuss the status of the field work and evaluation. Training of the field team and pre-testing of tools by a small sample of potential respondents; audio-recording of qualitative interviews; and report writing consistent with the ToR requirements and UNEG guidelines. Additional quality assurance will be overseen by the Team Leader and provided through careful review of all products by team members and other OAG staff responsible for quality assurance. The final version of the evaluation report will be compiled based on ERG feedback, and the quality of the report will be assured.

8.7. Ethical Considerations and Evaluation Principles

The evaluation will adhere to UN and UNICEF norms and standards and will be guided by standard good practice and professional interagency. Ethical considerations will be a very important portion of the training for the field staff. Our ethical strategy includes obtaining Ethics approval, and all the necessary government approvals. The evaluation will incorporate a human rights-based, disability-inclusive and gender perspective and be based on results-based management principles and logical framework analysis. All KIIs will be conducted after obtaining informed consent from the respondents/ participants. We will seek and obtain prior permission for taking and using visual still or moving images for the research report and presentations. We will assure the participants' anonymity and confidentiality and ensure that visual data is protected and used only for the agreed purposes, and names of individual get deleted from the data and replaced by codes in the evaluation notes. Furthermore, data will only be accessible to the team members and will not be shared with third parties.

The OAG team shall demonstrate an **understanding of ethical principles and standards defined by the United Nations Evaluation Group** in its technical proposal as indicated below:

- **Anonymity and confidentiality:** The evaluation must respect the rights of the people who provide information, guaranteeing their anonymity and confidentiality.
- **Responsibility:** The entire team must confirm the results presented in the report, any disagreements are to be mentioned. The report should inform about any conflicts or differences of opinion that may have arisen between the consultants or between the consultant and the programme managers regarding the conclusions and / or recommendations of the evaluation.
- **Integrity:** The evaluator will need to highlight issues that are not specifically mentioned in the ToR, in order to carry out a complete analysis of the programme.
- **Independence:** The consultant must ensure that he/she remains independent in respect to the programme under review, and he/she should not be involved in its implementation or any other phase.
- **Incidents:** If problems arise during fieldwork, or at any other point of the evaluation, they should be reported immediately to the Evaluation Manager. If this is not done, the existence

of such problems can in no way be used to justify the failure to achieve the results expected by UNICEF in these terms of reference.

- **Validation of information:** The consultant/s must ensure the accuracy of the information gathered during the preparation of the reports and will be responsible for the information presented in the final report.
- **Intellectual property:** Using the different sources of information, the consultant/s must respect the intellectual property rights of the institutions and communities involved in the evaluation.

8.8. Limitations and constraints of the evaluation

Table 8 Limitations and Proposed Mitigation Strategies

Limitations and Constraints of the Evaluation	Mitigation strategies identified
There could be limited secondary resource materials for evaluation from the government partners and other stakeholders.	▶ Close collaboration with UNICEF programme officers through other relevant staff and addressing the gaps identified during the evaluability assessment findings through primary data collection as much as possible.
Some high-level officials might not have the details on programmes required for the evaluation.	▶ In these case, additional consultation will be carried out with other delegated officials in the ministry for filling the gaps; ▶ To avoid any delay, it will help if UNICEF will contact the line ministries in advance and make arrangements;
Incomplete or unavailable phone numbers and addresses of respondents	▶ Extended data collection timeframe;
Some key stakeholders for the evaluation are absent when the data collectors visit, or there is no letter allowing the interviewers to visit the data collection sites.	▶ Anticipate the eventuality by writing letters of introduction to the consultants in advance, specifying the key dates for data collection/transfer to ensure that both parties are better organised; ▶ For the data collection teams, provide them with mission orders to facilitate contact in the field;
Security risk	▶ Have a contingency plan that includes compliance with safety and security standards, protocols and procedures, including weekly briefings on traffic and safety conditions, routes to be taken and contact points;
Weather-related risks and road conditions	▶ During data collection, appropriate vehicles will be used, depending on the type and condition of the roads. For localities that are not accessible by vehicle, motorbikes should also be used to make the journey.

9. CONDUCT OF THE EVALUATION

9.1 Work plan

REVISED CPE TIMELINE			
Inception phase		05 weeks	Responsible
	Kick off meeting (Clarification of expectations)	Sept 23, 2024	OAG & UNICEF
	Submission of the ToC reconstruction	1 Oct 2024	OAG
	Feedback of UNICEF on ToC	7 Oct 2024	UNICEF
	Incorporation of comments and notes on ToC	9 Oct 2024	OAG
	Scoping interviews	9 Oct – 1 Nov	OAG
	ToC validation meeting	16 oct 2024	OAG, UNICEF
	Validation of the ToC	1 Nov	UNICEF
	EQ/SEQ Drafting of evaluation matrix Development of inception report outline	4 -8 Nov	OAG
	Onboarding of new TL Desk review and catch up – 2 weeks	5 – 19 Nov	
	Finalisation of EQ/SEQ, Finalisation of Evaluation matrix, Development of evaluation methodology and tools, sampling, Drafting of inception report	20 Nov – Jan 2024 <i>including holiday period</i>	OAG
	OAG QA Submission draft inception report	3 Feb 2025	OAG
	Ethical approval process	4 - 24 Feb 2025	UNICEF, OAG
	Feedback of UNICEF to the initial inception report	13 Feb 2025	UNICEF
	Incorporation of comments and notes on inception report	20 Feb 2025	OAG
	Submission of the revised inception report	20 Feb 2025	OAG
	Validation of the inception report	24 Feb 2025	UNICEF
Data collection phase		06 weeks	
	Preliminary answers to EQ from secondary data	3 Feb – 28 Feb 2025	OAG
	Preparation for data collection	25 Feb – 4 Mar 2025	OAG UNICEF
	Data collection in the field	5 – 25 Mar 2025	OAG
	Data collection debrief	26 Mar 2025	OAG, UNICEF
	Data transcription and thematization	6 Mar – 31 Mar 2025	OAG
Data analysis and reporting phase		08 weeks	
	Data analysis Evaluation report drafting	26 Mar – 16 April 2025	OAG
	Preliminary Findings Presentation	9 April 2025	OAG, UNICEF
	Submission of the Draft Evaluation report (after OAG QA)	18 April 2025	OAG
	Draft report quality assurance from UNICEF	18 -30 April 2025	UNICEF
	Comments from the Evaluation Reference Group on the interim report	30 April 2025	UNICEF
	Incorporation of comments and Submission of the revised report	1-15 May 2025	OAG
	Revised report quality assurance	15 -22 May 2025	UNICEF
	Revision of report based on comment of the Evaluation Reference Group and presentation at the SSCO	23 -30 May 2025	OAG
	Finalization of report and summary PowerPoint presentation	30 May 2025	OAG

9.1. Management and quality assurance of the evaluation

The evaluation team will report to the ESARO Evaluation Unit under the general supervision of the ESARO Regional Director. For the day-to-day management of the CPE, the Evaluation Unit has appointed an Evaluation Manager who reports to the Regional Evaluation Advisor. Quality assurance will be provided by UNICEF's Evaluation Office. South Sudan Country Office has appointed an Evaluation Focal Point who act as the primary liaison with the Evaluation Manager and will facilitate the data collection and evaluation process at the country level. The Evaluation Manager will work with SSCO to constitute an Evaluation Reference Group (ERG), comprising key stakeholders of the CPE, including Government counterparts; several senior SSCO staff members; select development, civil society, and private sector partners; and, if possible, adolescents or young people. The ERG has an advisory capacity whose primary role is to review evaluation milestones (terms of reference, inception report, draft evaluation report) and to provide comments. The ERG will be chaired by the ESARO Evaluation Specialist, the Evaluation Manager will support as the secretary, who will maintain a written record, as part of an audit trail, of all ERG comments, which the evaluation team is expected to respond to in writing (agree – actions taken; disagree – justification). ESARO will assure the quality of the evaluation and guarantee its alignment with UNEG Norms and Standards and Ethical Guidelines and provide quality assurance checking that the findings and conclusions are relevant and proposed adaptations and recommendations are actionable. All major deliverables will be reviewed first by ESARO and SSCO (zero draft) and then by the Evaluation Reference Group. The inception report and draft final report will be subject to a satisfactory rating by an external quality assurance facility, using quality assurance checklists provided, before payment can be made. The evaluators are responsible for ensuring that recommendations for quality improvement of the deliverables are fully addressed. The Final Evaluation report will also be submitted to the Global Evaluation Reports Oversight System (GEROS) for final quality assessment with feedback provided to ESARO on the quality of the evaluation.

9.2. Roles and responsibilities of the evaluation team members

9.2.1 Ngozi AKWATAGHIBE, Evaluation Team Lead

Ngozi Akwataghibe, MD, MPH, PhD is an experienced Senior Evaluation Specialist, Public Health Physician and a Transdisciplinary Global Health Specialist. She is a Senior Associate at Oversee Advising Group and the Principal Consultant at ENAULD Technology, Health Research and Services, The Netherlands. She has collectively over 28 years of work experience.

She has expertise in International Development; Conducting Reviews and Evaluations of Programmes including impact Evaluation, Monitoring and Learning; Health and Health Systems Strengthening; Water, Sanitation and Hygiene (WASH), Education, Health Financing, Policy and Gender Analysis, Project Management and Capacity building. She has extensive experience in conducting complex evaluations in varied development settings

Ngozi is a mixed methods expert and has led the development of several innovative proposals that have been executed for various international organizations including the World Bank, UNICEF, World Food Programme, International Initiative for Impact Evaluation (3ie), Shell, the WHO Alliance for Health Policy and Systems Research, GAVI and Bill and Melinda Gates Foundation. She has extensive experience working with teams in Africa, Europe, USA and Asia; liaising with government, UN and a broad range of stakeholders and in leading and/or providing technical support to projects. The geographical scope of her work covers over 30 countries.

For instance, from 2020 -2024 she was the Evaluation Team Lead of several programmes / projects including the Evaluation of the WFP School Feeding Programme in South Sudan from 2018-2023; the UNICEF WCAR

Child-Friendly Communities (CFC) Approach 2018 - 2022: DRC, Guinea and Liberia the UNICEF End-Cycle independent Evaluation of Government-UNICEF Health-HIV/AIDS Country Programme Component 2018-2022 in Nigeria; the UNICEF WCARO Multi-country Formative Evaluation of the Key Result for Children (KRC) #7 (Birth Registration) for period 2018-2020 for nine countries (Cote d'Ivoire, Guinea, Guinea-Bissau, Liberia, Togo, Chad, Cameroon and Equatorial Guinea, and Benin); the Final Evaluation of the Comic Relief-GlaxoSmithKline 'Fighting Malaria, Improving Health' Partnership in Sub-Saharan Africa (Sierra Leone; Ghana; Tanzania; Mozambique) and Greater Mekong sub-region (Cambodia; Laos; and Myanmar); the UNICEF End-Cycle independent Evaluation of Government-UNICEF Health-HIV/AIDS Country Programme Component 2018-2022 in Nigeria; and the UNICEF evaluation of Cholera Rapid Response Teams (RRT) Programme in Four Governorates in Yemen.

She is currently the Team Lead of the Evaluation of the WFP McGovern Dole Funded School Feeding Programme in the Republic of Congo from 2021 to 2026; and the Evaluation of the UNICEF South Sudan Country Programme of Cooperation 2019-2022 & 2023–2025; and the Team Lead of the midterm evaluation of the McGovern Dole School Feeding Programme in Cote d'Ivoire from 2021 to 2026.

She has a track record of published scientific articles including in high-impact peer reviewed journals; and has made several panel and paper presentations in the global including UN arena. At the KIT Institute in Amsterdam she provides Thesis Advisory support for Masters in Public Health students.

She will coordinate the evaluation team and lead the design of the evaluation, ensure the management of the evaluation process, the quality assurance and the delivery of the expected products in close collaboration with the other members of the team. She will work in close collaboration with the UNICEF Regional and Country offices.

9.2.2 Natalie BOCKEL, Senior Evaluator WASH, Education

Natalie Bockel is an agricultural engineer and has sixteen years of experience in conducting evaluations of rural development projects in Africa, particularly in the WASH sector, financed by the European Union, AFD, MFA, USAID, the World Bank, UNICEF and Sida. This includes rural development projects implemented by NGOs, partnerships with local actors, cooperation programmes of international or bilateral organisations or institutional support in various sectors (water, sanitation and hygiene, food security, micro-credit, farmers' organisations, agriculture), most of them as team leader.

This experience is reinforced by training in evaluation methods (Evaluation methods and tools - SFE (Société Française d'Evaluation); Evaluation of the quality of humanitarian action - Groupe URD; Ethics in the production of evidence - UNICEF). Natalie also has experience of managing rural development projects and programmes, having worked as a project manager and country director for an NGO.

Natalie has a proven competence in developing the most appropriate evaluation method according to the objective set and the indicators to be collected, as well as piloting the evaluation process, data collection and analysis, according to the standards of the European Commission and United Nations (UNEG) External Aid Evaluation Methodology).

9.2.3 Nyasha MADZINGIRA, Nutrition and Health Specialist

Nyasha Madzingira, PhD is a renowned consultant with over 20 years' experience in HIV and AIDS development work focusing on sexual and reproductive health and rights (**SRHR**), HIV prevention, care and treatment; **research and evaluation**; strategy development; documentation of best practices; material development; and capacity development. Previously, she was a Lecturer and Research Fellow with the University of Zimbabwe and a Program Coordinator for SAfAIDS, coordinating and managing programmes in mainstreaming HIV and AIDS into policy and programming, mainstreaming Gender and Human Rights into HIV and AIDS programming, development and implementation of HIV and AIDS Workplace Policies and advocating for universal access to HIV/AIDS prevention, treatment, care and support, and SRHR in SADC Members States.

She is an expert in both quantitative and qualitative research methodologies (basic research, baseline surveys, rapid and needs assessments, KAP surveys, mid-term and end of project reviews/evaluations mainly in SRHR; HIV and AIDS; and maternal, newborn and child health programmes/projects) inclusive of vulnerable populations (orphans and vulnerable children; adolescents and young people, people with disability, and communities in hard-to-reach areas). Nyasha has worked extensively with national, regional, and international organisations, including the SADC Secretariat, UN agencies, International NGOs, and government ministries and institutions.

9.2.4 Zana Constantin SOMDA – Senior Health Economist & Financing Specialist

Zana Constantin Somda, MS, PhD is a Senior Health Economist and Financing Specialist with over 20 years of experience working across various sectors and regions, including health, agriculture, nutrition, and economic development. He has provided technical leadership and strategic support to numerous international organizations, including UNICEF, WHO, Africa CDC, Management Sciences for Health (MSH), and the CDC, among others. His expertise spans health financing, policy analysis, program costing, economic evaluation, and investment case development, with a focus on sustainable financing mechanisms for public health. Zana's work has included donor-funded projects aimed at strengthening health systems, improving access to essential services, and advocating for equitable development.

He has worked in low- and middle-income countries across Africa, Asia, and Latin America, managing and supporting programs in health systems strengthening, food security, social policy, community health, and integrated development. His experience in multisectoral financing has involved modelling investment cases, developing costed implementation plans, and ensuring that donor resources are effectively mobilized and allocated to achieve long-term impact. Zana holds advanced degrees in Agricultural and Applied Economics, Horticulture, and Environmental Economics from the University of Georgia. He is fluent in both French and English, which enables him to effectively engage with stakeholders across diverse regions and sectors.

9.2.5 Simone MENICOCCHI, WASH Consultant

Simone Menicocchi's career, spanning 7 years, particularly in water and sanitation project management, has allowed him to collaborate with various key stakeholders, such as ministries, municipalities, delegated managers, and user representatives. He fully understands the importance of collaboration between these different parties to ensure the sustainability and effectiveness of services.

Simone has led several projects in which he supervised the implementation of infrastructures and the monitoring of delegated managers, ensuring the quality of services in line with user expectations and regulatory standards. He is particularly committed to empowering beneficiaries, adopting approaches focused on training, community organization, and the development of local solutions. His technical expertise is complemented by proficiency in digital tools for data collection and spatial analysis.

In 2023 and 2024, Simone served as the Country Representative for Inter Aide in Madagascar, focusing primarily on the WASH sector. In his role, he contributed to the development of a close collaboration with Inter Aide's partner NGO, Soakoja, which manages a professional monitoring and maintenance service for 193 AEP systems, serving over 95,000 users.

He is currently working as a WASH expert on the evaluation of REAVIA WASH program in Tchad.

Simone's academic background, which includes a Master's in Water Resource Management in International Cooperation, an M.Sc. in Mechanical Engineering with a focus on Renewable Energy, and a certification in monitoring and evaluation from the ILO, enhances his ability to design, coordinate, manage, and evaluate complex projects in multicultural environments.

9.2.6 Andy Charles MILTON MAMARA, Gender Expert, National Consultant

Andy Charles is a South Sudanese social scientist with experience in M&E, quantitative and qualitative research, field research and supervision in South Sudan, Uganda, Sudan, EAC, Burundi, Rwanda, Kenya, Malaysia and Tanzania. Charles is currently the Managing Director of Ultimate Prime Consulting based in Juba South Sudan. He worked as the Country Manager for Tango Consult in Juba South Sudan. He manages and coordinates research projects in South Sudan including market research, socio-economic baseline surveys, monitoring and evaluations, assessment studies and capacity building. He is also in charge of field coordination and supervision.

9.2.7 Temitope ERINFOLAMI Data Analyst

With over seven years of experience, Temitope Erinfolanmi specializes in Monitoring and Evaluation, developing M&E plans and conducting social and health research. Throughout his career, he had held diverse roles, including research, monitoring, evaluation, and coordination positions, primarily within Family Planning-related projects. Notably, he contributed to the Nigerian Urban Reproductive Health Initiative project. He most recent engagement was with Avenir Health, where he worked on the Gates Institute-funded Track20 Project in Nigeria. In this role, He supported Family Planning stakeholders at national and sub-regional levels to analyze and model data, providing evidence-based insights to inform decision-making. I have contributed to publications in high-impact journals and presented at international and national conferences and workshops.

He has been quantitative advisor in charge of impact analysis for many projects with OVERSEE ADVISING GROUP. The most recent project includes:

- Mid-term evaluation of Support to the integrated programme for sustainability of school canteens in Cote d'Ivoire from 2021 to 2026
- Evaluation of School Feeding Programme in South Sudan [2018 to 2023]
- Evaluation of the UNICEF Child-Friendly Communities (CFC) Approach 2018 - 2022: DRC, Guinea and Liberia

- End-Cycle independent Evaluation of Government-UNICEF Health-HIV/AIDS Country Programme Component 2018-2022 in Nigeria

9.2.8 Hubal PFUMTCHUM, Quality Assurance

With dual skills (IT and management), **Hubal Pfumtchum** holds a Master II MAGE and is certified in information system auditing. As part of his professional career, mainly in audit and evaluation, he has carried out more than 150 audit and advisory missions in several sectors of activity (banking, microfinance, path of iron, governance, decentralization, project financed by donors.). In recent years, he has specialized in conducting studies and evaluations of projects and programs of humanitarian actors and UN agencies in Africa, Europe and Latin America and the Caribbean. Now in charge OAG Africa office, ensures quality control as part of the studies and evaluations conducted by the firm.

Table 9 provides the detailed roles and responsibilities of the evaluation team members.

Table 9: Sample: Summary of Roles and Responsibilities of Team Members

Name of Team Member	Highest Level of Qualification	General Experience related to the task at hand	Years of	Roles under this assignment
Dr Ngozi Akwataghibe	Senior Evaluation Specialist Team leader	28 years' experience		Ngozi will ▶ Lead the overall CPE process, communication and report writing ▶ Responsible of the overall conduct of the evaluation ▶ Lead the development of the evaluation work plan; ▶ Lead the development the methodology: evaluation matrix, tools for Key Informant Interviews, Focus Group Discussions, observations ▶ Lead the development and submission of the inception report; ▶ Coordinate and support team members ▶ Lead in country data collection ▶ Lead qualitative data analysis and support primary and secondary quantitative data analysis ▶ Lead the triangulation of quantitative and qualitative findings ▶ Lead the preparation of the preliminary evaluation findings; ▶ Lead the development of the draft CPE report ▶ Lead the Integration of feedback in the draft CPE report ▶ Present the report to the steering committee during the validation and dissemination workshop; ▶ Lead the development the final CPE report
Natalie Bockel	Senior Evaluation WASH, Education,	27 years' experience		Natalie will: ▶ Bring overall expertise in WASH, education, nutrition and Policy engagement in various sectors ▶ Lead the development of the ToC ▶ Carry out scoping interviews ▶ Contribute to the development methodology: Evaluation and analysis matrices, tools for Key Informant Interviews, Focus Group Discussions, observations and case studies; ▶ Contribute to the development of the inception report; ▶ Participation to in country data collection ▶ Contribute to the qualitative data analysis and support primary and secondary data analysis ▶ Contribute to the development of the draft CPE report ▶ Contribute to the drafting of the final CPE report

Inception report

Dr. Nyasha Madzingira	Senior Evaluation Specialist Health, nutrition and Policy specialist	20 years' experience	Nyasha will ▶ Bring overall expertise in Health, nutrition ▶ Contribute to the development of ToC ▶ Carry out scoping interviews ▶ Contribute to the development methodology: Evaluation and analysis matrices, Tools for Key Informant Interviews, Focus Group Discussions, observations and case studies; ▶ Participation to in country data collection ▶ Contribute to the development of the inception report; ▶ Contribute to the qualitative data analysis and support primary and secondary data analysis ▶ Contribute to the development of the draft CPE report ▶ Contribute to the development of the final CPE report
Dr Zana C Somda,	Senior Health Economist & Financing Specialist	20 years' experience	Zana will ▶ Lead financial analysis ▶ Contribute to the development of the inception report; ▶ Contribute to the development of the draft CPE report ▶ Contribute to the development of the final CPE report
SIMONE MENICOCCHI,	Wash consultant	17 years' experience	Simone will be ▶ Contribute to the development of the inception report ▶ Contribute to WASH analysis ▶ Contribute to the development of the draft CPE report ▶ Contribute to the development of the final CPE report
Andy Charles	National consultant Gender expert	15 years' experience	The national consultant will ▶ Bring expertise in gender ▶ Carry out scoping interviews ▶ Contribute to the drafting of the inception report; ▶ Train team members; ▶ Contribute to quantitative and qualitative data analysis ▶ Contribute to the development of the draft evaluation report; ▶ Contribute to the development of the final report
OAG Support team			▶ Provide support to the CPE team ▶ Participate in scoping interviews
Hubal Pfumtchum	Quality assurance, Programme effectiveness and Operations	17 years' experience	▶ Check the quality of the methodology ▶ Verify the quality of the data collection tools ▶ Verify the implementation of the methodology adopted in the field ▶ Check the quality of the draft and final CPE report

Inception report

			▶ Overall administrative and financial coordination ▶ Bring expertise in Programme effectiveness and Operations
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10. ANNEXES

Annex 1: Terms of Reference

The evaluation Terms of Reference is embedded here:



LRFP-2024-9189626
TERMS OF REFERENC

Annex 2 – Evaluation Matrix

Evaluation Questions	Sub- questions	Indicators	Data Collection Methods	Data Sources	Data Analysis
1. RELEVANCE: Determine the relevance of the South Sudan Country Programme					
1.1 To what extent has the Country Programme remained relevant and aligned with national priorities, legislative frameworks, plans and strategies, UNICEF's Strategic Plan, and the UN joint programme in South Sudan?	1.1.1. To what extent were the objectives of the Country Programme, the design and approaches appropriate (as relating to the CP 2019 – 2022) and have remained appropriate (in the current programme cycle) to respond to beneficiaries, country, and partner/institution needs, policies, and priorities?	• Reflection of national policies and priorities in CP analysis, planned outputs, and outcomes • Evidence of the extent to which design and implementation of the CP was and is adapted to specific characteristics in South Sudan (such as demographic, economic, natural environment, and other socio-political issues) • Evidence of linkages between specific aspects of the Country Programme and diagnosed country needs and priorities, UNICEF's strategies, priorities of UN Agencies, and SDG targets • SSCP approaches and strategies take into account UNICEF mandate and CO operational structures • Evidence of adaptation of programme strategies and results framework in relation to context changes and emerging needs • Stakeholders' perceptions of responsiveness of the programme to contextual and emerging realities	• Desk Review • Semi-structured interviews with government , UNICEF, other UN stakeholders, donors	Reviewed Documents - Country Programme and specific projects' documents and reports, strategy notes, evaluations, surveys, UNICEF (PMER, heads of section, Field Operations and Emergency) Key informants	Descriptive analysis Thematic analysis Analysis of TOC Triangulation of different data sources and methods.
	1.1.2. To what extent has the programme employed the mix of policy advice, systems strengthening and service delivery intensification appropriate for the country context?	• Evidence that the hypotheses, assumptions, policy mix and change strategies were based on the best knowledge at the time of	• Desk Review • Semi-structured interviews with government , UNICEF,	CP documentation, including strategic notes and briefing and briefing notes National documentation from MDAs	Thematic analysis Triangulation of different data sources and methods

Inception report

		design and that they are being updated regularly - The extent to which deployed implementation strategies reflect systems strengthening and service delivery intensification appropriate for the country context - Stakeholders views of the appropriateness of strategies and approaches of the two CP cycles	other UN stakeholders, donors, other implementing partners Multistakeholder workshops	Studies, reports, evaluations Key informants Input from multistakeholder workshops	
	1.1.3. In the current cycle, has there been any significant changes to the Government strategies and priorities in the areas of UNICEF programming?	- Evidence of changes to the Government strategies and priorities in the 2023-2025 Country Programme cycle - Stakeholders' views of significant changes to the Government strategies and priorities in the areas of UNICEF programming	- Desk Review - Semi-structured interviews with government , UNICEF, other UN stakeholders, donors, other implementing partners - Multistakeholder workshops	CP documentation, including strategic notes and briefing and briefing notes National documentation from MDAs Studies, reports, evaluations Key informants Input from multistakeholder workshops	Descriptive analysis Thematic analysis Triangulation of different data sources and methods
1.2 How responsive and adaptive has the Country Programme been to the changing context and emerging needs of children (including adolescents, young people, and the most marginalized, including persons with disabilities), particularly in view of the COVID-19 pandemic, the leaner funding landscape and shift from direct service delivery?	1.2.1. What is the extent to which the Country Programme incorporates equity, HRBA, Humanitarian, Disability and GE goals in its design?	- Evidence on inclusive, HRBA and gender programming mainstreaming into CP Theory of Change. - Evidence that the CP design embeds cross-cutting issues that are core to UNICEF's mission - Evidence that the CP focuses on equity HRBA, Humanitarian, Disability and GE goals in the implementation of its change strategies - Stakeholders' perceptions of on the consideration of vulnerable groups in the design and implementation of interventions.	- Desk Review - Semi-structured interviews with government , UNICEF, other UN stakeholders, donors, other implementing partners - Multistakeholder workshops - Perception Survey	CP documentation, including strategic notes and briefing and briefing notes National documentation from MDAs Studies, reports, evaluations Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; Cross-cutting monitoring data Change Strategy planning documents Key Informants Input from multistakeholder workshops	Descriptive analysis Content Analysis Analysis of Theory of Change (ToC) of the Programme and its assumptions

	1.2.2. How did the Country Programme respond to external changes and shocks, in particular COVID-19 pandemic, droughts / flooding, inflation, fluctuations in the funding landscape?	- Evidences of CP's responses to external changes and shocks, including COVID-19 pandemic, droughts / flooding, inflation, fluctuations in the funding landscape in terms of (i) policy advice (ii) systems strengthening (iii) intensification of service delivery - Stakeholders' perceptions of the CP's responses to external changes and shocks, including COVID-19 pandemic, droughts / flooding, inflation, fluctuations in the funding landscape in terms of (i) policy advice (ii) systems strengthening (iii) intensification of service delivery	- Desk Review - Semi-structured interviews with government , UNICEF, other UN stakeholders, donors, other implementing partners - Multistakeholder workshops - Perception Survey	- CP documentation, including strategic notes and briefing and briefing notes - National documentation from MDAs - Studies, reports, evaluations - Government reports on COVID-19 response and recovery - Key Informants - Input from multistakeholder workshops	Descriptive analysis Content Analysis
	1.2.3. To what extent is the Country Programme appropriate to ensure that the needs and the rights of children and women (including adolescents, young people, and persons with disabilities), especially the most marginalized, are met including after the effects of COVID-19?	- Evidence of Disaggregation of monitoring data by gender and proxy indicators for socio-economic status (place of residence, occupation, etc.) - Stakeholders' views of how selected monitoring indicators take into account the specificities of women and men - Evidences of the usefulness of the CP strategies (including any changes made during implementation) vis a vis intended/actual results in particular key features and results of (and for whom including vulnerable groups) - Stakeholders views of the appropriateness of the CP strategies to ensure that the needs and the rights of children	- Desk Review - Semi-structured interviews with government , UNICEF, other UN stakeholders, donors, other implementing partners - Multistakeholder workshops	- CP documentation, including strategic notes and briefing and briefing notes - National documentation from MDAs - Studies, reports, evaluations - Government reports on COVID-19 response and recovery - Key Informants - Input from multistakeholder workshops	Descriptive analysis Content Analysis Thematic analysis

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		and women (including adolescents, young people, and persons with disabilities), especially the most marginalized, are met including after the effects of COVID-19			
	1.2.4. To what extent did the Theory of Change (ToC) in each of the country programme areas integrate key social and behavioural drivers hampering the achievement of sectoral and cross-sectoral results?	- Evidence of integration of key social and behavioural drivers in the Health, Nutrition, WASH, Education, child protection, and social policy TOCs. - Stakeholders' perceptions of integration of key social and behavioural drivers hampering the achievement of sectoral and cross-sectoral results in the CP?	- Desk Review - Semi-structured interviews with government, UNICEF, other UN stakeholders, donors, other implementing partners - Multistakeholder workshops	Country Programme and specific projects' documents and reports; UNICEF Annual Country Reports; Action Plans; CP (Health, Nutrition, WASH, Education, child protection, and social policy) Theory of Changes, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc	ToC Analysis Thematic analysis
1.3 To what extent has UNICEF's positioning as a strategic partner contributed to the programme's achievements?	1.3.1. What are UNICEF's comparative strengths in the country – particularly in alignment with other UN agencies and development partners – and how have these been harnessed to achieve synergetic effects and to position UNICEF where it can make the biggest difference?	- Evidence that programming compliments interventions of other key players, including international partners - Evidence that UNICEF articulates and exploits its comparative advantage to strategic effect in South Sudan - Evidence that UNICEF is recognised as the 'Think leader' in the areas targeted by the CP - Stakeholders' perceptions of UNICEF's comparative strengths in the country, particularly in alignment with other UN agencies and development partners - Stakeholders' (including technical and development partners) perceptions on alignment between their interventions and those led by UNICEF - Evidences of areas of alignment	- Desk Review - Semi-structured interviews with government, UNICEF, other UN stakeholders, donors, other implementing partners	- CP documentation, including strategic notes and briefing and briefing notes - National documentation from MDAs - Studies, reports, evaluations - Key Informants	Descriptive analysis Thematic analysis Triangulation of different data sources

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		- Evidences of areas of discordance			
	1.3.2. What variations exist regarding UNICEF's comparative strengths and advantages for both upstream and downstream engagements and how are these adapted in the programme?	- Stakeholders' perceptions of UNICEF's comparative strengths and advantages for upstream engagements - Stakeholders' perceptions of UNICEF's comparative strengths and advantages for downstream engagements - Stakeholders' views and evidence of appropriateness of national and sub-national coverage - Stakeholder' perceptions of the adequacy of the staff and field presence structure - Stakeholders' views and evidence of adaptations of UNICEF's comparative strengths in the programme.	- Desk Review - Semi-structured interviews with government , UNICEF, other UN stakeholders, donors, other implementing partners	Country Programme and specific projects' documents and reports Key informants	Descriptive analysis Thematic analysis Triangulation of different data sources
	1.3.3. What are the influences of donors, via funding, on maintaining the programme focus of UNICEF? <i>Has UNICEF changed its priorities based on funding available, or was UNICEF compelled not to undertake priority actions due to unavailability of donor funds?</i>	- Stakeholders' perceptions of influence of donors on UNICEF's focus and priority actions - Documented evidence of UNICEF's priority changes due to changes in available funding	- Desk Review - Semi-structured interviews with government , UNICEF, other UN stakeholders, donors, other implementing partners	Country Programme and specific projects' documents and reports Key informants	Descriptive analysis Thematic analysis Triangulation of different data sources
2. COHERENCE: Assess the alignment of CP interventions with country, regional and international standards and priorities					
2.1 To what extent were meaningful partnerships or coordination mechanisms established with other key actors e.g. government at national and local levels, other UN agencies, civil society, NGOs, private sector, academia, etc. and how have they contributed towards addressing the		- Stakeholders' views on alignment of UNICEF's CP-related interventions with those implemented by government at national and local levels, other UN agencies, civil society, NGOs, private sector, academia, etc. - Number of Multistakeholder coordination mechanisms in place - Stakeholders' views on the value of the multistakeholder coordination mechanisms	- Desk Review - Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Implementing partners including CSOs, NGOs, private sector etc. - Multistakeholder workshops - Perception Survey	Country Programme and specific projects' documents and reports, UNICEF Annual Country Reports; - National and International Literature National, county and local government stakeholders, UNICEF ESARO /Country Office staff Technical Development Partners Input from multistakeholder dialogues	Descriptive analysis Thematic analysis Content analysis

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predefined bottlenecks and contributing to the results at scale?		- Stakeholders' perceptions of the strength partnerships with the implementing Government agencies; including during the COVID pandemic - Stakeholders identification of specific interventions planned and implemented collaboratively or jointly and results achieved - Stakeholders' perceptions and examples of challenges during the two programme cycles - Stakeholders' recommendations on what could be done better to improve alignment			
2.2 To what extent have key UNICEF strategies and international commitments been consistently integrated in all aspects of SSCO programming and implementation, including policy and advocacy, particularly vis-a-vis the Core Commitments for Children in Humanitarian Action and UNICEF's Gender Action Plans (2018-2021, 2022-2025)?		- Evidence of Intervention design, theory of change and logical frameworks showing considerations of key UNICEF strategies and international commitments especially the core commitments for Children in Humanitarian Action and UNICEF's Gender Action Plans in the two programme cycles - Evidence of updated GEWE assessments and their integration into CP planning and implementation - Evidence that CP M&E system actively reflects GEWE at all levels with disaggregated data - Tagging of UNICEF's Gender Equality Marker of programmes, projects, and activities under the CP - Evidence of incorporation of Humanitarian nexus considerations - Documented evidence of overall consistency of SSCP strategies, expected outputs, outcomes	- Desk Review - Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Implementing partners - Multistakeholder workshops	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants	Descriptive analysis Thematic analysis Triangulation of different data sources

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		with those existing in national priorities, plans, strategies and legislative frameworks/UNICEF's Strategic Plan and UN joint programme in South Sudan Stakeholders views of the extent to which key UNICEF strategies and international commitments been consistently integrated in all aspects of SSCO programming and implementation, including policy and advocacy			
3. EFFECTIVENESS: Assess the effectiveness of the CP in relation to the programme's intended outcomes					
3.1 To what extent has the Country Programme achieved its intended results, or is likely to achieve them, including any differential results across gender, disability inclusion, social behaviour change, income, ethnicities, etc.?	3.1.1. To what extent were the outputs delivered to the standards expected and how do they contribute towards achieving outcomes?	- Quantitative and qualitative evidence of outputs achieved against planned targets: (i) achieved (ii) partially achieved (iii) not achieved for each cycle of CPD implementation - Quantitative and qualitative evidence of progress against outcome indicator targets in CPD : (i) achieved (ii) partially achieved (iii) not achieved - Stakeholders' perceptions of the extent to which specific outputs were delivered to the standard expected in the different CP areas - Stakeholders' views of how the outputs contributed towards the outcomes (in different CP areas)	Desk Review Secondary quantitative analysis of population based data (e.g. MICS, DHS) Key informant interviews with relevant stakeholders in UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Local development institutions Implementing partners including CSOs, NGOs etc. Multistakeholder workshops Perception Survey	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available studies and assessment reports related to different CP areas Population based surveys Input from multistakeholder workshops	Descriptive analysis Thematic analysis Causal contributory analysis
	3.1.2. To what extent did the six key strategies adopted by UNICEF integrate crosscutting priorities (climate changes incidences, gender, social and behaviour change, disability inclusion, equity and human rights) and demonstrate a reasonable contribution at the Outcome level, including any differential results across groups?	- Evidence of integration of the crosscutting priorities into the action plans related to the six programme areas (health, nutrition, climate-resilient WASH, education, child protection and social policy) - Quantitative evidence of progress on outcome-level indicators	Desk Review Secondary quantitative analysis of population based data (e.g. MICS, DHS) Key informant interviews with relevant stakeholders in UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Local development	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants	Descriptive analysis Thematic analysis Causal contributory analysis

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		including differential results across groups - Evidence of changes (positive and negative) in the situation of children (multi-dimensional child poverty) in different geographic regions, and disaggregated by sex and possibly disability - Stakeholders' perceptions of appropriateness and adequacy of planned activities and their contributions towards outcomes - External factors (political, socio-economic, funding) that had a bearing on delivery and their influence on achievement or otherwise of outcomes - Stakeholders' views of causes of differential results across groups	institutions Implementing partners including CSOs, NGOs etc. - Multistakeholder workshops - Perception Survey	Available studies and assessment reports related to different CP areas Population based surveys Input from multistakeholder workshops	
	3.1.3. To what extent have the interventions, communications and advocacy efforts been gender responsive/transformative? 3.1.3.1 How have UNICEF CO staff and implementation partners been capacitated to integrate and implement gender responsive/transformative programmes?	- Evidence of integration of social and behavioural change and gender considerations in design of interventions and advocacy, results indicating behaviour change - Stakeholder perceptions of gender responsiveness/transformative nature of UNICEF programmes, communications and advocacy, illustrated with examples - Capacity building activities completed for UNICEF CO staff on gender responsive/transformative programmes	Desk Review Key informant interviews with relevant stakeholders in UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Local development institutions Implementing partners including CSOs, NGOs etc. Multistakeholder workshops Perception Survey Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office and UNICEF Country Offices Perception Survey	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available studies and assessment reports related to different CP areas Input from multistakeholder workshops	Descriptive analysis Thematic analysis Causal contributory analysis

		- Themes and content of gender related trainings given to UNICEF CO staff - Perceptions of UNICEF CO staff on usefulness of capacity building activities related to gender and transformation - UNICEF CO stakeholders' perceptions on the adequacy of trainings and level of satisfaction with trainings - Recommendations on areas for improvement			
	3.1.4. In the current programme cycle, has there been any significant changes to the Government policies or strategies as a result of the UNICEF Country Programme?	- Documented evidence of changes to the Government policies or strategies as a result of the UNICEF Country Programme - Stakeholders' views of significant changes to the Government policies or strategies as a result of the UNICEF's advocacy activities and/or technical support - Examples of specific changes to Government policies and strategies made due to UNICEF CP	Desk Review Key informant interviews with relevant stakeholders in UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Local development institutions Implementing partners including CSOs, NGOs etc. Perception Survey with CP including UNICEF and Government stakeholders Multistakeholder workshops	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Key informants Available studies and assessment reports related to different CP areas Data from Perception Survey Input from multistakeholder workshops	Descriptive analysis Thematic analysis Causal contributory analysis
	3.1.5. To what extent did the implementation of the country programme consider the views, perspectives and opinions of at-risk/affected people around their satisfaction with the quality, effectiveness and accountability of results?	- Available beneficiary feedback mechanisms - Documented evidence that women, men, children adolescents and other rights-holders, especially the most disadvantaged and marginalized ones, were appropriately involved in the programme via beneficiary feedback mechanisms - Stakeholders' views on the availability and usefulness of the beneficiary feedback mechanisms (including any changes made during implementation)	Desk Review Key informant interviews with relevant stakeholders in UNICEF Country Office; Government ministries and institutions; Technical and financial Development partners; Local development institutions Implementing partners including CSOs, NGOs etc. Multistakeholder workshops	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available KAP, beneficiary satisfaction surveys and relevant monitoring data Input from multistakeholder workshops	Descriptive analysis Thematic analysis Causal contributory analysis

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3.2 To what extent has the programme relied on government and local NGOs in its implementation and how has that influenced the achievement of expected outputs and outcomes? What were the main challenges how was this managed?	3.2.1. To what extent has the increased use of local partners /NGOs for service delivery (in the current programme cycle) influenced the achievement of the expected results?	- Stakeholders' perceptions and evidences of changes made in use of local partners /NGOs for service delivery (in the current programme cycle) - Stakeholders' perceptions of the usefulness of the increased use of local partners /NGOs for service delivery (in the current programme cycle) - Stakeholders views of the country programme activities reaching out to communities and in particular to (income) poor, illiterate and remotely placed, and those missed/not targeted.	Desk Review Key informant interviews with relevant stakeholders in UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions; Implementing partners including CSOs, NGOs etc Perception Survey with CP including UNICEF and Government stakeholders Multistakeholder workshops Perception Survey	Reviewed documents: - Country Programme and specific projects' documents and reports UNICEF Annual Country Reports; - Donor Reports - Monitoring and Evaluation reports; Data from Perception Survey Key informants Input from multistakeholder workshops	Thematic analysis Causal contribution analysis Triangulation of different data sources
3.3 What are the major factors influencing the achievement (or not) of the programme outcomes, including equity, behavioural and gender-related results? What were the main challenges and how were they managed?		- Stakeholders' perceptions of internal and external factors to UNICEF which contributed to the success of Monitoring and evaluation, advocacy, and coordination of activities including related to equity, behavioural and gender-related results - Stakeholders' perceptions of barriers / bottlenecks to the achievement of programme outcomes, including equity, behavioural and gender-related results - Stakeholders views and evidence on planned multi-sectorial approaches for service improvement were implemented/ reason for non-implementation - Stakeholders' perceptions of the effects of COVID-19, flood, drought, insecurity etc. on the country programme interventions - Alternative modes of CP processes implemented during	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc. Perception Survey with CP including UNICEF and Government stakeholders Multistakeholder workshops	Country Programme and specific projects' documents and reports UNICEF Annual Country Reports; Donor Reports Monitoring and Evaluation reports; Project Risk Registers, Emergency Plans and Responses Incidence reports Data from Perception Survey Key informants Input from multistakeholder workshops	Thematic analysis Causal contribution analysis Triangulation of different data sources

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		the pandemic, droughts, floods, other emergencies including insecurity - Identified Risks - Strategies that dealt with the risks • Stakeholders' perceptions of the opportunities that emerged in the country programme during the COVID pandemic and other relevant emergencies including insecurity related • Stakeholders' perceptions and evidences of unintended (positive and /or negative) effects of the programme			
4. EFFICIENCY: The extent to which the results of the BRP were delivered cost-effectively using the available resources					
4.1 To what extent have the programme and the office structures supported the cost-effective and timely delivery of the Country Programme?	4.1.1. To what extent did the office structures provide the required resources/ inputs to implement the programme? (PMER, SBC; external communication; donors relation; supply and logistic; field offices; security; field operations, Admin and HR)?	• Total Budget allocation and expenditures; • Stakeholders views and evidences of adequacy of budget and gaps (if any) in human, financial and materials resources provided under BRP (component-based allocations/intended results and actual expenditures/results produced)	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Secondary quantitative data analysis of CP financial data	Project Intervention Monitoring data Donor Reports CP Financial Data and Reports CP Annual Review Reports; Data programme operational costs Key informants	Value For Money / Cost-effectiveness Analysis
	4.1.2. To what extent are SBC interventions designed and implemented in coordination with other programme areas, and with other partners?	• Stakeholders' opinions of the extent to which the SBC interventions were designed and implemented in coordination with other programme areas, and with other partners • Stakeholders' views on coordination of the SBC interventions with other projects for better management of resources • Stakeholders' perceptions of the usefulness of established	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Country Programme and specific projects' documents and reports UNICEF Annual Country Reports; Donor Reports Data from Perception Survey Key informants Input from multistakeholder workshops	Content analysis

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		partnership networks and strategies	Perception Survey with CP including UNICEF and Government stakeholders Multistakeholder workshops		
	4.1.3. How have the office structures facilitated or hindered resource mobilization and utilization of funds?	- UNICEF and Government Stakeholders' views on timely delivery of results of the CP interventions - Stakeholders' perceptions of the usefulness of the different office structures ((PMER, SBC; external communication; donors relation; supply and logistic; field offices; security; field operations, Admin and HR) for resource mobilization and utilization of funds	- Desk Review - Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; National Government Stakeholders	Country Programme and specific projects' documents and reports UNICEF Annual Country Reports; Donor Reports Data from Perception Survey Key informants Input from multistakeholder workshops	Descriptive analysis Thematic analysis
4.2 Were resources (funds, human resources, time, expertise etc.) allocated and utilized strategically to track and achieve results, including equity and gender-related objectives?	4.2.1. Which of the chosen programme strategies resulted in more value for money?	- Assessment of programme in terms of intended vs achieved outputs and outcome vis a vis allocations/expenditure (for different programmatic components) - Unit cost per result achieved; - Cost savings as % of project expenditure - Stakeholders views of effective use of CP allocated resources for results produced by the different programme areas.. - Documented evidence of economical use of CP interventions' allocated resources for results produced.	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; National Government; other technical and implementing partners Secondary quantitative data analysis of CP financial data	Country Programme and specific projects' documents and reports UNICEF Annual Country Reports; Donor Reports CP Financial Data and Reports CP Annual Review Reports; Data programme operational costs Key informants	Value For Money / Cost-effectiveness Analysis
	4.2.2. Were there alternatives that would have worked better and what are those?	Evidences of the most economical options for use of human, financial and materials resources provided under the CP Interventions (component-based allocations/intended results and actual expenditures/results produced)	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; National Government; other technical and implementing partners Secondary quantitative data analysis of CP financial data	Country Programme and specific projects' documents and reports UNICEF Annual Country Reports; Donor Reports CP Financial Data and Reports CP Annual Review Reports; Data programme operational costs Key informants Data from perception survey	Value For Money / Cost-effectiveness Analysis

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		Stakeholders' views of alternatives that would have worked better with specific examples	Perception Survey		
5. IMPACT – The long term effects and impact of the CP					
5.1 What positive and negative (intended and unintended) long-term outcomes/impact are likely to be produced by the South Sudan CP interventions?	5.1.1 To what extent can the South Sudan programme demonstrate impact for children and impact at scale?	- Trend of relevant childhood indicators in routine monitoring and population based statistical databases - Trend of relevant maternal indicators in routine monitoring and population based statistical databases - Stakeholders' perceptions of contribution of the CP interventions to changes in child and maternal indicators - Stakeholders views and evidences of intended and unintended positive and negative effects of the programme at national levels - Stakeholders views and evidences of change in mind-set, gender-perception shifts etc. within the communities - Evidence that the SSCP contributed to advancing national development results (Revised National Development Strategy 2021-2024) and the SDGs through the United Nations Sustainable Development Cooperation Framework (UNSDCF)	Desk Review Secondary quantitative data analysis Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available studies and assessment reports related to different CP areas Routine monitoring data Available Population based surveys	Descriptive analysis Thematic analysis Causal contribution analysis
5.2 To what extent did the preceding Country Programme (or Country Programmes) contribute to positive long-term change on children, particularly the most marginalized and vulnerable?		Disaggregation of the monitoring and other population based data by sex, wealth indicators (or proxy indicators related to socio-economic status (area of residence, occupation, level of education etc.)), and possibly disability	Desk Review Secondary quantitative data analysis Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants	Descriptive analysis Thematic analysis Causal contribution analysis

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		- Stakeholders views and evidences of the CP addressing (through strategies and interventions) issues that kept the most deprived and vulnerable away from accessing services (i.e. poorest or those from lowest income quintiles, illiterate, hard to reach areas/rural and remote, single mothers, ethnic minorities, internally displaced persons, disabled children, people living in conflict affected regions; nomadic groups) - Stakeholders views of continuing challenges (issues that CP did not address) for the poor and most deprived and possible local solutions.	financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Available studies and assessment reports related to different CP areas Routine monitoring data Available Population based surveys	
6. SUSTAINABILITY– Assess the sustainability of the CP					
6.1 To what extent has the country programme contributed to improving government systems, service delivery mechanisms, and service integration in a manner that the benefits for children would extend after the termination of UNICEF programmes?	6.1.1 To what extent has the Government of South Sudan shown ownership of the CP, and is able and willing to fund the continuation of CP interventions?	- Stakeholders' views and evidence of: - national/local ownership - use of local capacity, etc. - Gender and equity related capacity built outlast the intervention? - Evidence of financial commitment by the Government (national, sub-national and local governments) – budgetary allocations etc. - Evidence of identified and interactions with external funding sources (private sector, donors etc) to support the programme – government stakeholders looking for, finding and identifying synergies to provide support	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available studies and assessment reports related to different CP areas Routine monitoring data Available Population based surveys	Descriptive analysis Thematic analysis Narrative analysis Triangulation of different data sources

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		Local authorities' participation in planning and implementation of identified CP activities			
	6.1.2. To what extent have systems and capacity being strengthened within the Government of South Sudan to ensure the benefits of CP interventions are likely to continue?	- Stakeholders' perceptions of capacity at national, district and local government levels - Evidence of sustainability strategies implemented by - UNICEF (i) exit strategies in projects documents/agreements (ii) capacity building (iii) advocacy and communication (iv) partnership strategies - Evidence of partnerships, innovations and technologies to strengthen different programme areas including monitoring systems - Number of professionals dealing with children trained through TOT mechanisms - Examples of concrete mechanisms initiated to ensure appropriation of results by national and/ or local counterparts - Stakeholders' views of how the net benefits will last	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Key informants Available studies and assessment reports related to different CP areas	Descriptive analysis Thematic analysis Narrative analysis Triangulation of different data sources
6.2 To what extent have the programme strategies, plans, and tools, particularly those with an equity and gender focus, been institutionalised in systems, policies, mechanisms and strategies among government, NGO/civil society, and other partners and stakeholders?	6.2.1. To what extent was the development-humanitarian nexus considered in activities designed to build resilience of people, communities, and systems?	- Consideration of the development-humanitarian nexus in the programme design including ToC and programme log frames - Documented evidence of the contribution of institutional and service delivery mechanisms put in place by UNICEF programming - Examples of institutions whose organizational capabilities were	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available studies and assessment reports related to different CP areas	Descriptive analysis Thematic analysis Narrative analysis Triangulation of different data sources

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		strengthened by UNICEF programming - Stakeholders views and evidences of the CP enabling compliance to national + international obligations around children/human rights - Stakeholders views and evidences of balanced focus and resources allocation for duty bearer (strengthening services delivery) vis a vis right holder (community demand creation) and engaging CSOs as enablers/facilitators - Evidence where Government has scaled up interventions, acted on policy/legislative proposals and programme improvements flowing from UNICEF support and advocacy - Level of gender and equity considerations in the programme's log frame, ToC and the results chain - Number of women organisations and human rights activists (CBO) that were consulted and participated in the design, implementation and evaluation phases. - Extent to which organisations led by women and human rights activists are driving social change.			
7. CONNECTEDNESS					
7.1 To what extent has the UNICEF response to humanitarian issues contributed to strengthening national preparedness and response efforts, including the humanitarian,	7.1.1. What are the major external factors influencing the achievement (or not) of this result?	Evidence that Government institutions, local NGO, and services, included at community level received capacity building required to strengthen their preparedness and response capacity to emergency situation and are aware of the concept of	Desk Review Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants	Descriptive analysis Thematic analysis Narrative analysis Triangulation of different data sources

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development, and peace linkages?		the humanitarian - development - peace nexus - Evidence of emergency responses undertaken in partnership with local NGO, government institutions and services, including at community level - Evidence of emergency responses including development and peace building interventions (humanitarian- development- peace nexus) - Stakeholders' perceptions of major external factors influencing programme results	community and religious leaders; Implementing partners including CSOs, NGOs etc.	Available studies and assessment reports related to different CP areas	
8. COVERAGE					
8.1 How effectively has UNICEF managed to reach the most vulnerable populations, such as children, women, and those with disabilities?	8.1.1. To what extent did the country programme contribute to the reduction of inequities and exclusion and progress towards the achievement of greater gender equality?	- Numbers and types of groups that have been reached in different settings (including the most deprived and those most likely to miss the different interventions) - Categories of the most vulnerable groups identified by the CP - Progress made on output / outcome indicators related to the most vulnerable populations - Evidence of assessment of needs, barriers and bottlenecks of the most vulnerable by the programme - Consideration of vulnerable populations in the programme's result framework (outputs/outcome indicators clearly mention the different categories of vulnerable populations) - Evidence of the development and implementation of approaches/ strategy to respond to the needs of the most vulnerable by the programme	Desk Review Secondary quantitative data analysis Key informant interviews with relevant stakeholders in UNICEF Regional Office; UNICEF Country Offices; Government ministries and institutions; Technical and financial Development partners; Local development institutions including community and religious leaders; Implementing partners including CSOs, NGOs etc.	Country Programme and specific projects' documents and reports, - UNICEF Annual Country Reports; Action Plans; Theory of Change, Programme Monitoring Evaluation and Learning (MEL) Framework and Operational plan; and programme logframe; etc Key informants Available studies and assessment reports related to different CP areas Routine monitoring data Available Population based surveys	Descriptive analysis Thematic analysis Causal contribution analysis

Inception report

		- Stakeholders’ perceptions of interventions’ target of marginalized groups - Stakeholders’ perceptions of barriers to access for women and efforts made to tackle them - Stakeholders’ views of the extent to which UNICEF has managed to reach the most vulnerable populations such as children, women, and those with disabilities			
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Annex 3 : Data collection tools**Perception Survey****Background:**

To gain a deeper understanding of stakeholders' appreciation of UNICEF's work in South Sudan, an online perception survey will be administered to a broad range of stakeholders representing government ministries, departments and institutions; CSOs; NGOs; donors, United Nations agencies, and academia with knowledge of UNICEF's programme in South Sudan. The survey will be administered in English. In line with the principles of perception surveys, the number of open-ended questions has been kept low but with ample space and opportunities for the respondents to explain their responses.

Consent:

The Government of South Sudan and UNICEF Country Programme 2018 – 22 and 2023 - 2025 in South Sudan are currently being evaluated by an independent evaluation team from an international consulting firm called Oversee Advising Group (OAG). The evaluation will provide an assessment of the overall performance of the programme and UNICEF's priority setting and strategic positioning during the period under evaluation. It also seeks to draw out lessons and identify good practices to inform future programming.

As part of the evaluation, the team has developed a short survey ([link inserted below / attached](#)) to which we kindly invite you to respond. The survey takes about twenty minutes to complete and seeks the opinion of key partners who, directly or indirectly, support the realization of women and child rights and child protection in South Sudan.

The survey complements other data collection tools for the evaluation, namely a literature review, in-depth interviews, and focus group discussions. The survey will provide important input on stakeholders' appreciation of UNICEF's activities in South Sudan.

The survey is anonymous and your name and the name of the organisation for which you work will not be quoted in the evaluation report or any other document that will be published.

Participation in this survey is voluntary, and you may withdraw at any time or answer only some of the questions. The survey is anonymous, which implies that the results will be reported so no comments made can be attributed to specific individuals. All information will be kept confidential, so please feel free to express your views!

We hope you will be able to fill in the survey by **...2025**. If you have any questions don't hesitate to contact the evaluation Team Leader, **Dr. Ngozi Akwataghibe** on email: na@myoag.org

Thank you in advance.

Section 1: About your organization

101. Name of your Organisation/Agency/Department: _____

102. Number of years your organisation has engaged with UNICEF South Sudan: Years

103. Are you familiar with the key areas in UNICEF Country Programme?

Yes ☐ No ☐

104. Please classify your organisation [select one option only]

Ministry; Government Department/Agency/State/County Govt entity

Donor Agency

UN Agency

National NGO/CSO

International NGO

Media institution

Academic institution

Private sector

Section 2: About your association with UNICEF

201. What is the nature of your engagement with UNICEF South Sudan Country Office [may select more than one option]

Implementing Partner

Advocacy Partner

Media and communication partner

Donor

Technical support service provider

Oversight/coordination

No direct engagement

202. In which geographic area in South Sudan is your engagement with UNICEF? [may select more than one option]

National

Western Equatoria State

Eastern Equatoria State

Central Equatoria State

Northern Bahr el Ghazal State

Western Bahr el Ghazal State	☐
Unity State	☐
Upper Nile State	☐
Jonglei	☐
Greater Pibor Administrative Area (GPAA)	☐
Ruweng Administrative Area	☐
Abei administrative area	☐
Lake State	☐
Warrap	☐
None of the above	☐

203. In which programmatic area of UNICEF South Sudan are you engaged? [may select more than one option]

Health	☐
Nutrition	☐
Water, Sanitation and Hygiene (WASH)	☐
Education	☐
Child Protection	☐
Social Policy	☐
Climate change	☐
Other (please specify)	☐

204. Which of the following groups are you engaged with on UNICEF work? [may select more than one option]

Children below 5 years	☐
Girls and Boys in the Primary schooling	☐
Adolescents	☐
Teachers and Principals of schools	☐
Health care workers	☐
Childcare workers/ Police	☐
Parents	☐
Water supply and sanitation workers	☐
No direct engagement with target group	☐
Other (Please specify)	☐

Section 3: RELEVANCE

301. Are you familiar with or involved in the UNICEF programme planning and design process?

Yes ☐ No ☐

302. Is the current country programme based on the results and learnings from the previous programme?

Yes ☐ No ☐ Do not know ☐

303. In your opinion, has the current Country Programme taken into consideration the national priorities and needs (in your area of programmatic engagement)?

Yes ☐ No ☐ Do not know ☐

304. Do you think the program has effectively addressed emerging needs or changes in context, particularly in terms of policy advice?

Yes ☐ No ☐ Do not know ☐

If you answered "Yes," please rate the relevance of the program on a scale from **1 to 10**, where **1 = Slightly relevant** and **5 = Highly relevant**.

305. Do you think the program has effectively addressed emerging needs or changes in context, particularly in terms of systems strengthening?

Yes ☐ No ☐ Do not know ☐

If you answered "Yes," please rate the relevance of the program on a scale from **1 to 10**, where **1 = Slightly relevant** and **5 = Highly relevant**.

306. Do you think the program has effectively addressed emerging needs or changes in context, particularly in terms of intensification of service delivery?

Yes ☐ No ☐ Do not know ☐

If you answered "Yes," please rate the relevance of the program on a scale from **1 to 10**, where **1 = Slightly relevant** and **5 = Highly relevant**.

307. To what extent do you think the Country Programme addresses the needs, barriers, and challenges faced by the most vulnerable groups in the following areas?

Please rate each area from 1 (not at all) to 5 (very much)

Statement	Rating				
	1	2	3	4	5
(a) Equity					
(b) Human Rights-Based Approach					
© Humanitarian response					

Statement	Rating				
	1	2	3	4	5
(d) Disability Inclusion					
(e) Gender equality goals					

308. To what extent do you think the following country programme areas have integrated key social and behavioural drivers hampering the achievement of sectoral and cross-sectoral results?

Please rate each area from 1 (not at all) to 5 (very much)

Statement	Rating				
	1	2	3	4	5
(a) Health					
(b) Nutrition					
(c) Water, Sanitation and Hygiene (WASH)					
(d) Education					
(e) Child Protection					
(f) Social Policy					
(g) Climate change					

309. How do you consider UNICEF's positioning/strengths in the country, compared to other UN agencies and development partners in the following sectors?

Please rate each area from 1 (non-existent) to 5 (very strong)

Statement	Rating				
	1	2	3	4	5
(a) Health					
(b) Nutrition					
(c) Water, Sanitation and Hygiene (WASH)					
(d) Education					
(e) Child Protection					
(f) Social Policy					
(g) Climate change					

Section 4: COHERENCE

401. How effectively do you think the program establishes partnerships or coordination with key actors (e.g., government, UN agencies, civil society, NGOs, private sector, academia) in the country?

Please rate from 1 (Not effective at all) to 5 (Perfectly effective)

402. (If Q401 > 1) To what extent do you think these partnerships helped address key challenges and contribute to achieving results at a larger scale?

Please rate from 1 (Not helpful at all) to 5 (Perfectly helpful)

403. Overall, how meaningful were the partnerships or coordination mechanisms established with the government and other stakeholders at national and local levels?

Please rate from 1 (Not at all meaningful) to 5 (Perfectly meaningful)

Section 5: EFFECTIVENESS

Please rate your opinion on effectiveness on a scale 1 to 5 (1 – very unsatisfactory; 2- unsatisfactory; 3 – moderately satisfactory; 4 – satisfactory; 5 – very satisfactory) in the following areas [only one rating per question]

Statement	Rating				
	1	2	3	4	5
501. In your area of engagement, how effective is the UNICEF work in reaching the most vulnerable?					
502. Are the Programme outputs reaching target population?					
503. Are the outputs delivered in a timely manner?					
504. What is your opinion on the quality of work?					
505. What is your opinion on the partnership with you?					
506. What is your opinion on the level of skills and competency of UNICEF staff in providing technical support?					

507. If, in your opinion, effectiveness is to be improved, how would you suggest such improvements be undertaken?

Increasing scale of operations
 Adopting different interventions
 Improving implementation modalities
 Working better with partners
 None

508. Please rate your opinion on the results UNICEF has contributed in the following thematic areas [only one rating per question] - Scale 1 to 5 (1 – very unsatisfactory; 2- unsatisfactory; 3 – moderately satisfactory; 4 – satisfactory; 5 – very satisfactory) **[Please answer only the sections relevant to your area of engagement].**

27.1. Health

Statement	Rating				
	1	2	3	4	5
(a) Improving childcare capacity					
(b) Improving maternal and neo-natal care capacity					
(c) Improving government and partners immunization capacity					

27.2. Nutrition

Statement	Rating				
	1	2	3	4	5
(h) Improving government capacity for malnutrition reduction multi-system approach.					
(i) Improving access to preventative nutrition services and adoption of positive nutrition practices.					
(j) Improving access to curative nutrition services					

27.3. WASH

Statement	Rating				
	1	2	3	4	5
(a) Strengthening government capacity/enabling frameworks to improve and sustain WASH services access.					
(b) Improving WASH services access for populations in emergency situations.					
(c) Improving WASH services access for rural population.					
(d) Improving WASH services access for urban population.					

27.4. Education

Statement	Rating				
	1	2	3	4	5
(a) Improving education sector capacity for early learning.					
(b) Improving access to basic formal, non-formal and alternative education services.					
(c) Improving education system capacity to deliver quality learning services					

27.5. Child protection

Statement	Rating				
	1	2	3	4	5
(a) Improving government capacity to develop and manage protection services.					
(b) Improving access to protection services.					

27.6. Social Protection

Statement	Rating				
	1	2	3	4	5
(a) Increasing Government capacity to assess child vulnerability and design policies, plans, and budgets.					
(b) Improving government capacity for social services budgeting.					
(c) Increasing government capacity for social protections services.					

509. In regard to gender equity in UNICEF programming, please provide your opinion on the following in your area of work/engagement with UNICEF: **[only one rating per question]** - Scale 1 to 5 (1 – very unsatisfactory; 2- unsatisfactory; 3 – moderately satisfactory; 4 – satisfactory; 5 – very satisfactory)

Statement	Rating				
	1	2	3	4	5
(a) UNICEF brings up gender equity regularly in our collaborations					
(b) Creating/supporting interventions with gender considerations that make a tangible difference in gender equity on the ground					
(c) Creating enabling environment for gender equality in programming in partners					
(d) Support promotion of sex-disaggregated data collection					
(e) Generating awareness and communication for social change					
(f) Participating in advocacy and policy fora					
(g) Contributing towards gender budgeting/Citizen budgeting					
(h) Supporting policies to protect gender parity and equality					

510. How well do you think the construction or rehabilitation of infrastructure and services supported by UNICEF SSCP meet quality standards?

Please rate from 1 (very poor) to 5 (Excellent)

511. How much do you think the current standard of infrastructure and services contributes to the overall success of the program?

Please rate from 1 (Not at all) to 5 (Contributes Highly)

512. To what extent do you think the following strategies adopted by UNICEF integrate cross-cutting priorities?

Please rate each strategy on a scale from 1 (No integration) to 5 (Strong integration)

Strategy	Rating				
	1	2	3	4	5
(a) Climate Change					
(b) Gender					

Strategy	Rating				
	1	2	3	4	5
(c) Social and Behavioral Change					
(d) Disability Inclusion					
(e) Equity					
(f) Human rights					

513. (if Q303 > 1) To what extent do you think the integration of these cross-cutting priorities contributed to program outcomes?

Please rate each strategy on a scale from 1 (No contribution) to 5 (Strong contribution)

Strategy	Rating				
	1	2	3	4	5
(a) Climate Change					
(b) Gender					
(c) Social and Behavioral Change					
(d) Disability Inclusion					
(e) Equity					
(f) Human Rights					

514. To what extent do you think the interventions' communications and advocacy efforts have been gender responsive/transformational?

Please rate on a scale from 1 (Not at all responsive) to 5 (Extremely responsive)

515. In your opinion, how do you rate the usefulness of implementation partners' capacity-building on gender issues?

Please rate on a scale from 1 (Slightly useful) to 5 (Very useful)

516. On a scale of 1 to 5, how useful do you think the shift towards relying more on local NGOs has been in achieving the expected results?

(1 = Not useful at all, 5 = Extremely useful)

517. On a scale of 1 to 5, how useful do you think the shift towards institutional and service strengthening has been in achieving the expected results?

(1 = Not useful at all, 5 = Extremely useful)

Section 6: EFFICIENCY

601. How do you rate the programs SBC design and implementation in coordination with other programme areas, and with other partners?

(1 = Not at all efficient, 5 = Extremely efficient)

602. How useful do you think the SBC sub-program has been for the achievement of the program results?

(1 = Not at all useful, 10 = Extremely useful)

603. How useful do you think the PMER, external communication and donor relation sub-program have been for resource mobilization and utilization of funds?

(1 = Not at all useful, 5 = Extremely useful)

Section 7: IMPACT

501. To what extent do you think the UNICEF South Sudan programme has achieved the following impacts for children and at scale?

Please rate each of the following areas on a scale from 1 (No impact) to 5 (Strong impact):

Statement	Rating				
	1	2	3	4	5
(a) Improvement in child health, education, and well-being					
(b) Increased access to essential services (e.g., education, healthcare, water, sanitation)					
(c) Positive changes in equity and inclusion for vulnerable groups					
(d) Behavioural changes in key areas (e.g., hygiene, health practices)					
(e) Empowerment of communities and local capacity building					
(f) Sustainability of results beyond the program's duration					
(g) The scale and reach of the program (number of beneficiaries and geographical coverage)					

Section 8: SUSTAINABILITY

601. On a scale of 1 to 5, how strongly do you think the Government of South Sudan has demonstrated ownership of the Country Programme (CP) in its willingness and ability to fund the continuation of CP interventions?

(1 = Not at all, 5 = Extremely strongly)

602. On a scale of 1 to 5, how much do you think systems and capacity within the Government of South Sudan are being strengthened to ensure the long-term benefits of CP interventions?

(1 = Not strengthened at all, 5 = Fully strengthened)

Section 7: CONNECTEDNESS

701. On a scale of 1 to 5, how strongly do you think the following external factors influence the achievement (or lack thereof) of the program's results??

(1 = Not at all, 5 = Extremely strongly)

Statement	Rating				
	1	2	3	4	5
(a) Climate change					
(b) COVID-19 pandemic					
(c) Droughts/flooding					
(d) Inflation					
(e) Fluctuations in the funding landscape					

Thank You.

THE END.

Informed Consent Forms -KII

Informed Consent Form – Key Informant Interviews – Government Stakeholders

Oversee Advising Group is conducting the Country Programme Evaluation of the 2019-2022 & 2023–2025 UNICEF South Sudan Country Programmes of Cooperation.

This consent form explains the evaluation and the role of participants in the study. Please consider this information and take as much time as you need. If you have questions at a later time, you can ask any of the members of the national evaluation team.

The evaluation aims to identify lessons learned from the current Cooperation Programme (2020-2023) to inform the design of the next country programme and to determine what needs to be done differently to help South Sudan achieve the SDGs by 2030.

To do this, the evaluation will focus on addressing the following objectives:

- Assess the relevance, effectiveness, efficiency, coherence, sustainability, connectedness, coverage, and orientation towards impact of the previous and current South Sudan Country Programmes, with particular focus on the programme and operational strategies and UNICEF's positioning within the development community; with national partners, and field presence to respond to South Sudan's development and humanitarian needs.
- Identify and document key lessons from the 2019-2022 and 2023-2025 Country Programmes to make the best use of UNICEF's change strategies, good practices, and innovations.
- Provide a set of forward-looking and actionable recommendations to contribute towards course correction of the current Country Programme, strengthen programmatic and operational strategies in the design of the next South Sudan Country Programme.

Voluntary Participation

We are inviting you to participate in this study because you are a Key Government Country Programme Stakeholder

Your participation in this study is entirely voluntary. It is your choice whether to participate or not. You may change your mind and stop participating at any time.

Procedures

We would like to ask you some questions relating to the previous and current South Sudan Country Programmes. We will ask you questions relating to programme and operational strategies and UNICEF's positioning within the development community; your perceptions of the achievements and outcomes of the Country Programmes; how things worked out – what facilitated changes and what were the barriers faced? Key lessons learned and areas for improvements.

To make sure that I don't forget or change what you are saying to me I ask for your permission to audio record and write down the conversation. Everything that will be recorded and written down will be confidential. Please note that you can refuse to give your permission to this.

Duration

The interview will last for about 60-90 minutes

Benefits

There are no direct benefits to you from being in this evaluation.

Risks, discomforts and rights to withdraw

There are no obvious physical, psychological, social, economic, legal, and emotional risks in participating in this study. Participation in this study is voluntary. During the interview, you are allowed to refuse to answer any question and you are allowed to stop the interview at any time. There are no consequences should you decide not to continue with the interview.

Confidentiality and Privacy

The information that you give us is completely confidential. We will not associate your name with anything that you say. We will not use personal identifiers for the information obtained. Privacy will be assured during this interview by having it here (or virtually).

Consent and contact

Have you got any questions you would like to ask?

Do you agree to answer the questions now?

If you have any other questions about this study later, you can contact the Field Supervisor on (*mobile telephone number*) :

If you agree to participate after receiving the above information, please sign below.

☐ Check for verbal consent

Read by Respondent [] Interviewer []

Agreed [] Refused []

Respondent: _____

Interviewer: _____ Date: __/__/__

If 'Refused', the Interviewer should inform the Team Lead for proper documentation.

Informed Consent Form – Key Informant Interviews – UNICEF stakeholders

Oversee Advising Group is conducting the Country Programme Evaluation of the 2019-2022 & 2023-2025 UNICEF South Sudan Country Programmes of Cooperation.

This consent form explains the evaluation and the role of participants in the study. Please consider this information and take as much time as you need. If you have questions at a later time, you can ask any of the members of the national evaluation team.

The evaluation aims to identify lessons learned from the current Cooperation Programme (2020-2023) to inform the design of the next country programme and to determine what needs to be done differently to help South Sudan achieve the SDGs by 2030.

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- Identify and document key lessons from the 2019-2022 and 2023-2025 Country Programmes to make the best use of UNICEF's change strategies, good practices, and innovations.
- Provide a set of forward-looking and actionable recommendations to contribute towards course correction of the current Country Programme, strengthen programmatic and operational strategies in the design of the next South Sudan Country Programme.

Voluntary Participation

We are inviting you to participate in this study because you are a UNICEF stakeholder involved in the Country Programme.

Your participation in this study is entirely voluntary. It is your choice whether to participate or not. You may change your mind and stop participating at any time.

Procedures

We would like to ask you some questions relating to the previous and current South Sudan Country Programmes. We will ask you questions relating to programme and operational strategies and UNICEF's positioning within the development community; your perceptions of the achievements and outcomes of the Country Programmes; how things worked out – what facilitated changes and what were the barriers faced? Key lessons learned and areas for improvements.

To make sure that I don't forget or change what you are saying to me I ask for your permission to audio record and write down the conversation. Everything that will be recorded and written down will be confidential. Please note that you can refuse to give your permission to this.

Duration

The interview will last for about 60-90 minutes

Benefits

There are no direct benefits to you from being in this evaluation.

Risks, discomforts and rights to withdraw

There are no obvious physical, psychological, social, economic, legal, and emotional risks in participating in this study. Participation in this study is voluntary. During the interview, you are allowed to refuse to answer

any question and you are allowed to stop the interview at any time. There are no consequences should you decide not to continue with the interview.

Confidentiality and Privacy

The information that you give us is completely confidential. We will not associate your name with anything that you say. We will not use personal identifiers for the information obtained. Privacy will be assured during this interview by having it here (or virtually).

Consent and contact

Have you got any questions you would like to ask?

Do you agree to answer the questions now?

If you have any other questions about this study later, you can contact the Field Supervisor on (*mobile telephone number*) :

If you agree to participate after receiving the above information, please sign below.

☐ Check for verbal consent

Read by Respondent [] Interviewer []

Agreed [] Refused []

Respondent: _____

Interviewer: _____ Date: __/__/__

If 'Refused', the Interviewer should inform the Team Lead for proper documentation.

Informed Consent Form – Key Informant Interviews – Technical / Development / Implementing Partners

Oversee Advising Group is conducting the Country Programme Evaluation of the 2019-2022 & 2023-2025 UNICEF South Sudan Country Programmes of Cooperation.

This consent form explains the evaluation and the role of participants in the study. Please consider this information and take as much time as you need. If you have questions at a later time, you can ask any of the members of the national evaluation team.

The evaluation aims to identify lessons learned from the current Cooperation Programme (2020-2023) to inform the design of the next country programme and to determine what needs to be done differently to help South Sudan achieve the SDGs by 2030.

To do this, the evaluation will focus on addressing the following objectives:

- Assess the relevance, effectiveness, efficiency, coherence, sustainability, connectedness, coverage, and orientation towards impact of the previous and current South Sudan Country Programmes, with particular focus on the programme and operational strategies and UNICEF's positioning within the development community; with national partners, and field presence to respond to South Sudan's development and humanitarian needs.
- Identify and document key lessons from the 2019-2022 and 2023-2025 Country Programmes to make the best use of UNICEF's change strategies, good practices, and innovations.
- Provide a set of forward-looking and actionable recommendations to contribute towards course correction of the current Country Programme, strengthen programmatic and operational strategies in the design of the next South Sudan Country Programme.

Voluntary Participation

We are inviting you to participate in this study because you are a Technical / Development / or Implementing partner involved in the Country Programme.

Your participation in this study is entirely voluntary. It is your choice whether to participate or not. You may change your mind and stop participating at any time.

Procedures

We would like to ask you some questions relating to the previous and current South Sudan Country Programmes. We will ask you questions relating to programme and operational strategies and UNICEF's positioning within the development community; your perceptions of the achievements and outcomes of the Country Programmes; how things worked out – what facilitated changes and what were the barriers faced? Key lessons learned and areas for improvements.

To make sure that I don't forget or change what you are saying to me I ask for your permission to audio record and write down the conversation. Everything that will be recorded and written down will be confidential. Please note that you can refuse to give your permission to this.

Duration

The interview will last for about 60-90 minutes

Benefits

There are no direct benefits to you from being in this evaluation.

Risks, discomforts and rights to withdraw

There are no obvious physical, psychological, social, economic, legal, and emotional risks in participating in this study. Participation in this study is voluntary. During the interview, you are allowed to refuse to answer any question and you are allowed to stop the interview at any time. There are no consequences should you decide not to continue with the interview.

Confidentiality and Privacy

The information that you give us is completely confidential. We will not associate your name with anything that you say. We will not use personal identifiers for the information obtained. Privacy will be assured during this interview by having it here (or virtually).

Consent and contact

Have you got any questions you would like to ask?

Do you agree to answer the questions now?

If you have any other questions about this study later, you can contact the Field Supervisor on (*mobile telephone number*):

If you agree to participate after receiving the above information, please sign below.

☐ Check for verbal consent

Read by Respondent [] Interviewer []

Agreed [] Refused []

Respondent: _____

Interviewer: _____ Date: __/__/__

If 'Refused', the Interviewer should inform the Team Lead for proper documentation.

Generic Topic Guides for Key Informant Interviews

These interview guides are generic. They do not cover all the specific issues for all categories of stakeholders across all the sectors. Evaluation Team members will use their judgement and focus on areas which are likely to add most to the team's existing knowledge, while allowing interviewees to highlight the issues which are most important to them. Specific questions asked will depend on the strategic roles and responsibilities highlighted by the respondents.

Topic Guide – Government Stakeholders at National and sub-national levels

Background Information

- Collection location
- Position held
- Activities carried out within the framework of the UNICEF South Sudan Country Programme of Cooperation
- Years of experience
- Types of interventions involved in (e.g. Health, Nutrition, WASH, Education, Child Protection, Social Policy)

Role of a respondent - I'd like to start by having you briefly describe your role and responsibilities within the Country Programme as a government stakeholder.

Context of Programme Implementation

1. What is your view of the context in which the UNICEF South Sudan Country Programme of Cooperation is implemented?
 - a. What were the main threats (insecurity, economic, political, emergency context including COVID-19, etc.) that the country has faced, which have influenced the UNICEF South Sudan Country Programme.
 - b. In your opinion, what is the extent to which these threats have influenced the design and implementation of the Country Programme? (**Probe** for each threat separately).
 - c. Broadly, how do you think the different Country Programme interventions have been /were able to adapt to the country context in order to achieve their objectives? (**Probe** for Health, Nutrition, Education, WASH, Child Protection and Social Policy separately and depending on the function of the stakeholder being interviewed)
 - i. What were the opportunities? How did they influence the implementation of the Country Programme interventions?
 - ii. What were the elements that could not be tackled? How did the programme adjust to them?

Relevance

2. To what extent were the objectives of the Country Programme, the design and approaches appropriate (as relating to the CP 2019 – 2022) and have remained appropriate (in the current

programme cycle) to respond to beneficiaries, country, and partner/institution needs, policies, and priorities?

- a. How would you describe the alignment of UNICEF's support to South Sudan's national development priorities?
 - b. How would you describe the appropriateness of UNICEF's mix of approaches (relating to policy advice, systems strengthening, and intensification of service delivery) for South Sudan's context?
 - c. Has there been significant changes to the Government strategies and priorities in the areas of UNICEF programming within the two programme cycles? (**Probe separately for each cycle**) How did UNICEF's advocacy efforts and /or technical support contribute to these changes?
3. In your view, to what extent has UNICEF been responsive and adaptive to changes in the country's context during the two programme cycles? (**Probe for COVID-19 pandemic, drought, floods, other emergencies**)
- a. To what extent do you think the Country Programme addresses the needs of children, adolescents and women in South Sudan, including the most vulnerable? *Please give reasons for your answer.*
 - b. In your opinion, is UNICEF working in the most appropriate geographical areas? Do you consider that UNICEF is working in programmes (either nationally or sector specific) that are appropriate to the country's needs? *Please give reasons for your answer. Why? Why not?*
 - c. In what ways did the CP put different vulnerable groups into consideration in the design and implementation of interventions? *Please give some examples. (Probe for women, adolescents, persons with disabilities etc.)*
4. What are UNICEF's comparative strengths in the country – particularly in alignment with other UN agencies and development partners?
- a. How do you assess the synergy between the government, other UN agencies / development partners and UNICEF in the perspective of the programme? In your view, to what extent has UNICEF's comparative strengths been harnessed to achieve synergetic effects and to position UNICEF where it can make the biggest difference?
 - b. What do you perceive as the advantages of UNICEF's comparative strengths for both upstream and downstream engagements and how are these adapted in the programme? (**Probe separately for each type of engagement**)

Coherence

5. To what extent were meaningful partnerships or coordination mechanisms established with other key actors e.g. government at national and local levels, other UN agencies, civil society, NGOs, private sector, academia, etc.?
- a. How would you describe the strength of partnerships with the implementing Government agencies, including during the COVID pandemic? Could you please provide **examples** of specific interventions planned and implemented collaboratively or jointly and results achieved?
 - b. How would you describe the functionality of the coordination mechanisms?

- c. What are the bottlenecks that have been identified? (**Probe** specifically for the two programme cycles)
- d. How have the coordination mechanisms contributed towards addressing the predefined bottlenecks and contributing to the results at scale?
- e. What do you think could be done better to improve partnerships and coordination?

Effectiveness

- 6. How would you describe changes due to the Country Programme Interventions at national, state, county, local and community levels from 2019-2022 and since 2023? (**Probe** for specific outputs and expected outcomes in the relevant sectors - health, nutrition, climate-resilient WASH, Education, Child Protection, Social Policy - linked to specific stakeholders)
- 7. How can these changes be explained - what do you think has made it possible for these changes to happen? Why? What else? (**Probe** for the extent to which climate changes incidences, gender, social and behaviour change, disability inclusion, equity and human rights influenced outcomes)
 - a. What in your view were the most effective interventions / engagement strategies? (**Probe** for different strategies – e.g SBCC, evidence advocacy, system strengthening, service delivery) What factors explain the successes? Were there any missed opportunities (e.g. public-private sector linkages, etc.)?
 - b. What were the least effective interventions? What factors explain this failure?
 - c. What are the main constraints relating to demand or to the population level? What do you think has made it difficult for changes to happen? Why? What else?
- 8. How would you describe the integration of social and behavioural change and gender considerations in the design of interventions and advocacy?
 - a. What in your view is the capacity of UNICEF CO staff and implementation partners to integrate and implement gender responsive/transformative programmes? What are the strengths? What are the gaps?
 - b. What in your view is the capacity of UNICEF CO staff and implementation partners to integrate and implement SBCC programmes? What are the strengths? What are the gaps?
 - c. What could be improved?
- 9. To what extent were the views / perspectives of women, men, children, adolescents and other rights-holders, especially the most disadvantaged and marginalized ones considered in the Country Programme?
 - a. How and to what extent have the different interests of women and men of different age groups been integrated into the design and implementation of the programme, including its governance and monitoring systems?
 - b. Could you describe the availability and usefulness of the beneficiary feedback mechanisms (including any changes made during implementation) in the two programme cycles?
- 10. To what extent were local partners /NGOs used for service delivery (in the current programme cycle)? How did this influence the achievement of the expected results?
- 11. What were/are the (positive and negative) unintended effects did the CP interventions generate at county and national levels? Please give **examples**.

Efficiency *(the roles and responsibilities detailed at the start of the interview will determine the stakeholder(s) to ask some of the questions)*

12. In your opinion, are the budget and planned activities sufficient (in quantity and quality) to achieve the results? Are there gaps not covered by other partners or the government? **(Probe separately for the two CP cycles)**
 - a. In your view, how timely were the delivery of results? What worked well? What were the challenges?
13. Could you describe how the SBC interventions were designed and implemented in coordination with other programme areas, and with other partners? How did this influence the management of resources?
14. Are there cheaper alternatives that would have made it possible to achieve the same results with final beneficiaries? If yes, what are they? Have these alternatives been explored and used?

Impact

15. In your opinion, how did the Country Programmes **(Probe separately for the preceding CP and the current CP)** contribute to positive long-term changes on children, particularly the most marginalized and vulnerable?
 - a. What positive and negative (intended and unintended) long-term changes occurred in the different programme cycles?

Sustainability

16. In your opinion, what are the things which can make the achievements described continue working even if there is no outside help? **(Probe for intrinsic and extrinsic elements - examples of change of mind-set; the use of local resources/ capacities and /or networks that are (or can be) effectively applied to sustain the achievements of the response. Ask for examples of how the national, county, local governments and communities have demonstrated ownership and capacity to self-support in the Country Programme).**
17. What measures have been taken in the design and implementation of the programme to ensure its sustainability and ownership by beneficiaries as well as national entities? **(Probe for strengthening of government capacity and monitoring)**

Connectedness

18. How would you describe UNICEF's response to humanitarian issues?
 - a. To what extent has it contributed to strengthening national preparedness and response efforts, including the humanitarian, development, and peace linkages? **(Probe for awareness of the concept of the humanitarian - development - peace nexus).**
 - b. What are the major external factors influencing the achievement (or not) of this result?

Coverage

19. In your view, to what extent has UNICEF managed to reach the most vulnerable populations such as children, women, and those with disabilities?
 - a. What do you consider as barriers to access to services for women? What efforts have been made to tackle them?

Lessons Learned and Suggestions for Improvement

20. What, if any, have been the promising, emerging and good practices that were identified at both the country and county levels? (Probe for main lessons drawn from the implementation of the UNICEF supported country programme).

21. What could be improved?
22. What should be the key focus of UNICEF support in the current programme cycle?

Topic Guide – UNICEF Stakeholders

Background Information

- Collection location
- Position held
- Activities carried out within the framework of the UNICEF South Sudan Country Programme of Cooperation
- Years of experience
- Types of interventions involved in (e.g. Health, Nutrition, WASH, Education, Child Protection, Social Policy)

Role of a respondent - I'd like to start by having you briefly describe your role and responsibilities within the Country Programme as a UNICEF stakeholder.

Context of Programme Implementation

1. What is your view of the context in which the UNICEF South Sudan Country Programme of Cooperation is implemented?
 - a. What were the main threats (insecurity, economic, political, emergency context including COVID-19, etc.) that the country has faced, which have influenced the UNICEF South Sudan Country Programme.
 - b. In your opinion, what is the extent to which these threats have influenced the design and implementation of the Country Programme? (**Probe** for each threat separately).
 - c. Broadly, how do you think the different Country Programme interventions have been /were able to adapt to the country context in order to achieve their objectives? (**Probe** for Health, Nutrition, Education, WASH, Child Protection and Social Policy separately and depending on the function of the stakeholder being interviewed)
 - i. What were the opportunities? How did they influence the implementation of the Country Programme interventions?
 - ii. What were the elements that could not be tackled? How did the programme adjust to them?
 - i. What were the elements that could not be tackled? How did the programme adjust to them?

Relevance

2. Could you describe UNICEF Child Development and Survival priorities and in particular related to the South Sudan Country Programme of Cooperation? What were the priorities and strategies to address child and maternal indices and how were those established (at the start of country programme interventions)? *Ask for documentations and examples if any.*
3. To what extent were the objectives of the Country Programme, the design and approaches appropriate (as relating to the CP 2019 – 2022) and have remained appropriate (in the current programme cycle) to respond to beneficiaries, country, and partner/institution needs, policies, and priorities?
 - b. How would you describe the alignment of UNICEF's support to South Sudan's national development priorities?
 - c. How would you describe the appropriateness of UNICEF's mix of approaches (relating to policy advice, systems strengthening, and intensification of service delivery) for South Sudan's context?
 - d. Has there been significant changes to the Government strategies and priorities in the areas of UNICEF programming within the two programme cycles? (**Probe separately for each cycle**) How did UNICEF's advocacy efforts and /or technical support contribute to these changes?
4. In your view, to what extent has UNICEF been responsive and adaptive to changes in the country's context during the two programme cycles? (**Probe for COVID-19 pandemic, drought, floods, other emergencies**)
 - a. To what extent do you think the Country Programme addresses the needs of children, adolescents and women in South Sudan, including the most vulnerable? Please give reasons for your answer.
 - b. In your opinion, is UNICEF working in the most appropriate geographical areas? Do you consider that UNICEF is working in programmes (either nationally or sector specific) that are appropriate to the country's needs? *Please give reasons for your answer. Why? Why not?*
 - c. In what ways did the CP put different vulnerable groups into consideration in the design and implementation of interventions? *Please give some examples. (Probe for women, adolescents, persons with disabilities etc.)*
5. What are UNICEF's comparative strengths in the country – particularly in alignment with other UN agencies and development partners?
 - a. How do you assess the synergy between them and UNICEF in the perspective of the programme? In your view, to what extent has UNICEF's comparative strengths been harnessed to achieve synergetic effects and to position UNICEF where it can make the biggest difference?
 - b. What do you perceive as the advantages of UNICEF's comparative strengths for both upstream and downstream engagements and how are these adapted in the programme? (**Probe separately for each type of engagement**)
 - c. To what extent has the influence of donors affected UNICEF's focus and priority actions?

Coherence

6. To what extent were meaningful partnerships or coordination mechanisms established with other key actors e.g. government at national and local levels, other UN agencies, civil society, NGOs, private sector, academia, etc.?
 - a. How would you describe the strength of partnerships with the implementing Government agencies, including during the COVID pandemic? Could you please provide **examples** of specific interventions planned and implemented collaboratively or jointly and results achieved?
 - b. How would you describe the functionality of the coordination mechanisms?
 - c. What are the bottlenecks that have been identified? (**Probe specifically for the two programme cycles**)
 - d. How have the coordination mechanisms contributed towards addressing the predefined bottlenecks and contributing to the results at scale?
 - e. What do you think could be done better to improve partnerships and coordination?
7. To what extent have key UNICEF strategies and international commitments been consistently integrated in the Country Programming and Implementation? (**Probe for policy and advocacy, particularly vis-a-vis the Core Commitments for Children in Humanitarian Action and UNICEF's Gender Action Plans**) Please could you give **reasons** for your answer or some **examples**?

Effectiveness

8. How would you describe changes due to the Country Programme Interventions at national, state, county, local and community levels from 2019-2022 and since 2023? (**Probe for specific outputs and expected outcomes in the relevant sectors - health, nutrition, climate-resilient WASH, Education, Child Protection, Social Policy - linked to specific stakeholders**)
9. How can these changes be explained - what do you think has made it possible for these changes to happen? Why? What else? (**Probe for the extent to which climate changes incidences, gender, social and behaviour change, disability inclusion, equity and human rights influenced outcomes**)
 - a. What in your view were the most effective interventions / engagement strategies? (**Probe for different strategies – e.g SBCC, evidence advocacy, system strengthening, service delivery**) What factors explain the successes? Were there any missed opportunities (e.g. public-private sector linkages, etc.)?
 - b. What were the least effective interventions? What factors explain this failure?
 - c. What are the main constraints relating to demand or to the population level? What do you think has made it difficult for changes to happen? Why? What else?
10. How would you describe the integration of social and behavioural change and gender considerations in the design of interventions and advocacy?
 - a. What in your view is the capacity of UNICEF CO staff and implementation partners to integrate and implement gender responsive/transformational programmes? What are the strengths? What are the gaps?
 - b. What in your view is the capacity of UNICEF CO staff and implementation partners to integrate and implement SBCC programmes? What are the strengths? What are the gaps?

c. What could be improved?

11. To what extent were the views / perspectives of women, men, children, adolescents and other rights-holders, especially the most disadvantaged and marginalized ones considered in the Country Programme?
 - a. How and to what extent have the different interests of women and men of different age groups been integrated into the design and implementation of the programme, including its governance and monitoring systems?
 - b. Could you describe the availability and usefulness of the beneficiary feedback mechanisms (including any changes made during implementation) in the two programme cycles?
12. To what extent were local partners /NGOs used for service delivery (in the current programme cycle)? How did this influence the achievement of the expected results?
13. What were/are the (positive and negative) unintended effects did the CP interventions generate at county and national levels? Please give **examples**.

Efficiency *(the roles and responsibilities detailed at the start of the interview will determine the stakeholder(s) to ask some of the questions)*

14. To what extent did the office structures provide the required resources/ inputs to implement the programme? (**Probe** for PMER, SBC; external communication; donors relation; supply and logistic; field offices; security; field operations, Admin and HR)?
 - a. In your view how useful were the different office structures? How did they facilitate or hinder timely delivery of results? How did they facilitate or hinder resource mobilization and utilization?
 - b. Could you describe how the SBC interventions were designed and implemented in coordination with other programme areas, and with other partners? How did this influence the management of resources?
15. Are the budget and planned activities sufficient (in quantity and quality) to achieve the results or are there gaps not covered by other partners or the government?
16. Are there cheaper alternatives that would have made it possible to achieve the same results with final beneficiaries? If yes, what are they? Have these alternatives been explored and used?

Impact

17. In your opinion, how did the Country Programmes (probe separately for the preceding CP and the current CP) contribute to positive long-term changes on children, particularly the most marginalized and vulnerable?
 - a. What positive and negative (intended and unintended) long-term changes occurred in the different programme cycles?

Sustainability

18. In your opinion, what are the things which can make the achievements described continue working even if there is no outside help? (**Probe** for intrinsic and extrinsic elements - examples of change of mind-set; the use of local resources/ capacities and /or networks that are (or can be) effectively applied to sustain the achievements of the response. **Ask for examples** of how the national, county, local governments and communities have demonstrated ownership and capacity to self-support in the Country Programme).

19. What measures have been taken by UNICEF in the design and implementation of the programme to ensure its sustainability and ownership by beneficiaries as well as national entities? (**Probe for strengthening of government capacity and monitoring**)
20. Could you describe how programme strategies, plans, and tools, particularly those with equity and gender focus, have been institutionalized in systems, policies, mechanisms and strategies among government, NGO/civil society, and other partners and stakeholders? **Ask for examples of improved government systems, service delivery mechanisms, and service integration**
 - a. What were the challenges? What are the opportunities?
 - b. To what extent was the development-humanitarian nexus considered in activities designed to build resilience of people, communities, and systems?

Connectedness

21. How would you describe UNICEF's response to humanitarian issues?
 - a. To what extent has it contributed to strengthening national preparedness and response efforts, including the humanitarian, development, and peace linkages? (**Probe for awareness of the concept of the humanitarian - development - peace nexus**).
 - b. What are the major external factors influencing the achievement (or not) of this result?

Coverage

22. In your view, to what extent has UNICEF managed to reach the most vulnerable populations such as children, women, and those with disabilities?
 - a. What do you consider as barriers to access to services for women? What efforts have been made to tackle them?

Lessons Learned and Suggestions for Improvement

23. What, if any, have been the promising, emerging and good practices that were identified at both the country and county levels? (Probe for main lessons drawn from the implementation of the UNICEF supported country programme).
24. What could be improved?
25. What should be the key focus of UNICEF support in the current programme cycle?

Topic Guide – Technical /Development Partners

Please probe for specific organizations as appropriate and note that there are specific questions that apply to only one level

Background Information

- Collection location
- Position held
- Activities carried out within the framework of the UNICEF South Sudan Country Programme of Cooperation
- Years of experience
- Types of interventions involved in (e.g. Health, Nutrition, WASH, Education, Child Protection, Social Policy)

Role of a respondent - I'd like to start by having you briefly describe your role and responsibilities within the Country Programme as a Technical / Development partner.

Context of the Implementation of birth registration interventions

1. Is your organization supporting the South Sudan Country Programme of Cooperation? In what key ways is your organization providing support?
2. What is your view of the context in which the UNICEF South Sudan Country Programme of Cooperation is implemented?
 - a. What were the main threats (insecurity, economic, political, emergency context including COVID-19, etc.) that the country has faced, which have influenced the UNICEF South Sudan Country Programme.
 - b. In your opinion, what is the extent to which these threats have influenced the design and implementation of the Country Programme? (**Probe** for each threat separately).
 - c. Broadly, how do you think the different Country Programme interventions have been /were able to adapt to the country context in order to achieve their objectives? (**Probe** for Health, Nutrition, Education, WASH, Child Protection and Social Policy separately and depending on the function of the stakeholder being interviewed)
 - i. What were the opportunities? How did they influence the implementation of the Country Programme interventions?
 - ii. What were the elements that could not be tackled? How did the programme adjust to them?

Relevance

3. To what extent were the objectives of the Country Programme, the design and approaches appropriate (as relating to the CP 2019 – 2022) and have remained appropriate (in the current programme cycle) to respond to beneficiaries, country, and partner/institution needs, policies, and priorities?
 - a. How would you describe the alignment of UNICEF's support to South Sudan's national development priorities?
 - b. How would you describe the appropriateness of UNICEF's mix of approaches (relating to policy advice, systems strengthening, and intensification of service delivery) for South Sudan's context?
 - c. Has there been significant changes to the Government strategies and priorities in the areas of UNICEF programming within the two programme cycles? (**Probe** separately for each cycle) How did UNICEF's advocacy efforts and /or technical support contribute to these changes?
4. In your view, to what extent has UNICEF been responsive and adaptive to changes in the country's context during the two programme cycles? (**Probe** for COVID-19 pandemic, drought, floods, other emergencies)
 - a. To what extent do think the Country Programme addresses the needs of children, adolescents and women in South Sudan, including the most vulnerable? Please give reasons for your answer.
 - b. In your opinion, is UNICEF working in the most appropriate geographical areas? Do you consider that UNICEF is working in programmes (either nationally or sector specific) that are appropriate to the country's needs? Please give reasons for your answer. Why? Why not?

- c. In what ways did the CP put different vulnerable groups into consideration in the design and implementation of interventions? *Please give some examples. (Probe for women, adolescents, persons with disabilities etc.)*
5. What are UNICEF's comparative strengths in the country – particularly in alignment with your organization, other UN agencies and development partners?
 - a. How do you assess the synergy between your organization and UNICEF in the perspective of the programme? In your view, to what extent has UNICEF's comparative strengths been harnessed to achieve synergetic effects with your organization, other UN agencies and development partners? and to position UNICEF where it can make the biggest difference?
 - b. What do you perceive as the advantages of UNICEF's comparative strengths for both upstream and downstream engagements and how are these adapted in the programme? *(Probe separately for each type of engagement)*

Coherence

6. To what extent were meaningful partnerships or coordination mechanisms established with other key actors e.g. government at national and local levels, other UN agencies, civil society, NGOs, private sector, academia, etc.?
 - a. How would you describe the strength of partnerships with the implementing Government agencies, including during the COVID pandemic? Could you please provide **examples** of specific interventions planned and implemented collaboratively or jointly and results achieved?
 - b. How would you describe the functionality of the coordination mechanisms?
 - c. What are the bottlenecks that have been identified? *(Probe specifically for the two programme cycles)*
 - d. How have the coordination mechanisms contributed towards addressing the predefined bottlenecks and contributing to the results at scale?
 - e. What do you think could be done better to improve partnerships and coordination?

Effectiveness

7. How would you describe changes due to the Country Programme Interventions at national, state, county, local and community levels from 2019-2022 and since 2023? *(Probe for specific outputs and expected outcomes in the relevant sectors - health, nutrition, climate-resilient WASH, Education, Child Protection, Social Policy - linked to specific stakeholders)*
8. How can these changes be explained - what do you think has made it possible for these changes to happen? Why? What else? *(Probe for the extent to which climate changes incidences, gender, social and behaviour change, disability inclusion, equity and human rights influenced outcomes)*
 - a. What in your view were the most effective interventions / engagement strategies? *(Probe for different strategies – e.g SBCC, evidence advocacy, system strengthening, service delivery)* What factors explain the successes? Were there any missed opportunities *(e.g. public-private sector linkages, etc.)*?
 - b. What were the least effective interventions? What factors explain this failure?

- c. What are the main constraints relating to demand or to the population level? What do you think has made it difficult for changes to happen? Why? What else?
9. How would you describe the integration of social and behavioural change and gender considerations in the design of interventions and advocacy?
 - a. What in your view is the capacity of UNICEF CO staff and implementation partners to integrate and implement gender responsive/transformational programmes? What are the strengths? What are the gaps?
 - b. What in your view is the capacity of UNICEF CO staff and implementation partners to integrate and implement SBC programmes? What are the strengths? What are the gaps?
 - c. What could be improved?
10. To what extent were the views / perspectives of women, men, children, adolescents and other rights-holders, especially the most disadvantaged and marginalized ones considered in the Country Programme?
 - a. How and to what extent have the different interests of women and men of different age groups been integrated into the design and implementation of the programme, including its governance and monitoring systems?
 - b. Could you describe the availability and usefulness of the beneficiary feedback mechanisms (including any changes made during implementation) in the two programme cycles?
11. To what extent were local partners /NGOs used for service delivery (in the current programme cycle)? How did this influence the achievement of the expected results?
12. What were/are the (positive and negative) unintended effects did the CP interventions generate at county and national levels? Please give **examples**.

Efficiency *(the roles and responsibilities detailed at the start of the interview will determine the stakeholder(s) to ask some of the questions)*

13. Are the budget and planned activities sufficient (in quantity and quality) to achieve the results or are there gaps not covered by other partners or the government? (**Probe separately for the two CP cycles**)
 - a. In your opinion how timely were the delivery of results? What worked well? What were the challenges?
14. Could you describe how the SBC interventions were designed and implemented in coordination with other programme areas, and with other partners? How did this influence the management of resources?
15. Are there cheaper alternatives that would have made it possible to achieve the same results with final beneficiaries? If yes, what are they? Have these alternatives been explored and used?

Impact

16. In your opinion, how did the Country Programmes (probe separately for the preceding CP and the current CP) contribute to positive long-term changes on children, particularly the most marginalized and vulnerable?
 - a. What positive and negative (intended and unintended) long-term changes occurred in the different programme cycles?

Sustainability

17. In your opinion, what are the things which can make the achievements described continue working even if there is no outside help? (**Probe** for *intrinsic and extrinsic elements - examples of change of mind-set; the use of local resources/ capacities and /or networks that are (or can be) effectively applied to sustain the achievements of the response. Ask for examples of how the national, county, local governments and communities have demonstrated ownership and capacity to self-support in the Country Programme*).
18. What measures have been taken in the design and implementation of the programme to ensure its sustainability and ownership by beneficiaries as well as national entities? (**Probe** for *strengthening of government capacity and monitoring*)

Connectedness

19. How would you describe UNICEF's response to humanitarian issues?
 - a. To what extent has it contributed to strengthening national preparedness and response efforts, including the humanitarian, development, and peace linkages? (**Probe** for *awareness of the concept of the humanitarian - development - peace nexus*).
 - b. What are the major external factors influencing the achievement (or not) of this result?

Coverage

20. In your view, to what extent has UNICEF managed to reach the most vulnerable populations such as children, women, and those with disabilities?
 - a. What do you consider as barriers to access to services for women? What efforts have been made to tackle them?

Lessons Learned and Suggestions for Improvement

21. What, if any, have been the promising, emerging and good practices that were identified at both the country and county levels? (Probe for main lessons drawn from the implementation of the UNICEF supported country programme).
22. What could be improved?
23. What should be the key focus of UNICEF support in the current programme cycle?

Checklist for Financial Data Collection

To ensure a robust financial analysis, data will be collected from the following sources:

Primary Financial Data Sources

- **UNICEF South Sudan Financial Reports (2019-2025):**
 - Annual expenditure and financial statements
 - Budget execution and variance reports
 - Internal and external audit reports
- **Programme Budget and Expenditure Data:**
 - Breakdown of financial allocations per sector (health, education, WASH, child protection, social policy)
 - Actual expenditures vs. planned budgets
 - Cost per beneficiary and per intervention area
- **Procurement and Supply Chain Financial Records:**
 - Unit costs of essential supplies and logistics expenses
 - Supply chain efficiency metrics and procurement lead times
- **Donor Contribution Reports:**
 - Pledged vs. actual disbursements
 - Conditionalities and restrictions in donor funding
- **Human Resources Cost Data:**
 - UNICEF staff and consultant salaries, benefits, and operational costs
 - Distribution of financial resources by programme office
- **Field Office Budgetary Allocations:**
 - Disbursement and utilization reports from regional field offices
 - Efficiency of decentralized budget execution

Secondary Data Sources

- **Government of South Sudan Budget Reports:**
 - Public health, education, and social protection budget allocations
 - National and sub-national government expenditure trends
- **Macroeconomic Indicators:**
 - Inflation rates, exchange rate fluctuations, and GDP growth from IMF, World Bank
- **Comparable UNICEF Country Programme Data:**
 - Efficiency benchmarks from UNICEF offices in similar fragile contexts
- **Audit Reports:**
 - Past financial audit findings and compliance assessments
- **Sectoral Costing Studies:**
 - Published studies on cost-effectiveness of health and education programmes in South Sudan

Annex 4: List of persons for KIIs

To be provided by UNICEF based on template in Annex 10

Annex 5: List of sites to visit

Counties for data collection

Due to logistical and fiscal considerations, two counties are proposed per region and one county is proposed from an administrative area. The plan is to **visit a total of 5 counties**. The ET purposively sampled the top seven based on the selection criteria – these were ratified by the CO. Additionally, Kapoeta East was included and prioritised by the CO.

Regions	States	Counties
Bar el Ghazel	Northern Bahr el Ghazal	Awiel East
	Warrap State	Twic
	Lakes State	
	Western Bahr el Ghazel	
Equatoria	Central Equatoria	Juba
	Eastern Equatoria	Kapoeta East
	Western Equatoria	Yambio
Greater Upper Nile	Unity State	Leer
	Jonglei	
	Upper Nile	Malakal
Ruweng Administrative area		Abiemnom

Annex 6: Bibliography

Year	autor	title
2018	UNICEF	Country programme document
2022	UNICEF	Draft country programme document
	UNICEF	UNICEF South Sudan Programme Strategy Notes 2023-2025
2023-2025	UNICEF	South Sudan Stakeholder Mapping CPE
	UNICEF	COUNTRY PROGRAMME MANAGEMENT PLAN 2023 – 2025
	Revitalized Transitional Government of National Unity	Revised National Development Strategy 2021–2024:
	UN South Sudan	United Nations Sustainable Development Cooperation Framework (UNSDCF) January 2023-31 December 2025 Republic of South Sudan
2021	UNICEF	UNICEF Strategic Plan, 2022–2025
	UNICEF	Humanitarian Situation Reports
intersectorial		
2022	Forcier Consulting	Baseline Report for the WFP-UNICEF Resilience Programme Impact Evaluation in South Sudan
2023	Forcier Consulting	Impact Evaluation for Resilience Learning in South Sudanbaseline report
2024	WFP WB DIME deprt	Impact evaluation endline report of a resilience programme jointly implemented by UNICEF and WFP
2020	Simon Wani Peter	Save to learn South Sudan Diagnostic Exercise - Provisional Report

2017	Nagui Demian	Gender Review of the Country Programme of Cooperation Sudan-UNICEF 2013-2017
2023	UNICEF	UNICEF South Sudan COST OF INACTION
2024	UNICEF	UNICEF: EVALUATION OF LOCALISATION IN HUMANITARIAN ACTION 2023
2021	James Darcy	Evaluation of the UNICEF Response to the South Sudan Humanitarian Crisis (2016-2019)
Education		
2022	Gabrielle Daoust and Sean Higgins University of Sussex	Strengthening rapid education responses in acute emergencies
2020	UNICEF	An Assessment of Menstrual Hygiene Management in Primary schools in South Sudan
2023	Lee Kironget	Mobile money feasibility study South Sudan
2019	UNICEF	education budget brief
2018	Montrose	ASSESSMENT OF UNICEF TEACHERS' INCENTIVES PROGRAMME FINAL REPORT
2019	Cambridge education	Evaluation of the back to learning initiative in South Sudan
Protection		
2021	Augustino T. Mayai	Breaking the Cycle of Violence: Rehabilitating justice and accountability mechanisms in South Sudan A baseline, perception study
2022	UNITED Nation peace building	Final Evaluation for the Peacebuilding (PBF) Project: Breaking the Cycle of Violence
2020	AMALNA SOUTH SUDAN	Child marriage drivers End of Project Report
2021	UNITED NATION PEACEBUILDING FUND (PBF)	PBF END OF PROJECT EVALUATION IN SOUTH SUDAN - "PROTECTING WOMEN AND GIRLS IN SOUTH SUDAN: ADDRESSING GENDER BASED VIOLENCE (GBV) AS CATALYST FOR PEACE PROJECT" SOUTH SUDAN
2022		South Sudan Child Protection & Gender-Based Violence Social Service Workforce Assessment FINAL REPORT
2019	Koen Sevenants	Community-based Reintegration Programme for Children Released from Armed Forces and Armed Groups in Boma State
social policy		
2019	Edward Archibald	Mapping and Analysis of Social Protection in South Sudan
2021	THOMAS GABRIELLE	South Sudan Advancing Social Protection Information Management
	UNICEF	SOUTH SUDAN CITIZENS DRAFT BUDGET 2019/2020

WASH		
	UNICEF	UNICEF-Strategy-for-WASH-2016-2030
	UNICEF	WASH in the new UNICEF Strategic Plan_Summary
2020	Richard Bowd	Sustainable WASH for Resilient Programme – UNICEF, South Sudan
2020	UNICEF	Humanitarian Staff Perception Survey South Sudan
2022	UNICEF	WASH Work plan 2023-2025
2018	UNICEF	WASH Work plan 2019-2022
health		
2019	UNICEF	FORMATIVE STUDY ON KNOWLEDGE, ATTITUDES AND PRACTICE TOWARDS EBOLA VIRUS DISEASE (EVD) IN SOUTH SUDAN
2022	SPEDP	Mid-term Evaluation of Boma Health Initiative (BHI) in South Sudan (2019-2021)
2019	NBS	FORMATIVE STUDY ON KNOWLEDGE, ATTITUDES AND PRACTICE TOWARDS EBOLA VIRUS DISEASE IN EBOLA HIGH-RISK AREAS OF SOUTH SUDAN KAP-I REPORT
2020	NBS	FORMATIVE STUDY ON KNOWLEDGE, ATTITUDES AND PRACTICE TOWARDS EBOLA VIRUS DISEASE IN EBOLA HIGH-RISK AREAS OF SOUTH SUDAN KAP-II FINAL REPORT
2021	UNICEF	Report on Health workers' survey on COVID-19 vaccine using Internet of Good Things (IoGT) in South Sudan
2019	Min Health	EVM Assessment Report
2017	Min Health	Malaria Indicator Survey (MIS) 2017
2020 - 2021	UNICEF	Community Rapid Assessment (CRA) on COVID 19 CRA round II topline findings and insight
nutrition		
2022	Nancy Jean Haselow and al	A Review of Vitamin A Supplementation in South Sudan
2021	Andre M. N. Renzaho and al	Assessing the Impact of Integrated Community-Based Management of Severe Wasting Programs in Conflict-Stricken South Sudan
2022	Daniel J. Hoffman and al	Childhood Stunting and Wasting Following Independence in South Sudan
2019	FSNMS+	FOOD SECURITY AND NUTRITION MONITORING SYSTEM (FSNMS Round 24)
2020	FSNMS+	FOOD SECURITY AND NUTRITION South Sudan (FSNMS Round 26)
2022	FSNMS+	Food Security and Nutrition Monitoring System (FSNMS+) Round 27

Annex 7: List of persons met at the inception phase – scoping interviews

Category stakeholder	Of office	Component/	Organization	Position	Name/	Contact - Email	Contact - phone
UNICEF	Snr Management		UNICEF SS CO	Representative	Hamida Ramadhani	hramadhani@unicef.org	
			UNICEF SS CO	Deputy Representative - Programmes	Obia Achieng	oachieng@unicef.org	
			UNICEF SS CO	Deputy Representative - Operations	Ismail Kamil	ikamil@unicef.org	
			UNICEF SS CO	Chief Field Operation	Verity Rushton	vrushton@unicef.org	
	Health		UNICEF SS CO	Chief Health	Joyce Mpayya	jmphaya@unicef.org	
	Nutrition		UNICEF SS CO	Chief Nutrition OIC	Mediatrice Kiburente	mkiburente@unicef.org	
South Sudan ministries			Government	Ministry of Health Nutrition	Khamisa Ayoub - Nutrition Director	khamisaayoub@yahoo.com	0926021042/0915550248
UNICEF	WASH		UNICEF SS CO	Chief WASH OIC	Michael Forson	mforson@unicef.org	0211924698900
			UNICEF SS CO	Chief of WASH	Thewodros Mulugeta	tmulugeta@unicef.org	
	Education		UNICEF SS CO	UNICEF Education Chief	Émilie Roy	eroy@unicef.org	
South Sudan ministries			Government	Ministry of Education and General Instruction Director for Early Childhood Education	Sarafino Tisa	tisaoriyesu@gmail.com	926220316
South Sudan ministries			Government	Ministry of General Education and Instruction Directorate of Teacher Development Management Systems	Manasseh Wade Kuc	johnsebit37@mogei.gov.ss	
UNICEF	Protection		UNICEF SS CO	Chief Child Protection	Brendan Ross	brross@unicef.org	

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South Sudan ministries		Government	Ministry of Justice and Constitutional Department of Women and Juvenile	Butrus Yai	butrusyai3@gmail.com	
UNICEF	Socia policy	UNICEF SS CO	Social Policy Specialist	Eliaba Damundu	edamundu@unicef.org	
National Bureau of Statistics		Government	National Bureau of Statistics Chairman NBS	Augustino Ting Mayai,	augustino.ting@gmail.com	
UNICEF	Social Behaviour & Change	UNICEF SS CO	Chief Social & Behaviour Change	Vololomanitra Belalahy	vbelalahy@unicef.org	921477375
	Planning, Monitoring & Evaluation	UNICEF SS CO	Chief PME	Charity Abachingsa	cabachingsa@unicef.org	
	Field Operations and Emergency	UNICEF SS CO	UNICEF Nutrition Cluster Coordinator	Tarig Mekkawi	tmekkawi@unicef.org	WhatsApp +251 97 528 0112
		UNICEF SS CO	UNICEF WASH Cluster Coordinator	Damian Seal	dseal@unicef.org	211 921 006 158
		UNICEF SS CO	UNICEF Education Cluster Coordinator	Christabel Musonda	chmusonda@unicef.org	+ 211 (0) 921006194
		UNICEF SS CO	UNICEF Child Protection Area of Responsibility Coordinator	Francesco Njagi Kaburu-	fkaburu@unicef.org	211 921 004 377

Annex 8: Evaluability assessment table

Colour code to assess information/ data availability

	good		medium		low
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Programme interventions/ strategies/ approaches							
Issues	Available secondary data						Possibility of collecting primary data from different sources/ methods
	health	nutrition	WASH	education	protection	Social policy	
Communication at community level :	Reports on _WFP UNICEF resilience pg 2020 – 2024 COAR KAP studies Ebola 2019, 2020	Reports on _WFP UNICEF resilience pg 2020 - 2024 COAR	Reports on _WFP UNICEF resilience pg 2020 - 2024 COAR	Reports on _WFP UNICEF resilience pg 2020 - 2024 COAR	Diverse project reports in 2020, 2021, 2022 (Child marriage, Peace building, GBV) COAR	N:a	Yes
Capacity building of community based structures	RAM Reports on _WFP UNICEF resilience pg 2020 – 2024 COAR	Reports on _WFP UNICEF resilience pg 2020 – 2024 COAR	Reports on _WFP UNICEF resilience pg 2020 – 2024 COAR	RAM Reports on _WFP UNICEF resilience pg 2020 – 2024 COAR	Diverse project reports in 2020, 2021, 2022 (Child marriage, Peace building, GBV) COAR	N:a	Yes

Programm interventions/ strategies/ approaches							
Issues	Available secondary data						Possibility of collecting primary data from different sources/ methods
	health	nutrition	WASH	education	protection	Social policy	
Construction/ rehabilitation	na	n/a	Reports on _WFP UNICEF resilience pg 2020 - 2024	Reports on _WFP UNICEF resilience pg 2020 - 2024 IRRM educ urgence South Sudan report-2021	n/a	N:a	
Support to partners for social services provision and Supplies distribution	Humanitarian reports 2023/24 COAR	RAM Humanitarian reports 2023/24 COAR	RAM Humanitarian reports 2023/24 COAR	RAM Reports on _WFP UNICEF resilience pg 2020 - 2024 Humatitarian reports 2023/24 IRRM educ urgence South Sudan report-2021 COAR	RAM Humatitarian reports 2023/24 COAR	RAM COAR	
Strengthen coordination emergency preparedness and response plans	COAR	COAR	COAR	IRRM educ urgence South Sudan report-2021 COAR	COAR	COAR	Mainly from UNICEF and partners

Programm interventions/ strategies/ approaches							
Issues	Available secondary data						Possibility of collecting primary data from different sources/ methods
	health	nutrition	WASH	education	protection	Social policy	
Public expenditure reviews and tracking	citizensbudget-unicef- MoFP- JKv5-Draft-2019 – 2020 COAR	COAR	COAR	citizensbudget-unicef- MoFP- JKv5-Draft-12019 – 2020 UNICEF-South-Sudan- 2019-Education- Budget-Brief COAR	COAR	COAR	Mainly from UNICEF and Government institutions
Advocacy / evidence generation	Survey/ studies conducted COAR	Survey/ studies conducted COAR	Survey/ studies conducted COAR	Survey/ studies conducted COAR	Survey/ studies conducted COAR	Survey/ studies conducted COAR	Mainly from UNICEF and Government institutions
Capacity building of institutions for policies and strategies development, planning, coordination, regulation, M&E, supervision	RAM COAR	RAM COAR	RAM COAR	RAM COAR	RAM COAR	RAM COAR	Mainly from UNICEF and Government institutions
programme outputs/ outcomes Monitoring	File on research and studies	File on research and studies	File on research and studies	File on research and studies	File on research and studies	File on research and studies	Not relevant

studies evaluations undertaken by UNICEF							
Programme results/ impacts							
Issues	Available secondary data						Possibility of collecting primary data from different sources/ methods
	health	nutrition	WASH	education	protection	Social policy	
Awareness or change in social norms /	KAP studies Ebola 2019, 2020 KAP study COVID 19- 2021		Humanitarian Staff Perception Survey Final Document 2020		Diverse project reports in 2020, 2021, 2022 (Child marriage, Peace building, GBV)	n/a	Qualitative data can be collected among HH but does not apply
Positive behaviours adopted including in emergencies	Reports on _WFP UNICEF resilience pg 2020 - 2024 KAP studies Ebola 2019, 2020 KAP study COVID 19- 2021	Reports on _WFP UNICEF resilience pg 2020 - 2024	Reports on _WFP UNICEF resilience pg 2020 - 2024 MHM Final Report revised July 2020	Reports on _WFP UNICEF resilience pg 2020 - 2024	Diverse project reports in 2020, 2021, 2022 (Child marriage, Peace building, GBV)	n/a	qualitative data can be collected among HH but does not apply
Improved and adequate community participation/ involvement	COAR	COAR	COAR	COAR	Diverse project reports in 2020, 2021, 2022 (Child marriage, Peace building, GBV) COAR	n/a	
Improvement in service delivery capacity including in emergencies	RAM	RAM Reports on _WFP UNICEF	Reports on _WFP UNICEF resilience pg 2020 - 2024	RAM	RAM Diverse project reports in 2020,	RAM COAR	

	Reports on _WFP UNICEF resilience pg 2020 - 2024 Final Report_BHI health Mid term Evaluation 2023 Vaccine management 2019 UNICEF Localisation Evaluation_for review_Feb 19 2024 COAR	resilience pg 2020 - 2024 UNICEF Localisation Evaluation_for review_Feb 19 2024 COAR	MHM Final Report revised July 2020 UNICEF Localisation Evaluation_for review_Feb 19 2024 COAR	Reports on _WFP UNICEF resilience pg 2020 - 2024 IRRM educ urgency South Sudan report-994021APL01MMV1 2022 UNICEF Localisation Evaluation_for review_Feb 19 2024 COAR	2021, 2022 (Child marriage, Peace building, GBV) COAR		
Increased access of social services including in emergencies	RAM UNICEF strategies note 2022 Final Report_BHI health Mid term Evaluation 2023 Food, Nutrition and Health Assessment Reports Humanitarian sit report 2024/ 2023	RAM UNICEF strategies note 2022 Humanitarian sit report 2024/ 2023 Food, Nutrition and Health Assessment Reports COAR	RAM UNICEF strategies note 2022 Humanitarian sit report 2024/ 2023 COAR	RAM UNICEF strategies note 2022 2022: Strengthening rapid education responses in acute emergencies Humanitarian sit report 2024/ 2023 COAR	RAM UNICEF strategies note 2022 Humanitarian sit report 2024/ 2023 GBV Project evaluation final report 26th November 2021 COAR	n/a	

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	COAR						
Increased budget for social sector investments	2018- 2020: UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note 2022	2018- 2020: UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note 2022	2018- 2020: UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note 2022	2018- 2020: UNICEF-South-Sudan-Situation-Analysis-2021 UNICEF-South-Sudan-2019-Education-Budget-Brief Strategy note 2022	2018- 2020: UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note	RAM Strategic note	Mainly from UNICEF and Government institutions
Design and Adoption of adequate policies/ strategies by institutions	UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note COAR	UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note COAR	UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note COAR	RAM UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note COAR	UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note COAR	RAM UNICEF-South-Sudan-Situation-Analysis-2021 Strategy note COAR	Mainly from UNICEF and Government institutions
Strengthened institutional capacity thanks to the programme	Strategic note COAR	Strategic note COAR	Strategic note COAR	RAM Strategic note COAR	RAM Strategic note COAR	RAM Strategic note COAR	Mainly from UNICEF and Government institutions
Barriers and bottlenecks to the achievement of results analysed and addressed by UNICEF	Strategic note Studies and evaluations reports	Strategic note Studies and evaluations reports	Strategic note Studies and evaluations reports	Strategic note Studies and evaluations reports	Strategic note Studies and evaluations reports	Strategic note Studies and evaluations reports	

programme outcomes							
Issues	health	nutrition	WASH	education	protection	Social policy	Possibility to collect primary data from different sources/ methods
Increased access of improved basic social services , including in emergency situations	RAM Strategic note Food, Nutrition and Health Assessment Reports Humanitarian reports 2023/24	RAM Strategic note Food, Nutrition and Health Assessment Reports Humanitarian reports 2023/24	Strategic note Humanitarian reports 2023/24	RAM Strategic note Humanitarian reports 2023/24	RAM Strategic note Humanitarian reports 2023/24	RAM Strategic note Humanitarian reports 2023/24	
Increased use of improved basic social services , including in	RAM Food, Nutrition and Health	RAM Food, Nutrition and Health	RAM	BTL Initiative Evaluation report - Final Report 2019	Peace building Final Evaluation Report - PBF Break the cycle of		Mainly from community but this does not apply

emergency situations	Assessment Reports	Assessment Reports	Reports on WFP UNICEF resilience pg 2020 - 2024	Reports on WFP UNICEF resilience pg 2020 - 2024	violence (BCV) end of Project Evaluation 2022		
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criteria	health	nutrition	WASH	education	protection	Social policy	Possibility to collect primary data from different sources/ methods
Gender sensitive data	RAM no COAR no Study reports: 2/6	RAM: only outcome COAR yes Study reports: 5/6	RAM no COAR no Study reports:1/2	RAM no COAR yes Study reports:6/8	RAM yes COAR yes Study reports:5/7	RAM no COAR no Study reports:2/2	
inclusion/ equity sensitive data	RAM no COAR no Study reports: 2/6	RAM no COAR no Study reports:2/6	RAM no COAR no Study reports:0/2	RAM no COAR no Study reports:2/8	RAM: by age COAR no Study reports:0/7	RAM no COAR no Study reports:2/2	

Annex 9 Main findings and key recommendations from select evaluations

Date	Title	Scope	Main Findings	Key Recommendations
2019	Evaluation of the back to learning initiative in South Sudan	Back to Learning (BTL) is an initiative of the Government of South Sudan, supported by the United Nations Children's Fund (UNICEF). Together, UNICEF South Sudan Country Office, its donors and government partners and their implementing agencies, sought to get out-of-school children in South Sudan - including previously under-represented girls and those with special needs - into safe, stable and inclusive learning environments which offer relevant and effective learning programmes. At the same time, the initiative sought to address children's rights in respect of violence, displacement, hunger and discrimination on the grounds of gender and disability. The objectives of the evaluation are summarised as follows: to provide UNICEF, the South Sudanese Ministry of General Education and Instruction (MoGEI) and their BTL partners with evidence-based insights into both the initiative's achievements and shortcomings regarding learning opportunities for the most vulnerable girls and boys between 3 and 18 years	- The BTL Initiative has made a critical contribution to ensuring that the South Sudanese education system has continued to operate and extend schooling access to children and youth affected by poverty, instability and conflict. - BTL made significant early impacts on learner enrolment especially for girls; on teacher and learner retention; and on school governance. - The Initiative has also been highly successful enhancing community awareness of the need for education and creating a platform for high level coordination around the agenda of getting children back-to-school. - Coverage was good in respect of social mobilisation, particularly regarding girls' enrolment and provision to IDP camp schools. It was uneven in schools in safer areas. - child safety and security had improved at most of the case study schools. However, there were still WASH and school feeding problems because of lack of on-site water, toilets and/or secure storage for food in some cases. - Improved gender equity among learners. The number of female teachers in schools remains low. - special in-school provision for both orphaned learners and learners with disabilities was observed but still on a limited and ad hoc basis.	- avoid a one-size-fits-all delivery-based model in favour of a more developmentally sound, participatory and incremental model of school development. This should include regular monitoring and on-site or in-classroom support. Otherwise, training sustainability and the maintenance of donor-funded facilities is unlikely. This should also include strong coordination between partners to avoid overlaps and duplication, and to maximise support across a whole-school approach. - Mechanisms for social accountability that involve government, non-state and community stakeholders should be developed and implemented to support these changes. Social mobilisation campaigns should move on from 'back to learning' to 'get schools working'. These could be followed by the development of a 'needs and plan driven' approach that is owned by local communities and supported by education and service provider representatives. - Government and major donor partners, supported with the necessary expertise, should work towards a more sustainable

Date	Title	Scope	Main Findings	Key Recommendations
		to identify and explore those BTL impacts which had the potential to be sustained and taken forward.	- IDP camp schools reported less conflict among learners as a result of peacebuilding and life skills training. - The initiative lacked a programmatic and developmental theory of change - More attention could have been given at the school level to ongoing monitoring support and follow-up, and transitional support beyond initial interventions in the schools. - need for improvement in terms of capacity: school teams in skills training; MoGEI to play its mandated role in coordination of policy, planning, implementation and reporting	financing plan for education in South Sudan. Such a plan must address adequate remuneration at all levels of the system so that employment in education is not regarded as a stop-gap job. It should consider a strategy for developing and maintaining school infrastructure and building capacity at all levels. To do so, a sustainable partnership between the state, school communities and public and private donors will be essential. In the meantime, all incentive providers should adopt a standardised performance-based policy for the short to medium-term to improve stability in the education sector. It would also be useful to identify and strengthen those schools, counties and states which are functioning best in order to develop examples of best practice. These examples could serve as catalysts for the envisaged systems and also provide sites for the training of teachers, school leaders and education officials.
2022	Mid-term Evaluation of Boma Health Initiative (BHI) in South Sudan (2019-2021)	the Boma Health Initiative (BHI) was launched in 2017, as a government strategy for enhancing and strengthening the health structure, especially at the community level and hard to access areas. The Ministry of Health along with other partners organizations having been working together with the goal of providing	Overall, to conclude, the BHI implementation is going in the right direction, and is noted to be effective for the target beneficiaries. The programme has created its impact by reaching out to the vulnerable population in hard-to-reach areas, where health facilities are inaccessible. The programme is aligned to the country context, development needs and government's strategies to strengthen community health and	- Synergize the efforts of various stakeholders and strengthen multi-sectoral coordination to ensure greater harmonization in BHI implementation - Strengthen capacities in data reporting, monitoring and analysis - Enhance gender transformative approaches including inclusion of female BHWs

Date	Title	Scope	Main Findings	Key Recommendations
		accessible and free health packages to the communities Insights from this mid-term evaluation would guide MoH and its partners to understand the current health awareness levels of individuals and community members across the country, bring to light factors that have influenced the achievement of the programme as well as highlight the gaps and bottlenecks in the implementation of activities/ health services provided which would eventually help in the formation of a strong, affordable and sustainable national integrated community health worker system.	accelerate towards universal health coverage. Mechanisms are in place to ensure efficiencies with greater focus on institutional strengthening for long-term sustainability. However, there are areas that require further attention and improvement to ensure greater and long-term impact, which are: - low level of education among the BHWs: about 62 per cent find it challenging to understand the trainings because it takes some time for them to grasp, which immediately affects their work - major challenge in handling family registers that are known to be bulky and need to be carried around in harsh weather condition (extreme heat / floods). - frequent stock-outs of essential medicines and supplies	- Develop a formal transition strategy for long-term sustainability - Streamlining of BHWs and supervisors under the Ministry of Health - Develop theory of change - Ensure comprehensive mapping of the BHWs - Streamlining the supply chain and logistics
2024	Impact Evaluation of Resilience Interventions on Food Security and Livelihoods in South Sudan	the World Food Programme (WFP) and the United Nations Children's Fund (UNICEF) have promoted an integrated approach to resilience building through a joint programme in South Sudan. The joint resilience programme in South Sudan consists of a range of activities, including access to water, sanitation, and hygiene (WASH), nutrition and health interventions, cash or food transfers for community asset creation, education programming, skills development, and agricultural production.	- households mostly improved their ability to consume sufficient food and avoid negative events like skipping meals, but the impact evaluation observes less overall impact on improving overall dietary diversity. - Livelihoods improvements are significant and happen through various channels rather than a single income source - Food Assistance for Assets (FFA) and Unconditional Cash Transfers (UCT) had a similar contribution to increased food security, but FFA had a stronger impact on agricultural production, while UCT was more effective at increasing asset ownership and wage labour outside of the household.	- Additional efforts to help households smooth their food security into the lean season may help improve overall resilience even further. For example, adjustments to the timing of transfers or interventions on savings and credit groups - Balancing and prioritizing other assets that benefit the most vulnerable (female headed households, landless households) and that also support non-agricultural livelihood strategies. - Addressing consequences of higher student-to-teacher ratios, for example, by increasing the

Date	Title	Scope	Main Findings	Key Recommendations
		This evaluation examines the impacts of the UNICEF-WFP joint resilience programme on household resilience. Taking resilience as a household's ability to adapt to their environments, absorb shocks and stressors, and transform their capacities, measuring food security and well-being dynamics over time.	The UNICEF education package had a sizeable and statistically significant impact on retention rates among eligible children	- focus on children at risk of dropping out. - Addressing the negative correlation between nutrition and health outcomes and distance to facilities - increase the number and capacity of teachers in schools near joint resilience programmes.
2022	A Review of Vitamin A Supplementation in South Sudan	Aim: To identify vitamin A supplementation (VAS) trends in South Sudan and provide insights to refocus VAS programming vis a vis polio eradication campaigns recently phased out while access to health care, land, food, and markets remain challenging	- Undernutrition and high under-5 mortality persist in South Sudan, with very low dietary intake of vitamin A and a high rate of infection considered to be the primary causes of vitamin A deficiency among young children. - South Sudan's vitamin A supplementation (VAS) program has demonstrated success through campaign-style delivery with steady improvement from 2010 to the present - Continued political unrest, environmental factors, and health system infrastructure deficiencies contribute to low and uneven VAS coverage rates at different times and in different areas.	- Program managers should consider developing a flexible, multifaceted delivery mechanism to ensure vitamin A supplementation and deworming (VASD) reach all children everywhere every 6 months. - To support program managers in decision making, researchers should consider analyzing and using the Food Security and Nutrition Monitoring System data more fully to better target gaps in VASD coverage. - Policy makers should consider how integrating VASD into community-based programming could strengthen the health system by extending it more fully into boma (villages) and take steps to build VASD into planning and budget cycles at all levels.
2019	EVALUATION Community-based Reintegration Programme for Children Released from Armed Forces	UNICEF provided holistic services to released children and their families ¹ in order to facilitate their safe and effective reintegration and prevent (re-)recruitment.	The programme faced the enormous challenge of reintegrating CAAFAG into low-income communities, in which minimal basic services existed and violence was part of daily life. Reintegration consequently required a holistic and integrated approach; livelihoods had to be established as well	Focus more on community engagement to promote local ownership and the design of more responsive programming. The one plus one principle adopted in this initiative provides a foundation for this;

Date	Title	Scope	Main Findings	Key Recommendations
	and Armed Groups in Boma State (former Greater Pibor Administrative Area) 2015–2018		as access to basic services. Additionally, mental health and psychosocial support (MHPSS) and peacebuilding activities would have to be carried out and case management mechanisms had to be instituted. - the programme met the needs of CAAFAG, albeit with some limitations. CAAFAG living in remote settlements and those with mental health problems have not been sufficiently reached. - lack of girl CAAFAG being identified⁴ and provided with accessible support services - The impact of the project is high: CAAFAG boys wish to delay marriage and marry educated women in future; the peace building activities and MHPSS have a very strong impact on community building - the advantages that former CAAFAG and OVC obtain compared to the general population, can be a source of conflict and tension for other community members - The sustainability of the impact of the programme largely depends on access to secondary schools, which are currently minimally available	- Increase ongoing gender sensitive capacity building of IPs, rather than one-off trainings; - Utilize a participatory approach to development planning, including with the Government of Pibor, and through community-based development planning, including school development planning, with equal participation of women, men, girls and boys; - Enact meaningful dialogues with children and increase the participation of girls and boys, recognizing and overcoming barriers to girls' participation; - Advocate with Government to prevent the re-recruitment of CAAFAG who have reached the age of 18. Future programme planning should involve gender analysis and active identification and outreach to girl CAAFAG, as well as gender sensitive programming and data generation to address their varying needs; - Collaborate with WASH, MHPSS and child protection sectors to design a multisectoral response. Create an MHPSS support system in line with the IASC guidelines for Mental Health and Psychosocial Support in Emergencies, which is more inclusive of girls and those residing in rural areas; - Take a leadership role in addressing child and adolescent development issues, to address the interruptions for CAAFAG to

Date	Title	Scope	Main Findings	Key Recommendations
				their child/adolescent development, particularly emotional development; Increase access to quality secondary education and improve gender equity (e.g. adequate WASH facilities for girls, gender sensitive learning materials, addressing the burden of domestic chores which prevents completion of schooling, increase recruitment of female teachers, etc.);
2022	Final Evaluation for the Peacebuilding (PBF) Project: Breaking the Cycle of Violence (BCV)	The project was designed to enhance the rule of law and supporting the juvenile justice system with a focus on accountability, human rights and reconciliation to respond to this evolving context and challenges in the targeted locations. The specific objectives of the evaluation included: assessing the relevance and strategic positioning of the project to South Sudan's progressive transformation towards durable peace and sustainable development needs mainly with a focus on children, youth and women and private sector development	the project achieved its purpose - confidence in peace and security in the target communities - victims/survivors engaged in truth telling and reconciliation process sessions - children and youth accessing case management services - children and youth accessing quality justice services consistent with the interest of the child and youth - children and youth received legal aid and representation support - children and youth accessing alternatives including diversion - Police Community Relations Committees (PCRCs) established and operational - judges, prosecutors, police and prisons officers and social workers demonstrate increased knowledge on juvenile justice and inmate care	- enhance the operation of the Mobile Courts to enhance access to justice by special groups especially hard to reach areas - Operationalize the Justice for Children Strategic Framework - Strengthening Community Structures through continued training and capacity building - Establishment of Reformatory Centres and Juvenile Courts and Develop a reformatory curriculum in line with the international standards - Strengthen the Juvenile Justice & Management Information Systems (MIS) to ensure provision of appropriate and timely case management
2022	South Sudan Child Protection & Gender-Based Violence Social Service Workforce Assessment	A well-planned, skilled and supported social service workforce (SSW) is essential to protecting vulnerable groups, especially children and women. Without a strong and resourced social service workforce at the	capacity-building and training of both government institutions and non-governmental workers resulted in a piecemeal approach precluding holistic understanding of key issues and solutions.	Develop a shared professional cadre categorization, including related competency framework and minimum qualification requirements per professional cadre, clearly delineating divisions of roles and responsibilities, as

Date	Title	Scope	Main Findings	Key Recommendations
		core of the protection and social welfare system, the critically necessary services cannot reach vulnerable children, women, families and other vulnerable groups, regardless of the quality of the other system components. The assessment' scope of work includes both the CP and GBV areas of responsibility, both government and non-government workers as well as allied institutions (i.e. institutions who do not have a lead mandate in CP or GBV but provide essential complementary services in these areas).	- there is no clear, formal definition of the social service workforce and its different constituents parts - there is no specific regulatory framework for the social service workforce in general, nor for social work specifically (or for CP or GBV workers in particular). There is no explicit institutional and professional framework either, categorizing the different professional cadres (job titles or categories) and detailing each cadre's respective competency framework and required qualifications. - there is no overall explicitly defined social service delivery model - there is no defined minimum ratio of workers to population to be made available - lack of financial and material resources - Very wide mandate with a lack of clear strategic vision on how to fulfill it.	well as specificities per type of actor and/or per "sub-sector". - Develop a detailed strategic plan for strengthening the social service workforce based on clear institutional and professional frameworks - Develop and integrate within the overall Strategic Plan a detailed MGCSW-specific capacity-building plan - Strengthen MGCSW's capacity for effective sector-lead coordination - develop a detailed capacity-building strategic plan - Support the development and/ or review of MGCSW's code of ethics, systematizing its signature by workers as well as training on that aspect upon recruitment

Annex 10 Programme stakeholders

Main stakeholders/ partners	Role/ interest in the CPD implementation
Institutions	
Ministry of Health – Primary Health Care	Basic PHC services, and polio eradication; Adolescence and Early Childhood Development (ECD); Immunisation; Maternal, and New-born Care; child health; Health system strengthening and capacity building
Ministry of Health - Preventive Health Services	Child health; COVID-19 emergency response; Prevention of mother to child transmission (PMTCT) of HIV
Ministry of Health – Community Health	Community-led interventions
Ministry of Health – National Malaria Programme	Malaria preventive and curative activities; Provision of long-lasting insecticide treated nets at household level and through outreaches and Mass campaigns.
Ministry of Health – International Health and Coordination	
Ministry of Health – Policy, Planning, Budgeting, Monitoring and Evaluation	Health sector funding; Human resources for health (HRH); Strengthen the evidence base, surveys, and monitoring systems to ensure data integrity and strong tracking of health indicators on women and children.
Ministry of Health – Reproductive Health	Maternal, and New-born Care
Ministry of Health - Nutrition	Reduce the risk and burden of wasting, stunting and micronutrient deficiencies; improving adolescent and maternal nutrition, reinforcing optimal breastfeeding practices, promoting adequate complementary feeding, contributing to improve nutrition of school-age children; Social behavior change on uptake of health and nutrition services.
Ministry of Health – Pharmaceutical and Medical Supply	Procurement and supply chain management and logistics for essential commodities and drugs; availability of essential commodities
Ministry of Health – Prevention and Disaster Management	Emergency preparedness and response including COVID-19 response.
Ministry of Health – Expanded Programme on Immunisation (EPI)	Immunisation; polio eradication;
South Sudan National Bureau of Standards	Strengthen the food system's contribution to nutrition sector
Ministry of Agriculture and Food Security	Nutrition and Food security; Make food system equipped to deliver adequate nutrition to young children.
University of Juba - Agricultural Science	Nutrition
South Sudan Urban Water corporation	strengthening institutional capacity and an enabling framework to deliver, coordinate, and monitor programmes for improving and sustaining access to safely managed WASH services in urban and rural areas
Ministry of water Resources and Irrigation	
Ministry of Housing land and Rural utilities, directorate of public utilities WBeG	

Ministry of Education and General Instruction - DG for Basic and Secondary Education	resilient education system to mitigate against risks and ensuring safe, quality learning migrant children School feeding
Ministry of Higher Education, Science and Technology	Nutrition
Ministry of Education and General Instruction - Director for Early Childhood Education	Early Childhood Education
Ministry of Education and General Instruction - Under-Secretary of Education	resilient education system to mitigate against risks and ensuring safe, quality learning migrant children
Ministry of Education and General Instruction - Basic and Secondary Education	resilient education system to mitigate against risks and ensuring safe, quality learning migrant children
Ministry of Education and General Instruction - Gender, Equity and Inclusion	road map to increase the number of female teachers who can be deployed to hard-to-reach areas.
Ministry of General Education and Instruction - Directorate of Teacher Development Management Systems	Teacher training
Ministry of General Education and Instruction - Directorate of Inspection	Quality of schools/ teaching
Ministry of General Education and Instruction - National Curriculum Development Center	Teacher training
Ministry of Gender, Child and Social Welfare - Office of the Undersecretary	strengthening the national protection system legal, policy and regulatory frameworks, data collection and coordination mechanisms institutional strengthening to provide multi-sectoral services for GBV survivors build the capacity of the social service workforce
MGCSW - Directorate of Gender and Child Welfare	
Ministry of Justice and Constitutional - Department of Women and Juvenile	
National Bureau of Statistics	monitor and analyse child poverty and vulnerability monitoring towards national development targets and the Sustainable Development Goals
Ministry of Finance and Planning (MoFP)	analyses of social sector investments for children strengthen public financial management capacities
Ministry of Gender, Child and Social Welfare (MoGCSW)	support to monitor and analyse child poverty and vulnerability design social protection mechanisms
Ministry of Humanitarian Affairs and Disaster Management	<i>Emergency preparedness and humanitarian actions</i> <i>humanitarian-development - peace linkages</i> <i>use and analysis of data for humanitarian results, provide and archive information products for evidence based decision making</i>
International organisations	
World Food Programme	School feeding
OCHA	<i>Emergency preparedness and humanitarian actions</i> <i>humanitarian-development - peace linkages</i> <i>use and analysis of data for humanitarian</i>

	<i>results, provide and archive information products for evidence based decision making</i>
WASH Cluster	<i>Giving access to children and their families affected by humanitarian crises to safe water, good sanitation and improved hygiene services</i>
WHO	
IOM	
WHO	WASH, Reproductive Health; Immunisation; development of nutrition policy and strategy and updating the wasting prevention and treatment protocols
UNFPA	Reproductive Health; maternal malnutrition
Food and Agriculture Organization (FAO)	Food security and nutrition; maternal malnutrition
UNAIDS	Health – Adolescent maternal and new born health
PEPFAR	
Global Fund	
Non-governmental organisation	
World vision international	Giving acces to children and their families affected by humanitarian crises to safely managed WASH services, health and nutrition services
Concern worldwide	
Healthcare foundation (HFO)	
Norwegian refugees Council (NRC)	
Malteser International	Giving access to children and their families living in rural communities to resilient WASH infrastructures and services and preparing them to withstand disasters and climate change impacts.
LM International	
Mentor Initiative	
Centre for emergency and development (CEDS)	
Light for the World Int'l	Early Childhood Education
Help a child South Sudan	Early Childhood Education non-formal or alternative learning?
Justice Foundation Organisation	Early Childhood Education
BRAC International South Sudan	Early Childhood Education
Windle Trust International	Early Childhood Education Community engagement non-formal or alternative learning?
Universal Network for Knowledge and Empowerment Agency	Community engagement non-formal or alternative learning
Centre for Emergency and Development Support	resilient education system to mitigate against risks and ensuring safe, quality learning migrant children Community engagement <i>non-formal or alternative learning</i>
Adventist Development Relief Agency (ADRA)	non-formal or alternative learning Community engagement non-formal or alternative learning?
ACROSS South Sudan	nutrition non-formal or alternative learning Community engagement non-formal or alternative learning?

Yei Teacher Training College	Teachers trainings
Malaria Consortium	Malaria preventive and curative activities
African Field Epidemiology Network (AFENET)	Immunisation
Action against Hunger (ACF)	Health and Nutrition
Andre Foods – South Sudan	Nutrition
International Rescue Committee (IRC)	Conflict, climate shocks and life-threatening food insecurity.
Catholic Medical Mission Board (CMMB)	Nutrition
Samaritan Purse	Nutrition
Health Link	Nutrition
Save the Children (SCI)	Nutrition
International Medical Corps (IMC)	Nutrition
Plan International	Nutrition
GOAL	Health and Nutrition
Tearfund	Health and Nutrition
Christian Mission for Development (CMD)	Nutrition
Medair	Health and Nutrition
Care International	Health & Nutrition
AVSI	Education, nutrition, and food security
World relief	Nutrition
Johaniter international assistance	Nutrition
AMREF Health Africa	Nutrition
Impact Health Organization	Nutrition
ForArika	Nutrition
Christian Mission Aid (CMA)	Nutrition

Alight South Sudan	Nutrition
Universal Intervention and Development Organization (UNIDOR)	Nutrition
Private sector service providers	
Kagga and Partners	Giving acces to children and their families living in urban communities to safely managed WASH services which are climate resilient, affordable, and sustainable
GS construction Co. Ltd	
Newtech construction Group	
Tekvision Eng. South Sudan	
Universal Eng. & contractors LTD	
South Sudan Urban Water corporation	
donors	
United Kingdom (FCDO)	Programme financing
Germany /Help German	Programme financing
World Bank	Programme financing
United States (USAID BHA, World Bank)	Programme financing
European Union	Programme financing
Crown Agents	Programme financing
Community base structures	
School Management Committees (SMCs)	Capacity building monitor participation of learners and professional conduct of teachers
Parents and Teacher Associations(PTAs)	
Water management structures	Giving access to children and their families living in rural communities to resilient WASH infrastructures and services and preparing them to withstand disasters and climate change impacts.
Communities Based Organizations for water supply	to represent consumers in urban areas

School Health committees and WASH infrastructure management committees	providing WASH services in schools
WASH committees	O&M of WASH services in rural communities
Integrated community case management (ICCM) network	Child protection
Community Nutrition Volunteers (CNV)	Nutrition
Mother To-Mother Support Groups	Improve nutrition practices

Oversee Advising Group

Think Smart