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Summative Evaluation of the ECHO-Supported Humanitarian Water, Sanitation & Hygiene (WASH) Programme in Afghanistan (2022-2023)

ECHO-supported WASH Programme Implementation: 2022- 2023

Evaluation Commissioned By: UNICEF Afghanistan Country Office

Submitted By: The Konterra Group

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KONTERRA EVALUATION

unicef for every child

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List of Acronyms

Acronym	Complete Description
AAP	Accountability to affected population
ACO	Afghanistan Country Office
AMIS	Afghanistan Management Information System
ATR	Assess, Transform, Reach Consulting
AWD	Acute Watery Diarrhoea
Awaaz	Awaaz Afghanistan, a humanitarian helpline
BHA	(USAID) Bureau for Humanitarian Assistance
BoQ	Bill of Quantities
CBO	Community Based Organization
CCRI	Children's Climate Risk Index
CDC	Community Development Councils
CM	Crisis modifier
CO	Country Office
COAR	Citizen Organization for Advocacy and Resilience
CPB	Cost per beneficiary
CPD	Country Programme Document
CPSH	Core Pipeline Supply Hub
CR	Central Region
CSO	Civil Society Organizations
DAC	Development Assistance Committee
DACAAR	Danish Committee for Aid to Afghan Refugees
DfA	De facto authorities (current Government of Afghanistan)
DRR	Disaster Risk Reduction
DRRD	District Rural Rehabilitation and Development office
EA	Enumeration Area
ECHO	European Civil Protection and Humanitarian Aid Operations
EM	Evaluation Matrix
EQs	Evaluation Questions
ER	East Region
ERG	Evaluation Reference Group
ESS	Environmental and social safeguards
ET	Evaluation team
EU	European Union
EUR	Euro
FAO	Food and Agriculture Organization of the United Nations
FCM	Feedback and Complaints Mechanism
FGDs	Focus Group Discussions
FO	Field Office
GBV	Gender-based violence
GEROS	Global Evaluation Reports Oversight System

Acronym	Complete Description
GLAAS	UN-Water Global Analysis and Assessment of Sanitation and Drinking Water
HAC	Humanitarian Action for Children
HAG	Humanitarian Access Group
HCF	Healthcare facility
HDI	Human Development Index
HH	Household
HHS	Household Survey
HNO	Humanitarian Needs Overview
HNRP	Humanitarian Response Plan
HP	Hygiene Promotion
HQ	Headquarters
HRBA	Human Rights-based Approach
HRDA	Human Resources Development Agency
HRP	Humanitarian Response Plan
IDP	Internally displaced population
IEC	Information, Education and Communication
IMC	International Medical Corps
INGOs	International Non-Governmental Organizations
IP	implementing partner
IR	Inception Report
IRB	institutional review board
JMP	Joint Monitoring Programme
KAP	Knowledge, attitudes, and practices
KI	Key Informant
KII	Key Informant Interview
LR	Literature review
L3	Level 3 emergency
M&E	Monitoring and evaluation
MDG	Millennium Development Goal
MHM	Menstrual Hygiene Management
MHNT	Mobile Health and Nutrition Team
MICS	Multiple Indicator Cluster Survey
MEW	Ministry of Energy and Water
MoE	Ministry of Education
MoPH	Ministry of Public Health
MoU	Memorandum of Understanding
MRRD	Ministry of Rural Rehabilitation and Development
NFI	Non-Food Item
NGO	Non-Governmental Organizations
NOC	No Objection Certificate
O&M	Operation and Maintenance

Acronym	Complete Description
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OCHR	Organization for Coordination of Humanitarian Relief
OECD	Organization for Economic Co-operation and Development
ORD	Organization for Relief Development (NGO worked as TPM)
PCA	Partnership Cooperation Agreement
PD	Project Document
PHC	Primary health care
PHD	Provincial health director
PMU	Programme Management Unit
PRRD	Provincial Rural Rehabilitation Department
PSEA	Prevention of Sexual Exploitation and Abuse
PSU	Primary Sampling Unit
PwDs	Persons with Disabilities
QA	Quality Assurance
QCA	Qualitative content analysis
RMU	Resource Mobilization Unit
ROSA	(UNICEF) Regional Office for South Asia
SBC	Social and Behaviour Change
SBCC	Social and Behaviour Change Communication
SDG	Sustainable Development Goals 2030
SIDA	Swedish International Development Cooperation Agency
SOP	Standard operating procedure
SPEAR	Social Policy, Evaluation, Analytics, and Research
SPHERE	Standards in Humanitarian Response
SPSS	Statistical Packages for Social Sciences
SR	South Region
TL	Team Lead
ToC	Theory of Change
ToR	Terms of Reference
TPM	Third-party monitor
UN	United Nations
UNEG	United Nations Evaluation Group
USAID	United States Agency for International Development
USD	United States Dollar
WASH	Water, sanitation and hygiene
WHO	World Health Organization
WoA	Whole of Afghanistan
WMC	Water Management Committee
WSD	WASH Supplies Distribution
WSS	Water supply services

Glossary of Key Terms Used in Report

All the definitions or key concepts shown below have been reproduced from Sustainable Development Goal (SDG) 6 monitoring related sources such as the World Health Organization (WHO)/United Nations Children's Fund (UNICEF) Joint Monitoring Programme (JMP),[1] United Nations (UN) Water[2] and others.[3]

Term	Description
Access to water	Implies sufficient water to meet domestic needs is reliably available close to home.
Adequate	Implies a system that hygienically separates excreta from human contact, as well as safe reuse/treatment of excreta in situ, or safe transport and treatment off site.
Affordable	Payment for services does not present a barrier to access to or prevent people from meeting basic human needs.
Drinking water	Water used for drinking, cooking, food preparation and personal hygiene.
Drinking water ladder service levels	**Safely managed service:** A basic (improved) drinking water source, which is located on premises, available when needed and free of faecal and priority chemical contamination (in MDGs – improved drinking water source). **Basic service:** An improved water point provided collection time is no more than 30 minutes for a roundtrip, including queuing. **Limited Service:** Drinking water from unprotected dug wells, unprotected springs, carts with small tank/drum, tanker trucks or basic sources with a total collection time of more than 30 minutes for a roundtrip, including queuing. **No Service:** Water coming from surface water: river, dam, lake, pond, stream, canal, or irrigation channel.
Open defecation	Excreta of adults or children are deposited (directly or after being covered by a layer of earth) in the bush, a field, a beach or any other open area; discharged directly into a drainage channel, river, sea or any other water body; or are wrapped in temporary material and discarded.
Equitable	Implies progressive reduction and elimination of inequalities among population subgroups.
For all	Suitable for use by men, women, girls, and boys of all ages, including people with disabilities.
Handwashing facilities	Handwashing facility is a device to contain, transport or regulate the flow of water to facilitate handwashing.
Hygiene	The conditions and practices that help maintain health and prevent spread of disease, including handwashing, menstrual hygiene management and food hygiene.
Hygiene ladder – service levels	**Basic:** Handwashing facility with soap and water in the household. **Unimproved:** Handwashing facility without soap and water. **No facility**: No handwashing facility.
Sanitation and Water for All (SWA)	**Sanitation and Water for All (SWA)** is a global partnership of country governments, private sector and civil society organisations, external support agencies, research and learning institutions and other development partners (DPs) working together to catalyse political leadership and action, improve accountability and use scarce resources more effectively. Partners work towards a common vision of sanitation, hygiene, and water for all, always and everywhere.
Safely managed drinking water services	Definition includes four criteria: • An improved water source (using the MDG indicator definition of "improved": for instance, piped water into dwellings, yards or plots; public taps or

[1] https://washdata.org/monitoring (Accessed Jan 2023)
[2] https://www.unwater.org/our-work/integrated-monitoring-initiative-sdg-6/indicator-611-proportion-population-using-safely (Accessed Jan 2023)
[3] https://www.pseau.org/outils/ouvrages/ps_eau_wash_services_sdgs_2016_october2.pdf (Accessed Jan 2023)

Term	Description
	standpipes; boreholes or tube wells; protected dug wells; protected springs and rainwater) • Located on premises. • Available when needed, • Free of faecal and chemical contamination.
Safely managed sanitation services, including a hand-washing facility with soap and water	Definition includes three criteria: • An improved sanitation facility (using the MDG definition of "improved", namely flush or pour flush toilets connected to sewerage systems, septic tanks or pit latrines, improved pit latrines (pit latrines with a slab or ventilated pit latrines) and composting toilets) • Not shared with other households. • Excreta is safely disposed of in situ or treated off site, • Includes a handwashing facility, i.e., a device to contain, transport or regulate the flow of water to facilitate handwashing.
Sanitation	The provision of facilities and services for safe management and disposal of human urine and faces.
Sanitation ladder service levels	**Safely managed service:** An improved (basic) sanitation facility that is not shared with other households and where excreta are safely disposed in situ or treated off site, and which includes handwashing facilities. **Basic service:** Flush/pour flush to piped sewer system, septic tank or pit latrine, ventilated improved pit latrine, composting toilet or pit latrine with slab not shared with other households. **Shared facilities:** Sanitation facilities of an otherwise acceptable type shared between two or more households. **Unimproved facilities;** Pit latrine without a slab or platform, hanging latrines and bucket latrines. **Open defecation: Practice of defecating in the open** fields, forest, bushes, open bodies of water, beaches or other open spaces or disposed of with solid waste.
SDG Goal 6	Ensure availability and sustainable management of water and sanitation for all.
SDG Target 6.1	**6.1:** By 2030, achieve universal and equitable access to safe and affordable drinking water for all **6.1.1:** Proportion of population using safely managed drinking water services.
SDGs Target 6.2	**6.2:** By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations **6.2.1:** Proportion of population using safely managed sanitation services, including a hand-washing facility with soap and water
WASH	**Water, Sanitation and Hygiene (WASH).** All works related to water, sanitation, and hygiene, which include providing safe and affordable access to a clean water supply and waste disposal methods. This involves the provision of services and training in how to manage them. Advocacy is also a part of WASH activity to influence policymakers to ensure services with equity.

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Executive Summary

1. The summative evaluation of the United Nations Children's Fund (UNICEF) Humanitarian Water, Sanitation, and Hygiene (WASH) programme supported by the European Civil Protection and Humanitarian Aid Operations (ECHO) was commissioned by the UNICEF Afghanistan Country Office (ACO). Total (co-funding) budget for the WASH component is €22.84 million.

2. Consistent conflict in Afghanistan since 1978 has resulted in compromised living conditions which have further deteriorated since the political transition in August 2021.[4] Population growth, internal displacement, climate change and natural disasters have exacerbated the situation further.[5] A national drought was officially declared in June 2021, the worst in more than three decades.[6] Afghanistan is not on track to achieve SDG targets 6.1 and 6.2.[7] Only 69% of people have access to basic drinking water. Access to sanitation and hygiene is also limited, with 20% of Afghans practicing open defecation and nearly half (42%) lacking access to basic handwashing facilities.[8]

3. The WASH component of the ECHO Grant in Afghanistan aimed to contribute to the reduction of communicable disease-related mortality and morbidity through access to equitable, climate resilient, emergency lifesaving and sustainable WASH services and supplies in rural, peri-urban and urban settings. Activities were delivered under two strategic approaches: 1) rapid lifesaving WASH response and 2) resilient and durable WASH services. Activities can be broadly grouped into four categories: water supply services (WSS), sanitation, hygiene promotion, and WASH in institutions (schools and health care facilities).

4. **Evaluation purpose, scope and criteria:** The evaluation was guided by the Organisation for Economic Co-operation and Development's Development Assistance Committee (OECD-DAC) criteria of relevance, coherence, effectiveness, efficiency and sustainability as well as non-DAC criteria of coverage, coordination and the integration of cross-cutting themes (equity, disability, gender equality, human rights, and climate and environmental and social safeguards (ESS)). It assessed the ECHO-supported WASH Programme's overall results, strategies, and challenges to guide WASH programme planning and decision-making. It also fostered organizational learning by identifying strengths, gaps, and providing co-formulated recommendations to improve future WASH programming in emergency and development contexts for vulnerable populations in Afghanistan. The evaluation covers all Programme interventions between January 2022 and December 2023.

5. **Evaluation Methodology**: The evaluation employed a mixed-methods approach through key informant interviews (KIIs), focus group discussions (FGDs), a household survey, observations and document reviews. Data collection involved over 2,000 community-level stakeholders as well as KIIs with 76 national and sub-national stakeholders from UNICEF, the de-facto authorities (DfA) and implementing partners (IPs). The evaluation design was approved by the institutional review board and adhered to UNICEF and UNEG evaluation norms and standards.

Key Evaluation Findings

6. **Relevance:** Programme design was 'highly relevant', aligned with the urgent humanitarian needs of the population, including vulnerable groups. The dual approach of combining emergency response activities with more durable solutions effectively addressed both immediate and long-term WASH needs. The programme demonstrated flexibility in adapting its outreach strategies to engage women and maintain inclusivity, often relying on community-based approaches and localized solutions. However, challenges were identified in accessing women household members in multiple locations, and fully integrating the needs of vulnerable populations into programme planning and outreach, particularly given the DfA ban on Afghan women working with NGOs that came into effect in December 2022 and gaps in community level data sharing and information sources. Community-

[4] SDG Dashboard and Trends. https://dashboards.sdgindex.org/profiles/afghanistan
[5] IOM. National Displacement Profile Afghanistan.
[6] Afghanistan Humanitarian Needs and Response Plan 2024.
[7] Target 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all; Target 6.2: By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.
[8] UNICEF. (2023). UNICEF Afghanistan Multiple Indicator Cluster Survey (MICS) 2022-2023. Available at: https://www.unicef.org/afghanistan/reports/afghanistan-multiple-indicator-cluster-survey-mics-2022-2023

level data collection and localized assessments ensured that resources were directed where needed, but resource constraints prevented interventions from consistently addressing all WASH emergency needs. Adaptations to programme implementation, such as integrating health and nutrition messaging to engage women, helped overcome some barriers.

7. **Coherence:** WASH interventions were coherent with other sectors at the provincial level. Integration at the community level faced numerous challenges including different prioritization between ministries and funding constraints. However, interviewees highlighted particularly successful synergies with health and nutrition sectors, where WASH messaging was integrated into their outreach. Efforts were made to align activities with Education activities with mixed results. External coherence was strengthened by coordination with the WASH Cluster, the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), and the DfA, ensuring standards were met and duplication reduced. Key informants stated major benefits of internal and external synergies as a potential contribution of programme results in tackling waterborne diseases and malnutrition and supporting the gender and protection outcomes particularly during active emergencies. Complementary funding facilitated reaching the target scope and scale of the programme's reach.

8. **Effectiveness:** Overall, the programme is assessed as 'mostly effective,' with cumulative achievements reaching 170% in terms of beneficiaries reached, benefiting over 1.1 million people, including through 52 schools and 27 healthcare facilities with various WASH services. However, component-wise achievements varied with underachievement of sanitation, hygiene promotion and WASH in HCFs. The overall achievement was largely due to the 274% overachievement of the water supply component. The Programme also strengthened groundwater and surface water monitoring to maintain 100 surface water and 100 groundwater monitoring stations, enabling tracking of groundwater conditions and water chlorination. These efforts contributed to knowledge management, with three analytical reports produced, an emerging priority for the ACO. Additionally, a strategic dialogue initiated by UNICEF, though covered under this programme (supported by complementary resources), emphasized the need to develop and strengthen Disaster Risk Reduction (DRR) infrastructure in the country.

9. The Programme contributed to improving water access by constructing and rehabilitating water systems, including solar-operated and gravity-fed systems with household connections. It ensured communities had more reliable access to clean, safe drinking water, essential for reducing health risks, particularly in conflict-affected and disaster-prone areas. This shift reduced reliance on unimproved sources like groundwater and water trucking, moving communities towards sustainable water solutions. Stakeholders appreciated the ECHO grant as a timely, high-impact intervention during Afghanistan's regime transition, when increased access combined with the withdrawal of development funding revealed a sharp increase in people of need of WASH services. Integration with health and nutrition sectors contributed to addressing root causes like diarrhoea, polio, and malnutrition, though integration with education was less visible. ECHO funds supported the strategic pre-positioning of supplies, enabling rapid deployment within 12 to 24 hours during acute-watery diarrhoea (AWD) outbreaks. This minimized health risks and further demonstrated the programme's effectiveness in responding swiftly to crises.

10. The most impactful enabling factor was flexible funding, allowing adaptive resource management to meet emerging needs. Collaboration with local stakeholders also supported implementation. Moreover, the crisis modifier option and provision of contingency funds facilitated programme delivery, timely emergency responses, reduced the impact of operational challenges, and ensured activity completion despite unforeseen difficulties. IPs faced significant bureaucratic delays in signing MOUs with DfA ministries. The limited security escorts and logistical challenges such as poor road conditions, difficult terrain, and long distances to remote locations also led to delays. Severe banking disruptions and exchange rate fluctuations further hindered operations, posing key challenges to the programme's implementation. All these challenges were mitigated with varying degrees of effectiveness through adaptive management. Nevertheless, some challenges persisted such as bureaucratic delays primarily from the DfA, limited women's participation, and frequent policy changes such as recent dissolution of Community Development Councils. Finally, accomplishments were supported by a multi-layered monitoring approach involving IPs, WASH facilitators, UNICEF staff from field offices and the country office, third-party monitoring (TPM), and informal community

involvement. Despite key weaknesses, such as inconsistent technical capacity within the DfA, IPs, TP and CDC staffing; monitoring checklists, and gaps in reporting quality. this system provided regular oversight, progress tracking, and identified key gaps.

11. **Coverage:** Water Supply Schemes (WSS) achieved the widest geographic coverage, spanning all five regions. At the subnational level, the programme reached 19 of 34 provinces, 33 of 400 districts, and 46 unique villages. The coverage of other interventions was uneven but aligned with the country's evolving emergency needs, particularly in areas impacted by two major earthquakes in Paktika and Herat,[9] floods, and AWD outbreaks. The programme successfully targeted vulnerable areas and groups, ensuring inclusivity. A notable achievement was provision of clean drinking water through water trucking in 40 newly accessed and hard-to-reach districts in 19 provinces which had faced decades of service deprivation.[10]

12. **Efficiency:** The Programme is assessed as 'partially cost-efficient'. The adequacy and technical capacity of UNICEF human resources to meet complex and changing needs were key factors supporting cost efficiency. The two-year time frame for the programme allowed for a more comprehensive approach to achieve results that addressed both emergency services and long-term solutions to the WASH needs of the population. However, various operational bottlenecks, especially MOU approval delays, reduced the actual implementation timeframe and undermined project timelines and overall cost-efficiencies. Despite these challenges, the Programme succeeded in achieving its main targets within the grant timeframe. The total budget was considered a significant sum by UNICEF and IP respondents, but it was insufficient to fully address the large-scale WASH sector needs, creating pressure on resource allocation and requiring careful prioritization. The cost per beneficiary analysis of a few water supply projects revealed some cost escalations above planned cost. Stakeholders agreed that the shift to CDC implementation reduced costs, not validated in any documents. However, concerns were raised about the quality of implementation and the use of less durable equipment, potentially affecting long-term cost efficiency compared to NGO implementation.

13. **Sustainability:** The Programme implemented several sustainability strategies, including operation and maintenance mechanisms, community training, and water tariff systems, with moderate to good success. However, inconsistent community engagement, variations in training quality, and community resistance to water tariffs posed significant challenges. Household connections for improved water access are likely to be sustained given the household's responsiveness to maintaining the connection, but it also depends on effective tariff management and community responsibility, which varied across communities. Hygiene promotion efforts were only partially effective due to high turnover among trained personnel and limited reinforcement. The programme had a lasting impact on WSSs in rural and drought-prone areas, with solar-powered and gravity-fed systems with household connections providing reliable access to clean water. Yet, declining water tables and limited public financial resources, along with communities' reluctance to pay for ongoing operation and maintenance, threaten sustainability. Additionally, the programme enhanced the technical and organizational capacities of IPs, equipping them to manage future WASH interventions more effectively.

14. **Coordination:** UNICEF's coordination and partnerships under the Programme were essential to success. Delivery through IPs expanded the programme's reach, balancing international standards with local needs in underserved regions. Coordination, particularly with the Ministry of Rural Rehabilitation and Development (MRRD), ensured projects aligned with local priorities, while coordination with the Ministry of Energy and Water (MEW) improved water resource management, despite challenges in data sharing. Delays in signing MOUs and capacity constraints among NGOs further impacted implementation, underscoring the need for better coordination. As the WASH cluster lead, UNICEF effectively aligned efforts across stakeholders, including DfA and community leaders, reducing duplication and optimizing resource use. While integration challenges in health activities led

[9] Series of earthquakes hit Herat Province in western Afghanistan between on 7 and 15 October 2023. As of 19 October: 1482 deaths; 2100 injuries; 3,330 homes destroyed- 43,400 people directly affected; 40 health facilities damaged. Around 43,400 people are directly affected across six districts: Injil, Kushk/Rabat-e-Sangai, Zindajan, Gulran, Herat and Kohsan of Herat Province. Afghanistan: Earthquakes in Herat Province; WHO, Health Cluster Situation Report No. 9 (17-19 October 2023).
https://www.emro.who.int/images/stories/afghanistan/Earthquake_in_Herat_AFGHANISTAN_Health_Sitrep_09.pdf

[10] ECHO WASH Final Report: Baghlan, Balkh, Farah, Faryab, Helmand, Herat, Jawzjan, Kapisa, Khost, Maidan Wardak, Nuristan, Nangarhar, Sar I Pul, Uruzgan, Kunar, Kandahar, Takhar, Paktika and Logar

to some duplicated efforts, UNICEF's overall coordination was praised, particularly during crises like the 2022 earthquake. Coordination with DfA was largely successful; UNICEF and partners achieved localised exemptions for women's engagement without success in overturning the ban on women working.

15. **Equity and disability, gender equality and human rights:** The programme made significant efforts to address the needs of vulnerable groups such as women and girls and people with disabilities (PwDs). However, gaps in analysis and design limited UNICEF's ability to ensure equitable outcomes for all populations. CDCs were essential for operation, but qualitative data raised concerns about mixed effectiveness in equitable service delivery, corruption and limited attention to marginalized groups. Stakeholders were broadly positive about participation of vulnerable groups in design and implementation, while acknowledging the contextual limitations, particularly around involving women. Despite the availability of various feedback and complaints mechanisms (FCM), awareness of available FCMs remains low, limiting channels to receive the population's feedback more directly. While the programme considered specific needs of vulnerable populations, gaps in the design and implementation of facilities, particularly in terms of accessibility for PwDs and adherence to protection standards, were observed. The Programme's impact on gender equality was constrained by broader social and economic factors in Afghanistan, and the sustainability of water access for the poorest households remains a concern.

16. **Climate change and ESS:** Environmental risks were considered during the planning stages, but it was less clear how consistently these were addressed during execution. Efforts to reduce climate change effects correctly focused primarily on water supply systems with less attention to sanitation. Despite UNICEF's efforts in groundwater water monitoring, some stakeholders felt there was a need to further enhance climate focused integration. Household survey results showed that communities with water system investments experienced better year-round access to water. However, this result was not universal and qualitative data and observations indicated that beneficiaries had not gained consistent access to water, especially in schools and healthcare facilities. ESS implementation was 'partially in place' within the Programme, with policies, standards, and accountability systems established but weak focus on quality assurance. Environmental and social risks were infrequently reported, though community conflicts over water sources and land ownership occurred.

17. **Lessons: a)** The dual strategy including resilient interventions under the emergency fund, particularly focusing on water supply systems, has been valuable in mitigating health emergencies in vulnerable communities. **b)** The prepositioning of essential supplies ensured continuity in response efforts and maintained operational effectiveness despite logistical challenges. **c)** Ensuring clear communication and alignment at the design stage on key definitions from the onset, such as "hard-to-reach" areas, is essential to avoid discrepancies in addressing the needs of conflict-affected communities. **d)** Coordinating with the DfA is essential for leveraging their support to ensure smooth planning and execution of the programme activities; **e)** The Programme's efforts in groundwater monitoring related to systematic data collection and sharing, added value to identification of future priorities. **f)** Programmes must be adaptable to sudden policy changes, such as the recent dissolution of CDCs, by developing new strategies and leveraging existing community structures.

18. **Good practices:** UNICEF successfully resolved the initial mismatch, at the original proposal stage between ECHO's restrictions on new construction of household connections and DfA requirements through provision of complementary funding and advocacy, balancing emergency needs with provision of newly constructed water supply scheme. This variation was settled and documented in an annex to the revised proposal. The outreach to emergency-affected districts, particularly those with high AWD case load, showcased a proactive public health response. The 'crisis modifier' enabled flexible fund allocation, allowing rapid responses during emergencies without the delays of securing new funding.

Key Evaluation Conclusions

19. The ECHO-supported WASH Programme was highly relevant in addressing the WASH needs of populations affected by protracted emergencies and weak long-term solutions, despite challenges such as data inconsistencies, evolving operational contexts, and funding gaps. While strategic

alignment with other sectors and partners was evident, integration during implementation faced difficulties, particularly in relation to education. The programme made significant progress in improving water access and emergency responses, but bureaucratic, security, and environmental constraints affected overall efficiency and coverage. Flexible funding, strong partnerships, and community involvement were key enablers of success, although high turnover among IPs posed challenges. The programme also demonstrated partial effectiveness in addressing equity and disability concerns, with gaps in data collection and monitoring impacting attention to these areas.

20. Sustainability remains a concern due to political, economic, and environmental risks, with the declining water table and climate impacts posing significant threats. Strong community involvement and partnerships have laid the groundwork for sustainability, but reinforcing technical training, aligning policies, and integrating climate resilience will be critical. Geographic disparities in coverage and coordination challenges highlighted the need for improved resource allocation and sub-national collaboration. While the programme incorporated gender and human rights considerations, broader socio-cultural barriers and inconsistent data collection limited its impact on gender inequalities. Climate change and environmental safeguards were addressed but require stronger integration and infrastructure resilience for long-term success.

Recommendation highlights (more details are under the recommendation section):

- Review and update existing monitoring indicators, databases, data collection, and reporting formats with harmonized and standardized indicators to achieve complete alignment with the WASH Cluster, particularly for emergency response.
- Strengthen organizational preparedness to better align with the nature of the emergency grants like ECHO, BHA where the project locations are identified based on the donor conditions and emergency situation/type. This could be achieved by the following actions.
- Deepen the understanding and broaden the scope of knowledge management beyond its singular current focus on ground and surface water monitoring.
- Enhance coordination by leveraging the strengths of MoPH, MRRD, and MoE to improve community-level outreach, especially through women outreach workers, and prioritize climate-resilient WASH interventions in schools through a phased and coordinated approach.
- Continue enriching WASH sector programming to align with rapidly changing donor priorities by emphasizing climate change-focused and specific integrated programming to address multi-sectoral deprivations that address both immediate humanitarian and future WASH needs in the country. Map out the climate change-focused activities under each section, as well as opportunities for the integrated programming. Continue enhancing donor proposals with integrated planning strategies, including joint site/project identification, data sharing, monitoring, and reporting. These climate-focused, integrated proposals will help bridge funding gaps and tackle multi-sectoral deprivations across regions. Adapting donor advocacy in this direction will strengthen ongoing and past efforts, such as organizing donor workshops, which have been infrequent.
- Prioritize advocacy with the HAG and OCHA to compile community level data for a better understanding of WASH needs and deprivations. This will strengthen equity-focused community or village level targeting based on hard-to-reach ranking, key health indicators, composite WASH vulnerabilities index, and other key parameters. Adopt a phased approach to complete community-level WASH needs analysis in districts ranked high on WASH composite vulnerability index. Continue this phased approach based on resource availability.
- Strengthen community engagement strategies across the WASH sector and other related sectors to enhance the sustainability of WASH interventions and improve gender integration and protection strategies. Given the impact of the recent dissolution of CDCs and restrictions on women's participation beyond health staff, these elements are essential pre-requisites for enhanced sustainability and gender integration.
- Strengthen both rural and urban WASH services by providing a comprehensive package that includes all essential components: water supply, sanitation, and hygiene promotion, incorporating context specific SBC approaches.
- Increase the systematic inclusion of equity, disability, gender and ESS into WASH programming. Continue advocacy to secure exemptions in the short term and demonstrate flexibility or overturn the ban on women working in WASH outreach in the long term.

- Enhance capacities of IPs and continue coordination with DfA to leverage their input, community level data sharing, and administrative influence in planning and implementation of WASH interventions beyond the emergency context.

1 Introduction

1. The Humanitarian Water, Sanitation and Hygiene (WASH) programme funded by the European Civil Protection and Humanitarian Aid Operations (ECHO) was implemented by UNICEF Afghanistan and implementing partners (IP) between January 2022 and December 2023. The programme will hereafter be referred to as the 'ECHO-supported WASH Programme' or simply the 'Programme'. The summative evaluation, commissioned by the United Nations Children's Fund (UNICEF) Afghanistan Country Office (ACO), was conducted by The KonTerra Group ('Konterra'), an international consulting firm, and covered the Programme's entire implementation period.

2. The purpose of this evaluation was to assess the design, strategies, and results of the Programme, to guide decision-making and promote organizational learning for improved outcomes. It also provides strategic learning and actionable recommendations to inform the design and implementation of similar interventions in the future.

3. The evaluation has been guided by the Terms of Reference (ToR, see Appendix 1), and the evaluation matrix, tools and approach developed during the evaluation's inception phase. The data collection phase included a desk review, key informant interviews (KIIs), focus group discussions (FGDs), observations, and a household survey conducted with Programme beneficiaries.

2 Background and context[11]

2.1 Country context

4. Located in South Asia, Afghanistan has a population of approximately 41-42 million people (49.5% female)[12] most of whom (70%) reside in rural areas.[13] The 2023 population density is 65 people per km^2, with 652,860 km^2 total land area.[14] There has been no census in recent decades; all data on both total population and ethnic and religious groups are estimates. Consistent conflict since 1978 has resulted in compromised living conditions which have further deteriorated since the Taliban takeover on August 15, 2021, as the de facto authorities (DfA). The country's progress towards the Sustainable Development Goals (SDGs) is stagnating or decreasing for almost all goals.[15]

5. Population growth, internal displacement and higher-than usual rates of cross-border return from Pakistan contribute to increased strain on limited resources, livelihood opportunities and basic services, as well as an increase in protection risks, especially for the most at-risk groups. As of December 2023, an estimated 5.7 million individuals displaced with 1.9 million of these more recently displaced due largely to conflict and natural disaster.[16] Displaced persons live in crowded camps and informal settlements with limited land tenure rights.[17]

6. The situation regarding human rights, especially for women and girls, faces significant challenges during the ongoing political transition. The Special Representative of the Secretary-General for Afghanistan highlighted several characteristics of the current state of human rights [18] including the systematic discrimination against women and girls, repression of political dissent and free speech, extrajudicial violence and exclusion of minorities. The forced displacement and marginalization of religious and ethnic minorities, including the Hazaras, Uzbeks, Turkmens and Tajiks, has been reported. [19] The Taliban has released numerous Decrees and Directives since

[11] Further detail on country context provided in Appendix 2.
[12] The Word Bank Data (2023 estimates). Population. (accessed: Feb. 5, 2024)
[13] Estimates range depending on the source e.g. UNICEF: 71%; World Bank DataBank: 73%
[14] https://www.worldometers.info/demographics/afghanistan-demographics/
[15] SDG Dashboard and Trends. https://dashboards.sdgindex.org/profiles/afghanistan
[16] IOM. National Displacement Profile Afghanistan. chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/file:///C:/Users/Jane%20Work/Downloads/Afghanistan%20-%20NDP_FINAL.pdf
[17] Humanitarian Needs and Response Plan Afghanistan 2024. https://humanitarianaction.info/plan/1185
[18] UN Press. (2023) "Speakers Weigh Prospects for Engagement with Taliban in Afghanistan amid Ongoing Concern over Harsh Repression of Women's Rights" (Accessed Feb. 6, 2024).
[19] UN Press. (2023) "Speakers Weigh Prospects for Engagement with Taliban in Afghanistan amid Ongoing Concern over Harsh Repression of Women's Rights" (Accessed Feb. 6, 2024).

taking power that dramatically curtail women's access to education, employment, justice and access to public services.[20] About 13.9% of the population is estimated to be living with a severe disability.[21] Gender, age, ethnicity and location are intersectional factors increasing the marginalisation of persons with disabilities (PwD).

7. Natural disasters and environmental risks are other significant drivers of humanitarian need. A national drought was officially declared in June 2021, the worst in more than three decades. As of 2024, three-quarters of rural communities are experiencing severe drought.[22] Afghanistan has an INFORM Risk Index[23] of 6.8, the fifth highest risk out of 190 countries profiled. At the same time, the Notre Dame Global Adaptation Index ranks it as the 13th least prepared country against climatic shocks and the 12th most vulnerable country in the world to climate change.[24] Afghanistan is not on track to achieving SDG targets 6.1 and 6.2[25]. People living in fragile contexts like Afghanistan are twice as likely to lack safely managed drinking water and basic hygiene and 1.5 times as likely to lack safely managed sanitation services.[26]

8. Access to water: The latest data from the 2022-23 Multiple Indicator Cluster Survey (MICS) survey shows that 69% of people have access to at least basic drinking water with a clear urban-rural disparity (93% in urban areas; 61% in rural areas). Also, 46% lack drinking water on premises. The primary responsibility for collecting drinking water for family use, such as drinking, cooking, and personal hygiene, is borne by women (15+) at 42.2%, followed by men (15+) at 25%. Female children (under age 15) account for 12.4%, while male children (under age 15) represent 11.4%.[27]

9. Access to sanitation and hygiene: Afghanistan MICS 2022-23 indicates 20% of Afghans practice open defecation (4.2 million people) with high disparities between rural (26%), and urban areas (1%) and for the semi-nomadic "Kuchi" population (4.5% of the Afghan population) with high open defecation practices (71%).[28] Handwashing is limited with nearly half (42%) lacking access to basic facilities.[29] Additionally, barriers to the participation of women in outreach sessions limits inclusion of menstrual health and hygiene in community sanitation and hygiene strategies.

10. WASH in institutions (Schools and Health Facilities): 74% of health facilities have available sanitation facilities. However, there is considerable regional variation with much lower availability in facilities in western (53%) and northern (59%) regions.[30] Water availability in health facilities follows similar patterns (79% nationally, 56% in western, 63% in northern regions). Access to WASH facilities in schools is limited, there is only 1 female toilet for every 200 male toilets in schools.[31] Unequal access has a direct effect on girls' attendance, with one-third of girls not attending school during menstruation due to the unavailability of menstrual hygiene facilities.[32]

11. UNICEF in Afghanistan: UNICEF has a large footprint in Afghanistan to ensure access and decentralized, equitable humanitarian action to all in need. UNICEF has a country office in Kabul, five zonal offices and eight outpost offices (see Appendix 2). UNICEF implements directly and through IPs and contractors; community development councils (CDCs) were also utilised until they were dissolved in May 2024. Implementation capacity is expanded through "extenders", Afghan citizens with localised knowledge that support delivery and monitoring of activities in areas that are not easily accessible to UNICEF staff members.[33] UNICEF is the cluster lead for

[20] United States Institute of Peace (USIP), "Tracking the Taliban's (Mis)Treatment of Women," (Accessed Feb. 6, 2024).
[21] The Asia Foundation. 2019. Model Disability Survey of Afghanistan 2019.
[22] Afghanistan Humanitarian Needs and Response Plan 2024.
[23] Global, open-source risk assessment for humanitarian crises and disaster.
[24] Notre Dame Global Adaptation Index Rankings. https://gain.nd.edu/our-work/country-index/rankings/
[25] 6.1: By 2030, achieve universal and equitable access to safe and affordable drinking water for all; 6.2: By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations.
[26] UNICEF and WHO, (2023) "Progress on Household Drinking Water, Sanitation and Hygiene 2000-2022: Special Focus on Gender"
[27] Afghanistan MICS 2023.
[28] Afghanistan: Income, Expenditure and Labour Force Survey (IE&LFS 2020)
[29] UNICEF, (2023) "UNICEF MICS 2022-23, Survey Findings Report"
[30] WHO, (2023) "HeRAMS Afghanistan Status Update Report January 2023 - Operational Status of the Health System: A Comprehensive Mapping of the Operational Status of Health Facilities,"
[31] UNICEF, (2022) "Afghanistan WASH on the Brink".
[32] Ibid.
[33] Consultancy: Review of ACO Extender Modality, Kabul, Afghanistan. https://www.impactpool.org/jobs/836265

WASH and coordinates all humanitarian responses through the national WASH cluster at Kabul level and sub-national cluster fora at the zonal level. Additionally, UNICEF is the lead agency for the Nutrition Cluster, lead agency for the Expanded Programme of Immunization (EPI) and Risk Communication and Community Engagement (RCCE), lead agency for the Child Protection Area of Responsibility, and Education Cluster co-lead.

2.2 Overview of the object of evaluation

12. The 'object of evaluation' is the WASH component of the ECHO-supported humanitarian programme in Afghanistan, constituting two result areas (Result 5 and Result 7). Result 5 of the WASH Programme was implemented in both programme years, from January 2022 until December 2023, and Result area 7 was implemented only in the second year of implementation (January-December 2023).

13. The stated objectives of the two result areas are:

    - **Result 5: WASH:** Communicable disease-related mortality and morbidity are mitigated through access to equitable and resilient WASH services.
    - **Result 7: WASH:** Provision of access to life saving and resilient WASH services to emergency affected people.

14. To achieve results, the Programme has embraced two strategic approaches to deliver WASH response activities: 1) rapid lifesaving WASH response and 2) resilient and durable WASH services. The strategic approach and related activities are provided in Table 1 below.

Table 1 ECHO-supported WASH Programme strategic approaches and related activities

Strategy	Lifesaving and Survival WASH	Resilient and Durable WASH Services
Objective	**Provide rapid lifesaving WASH response activities to the most vulnerable population to reduce morbidity and mortality.**	**Improve the resilience of vulnerable populations by providing sustainable WASH services/solutions.**
Related activities	• Emergency water trucking with provision of water tanks/with distribution points. • Emergency latrines on the onset of new emergencies (flood, earthquake, new IDPs). • Integrated Hygiene promotion and distribution of WASH non-food items (NFI) (soap, water treatment chemicals, jerricans and hygiene/ consumables kits) in coordination with social and behaviour change (SBC). • Cleaning campaign and solid waste management on the onset of new emergencies (flood, earthquake, new IDPs). • Fuel support to maintain minimum water service level in urban areas. • Provision, repair and rehabilitation of WASH facilities at the onset of new emergency (flood, earthquake, new IDPs).	• Repair, rehabilitation and maintenance of WASH facilities. • Construction of new and/or rehabilitation of water harvesting systems. • Construction/rehabilitation of sanitation facilities (Urban and Rural). • Capacity building for operation and maintenance and sustainable WASH service delivery (urban and rural).

Source: UNICEF internal documents on the Programme

15. The ECHO-supported WASH interventions are broadly categorised into three key components: 1. Water; 2. Sanitation Services; and 3. Hygiene promotion and behaviour change. Further details on the Programme's activities are provided in Appendix 3.

16. **Geographic coverage:** Programming was feasible in all 34 provinces without pre-determined geographic targets. The guiding principle was to target, reach, and benefit all areas across the country and/or populations in need of the most basic essential WASH services, if accessible. The crisis modifier included specification that the Programme would focus on those that were "newly accessible". The overall programme coverage was diverse and varied among all provinces and at the district levels. Based on UNICEF's 2023 WASH Dashboard, the coverage of ECHO funded WASH interventions varied from a maximum of 22 provinces and 34 districts across all five regions of the country (Table 2).

Table 2 Geographic coverage of ECHO supported WASH Programme

	Regions	Provinces	Districts
Water Supply Schemes	5	19	33
Hygiene Promotion Activities	4	22	34
Sanitation Interventions	3	5	8
WASH Supplies Distribution	2	8	27
WASH in schools	4	13	24
WASH in HCFs	2	8	22

Source: 2023 WASH database; and UNICEF updated dataset for WASH in institutions[34]

17. **Beneficiaries:** The programme beneficiaries were people affected by emergency, conflict and/or humanitarian situations through provision of the most urgent lifesaving WASH services and by contributing to improving WASH service delivery both in humanitarian situation and development context. Direct beneficiaries are the households (HH) and individuals (affected groups) who received any form of water, hygiene or sanitation services or supplies. The other categories of Programme stakeholders are IPs, and UNICEF staff at national, provincial, and district levels involved in the Programme design, implementation, and monitoring. Programme activities were coordinated with DfA ministries. Community level programme participants included CDC members (men/women),[35] WASH services/facilities users (community members/parents; mothers/fathers), adolescents/youth (young boys and girls), community and religious leaders, vulnerable groups including PwD, IDP, widows, people who are poor, and elderly. The programme also reached schools and health facilities to benefit students, patients, and facility staff (health staff, teachers, support staff, etc.). Indirect beneficiaries include family members of all Programme participants who benefited directly from WASH services or supplies.

18. The Programme reached over 1.2 million beneficiaries including those with co-funding from other sources (see Table 3).

Table 3 Summary of ECHO supported WASH Programme beneficiaries[36]

	Target	Achieved	% Achieved
Water supply services	186,500	492,600	274%
Sanitation	50,000	35,141	70%
WASH Supplies Distribution and Hygiene promotion	675,000	395,686	59%
WASH in Schools	30-44	52	118-173%
WASH in HCFs	30-44	27	61-90%

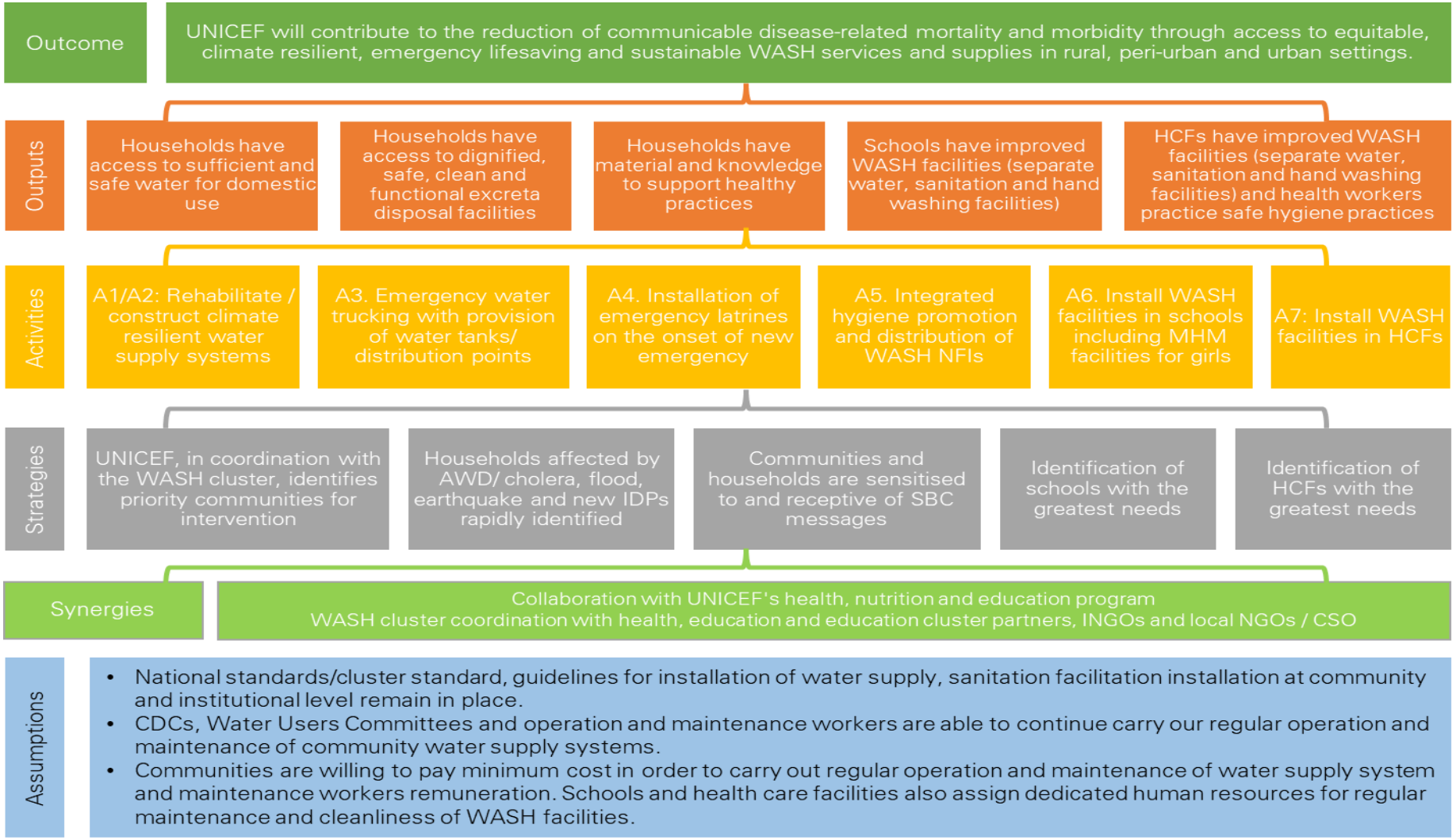
Source: UNICEF ECHO Final Report (n.d.)

19. **Cost/budget:** With a budget of approximately €21 million, the WASH component constitutes roughly one-third of the overall ECHO Programme budget[37], of approximately €66.7 million.

20. **Intervention logic:** The ECHO WASH proposal and progress reports provide a narrative description of the programme logic. Based on this logic and leveraging insights from the review of all programmatic aspects, the ET developed a theory of change (ToC), shaping the evaluation design. A visual representation of the ToC is provided in Figure 1 below. Appendix 4 provides further details on the underlying assumptions and preconditions.

[34] Dataset received on October 2, 2024, as part of ERG feed after presentation of preliminary findings to the ERG.
[35] Until May 2024; after which CDCs were dismantled.
[36] Under Result 7, the target is a total of 14 public institutions without distinction between targets for schools or HCFs. Result 5 includes separate targets for schools and HCFs.
[37] ECHO Grant Total is approximately €66.7 million including WASH and all other thematic components such as health, nutrition, education, cash assistance, and child protection.

Figure 1 ECHO WASH Theory of Change



Source: Evaluation team elaboration

21. **Stakeholders:** The ECHO-supported WASH Programme design, monitoring and implementation involved a range of actors from UNICEF Afghanistan, the DfA, the European Commission/ ECHO as the key donor of the Programme, implementing partners (as service providers), and communities (as direct and indirect beneficiaries). Key stakeholders which are directly or indirectly involved in the WASH emergency interventions delivery are summarised in Table 4 below.

Table 4 Programme stakeholders' analysis

Stakeholder Category	Stakeholder's Role of the WASH Programme
Key DfA Stakeholders (National, Provincial and District levels)	
De facto authorities' National Ministries, Provincial, and district Departments	• Ministry of Rural Rehabilitation and Development (MRRD) and its Provincial Department (DRRD) • Ministry of Energy and Water (MEW) • Ministry of Public Health (MoPH), and the provincial Department of Public Health • Ministry of Education (MoE), and the provincial DoE **MRRD** at the national level through its provincial departments were the lead DfA entity that UNICEF coordinated with for Programme implementation. UNICEF coordinated with ministries of public health and education for WASH interventions in institutions (schools and health facilities). These stakeholders were involved in identification, selection, quality assurance, monitoring of UNICEF-led ECHO-supported WASH interventions as well as in granting MOUs approvals and oversight of all implementation partners.
Programme Donor	
Programme Donor	The European Commission through ECHO[38] is the primary donor of WASH component of the UNICEF's Programme. It provided financial support to implement WASH (including other components such as health, nutrition, protection, etc.) humanitarian and development actions. Interventions were co-founded by funding provided by other donors as well as by UNICEF's own resources.
Development Partners, Implementing partners and contractors (Service Providers / Programme Participants)	
Development and Sectoral Clusters partners	Through coordination efforts, all partners (UN agencies, INGOs, and clusters partners) complement UNICEF's initiatives by aligning resources, expertise, and priorities, maximizing the impact of ECHO WASH interventions. Key partners included WHO, IOM, and other sectoral cluster (WASH, health, education, nutrition) partners.
Implementation Partners and contractors	A range of I/NGOs and CSOs were engaged as implementation partners. Private companies were also engaged for water trucking, supplies and emergency sanitation. The scope and geographic coverage varied across these IPs and contractors based on their contractual modalities with UNICEF ACO for ECHO-supported WASH Programme.
Communities – WASH Programme Beneficiaries/Participants (Right Holders)	
Community Development Councils (CDCs)	The CDCs, community-based forums were previously functioning under oversight by MRRD. CDCs acted as implementation partner for some of the ECHO-supported water interventions in some locations at community level. The DfA dissolved CDCs in May 2024.
Community members, local elders and/or religious leaders	Households' members (adolescents, girls, boys, men, women, and other vulnerable groups including people with special needs, elderly people, and IDPs) and general community members are the rights holders and are the direct and indirect beneficiaries of the ECHO-supported WASH interventions. Community WASH structures were also utilized.

Source: Analysis of UNICEF internal documents on the Programme

[38] The European Commission, European Civil Protection and Humanitarian Aid Operations (ECHO); https://www.eeas.europa.eu/node/30344_en

3 Evaluation purpose, objectives, scope

22. The evaluation is summative in nature, guided by the UNICEF Evaluation Policy and the Organisation for Economic Co-operation and Development's Development Assistance Committee (OECD-DAC) criteria. The evaluation is significant for UNICEF as it aims to assess and validate its programming priorities and approaches in providing WASH emergency response in complex and challenging humanitarian contexts like Afghanistan. The evaluation will inform UNICEF's future country programme in Afghanistan with a focus on planning and delivering integrated, equitable and inclusive WASH interventions for all affected regions, and groups (IDPs, PwDs, and those in hard-to-reach regions).

23. As specified in the inception report, the evaluation fulfils dual purposes:

- Assess the ECHO-supported WASH Programme's overall design, strategies, interventions, and results to guide WASH programme planning and aid decision-making at the country office level to deliver high-quality WASH programmes in advancing children's rights, especially the most vulnerable populations, in Afghanistan.
- Promote and foster organizational learning and improvement by identifying key strengths, gaps, bottlenecks, and satisfaction levels among affected populations, thereby facilitating targeted interventions and programme enhancements.

3.1 Evaluation Objectives

24. The evaluation has eight specific objectives as determined during the inception phase:

i. Assess the **relevance, coherence, effectiveness, efficiency, coverage, sustainability, and intended and unintended results** of the ECHO-supported WASH Programme, as well as its design, implementation, and engagement with the key partners and programme beneficiaries.
ii. Identify **strengths, gaps, and key bottlenecks** within implementation processes that support and/or hinder the achievement of the ECHO-supported WASH Programme's results.
iii. Generate evidence on **programmatic and operational lessons learned, best practices, and opportunities** to enhance organizational learning and improve future WASH programming in Afghanistan.
iv. Assess the **integration and synergies between WASH and health, nutrition & education** components of the programme in achieving programme results.
v. Assess the **level of satisfaction among affected populations** regarding the quality, accessibility, and appropriateness of WASH services provided by UNICEF and its partners.
vi. Examine the **management, governance, and resourcing arrangements** in attaining the expected results. This includes an assessment of resources (human and financial), risk management and mitigation measures.
vii. Assess the **quality and overall coherence of internal monitoring and evaluation (M&E) and knowledge management systems** utilized by the ECHO-supported WASH Programme. This covers the quality of indicators, baseline data, comprehensive data collection systems, data governance and management, equity-inclusiveness in data systems, timeliness of data and knowledge management processes, the utility of evidence, and plans for complementary studies, research, and other evaluative activities.
viii. Examine the **integration of cross-cutting areas**, specifically, human rights, gender, disability, equity, climate, and environmental and social safeguards (ESS) in the programme.

3.2 Evaluation scope

25. Aligned with the ToR, Table 5 below presents the evaluation scope.

Table 5 Evaluation scope

Evaluation Scope	Description of Scope
Geographic Scope	**National:** The geographic scope covers all provinces and districts across the five regions (north, south, east, west, and central) where ECHO WASH interventions were implemented. Primary data collection covers one province from each of the five regions across the country.
Temporal scope	The evaluation covered the entire ECHO supported WASH Programme activities from **January 2022 to December 2023.**
Thematic Scope	The evaluation covers **all ECHO-supported WASH Programme interventions** including water, sanitation, hygiene, WASH supplies and WASH in institutions.

3.3 Evaluation stakeholders (evaluation users and potential uses)

26. The primary users of the evaluation are UNICEF ACO, WASH Cluster Partners, implementing partners, UN agencies, DfA, national ministries, provincial departments, donors and right holders (communities, and CDC members). The findings and recommendations will be used to review and update WASH approaches, enhance coordination, coverage, and WASH emergency response, support evidence generation within UNICEF, inform future WASH priorities and strategies in the next Country Programme Document (CPD), and strengthen humanitarian-development programming.

27. Secondary users include UNICEF's South Asia Regional Office (ROSA) and Headquarters (HQ), which will use the evaluation to enhance evidence-based decision-making for WASH, health, nutrition, and education programming, particularly in conflict-affected contexts.

28. Appendix 5 provides more details on evaluation uses for all stakeholders, additional details on these stakeholders and elaborates on the evaluation significance for them.

4 Framework, Methodology and approach

4.1 Evaluation framework

29. The evaluation utilised the five evaluation criteria as defined by the Organisation for Economic Co-operation and Development's (OECD) Development Assistance Committee (DAC): relevance, coherence, effectiveness, efficiency and sustainability. The evaluation also assessed non-DAC criteria of coverage and coordination and the integration of cross-cutting themes (equity, disability, gender equality, human rights, and climate and environmental and social safeguards (ESS) consideration).

30. The evaluation team (ET) prepared an evaluation matrix (EM) based on the initial evaluation questions (EQs) included in the ToR and informed by discussions with the UNICEF Country Team during inception stage. The final EM is presented in Appendix 6. Key questions are subdivided into sub-questions, accompanied by relevant indicators (or areas of enquiries) and the data sources and data collection methods utilised to assess each indicator. The key evaluation questions and relation to evaluation objectives are listed under each evaluation criteria are listed in Table 6 below.

Table 6 Evaluation questions and sub-questions

Key Evaluation Questions (Evaluation Matrix)	Evaluation Objectives
Relevance	
EQ1: To what extent and how did the ECHO supported WASH Programme fit the humanitarian context needs of the Afghan population including the vulnerable groups?	1, 8
Coherence	

Key Evaluation Questions (Evaluation Matrix)	Evaluation Objectives
EQ2: To what extent and how well did the ECHO funded humanitarian WASH programme integrate and collaborate with UNICEF's other humanitarian education, health, and nutrition interventions (internal coherence), and how effectively did it complement humanitarian interventions by other donors or partners in Afghanistan (external coherence)?	2, 4
Effectiveness	
EQ3: To what extent were the stated objectives and set targets of the ECHO supported WASH Programme achieved, and how effectively have the programme activities facilitated access to WASH services for the affected population (rights holders)?	1, 2, 3, 5, 6
Efficiency	
EQ4: To what extent and how well did the ECHO supported WASH Programme resources and implementation modalities enable attainment of intended results and objectives in an economical and timely manner?	3, 6
Sustainability	
EQ5: To what degree have the benefits of the ECHO supported WASH Programme been sustained and how are they likely to continue without UNICEF's (or other external) support, and under what circumstances?	2, 3, 5
Coverage	
EQ6: To what extent and how did the ECHO supported WASH Programme cover urgent WASH needs for crisis-affected population groups, including IDP camps, areas hit by natural disasters, underserved regions, schools, health facilities, and host communities?	1, 6
Coordination	
EQ7: To what extent and how did UNICEF's coordination and collaboration with diverse stakeholders contribute to improving the delivery and results of the ECHO WASH response, showcasing UNICEF's leadership in fostering a strategic, coherent, and effective WASH response?	1, 4
Cross-cutting parameters	
EQ8: To what extent did the ECHO supported WASH Programme delivery design, model, and approach have adequate M&E and knowledge management systems and integrate human rights, gender, disability, equity, climate or ESS considerations?	1, 3, 7, 8

4.2 Evaluation design and approach

31. The evaluation used hybrid approaches with mixed methods, combining theory-based design, contribution analysis,[39] and post-intervention single group research[40]. The ET constructed the ToC using the descriptive logic of interventions from the Programme documents. Using the ToC, the ET mapped pathways of change and examined inputs and activities from UNICEF, IP, ECHO, and DfA. Comparing post-intervention data with pre-intervention conditions, the evaluation assessed changes in WASH services.

32. The evaluation execution followed participatory and utility-focused approach by engaging all relevant stakeholders at all levels, including DfA, UNICEF, ECHO, IPs and programme beneficiaries at the appropriate stages of the evaluation as per their role including for validation of findings and formulation of recommendations. Findings were triangulated from various sources and methods to ensure drawing of valid conclusions. Further details on evaluation design and approach are provided in Appendix 7.

[39] Contribution analysis is a theory-based approach to evaluation that provides a systematic way of understanding an intervention's contribution to observed results or achievements (outcomes or impacts). https://www.betterevaluation.org/methods-approaches/approaches/contribution-analysis.

[40] In a single-group post-test only design, intervention or programme or a treatment is implemented (an independent variable is manipulated) and then a dependent variable (programme effects/results) is measured once after the treatment is implemented. https://opentext.wsu.edu/carriecuttler/chapter/8-1-one-group-designs/

33. The ET used various available guidelines[41] on application of 'contribution analysis' to inform the evaluation design, tools preparation and data analysis. As a key interim step towards conducting contribution analysis, the ET developed a draft TOC during the inception stage to better understand the operational context, key foreseeable risks and assumptions referred to by programme planners and implementers. This wider understanding of the context was factored in during data analysis, drawing evaluation findings, conclusions and formulation of recommendations. The following key actions were considered during contribution analysis:

    1. Set out the attribution problem to be addressed.
    2. Develop (or review and revise if needed) a theory of change and risks to it.
    3. Gather existing evidence on the theory of change.
    4. Assemble the contribution story and challenges.
    5. Seek out additional evidence.
    6. Revise and strengthen the contribution story.

34. Table 7 presents details on key actions performed by the evaluation team to implement contribution analysis. See Appendix 8 for more details.

Table 7 Key steps in evaluation contribution analysis

	Actions taken by the Evaluation Team
Step-1: Set out the attribution problem to be addressed	• Discussed, refined, and documented the evaluation objectives which were translated into evaluation questions (attribution problem to address) then further divided into sub-questions and potential areas of enquiries or indicators to guide the evaluation data collection and analysis.
Step-2: Develop (or review/revise) a theory of change and risks to it	• Based on review of secondary sources and available programme documents, the ET developed a TOC to guide the evaluation design, tools preparation, and data collection in alignment with evaluation objectives and key questions.
Step-3: Gather existing evidence on the theory of change	• Primary data collection through interviews, focus groups, household survey, and on-site observations of WASH facilities/services in schools, health facilities. Field level limitations hindered some data collection activities. • Analysis of variations in implementation over time and across locations. was done during interview/meetings with programme staff both at national and field office levels.
Step-4: Assemble and assess the contribution story and challenges to it	• Data analysis was conducted with a strong focus on triangulation of findings from multiple data sources and data collection methods to draw findings on 'contributions' of the programme to the achieved results.
Step-5: Seek out additional evidence	• During analysis, the ET noted some inconsistencies in the available two databases (activity info, and WASH database) on programme coverage, number of beneficiaries across various types of interventions and numbers/locations reported In ECHO draft report (May 2023). These were highlighted to UNICEF WASH and evaluation management. The ET received additional evidence (updated databases, and a few other new documents) after submission of the draft report and presentation made to ERG on draft evaluation report.
Step-6: Revise and, where the additional evidence permit strengthen the contribution story	• Based on the review and analysis of new additional evidence, the ET incorporated the updated the final evaluation report. The revision also addressed feedback received from the ERG.

35. The evaluation employed mixed-method approach for data collection, analysis and reporting to align with the evaluation's objectives. This approach minimized limitations associated with relying on a single method and allowed for comprehensive data collection from diverse sources, facilitating cross-validation and triangulation.

    - The quantitative component included a household survey, WASH observations in schools and health facilities, and rapid assessments of communal water supply system/schemes (WSS).

[41] John Mayne (May 2022); ILAC Brief 16: Contribution analysis: An approach to exploring cause and effect. https://nonprofitbuilder.org/storage/377/Contribution-analysis-An-approach-to-exploring-cause-and-effect-ILAC.pdf; and https://www.betterevaluation.org/methods-approaches/approaches/contribution-analysis

- The qualitative component included key informant interviews (KII), focus group discussions (FGD), and other consultations during all stages of the evaluation. In total, more than 100 people participated in the evaluation as either key informants or FGD participants (see Table 8 ahead). The list of evaluation participants is provided in Appendix 9.
- All data collection and analysis focused on generating disaggregated data by gender, disability and equity parameters around access, coverage of WASH services and knowledge, attitudes and practices (KAP) of communities.

36. The desk review was an on-going process throughout the evaluation. The information was drawn from the key Programme documents, administrative data, national surveys and assessments. Literature review of external documents, and discussions with UNICEF team enabled the evaluation team to formulate the evaluation matrix, defining the data collection methods and drafting the data collection tools.
37. The ET systematically reviewed and categorized all key documents received from UNICEF, while also requesting additional programmatic documents as needed. Overall, the ET received and reviewed over 150+ key documents and accessed three key sources of programme monitoring data (WASH Dashboard, Activity Info Data, and WASH Vulnerability Index Dashboard) to prepare this report. The document list is provided in Appendix 10.
38. The ET relied on triangulation of findings to ensure validity and reduce potential biases. The evaluation incorporated multiple data sources and data collection methods to compare findings on critical areas of inquiry. The ET used systematic comparison and analysis of findings from diverse stakeholders to ensure the impartiality of analysis and reduce the risk of bias. Optimal use of triangulation guaranteed inclusion, accuracy and credibility of the evaluation.
39. The sampling methods relied on transparent methods for both geographical selection and selection of respondents. Geographical selection was based on coverage of the five regions with purposive selection according to additional criteria. The evaluation aimed to include an equal number of men and women in primary data collection among FGDs and household surveys. However, data collection restrictions imposed by the DfA restricted or prevented data collection with women in some areas.
40. Gender, human rights and equity and disability are included under the criteria of cross-cutting parameters. These considerations have also been mainstreamed under other questions. Wherever possible, the analysis has disaggregated data by gender and other vulnerabilities. The evaluation assessed specific opportunities and needs of men, women, girls and boys and vulnerable groups, explored during primary data collection, to assess whether the approach of UNICEF has been gender-sensitive and inclusive.
41. The field team was composed of 23 men and 10 women team members. The team considered ethical standards throughout the evaluation and ensured that all stakeholder groups were treated with integrity and respect for the confidentiality, dignity and welfare of informants. Informed consent was ensured at the onset of data collection activities and the team certifies that there is no possibility to trace back specific findings to individual respondents.

4.3 Evaluation methods and data collection tools

42. Data collection methods are summarised in Table 8. Both in-person and remote methods were utilised for data collection with national and provincial-level stakeholders based on stakeholder availability. Data collection with community-level stakeholders was conducted in person. There were some notable changes from the planned methods presented in the inception report; implications of these changes are discussed under Limitations (Section 4.6).

Table 8 Data collection details

Method	Geographic scope	Sample size (% women)	Stakeholders involved	Changes from evaluation design
Desk review	National	n/a	n/a	n/a

Method	Geographic scope	Sample size (% women)	Stakeholders involved	Changes from evaluation design
Household survey	Herat, Helmand, Paktika, Nangarhar, Badakhshan	1,940 (27%)	Beneficiary households of WASH activities	No access to women in Nangarhar, data collection with women stopped in Paktika and Badakhshan.
KIIs				
KIIs with national stakeholders	National	62 (11%)	DfA, UNICEF ACO, IPs, Donors, UN Agencies	Some key stakeholders unavailable.
Provincial	Badakhshan, Herat, Helmand, Paktika, Nangarhar	5 (10%)	UNICEF zonal/regional offices, DfA, IP	Women's participation was limited as most position-holders within the determine sampling frame were men.
Sub-district/community-level		9 (0%)	Health facility managers, head teachers/principals	
FGDs				
FGDs	Badakhshan, Herat Nangarhar, Helmand	21 (38%) covering 123 people (30%)	Beneficiaries, health facility staff, teachers	Some FGDs were replaced with group KIIs due to insufficient availability of participants. Students were on summer vacation and thus not available; replaced with teachers.
Group KIIs	Badakhshan, Nangarhar	6 (100%) covering 11 people (100%)	Health facility staff	
Direct observations				
Schools	Nangarhar	4 (1 girls' school)	n/a	Fewer health facilities could be identified than anticipated. Additional HCFs were added to supplement the sample.
HCFs	Nangarhar, Herat, Helmand, Badakhshan, Paktika	35 (n/a)		
WSS		5 (n/a)		

43. The data collection tools are provided in Appendix 11- qualitative tools, Appendix 12- household survey and Appendix 13- observation checklists. The core ET was responsible for data collection with national and provincial-level stakeholders. ATR Consulting, the national partner, was responsible for data collection activities at district and community-levels. FGDs and KIIs were facilitated by semi-structured guides, enabling the ET to tailor the content to the respective stakeholder expertise and interest. The household survey was administered using electronic data entry templates using Kobo Toolbox enabling enhanced quality control, remote uploading and real time monitoring. Checklists for schools and HCFs were aligned with UNICEF/WHO Joint Monitoring Programme (JMP) tools for WASH assessments in institutions and are consistent with SDG definitions for WASH indicators. [42]

44. **Data collection ethics:** The evaluation design was approved through the institutional review board (IRB) process prior to implementation. The evaluation design and execution adhered to UNICEF evaluation policy, UNICEF Standard on Information Security (2018), UNICEF Policy on Personal Data Protection (2020), UNICEF procedure on ethical standards in research, evaluation, data collection and analysis (2021), and UNEG and UNICEF prescribed evaluation norms, and standards among several other guidance documents on evaluation ethical guidelines (see Appendix 14).

45. The planning and execution of all data collection activities complied with social and cultural norms, traditions and gender norms. Data collection at the community-level was conducted with same-gender enumerators i.e. men interviewed men and women interviewed women. Special attention was given to respecting the sensitivities of topics (menstrual hygiene management (MHM) and personal hygiene), especially during discussions with women as FGD participants. ATR Consulting deployed trained and experienced national researchers familiar with the sensitivities of data collection. The ATR data collection report is provided in Appendix 15. As

[42] Core questions and indicators for monitoring WASH in health care facilities in the Sustainable Development Goals. Geneva: World Health Organization and the United Nations Children's Fund (UNICEF), 2018.

discussed in section 4.6 below, the evaluation was not able to reach the planned number of FGDs or household surveys with women due to restrictions imposed by the DfA. Data collection on electronic data entry templates enabled real time uploading of data to a secure web-based platform.

4.4 Sampling

46. **Quantitative data:** Due to the complexity of the WASH interventions geographically and programmatically, a complex multi-stage cluster sampling strategy was utilised. In the absence of a reliable and comprehensive national level household listing or a complete programme beneficiary list, a cluster sampling approach was considered one of the most effective methods to draw a statistically representative sample while taking the logistical and budgetary limitation in consideration.

    - At the first stage, one province per region (five total) was selected based on a scoring system ranking provinces on the regional proportion of 1) beneficiaries for each intervention; 2) number of interventions; 3) number of villages; 4) number of districts.
    - At the second stage, communities or clusters were selected randomly, dividing the enumeration area (EA) if selected communities were large.
    - Finally, 20 households were selected within each EA using a random walk methodology. The scoring calculations are provided and further details on sampling are provided in Appendix 7.

47. Sampling for observations followed a purposive sampling approach based on the availability of schools, health facilities and rehabilitated/constructed WSS in or nearby the communities/EAs selected for the household survey. Findings from the observations are applicable only to the visited sites and were aimed to enrich findings from other sources for triangulation purposes.

48. **Qualitative data:** All qualitative data collection was conducted in the same provinces, districts and communities where the household survey was administered. This convergent approach enabled robust triangulation of findings from different sources, and methods. The ET employed a purposive or 'judgmental' sampling for qualitative data collection to 1) ensure selection of relevant categories of stakeholders at all levels; 2) include a diverse range of locations and communities; and 3) reach communities who received the maximum possible benefits from the ECHO supported WASH Programme to maximize representation of programme participants.

49. The overall sampling and scope of qualitative data collection ensured that FGD and KII were conducted multiple times with different groups. These repeated discussions yielded qualitative findings to the 'point of saturation', which is considered an appropriate benchmark for defining the scope of qualitative research. The selection of KII respondents is based on a comprehensive stakeholder mapping during the desk review of programme documents. Key informant categories included UNICEF, IPs, cluster partners, donors, and senior public officials from relevant national/provincial ministries, and UN agencies.

4.5 Data analysis

50. **Qualitative Data Analysis:** The ET undertook a systematic content and thematic analysis of secondary data, FGDs, KIIs and field notes/recordings using Excel-based tools. The process involved reviewing and summarizing unstructured textual content, followed by identifying and coding relevant data into common themes. Summarized data was organized into matrices to extract patterns on programmatic aspects and participants' perspectives. Key findings were triangulated (by source and data collection methods and on a theoretical basis) with secondary sources for valid judgments and conclusions. This comprehensive analysis ensures a robust evaluation of different programmatic aspects and perspectives, enhancing the validity and reliability of the conclusions drawn from the qualitative data.

51. **Quantitative Data Analysis:** The primary quantitative data collected through household surveys and WASH Checklists (for schools, health facilities, and water supply scheme) underwent a thorough analysis using R. Analysis plans, formulated during the data collection phase, guided the overall analysis, including descriptive statistics (averages, means, frequencies), and cross-tabulations for gender analysis, equity, disability, human rights, and climate considerations related variables

where feasible and applicable. This systematic approach ensures coherence, logical exploration and insightful interpretation of the quantitative data, addressing all evaluation questions and drawing meaningful conclusions across all evaluation criteria. Quantitative data from secondary sources was used to triangulate primary data.

52. The survey findings are generalizable to both the beneficiaries of the programme and at provincial level with varied degree of margin of error i.e., ±3% and ±7% respectively with 95% confidence level. The survey results yielded disaggregated analysis by gender, disability and/or displacement status for the surveyed communities within surveyed provinces.

53. **Validation of Findings:** Findings were triangulated to increase the robustness of conclusions and recommendations. The evaluation underwent a quality review with comments from the evaluation management team, including evaluation manager and technical staff from the WASH section. A meeting with the Evaluation Reference Group (ERG), including internal and external stakeholders, was executed to validate findings and recommendations.

4.6 Limitations

54. There are some important limitations that impacted the evaluation. While the ET sought to overcome these challenges, they presented evaluability challenges for assessing the integration of cross-cutting issues. Table 9 lists the primary limitations affecting the evaluation. The Findings sections include specification of impacts on specific areas of inquiry.

Table 9 Key evaluation limitations

Limitations	Mitigation and impact on evaluation
Few third-party monitoring (TPM)/ post distribution monitoring (PDM) reports were made available to the ET. Furthermore, expected data based on the list of standard questions provided to the ET were not included in available reports.	Some relevant questions were included in primary quantitative and qualitative data collection to mitigate this limitation. However, there were very few TPM/PDM reports available to the ET, limiting the utility of this data source as findings came from few reports. Data was not disaggregated by gender or disability, limiting utility of analysis.
DfA restrictions limited women's participation in household surveys in Paktika and Badakhshan and no women were able to participate in the household survey in Nangarhar.	Mitigation measures included collaborating closely with community/religious leaders, employing trusted intermediaries, and use culturally sensitive approaches Despite these measures and support from UNICEF, no mitigation measures were feasible. While the total number of women surveyed can provide provincial-level results that are reasonably representative for Herat and Nangarhar (either separately or combined), [43] the sample sizes are insufficient to generalize results for women in Helmand, Paktika and Badakhshan. Therefore, quantitative results disaggregated by gender should only be considered representative of women in Herat and Nangarhar. While qualitative data collection with women was conducted in Badakhshan only, these activities were not planned in Paktika or Nangarhar.
Nine KIIs were unavailable, including all contacted stakeholders from UNICEF's Education section and a regional gender specialist. Additionally, available KIIs were available to the ET for limited time slots and were not always available for requested follow ups.	The ET worked with the UNICEF EM and WASH section to identify alternative key informants as feasible; education colleagues were identified but were not available. The ET requested follow ups when needed which some stakeholders were available for. The ERG meeting helped further validate findings. However, the ET was required to prioritize questions within the KII guide and was unable to go over all criteria in depth. This particularly affected assessing the integration of cross-cutting priorities.
Outside of the ACO WASH team, stakeholders at all levels had limited visibility of	The ET began all KIIs and FGDs with an explanation of the ECHO-supported WASH Programme and requested that respondents focus their responses on the situation between 2022 and 2023. However, as many WASH

[43] Marin of error by province is approximately ±10%; combined the margin of error is approximately ±7%

Limitations	Mitigation and impact on evaluation
ECHO WASH programming. High staff turnover further limited visibility.	interventions were implemented without stakeholder clarity on the funding source, the effectiveness of these mitigation measures were limited. This was especially complicated for IPs whose Programme Documents (PDs) were not specified by donor and for beneficiaries, who were not aware of who implemented programming in their communities. Additionally, there were few stakeholders that had been present in Afghanistan throughout the programme implementation period. These limitations hindered the utility of key stakeholders as information sources.
Discrepancies between beneficiary reporting in UNICEF ACO's data sources.	The assessment of the programme's results/outputs relied on three key sources of information: the ECHO Final Report, "WASH 2023 Database," and the "Activity Info Dataset", with some variations in beneficiary numbers identified between sources. For example: • The ECHO Final Report distinguishes ECHO-attributed results from those that were co-funded; and the WASH 2023 Database mentions "secondary donor" which includes both complementary funding and co-funding, with no distinction made. • Additionally, while the final report presented results for two result areas (R5 and R7), targets for some activities under both areas were unclear due to the similar nature of activities. The UNICEF WASH section is in the process of consolidating and validating information across these datasets. For reporting purposes, overall final achievements are based on reporting in the ECHO Final Report as the most valid data source. Discussion of results disaggregated by geographic area rely on the WASH 2023 Database and Activity Info Database as geographic disaggregation is not reported in the ECHO Final Report.
Limited availability of disaggregated data from secondary sources.	Primary data collection is disaggregated by gender and disability where relevant. However, as specified above, data was not disaggregated by gender or disability in TPM/PDM reports; information on disability was not systematically included within beneficiary data on the WASH dashboard. This limited the ET's ability to understand issues of equity and coverage.

5 Evaluation findings

55. The ET applied a combination of contribution analysis, qualitative content analysis, and triangulation with survey results, secondary sources, and the programme's administrative databases. Contribution analysis focused on identifying programme approaches and results that proved effective or otherwise, while understanding the related factors, such as contextual realities and operational bottlenecks. Qualitative content analysis enabled interpretation and categorization of responses, and triangulation ensured validation of findings across multiple data sources, providing a well-rounded assessment of the programme performance. Where necessary, additional details of the evaluation findings based on key informants and FGDs are provided in relevant appendices.

5.1 Relevance

EQ1. To what extent and how did the ECHO-supported WASH Programme fit the humanitarian context needs of the Afghan population including the vulnerable groups?

The WASH programme objectives align well with the most urgent WASH needs in Afghanistan. The inclusion of activities aiming to address water supply, hygiene and safe sanitation was highly relevant to the context. The ToC identifies relevant stakeholders and causal pathways for engagement. UNICEF's adaptive management and utilisation of monitoring data helped ensure implementation remained relevant.

The ET did not have access to sufficient data to assess the extent to which needs of women and PwDs were responded by the programme. However, UNICEF and IPs made every effort to ensure women were included in assessments and all outreach activities. Reaching PwDs was more difficult and largely remained limited to WASH interventions in schools and HCFs which were narrow in scope.

5.1.1 Design alignment with needs

EQ1.1: To what extent did the design (objectives and interventions) of the ECHO-supported WASH Programme align with the humanitarian WASH needs of the Afghan population, especially children, adolescent girls and boys, and vulnerable groups such as those with disabilities and internally displaced persons?

56. **UNICEF's dual approach, combining quick-impact activities for emergency response with more durable solutions is relevant to the needs of populations in Afghanistan.** The strategy aligned with the integration of both strategies in the Humanitarian Response Plans (HRPs) for these years. Furthermore, the specific activities/objectives included in the ECHO proposal and crisis modifier (CM) are relevant to contributing to both 2022 and 2023 WASH Cluster Objectives. The linkages with the HRP were made more explicit and comprehensive with the inclusion of Result 7 in the CM (more details in Appendix 16). Finally, the ToC correctly identified the importance of working with multiple stakeholders and sectors to achieve objectives and the necessity of aligning to national standards for implementation.

57. **WASH activities were designed to meet the urgent needs of the population groups targeted within WASH activities with considerations described to meet the differentiated needs of vulnerable groups.** Programme design documents highlight intentions to consider physical and social barriers in designing responses to ensure that the differentiated needs of different populations were considered, especially women, girls, and PwD (further detail provided in Appendix 16). The focus on including women and girls in design considerations was similarly reflected within KII feedback though stakeholders noted consistent challenges in ensuring women were meaningfully involved in design decisions, particularly as UNICEF and IPs navigated the ban on women working. Stakeholders did not consistently note outreach to people with disabilities, though time limitations within KIIs limited ET ability to consistently probe on this point.

58. The inclusion of WASH NFIs for menstrual hygiene management (MHM) and consideration of MHM needs in infrastructure design were also anticipated in programme documents. Set standards for WASH intervention design considered the specific needs of PwDs, women, and girls. The provision of WASH NFIs to newly displaced people in combination with water and sanitation was relevant to support the needs of economically vulnerable populations, especially considering overcrowded conditions with a high risk of disease outbreak.

59. **The data sources used to prioritise WASH response for ECHO programming suffer from some representation gaps and information gaps.** The inclusion of vulnerable people in needs assessments and questions within these assessments to adequately capture the differentiated needs of these populations is stated in donor reporting and confirmed to some extent through KIIs and literature review. However, access to women respondents within these surveys was consistently a challenge made much harder following the DfA's ban on women workers. Availability of disability data also remains a challenge in Afghanistan. Additionally, the fact that UNICEF and IPs were not utilising standardised needs assessment formats or processes meant that UNICEF did not have oversight over the adequacy of information collected about the specific needs of vulnerable populations within IP-conducted needs assessments.

5.1.2 Targeting and outreach alignment with needs

EQ1.2: To what extent did the targeting and outreach strategies of the ECHO supported WASH Programme align with the humanitarian WASH needs of the Afghan population, especially those with disabilities, IDPs, and regions affected by droughts, acute watery diarrhoea, and conflict-related emergencies?

5.1.2.1 Inclusivity of targeting and outreach strategies

60. **The anticipated extension of humanitarian services was not fully realized, as less than half of the districts reached with ECHO funding were considered 'newly accessible'.** Geographic targeting of the 'newly accessible' areas, as classified by United Nations Office for the Coordination of Humanitarian Affairs (OCHA), aimed to extend services to previously under-served regions and

increase the inclusivity of humanitarian services. However, final intervention data from the WASH 2023 dashboard shows that many districts where ECHO-supported WASH funds were used were not considered 'hardest to reach' (48 of the 83 districts were not considered newly accessible), though districts may have been covered through other funding. This occurred because implementation decisions at community level were based primarily on applications raised by communities to the MRRD (which either did not show higher needs or were not included in OCHA's classification of the newly accessible districts[44]) and the location where disasters occurred (which were not necessarily in newly accessible areas) rather than prioritisation of increasing access nationwide.

61. **UNICEF extenders and IPs demonstrated flexibility and creativity in identifying solutions to target and engage with women despite increasingly limited operational space**. Stakeholders stressed the variety of information channels and actors engaged to ensure outreach to women. Interviewees were optimistic about the effectiveness of these efforts while recognizing continued challenges. Integration of WASH outreach within health and nutrition responses, when the ban on women workers was rescinded, was especially important to their success in reaching women. Conversely, the absence of women staff within the MRRD, and continued ban on women working in WASH outreach, limited women's inclusion. Advocacy from the cluster was also credited with creating some space for women staff in WASH programming. Importantly, stakeholders emphasized the localized nature of both successes and challenges; without reversal of the ban for the WASH sector, leniency in implementation came down to local DfA interest in upholding national edicts. Community-level responses reflect the localised nature of consultations with participants in 4 of the 11 FGDs (36%) highlighting limitations in consultation with women.

62. **There is insufficient evidence to confirm the extent to which vulnerable people, including people with disabilities, were systematically included in outreach activities.** As noted in the Limitations section, the combination of limited availability of interviewees and extensive scope of the evaluation prohibited full investigation of all criteria. When asked about inclusion, stakeholders focused on the inclusion of women. The final report submitted to ECHO states that 'special consideration' was provided for ensuring PwD were consulted for feedback on the location and safety of water points. Stakeholders who were specifically asked about disability inclusion were generally positive about their ability to include PwD in outreach and did not state any conflicts with including different segments of the population more generally. The exception was one UNICEF stakeholder who raised a concern that implementation through CDCs was less attentive to the community engagement components of programme design and implementation. There was no documentation available to confirm systematic inclusion of different population groups.

63. Data from the household (HH) survey suggests no substantial differences in outreach inclusion according to respondent demographics, either from NGOs/CSOs or other information sources (Table 10). Most community-level stakeholders were similarly positive about inclusion in FGDs, asserting that "everyone's" views were reflected in design, though often indirectly through community leaders, though limited attention to the needs of vulnerable populations were reported by some participants. However, stakeholders in four of the FGDs noted gaps in outreach to the detriment of women, poor and disadvantaged populations and those that had recently moved to the area.

Table 10 Inclusion in WASH outreach activities

Disaggregating factor	Ever visited by NGO/CSO to provide information or on WASH	Ever received information from any source on WASH
Overall	33%	34%
Gender		
Women	29%	35%
Men	36%	34%
Disability		

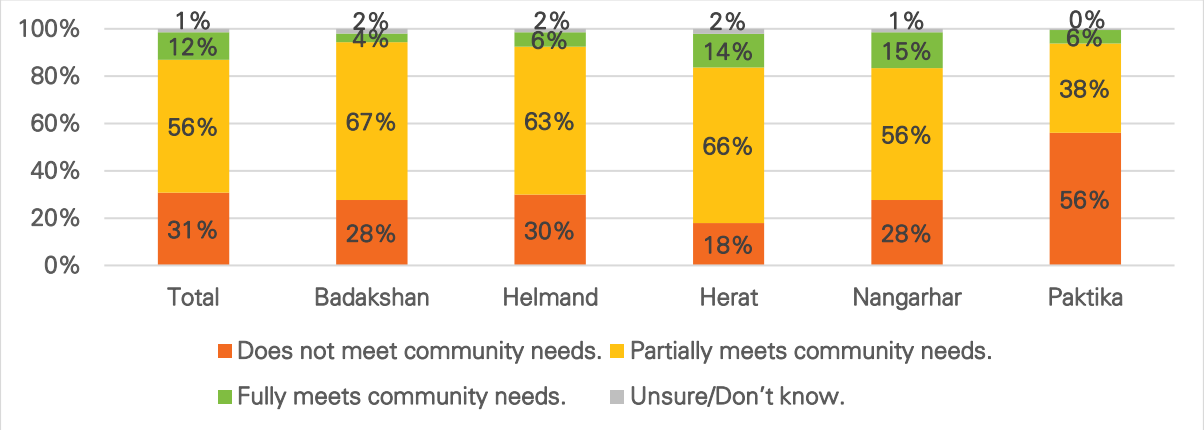
[44] Neither UNICEF nor the ET had access to all MRRD applications to confirm.

Disability in the HH	30%	33%
No disability in the HH	32%	32%
Displacement status		
Not recently displaced respondents	33%	35%
Recently displaced respondents	35%	31%
Wealth Quintile		
Highest wealth quintile	39%	37%
Lowest wealth quintile	20%	32%

Source: Evaluation HH survey.

64. **The response was highly relevant for population needs however it was insufficient to address all WASH needs.** Nearly all key informants stressed that funding constraints meant that many vulnerable communities were being left out and that all WASH needs within targeted communities could not be fulfilled. This reality was reflected in qualitative data collection activities where community-level stakeholders were appreciative of services delivered but highlighted major gaps in addressing WASH needs. The household survey also highlighted gaps in addressing need, with at least three quarters of respondents from all provinces noting that WASH facilities either "partially" or "do not" meet community needs (see Figure 2)

Figure 2 Adequacy of general WASH facilities (n =1940)



Source: Evaluation HH survey

65. **There was a disconnect between UNICEF ACO and ECHO's priorities in terms of geographic targeting.** The proposal used language on "newly accessible" districts which the ACO defined based on OCHA's categorization derived from three factors related to inaccessibility: (1) physical constraints, (2) conflict intensity and spread, and (3) complexity of actors. However, ECHO understood this terminology only as physically difficult to access. This disconnect created initial challenges over targeting as the ACO negotiated for "newly accessible" districts to be included.

5.1.2.2 Adaptations

66. **Activities implemented through the ECHO-supported WASH Programme were largely standardized, with no major adaptations to the design.** The main adaptations concerned re-engagement with CDCs for implementation, altering outreach efforts to maintain contact with women following the DfA ban, and improvements following monitoring activities.

67. Re-engaging CDCs as implementing partners was a major shift in the ECHO WASH strategy, with stakeholders divided on the utility of this approach. Different types of stakeholders praised their efficiency and effectiveness for WASH implementation. Other partners, while acknowledging the lower implementation costs, warned of reduced programme quality and sustainability. UNICEF's standard operating procedures (SOPs) acknowledge potential capacity concerns, utilising

technical extenders within the PRRD (before they have been fully removed) and support from Zonal Offices as a key mitigation strategy.

68. The use of *mahrams*[45] and integration of messaging within health and nutrition programmes were key adaptations to ensure women's inclusion in activities following the DfA's ban on women working in (I)NGOs. The low-to moderate success of these adaptations was largely contingent on leniency at the local level. Despite successes, stakeholders emphasized the continuing challenges in accessing women, even with adaptations.

69. **Implementers adapted or improved activities following feedback from various monitoring sources, primarily visits from TPMs.** There were multiple avenues of monitoring to provide feedback to UNICEF including UNICEF staff/extenders, TPMs and partner/WASH Cluster reporting. Improvements following monitoring visits were confirmed through stakeholder feedback as well as through a review of TPM reports where previous issues were identified as resolved. Examples of specific adaptations noted in TPM reports included changing the depth/dimensions of boreholes following hydrological assessments, changes in the number of stand taps/water meters (both increases and decreases compared to the bill of quantities (BoQ), and changes to the solar system requirements.

5.2 Coherence

EQ2. To what extent and how well did the ECHO-supported WASH Programme integrate and collaborate with UNICEF's other humanitarian education, health, and nutrition interventions, and how effectively did it complement humanitarian interventions by other donors or partners in Afghanistan?

UNICEF's ECHO-supported WASH interventions demonstrated strategic alignment with other key sections within the organization, the broader basic services prioritization of the DfA, and the WASH sector programming of other partners and donors. Ambiguous terminology in the CM created initial disconnects of expectations with ECHO which were subsequently overcome. Complementarities are more evident at the design level. Integration at the implementation level faced challenges for a variety of reasons though integration with health and WASH sectors internally and externally produced notable benefits. ECHO funding the cluster coordinator positions was particularly important for increasing response coherence.

5.2.1 Internal coherence

EQ2.1: To what extent did the ECHO humanitarian WASH interventions integrate and collaborate with UNICEF's other humanitarian education, health, and nutrition interventions in Afghanistan?

5.2.1.1 Overlap of targeting

70. **UNICEF's ECHO funded WASH interventions are implemented alongside other sections at the provincial level; integration of service provision at community-level is unclear.** ECHO WASH funding was implemented alongside at least one other section at the province-level.[46] Notably, child protection interventions were implemented in all provinces where ECHO WASH funding was utilised. However, understanding targeting overlaps beyond the provincial level is not feasible as monitoring and information management systems at the time of ECHO WASH implementation were insufficient to provide information on programme integration at the community level. Importantly, as highlighted in the UNICEF L3 Evaluation (2023)[47], the ACO has made efforts to increase the coherence of ACO-wide monitoring and information management systems, notably the development of a centralized Afghanistan Management Information System (AMIS), though this system was not operational to provide information on ECHO-supported WASH Programme integration.

71. UNICEF stakeholders confirmed theoretical commitment to multi-sector programming in line with the programme's ToC while acknowledging difficulties in ensuring practical convergence during

[45] Mahrams are close male relatives with whom a woman is not obliged to wear hijab at home, and who acts as her guardian and protector.
[46] See Appendix 7 for a map providing overlap at provincial level.
[47] UNICEF. (2023). Evaluation of the UNICEF L3 Response in Afghanistan.

implementation. KIIs highlighted several challenges in multi-stakeholder programming including the urgency of the response, siloed information management systems and the requirement that UNICEF's implementation be approved by relevant ministries, which did not always allow overlapping assistance given prioritization of different areas between the different ministries. These challenges were similarly reflected in the L3 evaluation.

72. **Interviewees highlighted particularly successful synergies with health, nutrition and child protection.** Health and nutrition synergies were described as "natural" by UNICEF stakeholders. Regular meetings between section staff and the development of joint strategies further enabled these synergies. The coverage of WASH topics within health and nutrition trainings/awareness sessions, and vice versa, were also highlighted. In select TPM reports, the coverage of nutrition messages was mentioned.[48] Despite this success, stakeholders also acknowledged some challenges in integrating WASH and health activities, particularly in implementing hygiene promotion orientations which were often conducted independently. This led to duplication of efforts and inefficient use of resources, suggesting a need for merging these activities to achieve cost savings and improve effectiveness. The final report to ECHO confirmed that WASH investments supported child protection, including investing in WASH in child-friendly spaces.

73. **Feedback about synergies between WASH and education were mixed.** UNICEF's education colleagues reported no synergistic planning under the ECHO grant. WASH colleagues acknowledged that coordination with Education was not systematic but clarified that WASH does make efforts to create synergies. Specifically, WASH coordinates to get initial lists of prioritized schools from Education colleagues. However, WASH has limited control over final decisions on WASH support in schools, as approval must be coordinated with the MoE at the central level. This reliance on ministry engagement highlights challenges in expected synergies outlined in the programme's ToC.

74. The WASH in schools' activities were expected to be part of an integrated service delivery approach where feasible, whereby the project would provide clean water to the same communities where facilities were rehabilitated/constructed in schools.[49] This was accomplished to some extent at UNICEF ACO-level with 70 of the 173 schools (51%) receiving both WASH services at school and community levels.[50] Of the two schools specified to have used ECHO WASH funding in the WASH dashboard, one was located in a community also receiving water supply system support. The ECHO final report does not document any outcome-level achievements indicating collaboration between the WASH sector and the Education sections.

5.2.1.2 Specific benefits of integration, opportunities and challenges

75. **Complementary funding for programme interventions and incorporating WASH messaging within outreach efforts of other frontline workers expanded the overall coverage of WASH activities.** Based on the WASH 2023 dashboard and KIIs, UNICEF was able to extend household-level connections through complementary funding from the Bureau for Humanitarian Assistance (BHA) funding, the United States Agency for International Development (USAID), Swedish International Development Cooperation Agency (Sida) thematic WASH funds, and humanitarian funds. According to KIIs, the integration of WASH messaging into the communications responsibilities of child protection and community health workers increased coverage of hygiene education messages for children and caregivers attending child-friendly spaces.

76. **Complementary funding enabled WASH implementation.** Household connections were required for MRRD approval for implementation. However, ECHO restrictions precluded funding these connections. Therefore, the use of complementary funding was essential to ensure MRRD approval for implementation.

77. **Internal synergies improved gender and protection outcomes of the response**. These benefits are related to reduced gender-based violence (GBV) risk exposure assumed through increasing

[48] TPM reports are not uniform on the type of information presented, thus it is not feasible to determine the frequency that these topics were integrated based on TPM data.
[49] UNICEF, "Crisis Modifier."
[50] The total of 173 schools assisted with WASH includes all donor funding to the ACO, not only ECHO WASH support.

access to household water connections. While WASH investments in schools and HCFs addressed one of the barriers to service accessibility, complementary inputs are needed for more meaningful impact (see section 5.8.3 for further detail).

78. **The success of integrating health, nutrition, and WASH responses was repeatedly highlighted by key informants as preventing water borne diseases and reducing malnutrition.** UNICEF stakeholders described an AWD reduction task force connected to the ACO that included colleagues from WASH, nutrition, health, SBC and IPs who met weekly during outbreaks. This integration is broader than UNICEF, as detailed in section 5.2.2 below. Reductions in malnutrition were also mentioned, though less frequently.

79. **There was no convergence on the main barriers to integration**. Stakeholders listed several internal and external factors including limited funding, limited strategic focus on integration within UNICEF at central or sub-national levels, urgency of response/shorter grants preventing proper planning, lack of flexibility from ECHO in terms of targeting, the need to reconcile internal prioritisation with ministry approvals, localized adaptations preventing a standard model of integration, complexity of coordination with multiple IPs, internal information siloes, and the broader emergency set up nationally where clusters are siloed.

80. **Opportunities for improving integration focused on institutionalizing collaboration through regular meetings or changing contract modalities.** The SBC section was highlighted as being capable of enhancing inter-sectorial coherence because they worked across all sections. Embedding multi-sectoral components within sectorial programme documents/partnership documents was also mentioned. Stakeholders identified regular team meetings as being good practices to ensure increased coherence in the response, as done in the AWD task force and joint assessments.

5.2.1.3 Compliance with SPHERE standards[51]

81. **Integration and compliance to SPHERE WASH standards were generally considered in design with some deviations reported in implementation.** Result 7 and Result 5 are described as following both the SPHERE standards and local standards in provision of lifesaving and resilient WASH interventions in the single form and CM.

82. Most design standards were aligned with SPHERE standards. There is some ambiguity on provision of water given that the indicator measurement allows for reporting at a minimum of 7.5l/p/d compared to the general standard (outside of acute drought conditions) of 15l/p/d. The WASH NFI activities also reflected some deviation as the kits did not include a potty, scoop or nappies and soap quantities are slightly below standard (240g/person versus 250g/person). Also, there was no specification in design that handwashing stations would be provided alongside WASH NFIs. UNICEF WASH stakeholders also noted some pressure from the PRRD regarding variations in national standards with SPHERE standards but specified that they were able to maintain SPHERE standards. However, TPM reports identified compliance issues in water quality and quantity as well as latrine quantity (see Appendix 18 for further details). Links to the protection principles and the Core Humanitarian Standard are discussed in section 5.8.4.

5.2.2 External coherence

EQ2.2: To what extent did the ECHO funded humanitarian WASH interventions by UNICEF complement (or lack complementary with) humanitarian interventions and support by other donors and partners in Afghanistan (external coherence)?

5.2.2.1 Overlap of targeting and priorities

83. **Stakeholders confirmed that UNICEF coordination with the WASH Cluster and the DfA ensured work complied with standards and avoided duplication.** WASH cluster partners are active in all provinces with coordination at provincial and regional office levels. Regional inter-cluster coordination group meetings, regional humanitarian team meetings and coordination with national level counterparts were also conducted.[52]

[51] International (SPHERE) and national WASH standards and guidelines are presented in Appendix 18.
[52] UNICEF, "Modification Request."

84. **OCHA's inter-cluster prioritization exercises aimed to enhance targeting strategies, but variations in criteria prevented full overlap.** Data gaps and limited resources hindered achievement of greater complementarities. Funding constraints were also frequently cited as a barrier to ensuring effective multi-sectoral responses.

85. **The prevalence of complementary funding and co-funding from USAID's Bureau for Humanitarian Assistance (BHA) demonstrated coherence with other donor priorities.** Several activities under UNICEF's ECHO responses were delivered through complementary funding to align with national policies, demonstrating relevance to the context. This arrangement enabled coverage for all project components to reach over 1 million people under Result 5 alone; the final report to ECHO did not specify the number of people reached through co-funding under Result 7.[53] Additionally, some PDs signed with partners were based on funding from multiple donors.

5.2.2.2 Specific benefits of integration

86. **Integrations between the health, nutrition, and WASH sectors improved the AWD and malnutrition response.** These collaborations were both internal and more broadly between the Health, Nutrition and WASH Clusters, including a joint workshop, and cascaded training for partners. Stakeholders emphasized the development of the Integrated AWD and Response Plan as particularly important for improving coverage and complementarities.

87. Internal stakeholders either did not mention coordination with the CP cluster or were unsure of coordination with the CP cluster. As discussed, despite the ET efforts, no KIIs with Education stakeholders could be convened limiting understanding of collaboration with the Education cluster; no visible synergistic planning or implementation emerged during discussions with WASH colleagues except the collaboration with education authorities to seek permission for accessing schools during implementation.

88. **Funding cluster coordinator positions through ECHO increased the quality and coherence of the overall response.** Stakeholders confirmed that the expansion of coordination to regional level improved the response through strengthened sub-national coordination mechanisms to ensure a fit-for-purpose response as anticipated in the ECHO proposal and the cluster coordination identified as strategically important in the programme's ToC.[54] The need to develop localized solutions, emphasized by stakeholders, supports the funding of sub-national coordinators to address variations and strengthen the design of tailored response.

89. **Funding for the groundwater monitoring system reportedly led to significant advancements in knowledge generation concerning groundwater management.** UNICEF organized a national-level workshop involving international stakeholders to address the long-term chronic nature of emergency needs using ECHO funds. According to UNICEF stakeholders, this workshop led to the development of a report on the strengths/weaknesses of the groundwater monitoring spurring further interest and contributing to system strengthening on the topic.

5.3 Coverage[55]

EQ6. To what extent and how did the ECHO supported WASH Programme cover urgent WASH needs for crisis-affected population groups, including IDP camps, areas hit by natural disasters, underserved regions, schools, health facilities, and host communities?

UNICEF and IPs were successful at covering wide areas of the country, increasing water supply in all zones (100%), and conducting hygiene activities more than half the provinces (65%). Sanitation and WASH supply had less coverage (Table 11). A total of 19 provinces, including 33 districts and 46 villages received ECHO support as the primary grant for water supply interventions, both in emergency contexts and as a long-term solution for communities facing water scarcity or shortages. WSS interventions emerged as the primary focus of the programme, achieving extensive coverage across all five zones. Stakeholders confirmed services were delivered to those demonstrably in need;

[53] UNICEF Final report.
[54] UNICEF, "Modification Request."
[55] The placement of 'coverage' criteria findings has been moved-up here to respond to UNICEF feedback, however, the original serial number of the EQ and sub-questions was retained to ensure consistency with the evaluation matrix structure.

the absence of comprehensive data at village level and short implementation timelines prevents UNICEF from confirming that those villages in greatest need have been consistently prioritized.

90. The coverage analysis of the ECHO WASH interventions relied on the "WASH 2023"[56] online database, selected for its consistency and additional features, while the "Activity Info Dataset" was used for cross-validation[57]. Data was filtered by primary donor to ensure accurate attribution. Appendix 19 provides a comprehensive analysis of coverage data disaggregated by zones, provinces, districts, types of projects, IPs, and beneficiaries using the WASH Database 2023.

Table 11 Coverage (%) of UNICEF WASH programme

Intervention types and Total areas (Coverage)	Total Zones 5 No. & (%)	Total Provinces 34 No. & (%)	Total Districts 400 No. & (%)	Villages covered
Water supply	5 (100%)	19 (56%)	33 (8%)	46
Hygiene activities	4 (80%)	22 (65%)	34 (9%)	70
Sanitation activities	3 (60%)	5 (15%)	8 (2%)	16
WASH supplies distribution	2 (40%)	8 (24%)	27 (7%)	45
WASH in schools	4 (80%)	13 (38%)	24 (6%)	52
WASH in health facilities	3 (60%)	8 (24%)	22 (5.5 %)	32

Note: In total, Afghanistan includes 5 geographic zones, 34 provinces and 400 districts. The total number of villages per district is unknown hence percentage is not given in the last column.
Source: WASH 2023 database; and UNICEF updated dataset for WASH in institutions[58]

EQ6.1: To what extent did the ECHO-supported WASH Programme prioritize and address urgent WASH needs for the most affected population groups and regions, and were there any groups or regions that remained uncovered, and if so, what were the reasons or factors?

91. All key informants agreed that the ECHO-supported WASH Programme effectively addressed urgent WASH needs for crisis-affected populations, including IDP camps, disaster-hit areas, underserved regions, schools, health facilities, and host communities by employing a multifaceted targeting approach.

92. **UNICEF used a vulnerability index to prioritize WASH needs at district level.** UNICEF utilized several sources of information to compile a WASH Vulnerability Index that enabled prioritization of the most vulnerable populations at district level and determine where to work and which interventions were needed in each location. The WASH Vulnerability Index Score was compiled from data from national assessments/surveys like MICS, the Whole of Afghanistan (WoA) survey, Humanitarian Needs Overview (HNO), HRP, collaboration with WASH Cluster partners, input from local authorities and real-time emergency needs assessments.

93. **Funding was appropriately allocated based on community-level needs identification.** Stakeholders explained that provincial and, to a lesser degree, district-level data provide an overview of the severity of needs. However, the significant variation at the community level necessitates more localized assessments. The localized strategy of determining intervention decisions based on village-level data, rather than pre-positioning funds based on district-level vulnerability indices (which may mask localized variation) ensured that funding was prioritised based on the most accurate data. This variation at community level helps explain why programme interventions occurred in some districts with WASH rankings indicating lower overall water and sanitation needs according to the UNICEF WASH dashboard.

94. **Stakeholders were very clear that verification exercises ensured support went to those demonstrably in need.** Comprehensive, village level data is unavailable in Afghanistan and would

[56] https://app.powerbi.com/groups/me/reports/d44d8c05-2f23-412f-adea-3f67b12a34a9/ReportSection?ctid=77410195-14e1-4fb8-904b-ab1892023667&openReportSource=ReportInvitation&experience=power-bi
[57] The coverage analysis of the ECHO WASH interventions utilized two key databases: the comprehensive "WASH 2023" online public database and the "Activity Info Dataset," both developed and maintained by UNICEF Afghanistan. After a careful comparison of the two datasets, the "WASH 2023" database was selected for primary use, given its consistency in reported data and additional features such as detailed disaggregation, a downloadable format, cost-per-beneficiary information, and a Pivot-compatible layout. Simultaneously, the "Activity Info" dataset was thoroughly analyzed to cross-validate data and to verify the information reported in the Final Report of the ECHO WASH Programme.
[58] Dataset received on October 2, 2024, as part of ERG feed after presentation of preliminary findings to the ERG

be onerous to attempt and impossible to collect within the timeframe of programme implementation. In the absence of this data, UNICEF and partners approached implementation pragmatically, focusing on filling identified needs with available resources. This approach was relevant given the data limitations and timeframe for implementation but did not necessarily ensure that the most vulnerable were assisted with the limited funds available.

95. **While the ECHO-supported WASH Programme coverage strategies aimed to comprehensively address urgent WASH needs, some areas were not fully served due to technical, geological, or social factors.** In a few cases, communities identified for water supply schemes were excluded after feasibility assessments revealed deep water levels, poor water quality, or social conflicts. Additionally, some projects were abandoned even after completion of drilling based on technical problem or sustainability issues, despite following proper procedures. Stakeholders did not share specific information about these locations or communities. However, these instances were rare, and the programme did not discriminate against any group.

96. UNICEF and IPs provided emergency support to the most affected families, including those impacted by earthquakes, internal displacements (IDP camps), and returning families. More information on all numbers/facts on coverage analysis is drawn using 2023 WASH Database (attributed to ECHO Grant) **and are available** in Appendix 19 **that provides disaggregated analysis by intervention type, zone, province, district and no. of communities benefitted.**

97. **Water Supply Activities:** A total of 46 WSS projects were implemented across the five zones, with nearly equal distribution. The programme's varied geographic coverage aligned with the country's evolving emergency needs, particularly considering the two significant earthquakes that mainly affected Paktika (Central Zone) and Herat Province (Western Zone).[59] The Herat earthquake most affected six districts for which the ECHO-supported WSS interventions implemented 4 WSS projects in three districts (Injil, Guzara, and Pashtun Zarghun).

98. All respondents acknowledged that those villages with poor water supplies were prioritized in emergency affected (earthquake, floods, drought, or conflict) districts when selecting sites for rehabilitation or construction of new water supply systems, based on assessment by UNICEF staff supported by WASH extenders, members of CDCs, and prioritization by local authorities – well documented in the ECHO Report as well. These local assessments were undertaken by relevant implementing partners (baseline type or feasibility), and any village/community level baseline information on WASH indicators is not documented in the final report to ECHO or any ECHO other documents.

99. **Hygiene Activities:** Hygiene promotion (HP) interventions emerged as the second largest component of the programme in terms of geographic coverage, reaching 4 out of 5 zones and reinforcing the programme as a substantial national initiative. HP locations were linked with the geographic coverage of other associated primary activities (WSS, sanitation). It is also linked to limitations in accessibility to households or families and the availability of women staff for HP activities. The ECHO final report mentions that the 'population affected by a natural disaster has been taken into account for the distribution of WASH supplies and hygiene promotion' indicating equity-focused coverage of interventions.

100. **Sanitation Activities:** Sanitation interventions[60] were identified as the third largest component of the ECHO supported WASH Programme, implemented across 3 out of 5 zones, underscoring its significance as a substantial national initiative. These sanitation activities were often conducted alongside other key interventions such as hygiene promotion and the distribution of hygiene supplies. However, several qualitative responses indicate that water access interventions were largely facilitated through water trucking to complement and address the urgent sanitation needs of the affected communities. In response to the Herat earthquake, emergency and/or urban

[59] Series of earthquakes hit Herat Province in western Afghanistan between on 7 and 15 October 2023. As of 19 October: 1482 deaths; 2100 injuries; 3,330 homes destroyed- 43,400 people directly affected; 40 health facilities damaged. Around 43,400 people are directly affected across six districts: Injil, Kushk/Rabat-e-Sangai, Zindajan, Gulran, Herat and Kohsan of Herat Province. Afghanistan: Earthquakes in Herat Province; WHO, Health Cluster Situation Report No. 9 (17-19 October 2023).
https://www.emro.who.int/images/stories/afghanistan/Earthquake_in_Herat_AFGHANISTAN_Health_Sitrep_09.pdf

[60] Types of Sanitation Activities implemented; A) Construct emergency and/or urban communal latrines and/or with handwashing facilities; B) Construct emergency household latrines; C) Rehabilitate emergency and/or urban communal latrines and/or with handwashing facilities.

communal latrines with handwashing facilities were provided along with hygiene promotion activities implemented in 6 districts (Gulran, Guzara, Injil, Pashtun Zarghun, Zindajan). Overall, the sanitation activities covered 16 villages across all locations (3 Zones, 5 provinces, and 8 districts).

101. **WASH Supplies Distribution (WSD):** WSD had the smallest geographic coverage within the programme concentrated in the Central and Western Zones, covering 8 provinces, 27 districts, and 45 villages. The ECHO final report mentions *'WASH supplies were also distributed to the health center treating children with SAM and people affected by acute watery diarrhea with dehydration integrated with hygiene promotion'*[61] widely acknowledged by almost all key stakeholders.

102. **WASH in institutions:** Coverage was broader for WASH in schools (four zones) compared to WASH in HCFs (three zones). Provincial-level coverage was also broader for WASH in schools (13 Provinces) compared to WASH in HCFs (8), though district-level coverage was more similar (24 districts covered with WASH in Schools, 22 covered with WASH in HCFs).

5.4 Effectiveness

EQ3. To what extent were the stated objectives and set targets of the ECHO-supported WASH Programme[62] achieved, and how effectively have the programme activities facilitated access to WASH services for the affected population (rights holders)?

Overall, the programme is assessed as 'mostly effective' in achieving the stated targets and the key objectives of providing rapid lifesaving WASH response activities to the most vulnerable population as well as improving vulnerable communities' resilience by providing sustainable access to clean drinking water sources.

The ECHO-supported WASH Programme demonstrated substantial progress in achieving its stated objectives by improving access to clean and safe drinking water for vulnerable populations in disaster-prone areas and some newly accessible districts. Through the construction and rehabilitation of water systems, the programme increased communities' reliable access to improved water sources.

Providing water systems at both household and community levels reduced reliance on unimproved water sources, such as surface water and water trucking. This transformation led to a notable improvement in water access, particularly for communities previously dependent on temporary or less reliable solutions.

In addition to water access, the programme's rapid emergency response, supported by distribution of pre-positioned WASH supplies, water trucking, construction of emergency latrines and educating communities through hygiene messages, enabled timely interventions during AWD outbreaks and natural disasters, such as the Paktika and Herat earthquakes. Furthermore, the programme integrated its interventions with health and nutrition sectors, addressing root causes of issues like diarrhoea and malnutrition, while also strengthening groundwater monitoring systems to address drought and natural disasters effects in the long run.

The programme was mostly successful in reaching marginalized and previously inaccessible regions, with nearly half of activities implemented in newly accessible districts (35 of 83). Expanding service to these areas provided essential WASH services to some of the most underserved populations. This achievement highlights the programme's success in extending its reach to the most vulnerable groups, in alignment with its objectives.

5.4.1 Programme achievements

EQ3.1: How successful was the ECHO-supported WASH Programme in achieving (or lacking) its planned results around water supply, sanitation, and hygiene?

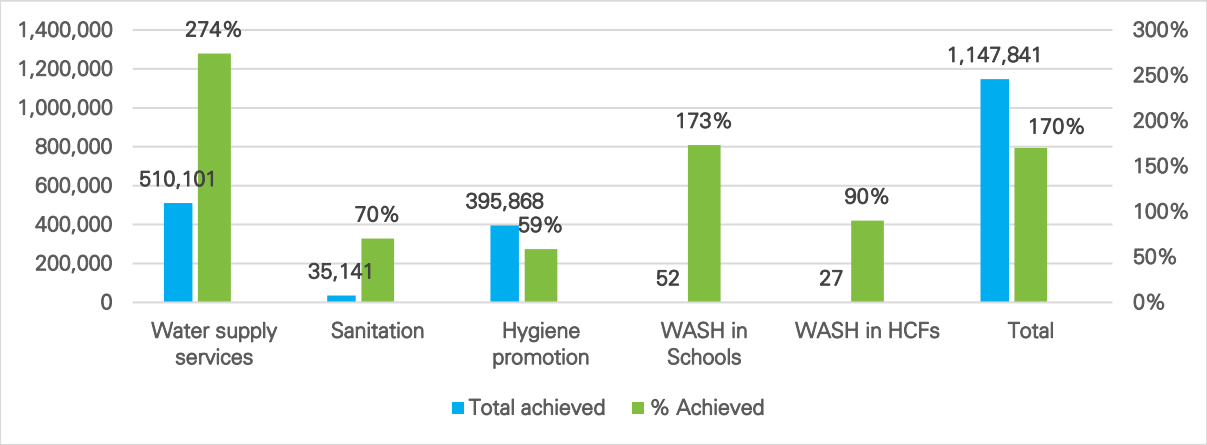
EQ3.2: To what extent did the ECHO-supported WASH interventions enhance access to and use of water supply, sanitation, and hygiene facilities/services for the target population groups and areas at all levels (household, community, health facilities, and schools)?

[61] UNICEF ECHO WASH Final Report.
[62] Three key components: a) water; b) sanitation services; and c) hygiene promotion, supply distribution and behaviour change.

103. The ET used cumulative results from the ECHO Final Report to assess results. Disaggregated figures are based on the WASH 2023 Database and Activity Info Dataset. As noted in the limitations, there is some discrepancy in these numbers which cannot be reconciled under UNICEF ACO's current data management systems.

104. The programme's cumulative achievements stand at 170% in terms of reaching the planned number of beneficiaries benefitting over 1.1 million people (Figure 3).[63] Water supply projects benefitted the greatest number of people (510,101) followed by WASH Supplies Distribution and Hygiene Promotion (395,686). The overall achievement was largely due to the 274% achievement of the water supply component. There was underachievement for the other two components (sanitation and hygiene promotion) at 70% and 59% respectively. The component-wise achievements for WASH in Schools was overachieved (173%) while most of the planned activities in health care facilities were achieved (90%).[64]

Figure 3 Overall UNICEF ECHO supported WASH Programme results against targets



Source: UNICEF ECHO WASH Final Report

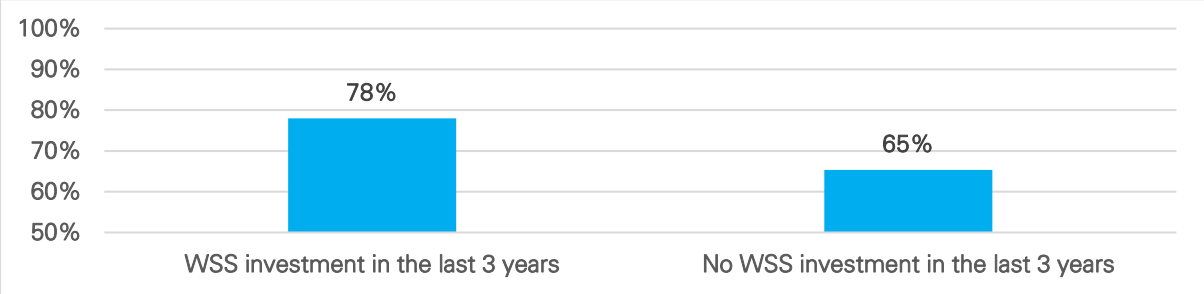
105. The quantifiable assessment of other activities such as support to groundwater monitoring were excluded for lack of any specific targets in the proposal or in the final report. However, all these activities and their contributions have been assessed qualitatively using contribution analysis and are presented in paragraphs 110-112. Despite the mixed output level achievements, the ECHO WASH support was much appreciated by all stakeholders in addressing critical gaps in WASH funding in the country, particularly during political transition and to respond to various natural disasters experienced in the country during 2022-2023. The ECHO funds were also used for procurement of WASH supplies including 12,011 Family Hygiene Kits, 1.3 million bar soap and 20 Collapsible Water Tanks, 1500l with the distribution system. A few UNICEF officials reflected concerns on the sufficiency of distribution of soap bars where one individual received 2 soap bars for 3 months.[65]

106. **Water supply:** The ECHO-supported WASH Programme made significant progress in improving water access by focusing on the construction and rehabilitation of water systems. The Programme ensured that communities had reliable access to clean, safe drinking water, which was essential in reducing health risks, especially in conflict-affected and disaster-prone areas. Survey results indicate that water systems are more consistently available after WSS infrastructure investments. Respondents in households where UNICEF or other actors had implemented activities to improve water access were more likely to report that their primary water source for drinking was available year-round (78%) compared to those where no water system rehabilitation was reported (65%, see Figure 4). For those reporting no WSS investments, they were most likely to report water was unavailable in the dry season (48%) while those

[63] Total of 1,147,841 per the ECHO WASH Final Report.
[64] These numbers are count of institutions which received ECHO supported WASH services primarily hygiene promotion and WASH supplies mainly soap bars and a few other items related to MHM.
[65] Distribution of soap bars (226,190 people, 2 bar of soap (250 gr) per person for 3 months).

reporting WSS investments were more likely to report non-availability of water in the rainy season (48%).

Figure 4 Percent of respondents reporting year-round availability of water sources, by WSS intervention status



Source: Evaluation HH survey

107. A key achievement was the implementation of 46 water projects, out of which 38 (83%) were solar operated benefitting 121,571 beneficiaries, representing 93% of the total beneficiaries (130,703) of all 46 water projects[66] across the country. These projects demonstrated the programme's commitment to innovative solutions such as renewable energy and tackling water access challenges. The integration of solar technology was particularly beneficial for remote or off-grid areas, ensuring continuous access to safe water and supporting climate resilience.

108. The Programme demonstrated success in transforming water access patterns across Afghan communities, though geographic coverage was limited considering the overall WASH needs of the entire population (as per WASH 2023 database: 46 WSS projects were executed benefitting a total of 110,263 beneficiaries attributed to ECHO grant as the primary donor). A key accomplishment was lessening communities' reliance on unimproved water sources such as surface water and water trucking and shifting them to accessing water from more sustainable water sources at both household and community levels.

109. The Programme delivered water supply systems to vulnerable populations across Afghanistan including to particularly marginalized districts in remote and previously inaccessible regions where access had been severely limited for decades. The ECHO support was a timely intervention of high significance, particularly because it was implemented during the regime transition in Afghanistan, a period marked by increased access and decreased international financing, resulting in a large increase in the calculation of people in need.

110. Hygiene promotion and behaviour change: The ECHO-supported WASH Programme, through hygiene promotion interventions, aimed to foster behavioural change and improve hygiene practices in the targeted provinces across Afghanistan. The programme educated communities on key practices such as handwashing and proper waste disposal to prevent waterborne diseases, and the distribution of hygiene kits during emergencies further supported these practices. Stakeholders identified gaps, including partial integration of HP within all projects, selective targeting, inconsistencies of content and dissemination of messages by different entities, and weak technical capacities of the hygiene promoters on the ground, which affected the effectiveness and outcomes of these efforts. These gaps were mainly related to the fact that different local IPs and INGOs were implementing different types of interventions (6 different types of water supply projects, water trucking, and sanitation activities, etc.) and hence every implementer adopted different approaches to integrating hygiene promotion within these activities. In a few districts, successful collaboration between IPs and UNICEF's SBC hygiene promoters enabled the mobilization of 'mother groups' to engage with women and girls at the household level. This helped in overcoming key barrier of accessing women household members.

[66] Out of the total 46 WSS projects, which benefited 130,703 individuals, 38 projects (83%) were solar-operated—31 were new constructions and 7 were rehabilitations. These solar projects accounted for 121,571 beneficiaries, representing 93% of the total beneficiaries across all 46 water projects. A consistency on number of total WSS beneficiaries is noted. The ET analysis of WASH database yields 130,703 beneficiaries in comparison to dashboard summary numbers as 110,263 beneficiaries.

111. Groundwater monitoring and knowledge management: UNICEF procured essential spare parts to strengthen water resource monitoring in Afghanistan, addressing the near collapse of existing systems due to a lack of tools. For groundwater monitoring, 100 monitoring stations were equipped with spare parts and data loggers to improve data collection and sustain the network. UNICEF is coordinating with the MEW on a plan to ensure these stations remain functional. Additionally, 100 surface water monitoring stations received spare parts, ensuring functionality for another 2-3 years. Ten advanced data loggers were also procured to expand the surface water network. UNICEF further supplied chemicals and tools to keep the water quality laboratory operational until the end of 2024.[67]

112. The ECHO-supported WASH Programme made significant efforts to strengthen groundwater monitoring initiatives, which included tracking groundwater conditions and water chlorination based on water quality data. In 2022, amid cholera and AWD outbreaks,[68] ECHO funding supported monitoring efforts in the most affected provinces, focusing on drought impact, water contamination, and AWD prevalence. This initiative improved understanding of water-related health challenges in these areas and was later expanded with additional funding for monitoring both surface water and groundwater. These efforts also contributed to strengthening knowledge management, which, although still evolving, has become an emerging priority for the ACO. This engagement strengthened groundwater monitoring across 1,130 wells, resulting in three analytical reports. These reports provide up-to-date information for the early warning system on groundwater status throughout the country.

113. Strategic dialogue initiated by UNICEF, though not directly funded by ECHO, aimed to address the longstanding issue of integrated water resource management in Afghanistan. This dialogue highlighted the need for prioritization of developing and strengthening Disaster Risk Reduction (DRR) infrastructure in the country. In October 2023, a national-level workshop[69] involving national and international stakeholders was organized to discuss and address chronic emergency needs arising from frequent droughts and flash floods. Held during peak emergency periods, this workshop marked a significant step in advancing integrated water resource management. These efforts were crucial given Afghanistan's unique emergency challenges, where the lack of basic services and low population resilience exacerbated the impact of natural disasters.

114. Integration with health, nutrition, and education sectors and gender equality: As discussed in the Coherence criteria, the ECHO-supported WASH Programme integrated its interventions with the health and nutrition sectors, contributing to some extent in addressing root causes of issues such as diarrhoea, polio and malnutrition, although integration with the education sector was less visible. Programme achievements related to gender and inclusion included both successes and challenges in meeting the specific needs of vulnerable populations, discussed further under the cross-cutting criteria.

115. Emergency response and pre-positioning: The Programme operated within Afghanistan's unique chronic emergency context, characterized by droughts, conflict, and a large influx of returnees, which differed from typical active emergencies. The programme adapted its interventions and delivered an effective emergency response during crises like the Paktika and Herat earthquakes and flash floods (2022-2023), marking key successes. ECHO funds supported the strategic pre-positioning of supplies, enabling rapid deployment within 12 to 24 hours during AWD outbreaks. This minimized health risks and further demonstrated the programme's effectiveness in responding swiftly to crises.

[67] Ibid

[68] Between August 2022 – January 2023, 63.5 percent of the total tested drinking water points (3349 of 4680) were contaminated with faecal coliform in Kabul, Kandahar, Kapisa, Paktika, Parwan, and Uruzgan provinces, the locations/districts most affected by AWD/cholera during 2022. (UNICEF and WHO Afghanistan: Integrated AWD Preparedness and Response Plan 2023; WASH and Health Clusters Afghanistan).

[69] National consultation workshop "Impact of climate change on water resource management": Developing roadmap for Afghanistan; 2-5 October 2023

5.4.2 Enabling and Disabling Factors[70]

EQ3.3: What key contextual and operational factors affected (facilitated or hindered) the planning, implementation, and results of ECHO-supported WASH interventions?

116. The programme's largely successful planning and execution was influenced by a combination of enablers and disablers. Collectively, the key enablers discussed below supported the Programme execution in an evolving and challenging environment. These key enablers facilitated delivery, addressed operational hurdles, and ensured completion of activities, even in the face of unforeseen challenges.

- **Flexibility:** The most impactful enabling factor in the ECHO Programme was the flexible funding allocation (crisis modifier option, contingency funds availability). The programme planning and execution demonstrated flexibility in funding allocation, allowing resources to be quickly adapted to emerging needs. This adaptability enabled the programme to effectively address both immediate humanitarian needs and longer-term development goals.
- **Coordination with DfA and community stakeholders:** Managing political sensitivities and fostering effective collaboration enabled the successful delivery of the ECHO WASH Programme's water interventions. The Programme coordinated with DfA entities, including the MRRD, to ensure that WASH interventions aligned with local priorities and needs. It also engaged local authorities (PRRD), IPs, communities, MRRD/PRRD social mobilizers, and additional technical staff (WASH facilitators or 'extenders') to promote a participatory approach. To enhance community resilience, particularly in areas vulnerable to conflict and climate challenges, the Programme trained two local individuals as mechanics in each community to maintain newly constructed or rehabilitated water systems. Although such efforts initially faced resistance from ECHO, the programme's advocacy and subsequent adjustments led to their effective implementation.
- **Proactive and timely engagement with ECHO's regional and country-based management:** This engagement helped ensure sustained support and effective communication regarding the progress, challenges, and evolving needs of the WASH interventions. Regular updates and briefings kept the donor well-informed, which proved useful in troubleshooting various bottlenecks and helped maintain their commitment, fostering long-term relationships for future technical and funding support.

117. The programme also faced several challenges that slowed down processes and created management difficulties. The most impactful was partial alignment of national policy and ECHO donor's conditions, which led to delays due to challenges in aligning project design with both local policies and ECHO's mandate. Extensive negotiations and complementary funding were needed to bridge these gaps. Below are some other key disablers faced by the programme and the mitigation strategies applied, which proved effective in most cases.

- **Significant bureaucratic delays** were faced by IPs in signing MOUs with ministries and obtaining necessary approvals which slowed project initiation and affected timelines. Efforts to streamline these processes and maintain continuous dialogue with authorities were partially effective in reducing delays.
- **Limited availability of security escorts and other logistical challenges** (such as poor road conditions, terrain difficulties, long distances to remote locations) delayed project monitoring and implementation. These constraints were managed by reprioritizing and rescheduling activities and engaging local IPs, contractors and TPM entities while ensuring compliance to all UN protocols.
- **Severe disruptions in the banking system** necessitated bringing physical cash into Afghanistan, increasing risks and operational costs. NGOs had to transport cash to field sites, exposing them to significant risks and delays that affected programme efficiency. This situation was managed by implementing stringent cash handling protocols, though the physical transfer of cash remained a major vulnerability.

[70] A detailed table of the enabling and disabling factors can be found in Appendix 20.

- **Fluctuations in the exchange rate**, particularly in the first year of implementation, led to financial burden in project budgets. This volatility made financial planning difficult and required adjustments in project scope and scale. Efforts to mitigate this included close monitoring and adjusting financial strategies in real-time.

5.4.3 Unintended Effects

EQ3.4: To what extent and how did the ECHO-supported UNICEF WASH interventions lead to any unanticipated positive or negative outputs and/or outcomes, to the extent possible, and could these have been anticipated and appropriately addressed?

118. Drawn from a combination of qualitative content analysis[71] and contribution analysis,[72] the below findings reflect both the positive and negative unintended outputs and outcomes, to the extent possible, of the ECHO-supported UNICEF WASH interventions. This analytical approach identified positive and negative deviants, capturing stakeholder perspectives and contextual insights to trace the contribution of interventions and identify potential gaps.

119. **Positive effects:** A few respondents noted that certain ECHO WASH interventions, such as upgrading water supply systems or rehabilitating infrastructure, led to unintended positive results that benefited the communities involved. For example, in one urban area, where transitioning to solar-powered systems was not feasible due to funding constraints, providing fuel to operate existing water systems ensured uninterrupted water delivery. While UNICEF had not initially planned to provide fuel, their flexibility in ensuring water system operability had a positive impact by addressing an immediate need. Additionally, instances were highlighted where WASH interventions fostered social cohesion between previously disconnected communities. For instance, in one province, a water supply scheme extending from one community to another helped unite both communities, leading to improved cooperation and shared resources—an unintended but clearly positive output of the project.

120. **Negative effects:** Some instances were reported by stakeholders of DfA stakeholders attempting to influence the selection of water projects and/or communities. Notably, in Kunar province, this interference led to an unintended negative output. The DfA's efforts to influence procurement and evaluation processes, particularly in subcontracting with World Vision (UNICEF IP), caused delays, including the suspension of a project in Chapa Dara district (western part of Kunar Province) due to the authorities' exclusion from the evaluation process. Though these instances were generally well managed by the programme, these disruptions underscore the need for stronger mechanisms to safeguard the independence of humanitarian operations and prevent similar issues in future interventions.

5.5 Efficiency

EQ4. To what extent and how well did the ECHO-supported WASH Programme resources and implementation modalities enable attainment of intended results and objectives in an economical and timely manner?

The €21 million for 2022-2023 was substantial but insufficient to fully meet the large-scale WASH needs, leading to resource allocation pressure and requiring prioritization. In 2023, a €1 million contingency fund was added for emergency responses, but accessing it through crisis modifiers caused delays, impacting the timeliness of interventions within the 72-hour window.

The adequacy of human resources within UNICEF's WASH section at national and provincial levels was sufficient for ECHO-funded interventions, with no notable gaps in numbers or technical capacity. Working through IPs, TPMs and CDCs supported cost-efficiency by lowering costs and increasing access and coverage but faced challenges in ensuring appropriate technical capacity within the IPs, TP and CDC staffing.

[71] https://journals.sagepub.com/doi/pdf/10.1177/1049732305276687
[72] https://www.betterevaluation.org/methods-approaches/approaches/contribution-analysis

The two-year programme allowed for a more comprehensive approach, addressing both emergency services and long-term WASH needs. However, delays in securing MOUs, No Objection Certificate (NOC) approvals, and addressing TPM feedback reduced the actual implementation time, impacting cost efficiency. Despite these challenges, the programme completed its main activities and met overall targets within the grant period.

The first year of implementation, led by NGOs, resulted in relatively higher costs, extended timelines, and operational inefficiencies, with the cost per capita for NGO-managed interventions perceived to be reaching up to USD 70, significantly above the estimated planned USD 25. In 2023, the implementation shifted to being led by CDCs, which stakeholders agreed reduced implementation costs. Stakeholders interviewed raised concerns about lower quality of implementation compared to NGOs and the use of less durable equipment, potentially affecting long-term cost efficiency. Notably, TPM reports and interviewees recognize gaps within both NGO and CDC implementation affecting long-term cost efficiency.

EQ4.1: To what extent was the WASH Programme implementation cost-efficient in relation to the achieved results, considering factors such as the availability and use of funds, adequacy (quantity) and quality (technical capacities) of human resources, and implementation time frame?

5.5.1 HR adequacy and capacities – UNICEF WASH Sections (national and sub-national)

121. UNICEF ensured that the adequate management, implementation, and technical personnel were in place to minimize HR-related challenges, successfully reducing the need for more costly external experts. UNICEF's management and technical personnel compensated for inadequate DfA, IP, and TPM staffing discussed in the following sub-section.

122. **Management and implementation capacity:** In addition to the ECHO grant manager at the ACO level, the presence of dedicated managers for ECHO WASH components (water projects and sanitation) enhanced the cost-effectiveness of project design and implementation. During the Programme implementation, no downsizing occurred within UNICEF's WASH section, although some staff left due to contract closures. Efforts were made to increase the workforce, but recruitment of staff for field offices faced delays due to lengthy processes, particularly in technical roles. In 2023, some managerial roles were merged into single positions, for example the merging of WASH in Emergencies and WASH in Institutions management to one position. This process added workload pressure to the affected roles. The ET did not specifically probe whether this change had any effect on implementation quality and notes potential benefits in terms of reduced costs of implementation. However, given the recognized pressure that staff are under within this context, the ET notes potential losses in efficiency if merging the positions proves too onerous but did not explore this issue sufficiently to provide an informed judgement. Significant budget constraints suggest potential central-level downsizing in 2024.

123. **UNICEF technical capacity:** The availability of WASH engineers, one to two staff in each FO to oversee technical designs at the field office level was a key strength in managing ECHO-supported WASH interventions. Additionally, placement of generally one international WASH specialist and one to two national WASH officers are other positive aspects of UNICEF's staffing strength and technical capacities at FO level. Despite the challenges with external stakeholders discussed below, UNICEF technical capacities were generally adequate, negating the need for external experts during the ECHO-supported programme. A more precise analysis of UNICEF's staffing strength, including the availability of engineering staff versus WASH specialists, was not possible due to the unavailability of a usable HR database at any level within UNICEF.

124. Workloads increased after the 2022 Paktika and Khost earthquake, requiring expanded geographic coverage and additional field office staff. During active emergency situations, UNICEF temporarily assigned some central-level positions to support FO WASH teams. This provided additional technical planning support, addressing urgent on-ground needs and contributing to more efficient resource optimization.

125. **UNICEF extenders:** Extenders were adopted in early 2022 to enhance localised knowledge and support delivery and monitoring of activities in areas that are not easily accessible to UNICEF staff members. Extenders enabled UNICEF staff to focus on strategic tasks. However, the

workload per extender was burdensome with some staff overseeing 10-15 parallel projects; supervision and monitoring suffered as a result. This issue was compounded by the broad geographic coverage of WASH programming which sometimes required significant time to travel between sites.

126. **Key challenges:** The complex and difficult working environment contributed to several HR challenges that affected the efficiency and timeliness of Programme implementation.

- Significant staff turnover, especially among international colleagues on temporary assignments, disrupted implementation and planning.
- New international staff required time to acclimate Afghanistan's unique context and turnover created technical expertise gaps, affecting programme efficiency as staffing required time to become fully informed.
- The significant 'brain drain' following the regime change put some strain on UNICEF's national staff positions, though UNICEF was able to maintain most national staff.

5.5.2 HR adequacy within the DfA, IPs, TPs, and CDCs

127. **Monitoring (TPM):** TPMs also faced HR challenges, especially in remote and insecure areas, where a shortage of trained monitoring staff impacted data collection reliability. Technical capacity gaps in TPM staff hindered accurate assessments and reporting of complex construction work related to WASH interventions. High turnover further disrupted consistency, necessitating repeated onboarding and training, which strained resources. Logistical difficulties in accessing remote areas due to security risks increased costs and limited site visits, while funding constraints led to selective monitoring. It is worth noting that most stakeholders raised concerns about the inadequate capacities of TPM staff, particularly regarding inspections of engineering aspects of construction works. Overall staffing and technical capacity of TPM staff, particularly at the field monitoring (spot checks, inspections of equipment, etc.,) were considered average or below, affecting quality of project monitoring and implementation efficiency. Despite these challenges, there were some well-established TPM teams that showed strengths in data collection, although delays in reporting affected timely feedback and overall programme efficiency.

128. **DfA:** While DfA engineering staff were praised for their competence, there was a significant shortage of technical staff within key sectoral departments like the MRRD, MoPH, and Ministry of Education at both provincial and national levels. This initially posed challenges for project implementation.

129. **Implementation partners:** IPs faced similar HR challenges after the regime change, with a temporary gap in technical staff at both provincial and national levels. High turnover and delays in hiring technical staff disrupted continuity and impacted both implementation and planning. Some IPs, like DACCAR, demonstrated strong technical capacity; other IPs had moderate to good staffing and capacities at least at their management or head office levels.

130. **CDCs:** These forums were represented by general community members often with low educational profiles (without formal higher qualifications), resulting in low to non-existent managerial and technical capacities. Although two people from each community received basic orientation on routine operations and basic repair and maintenance of WASH infrastructure, overall capacity remained limited. While their involvement in the oversight and monitoring of projects provided an additional layer of accountability for IPs, helping ensure adherence to project design, operating within allocated costs, and the timely completion and handover of projects to CDCs or DfA, their limited capacities negatively impacted their ability to effectively control these programmatic aspects. Several stakeholders mentioned in KIIs that CDC implementation was more cost-efficient in comparison to IPs (I/NGOs); mainly due to general high operational costs of I/NGOs. However, concerns were also raised by NGOs staff about low quality implementation (use of less durable equipment, and other cost-cutting measures) by CDC. While the cost-benefits of working through CDCs are clear, this requires maintaining a balanced trade-off between cost and quality. Conclusive evidence is lacking on both viewpoints.

5.5.3 Availability and utilization of funds adequacy

131. The ECHO funding of approximately €21 million for 2022-2023 was considered a significant sum by respondents from UNICEF, and IPs. While UNICEF was able to achieve overall targets which were set relative to available funding; however, the available funding envelop was considered insufficient to fully address the overall WASH sector needs. This created pressure on resource allocation and required careful prioritization. Additional sources and volume of funding would have allowed better alignment of projects with DfA priorities, such as providing household water connections. In 2023, an additional contingency fund of nearly €1million was introduced for emergency responses within a 72-hour window, though accessing it via crisis modifiers was time-consuming, delaying immediate action.

132. Flexible and strategic fund utilization was key to minimizing costs while maintaining quality. However, stakeholders raised concerns about implementation quality and sustainability. Despite immediate cost savings through strategic shifts and CDC involvement, funding constraints in the broader WASH sector persist highlighting the need for continued donor support.

5.5.4 Time Factor and Implementation Delays

133. The two-year time frame for the WASH component of the ECHO grant was considered more appropriate than the typical six-month to one-year duration for emergency grants, to address the emergency needs due to the ongoing crisis. This timeframe allowed for a more comprehensive approach. However, the dynamic policy and operational environment required ongoing programmatic adjustments. Interviews with UNICEF, IPs, and TPM staff and substantive evidence in TPM reports show moderate-to-significant implementation delays related to various reasons.

134. Operational challenges, including delays in obtaining necessary approvals and site selection, reduced the time available for actual implementation. The most frequently cited challenge causing delays was obtaining necessary approvals from the DfA, particularly the issuance of NOC and MOUs for UNICEF IPs, which often took several months, leaving limited time for implementation. Additionally, the time allocated for constructing long-term water projects was inadequate due to difficulties from planning to handover primarily due to significant time loss in securing necessary approvals before initiating the actual construction work. Finally, staff note the significant time it took to address TPM feedback and suggestions. These constraints highlighted the inconsistencies between planned timelines and on-the-ground realities.

135. Slow responses from the authorities on monitoring visits, interim approvals, procurement challenges, weak coordination, pipeline issues, and the absence of escorts for UN staff further compounded these delays, adding significant time pressure. Despite these challenges, project managers effectively managed the situation through adjustments and consistent follow-ups, ensuring completion times and costs remained within acceptable ranges.

136. The compressed timelines resulting from the combination of factors described above affected implementation quality, and undermined resource optimization, thereby impacting project efficiency.

EQ4.2: To what extent and how did the ECHO-supported WASH Programme implementation modalities contribute to (or vice versa) resource optimization, and were there alternative options to enhance cost efficiency?

137. Programme implementation began amid significant uncertainties following the August 2021 political transition, characterized by administrative changes and evolving policies from the DfA. In 2022, the urgent need to address widespread emergency demands led UNICEF to rely on NGOs for rapid scale-up. This approach, however, resulted in (perceived) higher costs, extended timelines, and operational inefficiencies, with the cost per capita for NGO-managed interventions reaching up to USD 70, compared to the typical USD 25. This was due to a combination of factors such as fluctuations in exchange rate, increased inflation, and relatively higher overhead costs of I/NGOs than CDCs. These challenges prompted a strategic shift in 2023, notably increased

involvement of CDCs and the involvement of contractors.[73] The shift to CDCs was also necessitated to address the ban on women working with I/NGOs by the DfA.[74] As community-based entities, CDCs operated with lower overhead costs, improving economic efficiency. Most implementers (UNICEF staff, IPs) agreed that the resulting hybrid approach contributed to smoother implementation and resource optimization.

138. Cost-reduction related assertions are widely endorsed by nearly all KII respondents. Key informants provided specific calculations of cost efficiencies achieved through CDC implementation. For example, interviewees noted water supply projects managed by CDCs demonstrated significant cost reductions in 2023: the rehabilitation of 13 bore wells in urban areas cost only USD 6 per beneficiary, and the cost per beneficiary for household connections in a rural water supply scheme dropped to USD 36.4 from USD 48 under previous agreements.[75] Importantly, these findings are based on qualitative assertions from IPs' senior management, the ET is unable to triangulate these findings as the WASH Database does not include implementation modality to enable this comparative analysis and provided PDs only include implementing partners.[76]

139. However, most IPs (I/NGOs) raised concerns about the quality of implementation in CDC-led projects. Key issues highlighted included the use of low-quality, cheaper equipment and materials with little to no warranty, along with gaps in quality assurance measures during implementation. These factors created uncertainties regarding the reliability and durability of the projects which could ultimately compromise sustainability and reduce long-term value for money. Notably, I/NGOs, as previous implementers who are losing business to CDCs, may have a conflict of interest in misrepresenting the quality of CDC implementation in favour of their own operations. TPM reports revealed quality issues with implementation through both CDC and IP-led implementation. Without comprehensive TPM documentation and sufficient evaluative resources, the ET was unable to undertake a comprehensive analysis to compare the relative quality of CDC versus IP implemented projects to provide a more conclusive judgement. As CDCs are now dissolved, understanding the comparative advantages of CDC versus IP implementation is of less relevance.

140. In addition to working through IPs, the ECHO-supported WASH Programme employed several other implementation modalities, each tailored to specific contexts and challenges. Direct implementation by UNICEF was used in high-risk areas, ensuring quality but at a higher cost and with less sustainability. The hybrid approach, which combined partnering with IPs and direct implementation, aimed to balance rapid response needs with local capacity building, though coordination challenges were noted. These include inconsistencies at the sub-national level, particularly leading to duplication of efforts in supply management. Initially some IPs shared data directly with the WASH cluster without routing it through UNICEF. Infrequent and ad-hoc participation of IPs and DfA in cluster coordination meetings were also frequently cited. The contractor modality was employed for construction activities, offering operational efficiency but requiring strong oversight to maintain quality and timelines. The Long-Term Agreement (LTA) for emergency water trucking and sanitation facilities rehabilitation/construction modality was used to address logistical challenges, particularly in remote areas, by transitioning to more localized procurement and supply chain management, which reduced dependency on external suppliers and minimized delays.

141. **In absence of any substantive evidence, the ET is unable to provide definitive assertion on comparative cost-efficiencies of various implementation modalities.** Stakeholders provided mixed feedback. While partnering with local organizations generally resulted in lower costs, it often came at the expense of speed or quality. Conversely, direct implementation by UNICEF, though

[73] CDCs are community-based councils or committees established during the implementation of the National Solidarity Program (2003-2007) in villages across Afghanistan. They were funded to implement infrastructure or agriculture projects identified as the most needed by the villages. https://www.wb-artf.org/results/artf-stories/promoting-community-based-development; https://afghanwarnews.info/development/CDC-Community-Development-Councils-Afghanistan.htm

[74] In December 2022, de facto authorities banned Afghan women from working for national and international NGOs, a move roundly condemned by the international community. https://crisisresponse.iom.int/sites/g/files/tmzbdl1481/files/appeal/documents/UNSF%20Afghanistan%202023%20to%202025.pdf

[75] Evaluation Qualitative Data- [1088, and 1089 M18 IPCR].

[76] The ET notes this documentation may be available internally for UNICEF's internal analysis.

more expensive, typically led to more consistent and timely outcomes, particularly in urgent or high-risk scenarios. The hybrid model was sometimes the most cost-effective, as it leveraged local resources while maintaining a degree of oversight and control by UNICEF.

5.5.5 Cost Per Beneficiary Analysis

142. The ET analysed cost per beneficiary (CPB) to assess the cost-effectiveness of ECHO-supported WASH interventions, to evaluate optimal use of resources. The analysis revealed significant variability in CPB across different interventions, highlighting that the USD 25 per beneficiary estimate used by UNICEF WASH team for the ECHO WASH proposal was too low for the operating environment particularly for construction or rehabilitation work. The Programme budget can be found in Appendix 21.

143. **The analysis of CPB for water supply projects revealed significant cost escalations for some types of projects.** For example, the CPB for 'construct deep boreholes with solar-powered piped system- public taps' at USD 34.5 was higher than the planned CPB of USD 24.7, a finding also highlighted by several UNICEF WASH stakeholders during KIIs. Similarly, actual CPB was much higher than planned for 'rehabilitate deep boreholes with solar-powered piped system-household connection' projects, rising from USD 13.5 to USD 30.8. **These variations collectively contributed to raising the overall CPB for all water projects from the planned value of USD 32.2 to USD 38.1 serving 110,263 beneficiaries across 46 projects.**

144. The lack of detailed financial data prevents the ET from providing specific justifications for this variation. Significant delays, currency fluctuations, and other operational inefficiencies could provide plausible justification. Variations in the technical requirements for each water supply project (such as the depth of borehole, size of tank, etc.) could also justify these variations. As activities are listed generically the ET is unable to provide this analysis.

145. Table 12 below provides a CPB analysis of water supply projects. Based on the ET calculations, constructing deep boreholes with solar-powered piped systems for household connections covered the most beneficiaries (79,930) with a CPB of 42.8 USD. Rehabilitating gravity-fed systems had the lowest CPB at USD 1.7-2.2, highlighting the cost-efficiency of these interventions, the reasons for which could be numerous.

Table 12 Cost per beneficiary analysis of water supply projects[77]

Activity	Beneficiaries	Budget (AFN)	Planned Max. CPB		Actual CPB		Projects
			Cost (AFN)/ Beneficiary	CPB (USD)	Cost (AFN)/ Beneficiary	CPB (USD)	
Construct Gravity-fed/spring piped system - household connection	770	3,238,971	4206	59.6	4206	59.6	1
Rehabilitate Gravity-fed/spring piped system - public taps	2,240	349,310	156	2.2	156	2.2	2
Rehabilitate dug wells and equip them with hand pumps		84,900	121	1.7			1
Construct deep boreholes with solar powered piped system - public taps	8,750	21,320,694	1740	24.7	2437	34.5	5
Construct deep boreholes with solar powered piped system - household connection	79,930	241,598,475	3023	42.8	3023	42.8	26
Rehabilitate deep boreholes with solar powered piped system - public taps	490	219,710	448	6.4	448	6.4	1
Rehabilitate deep boreholes with solar powered piped system - household connection	12,661	27,533,458	953	13.5	2175	30.8	6
Support people with safe drinking water through water trucking	5,422	2,252,176	415	5.9	415	5.9	4
Total	110,263	296,597,694	2269	32.2	2690	38.1	46

Note: Green highlights reflect alignment of the planned and actual CPB; Yellow highlights reflect cost escalations.
Source: ET analysis based on data from the WASH Database 2023.

146. **CPB of Sanitation Activities:** The CPB for 'construction of emergency and/or urban communal latrines with handwashing facilities' remained within the planned CPB at USD 19.1, a positive aspect of the implementation. However, significant cost escalations were evident in other sanitation activities, particularly for 'rehabilitate emergency and/or urban communal latrines with handwashing facilities,' where the CPB was USD 8.6, above the planned max USD 8.3.

[77] This analysis was conducted based on UNICEF WASH programme data co-funded by UNICEF and ECHO-supported interventions.

Additionally, the variation in CPB for 'rehabilitate emergency and/or urban communal latrines with handwashing facilities' requires further verification by the programme or database management to determine the justification for the significant increase from the planned USD 3.8 to USD 303.8. No clear evidence is available regarding the reasons or key factors behind this escalation. The CPB for construction of emergency household latrines stands at USD 8.6, which is lower than the CPB for communal latrines (USD 19.1). **Overall, the CPB for all sanitation activities was estimated at USD 9.6, however escalated to USD 14.4 covering 37,618 beneficiaries across 16 projects (Table 13).**

Table 13 Cost per beneficiary analysis of sanitation activities

Activity	Beneficiaries	Budget (AFN)	Planned Max. CPB		Actual CPB		Projects
			Cost (AFN)/ Beneficiary	CPB (USD)	Cost (AFN)/ Beneficiary	CPB (USD)	
Construct emergency and/or urban communal latrines and/ or with handwashing facilities	14,512	19,530,000	1346	19.1	1346	19.1	3
Construct emergency household latrines	22,882	13,840,400	585	8.3	605	8.6	10
Rehabilitate emergency and/or urban communal latrines and/ or with handwashing facilities	224	4,800,000	265	3.8	21429	303.8	3
Total	37,618	38,170,400	678	9.6	1015	14.4	16

Note: Green highlights reflect alignment of the planned and actual CPB; Yellow highlights reflect cost escalations.
Source: ET analysis based on data from the WASH Database 2023.

147. **CPB analysis of WSD and Hygiene Promotion:** The CPB for Supplies Distribution (providing people with WASH supplies, including soap or jerrycans) is negligible, at USD 0.0011 for a single distribution activity. Similarly, the CPB for hygiene promotion (reaching affected people with hygiene promotion) is reported as negligible - at USD 0.825. Only aggregate numbers are available, and no disaggregated details on the number of beneficiaries or households covered per activity are provided. It is unclear whether logistics or operational costs are included in the reported CPB.

148. **CPB analysis of WASH in Institutions:** The CPB for providing WASH services in ECHO-supported schools[78] and health facilities[79] stands at USD 12.90 and USD 21.40, respectively. These CPB values were calculated using available data on the budget and number of beneficiaries. However, since there is no information on the planned CPB, it is not possible to make a comparison to assess the cost efficiency of these interventions.

149. **Partnerships:** The total value of the available and reviewed Partnership Cooperation Agreements (PCAs) signed between UNICEF ACO and IPs surpassed the value of the ECHO WASH budget as partnerships were contingency based, with budget estimates for each partner tentatively determined. Additionally, some PCAs were based on pooled funding sources. While this strategy facilitated programme delivery across diverse and complex operational contexts, it also resulted in significant cost variations and weakened accountability, highlighting the need to refine partnership strategies to improve operational efficiency.

5.5.6 Alternate Strategies

150. **Most respondents were unable to suggest alternative strategies the programme could have used to achieve similar results while significantly reducing costs.** However, a few respondents shared some suggestions including a) prioritizing low-cost, high-impact interventions that could deliver immediate benefits with minimal resources, such as focusing on hygiene promotion campaigns that required fewer resources but could significantly reduce waterborne diseases; b) enhancing the capacities of local NGOs to deliver similar work at reduced costs and reduce reliance on external partners in the future; and c) prioritizing integrated WASH package,

[78] Primary Grant Code; CPB for schools where the menstrual health and hygiene needs of adolescent girls and women teachers are addressed through provision of gender-sensitive WASH services and hygiene promotion. (Source: 2023 WASH Database).
[79] Primary Grant Code; CPB for number of additional health care facilities (clinics, health centers, hospitals, etc.) reached with basic WASH services in the reporting year only, as a result of UNICEF direct support. (Source: 2023 WASH Database).

particularly water projects, in locations closer to institutions like schools and health facilities. While respondents consider these strategies more cost-efficient, the ET lacks substantive evidence to validate these assertions.

5.6 Sustainability

EQ5. To what degree have the benefits of the ECHO-supported WASH Programme been sustained and how are they likely to continue without UNICEF's (or other external) support, and under what circumstances?

The ECHO-supported WASH Programme employed several key sustainability strategies to ensure the long-term impact of its interventions. The technical design and management of water projects were key determinants of sustainability. Community engagement and ownership were also central, with strong involvement from CDCs fostering responsibility for maintaining WASH infrastructure. Stakeholders also emphasized sustainability from capacity building efforts (formal and informal orientations), focusing on equipping community members with the skills needed to manage WASH systems effectively. Integration of environmental safeguards minimized environmental impact, ensuring that natural resources were preserved to the extent possible.

Overall, the Programme has led to significant improvements in water supply systems, with the four water-related interventions rated as the most likely to be sustained in the long-term, providing much-needed water to vulnerable households.

Sanitation activities, such as the provision of temporary toilets during emergencies, are assessed as least likely to be sustained due to the temporary nature of the structures. These projects face challenges including a lack of maintenance during and after the emergency response, low community ownership and eventually gradual abandonment of facilities.

Hygiene promotion activities are assessed as less likely to achieve full sustainability. In the absence of continuous community engagement and infrequent reinforcement of message dissemination, the adoption of hygiene practices tends to decline. Moreover, the varying quality of implementation further impacts the long-term sustainability of these efforts.

5.6.1 Sustainability Prospects

EQ5.1: Which results, services, and interventions of the ECHO-supported WASH Programme have been sustained, and what are likely to sustain (or not), along with the reasons or factors influencing this sustainability status?

151. **The household water connections are likely to be sustained because operation and maintenance mechanisms were established through local training, enabling communities to handle routine repairs and upkeep independently**. Informal orientations and training sessions were conducted for local stakeholders, aimed at enhancing their technical competence and fostering self-reliance. The effectiveness of this strategy was largely successful, as it facilitated the continued functionality of water systems even after the project implementation phase ended. Water tariff systems were implemented to create financial reserves for maintenance, reducing reliance on external support, boosting likelihood of sustaining water systems.

152. Despite the effectiveness of these sustainability strategies, challenges remain. Inconsistent community engagement and variations in training quality hindered the success of operation and maintenance mechanisms. Additionally, the water tariff systems faced resistance in some areas, particularly where poverty limited households' ability to contribute regularly. The sustainability of household connections also depended heavily on effective tariff management and consistent community responsibility, which varied across villages.

153. **Integration of environmental and social safeguards to minimize the environmental impact of WASH interventions and ensure resource preservation also contributed to sustainability.** Climate-resilient water projects (such as solar operated WSS) were also implemented, focusing on systems that withstand climate change impacts, such as droughts and floods. Ground and surface water monitoring activities were supported to enhance capabilities in understanding and mitigating the impacts of climate change. This strategy facilitated data collection and utilization,

enabling the planning and development of future sustainable water supply systems to ensure long-term resilience and effective water resource management. These strategies contributed to the long-term viability of WASH services. However, challenges included inconsistent application of environmental and social safeguards across regions and limited scalability of climate-resilient designs due to higher initial costs. For example, gravity-fed water systems and handpump boreholes were also installed instead of preferred solar operated boreholes. As elaborated in section 5.8.5.2, while most ESS protocols were integrated as part of routine pre-project feasibility assessments, a comprehensive focus on all ESS protocols beyond these routine measures was lacking resulting in varied implementation standards across different regions. Additionally, ongoing support and monitoring were required to adapt to evolving environmental and climate conditions.

154. **Hygiene practices are unlikely to be consistently sustained due to variability in the quality and consistency of training, high turnover among trained personnel, and a decline in hygiene practices where continuous reinforcement was lacking.** These issues highlighted the need for more structured, ongoing support to sustain the benefits of these strategies.

155. Table 14 presents a comprehensive assessment of the sustainability prospects of various WASH interventions implemented under the ECHO-supported WASH Programme. More detailed sustainability findings – including factors that enabled or hindered sustainability, can be found in Appendix 24. Appendix 23 presents more details of the 'Sustainability Assessment Grid' developed by the evaluation team, outlining key parameters that influenced judgments on the sustainability prospects of ECHO WASH interventions. Each category groups factors that either support or hinder the long-term sustainability of these interventions.

Table 14 Sustainability prospects/Assessment of interventions

Interventions	Sustainability Prospects	Rationale or Justifications for sustainability prospects
Handpump Boreholes[80]	Have sustained or mostly likely to sustain	• Strong community engagement • Local operation and maintenance mechanisms • Consistent water source availability
Gravity-fed water supply projects[81]	Have sustained or mostly likely to sustain	• Effective integration with existing water sources • High probability of maintenance by CDCs • High community ownership
Deep borehole Solarized water projects	Have sustained or mostly likely to sustain	• Solar technology reduces operational costs • Strong training for local operators • Reliable water source
Household connections	Have sustained or mostly likely to sustain	• High user satisfaction • Promotes hygiene and health outcomes • Community responsibility for maintenance
Hygiene promotion (SBC)	Less likely to sustain (partial sustainability)	• Effective where continuous engagement is available • Decline in practices without reinforcement • Variable implementation quality
Community level O&M mechanisms established	Less likely to sustain (partial sustainability)	• Community's role for long-term success • Effective community structures (CDCs) add to positive sustainability prospects. However, the dissolution of CDCs in June 2024 further compromised the sustainability prospects. • Consistent maintenance practices
Capacity building (CDCs[82], NGOs)	Less likely to sustain (partial sustainability)	• Effective where comprehensive training provided • Challenges in retaining trained personnel • Variable training quality
WASH in Institutions (Schools, and Health Facilities)	Less likely to sustain (partial sustainability)	• Shortage of public funds for routine O&M • Lack of dedicated staff availability • Weak to low linkages with communities

[80] Newly constructed or rehabilitated WSS projects
[81] Newly constructed or rehabilitated WSS projects
[82] Afghanistan's Community Development Councils (CDCs) have been abolished by the Islamic Emirate of Afghanistan (IEA). June 28, 2024. https://reliefweb.int/report/afghanistan/fate-village-councils-emirates-effort-institute-hegemony-over-rural-afghanistan#:~:text=Afghanistan's%20Community%20Development%20Councils%20(CDCs,Emirate%20of%20Afghanistan%20(IEA).

Interventions	Sustainability Prospects	Rationale or Justifications for sustainability prospects
Emergency Water trucking	Least/Not likely to sustain	• Temporary solution • High operational costs • No long-term infrastructure established
Sanitation projects (toilets/ latrines) during emergencies	Least/Not likely to sustain	• Lack of maintenance post-emergency • Low community ownership • Degradation of facilities

5.6.2 Lasting Effects of the ECHO-supported WASH Programme Implementation

EQ5.2: What are lasting effects (for the target beneficiaries, or regions, and/or IPs) as a contribution of ECHO-supported WASH Programme implementation, and what are pre-requisite conditions to sustain those lasting/positive effects of the Programme?

156. **Improved water supply and hygiene practices:** Most stakeholders highlighted that the ECHO-supported WASH Programme led to significant improvements in water supply systems across various communities. This in turn, contributed to improved hygiene practices. Similarly, the SBC communication strategies led to increased awareness and adoption of hygiene practices, such as handwashing and proper sanitation, particularly in schools and healthcare facilities. However, as noted above, the results were seen as less uniformly sustainable across all locations. This was particularly evident in rural areas where the introduction of solar-powered water projects and gravity-fed water supply systems with household connection provided a more reliable and sustainable source of clean water. It is evident from the responses that these interventions were largely effective in ensuring long-term access to water, especially in drought-prone areas.

157. **Community empowerment:** Many respondents noted that the Programme significantly contributed to improved ownership and empowerment of households and communities through capacity-building initiatives. This empowerment was seen as a lasting positive effect, as it enabled communities to independently manage and maintain their water supply infrastructure.

158. **Institutional strengthening:** The ECHO-supported WASH Programme had a positive impact on local institutions, particularly in the health and education sectors. For example, the establishment of WASH committees in schools and healthcare facilities helped institutionalize the management of water supply and sanitation services. This institutional strengthening was viewed as a critical factor in ensuring the sustainability of WASH interventions. The approach was largely effective, as it provided a framework for ongoing management and oversight of WASH services within these institutions, contributing to their lasting impact.

159. Despite these positive results, some respondents highlighted challenges that could undermine the lasting effects of the programme. For instance, the low financial capacity of some communities to manage ongoing operation and maintenance costs was mentioned as a potential threat to the sustainability of water supply systems. Additionally, the lack of formalized training processes for some community members could affect the long-term success of the interventions. These challenges suggest that while the programme had a positive impact, its long-term success may be contingent on addressing these sustainability issues.

160. More details on the sustainability strategies employed by UNICEF and IPs can be found in Appendix 24.

5.6.3 Pre-requisites to Future Sustainability

161. Key determinants of sustainability as identified by KIIs are described below:

- **Political instability and the security situation**: The ongoing uncertainty and political instability particularly for the first six months of implementation hampered effective planning, implementation and monitoring of water projects, making it challenging to ensure their long-term viability. Most stakeholders emphasized the need for stronger political commitment and a more stable security environment to create a conducive atmosphere for sustainable WASH services.

- **Technical design and management of water projects**: Respondents highlighted the importance of appropriate design and reliable equipment, such as solar-powered water systems in drought-prone areas, while also stressing the need for community-based management structures like Water Management Committees (WMCs) for routine operation and maintenance. The success of these projects largely depends on the effective integration of high-quality technical solutions with well-organized community management systems to ensure long-term functionality and independence.
- **Combined roles of communities and NGOs**: Most respondents agreed that continuous capacity building is necessary to enhance the skills and resilience of communities, enabling them to manage water systems effectively. NGOs play a pivotal role in providing technical training, ensuring quality assurance during implementation, and supporting communities in maintaining these systems.
- **The role of the DfA and sustained donor assistance:** Both aspects were highlighted as interdependent factors essential for the long-term sustainability of WASH services. The need for consistency in national policies, technical standards, and public financial support were also highlighted, yet often hampered by inconsistent commitment. Many stakeholders emphasized that, without a strong government framework and continuous donor investment, the sustainability of WASH interventions would be significantly compromised.

5.7 Coordination

EQ7. To what extent and how did UNICEF's coordination and collaboration with diverse stakeholders contribute to improving the delivery and results of the ECHO-supported WASH response, showcasing UNICEF's leadership in fostering a strategic, coherent, and effective WASH response?

The ECHO-supported WASH Programme, under UNICEF's guidance, successfully established and leveraged relationships with a diverse range of stakeholders, contributing significantly to programme implementation and achievement of objectives. UNICEF's coordination with key DfA ministries, including the MRRD, was crucial in aligning WASH projects with local needs, particularly in remote areas. Implementation through CDCs and strong donor relationships further supported these efforts. Academic partnerships with Kabul Polytechnic Institute and Delft University of Technology enhanced local expertise in hydrogeology, positioning Afghanistan as a WASH knowledge hub. However, challenges like bureaucratic delays in signing MOUs and financial restrictions with the DfA slowed project implementation, limiting direct support and impacting overall programme efficiency.

UNICEF's leadership in the ECHO-supported WASH response was widely recognized for aligning efforts across diverse stakeholders, including DfA entities, NGOs, and CDCs, helping to reduce duplication and optimize resource use. As the WASH cluster lead, UNICEF facilitated effective collaboration, particularly in delivering integrated services, despite initial challenges like establishing emergency infrastructure. However, inconsistencies in sub-national coordination and supply management reflected the need for improved planning and more harmonized implementation. Coordination with de-facto authorities also faced challenges, particularly in advocating for women's involvement in WASH, which required extensive efforts and varying acceptance across ministries.

5.7.1 Partnerships

EQ7.1: How successful was the ECHO-supported WASH Programme in establishing and leveraging partnerships at various levels with different stakeholders, and what were the key contributions of these coordinated efforts?

162. **UNICEF's partnerships with a range of implementing partners were integral in expanding the reach of WASH interventions.** DACAAR brought international expertise, executing large-scale projects across various regions, while COAR's deep local knowledge ensured that underserved communities, particularly in the Eastern and Central regions, were effectively targeted. These partnerships allowed UNICEF to balance international standards with local needs, enhancing the impact and relevance of interventions. Additionally, UNICEF worked with other NGOs and CDCs to implement services such as water trucking, particularly in post-earthquake rehabilitation projects. These partnerships were crucial in maintaining service delivery even during challenging times.

163. At the national and provincial/regional levels, UNICEF's coordination with implementation partners was largely effective, particularly during critical situations like the 2022 earthquake response. Regular meetings and close monitoring of progress kept stakeholders informed about challenges and advancements. The pressure of weekly tracking and reporting added stress to the teams but did not affect Programme execution.

164. **Coordination with key DfA entities were also essential to the programme's success.** UNICEF closely coordinated with the MRRD to ensure that projects were aligned with local needs and priorities, facilitating access to remote communities. Support to groundwater monitoring focused on improving water resource management, although it faced challenges due to political sensitivities around data sharing. Despite these difficulties, UNICEF's diplomatic efforts and ongoing dialogue with the Ministry highlighted the importance of fostering trust and coordination with DfA ministries essential for approving programme activities.

165. **ECHO was a reliable and responsive donor and partner, particularly during crises such as the Herat earthquakes.** ECHO's ability to quickly mobilize resources and provide flexible funding was crucial in addressing urgent WASH needs. This collaboration underscored the importance of a strong, adaptable donor relationship in ensuring the programme's success.

166. **Academic partnerships, particularly with Kabul Polytechnic Institute and the Delft University of Technology from the Netherlands, were vital in enhancing local expertise in hydrogeology and groundwater management**. These collaborations included organizing national workshops, positioning Afghanistan as a knowledge hub within the global WASH sector. Such initiatives not only strengthened the technical capacity of local institutions but also contributed to the sustainability and long-term impact of WASH practices in Afghanistan. Additionally, UNICEF's work with the Resource Mobilization Unit (RMU) has strengthened advocacy, securing sustained support for WASH programmes through data-driven communication.

167. However, several challenges were encountered, particularly in engagement with DfA. Bureaucratic hurdles, such as delays in signing MOUs and restrictions on financial transactions, often slowed project implementation and limited the ability to provide direct support. Additionally, the complex negotiation processes required with DfA highlighted the need for more streamlined and efficient coordination mechanisms. For implementation partners, particularly NGOs, capacity constraints exacerbated by political instability and the brain drain in Afghanistan posed significant challenges, impacting the quality and timeliness of interventions.

168. Some missed opportunities, such as the stalled nationwide WASH assessment, which involved a partnership with REACH,[83] due to a lack of donor funding, further underscored the need for improved coordination and partnership management. These challenges, while significant, also provided important lessons for future interventions, emphasizing the need for enhanced coordination, streamlined processes, and strengthened partnerships to optimize the effectiveness and sustainability of the ECHO-supported WASH Programme.

5.7.2 UNICEF Leadership

EQ7.2: To what extent did UNICEF successfully showcase its leadership in ensuring an integrated, strategic, and effective response within the ECHO-supported WASH humanitarian interventions at different levels?

169. **WASH Cluster lead agency:** Most stakeholders acknowledged UNICEF's role as the lead agency in the WASH cluster, emphasizing its success in aligning efforts among diverse stakeholders, including DfA line departments, NGOs, and community leaders. This alignment was crucial in avoiding duplication of efforts and optimizing resource utilization. Despite the political exclusion of DfA representatives from formal leadership roles, UNICEF's coordination with entities like the MRRD underscored its commitment to inclusive decision-making processes.

[83] The REACH partnership aims to end child hunger and undernutrition. It was jointly established in 2008 by the United Nations Food and Agriculture Organization (FAO), World Health Organization (WHO), United Nations Children's Fund (UNICEF) and the World Food Programme (WFP).

170. UNICEF's role as the global cluster lead for WASH facilitated robust collaboration with external partners, ensuring that integrated services were delivered effectively. Despite challenges like the initial establishment of emergency infrastructure and the mobilization of water trucking, the overall coordination was effective, with UNICEF playing a central role in providing supplies and facilitating communication among partners. However, some stakeholders noted inconsistencies in coordination, particularly at the sub-national level, where instances of duplication in supply management were observed. The delayed implementation of a real-time inventory tracking tool further highlighted the need for better planning and clearer roles within UNICEF's leadership framework.

171. **Coordination with the DfA:** In navigating the complexities of local governance, UNICEF's efforts to coordinate with DfA through local religious and community leaders were largely effective. This approach facilitated better access and support for WASH interventions beyond the ECHO-supported WASH programme, ensuring strong community engagement and respect for cultural norms, particularly in regions with strict practices. However, coordination with DfA at the regional/provincial level was more challenging, with variable support from these entities affecting implementation of the ECHO-supported WASH programme specifically and WASH activities more generally. Most stakeholders reported that advocating for women's involvement in WASH service delivery required extensive coordination and faced varying degrees of acceptance from different ministries.

5.8 Cross-cutting criteria

EQ8. To what extent did the ECHO-supported WASH Programme delivery design, model, and approach have adequate M&E and knowledge management systems and integrate human rights, gender, disability, equity, climate or environmental and social safeguards (ESS) considerations?

UNICEF aimed to ensure equitable access for men and women, persons with disabilities and other vulnerable groups. While evaluation evidence suggests success in reaching populations equitably, more comprehensive assessment is limited by inconsistent collection of disaggregated data. Reliance on CDCs for needs identification may produce gaps in addressing the needs of the most marginalised communities. Furthermore, humanitarian funding mechanisms were insufficient to enable transformative gender results without additional complementary support and broader changes to the political landscape.

ESS was recognized as an emerging priority within UNICEF ACO programming across all sectors, including ECHO-supported WASH programme. Although there was no explicit focus on ESS in ECHO proposal, all field staff from UNICEF and implementing partners were aware of its importance and were integrating relevant measures into project design and implementation, which are essential components of ESS.

5.8.1 Management and M&E

172. **The Programme implemented a multi-layered monitoring system that played a significant role in the achieved results despite notable weaknesses in its monitoring system.** The multi-layered monitoring approach involved implementing partners, WASH facilitators (extenders), UNICEF field staff, TPMs, and communities in an informal role. This comprehensive system helped ensure thorough and regular oversight, particularly in progress tracking and identifying key gaps and bottlenecks during execution with implementing partners and UNICEF staff at the field office level across all regions. The system also had several weaknesses which lessened its utility, including average to weak technical capacities at the field staff level to inspect engineering aspects of construction projects, inconsistent monitoring checklist, change of TPM entity, and the varied quality and frequency of reporting.

173. Despite these weaknesses, the system provided oversight, effectively tracking progress and identifying key gaps and bottlenecks during implementation. Monitoring reports were regularly shared with implementing partners and UNICEF staff across all regions, contributing to the completion of projects to the specified standards with low-to-moderate variations.

174. The knowledge management system was limited to generating and sharing data around groundwater monitoring with significantly potential in contributing to strengthen integrated water management system in Afghanistan in the future.

5.8.2 Equity and disability

EQ8.1: To what extent and how effectively did the ECHO-supported WASH Programme respond to the WASH needs of population groups and regions that required the most services, particularly persons with disabilities, poor, those in hard-to-reach and rural areas, and those affected by conflict (IDPs) or other emergencies (drought, AWD)?

5.8.2.1 Analysis and design

175. **Inclusion gaps may have harmed analysis and design with respect to equity and disability.** Data sources used to prioritise WASH response for ECHO programming had some information gaps such as community level data on WASH and disability needs. The proposal includes a brief gender and age analysis, aligned with ECHO's standards.[84]

176. **There were successes and challenges in consulting with women; stakeholders provided less information on consultations with PwD and other vulnerable groups.** As noted, the ET was limited in probing further on this issue. The single form and CM list "vulnerable groups" broadly. No specific consultations by other factors such as displacement status or wealth were specified. This may reflect the widespread vulnerability across Afghan communities, where such distinctions are less pronounced.

177. **Trust in CDCs for equitable implementation may have overlooked mixed effectiveness of this implementation modality.** Most UNICEF stakeholders trusted CDCs to implement WASH projects, praising their community-led decisions without raising equity concerns. This trust in CDCs aligns with historical precedent, with billions in international aid spent on organizing and funding CDCs. FGD respondents were also broadly positive of CDCs and community leaders as apt representatives of community interests. However, issues of corruption or limited attention to the problems of vulnerable populations were reported by some participants in 2 of 11 (18%) community-level FGDs. Secondary literature also reveals a mixed record, showcasing both successes and failures in achieving equitable outputs through CDCs.[85] One UNICEF stakeholder noted that the dissolution of CDCs may ultimately benefit equity consideration as these structures were perceived to be male and elite dominated.

178. **Designs considered additional costs to meet the specific needs of PwDs and women.** Stakeholders noted that various guidance and standards existed to ensure designs considered the specific needs of vulnerable groups and confirmed commitment to design standards which included consideration of the specific needs of women, children and PwDs in implementation. Available budgets show resources were calculated based on these 'standard designs' which incorporate costs to meet specific needs.[86]

5.8.2.2 Implementation

179. **There were some implementation gaps in equity considerations.** Some deviation from emergency design standards[87] relevant for gender and protection are observable from TPM reports and in observations (e.g., the absence of locks or doors on installed latrines[88]). Adaptations to enable disability inclusion were not explicitly stated in TPM reports. However, TPM photos show many emergency latrines were raised off the ground, doors of some vault latrines opened inwards, and there were no handles within any of the latrines photographed. For water schemes, it was less feasible to verify disability inclusion visually, though the fact that taps were

[84] Section six of the single form (Gender and Age Marker) describes gender, age and disability considerations within all results funded by ECHO, including WASH.
[85] See, for example, Pain and Levine, "What Does It Mean to Take Context Seriously for Village-Level Governance?"; Vincent, "Navigating Local Authority and Community-Driven Development in Afghanistan: A Lessons for Peace Literature Review."
[86] Such as construction of MHM and disability considerations per the MoE standard design.
[87] BoQ documents were not consistently available for TPMs limiting the value of available monitoring data does in confirming whether these standards were followed.
[88] Afghanistan National WASH Cluster, "Afghanistan National Guidelines for WASH in Emergency."

situated on raised platforms and, at times, appear very low to the ground, suggests some challenges in use by PwD. There were very few photos of rehabilitated facilities in HCF or schools, though gaps in accessibility were also identified in some photos and in observations conducted for the evaluation (see Appendix 25 for some observable issues with pictorial evidence and for further details).

180. Despite these gaps, there were minimal differences between perceptions of reported accessibility at community level of provided sanitation facilities or WSS when results were disaggregated by respondent demographics (see Table 15).

Table 15 Average agreement with statement: WSS/sanitation services provided are accessible to all community members, among respondents reporting a WSS or sanitation intervention

Disaggregating factor	Result	Accessibility of sanitation facilities (n=272)	Accessibility of water facilities (n=568)
	Overall	3	3.7
Gender	Women	3.9	4
	Men	2.5	3.3
Disability	Respondents without a disability	3	3.7
	Respondents with a disability	3	3.5
	Disability in the HH	3.2	3.6
	No disability in the HH	3.2	3.7
Displacement status	Not recently displaced respondents	3.2	3.7
	Recently displaced respondents	2.6	3.3
Economic situation	Highest wealth quintile	3.1	3.7
	Lowest wealth quintile	3.4	3.9

Note: Results presented are the average of respondent ratings of agreement with the statement that provided services are accessible to all community members with responses ranging from **1: strongly disagree to 5: strongly agree**.
Source: Evaluation HH survey.

181. **Communication strategies utilised multiple formats and mechanisms for delivery to maximize outreach**. As discussed in section 5.1.2.1, stakeholders emphasized diverse information channels and actors to reach women and, to a lesser extent, people with disabilities. In line with disability inclusion guidelines, stakeholders described different formats (including printed posters in child friendly spaces and verbal briefings) for communicating messaging on hygiene and handwashing information. The household survey does not indicate substantial differences in outreach according to respondent demographics (see Table 10 above).

5.8.2.3 Monitoring and reporting

182. **Monitoring data lacks sufficient detail to systematically assess the extent to which different population groups were able to provide feedback on ECHO-supported WASH activity design and implementation**. The TPM report template filled by ORD and Apex Consulting does not specify any details on the types of people consulted. End User Monitoring (EUM) narrative reports do this inconsistently.

183. **UNICEF tracks gender, age and disability disaggregated outputs but has limited ability to monitor and collect systematic gendered evidence.** The finalised data presented in the WASH dashboard provides information on the age, gender and displacement status of beneficiaries. Data on disability is included only for some hygiene supply distribution activities under ECHO funding. ECHO reporting does not require this level of disaggregation, with gender estimates provided for WASH outcome indicators only. As discussed under the Effectiveness section, there is some variation between data sources that further complicates ET assessment. While EUM templates provided to the ET included some questions that could provide evidence on

accessibility, data on these questions was not included in any of the reports made available to the ET. There were no specific evaluations conducted of ECHO-supported WASH activities outside of this exercise.

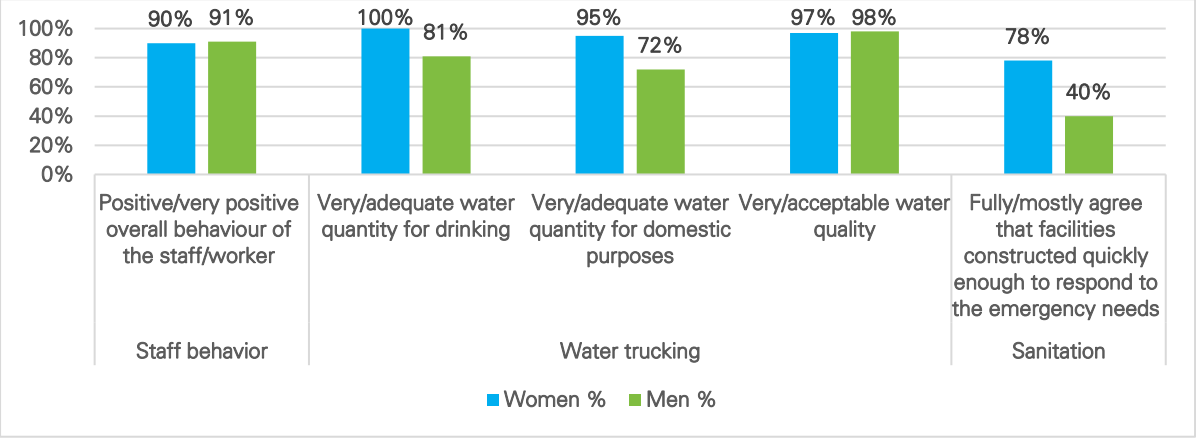
5.8.3 Gender equality

EQ8.2: To what extent and how well did the ECHO-supported WASH Programme (design, implementation, monitoring) address gender-specific WASH needs of women, men, adolescent boys, and girls, contributing to gender transformative results (including women and girls' participation and role in WASH decisions, as well as aspects related to their access, privacy, safety, and quality of WASH services)?

184. Gender equality considerations in design and implementation are already covered in section 5.8.2.1 above. Thus, this section only assesses whether ECHO-supported WASH interventions reached men and women equitably and contributed to gender-transformative results. Since UNICEF lacks outcome data on equitable service usage or empowerment, findings rely on the evaluation's primary data and assumed links between service delivery and uptake.

185. **UNICEF has reached equitable numbers of men/boys and women/girls based on population estimates[89]; primary evaluation data indicates equitable access to, uptake and satisfaction with services delivered at household level.** In FGDs and KIIs, stakeholders universally acknowledged that women had equal access to water supplies when standposts were connected at the household level. Increasing equality in access to water was a primary benefit for women attributed to the programme by UNICEF stakeholders. Women survey respondents were equally or more likely to report satisfaction with staff behaviour and WASH implementation at community level (see Figure 5).

Figure 5 Household survey respondent satisfaction with WASH implementation, by respondent gender



Note: N varies by question: staff behaviour: n=1001; water trucking: n=249; sanitation: n=272.
Source: Evaluation HH survey.

186. Community stakeholders highlighted the effectiveness of ECHO-supported WASH activities in improving women's lives but noted that limited complementary support inhibits more meaningful change. When asked about how WASH interventions met the specific needs of women and girls, community-level stakeholders in 7 of the 11 FGDs (64%) emphasized the limited changes in women's lives because needs far outweighed services delivered.

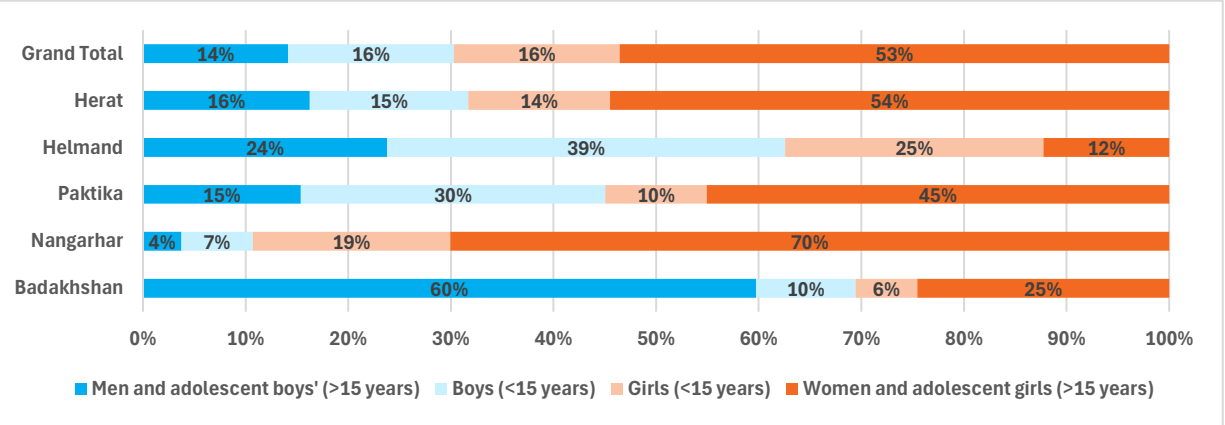
187. **Provision of material support temporarily increased access to MHM supplies.** The inclusion of sanitary pads in hygiene kits provided women with temporary solutions for safe MHM. In one FGD, a woman mentioned that hygiene promotion activities had offered more sustainable MHM

[89] Based on the final report, UNICEF reached 203,016 girls, 203,016 boys, 219,934 women, and 219,934 men under Result 5 and (85,648 girls, 85,648 boys, 92,786 women, and men 92,786 under Result 7. Gender disaggregated results are not provided at output level.

solutions through including information on how to use old clothing in place of disposable pads if women did not have the resources to purchase these items.

188. **Implementation of household level connections saved both women and men time and effort in collecting water compared to public access points**. Women and girls were not only responsible for water collection in all provinces (see Figure 6).[90] Thus, moving water sources inside the home saves time for whoever is responsible, but it does not automatically benefit women and girls. In areas where women were not previously involved in water collection, relocating the water source inside the household may create a new responsibility for them, rather than reducing their workload. Therefore, the relocation of water sources inside the household could increase the burden on women as they take on this additional task in households where men had previously held primarily responsible for water collection when it was located outside the household. Importantly, UNICEF does not collect data on women's use of time nor did the evaluation have scope to explore this issue in further detail.

Figure 6 Responsibility for water collection outside the house (n=946)

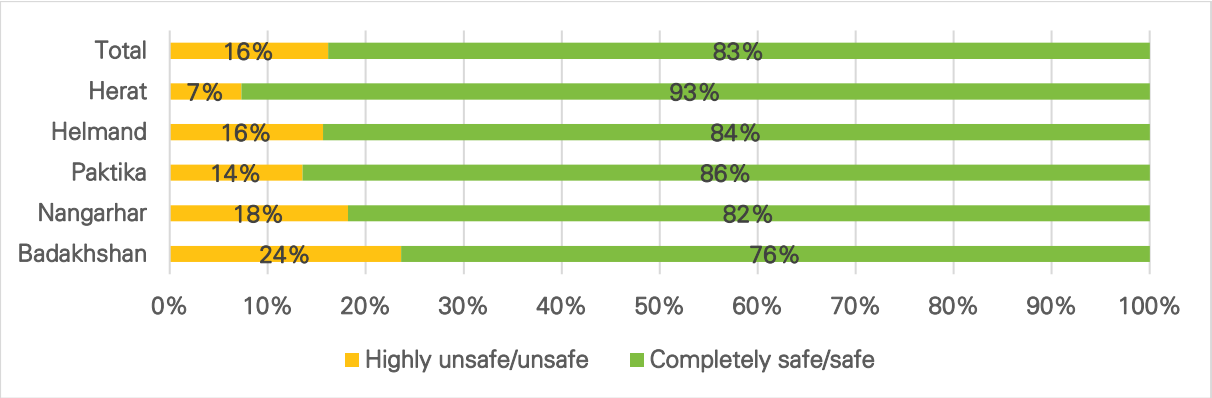


Source: Evaluation HH survey.

189. **Increasing access to water in homes reduced exposure to GBV and other risks.** As highlighted by secondary literature, women travelling outside the home to access water and sanitation services face heightened GBV risks.[91] The household connections facilitated through complementary funding helped mitigate this risk for households who were assisted. Not surprisingly, given the sensitivity of the issue, GBV issues were not mentioned directly in qualitative data. However, some respondents highlighted the importance of household connections in maintaining women's privacy and 'comfort' more generally. The continued reliance on public sources of water among many households continues to pose a threat for women and girls. As shown in Figure 7 below, the perception of these risks varies by province.

[90] Responsibility for water collection was not asked when the water source was inside the household.
[91] See, for example, UN OCHA, "Afghanistan Humanitarian Needs and Response Plan 2024."; UNICEF and WHO, "Progress on Household Drinking Water, Sanitation and Hygiene 2000-2022."; "Combining WASH and GBV Prevention – Pooled Funds Impact Story Hub."

Figure 7 Safety perceptions for women and girls collecting water from public sources (n=984)



Source: Evaluation HH survey

190. **WASH investments in schools and HCF were insufficient to meet the needs of women and girls, especially without complementary inputs.** Unavailability of WASH facilities represents only one of many barriers to girls' education and health service uptake in Afghanistan. Even prior to the DfA takeover, girls' access to education and health services in Afghanistan was limited by multi-faceted social, cultural and economic factors. Access has subsequently deteriorated with DfA edicts, particularly the full ban on girls' secondary education, and economic impacts of the withdrawal of international financing.

191. In the one girls' school identified for primary data collection, teachers highlighted the insufficiency of water and complementary investments. While one teacher asserted that increased water availability at the community level had increased the attendance of children, no teacher attributed the increase directly to the WASH investments in the school, as water was unavailable to most students. The observation confirmed gaps in WASH support.

192. FGDs and KIIs with health facility stakeholders similarly highlighted the insufficiency of investments to meet the specific needs of women and girls. These gaps were confirmed in observations conducted for the evaluation (see Appendix 25). Beyond the gender-specific needs, stakeholders highlighted major gaps in their ability to deliver services to all populations seeking health support.

193. It is unclear the extent to which the ECHO-supported WASH interventions increased the participation of women and girls in decision-making around water resources. No relevant data was included in PDM/EUM reports provided to the ET. While stakeholders acknowledged the efforts to include women in community WASH structures, data was not available from UNICEF or IP stakeholders to comprehensively assess the composition of WASH committees and related management structures involved in ECHO WASH implementation.

194. **Commitment to employing women frontline workers has provided an important income source in an increasingly restrictive environment.** UNICEF and IP stakeholders emphasized efforts to employ women where possible and UNICEF's advocacy work to ensure these employment opportunities are maintained. At the community level, prospects for employing women as labourers, mechanics or guards for community water schemes and other investments are difficult within the conservative context and DfA restrictions on mobility. However, other programmes in Afghanistan are seeking to engage women in paid work through WASH programmes.[92]

5.8.4 Human rights

EQ8.3: How well did Programme design, implementation, monitoring and reporting integrate human rights principles particularly concerning child rights?

195. As already extensively explored under the Relevance and Management and M&E

[92] UNDP, "Japan and UNDP Launch a New Project to Empower Afghan Women and Strengthen Community Climate Resilience."

196. **The Programme implemented a multi-layered monitoring system that played a significant role in the achieved results despite notable weaknesses in its monitoring system.** The multi-layered monitoring approach involved implementing partners, WASH facilitators (extenders), UNICEF field staff, TPMs, and communities in an informal role. This comprehensive system helped ensure thorough and regular oversight, particularly in progress tracking and identifying key gaps and bottlenecks during execution with implementing partners and UNICEF staff at the field office level across all regions. The system also had several weaknesses which lessened its utility, including average to weak technical capacities at the field staff level to inspect engineering aspects of construction projects, inconsistent monitoring checklist, change of TPM entity, and the varied quality and frequency of reporting.

197. Despite these weaknesses, the system provided oversight, effectively tracking progress and identifying key gaps and bottlenecks during implementation. Monitoring reports were regularly shared with implementing partners and UNICEF staff across all regions, contributing to the completion of projects to the specified standards with low-to-moderate variations.

198. The knowledge management system was limited to generating and sharing data around groundwater monitoring with significantly potential in contributing to strengthen integrated water management system in Afghanistan in the future.

199. Equity and disability criteria, there were gaps in inclusion and participation of women and people with disabilities in the programme. Results are not re-presented here to prevent duplication.

5.8.4.1 Non-discrimination and equality

200. **Stakeholder feedback suggests most programme services were delivered equitably at the community or household level; gaps related to political pressure and input adequacy were reported challenges**. While multiple UNICEF and IP stakeholders noted occasional pressure from the DfA, all but one affirmed resistance to non-needs-based influences. One UNICEF stakeholder mentioned rare instances of discrimination due to political considerations, staff biases, or ease of access. Community participants generally agreed with the selection process but noted implementation gaps. Some raised concerns about possible corruption (2 FGDs), while others reported that insufficient inputs meant not everyone benefitted equitably (3 FGDs).

201. **The poorest households and communities may not have sustained access to water**. The requirement for households to pay for the service, while highlighted as essential for the sustainability of investments, raises risks for the poorest households and communities. As highlighted in 2 FGDs, communities and households have lost access to water because of their inability to pay. While some communities have taken it upon themselves to exempt the poorest households from payment (reported by one IP and in one FGD), this practice is not systematically implemented.

202. **Reliance on community-level needs identification may produce gaps in addressing the needs of the most marginalised communities.** One IP raised the risk that WASH investments, relying on community petitions to the MRRD, might leave out communities unaware of their rights or the risks of inadequate WASH infrastructure. This concern was validated by FGDs, where a community member in the North cited their inability to approach authorities due to his "disadvantaged" status. While UNICEF and IP stakeholders did not express concerns about potential DfA repression of petitions, there is widespread acknowledgment of DfA discrimination, particularly against minorities like the Hazaras.[93]

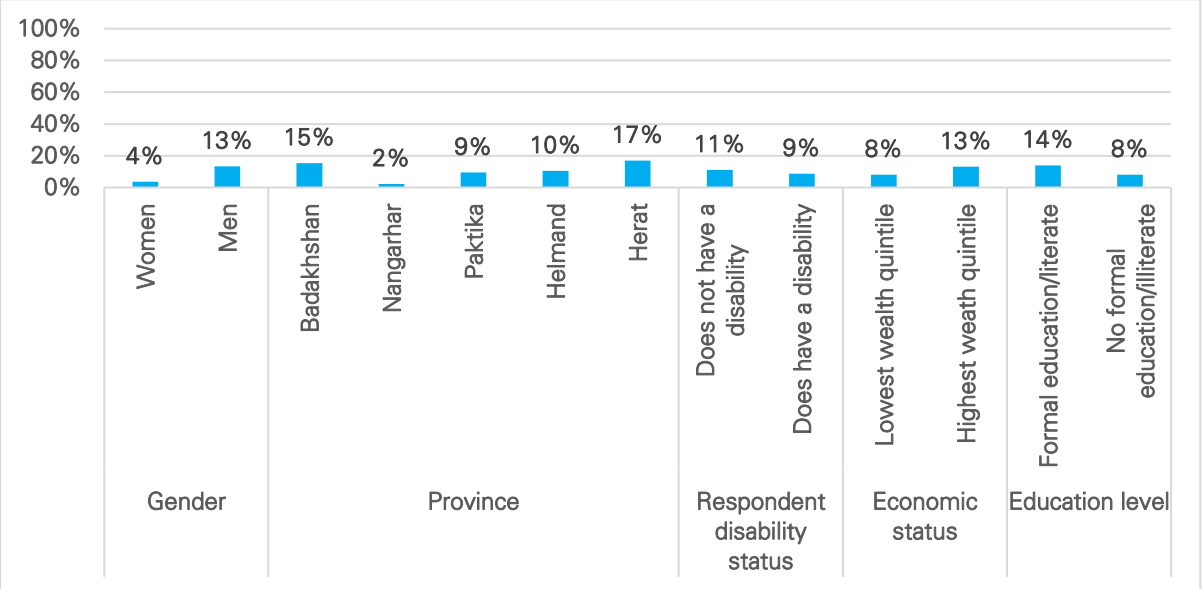
5.8.4.2 Accountability and transparency

203. **Despite the availability of various feedback and complaints mechanisms (FCM), awareness of available FCMs remains low.** Based on the household survey, only 8% of respondents who had received materials/messages related to WASH were aware of any helpline number, contact person, or forum where they could register their concerns, complaints or feedback about WASH

[93] United Nations Human Rights Office of the High Commissioner, "Afghanistan."

supplies, services, or facilities in their community. There was some notable variation in awareness according to respondent demographics with women and respondents in Nangahar less likely to be aware of FCMs. These findings are further triangulated from TPM reports and external data sources (see Figure 8).

Figure 8 Awareness of FCMs (n=1001)



Source: Evaluation HH survey.

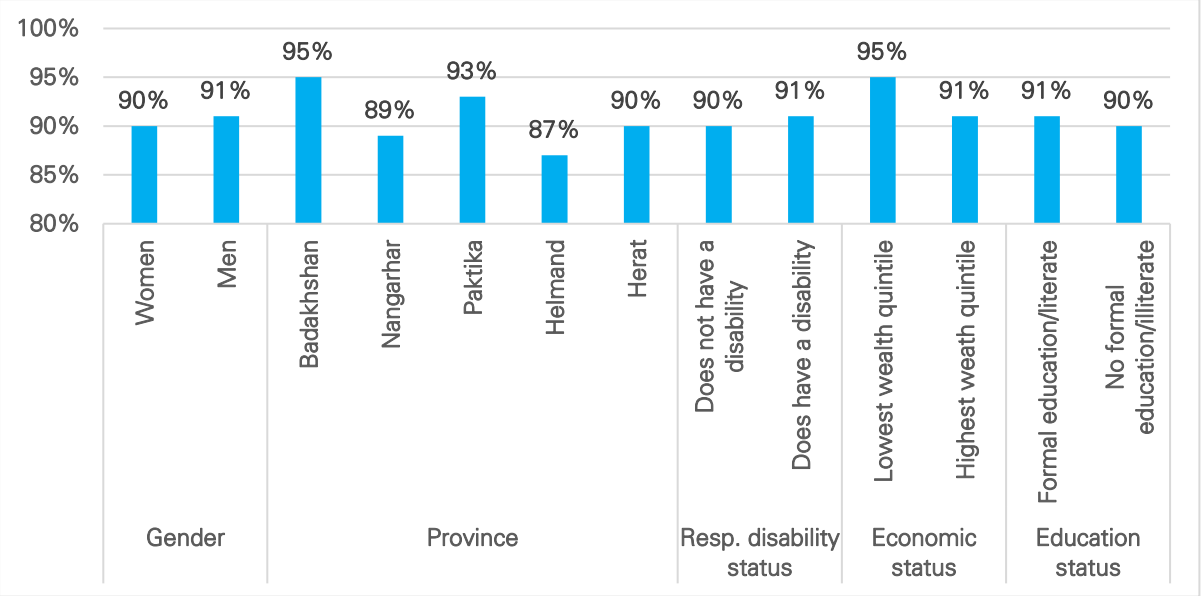
204. **FCM reports from UNICEF suggest women have equal access to feedback mechanisms.** According to the ECHO final report, UNICEF documented nearly 100,000 feedback and complaints (88,215) nationally between 2022 and 2023. Of these, 56 percent were from women, and 6% from girls. While this data is not WASH-specific, it is based on the same mechanisms available to WASH beneficiaries per the project design thus suggesting that women have reasonable access to these services. When asked about any specific outreach for women given vulnerabilities in terms of exclusion and lack of access to rights and services, interviewees stressed the diversity of information sources as a primary asset, especially stakeholders positioned within health interventions where women faced fewer barriers in working (and thus interfacing with women directly).

205. It was not feasible to comprehensively evaluate the responsiveness of the ECHO-supported WASH Programme to received complaints. Per communications with the UNICEF WASH team, they do not have direct access to these data sources (AWAAZ Afghanistan is an inter-agency platform and U-Report is managed by UNICEF's SBC team).[94] While WASH stakeholders mentioned that these sources share "critical reports" there is no tracking at programme level to confirm responsiveness.

206. **Qualitative and quantitative data confirms satisfaction with programme staff conduct.** A large majority of respondents who had received materials/messages related to WASH reported that staff/worker behaviour was "very positive" or "positive". There was very little variation in these reports by respondent demographics (see Figure 9). Community-level stakeholders were similarly positive except for some FGD participants in one FGD who reported mistreatment by programme engineers.

[94] ECHO WASH Evaluation: Updates," April 15, 2024.

Figure 9 Satisfaction with staff behaviour (n=1001)



Source: Evaluation HH survey

5.8.5 Climate and Environmental and Social Safeguards (ESS)

EQ8.4: To what extent are climate resilience, and adherence to ESS integrated into the design and approach of the programme delivery model to ensure equitable WASH outcomes and environmental sustainability?

5.8.5.1 Climate change

207. **Climate change considerations have been broadly included at analysis and design stages.** The CM included a relevant risk analysis of the most critical climate risks to WASH services and communities.[95] The level of consideration at implementation stage is less clear. Interim and final ECHO reports state various assessments that were conducted. UNICEF and IP stakeholders referenced 'technical assessments' in needs identification, though these did not appear explicitly related to assessing climate risks.

208. **Implementation has sought to minimize environmental harm, particularly through water supply systems.** Stakeholders were most consistent in noting environmental considerations in WSSs. Environmental considerations related to sanitation were less frequently mentioned; the fact that no specific activities were planned/budgeted for excreta removal raises concerns for potential environmental risks (though no negative effects related to this were mentioned in qualitative data collection). Procurement procedures showed preference for local suppliers when available, reducing the environmental footprint of the response.[96] Stakeholders were broadly positive about the success of these efforts. However, a few UNICEF stakeholders highlighted the need to strengthen the integration of environmental considerations. Suggestions included planting trees and terracing the landscape to more comprehensively integrate water resource management into the WSS.

209. **Observations highlight gaps in the resilience of rehabilitated infrastructure in schools and HCFs.** Most of the latrines in the 24 HCFs where sanitation activities had been conducted were 'fully resilient' according to ATR observers. In schools, latrines in two of the four observed schools were considered 'fully resilient' (see Table 16).

[95] UNICEF, "Modification Request." Reference to Emergency Earthquake Response Plan (Jul- Sep 2022)
[96] UNICEF, "Modification Request."

Table 16 Perceived climate resilience of observed latrines in schools and HCFs

	HCFs		Schools	
Latrines have fully resilient structure (stable, able to withstand natural disasters)	N	%	N	%
	20	83%	2	50%

Source: Evaluation observation checklist

210. **The groundwater monitoring and establishment of a data platform is an important platform to ensure the sustainability of groundwater resources.** The ECHO-supported WASH Programme's investment in the groundwater monitoring system in Afghanistan is expected to improve data-driven decision-making for future water-related structures and the expansion of UNICEF collaboration with the MEW, improving advocacy and evidence generation.[97] As a result, UNICEF finalized a study mapping groundwater potential and vulnerability, and the suitability of existing monitoring systems alongside key recommendations for improving monitoring.[98]

5.8.5.2 Environmental and Social Safeguards

211. **The ACO readiness for ESS implementation in the ECHO-supported WASH Programme can be considered 'partially in place'.** The ACO has the policies, standards, operational procedures, accountability and M&E systems 'mostly in place'; stakeholder engagement is also reasonably well established. The main gap in ESS positioning is in relation to Quality Assurance (see Figure 10).

Figure 10 Overview of ECHO supported WASH Programme scores for each assessment component

Source: ET calculation based on primary and secondary data review. Scores range from 0 (not in place) to 5 (fully in place).

212. ESS is noted as an emerging priority within the ACO, intending to align with UNICEF's Global Sustainability and Climate Action Plan, supporting the development of contextualized strategies. The ECHO-supported WASH Programme does not specifically emphasize ESS; this was not a requirement of the donor. However, both UNICEF and most staff were aware of the importance of integrating ESS into Programme implementation. ESS protocols and safeguards were appropriately considered not as standalone elements but as part of regular pre-project feasibility assessments (including design, equipment, technical, geological, hydrological, social, and environmental aspects) and throughout the execution. The CM mentions "social and environmental screening" though it was unclear from KIIs if risks were screened at site level and what this assessment or potential mitigation plans entailed.

213. The ACO has two ESS focal points in the Social Policy section, who support the CO in ESS capacitation and implementation. According to interviews, these stakeholders were not involved in Programme implementation. The operational procedures for integrating ESS considerations are evidenced to align with ECHO requirements and the ACO has clear SOPs for operating the

[97] UNICEF support for water resources' monitoring (Concept note) n.d.
[98] The "Strengthening the monitoring of groundwater and surface water in Afghanistan". Referenced in the final report.

grievance redress mechanism. However, there is room for further capacity strengthening. Further details per criteria are available in Appendix 25.

214. **There were some environmental and social risks associated with ECHO-supported WASH implementation.** In KIIs, stakeholders mentioned conflicts created by unsuitable location of the water source selected for system development. These stakeholders noted that the issues were eventually resolved, highlighting the responsiveness of UNICEF and IP systems. A DfA stakeholder also noted community conflicts during the implementation stage as landowners who have donated land for pumping later demand payment which UNICEF has no funds for. In this case, the stakeholder reported reliance on the district and provincial representatives from the DfA, community leaders and the community to "convince landowners" or find alternative lands.

215. Some low to moderate level undesirable environmental and social impacts were reported at the community level, albeit infrequently. Conflicts related to WASH activities were reported in three of the eleven community-level FGDs (27%) concerning perceived unfair distribution of WASH supplies (two FGDs) and the potential for escalating conflicts following water being shut off (one FGD). One focus group in the HCF reported environmental pollution due to insufficient desludging services, while a second highlighted potential conflict based on shopkeeper demands to supply water from the heath facility. In one school, the teachers and school head noted the conflict created by the decision to extend water to schools despite community-level dissent.

5.9 Lessons and Good Practices

5.9.1 Lessons

216. **The inclusion of resilient interventions under the emergency fund, particularly focusing on water supply systems, has been valuable in mitigating health emergencies in vulnerable communities.** These interventions were essential during periods of AWD outbreaks, providing timely access to safe drinking water. The ECHO-supported WASH Programme's focus on resilience has not only addressed immediate health crises but also contributed to strengthening the long-term sustainability of water systems in conflict-affected areas. This approach has the potential to be replicated in other emergency contexts where waterborne diseases pose a significant risk to vulnerable populations.

217. **The prepositioning of essential supplies under the ECHO Fund, despite logistical challenges, ensured continuity in response efforts and maintained operational effectiveness. The success of this approach merits its applicability in other similar contexts.** By stocking necessary items in advance, the ECHO-supported WASH Programme avoided delays in urgently required interventions, particularly in hard-to-reach areas where supply chain disruptions could have severely impacted the timely delivery of services. This proactive strategy not only mitigated potential gaps in service delivery but also enhanced the programme's overall efficiency in responding to emergencies.

218. **Ensuring clear communication and alignment at the design stage on key definitions, such as "hard-to-reach" areas, from the outset is essential to avoid discrepancies in addressing the needs of conflict-affected communities.** Within the ECHO-supported WASH Programme, differences in donor and implementer definitions initially led to challenges in targeting the most vulnerable populations. By aligning these definitions, the programme was able to more effectively direct resources to those in greatest need. This lesson underscores the importance of clear communication in multi-stakeholder projects and can be applied to similar programmes to improve coordination and impact.

219. **Coordinating with the DfA, despite restrictions on financial transactions, is essential for areas such as situation analysis.** Active engagement with DfA entities was important in facilitating their contribution to programming efforts within the ECHO-supported WASH Programme. This lesson highlights the importance of engagement with DfA entities, even in contexts of international sanctions, and can be applied to other programmes in similar contexts.

220. **While TPMs can enhance quality, it must be accepted by the relevant stakeholders to be effective.** The TPM data faced mixed and varied level of acceptance by different stakeholders

(internal and external). A thorough and careful review of its continuity will add value to UNICEF's WASH as well as other sectoral programming in Afghanistan. This lesson emphasizes the need for ensuring the reliability and acceptance of TPM data, which is beneficial for quality improvement and can be applied to similar other programmes.

221. **The ECHO-supported WASH Programme's efforts in groundwater monitoring enabled systematic data collection and sharing added value to future priorities.** This lesson merits replication by other programmes aiming to improve data-driven policies and programmes in the public sector.

222. **Programmes must be adaptable to sudden policy changes, such as the recent dissolution of CDCs, by developing new strategies and leveraging existing community structures.** The Programme's adaptability is essential in the future to ensure continued service delivery despite such policy disruptions. This lesson is essential for other programmes operating in volatile policy environments, highlighting the need for flexibility.

223. Appendix 26 provides some additional lessons drawn from evaluation findings.

5.9.2 Good Practices

224. **Managing the inconsistency between ECHO donor restrictions on household connections, which they considered as 'development work,' and the DfA policy requiring household connections, was effectively addressed by UNICEF through complementary funding.** By mobilizing resources from other donors and UNICEF's regular resources, UNICEF was able to comply with the DfA policies while continuing to engage in advocacy and negotiations with ECHO. This ongoing dialogue demonstrated the need for flexibility in donor guidelines to align with local priorities, ultimately allowing for the implementation of projects that addressed both emergency needs and long-term sustainability goals. This good practice is significant because it highlights the importance of strategic resource mobilization and persistent advocacy in reconciling differing policy priorities, ensuring that critical WASH interventions could proceed effectively within a complex operational environment.

225. **The inclusion of emergency-affected districts into planning processes, particularly those districts experiencing high AWD cases in 2022, exemplifies a proactive approach to prioritizing interventions where they are most needed.** By focusing on these vulnerable areas for water supply and sanitation interventions in 2023, UNICEF demonstrated a strategic alignment of resources to address the most critical public health risks. This approach proved essential in reducing AWD cases, showing the effectiveness of targeted intervention planning based on real-time data. This good practice underscores the significance of incorporating dynamic needs assessments into programme design to enhance the impact of emergency response activities.

226. **The "crisis modifier" feature within the ECHO-supported WASH Programme allowed for the allocation of funds to address urgent humanitarian needs during crises such as earthquakes or displacement incidents.** This mechanism provided UNICEF with the flexibility to respond effectively without waiting for mobilization of additional resources from other donors or new sources. A few operational limitations (delays typically associated with seeking prior authorization for fund use) were noted. The ability to reallocate funding for alternative projects further exemplifies ECHO's adaptability and commitment to maximizing resource impact. This practice is critical for the ECHO-supported WASH Programme as it enhances the ability to deliver interventions during emergencies, ensuring that affected populations receive the necessary assistance when it is most urgently required.

6 Conclusions

227. **Relevance:** The Programme was 'highly relevant' at the strategic and design levels for addressing the WASH needs of the population, given the complex and protracted nature of emergencies and the weak or absence of long-term durable solutions that perpetuate WASH deprivations. However, at the implementation level, a range of challenges somewhat undermined the programme's relevance. These included data gaps and inconsistencies that limited the refinement of more inclusive targeting and implementation strategies, an evolving operational context, and the ongoing and future WASH needs driven by frequent emergencies and climate impacts. Additionally, inconsistencies between ECHO donor conditionalities and the DfA policies on WASH programming further complicated implementation. Despite these obstacles, the programme's flexible and adaptive management has maintained and enhanced the programme's relevance. Finally, funding gaps prevented more comprehensive implementation strategies that could address the diversity of WASH needs at community level.

228. **Coherence:** UNICEF's ECHO-supported WASH interventions demonstrated strategic alignment with other key sectors within the organization, the broader basic service prioritization of the DfA, and the WASH sector programming of other partners and donors. However, confusion over terminology in the proposal stage created initial tensions with ECHO. While complementarities are more evident at the design level, integration at the implementation level faced challenges, particularly in relation to the education sector. Although synergies with health, nutrition and SBC interventions were evident, overall integration was hindered by siloed ministry approval processes, advocacy and planning, and information management and sharing systems. The introduction of a centralized monitoring system (AMIS) aims to address these issues, but it was not operational during the Programme implementation.

229. **Effectiveness:** The Programme made notable progress in improving water access by constructing and rehabilitating systems. Key achievements include transitioning from water trucking to more sustainable sources and delivering water to vulnerable communities, including those in previously inaccessible areas. The programme's emergency response during crises, such as the Paktika and Herat earthquakes, strengthened from largely effective to fully effective respectively. Efforts also focused on groundwater monitoring and promoting integrated water resource management. The programme integrated WASH with health and nutrition sectors, thereby contributing to efforts in addressing root causes of polio, AWD and malnutrition.

230. The Programme's success was driven by key enabling factors including flexible funding allocation, effective crisis modifier utilization, and strategic prepositioning of supplies. Strong partnerships, coordination with the DfA, and community involvement, coupled with effective coordination mechanisms and adaptability, ensured that WASH services were delivered effectively despite evolving challenges. The programme's effectiveness and implementation were also challenged by factors like policy and donor misalignment, bureaucratic delays, and financial management issues. These challenges, along with logistical, security, and environmental constraints, caused delays, increased costs, and limited the programme's overall reach and effectiveness.

231. **Efficiency:** The Programme demonstrated significant strengths in terms of human resources, funding, and time management, though challenges in each area impacted overall efficiency. UNICEF's WASH section maintained adequate human resource capacity, but gaps in DfA sectoral departments and high turnover among IP and TPM entities affected project monitoring and consistency. The €21 million ECHO funding was essential for supporting life-saving actions during transition by the new regime, yet it did not fully meet broader WASH sector needs.

232. While the two-year time frame of the ECHO-supported WASH grant provided a reasonable time for a more comprehensive approach compared to other typical emergency grants, operational and bureaucratic challenges such as delays in approvals and site selection reduced the effective time for implementation, particularly for long-term projects. Despite these obstacles, UNICEF was able to mitigate risks and improve cost-effectiveness by continual adjustments in strategies, involvement of CDCs, and consistent follow-ups, ensuring that the programme achieved its core objectives under challenging circumstances. Continued focus on

strengthening human resources, securing adequate funding, and optimizing timelines is essential for future interventions.

233. **Sustainability:** The sustainability of the Programme results is linked to addressing both strategic enablers and persistent challenges. While strong community involvement, effective partnerships, and frequent monitoring have laid a solid foundation, significant risks remain. Political instability, economic constraints, and environmental factors, particularly declining water tables in drought-prone areas and floods, pose substantial threats to long-term sustainability. The programme's future success will depend on reinforcing community ownership, improving technical training, and supporting effective operation and maintenance of systems. Additionally, aligning DfA policies, securing sustained donor investment, and integrating climate resilience into water resource management are essential. Strategic focus on these areas will be critical to preserving the programme's achievements and securing lasting WASH benefits for vulnerable communities.

234. **Coverage:** The Programme's coverage reflected a strategic focus on addressing water scarcity and hygiene needs across all five zones, with 100% coverage in Water Supply Schemes and 80% in Hygiene Promotion activities. However, the limited reach of Sanitation interventions (covering only 3 zones, 5 provinces, and 16 villages) and WASH Supplies Distribution (covering 2 zones, 8 provinces, and 45 villages) highlights gaps, particularly in areas prioritized for emergency responses such as earthquakes and floods during 2022-2023. For example, while the Central Zone achieved the highest coverage for WSS and HP, the Western Zone exhibited the lowest coverage across multiple intervention types. These geographic disparities indicate a need for more balanced resource allocation to ensure equitable and integrated service delivery across all WASH components. Addressing these gaps will enhance resource optimization and expand access to essential services.

235. **Coordination:** UNICEF's coordination and collaboration with diverse stakeholders were instrumental in the success of the ECHO-supported WASH response, demonstrating its leadership in fostering a strategic and effective humanitarian intervention. Through robust partnerships with international and national NGOs and academic institutions, UNICEF expanded the reach and impact of WASH interventions, balancing global standards with local needs. Coordination with DfA was essential for approvals. Despite facing challenges such as political sensitivities, bureaucratic hurdles, and capacity constraints, UNICEF's proactive approach to aligning efforts across sectors and levels minimized duplication and optimized resource utilization. However, the need for improved sub-national coordination, particularly in resource management, more harmonized data management and reporting with WASH cluster, and more sectoral integration highlights areas for further strengthening to ensure sustained impact and efficiency in future WASH interventions.

236. **Equity and disability:** The Programme's integration and compliance with equity and disability considerations is assessed as 'partially effective.' The ECHO proposal clearly emphasized disability and age analysis; stakeholders were less consistent in their confirmation of representation and consultation with PwDs during implementation, though limitations in data collection are acknowledged. Gaps in monitoring and consistent reporting of results for PwDs and other equity aspects undermined the programme's focus on equity and disability. Additionally, internal monitoring data lacked explicit equity considerations, with significant inconsistencies in the reporting of disaggregated data by disability, limiting UNICEF's oversight of these issues by disability. Some stakeholders raised concerns that reliance on CDCs for implementation may produce gaps in attention to disability and other equity parameters compared to I/NGO implementation.

237. **Gender:** While evaluation evidence suggests success in reaching men and women equitably, the interventions were hampered by inconsistent data collection and limited complementary support, which constrained the potential impact on women's lives. Furthermore, the impact of WASH investments in schools and health centre facilities was insufficient to significantly improve outcomes for girls and women due to broader socio-cultural barriers and limited infrastructural investments. While efforts to employ women as frontline workers were noted, restrictive cultural

norms and legal limitations undermined their participation in decision-making and broader economic opportunities. Overall, while some progress was made, the interventions could not fully address the deeper gender inequalities within the context.

238. **Human rights:** Overall findings suggest commitment to HRBA in design and implementation with only isolated reporting of political and logistical biases highlight site-specific risks. While most community members were positive about community leaders as appropriate and effective actors in managing humanitarian interventions, the reports of corruption/mismanagement in some communities highlight the need to ensure localised understanding and assessment of actors and potential risks. The low awareness of programme feedback mechanisms limits understanding of how well the programme is responding to community concerns, indicating areas for further improvement in ensuring responsiveness.

239. **Climate change and ESS:** Climate change and ESS considerations were appropriate for ECHO requirements but do not appear to align with UNICEF's internal aspirations. ACO ESS capacity, and ability to incorporate climate risks, is moderately developed but lacks in quality assurance and site-specific resilience. While social aspects and broad climate change considerations were mostly considered at the design stage, some environmental safeguards were less consistent during implementation. Efforts to minimize environmental harm were evident, particularly using solar energy and water management practices, but challenges in ESS integration and reported instances of community conflicts revealed the need for stronger safeguards and improved infrastructure resilience.

7 Recommendations

240. The following recommendations are derived from conclusions that flow from the evaluation findings. Presented in priority order based on ET judgment, these recommendations are drawn from triangulating key suggestions provided by respondents during primary data collection, considering operational and contextual challenges in Afghanistan, and corroborating with programme documents. Dedicated follow-up discussions on recommendations were also held with evaluation reference group members, senior officials from UNICEF, implementing partners, and TPM to refine these recommendations.

241. Finally, the ET combined their extensive sectoral experience to draft these recommendations, and the related actions points (to address 'how' elements of each recommendation). The prioritization (immediate, medium-term, long-term) and timeframes are suggestive only, based on the evaluation team's assessment of urgency but may need to be adjusted by the UNICEF WASH team, considering internal priorities and other programmatic, operational, and contextual factors.

	Recommendations and action points	Priority / Time frame	Responsibility
1.	Review and update existing monitoring indicators, databases, data collection, and reporting formats with harmonized and standardized indicators to achieve complete alignment with the WASH Cluster, particularly for emergency response. • Disseminate the refined monitoring framework to all key partners and strengthen their capacity to align their internal monitoring systems with those of UNICEF and the WASH Cluster. This will address inconsistencies in data collection, progress tracking, and reporting. • Additionally, focus on harmonizing monitoring systems for WASH supplies (core pipeline) and sustainability indicators, as these were identified as areas of weakness during the ECHO timeframe.	Immediate (Within 3-6 months)	UNICEF Afghanistan WASH section, WASH Cluster, PMD
2.	Strengthen organizational preparedness to better align with the nature of the emergency grants like ECHO, BHA where the project locations are identified based on the donor conditions and emergency situation/type. This could be achieved by the following actions. • Continue efforts such as the Shelves Project to prioritize the early identification of the required water supply projects and ensure the completion of geological or technical assessments, contracting, and necessary preparations in advance. This proactive approach will help streamline implementation, ensure timely execution, and reduce challenges related to MOU approvals, reducing the need to rush through critical project aspects. This prioritisation will need to balance preparedness with sensitivity in not raising expectations from communities and the MRRD given financing gaps. • Continue organizing regular coordination meetings, sharing project plans early, and involving relevant ministries (MRRD/PRRD, MoE) in decision-making processes to gather their input and leverage their influence on all these aspects. • Focus on achieving better alignment of key emergency definitions between ECHO's conditions and unique nature of chronic emergencies in Afghanistan at the proposal stage, particularly with ECHO and other	Medium-Term (6 months to 1 Year)	UNICEF Afghanistan WASH Team, WASH Cluster, Resource Mobilization

	Recommendations and action points	Priority / Time frame	Responsibility
	emergency grants. This alignment should provide flexibility to respond to national guidelines and address chronic emergencies beyond immediate responses like water trucking and temporary solutions. In doing so, insert a glossary of technical and operational terms in every proposal to ECHO and other emergency donors; ensure clear and consistent communication of key terminologies and definitions with the DfA, implementation partners, and TPM entities during project initiation stages.		
3.	Deepen the understanding and broaden the scope of knowledge management beyond its singular current focus on ground and surface water monitoring. Consider the following actions: • Plan real-time formative evidence generation to identify operational bottlenecks, co-formulate recommendations in collaboration with health, polio, nutrition, SBC, gender, and education teams, implement course corrections, and enhance the integration, and quality of emergency response interventions. This was a gap during ECHO-supported WASH emergency responses. • Develop a comprehensive framework and actionable roadmap, including cost estimations and potential funding sources, to guide these efforts. • Encourage collaboration by involving all sections (i.e., health, nutrition, polio, education, gender, SBC, child protection, etc.) to pool their funds and efforts, thereby creating a unified approach to knowledge management and sharing. • Document and share best practices from successful ECHO-supported interventions, like solar water projects, to promote sector learning and advocate for donor funding to scale up and replicate these models. • Invest in knowledge management related capacity assessments and strengthen the capabilities of key implementing partners on this cross-cutting priority area. • Enhance collaboration with multiple national academic institutions and engage with UNICEF ROSA and HQ to secure their technical and financial support.	**Long-term** (Within 1-2 years)	UNICEF Afghanistan WASH and relevant programme sections, WASH Cluster, PMD, Management (Deputy Representative)
4.	Enhance coordination by leveraging the strengths of MoPH, MRRD, and MoE to improve community-level outreach, especially through women outreach workers, and prioritize climate-resilient WASH interventions in schools through a phased and coordinated approach. • Engage ministries and local authorities in joint discussions to leverage their complementary strengths, particularly MoPH's women outreach workers who have flexibility in community-level activities despite restrictions. Foster synergistic planning and execution between WASH, health, nutrition, and SBC initiatives to overcome the shortage of women staff, to the extent possible in the current context. • Enhance coordination for implementing a more balanced approach with MRRD and MoPH to better leverage their complementary strengths particularly to enhance hygiene promotion and social behaviour change efforts, compensating for MRRD's limited women outreach capacity. • Collaborate with Education section to strengthen their technical capacities in planning climate-focused resilient WASH interventions in schools. "WASH in schools" agenda should be further strengthened	**Medium-Term** (6 months to 1 Year)	UNICEF Afghanistan relevant programme sections (WASH, SBC, Education), WASH Cluster

	Recommendations and action points	Priority / Time frame	Responsibility
	between WASH and education sections. This requires coordination with the Ministry of Education to prioritize and address WASH needs in schools. Support WASH section and MoE in prioritizing climate-focused resilient WASH assessment of schools, in phase-wise approach, beyond simply relying on counting of WASH infrastructure in schools.		
5.	Continue enriching WASH sector programming to align with rapidly changing donor priorities by emphasizing climate change-focused and specific integrated programming to address multi-sectoral deprivations that address both immediate humanitarian and future WASH needs in the country. Map out the climate change-focused activities under each section, as well as opportunities for the integrated programming. Continue enhancing donor proposals with integrated planning strategies, including joint site/project identification, data sharing, monitoring, and reporting. These climate-focused, integrated proposals will help bridge funding gaps and tackle multi-sectoral deprivations across regions. Adapting donor advocacy in this direction will strengthen ongoing and past efforts, such as organizing donor workshops, which have been infrequent. • Enhance coordination with education, health, nutrition, gender, and SBC sections and relevant clusters to seek their input and sector specific evidence for more climate change focused integrated proposals and programming. • Leverage the WASH section's strengths in understanding resilient WASH interventions to support and guide the education and health sections in advocating for integrated WASH programming within health facilities and schools. Continue strengthening the relationships with key donors and international entities to enhance advocacy and fundraising efforts. This requires continuing enriching donor proposal with clear integrated implementation strategies such as joint identification of sites/projects, data sharing, monitoring and reporting. Integrated proposals with clear implementation strategies may have potential to reduce funding gap in WASH sector to address multi-sectoral deprivations across different regions. • Encourage continuation of advocacy and resource mobilization strategies by generating and utilizing evidence on the need for integrated water resource management and conducting equity analysis in newly accessible districts. • Advocate for flexibility and simplification of administrative measures with DfA ministries (MRRD, MEW, MoPH, MoE) for smooth programme implementation.	Immediate (Within 3-6 months)	UNICEF Afghanistan management, Resource mobilization, WASH, UNICEF Afghanistan relevant programmes (education, health, nutrition, gender, SBC), Relevant clusters
6.	Prioritize advocacy with the HAG and OCHA to compile community level data for a better understanding of WASH needs and deprivations. This will strengthen equity-focused community or village level targeting based on hard-to-	Long-term (Within 1-2 years)	UNICEF Afghanistan WASH section, WASH Cluster,

	Recommendations and action points	Priority / Time frame	Responsibility
	reach ranking, key health indicators, composite WASH vulnerabilities index, and other key parameters[99]. Adopt a phased approach to complete community-level WASH needs analysis in districts ranked high on WASH composite vulnerability index. Continue this phased approach based on resource availability. Suggested actions include: • Enrich the 'WASH Prioritization[100]' database with district-level information on key WASH indicators in HCFs which are currently missing. • The utility of the database could be enhanced through inclusion of data at the community level, which is currently non-existent. Available information is primarily held by the DfA and remains largely inaccessible to UNICEF and I/NGOs. • Ensure proper labelling or tagging of 'new accessible districts' in the WASH 2023 dashboard and activity Info database. This will strengthen equity-driven reporting of results and particularly the programme coverage. Currently, the marking or tagging of 'newly accessible areas' in the WASH 2023 dashboard and activity Info database is missing [though this data is available in other data sources].		Health, PMD
7.	Strengthen community engagement strategies across the WASH sector and other related sectors to enhance the sustainability of WASH interventions and improve gender integration and protection strategies. Given the impact of the recent dissolution[101] of CDCs and restrictions on women's participation beyond health staff, these elements are essential pre-requisites for enhanced sustainability and gender integration. Suggested actions include: • Undertake broader consultations within the WASH sector and across other sectors to refine community engagement approaches that address these challenges. • Leverage the already established 'grandmother groups' by the SBC teams to disseminate key WASH messages. • Target and work with local community-level influencers (both men and women). Consider strengthening 'WASH Committees' within communities, empowering them to participate in basic planning, monitoring, and the repair and maintenance of WASH infrastructure in communities, schools, and healthcare facilities. • Expand the future WASH interventions' reach to girls, and women. Design and implement more focused targeting approaches which are well aligned to country context such as targeting the more traditional 'learning institutions' in the country which are situated in both rural and urban context and are requiring addressing their WASH needs. This will allow an enhanced access and reach to adolescents (boys and girls).	Medium-Term (6 months to 1 Year)	UNICEF Afghanistan WASH and relevant programme sections (SBC, Education) WASH Cluster

[99] Access to handwashing in schools; Access to toilet in schools; Access to WASH in schools; Access to water in schools; Composite sanitation vulnerabilities; Composite WASH vulnerabilities; Composite water vulnerabilities; All ODF communities to date; ODF Communities by total communities.

[100] https://app.powerbi.com/groups/me/reports/820ccde5-5779-4b87-bc44-cbe47ea0e0de/ReportSection?ctid=77410195-14e1-4fb8-904b-ab1892023667&openReportSource=ReportInvitation&experience=power-bi (Humanitarian Access Group (HAG), Feb 2021, OCHA)

[101] Afghanistan's Community Development Councils (CDCs) have been abolished by the Islamic Emirate of Afghanistan (IEA). June 28, 2024. https://reliefweb.int/report/afghanistan/fate-village-councils-emirates-effort-institute-hegemony-over-rural-afghanistan#:~:text=Afghanistan's%20Community%20Development%20Councils%20(CDCs,Emirate%20of%20Afghanistan%20(IEA).

	Recommendations and action points	Priority / Time frame	Responsibility
8.	Strengthen both rural and urban WASH services by providing a comprehensive package that includes all essential components: water supply, sanitation, and hygiene promotion, incorporating context specific SBC approaches. • Continue coordinating MEW in expanding groundwater monitoring and integrating it with water supply systems, especially in water-scarce and drought-prone areas. Provide technical support to strengthen Urban WASH programming, focusing not necessarily on new construction, but on ensuring safe and clean water through water safety plans developed by relevant departments. • Emphasize prioritizing water safety practices within communities through targeted hygiene promotion activities. Address gaps in the quality of existing hygiene promotion activities through clear guidance on content and dissemination of messages by different entities, enhancing technical capacities of hygiene promotors and ensuring the inclusion of WASH messaging responsibilities within health and broader SBC activities. • Review coverage of sanitation services as a secondary priority for emergency response, reviewing gaps in coverage of ECHO-supported funding to be supported through complementary internal or external sources as needed.	**Medium-Term** (6 months to 1 Year)	UNICEF Afghanistan WASH section, SBC WASH Cluster Relevant programme sections (Health, SBC)
9.	Increase the systematic inclusion of equity, disability, gender and ESS into WASH programming. Continue advocacy to secure exemptions in the short term and demonstrate flexibility or overturn the ban on women working in WASH outreach in the long term. Consider undertaking the following actions: • Prepare and implement protocols on WASH supplies distribution to ensure accessibility to persons with disabilities. • Ensure that the procurement and estimation of WASH supplies are guided by updated evidence of emergency WASH needs. Address issues like the unnecessary distribution of soap bars to the same beneficiaries to improve equity-focused planning and distribution of supplies for an effective response that meets actual needs. Review procurement guidelines and implementation plans to ensure alignment with SPHERE standards. • Continue ensuring the availability of adequate budget to enable women's participation as outreach workers (including hiring 'mahrams') as required. • Assess the implementation of programme activities at community level against the minimum standards for quality programming in Afghanistan: AAP, PSEA, Gender and Disability Inclusion including assessment of social risks and revising and harmonizing TPM monitoring formats to systematically monitor environmental, social, protection and accessibility concerns/risks. • Continue efforts to publicize AAP mechanisms including ensuring Awaaz helpline number is provided with distributions/painted on to infrastructure investments. • Work with other clusters to map areas at risk of exclusion (based on political, ethnic, religious, and economic considerations) from self-raising needs and conduct village-level assessments.	**Long-term** (Within 1-2 years)	UNICEF Afghanistan WASH and relevant programme sections (SBC, Gender, SPEAR, PMD) WASH Cluster

	Recommendations and action points	Priority / Time frame	Responsibility
	• Review and update the M&E system to track equitable, to the extent possible in the current context, participation in design/management/responsibility, as well as the distinct effects of WASH/MHM on women/girls, men/boys, and other interventions to support persons with special needs with strategies to disaggregate data meaningfully.		
10.	Enhance capacities of IPs and continue coordination with DfA to leverage their input, community level data sharing, and administrative influence in planning and implementation of WASH interventions beyond the emergency context. • Coordinate with DfA, within the limits of existing engagement mode, to leverage their inputs and reduce bureaucratic hurdles. • Seminars or workshops should be organized for IPs capacity enhancements such as WASH-related technical knowledge, project management, and community engagement. • Establish regular coordination meetings between UNICEF and implementing partners to align on programme objectives and address implementation challenges.	Medium-Term (6 months to 1 Year)	UNICEF Afghanistan WASH and relevant sections (PMD) WASH Cluster