

Emergency multisectoral humanitarian assistance to conflict-affected people in Ukraine

Final Performance Evaluation
Inception Report

STUDY MATERIALS GLCb2033

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Acronyms

CATI	Computer assisted telephone interview
CC	Community centre
FGD	Focus group discussion
GCA	Government controlled areas
II	In-depth interview
KII	Key informant interview
MEL	Monitoring, evaluation and learning
NFI	Non-food item
NGCA	Non-government controlled areas
PAH	Polish Humanitarian Action
PIT	Performance indicator table
PSS	Psychosocial support
WASH	Water, sanitation and hygiene

1. Introduction

By the USAID/BHA evaluation policy, the Polish Humanitarian Action Mission in Ukraine ordered the summative performance evaluation of its 'Emergency multisectoral humanitarian assistance to conflict-affected people in Ukraine' Project. The project's implementation period is August 20, 2021 – August 19, 2023. Vox Populi Agency has been selected to realize the evaluation. The purpose of this inception report is to present a detailed approach to this task. The report includes an overview of the project and its intervention logic, evaluation methodology, evaluation questions judgment criteria, sampling approach and size, and possible research limitations and risks. This report also details the strategies to collect and analyze data. It presents data collection tools for the target audiences, an evaluation work plan, and a tentative list of key informants to select.

A separate section of the report explains how personally identifiable information will be protected and secured at all stages, from collection to reporting. The report references relevant Ukrainian norms regulating research involving human subjects and specifies how the measures will be applied in this assignment to comply accordingly.

2. Context and Project Background

The protracted crisis in eastern Ukraine escalated to a full-scale military conflict with at least 17.6 million people in need, according to the UN OCHA Humanitarian Needs Overview 2023. This includes 6.3 million internally displaced people, 4.4 million returnees and 6.9 million people who have remained at their homes throughout the war. The daily hostilities result in a sharp increase of civilian casualties (23,015 civilian casualties, as of April 17, 2023), damaging critical infrastructure and severely impacting the daily lives of the people residing in the areas and IDPs, and generating multiple humanitarian needs. Besides direct damage from shelling and forced internal displacement of up to 6.3 million people, an affected population with psychosocial problems, destroyed livelihoods, no access to proper WASH facilities, no capacity to cover basic needs, and often with no means to practice their rights appeared as a result of the armed conflict. The consequences of the conflict are more severe for those already vulnerable. Thus, many older people living along the contact line in Donetska and Luhanska GCAs and in NGCA have their well-being significantly degraded because of stress from continual shelling, lack of support from displaced relatives and friends, mobility restrictions, chronic diseases getting worse, poor access to quality water, and limited resources to cover their basic food needs. Recognizing the complexity of the humanitarian and protection needs of the conflict-affected people in Ukraine, the evaluated project applies a multi-sectoral approach.

Initially, Polish Humanitarian Action (PAH) was implementing the project titled Protection and humanitarian assistance to highly vulnerable conflict-affected older people living in Donetska and Luhanska Oblasts funded under USAID/BHA grant (Award No. 720BHA21GR00400). The project implementation period was from 20 August 2021 until 19 August 2022. The total amount of the project's budget is USD 1150,000,00. The program Goal was to reduce the vulnerabilities of the conflict-affected older persons, residing in Donetska and Luhanska Obasts through provision of emergency assistance in terms of protection, cash assistance, WASH and food security. The project is being implemented in locations in area along the "contact line", the most conflict-affected areas in Donetska and Luhanska GCAs, and in the locations throughout Donetska NGCA, where PAH is operating through its local partner.

The project before revision and extension consisted of three main components: 1) Protection, 2) WASH (Sanitation and WASH NFIs), 3) Food Security. PAH's approach to protection included individual PSS, individual psychological counselling, home-based care, and legal assistance provided by the employees of Community Centers, as well as other project specialists remotely. In Donetska NGCA, protection was focused on individual PSS sessions based on a simplified program, home-based care. It was planned that hobby clubs would include

elements of PSS program to provide group PSS to their participants in the Community Centers (based in the local Territorial Centers). In GCAs, older people with mobility restrictions were provided with assistive devices that enabled them to be more independent in their daily tasks. In Donetska NGCA, older people were provided with food kits to cover their needs during the winter season. In Donetska NGCA, protection activities and distribution of food kits were done by PAH Partner “Charitable Foundation “Donbass Development Center” (Further – CF DDC). In order to implement programming in Donetska NGCA, each organization should receive accreditation of the project activities to be implemented from de facto authorities. In 2020, PAH’s Partner has received accreditation from de facto authorities to implement such project activities as distribution of food and WASH NFIs kits (including for people with special needs). Protection activities started being implemented along with the distribution of the kits. In January 2021, CF DDC received rejection to continue further implementation of projects activities (distribution of assistive devices as well). In the view of the received rejection, protection activities were implemented only partially. PAH through UN OCHA strived for negotiation with the de facto to receive accreditation; the process is ongoing.

To improve access to safe water for conflict-affected population PAH planned to additionally conduct rehabilitation works in selected water supply sites, but did not manage to do it before invasion.

Based on the changes that took place since the early morning of February 24, 2022, PAH put in place an updated set of contingency plans. Then implemented activities were suspended due to the ongoing conflict and were replaced with multisectoral emergency response. The remaining amount of \$ 789 105 USD together with and additionally requested \$ 3 210 895 USD are redirected to the activities within the following components 1) Protection, 2) Food Security, 3) Multipurpose Cash Assistance (MPCA), 4) WASH, and 5) Shelter & Settlements.

After revision and approval of the changes by BHA the project title is Emergency multisectoral humanitarian assistance to conflict affected people in Ukraine. It aims at reducing the suffering and improving well-being of conflict affected people in Donetska, Luhanska, Kyivska, Zaporizka, Dnipropietrovska and Sumska oblasts, namely through the following activities:

- 1) Providing vulnerable men and women with home-based care and individual PSS for the most vulnerable older people, psychological first aid (PFA), and psychological consultations for conflict-affected men, women, and children to improve their psychosocial well-being;
- 2) Providing most vulnerable conflict-affected people with MPCA (in the areas feasible for CBA) to enhance their ability to cover basic needs;
- 3) Rehabilitating critical WASH infrastructure and distributing WASH NFI kits in collective centers for IDPs/social institutions and establishing WASH facilities (toilets, hand washing stations) near the border crossings to improve access to dignified hygiene conditions;
- 4) Providing highly vulnerable conflict-affected men and women with food kits containing essential food items to enhance their ability to meet basic food needs;
- 5) Providing NFI kits at both institutional (collective centers) and household levels to improve affected population’s shelter solutions.

Being present in Ukraine since August 2014, PAH established a full-fledged structure, with its country office in Kyiv and field offices – in Kramatorsk and Bakhmut (Donetska GCAs). PAH activities are funded by a broad range of donors: USAID/BHA, UNICEF, UHF and Polish Ministry of Foreign Affairs with additional funds originating from Polish society. PAH has experience operating in both GCA and NGCA and a strong expertise in implementing projects with focus on psychosocial support and developing capacities of community members,

while taking into consideration long term impact and sustainability. For more than six years of presence in Ukraine, PAH has implemented following activities: 1) Protection, 2) MPCA, 3) WASH, 4) Food assistance and livelihoods. While implementing these activities, PAH has built strong working relationships with local authorities (GCA), sub-awardees (both GCA and NGCA) and local communities. Moreover, since establishing first Community Centres for older people in 2018 and by the beginning of 2022, PAH has trained more than 100 community workers in provision of PSS in more than 20 locations in the areas within 0-10 km along that time contact line. However, due to the invasion a number of CCs had to terminate their work and the staff of the community workers decreased.

PAH is an active member of the Protection and Health Clusters, WASH Cluster, Food Security and Livelihood Cluster, Cash Working Group, MHPSS TWG, and Age and Disability Working Group. Regular updates on PAH activities, covering their nature, targeted beneficiaries, covered locations and sources of funding are shared with the Clusters/WGs on a regular basis in order to ensure proper coordination of humanitarian activities and referrals of beneficiaries. To minimize overlaps and gaps, PAH regularly shares information about its activities and needs of beneficiaries with other NGOs and UN agencies, including People in Need, HelpAge International, UNHCR, Proliska, Caritas, NRC, ASB and others.

2.1. Intervention logic

The project's hypothesis is the following:

If the conflict-affected people are provided with the emergency life-saving assistance in terms of protection, WASH, food, NFI, shelter and MPCA, then they will reduce their vulnerabilities and increase their resilience towards the consequences of the conflict.

The project's principal objective is: To reduce suffering and improve well-being of people affected by the conflict in Ukraine through emergency time-critical assistance and ensuring access to basic essential services.

Recognizing the complexity of humanitarian and protection needs of the conflict-affected people in Ukraine, the programme is applying a multi-sectoral approach. Specifically, the programme aims at achieving the following objectives:

- Objective 1: To improve psychosocial well-being of conflict-affected men and women, boys and girls;
- Objective 2: To improve ability of highly vulnerable conflict-affected population to meet their basic needs;
- Objective 3: To improve access to dignified hygiene conditions for conflict-affected population;
- Objective 4: To enhance ability of conflict-affected older population to meet their basic food needs;
- Objective 5: To increase access of conflict-affected men and women to NFIs.

The chain of project activities from objectives to outputs and results that details what PAH aimed to achieve and how it was measured, is shown in **Annex I: Logframe of the project Emergency multisectoral humanitarian assistance to conflict-affected people in Ukraine.**

For the project's hypothesis the underlying assumptions and external factors that may influence program performance are as follows:

- The large-scale military offensive does not escalate in proposed project sites and does not result in interruption or suspension of project activities.
- Political situation enables to conduct project activities and reach the beneficiaries in selected project locations.

- There is a sufficient number of recruited, trained and qualified staff to provide high quality assistance relevant to the needs of the affected people
- Suppliers and/or local workers are reliable and transparent in the areas of project implementation, including compliance with policies, law and procedures.
- Beneficiaries are not exposed to harm, abuse and/or violence during participation in project activities as unintended negative effect of the action.
- Safety of beneficiaries.
- Prices and currency exchange rates will remain stable as foreseen during the period of project implementation.
- Stability of the market and access of beneficiaries to market to meet their basic needs.
- The most vulnerable people are targeted by the project.
- Contractors/vendors/ suppliers responsible for provision of services are able to provide them to beneficiaries according to the requirements.

3. Assessment methodology

3.1. Overall approach, objectives and scope

The main aim of this evaluation is ensuring accountability to beneficiaries and improving PAH's program effectiveness. The results of the evaluation will be described and grouped into three main sections: findings, conclusions, and recommendations. The recommendations will be incorporated into PAH's future programming in Ukraine as well as shared with PAH HQ to be potentially incorporated into programming at other PAH missions.

The evaluation will follow the BHA Guidance for M&E¹, the American Evaluation Association (AEA) recommendations and Quality Standards for Development Evaluation of Organization for Economic Co-operation and Development (OECD)². The evaluation team will use such OECD DAC evaluation criteria as relevance, effectiveness of the intervention for analyzing and assessing how the Project achieved its results to date. Efficiency, impact, sustainability and coherence criteria are not in the focus of this evaluation.

The evaluation will be inclusive in terms of collecting perspectives of a broad range of stakeholders.

To ensure the accuracy and validity of the study findings the team will ensure that:

- More than one data source is used for the key findings of the research (triangulation);
- Respondents are aware that there are no right or wrong answers to the evaluators' questions, and can speak freely;
- The team members demonstrate neutral and independent behavior with non-biased views;
- Conclusions of this evaluation are clearly based on findings, and recommendations are clearly based on conclusions;
- All analytical deliverables are practical, easy to read and usable for PAH, USAID/BHA and other

¹Bureau for Humanitarian Assistance Technical Guidance for Monitoring, Evaluation, and Reporting for Emergency Activities.

https://www.usaid.gov/sites/default/files/2022-05/BHA_Emergency_ME_Guidance_February_2022.pdf

² [https://www.oecd-ilibrary.org/docserver/9789264083905-](https://www.oecd-ilibrary.org/docserver/9789264083905-en.pdf?expires=1599754118&id=id&accname=guest&checksum=8365C8007DC39C9C12CBD7F3B78FF6DB)

[en.pdf?expires=1599754118&id=id&accname=guest&checksum=8365C8007DC39C9C12CBD7F3B78FF6DB](https://www.oecd-ilibrary.org/docserver/9789264083905-en.pdf?expires=1599754118&id=id&accname=guest&checksum=8365C8007DC39C9C12CBD7F3B78FF6DB)

stakeholders.

Assessment objectives

The objectives for this summative performance evaluation are as follows:

1. To evaluate the effectiveness and relevance of the project activities in relation to the activity's purposes and results;
2. To identify best practices and lessons-learned in the activity design and implementation for achieving the activity's expected results.

Evaluation questions and evaluation framework

To assess the relevance and effectiveness of the selected project activities, this evaluation will answer 3 evaluation questions, presented below:

- 1) Relevance: To which extent have the activity objectives, design and results addressed beneficiaries needs and priorities, including across different population groups?
- 2) Effectiveness: To what extent were the outcomes and objectives achieved / are likely to be achieved?
- 3) Effectiveness: What were the major factors influencing the achievement or non-achievement of the objectives?

In order to achieve the objective 2 the study will answer additional questions regarding best practices and lessons-learned:

- 1) Which practices (cases) related to design and implementation are the most effective for achieving the activity's expected results and might be incorporated into PAH's future programming in Ukraine as well as shared with PAH HQ to be potentially incorporated into programming at other PAH missions?
- 2) Which practices used by the Project, on the contrary, are less effective in Ukrainian conditions?

The primary output and outcome-level indicators of interest this evaluation will use to assess the overall performance of the project are the following:

BHA Indicator No.	Indicator Title
C1	Percentage of people reporting improvement of psychosocial well-being, by sex and age (CUSTOM)
C2	Percent of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner (CUSTOM)
M2	Percentage of households who report being able to meet their basic needs of their households (all/most/some/none), according to their priorities
M3	Percentage of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner
M6	Percent of beneficiary households reporting adequate access to household non-food items
FS1	Percent of (beneficiary) households by Food Consumption Score (FCS) phase (Poor, Borderline, and Acceptable)
M8	Percentage of households who have reduced essential WASH related basic needs expenditures
K01	Total USD value of cash transferred to beneficiaries

W19	Percent of latrines/defecation sites in the target population with handwashing facilities that are functional and in use
W26	Percent of households reporting satisfaction with the contents of the WASH NFIs received through direct distribution (i.e., kits) or vouchers
W28	Percent of households reporting satisfaction with the quality of WASH NFIs received through direct distribution (i.e., kits), vouchers, or cash
W13	Number of individuals directly utilizing improved sanitation services provided with BHA funding
W20	Average number of users per functioning toilet
FS1	Percent of households with poor, borderline, and acceptable Food Consumption Score (FCS) (BHA).
C3	Percent of households reporting satisfaction with the contents of the food kits received through direct distribution (CUSTOM)
C4	Percent of households reporting satisfaction with the quality of food kits received through direct distribution (CUSTOM)
FS2	Mean and median Reduced Coping Strategy Index (rCSI) score (BHA)
F02	Percent of households where women/men reported participating in decisions on the use of food assistance
C5	Percent of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner (CUSTOM)
S05	Number and percent of beneficiaries reporting satisfaction with the quality of the NFIs received
P6	Number of individuals participating in psychosocial support services (BHA)
M1	Total number of individuals (beneficiaries) assisted through multipurpose cash activities
W25	Total number of individuals receiving WASH NFIs assistance through all modalities (without double-counting)
C6	Number of WASH NFIs kits provided to collective centres for IDPs/social institutions
F1	Number of beneficiaries receiving food assistance
S7	Number and percent of beneficiary households receiving NFIs in identified settlement(s) through use of in-kind NFIs
C7	Number of NFI kits provided to the collective centres (CUSTOM)

3.2. Data collection

Due to the security situation, degraded transportation availability and in order to be able to reach beneficiaries, data collection will be realized online and via phone.

The following data collection methods will be used in this evaluation:

- desk review of the project's documentation and reports,
- key informants' interviews (KII) with the implementing partners (PAH country office and regional offices representatives), CCs representatives, partner organizations, **volunteers**;
- in-depth interviews (II) with local stakeholders (local authorities in programme locations, **management of the assisted social and shelter facilities**);
- focus group discussions (FGD) with beneficiaries of the programme;

- CATI interviews with beneficiaries of the programme.

During the desk phase, the evaluation team reviewed the provided project's documentation, including grant proposal narrative, MEL plan, MEL and performance reports, PIT to strengthen its understanding of the project design, implementation process, achieved results and the context in which it had been operating. Information from the MEL and performance reports was used for planning the sampling approach and preliminary selection of the **most informative locations as units of the sample**.

We will continue data collection with the key informant and in-depth interviews with the implementing partner, CCs, partner organizations' representatives, and local stakeholders to start with the big picture and then go into details to understand the project implementation process, its effectiveness, and relevance, as well as identify best practices, barriers, and challenges in realizing of the programme in emergency circumstances in various project locations.

Focus group discussions and CATI survey will be held as the next step to collect data from the project's beneficiaries. Two online focus groups discussions and **600** of CATI interviews are planned for data collection. Individual/group interviews will be based on the protocols adjusted towards each target group – implementing partner representatives, CCs and partner organizations' representatives, local stakeholders – and in line with the analytical framework. Proposed protocols are presented in **Annex 5** of this report. They may be further refined during the data collection process in case of such a need.

Evaluators will take notes during the interviews/focus groups and will maximize full recording of the interviews in Zoom or other video conferencing platform. Getting an informed consent of the respondents is the must for starting the recording. In case when a respondent is opposed to the interview recording, only notes of the evaluators will be used for analysis and documentation of the evaluation results.

3.3. Explanation of Sampling and Proposed Sample size

Qualitative purposive sample will be used to select respondents for KIIs, IIs, and FGDs. It will cover the following target groups:

- the implementing partners (PAH country office and regional offices representatives);
- CCs representatives, partner organizations, **volunteers**;
- local stakeholders (local authorities in programme locations, **management of the assisted social and shelter facilities**);
- beneficiaries of the programme.

For planning samples of CCs representatives, partner organizations, **volunteers**, and local stakeholders, primary units of selection will be locations where PAH implemented the project. When selecting them, we will take into account outstanding intensive cases to learn from those that are exemplars of best practices, as well as to consider the barriers and unfavorable conditions. Informationally reach cases will be chosen to study the evaluation questions in depth.

To ensure maximum variation, while selecting locations we will take into account the distribution of the project activities by the geographical regions, type of the communities (urban/settlement or rural), type of implemented activities. This heterogenous approach to sampling will yield the following kinds of findings:

- 1) Illustrative detailed stories from each prominent case to document uniqueness;
- 2) discovered shared patterns that emerge out of heterogeneity.

FGDs with beneficiaries of the programme will be conducted with homogeneous groups of participants. To fully use benefits of this method of data collection we need to recruit people with similar background that will help them to build rapport and freely share their experiences and thoughts.

For selecting individual respondents, we will consider their knowledge about the project and experience regarding receiving and using provided aid. We plan to select FGD participants from quantitative survey respondents who will express willingness to provide their feedback.

Respondents for the quantitative survey will be randomly selected from the project's beneficiary database and we will survey them if they confirm receiving aid from PAH and agree to participate. We expect that an achieved sample of randomly selected beneficiaries will be close by key characteristics to the distribution in the population of the beneficiaries of this project. In a case where significant differences will be found between them, weights might be calculated and applied. PAH representatives will be informed about it and a weighting procedure will be agreed with them.

Key informants and in-depth interviews

22 interviews are planned as this stage with the following distribution by types of the respondents:

Types of respondents	# of interviewees
PAH country office and regional offices representatives	12
CCs representatives, partner organizations, volunteers	5
Local authorities	2
Management of the assisted social and shelter facilities	3
Total	22

11 KIIs will be conducted with PAH staff and 1 with USAID/BHA representative. 10 in-depth interviews will be organized to maximize qualitative representation of different types of locations (communities) covered by the project taking into account the abovementioned factors – geographical regions, type of community, type of implemented activities. The draft sample structure based on the results presented in the Project's documentation and preliminary consultations with the PAH MEAL team is presented in the Annex 3 of this report.

FGD with beneficiaries of the programme

We will conduct two FGDs: one group with people who received PSS services and another one with beneficiaries of MCVA, WASH and food assistance. 6-8 participants will take part in the focus group discussion (FGD) to be conducted online via Zoom or other video conferencing platform.

Beneficiaries' survey

CATI will be used as a data collection method for this survey. We plan

The questionnaire will be developed in collaboration with PAH MEL team. We expect that an interview (including a respondent selection) with this tool would not exceed 20 minutes. We will conduct a questionnaire pretest and interviewer briefing before commencing the fieldwork. The final version of the tool will be approved by PAH. The following script will be used for respondents' selection and to check the relevance of the provided contacts for the survey purposes:

- randomly dialed numbers
- if there is a gender/age in the database, it is immediately checked whether it is this person's number. if not, the number is marked in the database as belonging to someone else
- if there is a gender/age match, then the questions of block A follow. Now I have made it so that we ask whether they remember any help at all (if not, a note is made in the database that nothing was remembered for this number).
- If they remembered help, we ask them who it was from. This will include the recall rate without the PGA prompt (and information about who else they received help from)
- Finally, a direct question about the PHA and what exactly they received. If the PHA did not recall, then the contact database will indicate that the PHA did not recall this number
- then the questionnaire is filled out if the PHA is remembered

Quality assurance procedures will be a part of daily routine – a fieldwork supervisor will be able to check work of each interviewer and make corrections if needed.

We plan to callback to 10% of respondents in order to check if the interview was conducted. Special attention will be paid to interviews with inconsistencies revealed during data logical control.

3.4. Methods for analysis

The assessment will entail qualitative data analysis to uncover the themes relevant to the research questions. The quantitative data analysis will be employed to find out answers to evaluation questions from the beneficiaries' perspective and confirm findings of the qualitative study and desk research.

The main evaluation activities will include mapping and triangulation of evidence through the review of the Project's documentation, monitoring data and report and analysis of the interviews and focus group discussions results, quantitative survey data. To answer the evaluation questions, the evaluation team will obtain data from more than one type of respondent and triangulate data. Agreement between respondents of different types on a given question tends to suggest that the received data are accurate. Differences may indicate either inaccuracies or the possibility that the project had different effects for different types of respondents studied or locations covered.

We will use a case-based approach to illustrate changes and successful project results, including rich in detailed descriptions of what were programme's specific ways for achieving the successful results. This 'how we learned to do it' focus in presenting project results will be helpful for future scaling up of the project experience in Ukraine or abroad.

The report will analyze both different experiences of the individuals in the project and variations in program processes at different sites.

Debriefing/validation

After submitting the draft evaluation report, we will conduct an online validation meeting with relevant PAH program and technical staff to collect feedbacks and additional input that will serve to validate initial findings and recommendations before they are made final.

Table of contents for a final report

The final report should have the following structure:

- Table of Contents
- List of acronyms and abbreviations
- Executive Summary
- Introduction
- Description of the Intervention
- Evaluation Scope and Objectives
- Lessons Learned
- Findings, Conclusions, and Recommendations
- Report Annexes.

4. Protecting Data and Personal Identifying Information

There are no specific laws or norms regulating research involving human subjects in Ukraine, except for clinical trials involving humans. Conducting social research in Ukraine you should follow general norms defined by Ukrainian legislation (Constitution, Civic and Criminal Codes). It is widespread that social researchers follow international ethical standards or a code of professional ethics of a sociologist approved by the Sociological Association of Ukraine (<http://sau.in.ua/app/uploads/2019/07/Kodeks-socziologa.docx>).

In the evaluation of the PAH program we plan to apply all the necessary measures in order to correspond to those norms:

- voluntary participation of respondents in the evaluation - respondents will receive all the necessary information about the evaluation;
 - respondents will provide consent for interview and its recording - confidentiality and anonymity will be ensured
- Evaluators will read a brief statement about the purpose of the study and voluntary participation in the interview and will answer respondents' questions before proceeding with interview.

We will secure and protect the data collected from the respondents of this evaluation study, particularly personal identifying information, taking the following actions:

- interviews log file and timetable – containing personal identifying information, e.g names, emails, and phone numbers of the respondents, will be shared exclusively among evaluation team members and PAH MEAL team;
- specific codes will be applied for all informants to anonymize the interview recording and the interview notes' files;
- if there will be a need to quote individual participant in the report, only key words may be presented, taken in quotation mark, but without any identifying details – such as location, respondent's position or name;
- the data collected from respondents will be kept separately from the interviews' log file and timetable;
- interviews and FGD recordings will be kept safely – on personal password-protected computers of the evaluation team members - and erased after approval of the evaluation report.

5. Risks and possible limitations

The main factor that may influence realization of this evaluation is an ongoing security situation due to which access to respondents might be deteriorated, as well as worsen evaluation team working conditions (e.g. electricity blackouts). Drastic changes in the security situation may cause delays in the field data collection.

The survey of beneficiaries is the component prone to potential limitations most of all. Due to the fact that respondents might receive assistance from various sources it might be difficult to recollect aid from the USAID/BHA programme implemented by PAH. On the other hand, it might be difficult for beneficiaries to remember details about assistance and, respectively, to provide an opinion about it.

Moreover, participation in the in-depth interviews for project assessment purpose may be new and worrying experience for some stakeholders making them reluctant to take part in the evaluation.

Effective planning and support from PAH staff will help to find timely solutions for possible delays and problems in communication with project's technical staff, stakeholders and beneficiaries.

6. Resources and logistic support

The evaluation team will use Vox Populi resources for organization, data collection and analysis of the results in this evaluation. We rely on support of the PAH team in finding most informative cases for the purposes of this evaluation. An official letter of support from PAH might be needed to contact stakeholders and unroll effective recruiting and data collection there.

Principal Objective: To reduce suffering and improve well-being of people affected by the conflict in Ukraine through emergency time-critical assistance and ensuring access to basic essential services				
Specific Objectives	Results	Outputs	Verifiable indicators	Data Collection Method
Objective 1: To improve psychosocial well-being of conflict-affected men and women, boys and girls	Result 1: 11 500 conflict-affected men and women, boys and girls, targeted by the program, improved their psychosocial well-being	Output 1: 11 500 conflict-affected men and women, boys and girls, targeted by the program, participated in psychosocial support services	1. Number of individuals participating in psychosocial support services (BHA) 2. Percentage of people reporting improvement of psychosocial well-being, by sex and age (CUSTOM) 3. Percent of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner (CUSTOM)	1. Project documents and records review 2. Ex-ante and ex-post structured surveys with all PSS beneficiaries targeted by the programme initially in Donetska and Luhanska oblast 3. Endline study/PIM study for beneficiaries targeted by the programme after invasion OR self-reported questionnaire

<p>Objective 2: To improve ability of highly vulnerable conflict-affected population to meet their basic needs</p>	<p>Result 2: 5000 highly vulnerable conflict affected men and women improved their ability to cover the basic needs (including but not limited to food needs and access to essential WASH NFIs)</p>	<p>Output 2: 5000 highly vulnerable conflict affected men and women assisted with MPCA</p> <p>Output 3: 1 110 000 USD in cash transferred to beneficiaries</p>	<ol style="list-style-type: none"> 1. Total number of people assisted through multipurpose cash activities 2. Percentage of households who report being able to meet their basic needs of their households (all/most/some/none), according to their priorities 3. Percentage of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable and participatory manner 4. Percent of beneficiary households reporting adequate access to household non- food items 5. Percentage of households by Food Consumption Score (FCS) phase (Poor, Borderline, and Acceptable); 6. Percentage of households who have reduced essential WASH related basic needs expenditures 	<ol style="list-style-type: none"> 1. Project documents and records review 2. Survey (structured interviews with beneficiaries) 3. Review of financial documents
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<p>Objective 3: To improve access to dignified hygiene conditions for conflict-affected population</p>	<p>Result 3: Highly vulnerable conflict-affected men and women, who are residents of collective centres for IDPs/social institutions improved access to dignified hygiene conditions in WASH facilities in line with applicable standards.</p> <p>Result 4: 1350 highly vulnerable conflict-affected men and women, boys and girls have increased access to essential WASH non-food items (NFIs), as defined by Sphere or</p>	<p>Output 4: Highly vulnerable conflict-affected men and women, who are residents of collective centres for IDPs/social institutions directly utilizing improved sanitation services provided with BHA funding;</p> <p>Output 5: 1350 highly vulnerable conflict-affected men and women, boys and girls received WASH NFIs assistance.</p>	<p><u>Sanitation:</u></p> <ol style="list-style-type: none"> 1. Number of people directly utilizing improved sanitation services provided with BHA funding (BHA) 2. Average number of users per functioning toilet (BHA) 3. Percent of latrines/defecation sites in the target population with handwashing facilities that are functional and in use (BHA) <p><u>WASH Non-food items:</u></p> <ol style="list-style-type: none"> 1. Total number of people receiving WASH NFIs assistance through all modalities (without double counting) (BHA). 2. Number of WASH NFIs kits provided to collective centres for IDPs/social institutions 3. Percent of households reporting satisfaction with the contents of the WASH NFIs received through direct distribution (i.e. kits) or vouchers (BHA) 4. Percent of households reporting satisfaction with the quality of WASH NFIs received through direct distribution (i.e. kits), vouchers, or cash (BHA) 	<p>Sanitation: Review of documents and records of selected institutions/KII with managers of the institutions.</p> <p>WASH Non-food items: 1. Regular reporting 2. Survey (Structured interviews with beneficiaries)</p>
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	national standards			
Objective 4: To enhance ability of conflict-affected older population to meet their basic food needs	Result 5: 5400 highly vulnerable conflict-affected men and women have enhanced the ability to meet their basic food needs	Output 6: 5400 highly vulnerable conflict-affected men and women received food security assistance.	<ol style="list-style-type: none"> 1. Number of beneficiaries receiving food assistance 2. Percent of households with poor, borderline, and acceptable Food Consumption Score (FCS) (BHA). 3. Percent of households reporting satisfaction with the contents of the food kits received through direct distribution (CUSTOM) 4. Percent of households reporting satisfaction with the quality of food kits received through direct distribution 	<ol style="list-style-type: none"> 1. Regular reporting 2. Survey (Structured interviews with beneficiaries)

			(CUSTOM) 5. Mean and median Reduced Coping Strategy Index (rCSI) score (BHA) 6. Percent of beneficiaries reporting that humanitarian assistance is delivered in a safe, accessible, accountable, and participatory manner (CUSTOM)	
Objective 5: To increase access of conflict-affected men and women to NFIs	Result 6: 1200 highly vulnerable conflict-affected men and women have increased access to NFIs	Output 7: 1200 highly vulnerable conflict-affected men and women received NFI kits	1. Number and percent of households receiving NFIs in identified settlement(s) through use of in-kind NFIs (BHA - S&S NFI) 2. Number and percent of individuals reporting satisfaction with the quality of the NFIs received (BHA - S&S NFI) 3. Number of NFI kits provided to the collective centres (CUSTOM)	1. Regular reporting 2. Survey (Structured interviews with beneficiaries)

Assumptions:

- The large-scale military offensive does not escalate in proposed project sites and does not result in interruption or suspension of project activities.
- Political situation enables to conduct project activities and reach the beneficiaries in selected project locations.
- There is a sufficient number of recruited, trained and qualified staff to provide high quality assistance relevant to the needs of the affected people
- Suppliers and/or local workers are reliable and transparent in the areas of project implementation, including compliance with policies, law and procedures.
- Beneficiaries are not exposed to harm, abuse and/or violence during participation in project activities as unintended negative effect of the action.
- Safety of beneficiaries.

- Prices and currency exchange rates will remain stable as foreseen during the period of project implementation.
- Stability of the market and access of beneficiaries to market to meet their basic needs.
- The most vulnerable people are targeted by the project.
- Contractors/vendors/ suppliers responsible for provision of services are able to provide them to beneficiaries according to the requirements.

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Annex 2. Deliverables and Milestones, Schedule

Milestones, deliverables	Date of completion
Milestone 1	
Milestone 2	
Milestone 3	

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Annex 3. Selection of Stakeholders for in-depth interviews

Criteria for selection	Indicative number of in-depth interviews
Region	
Dnipro	4
Kharkiv	3
Kyiv	3
Type of community	
urban/settlement	5
rural	5
Type of activity	
PSS	2
WASH	2
MCVA	3
Food	3

Preliminary List of Locations for Data Collection:

Community name	Community type	Region	Target Group	Number of Interviews

Annex 4. Evaluation Matrix

The matrix below presents the evaluation questions from the ToR, judgement criteria, preliminary indicators, sources and methods and tools for data collection. We will use only the indicators that appear most relevant during the data collection and analysis phase.

Assumptions to be assessed/ Judgement criteria	Preliminary indicators (which data to be collected)	Sources of verification	Methods and tools
EVALUATION QUESTION: To what extent were the outcomes and objectives achieved / are likely to be achieved?			
<p>EFFECTIVENESS The project has achieved the expected results (outputs and outcomes) under its Principal Objective, as well as Objectives for separate activities.</p>	<ul style="list-style-type: none"> • Evidence on the achieved project's outputs and outcomes • Evidence on the effectiveness of the specific project's activities • Perceptions/opinions on which activities were most effective and why • If there are any gaps remaining, in the achievement of results (outputs/outcomes) • Achievement of which results is expected in the nearest future • Unexpected results achieved 	<p>Project documentation – grant proposal narrative, MEL plan, MEL and performance reports, PIT.</p> <p>Insights and/or perceptions from respondents – PAH representatives, stakeholders, beneficiaries.</p>	<p>Desk review</p> <p>Key informants' interviews</p> <p>In-depth interviews</p> <p>Focus group discussions</p> <p>Beneficiaries' survey</p>
EVALUATION QUESTION: What were the major factors influencing the achievement or non-achievement of the objectives?			
<p>EFFECTIVENESS Factors contributing to / undermining the achievement of results (output and outcomes) of the project have been recognized and addressed where possible.</p>	<ul style="list-style-type: none"> • Evidence on the factors facilitating or impeding achievement of the project's outputs and outcomes • Evidence that these factors have been recognized and addressed where possible • Perceptions/opinions on which factors are the most critical and how to mitigate those undermining the project's effectiveness and employ facilitating factors • Perceptions/opinions regarding interaction with PAH representatives 	<p>Project documentation – grant proposal narrative, MEL plan, MEL and performance reports, PIT.</p> <p>Insights and/or perceptions from respondents – PAH representatives, stakeholders, beneficiaries.</p>	<p>Desk review</p> <p>Key informants' interviews</p> <p>In-depth interviews</p> <p>Focus group discussions</p> <p>Beneficiaries' survey</p>
EVALUATION QUESTION: To which extent have the activity objectives, design and results addressed beneficiaries' needs and priorities, including across different population groups?			

<p>RELEVANCE Project's activities are relevant to the beneficiaries' needs and are implemented in a relevant way. Activities are adopted to needs changing as a result of changing situation.</p>	<ul style="list-style-type: none"> ● Evidence confirming that project's activities are relevant to the beneficiaries' needs and are implemented in a relevant way (transparent and timely delivery, consideration of security aspects) ● Evidence and Insights/opinions that activities are adopted to changing needs of beneficiaries ● Insights/opinions confirming that project's activities are relevant to the beneficiaries' needs and are implemented in a relevant way 	<p>Project documentation grant proposal narrative, MEL reports and performance reports.</p> <p>Insights and/or perceptions from respondents – PAH representatives, stakeholders, beneficiaries.</p>	<p>Desk review</p> <p>Key informants' interviews</p> <p>In-depth interviews</p> <p>Focus group discussions</p> <p>Beneficiaries' survey</p>
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