Child Friendly Community Initiative

Evaluation Report, Sudan

October 2013 – January 2014

Emily Coinco
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### Acronyms and Abbreviations

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<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>CDC</td>
<td>Community Development Committee</td>
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<td>CDF</td>
<td>Community Development Fund</td>
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<td>CFCI</td>
<td>Child Friendly Community Initiative</td>
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<td>CFS</td>
<td>Child Friendly Space</td>
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<td>CFVI</td>
<td>Child Friendly Village Initiative</td>
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<td>CPAP</td>
<td>Country Program Action Plan</td>
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<td>CRLG</td>
<td>Community Radio Listening Group</td>
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<td>DCPSF</td>
<td>Darfur Community Peace Stability Fund</td>
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<tr>
<td>DG</td>
<td>Director General</td>
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<tr>
<td>FFAMC</td>
<td>Fiscal and Financial Allocation and Monitoring Commission</td>
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<tr>
<td>FGD(s)</td>
<td>Focus Group Discussion(s)</td>
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<tr>
<td>GoS</td>
<td>Government of Sudan</td>
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<tr>
<td>HAC</td>
<td>Humanitarian Affairs Commission</td>
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<tr>
<td>HCDG</td>
<td>Higher Council for Decentralized Government</td>
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<tr>
<td>LTC</td>
<td>Locality Technical Committee</td>
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<tr>
<td>MDG</td>
<td>Millennium Development Goals</td>
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<tr>
<td>MIC</td>
<td>Ministry of International Cooperation</td>
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<tr>
<td>MoF</td>
<td>Ministry of Finance</td>
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<tr>
<td>NCCW</td>
<td>National Council for Child Welfare</td>
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<tr>
<td>NPA</td>
<td>National Program of Action</td>
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<td>NFSS</td>
<td>National Fund for States Support</td>
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<tr>
<td>PRA(s)</td>
<td>Participatory Rural Appraisal(s)</td>
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<tr>
<td>SSC</td>
<td>State Steering Committee</td>
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<tr>
<td>UNDAF</td>
<td>United Nations Development Assistance Framework</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>WES</td>
<td>Water Environment and Sanitation</td>
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Acknowledgement

The author of this report would like to acknowledge and thank everyone who participated in, and assisted with this evaluation. Firstly, I thank the CFCI community members for their time and effort to participate in interviews and other activities during the course of the evaluation. The information, insights and experiences shared by women, children and various CFCI community members and CFCI personnel provided the groundwork for this paper.

Special thanks go to the many individuals and organizations, UNICEF staff, representatives from various government branches, UN agencies, non-government organizations, community based organization, traditional and administrative community leaders, religious leaders and other civil society actors who contributed their time and expertise to this research.

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I would like to acknowledge the dedication, hard work and the flexibility of the research team[1] who conducted focus group discussions, participatory rural appraisals and interviews through challenging conditions. Thanks also to Abdelrahaman Khalifa for his tireless work in coordination and following up with different stakeholders. Assistance provided by Alwala Kordofani, Dina Ali and El Siddig Musa Abbaker was greatly appreciated. I would like to thank the team, especially Abdelrahaman, for providing insights to the local contexts in the different states visited during the evaluation. Special thanks to Nawshad, Alwala, and the SPPME team for their feedback on the draft report.

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This evaluation was commissioned by UNICEF, Sudan. The opinions, comments and/or analysis contained in this document are those of the author’s and do not represent the views of UNICEF.

Emily Coinco

[1] See Annex 1 for a complete list of researcher’s names from all states.
Executive Summary

The purpose of this evaluation is to provide an independent, evidence-based evaluation of the Child Friendly Community Initiative (CFCI) to review the design, implementation and management of the program. The focus of the evaluation as stated in the Terms of Reference is more on the fidelity or implementation processes and mechanisms, resource mobilization and to a lesser degree, the program impact.

The objectives of the evaluation were to ascertain if the CFCI project objectives and results for 2007-2011 have been achieved; determine which elements of the project should be scaled up and mainstreamed in the Government and UNICEF programs and lastly, if necessary, propose a transition plan including the ideal management structure for the evolution.

Specific objectives of CFCI from 2007-2011, the coverage of this evaluation, are as follows: Ensure the formation, legalization, training and functioning of the selected 350 Community Development Committees (CDCs) in the 9 focus states; Ensure that by 2012, at least 75% of CFCI selected communities have improved the key indicators and become “child friendly”.

The first phase of the Child Friendly Community Initiative (CFCI) began in 2002 and was scheduled to complete in 2006. The program was later extended and was still functioning at a minimum level during the evaluation period. The CFCI evaluation covers the years 2007-2011 and was conducted from October 2013-January 2014.

Methodology: The CFCI evaluation utilized a mixed-method evaluation design to determine the best practices and lessons learned on the varying CFCI work contexts across the states. The evaluation utilized both qualitative and quantitative (secondary) data with ocular observations from diverse sources, which permitted triangulation to validate information collected from various sources for consistency. Key informant interviews and in-depth interviews were conducted in the federal, state and locality levels with both government and non-state actors, including target communities. Community members were involved in participatory rural appraisals, women and children in focus groups discussions from all evaluation states: Blue Nile, Gedarif, Kassala, North Darfur, North Kordofan, Red Sea, South Darfur, South/West Kordofan, and West Darfur in 22 CFCI communities. The evaluation provides the readers a snapshot of a specific time within Initiative timeframe.

From each state, a strong (green) community and weak (red) community were selected, whenever possible, an average (yellow) community was also selected to determine the factors contributing for progress variation of communities within and between states. The evaluation framework was guided by the Development Assistance Criteria for evaluation, namely: relevance, effectiveness, efficiency, impact and sustainability.

Scope and limitation: Since CFCI is not a single program with one proposal to evaluate against, it was determined in the outset that this evaluation will not be an impact evaluation, rather the evaluation will focus on the innovations and ways that CFCI communities adapted to the various situational contexts.
and funding changes throughout the years. It does not intend to compare CFCI communities with non-CFCI communities to measure program impact.

It is beyond the scope of this evaluation to conduct an in-depth analysis of all strengths and weaknesses of program activities implemented in the 22 sample CFCI evaluation communities due to the complexity and range of CFCI programs in relation to the time allotted. Secondary data was utilized to show the impact of CFCI activities supported by qualitative data collected during this evaluation. CFCI is a dynamic program with various donors and activities conducted in specific, sample communities. There is a gradation of programming from one community to another even within the same state. The methodology section in the report provides detailed information on the limitations and challenges in the evaluation related to sampling, accessibility, coordination and the difficulty in securing reliable and accurate data. The backdated period under which the evaluation was conducted may have also affected the quality of data collected.

CFCI in Brief: CFCI is a joint partnership between UNICEF and the Government of Sudan. CFCI was cited as a key strategy for promoting community empowerment and integration of basic services and related programs at community level in Northern Sudan, with similar efforts being initiated in the Southern part of Sudan in the Government of Sudan and UNICEF’s Country Program Plan for 2008. CFCI is a UNICEF and the Government of Sudan’s partnership program providing an integrated package of basic social services in education, health, nutrition, water, environment and sanitation, supported by a community mobilization and participation component, which aims to improve the well-being of children and women in the poorest and most vulnerable communities in Sudan. Sectoral support implemented through the relevant ministries is in terms of technical and infrastructure support.

An off-shoot to the success of earlier Child-Friendly Villages program, the CFCI had two major changes in program design; a more equitable selection of communities by selecting the most vulnerable communities instead of basing it on community demand and the omission of the budget line for sectoral activities for a stronger integration of UNICEF’s sectoral units in the hopes of eliminating program overlap and to better utilize UNICEF’s technical expertise in the CFCI intervention. The CFCI strategies are: capacity building, community empowerment and participation, coordination in the provision of basic services through sectoral ministries, advocacy and partnerships.

The CFCI Coordinating Mechanism operationalize this theory in the federal, state and locality level. A CFCI Unit is situated in the state level composed of seconded ministry staff. The core leadership of CFCI staff in the states come from the Ministry of Finance, supported by seconded staff from relevant ministries while the focal partner of UNICEF in the federal level is the Higher Council for Decentralized Government (HCDG).

The objective of the CFCI Unit is to coordinate all activities and support for CFCI communities. Seconded ministry staff are expected to facilitate and make linkages between their ministries and the needs of CFCI communities. At a certain point, it was envisioned that the CFCI Unit and the CFCI Coordination Mechanism from the federal, state and locality level would be able to access and leverage government resources for CFCI communities though this resulted to a mixed result. It was evident that over the years, there has been no effective institutionalized procedure to ensure the success of leveraging resources; successes were through personal relationships and the “buy in” of decision-makers in the
CFCI’s objectives. These were highly observable in stronger states where the state government provided resource and financial support to CFCI communities.

The CFCl has two components in its implementation phase in the community level. First is the sectoral component, which provides the delivery of basic social services to the community in education, health, nutrition, water, environment and sanitation, UNICEF sector units through subsequent line ministries support the sectoral component. Other UNICEF sectoral units such as the Communication for Development (C4D), child protection and HIV/Aids also contributed to the package provided to CFCl communities. The second component, the non-sectoral component, relates to community empowerment and mobilization. The non-sectoral component of CFCl deals with the formation and training of Community Development Committees (CDCs) in each CFCl community; in certain communities, it may also include livelihood training for women, peace building training and activities for selected community members. All sectoral activities and training in CFCl communities are funding driven, thus it may be stated that the core of CFCl activities across states may be the community empowerment, leadership training and participation component, conducted by the CFCl Unit.

The main task of the CFCl Unit is the participatory formation of a duly elected 10-person leadership in the community level, with stipulations to include women called the Community Development Committee (CDC). Sub-committees are formed depending on the availability of sectoral activities provided in the community. Basic training is provided in leadership, participatory planning, implementation, monitoring and evaluation of community-led programs and advocacy to relevant duty bearers, which enhances community engagement as partners in reducing resource access disproportion.

Relevance: The alignment of the Child Friendly Community Initiative (CFCl) to the Government of Sudan’s priorities during the evaluation period on: 1) the promotion of sustainable economic development, 2) sustaining peace and stability, 3) poverty reduction and 4) strengthening public accountability, good governance and the rule of law; makes it a highly relevant program. These same four thematic areas became the pillars of the United Nations Development Assistance Framework’s (UNDAF’s) output for 2009-2012 and the strategy for the country’s achievement of Millennium Development Goals (MDG) which CFCl corresponding supported. CFCl is a partnership between UNICEF the government. State government officials in all evaluation states recognized CFCl’s enormous contribution in supporting the government’s decentralization policy as well as other public polices in relation the provision of basic services, and in varying degrees; gender equality, public accountability and peace, .

The CFCl program design below, was found to be relevant, and a vital mechanism in reaching and empowering the most vulnerable communities and contributes in the improvement of the well-being of women and children.

- The formation of Community Development Committees and training on community leadership, participatory planning, management, implementation and monitoring of community-driven projects and advocacy;

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- The convergence of an integrated package of education health, nutrition, water, sanitation services supported by the child protection and communication for development section of UNICEF;
- Opportunities for children’s participation in community activities;
- Selection of the poorest and most vulnerable communities.

The two training below are funding based, thus are not necessarily part of the core program implemented in all states.

- Combined with (livelihood) training programs for women;
- And peace-building programs for selected communities;

Livelihood training program for women and peace building program were related to specific donor programs thus, were only implemented in a small number of communities, in selected states. Communities involved in programs with partner UN agencies or multi-donor trust fund programs such as the Integrated Community-Based Recovery and Development (South Kordofan), Darfur Community Peace Stability Fund (North and West Darfur) and communities that had linkages with the Community Development Fund program (North & South Kordofan, Blue Nile and Kassala) were the ones that received the most complete integrated package. Packages received by CFCI communities within the same state varied greatly and were funding driven. An example of this are the efforts made to provide livelihood training for women in majority of the states. The quality of training and start-up support received by women after the training varied from community to community even within the same state and relied significantly on funding availability.

The CFCI design, to a certain degree, exemplifies the essence of human rights programming by empowering the community and its active participation in community led programs. CFCI has supported government programs and the capacity building of government staff from various ministries in the state level in addition to its capacity building activities in the community level by organizing Community Development Committees but failed to link up fruitfully and build the capacity of staff in the locality level under which the CFCI communities are geographically situated. With the completion of the government decentralization, the CFCI Unit was unable to adapt to the changing socio-political changes over the years by overlooking the duty bearers closest to the community level; mandated by law to provide the basic social needs of communities. In spite of this gap, the success of CFCI in stronger states has resulted to policy changes in efforts to improve access to basic social service delivery. For instance, in Kassala, the Ministry of Finance has recognized the importance of working through the locality level and strengthened the support of CFCI communities by hiring locality development program officers to provide community support and coordination for CFCI programs. In South Darfur, the state Ministry of Finance decided that the CFCI Unit may possibly serve the state as the lead coordinating unit for all foreign aid and reinstituted a completed restructuring adding a new department directly under the Minister of Finance in the state level. One program design flaw was the lack of budget needed to implement reasonable, quality, integrated programs in multiple geographic locations on a rolling basis without a clear ending time frame. This weakness resulted in insufficient outputs, which detracted from the achievement of objectives.
Overall, the Child Friendly Community Initiative “program design” is deemed to be a moderately relevant program supporting the Government of Sudan in reaching the MDGs in terms of improving the living situations of women and children in the most vulnerable communities in spite of the flaws mentioned earlier, which prevented the Initiative from reaching its objectives in a timely manner.

Impact: The most important impact of an integrated delivery of social services coupled with the empowerment and participation of the community is the establishment of a strong inter-sectoral safety net for fragile or vulnerable communities, especially women and children. Community involvement created a heightened sense of awareness and local ownership hastening the improvement of the well-being of women and children. The impact in CFCI is measured by achieving CFCI progress indicators in sectoral and non-sectoral components and sustaining the said progress. The highest impact seen in CFCI communities are those that were selected to be part of a joint UN or multi-donor fund programs which ensured a complete integrated package of both sectoral and non-sectoral support. Below are selected highlights reported by CFCI/UNICEF in 2012:

- 67% of CDCs are able to manage community basic social services;
- 89% of CFCI communities analyze problems and propose solutions;
- Increase in primary school enrolment from 10-22% (2002) to 75-85% (2011);
- An additional 450,000 persons in 500 CFCI communities have access to improved drinking water;
- Safe delivery assistance was registered at 65%;

CFCI impact on women’s lives:
With activities from various sectors happening simultaneously and/or continuously, mostly evident in stronger CFCI communities receiving a more complete CFCI package, women’s lives are transformed through their actual participation in community activities leading to increased self-confidence and higher awareness. Other selected impact from the perspective of women are as follows:

  Improved social participation and mobility

Participating in livelihood training such as food processing, has paved the way for greater independence and mobility for women in Kassala, Gedarif and North Kordofan. In North Kordofan, women were allowed to attend a 10-day livelihood workshop in the city without a male family escort, a tremendous step for conservative communities. This opportunity not only opened the door for more independence and mobility, Their knowledge and skills in preparing vermicelli, sweets, jam and other food items has opened the door for women, to sell their items in the local market, a place which was formerly dominated by men.

  Financial independence

In very conservative communities, men were convinced to have women family members participate in food processing training when it became apparent that it brought added income to the family. The skills training women received also granted them financial independence and freedom to spend their money. An important lesson learned in this evaluation is that measuring the improved well-being of women must go beyond the basic social indicators of health, nutrition, life expectancy; it must include women’s financial income and freedom to decide on expenditures.

CFCI impact on children’s lives:
When children were asked during focus group discussions what the impact of CFCI activities were in their lives, children in communities where CDCs are stronger mentioned that they now have time to play and that family and community members encourage this. Mostly observed in stronger CFCI communities, children had varying degrees of opportunities to participate in community activities. Children’s participation was highest in communities where community radios were produced and theatre for life activities were present.

**Improved community and home relationships**

With increased participation in community activities, children reported improved home relationships. Adult community members stated that with the coming of CFCI in their community, children are not only cleaner because of the health messages; they are also more respectful of adults. As children reported, with their participation in community activities they are happier to help in household chores and there is improved family relationship. In the stronger sample CFCI communities, children reportedly received support and encouragement from community members and their parents in participating in community activities.

**A sense of self-efficacy**

As stated by children in Gedarif, the Blue Nile, North Kordofan and North Darfur; they (children) learned to be courageous, bold and self-confident. With the community’s support and appreciation, children gained a sense of pride, fulfilment, happiness, courage and belief in future possibilities.

In spite of these achievements, there are a few negative impact observed during the evaluation. One notable negative impact is the unmet community expectations. As detailed in the report, from early 2009 onwards, there has been a noticeable decline in the provision of sectoral support to CFCI communities; in spite of this, the CFCI Unit continued its community work of mobilizing communities. In an interview with the CFCI Coordinator in North Kordofan, it was mentioned that mobilized communities have already prepared their local contribution for construction and have been waiting for sectoral ministries and UNICEF to begin their work. This same scenario was observable across all states.

Another particular negative impact, mostly seen in the weakest of the sample communities, was the concentration of power to specific individuals in the community. Although it may be argued that this scenario is common in rural areas, caution must be taken that in efforts to conduct a participatory exercise in communities, power is not further concentrated on the same people or a small number of people. In communities where this was evident, it was further observed that these communities receive little technical support or follow up; which may have further reinforced the concentration of power.

CFCI has had varying degrees of long-term and short-term impact, mostly positive with a few negative impacts. For communities, which initially received little or no support from the government and/or the non-government sector, the CFCI is found to have provided moderate to low impact on the lives of women and children. Low impact is seen in communities, which have received non-sectoral training with only one or two sectoral related activities implemented or in communities where there was noticeably monitoring and follow up. The gradation in the active participation and empowerment of women and children has been observed across CFCI evaluation communities. Children’s and women’s participation are directly linked to the amount of activities introduced by UNICEF or relevant ministries.
lines. The Initiative's non-sectoral training and activities in CFCI communities and support received even from only one basic service sector, undeniably provided relief to the most vulnerable communities. The negative impact of CFCI stems from the untimely implementation of activities related to the fulfilment of financial and technical support from partners, both from the government side and UNICEF, resulting to unfulfilled promises of service delivery to communities. In some instances, negative impact was due to the lack of clear indicators linked to desired positive outcomes as well as responsive monitoring systems and mechanisms in the different stages of the program cycle.

Effectiveness: The effectiveness of CFCI was evaluated against three areas: the extent of community empowerment of CFCI communities, as a place for social activities and self-managed basic services, CFCI units as an effective and cost effective coordinating unit, and the effectiveness of the CFCI Coordination mechanism at the federal and state levels and between partners. Community empowerment in CFCI was measured through the following areas; in its leadership, the CDCs and the extent of community participation. Duly elected CDCs are trained in leadership, effective participatory planning, monitoring and evaluation, social and community mobilization, data collection, operating and managing a drug revolving fund and revolving funds (the last two activities are only conducted if the community will receive support on the said activities). Community members later participate in a Participatory Learning Action (PLA) workshop, facilitated by the CDCs, where they identify and prioritize their needs/gaps, identify/tap local resources, plan for community contributions and assign tasks to various community members and if needed advocate for support from outside resources. The organization of CDCs and participatory involvement of communities in identifying their needs has led to the higher influx of requests for increased access to midwives, health units, health cadres, teachers, schools, water wells/water point, livelihood and literacy training for women. Community members further participate in the monitoring of planned activities and by taking part in “nafir” or communal work which could be in terms of providing support in cash or in-kind. In-kind contributions may come in terms of labour, provision of local materials for construction, thorough food, crop donations and others.

During the evaluation, 86% of CDCs were found to be functioning in varying degrees, 59% of which had on-going activities at the time of the field visit. Findings show that investing in CFCI communities provides higher value for donor’s money since communities are mobilized and willing to match contributions, thus more time is spent in actual program implementation than in coordinating and mobilizing communities. There is a higher prospect for sustainability with community ownership.

Between 2007-2011, in spite of many challenges, the CFCI Unit proved to be an effective coordinating unit for CFCI non-sectoral programs. The success of the CFCI Unit’s non-sectoral work to supplement sectoral activities was evident at varying degrees in the communities visited as cited above. This evaluation supports other reports highlighting the success of the community mobilization and training provided by CFCI Units resulting to increased demands in basic services and increased CFCI community advocacy towards duty bearers. The effectiveness of the CFCI Unit in mobilizing communities in a participatory manner has paved the way for other NGOs and donors to work for the most vulnerable and poorest communities in the state. Six out of nine CFCI Units reported that they have assisted Donor agencies, NGOs and/or CBOs in organizing and mobilizing CFCI and non-CFCI communities paving

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3 The latter part overlaps with “Sustainability” and is elaborately discussed under this sub-heading.
the entry of an organization or prior to commencement of a new program. The sectoral component provided mixed results. Field reports confirm either the introduction and/or increase in sectoral activities at various points in time during the evaluation period in CFCI communities visited. Also, activities have greatly decreased and/or stopped due to the lack of or low level of sectoral support received from UNICEF and relevant ministry lines in relation to the target outputs set out in the CFCI progress indicators. Given this situation, coordinating sectoral activities proved to be more difficult with the decline in sectoral support.

Although primarily set up as a coordinating unit for sectoral and non-sectoral programs provided by UNICEF and relevant ministries providing basic services, CFCI Units have successfully assisted CFCI communities during emergencies and humanitarian crises in Gedarif and Blue Nile states; a pursuit beyond their mandate. During the emergency in the Blue Nile in 2011, the CFCI Unit assisted the Humanitarian Affairs Commission (HAC) in its distribution of non-food items in inaccessible areas through the CDCs. Over the years, the CFCI Units in various states have responded to the local community needs. Regrettably, the inclusion of the locality level in responding to community needs was never truly addressed in most states. CFCI Units failed to support the capacity building at the locality level to respond to the community needs as the main duty bearers as mandated by law. The relationship if any was more on “coordination” and not joint monitoring or program implementation. The involvement of social sector ministry staff in the CFCI Unit has produced highly trained government staff in the state level with a deeper understanding of community participation and development work. Though it is equally important to note that even within CFCI Units, there is a noticeable gap in staff capacity, which may be attributed to the high staff turnover rate.

A CFCI Coordination Mechanism was set up in all levels from the federal, state and locality level and lastly, the community level to advocate for and support CFCI activities, leverage partner resources and avoid duplication. Of the CFCI Coordination mechanism, the strongest has been the community level followed by the state level. The federal level and the locality level are found to be the weakest in the coordination mechanism. Since the inception of the program in 2002, it was reported that there have only been two meetings facilitated by the National Steering Committee in the federal level. Evidence gathered indicates a weak CFCI Coordination Mechanism. There has been a mixed result in the state level in support of resources provided to CFCI communities, although this is still on the weaker side. Over the years the CFCI Coordination Mechanism in the federal and state levels were unable to leverage resources within relevant government ministries as intended due to the lower level of seconded sectoral ministry staff assigned to the CFCI Unit. Interviews also indicate the lack of a clear vision from the CFCI leadership in the federal level both from UNICEF and the Higher Council for Decentralized Governance (HCDG). UNICEF staff have also expressed their state of confusion over the mixed signals provided by UNICEF leadership in relation to CFCI activities in recent past. One notable flaw in the CFCI Coordination Mechanism is in the state level, core CFCI Unit staff are seconded from the Ministry of Finance yet in the Federal Level, the partnership is between UNICEF and the HCDG. There is a disconnect within the CFCI Coordination Mechanism between state and federal levels in terms of line management and reporting. CFCI Unit core staff from the Ministry of Health are not line managed by the HCDG.
Findings show that the Child Friendly Community Initiative Unit was a moderately effective coordinating mechanism of sectoral and non-sectoral activities for the poorest and most vulnerable communities identified in the states during the evaluation period. The success of the CFCI Unit’s non-sectoral work is illustrated with 2/4 of the evaluation communities still having ongoing activities and/or self-managed basic services beyond the evaluation year of 2011. The prevailing misconception within UNICEF that CFCI Units are providing or implementing sectoral programs, which overlaps with ministries, is unfounded.

Records show that the CFCI Coordination mechanism was weak and ineffective, particularly between the federal and state level and to a lesser degree between state and locality levels. The CFCI Coordination mechanism in the federal and state levels showed varied results ranging from ineffective to low levels of effectiveness in its primary objectives of leveraging government’s resources. Since the CFCI strategy requires the buy-in of decision makers for its continued financial and resource support and success in service delivery provision, high staff turnover within the government and UNICEF who do not fully comprehend the program design has immensely affected the supply side of basic services.

In spite of mixed results in the three areas identified under this criteria, the CFCI Unit, during the evaluation period, proved to be an important mechanism in reaching the most vulnerable communities and bridging these communities with duty bearers, NGOs and other donors. Moving forward, there is a strong need for the CFCI Unit to evolve with the changing times, present government priorities, state and community needs. The CFCI Unit needs to be fully integrated and permanently mainstreamed under the Ministry of Finance and work must be done with the existing government administrative structures, with the inclusion of the locality level. The effectiveness of the coordinating unit is only as good as the sectoral support and resources CFCI communities receive. Effectively providing a comprehensive package of sectoral services to geographically dispersed vulnerable communities requires commitment, time and vast resources from the government and other key players in development with the active involvement of communities.

The main question posed by this evaluation from the onset focused on the effectiveness of the CFCI Unit as a coordinating unit for both sectoral and non-sectoral programs and not on whether it was the best option at the time. The back datedness of this evaluation and the extensive time it would require to conduct a reliable mapping of service providers at the time, the data verification and validation of information combined with the complexity and extent of the CFCI program was beyond scope and time allotted for this evaluation.

Efficiency: For the purpose of this evaluation, the term efficiency looks into the efficient, timely, and proper program administration and delivery of planned outputs in a timely manner with the available

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4 Due to the backdated period of the evaluation, it is beyond the scope of this evaluation to ascertain the various structures and/or stakeholders at the time. Findings on effectiveness are based on focus evaluation questions.

5 Though interviews with CFCI coordinators showed that there have been some cases, though insignificant, where their team have assisted in the construction of a school, this was done with prior agreement with the concerned ministry.

6 Coordination between federal and state authorities; UNICEF, CFCI National Coordinating Committee and MHCD and a number of CFCI Units and locality technical units.

7 Gedarif and Kassal CFCI Units and locality technical units.
resources provided while the second part of efficiency examines systems in place that ensure the timely and transparent documentation of program achievements and program expenses.

CFCI communities were unable to achieve planned outputs in a timely manner based on the selected reasons: unreliability of the provision of a package of basic social services, lack of importance given on graduating communities and the decline in funding contributions and commitment of partners.

**Unreliability of the provision of a package of basic social services**

With the staff turn over in both UNICEF Khartoum and the government the earlier vision of sectoral units working in synergy providing a package of basic social services in CFCI communities was lost. By 2009, only 69 CFCI communities or 70% reportedly received an integrated social service package of immunization, safe water, primary education and primary health care interventions. The lack of sectoral support has led to the delay in graduating CFCI communities. Except for two programs implemented during the evaluation period in selected CFCI communities, linkages and partnerships with other organizations was not a CFCI priority. Although not originally part of the CFCI strategy, partnerships were actively pursued by CFCI Units in states to fill in the gaps. Only in 2010 was partnership officially endorsed as part of the CFCI strategy. One criterion in the selection of CFCI communities was that “no one else was working in the community.” As practiced during the early years of CFCI, sectoral support was entirely provided by UNICEF sectoral units through corresponding ministries. Partnerships with other organizations, if any, occurred ad hoc with the decline in the prioritization of CFCI communities for sectoral support of UNICEF through corresponding line ministries.

**Lack of importance given on graduating communities**

There are presently 190 communities or 21% of communities that graduated since 2002 but “these numbers can easily change overnight”. When CFCI communities reach and maintain targets for CFCI progress indicators, they are labelled as Child Friendly Communities, graduating from the Initiative. Graduate communities cease to receive both sectoral and non-sectoral- support but the CFCI Unit continue to provide technical support in a lesser capacity. There is no disaggregated data on graduated communities; this indicates that activities continued as usual, no additional indicators were developed to learn about sustainability, or lack of it. There is a prevailing and strong belief within CFCI that “this (CFCI) is not a program rather, an approach,” resulting in a sense of perpetuity to the model. At the time of writing, CFCI was unable to reach one of its objectives for 2007-2011; it was 54% short of having at least 75% of CFCI communities graduate or labelled as Child Friendly Communities.

**Decline in funding contributions by partners**

Amongst the different partners, i.e., government, UNICEF, other UN agencies, state and communities, the most consist and strongest level that contributed was the community level, a similar finding was reported in the CFCI midterm evaluation (2004). During 2007-2011, the federal level only contributed once. UNICEF’s fulfillment of budgeted annual financial contributions between 2007 through 2009 averaged 77% while from 2010 to 2011 it was recorded at 56%. The waning partner commitment in fulfilling planned annual budgets has undermined the impact and efficiency of the program resulting in inadequate outputs. By the end of 2011, USD 83,066,080 has reportedly been invested in the Child

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8 The Darfur Community Peace Stability Fund and the Integrated Community-Based Recovery Programme in South Kordofan.
9 Data is based on information provided by reporting CFCI Units.
Child Friendly Community Initiative Evaluation Report, Sudan

Friendly Community Initiative in terms of sectoral and non-sectoral support by all partners. The financial contribution breakdown reported by the SPMME Unit is as follows: 20% UNICEF, 23% Government, 19% CFCI communities and 37% other partners.¹⁰

CFCI communities are not achieving planned outputs on a timely manner with only two out of ten CFCI communities graduating as of the time of report writing. Although there is a significant increase from the demand side for basic social services, the supply side from the government, relevant ministries and UNICEF sectoral units have been unable or unwilling to fill in the gaps identified by CFCI communities. Though pockets of success are seen in the community level on the non-sectoral component, the cost-effectiveness factor comes in only if UNICEF (or other partners) simultaneously provides sectoral support of basic services through relevant ministries as part of the entire package, which was not always the case. Reports indicate that since late 2008 or early 2009 depending on the state, CFCI communities have no longer been prioritized to receive sectoral support from UNICEF and relevant ministries as set out in the onset of the Initiative. The continuous geographic expansion of the Initiative without initially fully accomplishing program objectives has stretched available limited resources resulting to weak program delivery.

Review of existing financial and program documentation systems resulted to the following:

**Financial documentation**

CFCI undergoes two separate financial audits/controls. The budget received from the Ministry of Finance undergoes a government audit while UNICEF released funds are processed utilizing the UNICEF financial liquidation system. Although there is a financial audit in place, there is no transparency or means of verification to compare the actual budget provided by the government against the planned one, the amount is only taken at face value.

On the financial budget that CFCI Units handle, a review of selected non-sectoral component of CFCI Unit’s Annual Work Plans (2010) illustrate that between 30%-50% of the budget is allotted to capacity building and empowerment of communities, 20%-45% for community initiatives, 20%-35% monitoring and evaluation of community activities while the least budget of 8%-15% was allocated for the capacity development for CFCI and government counterparts.

**Program documentation**

Program documentation was found to be extremely weak in CFCI, especially at Khartoum level from both CFCI/UNICEF and the Higher Council for Decentralized Government. Until the end of the evaluation, the evaluation team was unable to secure any consolidated monthly, quarterly or annual reports. Specific donor reports, in compliance with donor requirements were available but this only presented part of the work done in a portion of CFCI communities. In the state level, it was stated during interviews that reports were submitted monthly to different ministries and that annual and bi-annual reports were submitted to CFCI/UNICEF Khartoum. It was unclear if these were narrative reports or if the reports were in the form of slide presentations used during bi-annual and annual review meetings. Most information on program documentation was provided in the form of slides

¹⁰ As noted in the report, one area for improvement is the desegregated documentation and consistent financial reporting and/or costing of partner contributions. Caution must be used in interpreting this data.
similar to the financial documentation system, there was a lack of transparency and access to CFCI program documentation in the state level. At the state level, approval from the government federal level was needed, even for information already shared or presented to UNICEF. The quality of information collected from some states also presented challenges and contradictory information. An example is the number of graduated CFCI communities, said to be between 350 to 450. Information gathered from CFCI Units during this evaluation indicates that there are only 190 graduate CFCI communities. There is no desegregation of data between graduate and non-graduate communities. The 190 graduate communities are still part of the 918 CFCI communities. The lack of desegregated data of graduate and non-graduate communities has implications on program, administrative resource and financial needs.

The CFCI Database

The CFCI database in the state level has been considered as a vital contribution of CFCI. It presents the most updated, reliable and complete demographic and service delivery information relating to basic social indicators, mapping of services and gaps in CFCI communities. The same numbers are used by relevant ministries submitted by seconded staff from the CFCI Unit. Depending on the state, it is reportedly used by the MoF, NGOs and donors for planning purposes and identifying gaps in services in smaller geographic areas. University students have reportedly also used information from the CFCI database for academic purposes. In most states, there are plans to add non-CFCI communities in the existing database to present a complete picture of the state. Although there is some ambiguity in the CFCI progress indicators amongst states, there is consistency with how and what data is collected within states.

In summary, since CFCI undergoes two financial institutional audits with stringent guidelines, it may be surmised that CFCI has a strong financial documentation system. As stated above, program documentation in CFCI is found to be weak due to the lack of available program documents especially for the early years of the evaluation. The lack of a quarterly and annual comprehensive reports across the states on CFCI in the national level undermines all the work conducted in the state level and the opportunity to constantly analyze and explore options to effectively and efficiently improve program management and program delivery. Poor program documentation may also be directly related to low levels of information shared outside the UNICEF/CFCI circle causing a dearth of understanding about the Child Friendly Community Initiative within UNICEF and new ministry staff in both the federal and state level.

Sustainability: Program sustainability may be seen from two levels; at the micro-level or community level and the macro-level, state or national level. The key evaluation question on sustainability explored the contributing factors for the sustainability of CFCI programs.

Having 86% of CDCs still functioning at varying degrees two years after the last evaluation year, 2011, with 59% of communities still having at least one social activity and/or a self-managed basic service is a good yardstick for CFCI sustainability. Interviews with community people indicate that the CDCs or its sub-committees initiated at least two to three activities for their community since they began. Aside from a pro-active leadership, sustainability also requires local ownership and mechanisms to sustain ongoing activities, which were observed in the aforementioned communities. A noticeable example of local ownership and having a mechanism, which supports sustainability, was how the water tariff...
collection was re-allocated to fund on-going community activities. Given this information, it may be stated that signs of varying levels of sustainability were found in over half of the sample CFCI communities in the micro level in spite of the continuous decline in sectoral support over the evaluation years.

The decline of UNICEF sectoral support through relevant line ministries calls for broader partnership with other non-government organizations to fill the gaps in achieving CFCI progress indicators. Sixty percent of the sample communities worked with partners or non-government organizations, majority of these communities were either green or yellow communities. Working in partnership with others plays an important role in sustainability. Communities with partners other than CFCI has access to wider resources and technical expertise as observed in the range of activities conducted in selected communities, which were part of the DSPF and ICRD. It was evident that in CFCI communities that had continuous activities or contributions from other partners there was greater program sustainability. For CDCs, one way of achieving longer-term sustainability is through securing other partners before or after it graduates from CFCI and by being a registered legal entity.

Securing an official registration stamp/certificate provides legitimacy to the CDCs in its dealings with other institutions and opening a bank account. Having a bank account is vital to CDC’s financial independence. A bank account signifies CDCs may directly approach a potential donor and engage in micro-credit programs with local banks. As of the time of writing, 32% of the CDCs are registered or legalized, 6% short of achieving the CFCI objective of having at least 350 CDCs legalized by 2011. One deterrent for CDC registration, is said to be the fee associated with it.

In the macro level, the two important contributing factors for long-term sustainability are: security, protection and accessibility and the institutionalization of CFCI within the government structure.

Sixty-seven percent of the states reported inaccessible communities due to conflict or the effect of conflict; an example is the destruction of roads and bridges together with personal safety. Peace-building training has proven to be an effective tool in mitigating inter-tribal conflict. In West Darfur, only 3 out of 53 CFCI communities are displaced, this is attributed to the peace-building training and the establishment of peace committees in CFCI communities. True sustainability can only be obtained if there is a sense of security and stability. Accessibility of a location contributes to quality programming in terms of technical support provided. Given the limited resources, logistics and logistical needs, careful reconsideration on the selection criteria of CFCI communities must be made. It is important to select logistically accessible vulnerable communities, a number of which are already pre-identified in each state for the timely provision of sound technical support and regular monitoring resulting to quality programs. Selecting a community which is five kilometres away from the locality compared to one which is ten kilometres away with the same vulnerability and need is more sensible in ensuring quality programming given the available limited resources.

The most noted impact of CFCI in the macro level is the changing policies in one-fourth of the CFCI evaluation states actively endorsing pro-poor policies. The sustainability of CFCI approach and CFCI Unit in the macro level may be viewed in two ways, in an ad hoc manner and in an institutionalized manner. CFCI has developed the capacity of various state ministry staff in program and financial planning, participatory survey, monitoring, reporting whilst promoting a deeper understanding of a bottom-up
approach in development programming. Former CFCI Unit staff and/or government personnel who have closely worked with and understands the CFVI/CFCI concept and have moved to higher decision making roles have continued to promote the CFCI approach within their work on a personal level. This was evident in Gedarif where the present DG for the Department of Planning and Development was a former CFCI Coordinator. Due to this connection, her department is providing strong support to CFCI state activities. In North Kordofan, the head of the Food for Work Unit, a former Community Village Initiative\textsuperscript{11} staff purposely targets a number of CFCI communities for Food for Work programs. In both cases, support to CFCI happens on a personal and ad hoc manner, thus in spite of its success, this is seen to have a short-term, unreliable impact.

On a more planned manner, some states have taken initiatives in institutionalizing or permanently mainstreaming the CFCI unit or approach within the present state government structure. In all state interviews with the Ministry of Finance, it was recorded that the CFCI Unit is a unit under the Department of Planning and Development. As in most units in this department, units are dissolved once funding ends, thus the CFCI unit/approach is not necessarily sustainable. States that recognize the contributions and success of CFCI have made efforts in permanently mainstreaming the CFCI Unit and its approach. In South Darfur, a new department, the Ministry of International Cooperation was established with staffing from the CFCI unit. The aim of the new department is to coordinate all foreign donor funding coming into the state. In Kassala, the Ministry of Finance has put in place Locality Development Program Officers to coordinate support for CFCI communities. In spite of the advancement in the aforementioned sites, the evaluation notes that there has been no policy change in the federal level related the CFCI work in the past decade.

A strong link between incremental micro level and macro level initiatives is vital in having sustainable programs. Presently there are varying degrees of CFCI sustainability across the states both in the micro and macro levels. The extent of CFCI’s sustainability is difficult to ascertain in the macro level at this point in time since the state activities mentioned above have either just been recently initiated or still at the early phase of implementation. The mainstreaming of the CFCI approach will be sustainable if the federal level recognizes its relevance, contribution and impact on the community level and takes it on as a framework for its rural development program.

In closing the Child Friendly Community Initiative has mixed results and varying degrees of program effectiveness, efficiency and sustainability. The program design of providing a packaged non-sectoral and sectoral assistance is an effective way of providing basic services, which highly increases social protection mechanisms in marginalized communities and promotes community ownership. This strategy, though relevant to the times and needs of the country requires investments of vast resources, government leadership and commitment; factors which to a certain extent, are deficient in the present CFCI. What is clear is that in spite of the gaps and challenges mentioned in this report, the overall benefits and impact of CFCI and the improved lives and situations of women and children in the most desolate communities in CFCI states outweighs the challenges. Given the information gathered during this evaluation, it is evident that to have a successful and sustainable program, CFCI Units need to

\textsuperscript{11} A precursor program to CFCI.
evolve and be mainstreamed in the government structures in the state level and the Government of Sudan must take a stronger leadership role with UNICEF in a supporting role.

Two options are presented as recommendations for this evaluation. The first option, the preferred recommendation, is presented from the partnership lens of the Government and UNICEF. It builds upon the strengths and lessons learned from the present Child Friendly Community Initiative partnership with the Government taking a stronger the leadership role, the expansion of partnerships to include donors and other non-state actors such as non-government organizations and the streamlining of state development assistance through one government entity.

The second option is from UNICEF’s lens as a partner and contributor to CFCI. The challenges, gaps and failure of the CFCI to achieve its objectives in the given evaluation period due to a complex interplay of both internal and external factors denote a need for an extensive overhaul which is impossible to achieve with the present situation or set-up and without full government; federal and state support and an unwavering UNICEF commitment to the Initiative. After analyzing evidence gathered, it is recommended, without prejudice, that UNICEF initiates a phase-out of the Child Friendly Community Initiative. The phase-out stage will focus on handing over of present roles and responsibilities of the CFCI Unit and basic sectoral service activities to existing government structures (which in some cases may be the CFCI Unit itself), and prospective non-state partners on the ground, strengthening community mechanisms in CFCI communities to ensure program sustainability beyond the program life and providing the needed basic service infrastructure and/or technical support, whenever possible.

The two options are as follows:

**Option One**

Selected recommendations below focus on: empowering and streamlining local governance in the state and locality level, establishing transparent and reliable mechanisms within corresponding government institutions for a more equitable access to resources and basic social services using evidence-based database; tapping latent and highly trained individuals within the government structures to provide support to this endeavour; strengthening the social participation of communities and lastly preserving the best practices of the CFCI in relation to the needs of the states. In looking at the best way forward, this evaluation recommends the following key points:

**Recommendations for the Government**

The Government of Sudan must exhibit strong leadership and political will in:

- Adapting a comprehensive, pro-poor policy with a grassroots approach in rural development work, recognizing social accountability;
- Providing equitable access to financial and technical resources targeting the most vulnerable communities in localities.

- Adapt the CFCI approach as a framework for a national rural development strategy by simultaneously providing an integrated package of social services, community leadership and community mobilization training programs, (livelihood) training for women and youth and peace-building.
• Develop a cost model for the rural development strategy involving both the expansion and continued support of selected CFCI communities for the pilot phase, utilizing a combination of a bottom up and a top bottom approach to aid in effective planning, program implementation and scale-up.

• Mobilize financial resources and support from within the government, the donor community and non-government organizations with the rural development framework mentioned above. Start a dialogue with strategic partners and identify priority areas for technical assistance on the national rural development framework.

• Reorganize state level governments and establish a state-coordinating department for all foreign and technical aid coming to the states for a mainstreamed provision of a comprehensive rural development services to vulnerable communities under the Ministry of Finance. Maintain a state-wide comprehensive mapping and database of communities and localities receiving assistance.

• Draft a policy requiring relevant ministries work closely with the state-coordinating department for foreign aid in support of a comprehensive rural development framework for the delivery of basic services and training of community development committees in vulnerable communities.

**Recommendations for UNICEF**

It is recommended that UNICEF assist the Government of Sudan in its rural development strategy through:

• The dissemination of the findings of this report in the various states and by conducting a strategic planning workshop with government institutional partners and CFCI Units for the planned transition process.

• Advocate within the donor community and other key stakeholders to provide wider technical assistance and financial investment in a comprehensive approach in providing development (and relief) programs in line with the government rural development framework.

• Commission a publication on CFCI best practices, successes stories and challenges to help stimulate discussions and donor interest in government’s rural development framework adapted from the CFCI work.

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12 Including both sectoral and non-sectoral programs.
Provide technical support in the transition phase from CFCI to the State Department of International Cooperation through the:

- Identification of essential training for SDIC staff in relation to their new roles and responsibilities,
- Assist in the development and implementation of a three-year, yearly and quarterly transition work plan with CFCI units;\(^\text{13}\)
- Assist in the planning and implementation of the handover of relevant CFCI roles and responsibilities to the locality level;
- Conduct a DevInfo training on the state and locality levels for the SDIC and LDIC databases;
- Provision of basic office equipments such desks, chairs, computer and printer in the locality level with the Locality Development Unit.

**Recommendations for Donors and Non-state actors**

It is recommended that Donors and non-state actors such as NGOs:

- Coordinate all donor and non-state actor’s activities with the newly established SMIC to fulfil the government’s efforts of providing a comprehensive delivery of basic services to vulnerable communities.

- Link their support to clear stipulations on specific program outputs with given time frames, with transparent and accountable programmatic and financial data management systems to ensure that the funding flow reaches the vulnerable communities, women and children. An example of this may be the explicit allotment of CDC and sub-committee posts to women with incremental increase over the years with a target of a 50-50 representation in decision-making positions by the fifth year, if not earlier.

- Provide technical support in developing transparent and stronger fiscal management systems from the fiscal management of cash flow, transfers and disbursement from the federal, state to locality level going through the SDIC with clear guidelines on the roles and responsibilities at different levels from allocation, disbursement and expenditures.

- Promote higher social accountability through the establishment of transparency and accountability in making program, budget and other financial documentations easily available to all partners at all times. This may be stipulated as a specific donor requirement related to the technical support for financial data management.

\(^{13}\) See the Way Forward for more details on the three-year transition plan.
**Recommendations for Programming**

Specific program related recommendations are:

- The development of a low, moderate and full SDIC support package for communities with corresponding minimum standards for each package. Responding to community identified needs does not necessarily always require a full comprehensive package; having various packages provides the needed flexibility to address this.

- Economic opportunities and skills training for women must be an integral part of the government’s rural development framework. The well-being of women must be measured beyond the improvement of basic social indicators, it must include a women’s financial independence and their freedom to decide on when and how they spend their money. Studies show, as in this report that improving the well-being of women directly relates to the improvement in the lives of their children.

- A three-year phase out stage is recommended for the transition of the CFCI Unit into the SDIC. It is envisioned that a full transition may be reached in this timeframe. The transition phase includes the handing over and training of locality staff and the federal level-coordinating desk.

- Empirical and qualitative data must be collected and analyzed annually in relation to the impact, efficiency and effectiveness of the proposed SDIC structure and processes prior to permanent changes taking place.

- A final evaluation is recommended on the third and final year of transition for the SDIC documenting all the learning, successes, challenges and the best way forward for the SDIC.

**Option Two**

The following recommendations are based on the premise that a full program closure will be achieved in two years. Focus will be on program wind-down meaning no new activities will be introduced. Option Two focuses on the phase out of the CFCI Unit as a coordinating body, unless it is a mainstreamed, designated coordinating body for development work in the state, with UNICEF re-directing its support to existing government structures and non-state actors.

*A packaged inter-sectoral approach in providing basic social services*

Prior to the CFCI closure, it is essential that UNICEF as an institution, plan its own organizational strategy. It is for this purpose that this recommendation is prioritized.

UNICEF as an institution has the capacity to affect brisk change in a short period of time by providing a packaged inter-sectoral delivery of basic social services through all its sectoral units, including communications and relevant ministry lines. Evidence show that providing a

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14 See the section “The Way Forward” for more information.
coordinated and packaged program of basic service delivery provides communities an opportunity to build up and/or revive community based protection systems for women, children and other vulnerable community members by actively involving the entire community thus promoting higher social awareness and a sense of community responsibility. It is highly recommended that UNICEF adapt a packaged inter-sectoral provision of basic service delivery in its development and relief programs in Sudan.

Program oversight, documentation and information dissemination
The next two years for CFCI is an equally important time for institutional learning. The coordination of information flow, phase out activities, harmonization plans with potential partners and technical support for CFCI units requires information and activities to go through one focal person. It is recommended that for the phase-out stage of the CFCI, an expat focal person with extensive program and management experience is appointed in the national level.

Prioritize CFCI communities in service provision and program implementation
An appropriate phase out of any development program requires that community mechanisms and support structures, including infrastructures, as much as possible, be in place to provide vulnerable communities an opportunity to have sustainable programs beyond the program delivery timeframe. Records show that the provision of a packaged inter-sectoral support of basic services to a limited geographic location with restricted support from one source succeeds. It is essential that during the phase out stage of CFCI, communities that have been prepared with the formation of Community Development Committees and trained on the non-sectoral segment of CFCI but have barely received basic social service support be prioritized by UNICEF sectoral units and relevant ministry lines in the provision of both technical support and infrastructure.

Review and simplification of existing CFCI progress indicators
One commonly identified reason of why vulnerable communities do not evolve into Child Friendly communities is that certain CFCI progress indicators are not met and/or sustained. In the closing years of CFCI, it is essential that CFCI progress indicators are reviewed and simplified taking into consideration local needs and realistic goals. A review and simplifications of CFCI progress indicators must be conducted by UNICEF sector units first then by CFCI Units. Revised progress indicators must be in line with present UNICEF sector unit priorities with achievable program and activity implementation in two years. More importantly, these activities are something that UNICEF and relevant line ministries can deliver in prioritized CFCI communities within the given timeframe. Review of progress indicators must first be conducted by sector units within UNICEF then proposed to the M&E unit, state CFCI Coordinating Units and the HCDG to ensure local contexts are met. It is recommended that 3-5 achievable and measurable indicators be identified per sector as CFCI progress indicators for the next two years.

Clear goals and objectives for program closure
The program closure of CFCI entails an unambiguous set of goals, the guidelines being program closure in two years with the transition and handing over process of unfinished activities and/or vulnerable communities to relevant duty bearer’s attention and lastly, a wrap up of activities

15 UNICEF’s focal unit for CFCl activities.
with no new activities introduced in CFCI communities in the next two years except for those related to revised CFCI progress indicators. It is recommended that the High Commissioner for Decentralization’s CFCI representatives, UNICEF, though the M&E unit and representatives of UNICEF sector units, UNICEF state representatives or acting CFCI state focal points, together with the CFCI Units conduct a strategic planning workshop whereby realistic priorities are set for the next two years in light of the program closure.  

It is further recommended that an independent, external consultant facilitate the strategic planning workshop.

Re-assessment of target beneficiaries for close down
With the limited time for the program phase out, it is essential that priorities be set in place. With 918 CFCI communities, some of which have since been part of Child Friendly Village, a prioritization of target CFCI communities must be made. With the revised CFCI progress indicators, available resources and limited time frame it is recommended that CFCI communities and states which have received the least or minimal amount of support services be prioritized for the program phase out.

Program accountability
With the program phase out in the next two years, quarterly reports should be required from CFCI Units as well as UNICEF sector units, collecting both qualitative and quantitative data on their progress against their annual plans. All reports should be consolidated and analyzed into one report and distributed to all partners.

Handover to state and community structures
It is recommended that State Steering Committees together with the HCDG, nationally appointed UNCEF/CFCI Focal person, state acting UNICEF/CFCI person and CFCI Units perform a resource mapping in the state level to identify possible duty bearers, existing government structures, non-government organizations and community based organizations that may be tapped for the hand over CFCI communities and/or sectoral activities. It is further recommended that the State Steering Committees, UNICEF and CFCI Units make the necessary links between CFCI CDC’s, specific government duty bearers/offices and/or potential future partners.

Working with mainstreamed CFCI Units
In less than half of the evaluation states, CFCI Units have evolved into the state’s mainstreamed coordinating body for the provision of rural development work. The mandate, roles and responsibilities of the evolved and mainstreamed CFCI Units vary according to states. It is imperative the CFCI/UNICEF national focal person conduct a rapid assessment on the mandate and functions of the evolved CFCI Units resulting to recommendations on the best way forward to work and link with specific CFCI Units.

Capacity building and strengthening of community mechanisms
CFCI Units together with the UNICEF/CFCI national focal person must work together and focus on strengthening community mechanisms that ensure CDCs are trained for advocacy work and links are made with essential duty bearers and strengthening of community support mechanisms to guarantee the continuity of a transparent and accountable participatory system.

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16 The revised CFCI progress indicators will be a key document to be used for this exercise.
with equitable access to (social) services (examples: appointment of teachers/health personnel, access to training, programs and the maintenance of equipment (examples: water pumps, water tanks, tables and chairs in schools, classroom buildings) received beyond the program period and lastly, the documentation of best practices across all CFCI communities.

The Child Friendly Community Initiative has been an extremely beneficial program for Sudan and it is to be commended for playing its part in ensuring the improvement of living situations for vulnerable communities through community mobilization and empowerment resulting to community-led initiatives. Similarly, in certain communities, even with its shortcomings, it has contributed much effort in improving education, health, nutrition, water and sanitation, child protection, increased access to information through community radios and to the coordination of these sectors, particularly at the state and community level. Coordination however, requires further strengthening especially on the federal and locality levels.

A fair distribution of adequate resources, stronger attention to empirical and qualitative data collection and analysis, much stronger attention to follow-up and monitoring documentation, and reporting, and careful monitoring of the quality of services provided, will go far in building on the efforts to date. The transition of CFCI into the State Department of International Cooperation will tap a wider range of stakeholders with different technical expertise, access to a wider funding base, promote a cohesive provision of basic service to vulnerable communities through a grassroots lens increasing social accountability in improving Sudan’s present, and future. Should the transition not take place, it is essential that community support mechanisms are put in place and proper handover of existing community needs be raised to necessary duty bearers and other non-state actors.
Introduction

Sudan, the largest country in Africa, was the first country in the region to gain its independence against colonial rule in 1956. Yet in spite of this, its economic progress has been continuous hampered by decades of war. What started as an ethno-religious conflict even before the country’s independence deriving its difference between Muslims and Christians or Arabs and Africans has slowly turned into a conflict based on access to economic and natural resources.

Sudan was one of the first countries in Africa to ratify the Convention on the Rights of the Child (CRC) and adopt a National Program of Action (NPA) in 1990. In 1991, National Council for Child Welfare (NCCW) was established under the Office of the President to undertake advocacy in support of children, monitor the status of children and mobilize support for the NPA. The signing of a basic cooperation agreement between the Government of Sudan (GoS) and UNICEF in 1992 greatly reinforced UNICEF’s mandate to work at the grassroots level in Sudan. Capacity building at the national and local levels as well as the empowerment of communities has been important process objectives in the decentralization of the NPA. In 1993, UNICEF together with the Government of Sudan (GoS) launched a community-based development initiative know as the Child Friendly Village Initiative (CFVI) in North Kordofan, this was later expanded into three states.

The aim of the CFVI was to help local committees understand the NPA, analyze their current situation in relation to these goals, determine and adopt steps that they can take to realize these goals. Community members and leaders of CFVI communities undertook surveys of local conditions, developed plans for village-based interventions by identifying existing gaps in basic services, and advocated with appropriate state government branches for activities that would improve the well-being of children and their mothers. The initiative was also used as a focal point for the providing relief and rehabilitation services to displaced people in certain areas.17

Child Friendly Villages have been known for the:18

- Existence of a village committee with representations of women and which can be employed to oversee NPA activities;
- Presence of a trained midwife in the village;
- Enrolment and attendance of all school-age children, especially girls in the local primary schools or non-formal education programs;
- Census of all under 1 year olds and their immunization with six key antigens;
- Immunization of all pregnant women with two doses (or booster doses) of tetanus toxoid vaccine;
- Use of oral rehydration therapy by all families and the existence of a depot for oral rehydration salts;
- Ready access to safe drinking water and the existence of a community-based facility for the preventive maintenance and repair of the water supply system;

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18 Ibid. p.31.
- General acceptance of hygienic sanitation and the availability of low-cost options for the safe disposal of human waste.

“Child friendly spaces” (CFS), are “a child right’s programming approach that supports children’s well-being in the midst of emergencies. CFS protect children by providing a safe space with supervised activities, by raising awareness on the risks to children, and mobilizing communities to begin the process of creating a Protective Environment.”

CFS is defined as places designed and operated in a participatory manner, where children affected by natural disasters or armed conflict can be provided with a safe environment, where integrated programming including play, recreation, education, health, and psychosocial support can be delivered and/or information about services/supports provided.

With the success of the Child Friendly Village Initiative in organizing and empowering grassroots communities in planning and the implementation of local relief and development activities, which greatly improved the lives of children and women, a new phase was designed for 2002 entitled the Child Friendly Community Initiative (CFCI).

**Evaluation of CFCI in Sudan**

Since 2002, UNICEF Sudan and the Government of Sudan have jointly implemented the Child Friendly Community Initiative in 9 states. The CFCI evaluation covers the years 2007-2011 and was conducted from October 2013 – January 2013. The findings and analysis in this report are derived from evidence-based data and secondary information collected during the evaluation. The evaluation is an opportunity to assess the factors affecting the effectiveness (or not) and sustainability of the long-term implementation of activities from which lessons learned and recommendations may be drawn in developing programs and policies to improve the well-being and rights of women and children.

**CFCI Objectives**

Specific objectives of CFCI from 2007-2011, the coverage of this evaluation, are as follows:

- Ensure the formation, legalization, training and functioning of the selected 350 Community Development Committees (CDCs) in the 9 focus states;
- Ensure that by 2012, at least 75% of CFCI selected communities have improved the key indicators and become “child friendly”.

**Purpose of the Consultancy**

As stated in the Terms of Reference, the independent evaluation reviewed the design, management and program components of the Child Friendly Community Initiative (CFCI). The report documents

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20 Ibid.
21 Blue Nile, Gedarif, Kassala, North Darfur, North Kordofan, Red Sea, South Darfur, West Darfur.
22 This evaluation focuses on the state geographic boundaries before the recent change in 2012. But due to the inaccessibility of communities in South Kordofan, a CFCI community formerly belonging to South Kordofan and presently located in West Kordofan was selected.
Contributing factors to the success of CFCI communities as well as the evolution of the CFCI Unit in differing contexts. The purpose of the evaluation are:

- Ascertain if the CFCI project objectives for 2007-2011 and results have been achieved;
- Find out what elements of the project should be scaled up and mainstreamed in the Government and UNICEF programs;
- If needed, propose a transition plan or strategy including the ideal management structure for the evolution.

The evaluation focused on program fidelity or implementation processes and mechanisms, resource mobilization and to a lesser degree, the program impact. Areas of consideration in the development of evaluation question were: project management, accountability, attribution, governance, and sustainability and its impact of program delivery.

**Evaluation questions**

The core research questions addressed in this report are as follows:

- How does CFCI contribute to the United Nations Development Assistance Framework (UNDAF) for Sudan and Sudan’s achievement of the Millennium Development Goals?
- What is the impact of CFCI activities?
- Are CFCI communities empowered? Is it a place for social activities and self-management of basic services?
- Is CFCI Unit an effective and cost effective coordination unit?
- Is the CFCI Coordination mechanism effective?
- Are CFCI communities achieving planned outputs on a timely manner? Is the program adequately resourced to enable the achievement of desired outcomes?
- What systems are in place in CFCI units to ensure the timely and transparent documentation of programs and program expenses?
- What are the contributing factors for the sustainability of CFCI programs?

**CFCI definition of a “community”**

A community is defined as a group of people who are socially connected, and share a specific geographical region (village, neighbourhoods, ... etc), in which they share several facilities and have common interests. CFCI community includes the main village and all surrounding / satellite villages within 5 kilometers.²³

**Structure of the report**

The report begins with an executive summary and reflections of key results and findings, followed by a section on evaluation methodology. After which comes the history of CFCI in Sudan. Next are separate sections presenting findings and analysis gathered through the various methodologies. Lastly, the evaluation highlights best practices that emerged in the course of the evaluation as a basis for policy decisions.

and general research recommendation that may warrant a realistic way forward. Annexes, which provide detailed information, can be found at the end of the document.

**Methodology**

The CFCI evaluation utilized a mixed-method evaluation design to determine the best practices and lessons learned on the varying CFCI work contexts and the best way forward. Moreover, both qualitative and quantitative data with ocular observations from diverse sources, which permitted for triangulation to validate information collected from various sources for consistency. This evaluation employs the five Development Assistance Criteria for evaluation, namely: relevance, effectiveness, efficiency, impact and sustainability.24

The evaluation is divided into three phases: the desk review, the fieldwork and the analysis and report writing phase. Below is a description of activities conducted within each phase.

**Desk review:** A desk review was on available national and international documents related to CFCI such as the Multiple Indicator Cluster Survey (MICS 2000, 2010), Safe Motherhood Survey (1999), Sudan Household Survey (2010), United Nations Development Assistance Program for Sudan (2009-2012), Human Development Report (2013), and other relevant UN and partner documents. Project documents related to donor proposals and program evaluations of various programs conducted in CFCI communities, CFCI annual plans from 2007-211 and yearly financial reports from the CFCI Units, CFCI Midterm Evaluation Report 2004, the GoS and UNICEF Country Program Action Plan (2009-2012) and other documents were reviewed.

The desk review provided an overall understanding of the complexities of the Initiative, its strengths and program or documentation gaps that helped shape the framework of the evaluation. The desk review was not limited in the preparatory phase of the evaluation; this was a continuous process until the final phase as documents were constantly being collected and reviewed throughout the evaluation.

**Fieldwork:** The fieldwork commenced with a five-day training in Kassala of 27 Central Bureau of Statistics (CBS) staff identified to assist in the evaluation. The CBS staff, hereafter referred to as “researchers,” are based and selected from the nine target evaluation states. To form a common goal, the researchers reviewed basic research ethics and were trained on relevant qualitative research methodologies and tools. After each theory, a simulation utilizing evaluation instruments was conducted followed by a feedback session to identify the positive points in the simulation as well as to emphasize important areas to improve on in the actual fieldwork. The research team prepared for the fieldwork by piloting instruments and simulation of activities in four CFCI pilot communities in Kassala.25

The following activities were conducted in the evaluation communities: Participatory Rural Appraisals (PRAs), Focus Group Discussions (FGDs) with women and children, Key Informant Interviews (KII), and In-depth Interviews (II). After three weeks of data collection and documentation, a two-day debriefing was conducted in Khartoum for the research team. The fieldwork for data collection was conducted in


25 The four pilot communities were excluded from the actual fieldwork.
21 communities in nine states as well as the inputting of interview forms into the electronic from November 17 to December 20, 2013.

**Analysis and report writing phase:** Data verification, thematic coding, analysis and report writing. After the translation of all interview forms into English, data verification, thematic coding and analysis was conducted. A draft report was produced for feedback mid-January. Two debriefings were held to share and disseminate the evaluation results; one was an in-house debriefing with UNICEF Khartoum whilst the other was with Government partners. The end of January was the finalization and submission of evaluation report.

**Evaluation Instruments, Data Collection and Analysis**

Ten instruments were developed for this evaluation; each instrument corresponded to a data collection activity mentioned below. Semi-structured questionnaires were developed for key informant interviews and in-depth interviews. Data collection was conducted through the following: desk review, Participatory Rural Appraisal (PRA), Key Informant interviews (KII), In-depth interviews (II), Focus Group Discussions (FGD) with children and women. Key informant interview questionnaires were developed for community members, CFCI coordinators, CFCI data analysts, CFCI/UNICEF focal points, government/CFCI seconded staff, state government officials and partner organizations.

Whenever possible, interviews and other evaluation activities were recorded using voice recorders supported by questionnaires (for key informant interviews (KI), in-depth interviews (ID), and flipcharts (for PRAs and FGDs). Researchers kept field notes on activities mentioned above. Each questionnaire has a section for researcher’s “field notes,” this section provided information that was not necessarily captured in the questionnaire such as non-verbal cues observed by researchers during interviews, it also provided an overview on the context of how and where the interview took place which may or may not have some bearing on the interview. Personal researcher notes were also recoded in each questionnaire whenever possible. After documents were translated in English, a thematic analysis was undertaken through data verification, coding and recording transcripts per State. Triangulation was utilised in ensuring the validity of all data gathered. A total of 1159 people directly participated in the evaluation (F:618/M:541). See Annex 4 for a list of Evaluation Participants.

**Sample**

Nine evaluation states were pre-selected by UNICEF by means of the older geographic state boundaries. To understand the contributing factors to the success and failure of some CFCI communities in achieving its indicators as well as the apparent sustainability of the Initiative, three communities were chosen per state. Of the three communities, the first is a “graduate CFCI”, or one of the strongest performing communities, also referred to as the green community. The second community, with a mediocre performance in achieving CFCI goals, also referred to as the yellow community. While the third community was chosen due to its weak performance, known as a red community.

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26 There have reportedly been two changes in state boundaries since 2002, the latest change being in 2012.
Green communities were identified to explore the sustainability of CFCI activities in communities that have graduated and learn about its coping mechanisms, if any, in sustaining the progress it reached. Yellow communities were selected to gather information on factors contributing to and affecting progress while red communities were selected to understand the reasons as to why very little progress has been achieved in the these CFCI communities. Communities were randomly selected from the top, bottom and median five communities provided by CFCI Units. One guiding factor considered for the selection of all suggested communities was that these communities were accessible. See Annex 5 for the complete list of CFCI Evaluation Communities.

Adjustments were made to the sample framework due to challenges in coordinating with various partners both in the federal and state level. Insecurity and inaccessibility of randomly selected CFCI communities were the main challenges faced in preparation for the fieldwork. Conflict was recorded in 67% of the CFCI evaluation states. Aside from the coordination challenge, delay in selecting target CFCI communities for evaluation was also due to insecurity resulting to the inaccessibility of some selected target communities.

In South Darfur, a CFCI staff that the evaluation team was initially in touch with stated that monitoring of CFCI communities has ceased for last two years which made it difficult for them to identify a single community. After two weeks of communications, the evaluation team was able to secure a list of communities. Similar challenges were encountered in West Darfur where one of the randomly selected community was deemed inaccessible due to the lack of regular UN flights. Reports indicate that flights were only once a week and unreliable. Flying to the selected location for the fieldwork would have been ideal but due to time constraints and much uncertainty, a different community was selected.

In South Kordofan, a curfew was in effect at the time of the evaluation and movement outside the city was discouraged due to the level of insecurity. After much discussion with the South Kordofan CFCI Unit, and to have at least one sample from the said state, a community presently located in West Kordofan but formerly part of South Kordofan was identified as a target community for evaluation. In cases where only two communities maybe reached, the green and red communities were the priorities.

Due to many challenges, only 81% of CFCI sample communities were reached for the evaluation.

**Scope and Limitation**

This evaluation is not an impact evaluation. It does not intend to compare CFCI communities with non-CFCI communities to measure program impact. It is beyond the scope of this evaluation to conduct an in-depth analysis of all strengths and weaknesses of program activities implemented in the 22 sample CFCI evaluation communities. Because the Child Friendly Community Initiative is an approach and not a specific program with one proposal to evaluate against, the evaluation will instead look at CFCI communities in all states and focus on the innovations and ways that CFCI communities adapted to the various situational contexts and funding changes through out the years.

**Evaluation Constraints**

During the course of the evaluation, several challenges were faced by the evaluation team; the difficulty of securing accurate and reliable data, the backdated period under which the evaluation was

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27 Whereby roads were destroyed due to conflict.
conducted, the changes in staffing within UNICEF/CFCI focal points and state CFCI units, unforeseen difficulties related to local conditions and poor coordination between CFCI partners.

The team encountered challenges related to securing accurate and reliable program data from UNICEF, the Higher Council for Decentralization, and state CFCI units, which, may enable the evaluation team to tract program progress in CFCI communities. Some CFCI units were able to provide timely quantitative data based on indicators they report on annually but reports and other program related documentation was difficult to secure, if not impossible. The backdated period of the evaluation from 2007 until 2011 proved very challenging in getting hold of program reports covering the initial years of the program. Information gathered during the later years was mostly from slide presentations and donor reports for other programs implemented in CFCI communities. Several reports were collected from a handful of people who found personal interest in the documents.

At the time of the evaluation, around 65% of the original CFCI focal point staff in UNICEF state offices, including those in Khartoum were no longer in position. On the other hand, high government staff turnover within the CFCI unit also affected the quality of information gathered. Two out of four of CFCI unit coordinators personally interviewed by the writer had inadequate institutional knowledge of the program due to staff turn over. Seconded sectoral representatives in 45% of CFCI units were back in their own ministries. Though efforts were made to contact the said people for key informant interviews, some were not available.

Many unforeseen difficulties led to the delay of the fieldwork in most of the states. Poor coordination between partners, insecurity, the difficulty in providing community names for sampling, the timing of the evaluation which coincided with the government budget planning for the coming year, harvest season, to the lack of transportation in some states to mention a few. Although some challenges were later overcome, the chronic delays led to covering only 81% of evaluation communities.

**History of the Child Friendly Community Initiative in Sudan**

The Child Friendly Community Initiative (CFCI) commenced in 2002 and was scheduled for completion in 2006. Similar to the CFVI, the goal of the CFCI is to improve the lives of women and children in CFCI communities. Based on lessons learned from the CFVI two important modifications in the Child Friendly Community Initiative (CFCI) are the:

- Community selection criteria;
- Omission of the budget line for sectoral activities

The term “community” in CFCI pertains to a cluster of villages located within a five-mile radius from each other, which may share basic services and infrastructures.

**Community selection criteria**

CFVI communities were selected based on demand. “Communities came to UNICEF and requested for assistance.”[^28] Although this process ensured a higher level of community participation, it did not necessarily guarantee the selection of the poorest and most vulnerable communities. The selection of

communities for CFCI utilized the basic social indicators measured in the Multiple Indicator Cluster Survey (MICS 200) and the Safe Motherhood Survey (1999).

**Omission of the budget line for sectoral activities**

CFVIIs had control of financial resources for sectoral activities funded by UNICEF Sectoral Committee Canada; this meant quicker response to needed village infrastructures. Although CFVI worked with different sectoral ministries and other partners, it was poorly integrated within the UNICEF’s sectoral units. The CFCI model purposely omitted the budgetary line on sectoral response to ensure that sectoral activities will receive technical input from UNICEF sectoral units and carried out by UNICEF in partnership with the corresponding sectoral line ministries. The integration of UNICEF’s sectoral units in the CFCI model was to eliminate program overlap and to better utilize UNICEF’s technical expertise in the development, planning and evaluation of CFCI interventions.29

The CFCI has been described as an approach to development work more than a program. It is an integrated, cross-sectoral and community-driven approach for the delivery of basic social services; education, basic health services and safe drinking water to poor and vulnerable communities.

**How does the CFCI UNICEF-GoS work?**

The CFCI model boasts a strong partnership between UNICEF and the Government of Sudan. In the initial stages of the Initiative, UNICEF partnered with the Ministry of International Cooperation (MIC), the National Fund for States Support (NFSS) and sectoral ministries such as the Ministry of Finance, Ministry of Health, Ministry of Education, and Ministry of Engineering and Urban Utilities, state government bodies and local communities.

The MIC was the government body designated to work with the United Nations, other development organizations and its activities, while the NFSS is the branch in charge of allocating and distributing federal funds to all states in Sudan whilst addressing and resolving regional disparities in resource distribution. Formerly, the MIC and NFSS together with UNICEF contributed in the overall monitoring of progress of CFCI through joint field visits.

Changes in the political scene in 2005 brought about a sense of stability and hope for the country. The Comprehensive Peace Agreement (CPA), signed in January 2005, led to the establishment of the Government of National Unity (GoNU) and the Government of South Sudan (GoSS) to form a Confederation system under the “one country, two systems” framework.30 An Interim National Constitution was adopted in July 2005 to provide for a decentralized government system in Sudan. With the decentralization process, came many changes in the government structure. The MIC was abolished with its functions related to CFCI divided between the Higher Council for Decentralized Government (HCDG) and the Ministry of Finance in the federal level. Concurrently the NFSS evolved into the Fiscal Financial Allocation and Monitoring Commission (FFAMC) with the same mandate though, with no ties with CFCI. The HCDG became the main partner of UNICEF in the federal level but the changes brought about, tremendous confusion on the roles and responsibilities of different partners. The HCDG reports

directly to the president and is the main government body responsible to oversee the devolution process in Sudan at the executive and the legislative levels.

**What is the strategy for CFCI work?**

The initial years of the evaluation period had four main strategies in CFCI work: capacity building, community empowerment, provision of basic social services, and advocacy. Partnerships were recognized as an important CFCI strategy in 2010.

**Capacity building**

The work of CFVI and CFCI illustrates how joint partnerships between UNICEF and government institutions increased the capacity of government staff in the federal, state and locality levels. Understanding the principles of development work and the importance of community ownership are evident with Ministry of Finance staff who have been part of the CVFI and CFCI. CFCI Unit staff received training in coordination, facilitation, participatory planning, (data) management, monitoring and evaluation. Seconded sectoral ministry staff had various opportunities to participate in sectoral related trainings. Some staff also received technical training and support from other programs implemented in CFCI communities such conflict resolution and mediation.

**Community empowerment and participation**

The CFCI is a rights based approach to programming, which promotes community empowerment. Empowerment is the process of enhancing the capacity of individuals or groups to make choices and to transform those choices into desired actions and outcomes. Empowerment in CFCI is a community-led development though participatory planning, implementation and monitoring of development and relief activities. Each CFCI community is represented by an elected group of Community Development Committee members who are trained in leadership, Participatory Learning and Action (PLA) tools, participatory planning, implementation and monitoring of local projects and interventions and data collection.

Depending on the sectoral activities on the ground, CDCs further develop sub-committees to help coordinate and support such activities. The most common sub-committees correspond with the sectoral work (water, education and others); and the women’s sub-committee and youth group. In addition to the formation of CDCs, CFCI communities also provide varying training opportunities to women based on funding availability. A specific training for women in selected CFCI communities is on food processing. Women also participated in other community training programs such as peace-building, revolving fund, drug revolving fund.

**Provision of basic social services**

Due to abject poverty, CFCI, the most vulnerable communities in the states, were identified to provide a point of convergence for UNICEF and government sectoral programs and technical support that will assist in the rapid improvement in the lives of children and women. The provision of basic social

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32 Micro-finance.
services comes in two forms: the construction and/or rehabilitation of infrastructures such as schools, clinic, water points, safe spaces for children; and others and the provision of technical support by assigning teachers, training of midwives, having access to medicine amongst others.

Advocacy

Advocacy is an important strategy in CFCI. The core of CFCI’s community-driven participatory approach in planning, self implementation, monitoring local activities and demanding access to resources promotes social accountability requires a buy in from duty bearers or government official who have the power to make changes possible. CFCI community’s advocacy for improved access to basic social services and access to resources has led some states to adopt policies and legislations for better implementation mechanisms.

Partnerships

Contrary to the initial belief, that CFCI communities “should not have anyone else working in that area,” partnerships were found to be a crucial strategy in filling the sectoral gaps to reach CFCI progress indicators. With the realization of the need for a broader funding base, by 2010, a conscious effort to pursue partnerships with other NGOs in the state and community level became part of the CFCI strategy.

How are CFCI communities selected?

The selection of the poorest and most vulnerable communities began in the state level filtering down to the locality and community level.33 A survey was conducted in the locality then in the community level with questionnaires patterned after the two original surveys. Localities in the poorest states were ranked according to a set of social indicators in green, yellow and red, with red communities classified as the most vulnerable communities according to the following indicators.34

- Low gross enrolment rate for basic schools;
- High percentage of school age girls not enrolled in school;
- High drop out rate;
- Population per midwives (standard is one per 2000 population);
- Population per trained health cadre (standard is one per 500 population);
- Population per safe drinking water source.
- Low literacy rate of women.35

Each indicator was given a weight value, which was later computed and became the basis for the ranking of localities. The incidence of significant gaps in weight ranking between localities was the basis for the green, yellow and red locality ranking. The same indicators were used to identify the most vulnerable communities within the red localities.

The baseline survey in 2002 showed a total of 99/228 localities were identified as vulnerable or red localities in 12 states36 while 2328 communities were identified as red communities. In 2002, only 354

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33 See Annex 2 for a Status Map of State Ranking According to SMC MICS 2002.
34 No date. SPMMT Unit Document. UNICEF. Process and Criteria for Selection of Localities Final.
35 This indicator was not in the original CFCI list but appears in other documents.
red communities were selected to be part of first phase of CFCI, mainly due to funding restraints. Forty-nine more red communities were later included in 2004. The remaining red communities were divided into two phases whereby additional communities would be included in the Initiative once funding was secured within the next two. With this thinking in mind, communities were continuously added over the years, though in smaller numbers than originally planned. More recent information show the numbers from the baseline survey were updated into 116 localities with 78 red localities and 3072 red communities. Changes are attributed to the formation of new state boundaries. To date, CFCI covers 918 or 30% of the red communities in the most vulnerable states resulting to the creation of new localities.

How is success measured in CFCI communities?

With an underlying goal of improving the lives of children and women in vulnerable communities through active community participation and advocacy for higher access to basic social services, CFCI Progress Indicators were developed to measure the impact of the Initiative. As stated in the CFCI midterm evaluation, the initial set of CFCI indicators for 2002-2006 were to:

- Reach and sustain immunization levels of 85% or more for children under one year of age with all six antigens, and 80% or more of women of childbearing age receive at least two doses of tetanus toxoid (TT) vaccine;
- All deliveries are attended by a trained health worker;
- At least 80% of school aged children are enrolled in Basic Education;
- The school drop out rate is reduced to 25% or less;
- All villagers have access to safe drinking water;
- More than 50% of households and 100% of schools have latrines;
- Sustainable structures for local planning, implementation and monitoring are established;
- All villagers are aware of children’s rights.

Once CFCI communities reach and sustain the target levels in each indicator, it is designated as a Child Friendly Community, meaning the formerly red community is ready to “graduate.” When a CFCI community graduates from the Initiative it is an indication that it has:

- Achieved a level whereby the Community Development Committee (CDC) and community people are mobilized enough and in a position to carry out development projects autonomously;
- With little supervision from the CFCI unit but;
- With continued support from sectoral line ministries and /or partners.

The designation of a CFCI community as a Child Friendly Community (CFC) is an important progress indicator that the Child Friendly Community Initiative is achieving its goals and objectives.

38 This number does not tally with the numbers presented in the slide below with a discrepancy of 47 communities.
39 2012. CFCI Slide presentation from UNICEF SPMMT Unit. No Title. The actual timeframe for the survey is unclear.
40 See Annex 3 for a graph on CFCI Geographic Focus, Distribution and Coverage of Vulnerable Communities.
Interviews indicate that the progress indicators above were jointly developed by UNICEF sectoral unit representatives and “the government.” The extent to which the CFCI goals and objectives were reached for the 2002-2006 program cycle is unclear since no final program evaluation was ever conducted. Records indicate that efforts were made to hire consultants in 2010 and 2011 but things fell through.

Over the years, for unexplained reasons there has been a very low graduation or completion rate for CFCI communities.\textsuperscript{41} CFCI Progress Indicators were refined over time with clearer targets whilst certain items were added. It is unclear as to when this revision was made. \textsuperscript{42} \textsuperscript{43} The CFCI Progress Indicators used to date are as follows:

\textbf{Education Sector} \\
- Increase basic school gross enrolment rate to 75%;  \\
- Increase intake rate to 75%;  \\
- GPI (GER of girls/CGE to boys) optimum (the ideal is \(=1\));  \\
- Decrease the drop out rate to 20%;  \\
- Increase grade 1 enrolment rate to 75%;  \\
- School book rate (2 pupils/1 book)

\textbf{Health Sector:}  \\
- Increase immunization coverage rate to 80%;  \\
- Increase safe deliveries by trained health cadres to 80%;  \\
- At least 80% of children under 5 sleep under the mosquito net;  \\
- At least 80% of pregnant women sleep under the mosquito net.

\textbf{Nutrition Sector}  \\
- 90% women had orientation sessions on breast feeding;  \\
- 80% pregnant women regularly had folic acid;  \\
- 80% women had Vitamin A 6 weeks after delivery;  \\
- 60% regular gross monitoring of under 5.

\textbf{HIV/Aids}  \\
- At least 60% of the population have knowledge about three modes of HIV/Aids transmission and reject two misconceptions about the transmission;  \\
- At least 50% of the population have knowledge about two HIV/Aids prevention methods;  \\
- At least 50% of the population know where to avail Voluntary Counselling Confidential Test (VCCT).

\textbf{Water and Sanitation:}  \\
- At least 65% of the population have access to safe drinking water;  \\
- At least 80% of households have adequate sanitary facilities (latrines).

\textsuperscript{42} The revised CFCI Progress Indicators document was secured from a state CFCI Unit and confirmed by two other CFCI state coordinators.  
\textsuperscript{43} A more recent document on CFCI Progress Indicators (2010) was provided by the UNICEF SPPMT Unit though it was evident during interviews that this was not being used by CFCI units in the states.
- Availability of adequate sanitary facilities (latrines) and safe drinking water source for each CFCI basic school;

**Protection Sector**
- At least 40% of children have birth registration certificates;
- At least 50% communities collectively declared abandoning FGM.

**Communication & Advocacy**
- 100% CFCI communities covered by Community Radio Listening Groups (CRLG);
- Ensure 80% of CRLG produce local radio programs.

**Child Friendly Community Initiative – same as before**

In spite of the adjustments made in the progress indicators to increase the graduation rate of communities, persistent questions still remain regarding the low number of CFCI communities graduating, with it is the question of the actual impact of the Child Friendly Community Initiative over the years. Interviews show that the credibility, cost effectiveness and impact of the Initiative came into focus with the continuous increase in numbers of CFCI communities while no clear and credible information on its actual impact was documented.

**What is the coordinating mechanism for CFCI activities?**

Found below is the coordinating mechanism for CFCI with representation from the Federal level though the community level.

**Figure 1: CFCI Coordination and Reporting System**

**Federal level**

With the devolution, from the MIC, UNICEF presently coordinates with the Higher Commissioner for Decentralized Government (HCDG) in the federal level for joint program monitoring, advocacy, financial and resource mobilization with different partner ministries. Although the initial program proposal states the existence of a National Coordination Committee in the federal level facilitated by the HCGD with representatives from CFCI relevant ministries and UNICEF for coordination, planning and resource allocation purposes, there was no evidence to support this has been functional in the last five years.

To coordinate all CFCI related activities within UNICEF, a two-man CFCI/UNICEF Task Force was established in Khartoum while CFCI/UNICEF Focal Points were set-up in the state level. One important function of the CFCI/UNICEF Task Force was to ensure that UNICEF sectoral units were participating in
the oversight and monitoring of related sectoral activities in CFCI communities and that CFCI communities benefited from a convergence of UNICEF sectoral programs.

**State Level**

In the state level, the CFCI Units coordinate all CFCI activities and advocate for financial and resource allocation in the state level. CFCI Units are responsibility for mobilizing CFCI communities, provide training to Community Development Committee members, establish programs in the community level and link CFCI communities to state level ministries for technical support and access to resources. CFCI Units are composed of four core staff: the coordinator, assistant coordinator, data analyst and an administrative assistant, all fully seconded staff from the Ministry of Finance. With the core team are 5-7 seconded staff from other relevant sectoral ministries. All sectoral ministry staff were reportedly fully seconded to the CFCI Unit from their ministries, which meant that they were able to focus their time and effort in ensuring that CFCI communities were monitored and received the necessary support. The role of the seconded sectoral ministry staff is to directly coordinate and advocate for technical support, financial and resource allocation for CFCI communities within their respective ministries. CFCI/UNICEF Khartoum visits CFCI units twice a year for monitoring and supervision purposes. CFCI Unit staff received a Training of Trainer (ToT) training in the initial stages was conducted by CFCI/UNICEF Khartoum.

After the training, the CFCI Units mobilized target communities by introducing the CFCI approach, which explains the program details to community people, and encouraged nominations for the democratic selection of Community Development Committees (CDCs). The CDCs serve as the community’s representative in their work with the CFCI unit and CFCI activities and in liaising with other possible partners including locality officials.

In all states, the State Steering Committee (SSC) is responsible for the oversight and coordination of all CFCI activities in the state. In theory, the CFCI Coordinator reports to the SSC. The SSC approves the Annual Project Plan of Action (PPA); a compilation of PPAs submitted by CFCI communities consolidated and prepared by the CFCI Unit. Depending on the state, the participation the SSCs in the selection of additional communities for CFCI as well as the graduation of communities may also be discussed with the SSC prior to its presentation to UNICEF for consideration. SSC meetings vary from quarterly meetings to annual meetings from state to state.

The SSC is chaired by the Minister of Finance with the Director of Planning and Development acting as the secretary of the steering committee. The SSC is further composed of Director Generals (DGs) or the Ministers of relevant sectoral ministries, the CFCI Coordinator/Unit and CFCI/UNICEF state focal person. In West Kordofan and West Darfur, CFCI/UNICEF state focal points were not official members of the SSCs but were customarily invited to the meetings while in Kassala and the Blue Nile, the secretary of the SSC are reportedly UNICEF state focal people for CFCI.

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44 In addition to the relevant sectoral ministries already mentioned earlier in the report, the following CFCI Coordinating Units also work with the following ministries in various states: Social Welfare, Woman and Child’s Affairs, Irrigation and Water Resources, Culture and Information. Coordination work with ministries varies from State to State.

45 CFCI representatives to the SSC vary from state to state.
Locality level

During the midterm evaluation in 2004, it was noted that the plan to establish the Locality Technical Committee (LTC) came years after the beginning of CFCI. The locality level is the lowest administrative government structure that is closest to the community. With the devolution, the locality level is tasked to provide the basic services to communities. The commencement of CFCI activities in the states coincided with the restructuring of the local government and administrative boundaries. This shifted the focus away from integrating the locality level government structure to CFCI activities. Presently, though some CFCI Units like Kassala, Gedarif, North Kordofan, West Kordofan and West Darfur have developed a coordination-based work relationship with LTCs other states are still lagging behind.

Community Level

In the community level, community members reportedly nominate people for CDC election and membership in a general meeting attended by community members. A total of ten people are apparently elected, four men, four women, one male youth and one female youth to serve as committee members. Reports indicate, that the extent of women's participation vary from state to state from between 20%-50%.

Elected CDC members are prepared for their leadership role in implementing CFCI activities by participating in two training modules: effective participatory planning and social and community mobilization. In communities where specific sectoral programs are implemented, for example a drug revolving fund, a specific training on this is provided. It is important to note that not all CFCI communities receive the same basic sectoral services support from the government ministries and UNICEF. This is further discussed under the Findings section.

CFCI Financial and Resource Commitments

The initial implementation stage saw CFCI Unit develop their own plans based on community identified priority needs. CFCI state plans were compiled and forwarded to UNICEF for consistency review with CFCIs annual Project Plan of Action and ceiling budgets, which were then sent to MIC for approval. MIC subsequently endorsed the plan and budget then passed on to the NFSS for budget dispersal to the states. Funds were released in trenches based on the successful completion of activity indicators. The MIC was tasked to prepare and review quarterly and annual reports and to chair annual review meetings, which included CFCI, state representatives, NFSS, line ministries, and UNICEF.

With the devolution in 2005, CFCI Units continued to report to the Ministry of Finance, under the Directorate of Planning and Development since the core staff of the CFCI Units are all seconded from the MoF. As before, CFCI Units prepare annual plans that are then submitted to UNICEF to ensure compliance with CFCIs annual Project Plan of Action. The CFCI Unit prepares two budgets, one is submitted to UNICEF for non-sectoral related work while a second budget is prepared and submitted to the MoF. The budget submitted to the MoF is related to government staff salary and incentives together with the operational and running costs of the CFCI offices. The commitment of the GoS in the

46 1991. Local Government Act of Sudan
Initiative is evident in its full secondment of all ministry staff as well as its continued support of the operational and running costs of all CFCI offices in the 9 sample states. Since there is no budget line for CFCI sectoral activities, CFCI communities are heavily dependent on allocations of relevant ministries supported by UNICEF in the state level, which have scarcely been forthcoming.

Since the inception of CFCI, the partnership was seen as a 60/40 financial and resource contribution, 60% by UNICEF and 40% by the GoS; 10% of which comes from community contributions. Over the years, this percentage contribution remained the same, there has been no increase in financial or resource support, especially by the federal the government. As communities identify their priority needs, a proposal is submitted to CFCI Units with the corresponding community contribution. Communities contribute in kind or in cash. In most cases, communities contribute by providing local materials for building infrastructures as well as the construction labour. All these are later calculated as a community contribution.
Findings and Discussions

The “Findings” section is arranged according to the following topics:

- Relevance;
- Impact;
- Effectiveness;
- Efficiency;
- Sustainability.

Relevance

**How does CFCI contribute to the United Nations Development Assistance Framework (UNDAF) for Sudan and Sudan’s achievement of the Millennium Development Goals?**

Relevance is the extent to which the objectives of a development intervention are consistent with duty bearers and rights holders requirements, country needs, global priorities and partners’ and donors’ policies. Retrospectively, the question of relevance often becomes a question as to whether the objectives of an intervention or its design are still appropriate given changed circumstances.

Between 2009-2012, the United Nations Development Assistance Framework (UNDAF) supported four key outcomes: Peace-building, Governance and Rule of Law, Livelihoods and Productive Sectors and Basic services which contributes to the country’s achievement of the Millennium Development Goals (MDGs). Of the four key outcomes outlined in UNDAF, CFCI activities contribute the greatest to the outcomes of Governance and Rule of Law (Outcome 2), Basic services (Outcome 4) and to a lesser degree Peace-building (Outcome 1).

CFCI programming contributes to UNDAF’s outputs below, presented according to the extent of contribution:

**Outcome 2: Governance and Rule of Law**

Compared to other development or relief programs, which primarily focuses on service delivery, CFCI invests highly in building the capacity of local communities, its leadership, women and children. With this unique approach, CFCI highly contributes to the achievement of Output 2.3.7 below.

- Output 2.3.7. Communities have integrated community-based systems and skills to plan, implement, manage and monitor development programs and service delivery;

Building the capacity of CFCI communities not only focuses on participatory planning, implementation and management of community driven programs, in its most successful communities, it also enhances the community’s knowledge, attitudes and practices on pressing socio-cultural and conflict issues through the use of community radios, theatre for life or drama, and other inter-sectoral activities.

- Output 2.2.6. Parents and service providers have enhanced knowledge, attitudes and practices on child protection issues.

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- Output 2.4.3. Advocacy undertaken towards enhanced gender equality and response to and reduction in violence against women including early marriage, FGM and other harmful practices at the national and sub-national levels in legislation and practice.

**Outcome 4: Basic services**

All sectoral programs are conducted in support of various line ministries, the integrated delivery of basic social services in CFCI communities, where services are available, contributes to most outputs identified under this section.

**Outcome 1: Peace-building**

- Output 1.1.2. Participatory conflict analysis, prevention and management strategies inclusive of gender sensitive and human rights based approaches provided, and integrated into all levels of planning

The Darfur Community Peace Stability Fund (DCPSF), which was conducted from 2008 until 2009 in North Darfur, 2010 to mid 2012 in West Darfur has greatly contributed to the peace and stability of several communities in conflict areas in Darfur. In West Darfur, DCPSF tapped the assistance of the academia in developing its peace-building module. The program covered twenty communities in conflict; a pair of ten communities in conflict was originally selected for this program.

In the peace-building and conflict resolution sub-committee under the CDC, the community nominated people with past experience in solving conflict such as traditional leaders, influential community leaders and common persons capable of compromising and mediating between people, families, groups and tribes. Sub-committees were trained using a five-day training module which consisted of “Theories of Conflict; Conflict Analysis; Conflict Resolution Techniques; Negotiations; Reconciliation Processes; Culture of Peace & Peaceful Coexistence; Grassroots Peace-building; Conflict-Sensitive Planning, Implementation & Monitoring in Conflict Transformation; Psychosocial; Facilitation Skills; Care for the Caregiver”.

This training, coupled with the provision of an integrated package of intervention in water, sanitation, nutrition, health, education and food processing program for women helped stabilize warring communities and promoted an atmosphere of peace and understanding. Previouely, community populations believe that all villages should have separate services; this program has encouraged communal and inter-tribal sharing and maintenance of facilities. The provision of and access to basic services for all, reportedly promoted in peace and harmony amongst different tribes.

Activities conducted with women improved inter-cultural understanding amongst other tribes. Youth often arranged small discussion sessions and shared their experiences encouraging other youth not to join armed groups. Community Radio Listening Groups (CRLGs) were set up in five communities and messages on peace-building were broadcasted. With the success of this program in West Darfur, even after the funding ended, the CFCI Unit in West Darfur expanded the coverage of this program under their own initiative to include 30 more CFCI communities.

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51 Ibid.
In an interview with the CFCI coordinator of West Darfur, it was stated CFCI communities are generally stable in spite of the prevailing conflict in the state. He believed that the peace-building program was the reason why there are only 3 displaced CFCI communities out of 53 in West Darfur. The three said communities are reportedly displaced due to other “outside forces” and not due to conflict within their community. A similar program is scheduled to launch this year, 2014, in South Darfur.

Between 2007 through 2008, selected CFCI communities participated in an UN-Supported Joint Program between UNICEF, UNDP and FAO, the Integrated Community Recovery and Development (ICDR) in South Kordofan. The concept was later expanded to include North Sudan, which provided assistance to an estimated 100,000 people. The main development objectives of the ICRD program are “to meet the basic social and economic needs, enhance participatory and community-based conflict transformation and peace-building and strengthen human and institutional capacity at locality and community levels.”

Though this joint UN program in selected CFCI communities contributed to most of the outcomes identified above, the reporting focus for CFCI/UNICEF was on Output 2.3.7.

In terms of program design, CFCI has:

- The formation of Community Development Committees and training on community leadership, participatory planning, management, implementation and monitoring of community-driven projects and advocacy;
- Supplemented with the convergence of an integrated package of education health, nutrition, water, sanitation services supported by the child protection and communication for development section of UNICEF;
- And opportunities for children’s participation in community activities;
- In the poorest and most vulnerable communities.

The two training below are funding based, thus is not necessarily part of the core program implemented in all states.

- Combined with (livelihood) training programs for women;
- And peace-building programs for selected communities;

The design mentioned above establishes that CFCI is a relevant, and vital mechanism in reaching and empowering the most vulnerable communities and contributes in the improvement of the well-being of women and children.

Livelihood training program for women and peace building program were related to specific donor programs thus, were only implemented in certain communities. The complete package mentioned above, including the last two training, were only implemented in less than half of all CFCI communities.

“...the Initiative, through interventions in communities at different levels, has found a peerless acceptance and had established a method of development that copes with the state slogan, “Development through Participation”. Moreover, the Initiative managed to build the capacity of communities through Initiative activities and

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projects...and prepared communities for participation.” Director - General Directorate for Economic Planning and Development, Kassala

Government partners have described it as a tool for decentralization in Sudan.

“CFCI is an important tool for decentralization.” Director General, Ministry of Finance, Department of Planning and Development, Gedarif.

“The CFCI has now become a state approach to strengthen vulnerable communities and make their voices clearly audible.” Director - General Directorate for Economic Planning and Development, Kassala.

“The (CFCI) Unit is an administration and a depot for planning of projects and measuring the level of services especially in rural areas. It therefore necessary as it contributes to raising the capacity of administrative teams working in relevant ministries.” Director General, Ministry of Finance and Economy and Public Service, South Darfur.

The CFCI design, to a certain degree, exemplifies the essence of human rights programming and responded to the needs at the time of its inception. With the devolution, there was a need for a conduit between the state level implementers and the most vulnerable communities, which CFCI successfully filled until around the end of 2005 to early 2006. However, with the full staffing and establishment of the locality level, the program design of CFCI did not evolve to adapt to the changing socio-political changes at the time. The locality level, by law, is tasked to provide basic services to communities. CFCI program implementation built the capacity of communities which resulted to increased demand for better, basic service provision but it failed to concurrently build the capacity of the duty bearer, the locality level in responding to these needs. With the locality level given the mandate to provide basic services to communities, a higher degree of coordination and involvement of localities with CFCI activities was expected but not necessarily observed in all states. Eventually, a gradation in transferring responsibilities from the CFCI Unit to the duty bearers was supposed to have occurred over time.

What is the impact of CFCI activities?

Impact is defined as the positive and negative, primary and secondary long-term effects produced by development intervention, directly or indirectly, intended or unintended.\(^5\)

It is beyond the scope of this evaluation to conduct an in-depth analysis of all the strengths and weaknesses of program activities implemented given the extent of evaluation coverage in relation to the time allotted. Instead, secondary data will provide a basis for women’s remarks captured during focus group discussions on the impact of CFCI activities in their lives.

\(^5\) Ibid. 2004b.
Impact of CFCI activities in the community

CFCI/UNICEF reports selected achievements between 2002 – 2011:

- The community profiles and base line data are updated & used by the CDCs and CFCI Units for planning purposes;
- CDCs in 612 (67%) CFCs become capable in managing community basic social services;
- 54 communities (which have tribal conflict in Darfur, SK & BN) came together, enhance peaceful coexistence, resulted in resolution of a long-term dispute;
- Communities are able to identify & analyze problems and propose solutions in 812 communities out of 913 communities (89%).
- Safe delivery assistance to 590 CFCs (65%);
- Access to immunization services has improved by 30 - 45% in 780 CFCI communities, (370 communities adopting fix strategy with 80-90% coverage);
- Enrolment in primary school increased from 10-22% in 2002 to 75-85% in 2011, and drop-out was reduced by 5-8% in 613 CFCI communities as a result of awareness;
- An additional 450,000 persons in 500 CFCI communities have now access to improved water supply facilities.\(^\text{54}\)

The GoS and UNICEF’s Country Program Action Plan (CPAP) for 2008 and 2009-2012 respectively mentioned a number CFCI achievement. In the 2008 CPAP, the Child-Friendly Community Initiative (CFCI) was cited as a key strategy for promoting community empowerment and integration of programs at community level in North Sudan, while similar effort was being initiated in Southern Sudan. The number of communities with functional community development committees where convergence of complete package of education, health, nutrition and water and sanitation services were established in 452 CFCI communities, leading to increased service coverage in those communities: immunisation coverage by 40-50%; enrolment in primary schools at 35% compared to 20% in 2006 and an additional 350,000 persons in 283 CFCI communities having access to improved water supply facilities.

In 2008, primary schools were targeted for convergence of sectoral programs, including sanitation and hygiene education, HIV and psychosocial life skills education and school health interventions in selected states. The African Child Survival Initiative also provided a good opportunity to use inter-sectoral approaches for scaling up child survival interventions, including, collaboration between Health and Nutrition Sections in areas of Infant and Young Child feeding, micronutrient supplementation and management of malnutrition and with Water and Sanitation Section in areas of sanitation and hygiene education.\(^\text{55}\)

In the 2009-2013 CPAP, under the Outcome reports on basic services, CFCI communities reported that pupils in grade 1 who have attended at least one year of school readiness/ECD program increased from a baseline of 43% to 75% in 8 CFCI states including Abyei. The number of parents or community-based early child care givers who have completed training on parenting skills in CFCI communities reportedly

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\(^{54}\) Ibid. 2012a.

reached 100,000. 80% of CFCI communities also trained Volunteer Midwives (VMWs) and health promoters in the North.

The 2009-2013 CPAP focused mainly on UNICEF-supported Integrated Community-Based Recovery and Development (ICRD)/CFCI communities in North Kordofan state, explained in detail in the next section of the report. The ICRD/CFCI project mainly reported on the integrated community-based systems and skills to plan, implement, manage and monitor development programs and service delivery (UNDAF Output 2.3.7).

The CPAP report further highlights that convergence has been achieved by program interventions assisted by two or more UN agencies and INGOs/civil societies from a baseline of 15 communities to presently 400 communities. From 8 CFCI communities, there are reportedly 400 CFCI communities that now have functional systems for monitoring and reporting on effective convergence of UNICEF and partner interventions.

As described in the achievements above, the greatest impact of CFCI activities is found in the community level, which benefits all people. It is having a mobilized and united community under the leadership of duly elected CDCs. The evaluation confirms that in general, most green and yellow CFCI sample communities are aware of their rights and needs. It was observed that at varying capacities, CDCs are empowered and taking action in addressing community identified gaps and needs through self-initiative programs or through advocacy work with other partners.

**CFCI Impact on women’s lives**

The impact of CFCI activities in improving women’s lives and participation in socio-economic activities greatly varies according to the improvement level reached by communities in relation to its progress indicators.

CFCI’s long-term impacts are seen in the improvement of women’s situation in CFCI green and yellow communities. The long-term impact of CFCI activities may be described under the following: increased self-confidence and higher awareness, improved social participation and mobility; financial independence, women are claiming their rights, easier work load and more free time and lastly, enhanced inter-tribal relationships.

**Higher participation = Increased self confidence and higher awareness**

The provision of an integrated intervention package of education, health, nutrition, child protection, water and sanitation combined with socio-economic opportunities for women in some communities provided numerous opportunities for women to get involved. Based on interviews, most women commonly defined participation as providing contribution either in cash, in kind (by providing food and non-food items requested), “nafir” (pertains more to labour) and exchanging of thoughts, ideas and advices. Women also related participation as being part of something, having a higher awareness of what is happening in their communities. Actively participating in various community activities reportedly increased their awareness and exposure not only on issues affecting their community but

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56 A conscious CFCI strategic decision to pursue partnerships began in 2010.
57 Programs for women are all funding based thus, it differed from state to another.
58 A terminology used to signify communal support, which may be in terms of labour, in-kind items, cash.
more so in improving their self confidence in interacting with others and vocalizing their thoughts and needs.

“Now women are more aware and self-confident...they attend meetings and discuss their own problems...they encourage their children to go to school...before the initiative children used to herd animals and not go to school...” CDC Women’s Committee Head. Umjanah, South Darfur.

Increased women and children’s awareness on issues concerning them were evident during focus group discussions and interviews. As a result, women and children in the most active CFCI communities visited exuded with confidence and engaged freely in discourse, something not seen in weaker or red communities. Amongst the most important issues mentioned by both women and children showed increased awareness and knowledge were early marriage, FGD and several health messages, including HIV/Aids (last two examples were mentioned in a lesser degree in some communities).

The Community Radio: Connecting Women and Communities to the Outside World

All activities in CFCI communities are equally important but for communities with very low literacy rates, the community radio gives a lifeline to the outside world. The radio acts as the source of all vital information. The importance of the community radio was highlighted in the FGDs with the women and children in communities where it is available. With programs conducted in their own dialect, community people are able to fully grasp key messages...the community radio also served as a tool to learn about other cultures. In North Kordofan, communities learned about other community initiatives though the radio and decided to try these things in their own community. In the Darfur region it is used to broadcast peace messages, while in most states, health and education messages are broadcasted over the radio.

“Yes, activities are now more than before CFCI started in our community. Women participate now in the community activities than before CFCI. Before CFCI women had no activity to perform as groups like income earning activities. They lacked a lot of information on health and education ...they used to practice harmful traditions (female circumcision). By the help of community radio the community learnt a lot and thus abandoned what is harmful to them. Before CFCI women did not use to visit the doctor to receive treatment. They used to rely on traditional medicines like cumin. Also pregnant women did not use to accept official midwives, instead they used to consult the “rope midwife” (traditional birth attendant) who have no training and without sterilization for delivery. Women were also illiterate and had no idea of the causes of diseases and their treatment... Four radios were distributed to four women groups within the community. Every Wednesday we sit in groups to listen to the radio in our local dialect. We benefited and knew the causes of diseases, how to combat them, the advantages of official midwives, the advantages of periodic examination for pregnant women; combat of female circumcision; natural baby feeding and advantages of immunization.” FGD, Hangola, Kassala.

Focus group discussions with women from three evaluation communities in different stages of implementation provided researchers first hand information on the impact of CFCI programs. It was
evident that women from green and yellow evaluation communities were more responsive, vocal and confident in expressing their views. Greater improvements in women’s participation have been observed in communities that have numerous or continuous activities that provide opportunities for women’s participation, thus, it was apparent that there was lesser change observed in red communities.

“...but even in the red community in Kassala, the women are easier to talk to...they understand your questions...last time I went there for a survey it was very difficult to talk to them...they can’t understand what you are saying…” Researcher, Kassala.

Eight state research groups, 24 researchers/CBS staff, except for the Red Sea team, shared this opinion. The team from the Red Sea reported that the red community visited was extremely conservative and women did not seem to have a lot of exposure interacting with others. This may be attributed to the late start of CFCI in the Red Sea in 2010, which at the time was the height of the decline in CFCI funding and the steep decline in the provision of inter-sectoral basic services in CFCI communities. It was evident during the evaluation that the red community in the Red Sea hardly had (continuous) activities implemented to encourage meaningful and lasting positive change.

Because CFCI non-sectoral activities conducted for women in the communities were funding driven, the unavailability of activities varied according to state and community. Communities that had other NGOs working in it evidently had more opportunities for further women’s participation. Women’s participation in CDC committees also greatly varied according to states, for instance in Kassala, the two communities visited had the women’s committees completely separate from the CDC. The most common CFCI activity for women was the formation of the Women’s committee which was in-charge of organizing women and women’s activities. State researchers indicated that women’s participation, based on their interviews and observations which varied from state to state is estimated between 25% to 50%. Women were mobilized through the women’s committees for activities such as the utensils committee,\(^{59}\) revolving fund, food processing training, drug revolving fund,\(^{60}\) and agriculture committee.

“We were illiterate before, we did not know anything. Then after Iqbal \(^{61}\) inaugurated the women’s centre, we learned a lot. Thank God...like cooking, making bread, and noodles…” Rawda, female FGD participant. Umjanah community, South Darfur.

“Participation...strengthens social ties and the social fabric.” FGD female participant. Shengor community, Blue Nile.

“...previously giving birth was by rope,\(^{62}\) now we follow-up on pregnancy and give birth under the doctor’s (midwife’s) supervision...” Neemat, female FGD participant. Umjanah community, South Darfur.

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\(^{59}\) In 60% of communities that had this activity, the women’s committee rented the utensils for parties and big events. Depending on the community, the proceeds either went back to the women’s committee and was used for other projects, used as an emergency fund for the group or the proceeds were used to provide incentives for teachers, health cadre or person in-charge of the water pump.

\(^{60}\) Found in only communities that received a drug kit as part of the sectoral support by UNICEF/MoH.

\(^{61}\) A person’s name. Head of the women’s committee in their community.
Improved social participation and mobility

Although women are not always poorer than men, but because of the weaker basis of their entitlements, they are generally more vulnerable than men. Especially in conservative CFCI communities, women’s vulnerability is further compounded by their lack of education, traditional practices that isolates and restricts women’s participation and financial dependence on the their husbands.

“Before CFCI, women in our community were not allowed outside their houses. They stayed home, cleaned the house, cooked food and took care of the children, they could only go out if they were accompanied by their husbands...the men were even the ones who went to market and bought food...the men gave it (food) to the women to cook...now you can see that women can go out on their own...they go to market on their own...they even sell in the market.” Male CDC member, Pilot community, Kassala.

Positive behavioural changes in support of women’s active participation in community life were highly observable with most men in well-mobilized CFCI communities with continuous on-going activities, communities that have achieved higher progress indicators.

“In North Kordofan, men let the women go to the city for a 10-day training without any men accompanying them...this is a very big change...it is not the culture here...women are always accompanied by their husband or male family member...” CFCI Coordinator, North Kordofan.

Financial independence

“Men do not give us money and that is why we fetch firewood and sell it in the market.” Female FGD participant, Armankul, West Darfur.

During interviews, it was clear that one of the driving forces for the acceptance of improved women’s participation was the financial benefit it brought to families.

“...when the Initiative asked us to identify women for training on food processing, we informed everyone from the community to send their women...initially no one wanted to send their wife or daughter to the training so our “chief” sent his daughter and some people sent female family members...but the conservative families didn’t want to be involved in anything, they kept their women at home. When women who attended the training started making jams, preserves, sweets, cookies and started selling it...they earned money to help their families...these same men came back and asked if we could train their women as well.” Male CDC member, Pilot community, Kassala.

62 The explanation given was that at the time of birth, the woman would be assisted by other for balance, she would then grab onto the rope (some reportedly tied to something, a tree) as she induces the baby. This was overseen by the traditional birth attendant and was a common practice in birthing in Sudan.

The financial contributions of women to their families have fuelled positive changes in accepting a new role for women in community life. This change has not only provided financial independence but also given them more freedom of movement.

“Women have changed because of CFCI activities...we learned how to bake, make tomato sauce, sweets, dry mango, pumpkin jam, different juices, dry onions and tomatoes...and started to make the things we learnt... They (those who were trained) now produce things at home, sell them and benefit from the cash.” Female FGD participants. Um Al Kahir East, Gedarif.

“Women’s success benefits more than one person. Several institutions confirmed the well-documented fact that women are more likely than men to spend their profits on household and family needs. Assisting women therefore generates a multiplier effect that enlarges the impact of...activities.”

“I have my own money and I have the freedom to use it. I buy coffee, sugar, and clothes for myself and for my children.” Female FGD participant. Lashob Hadlet, Red Sea.

Poverty is multi-dimensional and limiting, thus it masks the true extent of poverty on women and children. Measuring the improved well-being of women must go beyond the basic social indicators of health, nutrition, life expectancy; it must include women’s financial income and freedom to decide on expenditures.

For women who have the knowledge but are unable to gain extra income from their training, they still benefit from it by saving money.

“...we save money...we dry the okra in autumn and that reduces the expenses of the family...” Female FGD participant. Assara, North Kordofan.

**Women are claiming their rights**

“There has been a great improvement in society and more appreciation for women.” Female FGD participant. Ahmer Roro, Blue Nile.

The increase in women’s participation has reportedly given women “a sense of progress and advancement.” For the first time, women are actively participating in various community activities with other women; women themselves plan some community-initiated activities. Women are learning new skills such as food processing, peace-building and mediation approaches, revolving funds and are part of the CDCs as a head of the women’s group. In more advanced communities, some even have access to adult literacy classes.

“I noticed the excitement and pride of some women who learned to read and write... those who could not even write their names before the arrival of CFCI.” Researcher, Gedarif.

Those communities who have heard of other women attending adult literacy classes have advocated for their community to also have literacy classes for women. Higher awareness has brought a clamour for

change. Field visits indicate that the most consistent adult literacy classes are those organized by other CBOs/NGOs. Ad hoc interventions though tapping local community resource people, like teachers, have been effective but not as sustainable since it relied primarily either on goodwill, teacher incentive and to a lesser degree time which eventually became difficult for women (in this case, the teacher reported exhaustion and lack of personal time).

The combination of sectoral and non-sectoral work has raised the awareness of women on several issues. Communities where child protection activities on early marriage and Female Genital Mutilation (FGM), or Salima, have found varying degrees of acceptance and success. In Helit Malik, Gedarif, a big community campaign denouncing FGM occurred weeks before the field evaluation. This event made headline news. Women in this yellow evaluation community were very vocal against child marriage and FGM. Based on their own personal experiences they want a better future for their children.

Equally important were the changes that a trained midwife and/or a health cadre brought to communities. There are reportedly lower death rates for both pregnant women, children are vaccinated and there is a much higher knowledge on health issues, hygiene and sanitation. The community in general has an improved health and morbidity rate. In the evaluation report of the DCPSF project, one highlight was that childhood nutrition has improved as a result of training for mothers on how to cook in a better way and preserve seasonal foodstuff to off-season, as part of the life techniques.65

“Children are much cleaner now than before...women learned how to take better care of their children.” Community Participatory Rural Appraisal, Pilot community, Kassala.

**Easier work load and more free time**

Women from Lashob Halet, Red Sea, a CFCI community still need to walk 16 kilometres daily to fetch water from Dordeib town. Many women in Sudan still suffer from the burden of hard labour related to housework such as fetching water. For women living in CFCI communities who are fortunate to have mini water yards, water points or water wells with pumps, the time spent fetching water and distance they have to walk is shortened66 leaving them with more free time on their hands to conduct other activities and participate in CFCI community based programs. Much has changed to help improve women’s lives but given the amount of time CFCI has been running in most communities visited, more was expected to be observed.

**Enhanced inter-tribal relationships**

Women from different cultural backgrounds have formed new friendships and greater understanding by working with the CDCs and through workshops provided by CFCI activities. In Ahmer Roro community in the Blue Nile, women reported that their exposure to other women from different tribes during (non-sectoral) training programs has given them a better understanding and respect of each others culture which has brought them together. This in turn has greatly improved inter-tribal relationships in their community. In the DCPSF in West Darfur it was reported that women’s

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65 Ibid. 2013.
66 Considering the 5 kilometer radius of a CFCI community definition.
participation in income generation, food processing and livelihood programs fostered a culture of peace.67

**CFCI Impact on children’s lives**

Children from CFCI selected communities described Children’s participation as:

“…taking part in school cleaning, fetching water, to training in groups and having cultural contributions.” Children FGD participants in two communities. Blue Nile.

“...cooperation among citizens, solving environmental problems, meeting to do some work, means gathering and coming together...assistance.” Children FGD participants. Gedarif.

“...cooperation with each other.” Child FGD participant. Red Sea.

“...participation in cultural activities” Child FGD participant. North Darfur.

“we participate in school in the cleaning, participation and contribution...to we participate in theatre for life (activities) and sporting tournaments…” Children FGD participants. North Kordofan.

The provision of increased access to basic services in health, nutrition, education, water and sanitation in CFCI communities undoubtedly improved the lives of many children. These sectoral activities helped activate children’s participation in communities and improved their general well-being. “Children are cleaner now than before,” was mostly mentioned by community people across all states during interviews.

As stated earlier, this section of the report will not touch upon the specific impact of sectoral activities; instead it will look at the impact of CFCI activities from a different lens. The impact of CFCI activities in children’s lives is discussed under: a time to play, varying degrees of children’s participation, a sense of self-efficacy and improved community and home relationships.

**A time to play**

CFCI brought an important activity to many communities, sports. The provision of sports equipment gave children an opportunity to be children again and to play. A break from their daily chores of grazing animals, fetching wood and cleaning the house.

“We used to be forbidden from playing ... we only had khalwa68 and herding animals...the community and families are more understanding...now our parents know our rights ... and give us the opportunity to participate.” Children FGD participants. Hangola, Kassala.

**Varying degrees of children’s participation**

Varying degrees of children’s participation were seen in the green, yellow and red target communities. In the red communities, children’s participation was at its lowest, children were assigned and informed of activities they were to take part in. Examples given by children that belong to this category were in

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67 Ibid. 2013b.
68 Quranic school.
the form of fetching water and taking part in school cleaning. Children in green and yellow communities exhibited the highest form of children’s participation seen in all the evaluation sites. Children participated in activities where they were consulted and informed and there was a shared decision between adults and children. It is important to point out that under the CDC is a youth sub-committee, though again, there is varying work conducted with this sub-committee, activities are based on CFCI sectoral and non-sectoral work initiatives provided in their community.

In communities where a Theatre for Life existed, children’s participation was considerably high. As described during interviews, the program is mainly rooted in schools where children are tapped to perform plays or drama, which are designed to deliver messages around protection issues, education, child rights, HIV/Aids and pressing local issues such as early marriage and FGM. In the DCPSF, the Theatre for Life was used by the youth group as a platform to deliver peace messages. As described by children in Gedarif, Theatre for Life actors, mostly children representing various villages in the community, the group chooses a topic and develop a script around it. One example given in Gedarif was a drama children had on FGM.

After preparations, children then invite people from the community on their performance. Since this particular community has no electricity, like in majority of CFCI communities. There are very limited forms of entertainment, thus the group has a captured audience with their performances. Children in other states have also talked about using Theatre for Life to spread information about their own culture to neighbouring villages. The exchange of cultural information through theatre has apparently brought better understanding and harmony amongst villages in their community.

It is written that, taking children’s views and experiences into account within the family, at school and in other settings helps develop children’s self-esteem, cognitive abilities, social skills and respect for others. This evaluation supports this study. Discussions with children from various evaluation sites have indicated that children’s participation has brought them self-worth.

**A sense of self-efficacy**

Bandura describes self-efficacy as one’s belief in one’s ability to succeed in specific situations. Given various opportunities to participate in community activities, children develop and strengthen their expressive skills. As stated by children in Gedarif, the Blue Nile, North Kordofan and North Darfur; they (children) learned to be courageous, bold and self-confident. With the community’s support and appreciation, children gained a sense of pride, fulfilment, happiness and “high spirits”. Through children’s participation in various CFCI activities, they have been given the venue to question, have opinions, be heard and have aspirations.

**Improved community and home relationship**

Children’s increased participation in community activities has paved the way for the community’s understanding and varying acceptance of children’s rights.

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“Children’s activities are more now than before the Initiative…we have cultural, sports and theatre activities because of the encouragement and support of the community.”

FGD Children participants. Baraka, North Kordofan.

As one child stated during the FGD, being able to participate in activities “your relationships improve…and you are enthusiastic for any work at home. Children’s participation not only gives children “a feeling of satisfaction to solve…problems and raising people’s awareness” it congruently develops a sense of mutual respect amongst different member of the community. Interviews with adults indicate that a noticeable change in children’s behaviour and that they are more respectful than before. As parents become more aware of the Initiatives goals of improving the well being of every citizen in their community, fears of parents diminish and replaced by pride their children’s participation and achievements. The DCPSF project in Darfur highlighted a 62% positive change in youth attitude and behaviour and 36% observed more respect to Child Rights as a result of the awareness-raising.

**Negative Impacts of the Child Friendly Community Initiative**

There are a few negative impacts of the Child Friendly Initiative. These are as follows: unmet community expectations, concentration of power, excessive local contributions which burdens the poorest of the poor.

**Unmet community expectations**

CFCI is widely known in states as a joint partnership between the GoS and UNICEF, with this knowledge is the endorsement of a community contribution. The community contribution was built-in not only to increase much needed resources but it is also seen as a precursor to local ownership. CDCs were continuously mobilized in the last four years in spite of the decline in the provision of integrated basic sectoral services to CFCI communities and the gradual deterioration in non-sectoral funding for CFCI activities. The continuous mobilization of CDCs has led to a number of unmet community expectations. A number of communities in the Red Sea, North Kordofan as well as in most states are waiting for the promised sectoral activities to commence. In North Kordofan, a number of communities have already prepared local materials while awaiting for the commencement of infrastructure construction.

**Concentration of power**

The basis of the non-sectoral segment of the CFCI is to mobilize communities by promoting participatory planning, implementation and the monitoring of community-led activities. Mostly seen in weakest of the red communities where very limited activities have been conducted both in the sectoral and non-sectoral segments coupled by the lack of consistent monitoring and technical support, the concentration of power and decision-making was evidently seen only on one or two people in three of the weakest communities visited. During the PRAs, participants particularly in the weakest of the red communities refused to answer and frequently referred to one or two people to respond. The concentration of power on one or two people in the weakest of the red communities further impacts equity. Having one or two people representing a community, a number of villages within a 5 kilometer radius does not necessarily guarantee the representation of everyone’s interest.
Lack of information and transparent systems creates inequity

In a field visit in South Sudan, water taps were located in a central point in the community with jerry cans and various containers lined up. After two hours of being in the community, there was a sudden burst of activity; women were hurriedly fetching water. Through informal discussions with women by the water point, it was revealed that even with the availability of the water points in their community, for the last few months they had to “walk far” to fetch water since the water pump was not turned on. When asked why, it became apparent that the women were uninformed of the true reason; some mentioned the lack of petroleum, others said that there was something that needed repair while others simply said, “I don’t know, they didn’t tell us.” While it is true that CFCI activities have improved women’s lives, more work still needs to be done in the areas of equity and empowering women to a point where they are involved in coordination and decision-making processes. The lack of information and transparent systems about the actual time water taps would be open, limits equal access of those who live further away from the water taps. The 5 kilometer radius of some villages becomes a geographic barrier in equally accessing water as compared to the ones living close to the taps who have immediate access to information. Though this incident was only apparent in two communities of the three communities personally visited by the writer, it is uncertain as to the extent this setback occurs.

Excessive local contributions burdens the poorest of the poor

Communities that are part of CFCI are considered to be the most vulnerable and the poorest in their locality. To promote local ownership, communities are required to contribute at least 10% of the total cost of the project. Although this approach has proven to be an empowering manner where the entire community provides a contribution either through cash, labour or local materials, caution must be taken that excessive contributions do not further burden the poorest of those in the community, a point also highlighted in CFCI interviews. Aside from the nafir in constructing health units, schools, mini yards or water points, in some communities there are other contributions collected for local projects and hidden school fees. For those that are in abject poverty, or those who are sick or who have family members who are sick and requires medical and personal attention, participation may be difficult. Even with a reprieve, their inability to (frequently) contribute puts stress on negotiating social interactions within the community.

Effectiveness

Effectiveness is defined as the extent to which the development intervention’s objectives were achieved, or are expected to be achieved, taking into account their relative importance.71

Are CFCI communities empowered? Is it a place for social activities and self-management of basic services?

Community empowerment is more than involvement, participation or engagement of communities. It is also community ownership and action that explicitly aims at social and political change.72 “Empowerment” refers to the process by which people gain control over the factors and decisions that

71 Ibid. 2004b.
72 United Nations Department of Economic and Social Affairs (UNDESA). 2013. Empowerment. What does it mean to you?
shape their lives. It is the process by which they increase their attributes and build capacities to gain access, partners, networks and a voice, in order to gain some form of control.

In the CFCI context, community empowerment may be measured in two ways. First is in its leadership, with the Community Development Committees (CDCs), and secondly, through community awareness and participation in community-driven projects. Developing an enabling environment implies that people cannot "be empowered" by others; they can only empower themselves by acquiring more of power's different forms.\(^\text{73}\) Having an enabling environment within the CFCI context would equate to the extent of participation of community-driven projects.

With the initial step of forming CDCs, all CDCs undergo the same basic training on:

- Leadership;
- Effective Participatory Planning, Monitoring and Evaluation;
- Social and Community Mobilization;
- Data collection;
- Operating and Managing a Drug Revolving Fund\(^\text{74}\)
- Revolving funds\(^\text{75}\)

Community Development Committees (CDCs), the leaders and representatives of CFCI communities gain their leadership knowledge and hone their skills in mobilizing and organizing communities and maintaining peace within their own communities. Community members then participate in a Participatory Learning and Action (PLA) workshop where they identify and prioritize their needs/gaps, identify/tap local resources, plan for community contributions and assign tasks to various community members. Requests for assistance on the identified gaps are sent to the CFCI Unit. Together with the CDCs, CFCI coordinates with the relevant ministry to seek their assistance. With a mobilized community there has been higher influx of requests for access to health units, health cadres, midwives, schools, teachers, water wells or mini yards and other resources and technical support on basic social services.\(^\text{76}\)

During the evaluation, in 86% of the communities visited, it was observed that the CDCs were functioning at varying degrees. Interviews with community people indicate that the CDCs or its sub-committees initiated at least two to three activities for their community since they began. One community in Gedarif mentioned having a revolving notebook fund, a women’s literacy class. The CDC also reportedly organized a charity fund where farmers contributed part of their crop to the community emergency fund.

CDCs also initiated projects addressing the needs of their community. Information about similar projects were also reported in Kassala, Blue Nile and North Kordofan.


\(^\text{74}\) The Drug Revolving Fund training is only provided to communities, which are targeted to receive the Drug Kit as part of the health sectoral program. Communities that received this training are mostly those that began with the first and second cycle, and CFCI communities involved in specific programs like ICRD and the DCPSF.

\(^\text{75}\) Again, this was not observed in all sample communities. The most evident ones were the ones which began in the earlier cycle which received inter-sectotal support from various units. Revolving fund were established for educational materials and mosquito bednets.

\(^\text{76}\) This evaluation supports the findings of other documents on CFCI. *Ibid 2004a and Ibid 2005.*
“Electricity was a problem in our community but it was later solved by using power generators...we have a generator donated to us by the CFCI five years ago to light the schools, mosques and the teacher’s residence. We met together as a community and decided to bring a generator as an investment by the committee and public utilities. We collected contributions from the community and some from charitable people and entrusted the money to Osman and Ma’an Bakheet (CDC head). We went to the Initiative and they generously gave us a generator...we met the commissioner of Aldamazin who donated a dynamo then we bought the wire and the lamps and after that we formed a special committee for the generator. People now can pay to get electricity.” In-depth interview, Village Sheikh. Ahmar Ruru, Blue Nile.

“First, two pumps were installed in our community...then we collected and saved money (water tariff)...we sent representatives to the capital to meet CFCI people. A request for a third water station was approved with a tower tank and a generator at one of the pumps. From the weekly revenues of the water tariff, we (CDC) again contacted CFCI...they provided a pump...we (community) made the tank and the installation of two pumps with a tank.” In-depth interview, male tailor, CDC Sub-Committee Head for WES. Um Alkhair East. Gedarif.

Examples given above show that majority of the sample communities had functioning CDCs though researchers also indicated that the decrease in Initiative presence and activities in the communities had a great impact on continuity of work of some CDCs. This was a fear expressed by five of the CFCI state units.

Researchers report that people in CFCI communities are aware of their rights, duties and responsibilities. People contribute, follow up and hold duty bearers and partners responsible. Committees follow on specific activities they are directly responsible for and assign people to monitor progress of activities.

The water point visited in North Kordafan was still in good working condition over a year after construction. The area where the water point was located was constructed 100 meters away from the school, thus providing water to the school. A water tariff collection system was in place to help in the maintenance of the pump. During the PRA with the community, it came out that the water pipe in one of their water points had a problem and was on the top of the CDC’s list of things to solve. Part of the water tariff collection was set aside to purchase the necessary material that needed replacement. The women’s group in this community received training in food processing; this activity has become a community activity involving children when there are big occasions.

The weakest of the red communities presented a different picture. Based on the research team’s reports, only 14% of the sample communities showed weak or non-functioning CDCs. Further probing indicates that community members in both communities did not exhibit any understanding of CFCI nor its activities leading the researchers to surmise that there are no sectoral and non-sectoral ongoing activities. In these two communities, it was evident that community had little participation and the PRA was controlled by a handful of men. Women did not participate nor directly responded to questions, their level of understanding was comparatively lower in comparison to women other communities and
their interaction, almost void. The same can be said about the children’s participation in these two communities red communities. Children were mostly shy, in the Red Sea one of the activities mentioned by children during the PRA was herding animals, it was later stated that there was “no teacher” in their school so children as sent out to herd.

In spite of the challenges faced by CFCI communities, it may be stated that CFCI communities are predominantly empowered and that it is a place of activities and self-management of basic services at varying ranges. It is vital to remember at this juncture that this evaluation was conducted in 2013, therefore in many of the communities visited, especially the red communities, activities has scaled down if not ceased. It was observed that in successful communities, community-managed projects were better maintained. Reports from all evaluation states indicate that leadership in majority of yellow and green target communities are strong and are able to advocate for needed resources from various sources. Though it is difficult to ascertain the extent of self-managed activities in CFCI communities, it is may be concluded that there are pockets of successful, community-managed projects. At the time of the evaluation, 59% of evaluation communities had at least one on-going social activity, a self-managed basic service activity or an activity that was related to a training received from CFCI. Further discussion about this may be found under Sustainability.

Is the CFCI Unit an effective and cost effective coordinating unit?

This question will be addressed in two ways, first is the effectiveness of the CFCI Unit and secondly, the advantages in investing in CFCI communities.

The CFCI Unit

The CFCI Unit is a coordinating unit for the provision of all sectoral and non-sectoral activities in CFCI communities. Non-sectoral activities relating to CDC training, monitoring and evaluation, intermittent training for women’s groups are facilitated and/or supervised by the CFCI unit. All sectoral activities related to basic services are customarily provided by UNICEF through relevant line ministries or through other UN agencies on a joint programming agreement, or NGOs on an ad hoc basis. At times, depending on personal relationships, arrangements have reportedly been made with certain people within ministries to provide technical and other resources to CFCI communities. It is common knowledge that CFCI Units, do not have the technical capacity to provide sectoral services.

During the course of this evaluation, stories and interviews in five states confirmed that at some point in time, the CFCI unit was briefly involved in sectoral program implementation. The reasons given for the short-term change of their role are as follows: in an emergency situation (either due to conflict or natural disaster), an agreement with a specific ministry to assist in construction due to the lack of manpower at the time, funding was provided directly to the Unit to help build schools in CFCI communities as part of the program with the donor. In all instances the implementation involvement of the Unit was brief and reverted to coordination.

Given the changing situation and the need to urgently respond to local realities, the CFCI Unit has been an effective coordination unit. During the emergency phase in the Blue Nile in 2011, the CFCI Unit’s contribution in providing assistance to a number of inaccessible communities was recognized by the

77 Happened at a time when sectoral funding were not all directly going through the ministries.
Humanitarian Affairs Commission (HAC). It was reported that the CFCI Unit was the only entity in the Blue Nile that was able to reach a number of inaccessible communities. This was mainly due to the Unit’s credibility and the trust that it has developed with CFCI community members. The Unit was tasked to assist in the distribution of relief goods to inaccessible areas to NGOs and the government.

Involvement of different ministerial structures in the Initiative has produced highly trained government staff with a deeper understanding of development work, community participation and ownership through continuous training and technical support. This is a fact recognized by other Donors who have worked with the Units. Former CFCI staff are presently found in higher leadership positions such as the MoF DG of Planning in Development in Gedarif, a Unit head of a Food for Work program in North Kordofan under the Directorate of the MoF DG of Planning in Development, and a newly appointed Locality commissioner in South Darfur to mention a few. In spite of the success of some, it is equally important to emphasize that within the CFCI units across states, a noticeable gap in staff capacity also exists. One reason for this may be the high staff turnover rate within the CFCI unit.

“It added a lot to me as I come to know about rural communities and how to deal with their difficulties. It also helped change many (of my) concepts about work organization and how to conduct matters.” CFCI Unit Seconded sectoral staff. Education, West Kordofan.

As mentioned in this report, the effectiveness of the CFCI Unit in mobilizing communities is recognized in the state level. In at least six states, CFCI units were reportedly requested by Donors and other NGOs to assist in mobilizing both CFCI and non-CFCI communities prior to the entry of a new organization or an introduction of a program.

With a trained leadership and community development structure, working in CFCI communities provides potential donors and NGOs a comparatively higher return rate for their money since people are organized which means more time is spent in actual program implementation than navigating in community politics. With the CDC and sub-committees in place, there is some form of mechanism to ensure a quick participatory response through matching local contributions, local ownership and a prospect of sustainability.

The provision of integrated basic services to a CFCI mobilized community hastens the improvement of the general condition of the community, which greatly impacts the situation, and well-being of children and women in the most vulnerable communities. Receiving a complete package of basic services stimulates the community and gives it the necessary jump-start to achieve positive changes simultaneously in various sectors in a shorter time. As noted during this research, even if there were schools constructed in some communities the lack of water in the area still led to children dropping out of school. Since children were tasked to fetch water during school hours, parents and children themselves did not find any value in schooling.

On the contrary, one successful partnership in CFCI communities was the Integrated Community-Based Recovery and Development (ICRD). In support of the government’s recovery, development and peace-building efforts, UN agencies (UNDP, UNICEF, FAO, WHO and WFP) operating in South Kordofan

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78 Funding for three UN agencies coming from the Italian Government, including that of UNICEF’s.
launched the Integrated Community-Based Recovery and Development (ICRD) in 2007. The ICRD program covered an estimated 45,000 population in 15 (CFCI)79 ICRD communities. In this joint UN program, World Food Programme (WFP) provided support through the Food for Education and Food for Work programs. Therapeutic Feeding Centres for under 5 children and pregnant and lactating mothers were set up in collaboration with the health and nutrition sector. Word Health Organization (WHO) built up the capacity of health promoter, programs on Integrated Management of Childhood Illnesses, making pregnancy safe; community based health information system and referral care and establishment of good surveillance system and control of communicable diseases.

FAO provided input on natural resources management, water harvesting, agriculture (seeds, tools, animal health care services’ materials and supplies). UNDP supported the strengthening of local governance structures while UNICEF provided technical support and assistance on basic primary health care support, child health and nutrition interventions, water and sanitation, basic education, child protection, training of CBOs/CDCs, coordination at state and community level using the available effective structure at both State and community level. By the end of the program, achievements reached were as follows:80

- **Strengthened governance institutions and community empowerment**: Two Localities (Lagawa and Kadugli) and 15 pilot communities have developed and strengthened human and institutional capacity to prevent and manage conflict; plan, implement, manage monitor and sustain basic social and economic services; CSOs and CBOs strengthened to engage in dialogue with the government so as to participate effectively in the design and implementation of recovery and reintegration programs.
- **Livelihood development and Food Security**: 100% of population in the 15 communities have access to agricultural and livelihood support; 50% of the community benefited from natural resources conservation interventions and water harvesting interventions for agriculture and live stock; and 75% of the communities benefited from farming (agriculture and livestock) inputs and extension services; 15 schools benefited from school gardening and school feeding; and 300 vulnerable young people/youth benefit from income generation activities;
- **Access to improved drinking water sources** expanded to reach 10,000 people, 22% of the population; access to improved sanitation facilities to 15% of the population and hygiene education to 60%.
- **Access to primary health care services** expanded to 60% of the population including, child and maternal health/nutrition care; strengthen referral sites within the catchment areas; community based surveillance system; a network of community health promoters and functional drug revolving fund schemes.
- Access to quality and child friendly basic education for 1,500 children and same number retained through school feeding.

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79 A number of CFCI communities were reportedly part of the ICRD pilot.

- **Strengthened sustainable protective systems** for vulnerable women, youth and children against abuse and exploitation, gender-based and other forms of discriminatory and harmful cultural practices.

This program was deemed to be a highly successful project by the government, CFCI units and CFCI/UNICEF that the CFCI/ICRD approach within UNICEF was expanded to include other South Darfur CFCI communities. The DCPSF program was patterned after this approach. Communities that had linkages with the Community Development Fund (CDF) program in North & South Kordofan, Blue Nile and Kassala also greatly benefited from the partnership whereby the CDF provided the hardware, construction of basic services infrastructures such as schools, health units, water points and others and UNICEF provided the software or the community mobilization and training.

In spite of the short program cycle of one year, meaningful achievements were reached to revitalize and stabilize the community. The participatory involvement of the community built the capacity of local people, promoted local ownership and a sense of pride for all community members. The integrated packed of basic services created a better living environment for women and children.

Investing in the training of CFCI Unit staff leads to a cost effective mechanism of implementing development work. The formation, training, capacity building and support provided by CFCI Units to CDCs on leadership, participatory programming, program implementation, monitoring and evaluation of community led programs and the Unit’s coordinating role in linking relevant line ministries, NGOs and potential Donors to communities in response to their identified needs is a strong foundation for program sustainability. The groundwork conducted by CFCI Units in mobilizing and preparing communities for development work is a sought after skill, recognized and respected by key development and relief players in the states.

*Is the CFCI coordination mechanism effective?*

Under this section, discussion will focus on the coordination mechanism of CFCI and the technical support received that impacts the effectiveness of programming.

**CFCI Coordination Mechanism**

Given that the seat of Government and the present financial and resources are still mostly concentrated in the central level. A strong coordinating body or institution in the federal level is required to provide leadership and vision for the Initiative a clear plan of action with achievement indicators and a center for documentation of shared knowledge, experiences, successes and best practices. As a joint partnership between the GoS and UNICEF, the HCDG and CFCI/UNICEF were supposed to have provided the vision and the strategic direction for CFCI. Since the devolution of CFCI to the HCDG coupled with the political and environmental changes over the last ten years, there has been no strategic planning workshop conducted in-house, within the CFCI Coordination structure to reassess and realign the program with the political and environmental changes and to clarify the evolving roles and expectations from the different branches of the CFCI coordination mechanism.

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Evidence show that there was a weak leadership both from UNICEF as a technical partner and the HCDG as the Government’s focal office for this program. Interviews from the field indicate there has been no clear direction and insufficient support was provided from the federal level. Six CFCI Units stated that the technical support they received and the frequency of field monitoring was insufficient to provide a clear vision, strategy and guidance for the CFCI work.

Interviews support other documents\(^\text{82}\) indicating that the weakest part of the CFCI Coordination Mechanism is in the Federal Level. Apparently, since the inception of this program, only twice has the National Coordination Committee met. As explained earlier, this is the body assigned to disseminate information about CFCI activities and was supposedly a venue to leverage government resources for CFCI communities. Between 2007-2011, the Federal state has only provided funding on CFCI activities once to majority of the states. The lack of federal funding is further discussed under “Decline in Funding Contributions.”

On the CFCI/UNICEF side, except for specific projects such as ICRD and DCPSF and others, which targeted only a small number of CFCI communities, the provision of a package for basic services from UNICEF through corresponding ministry lines has not been realized in many of the CFCI communities that began in 2008.

In the state level, the level of coordination between UNICEF and CFCI is reportedly very strong. Interviews with CFCI Unit staff and UNICEF field staff indicate a supportive work relationship between the two offices. Staff were asked to rate their work relationship from 1 to 5, with 5 being the highest: 54% of the respondents rated it at 5, 37% rated their work relationship at 4 and only 9% rated it at 3. There is reportedly a strong consultation process and coordination between the two organizations. Technical support was reportedly provided by UNICEF staff to the CFCI Unit whenever necessary or requested.

Also in the State level, State Steering Committees are reportedly active in varying capacities. Similar to the National Coordination Committee, the State Steering Committees both bodies have a similar function. The State Steering Committees are supposed to meet every quarter though this varied from state to state. In the stronger states that understands and support the objectives of the Initiative, this meetings occurred every three months. Reports showed regular meetings were mostly noted in all the eastern states, in Kassala, Gedarif, North Kordofan, West Darfur and South Darfur. Even for the strongest states, the purpose of the meetings varied. Ministry representatives perceived it more as a time for the CFCI unit to present their work to the committee, to a lesser degree, a time to leverage resources from different government ministries. For North Kordofan, it was stated that the grade of the sectoral seconded staff in the CFCI unit are low which professionally makes it impossible for them to be in a position to leverage anything. This statement was echoed by other states.

In the state level aside from training, program monitoring is a vital role of CFCI Units with its relationship with CDCs. In three of the states where UNICEF focal points were interviewed, it was stated that UNICEF state staff went for monitoring visits with the CFCI unit. During CFCI Unit monitoring visits in CFCI communities, it was stated that there is a monitoring form used to tract community progress indicators in terms of the numbers collected. The frequency and length of monitoring visits

varied per state. Depending on the state, monitoring visits were reportedly conducted from 10 to 15 days a month with the actual visit per community being 2 to 4 days. It was reported that communities were visited at least twice a year or whenever necessary, if there are special activities.

This information poses a few questions, first is that if monitoring system of the CFCI units are not conducted in a consistent manner in all nine states then what does it mean in terms of the quality and validity of information gathered under each indicator? Secondly, supposing there are 75 communities in one state, if the CFCI unit stays in the community for two days for monitoring visit then that would amount to 150 days of a year. Visiting a second time for each community would mean being in the field for 300 days in a year leaving only 65 work days in the office, including weekends. This seems to be a very unrealistic scenario which may either mean not all communities are equally monitored and given technical support or that there is very little time spent in the office to document work done in the field. Visiting communities once or twice a year for monitoring purposes does not afford ample time to provide sufficient technical support. Feedback received by communities for improvement need to be monitored to ensure that desired changes are indeed occurring.

As mentioned though out the report, the coordination between the CFCI Unit and the Locality Technical Unit varies from state to state and between localities. Interviews with CFCI Units indicate a perception of low capacity in the locality level and a lack of financial resources to assist in financial contributions for community activities. In spite of the clear cut-roles outlined on the CFCI Coordination mechanism, the coordination of work and linkages between the different structures within the CFCI Coordination Mechanism remains weak in the federal and locality level but is strong in the state level between UNICEF and CFCI Unit, and at varying degrees between the CFCI Unit and the State Steering Committee.

Efficiency

Is defined as a measure of how economically resources/inputs (funds, expertise, time, etc.) are converted to results. For the purpose of this evaluation, the term efficiency will also look into the efficient, timely, and proper program administration and delivery of planned outputs in a timely manner.

**Are CFCI communities achieving planned outputs on a timely manner? Is the program adequately resourced to enable the achievement of desired outcomes?**

The achievements and contributions of CFCI in the improvement and well being of children, women and communities are well documented yet in over ten years, there is still much to be done. Achieving the planned output in the Initiative equates to graduating communities or declaring red communities as Child Friendly Communities. As mentioned earlier in the report, to be declared a Child Friendly Community, it must meet the targets of CFCI progress indicators, both in sectoral and non-sectoral activities and maintain this status. Thus, meeting sectoral targets greatly rely on the implementation of basic social services and continued community training and mobilization. In 2009, only 69 CFCI communities out of 830 (8%) received an integrated package of services with immunization, safe water,
primary education and primary health care interventions. Important factors that deterred CFCI communities in achieving their planned outputs in a timely manner are the: unreliability of the provision of a basic social services package, delayed graduation of CFCI communities and decline in funding contributions by partners.

**Unreliability of the provision of a basic social services package**

The basis of the CFCI is to have a convergence of basic social services to address the needs of the poorest and most vulnerable communities. With the change in leadership in UNICEF and various Government ministries since the inception of the CFCI, the leadership commitment to this approach has also changed. In the early years of CFCI, UNICEF together with relevant ministries prioritized CFCI communities in conducting sectoral activities and providing technical support. Interviews with CFCI/UNICEF staff indicate that until 2007 CFCI activities were streamlined within the organization, each sector reported specific activities and corresponding numbers on CFCI communities. This practice has led to the prioritization and conscious selection of CFCI communities for UNICEF sectoral activities. This has resulted to the following: 1) the graduation of many communities, 2) reliance of CFCI Units in all states for UNICEF to provide basic social services technical support, 3) little need for partnerships with other key players in the sectors.

From 2002 to 2007, a clear leadership and joint agreement between UNICEF and the GoS to “target CFCI communities first” in the provision of basic social services resulted in the most productive period of the Initiative. Majority of the graduate communities came from this timeframe. The phrase, “CFCI communities first” was frequently recorded with interviews from both UNICEF and government staff in the states with long association to the Initiative. This strategy and the clear direction for prioritizing CFCI communities for allocation of basic services and technical support from both UNICEF and the government apparently started becoming ambiguous in 2008.

With little or no support coming from UNICEF and relevant sectoral ministries, CFCI Units and CDCs actively started soliciting support from other Donors and/or organizations working in their communities to fill in the gaps by 2009. By the end of 2011, available information below in Figure 2, show the difference in sectoral support received by CFCI communities in all CFCI states. The summary indicates the percentage of CFCI communities per state, which received at least one activity in the corresponding sector.

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CFCI units in seven reporting states have a 100% completion rate in the formation and training CDCs signifying the community’s readiness in receiving and providing support to sectoral activities. Given the information above, the states with the most number of CFCI communities which received sectoral support are: Kassala, Gedarif, and South Kordofan and the Blue Nile. The states with the least number of CFCI communities receiving sectoral support are: North Darfur, North Kordofan and the Red Sea accordingly. Amongst the sectors, the degree of support received by CFCI communities may be ranked with the highest support coming from the education sector followed by health, communication, water and HIVAids, sanitation and child protection respectively. Data indicate the nutrition sector providing the least sectoral support.

The highest rate of graduation based on interviews with CFCI Units from North Kordofan and West Darfur was before 2007. The high graduation rate was attributed to the coordinated provision of basic social services in CFCI communities by UNICEF and government ministries, which is the basis of the CFCI design. Other contributing factors to the graduation of many communities in other states by 2008 was the Integrated Community Recovery and Development (ICRD). This was a joint comprehensive development package funded by the Government of Italy with various UN agencies for selected states and vulnerable communities from 2007 until mid 2008, some CFCI communities benefited from this program.

“In the past all we had to do was follow up with different line ministries, we knew what we had (allocations for CFCI communities). For example, if there the Ministry of Health were to train 200 midwives, I know from the CFCI plan that 50 of the people to be selected will come from CFCI communities…all I need to do is follow up on the 50 people from our list...the number is already agreed upon between UNICEF and the MoH...now there is no allocation for CFCI communities...it’s very difficult...” CFCI Unit Coordinator, West Darfur.

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86 Raw data based on a questionnaire sent out to states at an earlier time was received from the SPPME section. No (consistent) information was received from states with (-) entries.
Having been assured in the past that services received from sectoral UNICEF sections has brought reliance on this system that partnerships with other NGOs or other sectoral players were initially not seen as a priority. Interviews with CFCI coordinators indicate that one of the criteria used in identifying vulnerable communities is that “no one else works there.” Partnerships were not initially part of the CFCI strategy in immediately accomplishing the improvement of basic indicators. The importance of partnerships gradually evolved with the decline of sectoral activity support from UNICEF and relevant ministries. By 2010, documents show that a clear directive from CFCI/UNICEF Khartoum was made in pursuing partnerships in state/community level.

**Lack of importance given on graduating communities**

Field observations show that graduating communities were apparently not a priority of the CFCI Unit and CFCI/UNICEF even before the decline of program funding. Although the numbers 350 and 450 graduate communities have been mentioned, the evaluation team was not able to obtain any document to support this claim. Interviews with CFCI Unit coordinators indicate there are presently 190 communities or 21% of communities that graduated since 2002 but “these numbers can easily change overnight...green communities can turn into red communities the next day due to conflict or other factors.” In Gedarif, there are apparently 30 communities, which are about to graduate, but are just waiting for funding to conduct one survey to achieve all indicators. Gedarif does not have a graduate community in spite of the higher share of sectoral activities provided over the years.

There is no desegregated data on graduate communities, the number 918 communities includes graduate communities. The lack of desegregated data on graduate communities indicate that activities continued as usual since similar data is still collected across all states. With the continued monitoring of graduate communities, no additional indicators were developed to learn about it sustainability, or lack of it. Field observations and interviews show that the prevailing concept within CFCI and CFCI/UNICEF is that the Initiative is an approach and not a project, “with no time limit.” This belief has barred CFCI/UNICEF and the CFCI Unit from further developing a vision and innovative strategy that adapted to changing contexts on the ground.

**Ambiguity of CFCI Progress Indicators**

Aside from providing sectoral support to CFCI communities, another important feature in the proposal of CFCI was the provision of technical support of UNICEF sectoral units. This was apparently done through the joint development of CFCI progress indicators. As indicated earlier in the report, progress indicators were revised at some point. Interviews with UNICEF sectoral staff who are aware of CFCI, show that since 2005, there has been little coordination between CFCI/UNICEF and sector units. The revision in indicators shows a more complex list of indicators, examples: 40% of children have birth registration certificates, 80% of pregnant women sleep under the mosquito net, 65% of community has safe drinking water and others.

Discussions about the sectoral indicators with UNICEF sector staff identified some concerns about the kind of data being collected and the quality of data collection. An example given was numbers collected for the birth registration. Apparently, there was ambiguity in terms of what was actually being

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87 A common phrase echoed by CFCI staff.
collected. There are apparently two things to this indicator, first is the registration of the baby after birth and the second part was the acquisition of the actual birth certificate.

Interviews with CFCl units across the states indicated the same ambiguity in the interpretation of the indicators. In South Darfur, the CFCl unit collected the names of children for registration from the midwife. The actual registration of the child happens at a later time, when the family has money for the certificate. In Gedarif, the numbers collected for this indicator was the registration of the child; it was reported that certificates were not always available and could “take awhile” to secure. Some states reported the numbers of children to be registered while other reported the actual number of those that already received the registration. The practice varied from state to state, yet there is a consistency within states of how and what was being collected.

Across all states, the question of how will the percentage of pregnant women under the mosquito nets be collected persisted since no mosquito nets have been distributed in many of the CFCl communities. In Bara locality, North Kordofan, the indicator regarding access to safe drinking water is impossible to achieve due to the land composition. Several efforts have been made to dig wells in the area but the land is impenetrable due to its rocky formation underground. In Um Ruwaba, the only solution for safe drinking water is mini water yards. This indicator also has impact on other states with the same water problems.

“...in North Kordofan, water is not available in some communities. Even if we stay there for 5 or 10 years, the only option will be to truck in water. It was discussed during meetings but no decision has been taken...Govt should help provide a reservoir to harvest water.” UNICEF Zonal Coordinator, North Kordofan.

The yardstick of CFCl impact relies solely on achieving CFCl progress indicators, the ambiguity of some indicators and the unfeasibility to achieve some target numbers are contributing factors that hindered the timely achievement of its output. The examples above show the lack of technical coordination between UNICEF sectors and CFCl/UNICEF may be traced to sharing in-house information. It was reported that the CFCl/UNICEF Unit had functioned independently with minimal involvement and coordination with UNICEF sector units in technical related work during the timeframe of this evaluation. In communities where sectoral support was provided, in terms of infrastructures, it is equally important to focus on the quality of service provided.

Decline in funding allocation

Caution must be taken in interpreting the data below. Efforts were made to gather data on the budget from all states for three months yet only 56% of CFCl Units responded to this request with complete information. Of the 56%, 60% provided desegregated data according to the table below. The ability to implement planned programs rely greatly on every partner’s commitment and ability to fulfil their funding obligations. Below is an analysis of partner contributions.

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88 n=6; Gedarif, Kassala, West Darfur, South Darfur, West Kordofan, North Kordofan
Early reports on the federal level’s contribution in CFCI activities indicate a 52% (2003) and a full 100% federal contribution was received in 2004 \(^{89}\) under the MIC. The increase in federal contributions in the early years of the program provided a solid foundation for the commencement of CFCI and attracted partner’s attention to CFCI. The GoS has shown its commitment in supporting CFCI through the full secondment of MoF and sectoral ministry staff to CFCI units. As indicated in documents collected and during interviews with the MoF and CFCI staff, the government’s financial contributions have mostly been in terms of staff salary, staff incentives, fuel cost and the running cost of CFCI offices in all states.

The table below shows the actual amount contributed by each CFCI partner between 2007 to 2011 in relation to its planned annual contributions based on the Annual Work plans of each state CFCI unit. For instance, in 2009 the planned contribution in the federal level for the reporting states was 299250 SDG\(^{90}\) while the actual contribution was nil equivalent or 0%. In the state level, reporting states indicate a planned contribution from of 680,562 SDG with actual contribution recorded at 393,948 SDG or 58%. Community contributions were budgeted for 353,000 SDG with the actual contribution coming to 683700 SDG or 194%. UNICEF’s planned contribution for 2009 was 2033109 SDG with the actual contribution received at 1,629,577 or 80%. The table focuses on the trend of contributions instead of the actual amount. Discrepancies were discovered in some of the amounts reported as explained in the report below, thus it was deemed by the writer to focus more on the trends of annual contributions as reflected in Figure 3.

### Figure 3: Percentage of Planned vs. Actual Partner Contributions 2007-2011\(^{91}\)

<table>
<thead>
<tr>
<th>YEAR</th>
<th>Federal</th>
<th>State</th>
<th>Community</th>
<th>UNICEF</th>
</tr>
</thead>
<tbody>
<tr>
<td>2007</td>
<td>0(^{n=4})</td>
<td>70(^{n=4})</td>
<td>180(^{n=3})</td>
<td>90(^{n=4})</td>
</tr>
<tr>
<td>2008</td>
<td>41(^{n=5})</td>
<td>54(^{n=4})</td>
<td>250(^{n=4})</td>
<td>62(^{n=5})</td>
</tr>
<tr>
<td>2009</td>
<td>0(^{n=4})</td>
<td>58(^{n=6})</td>
<td>194(^{n=4})</td>
<td>80(^{n=6})</td>
</tr>
<tr>
<td>2010</td>
<td>0(^{n=4})</td>
<td>88(^{n=6})</td>
<td>135(^{n=4})</td>
<td>54(^{n=6})</td>
</tr>
<tr>
<td>2011</td>
<td>0(^{n=4})</td>
<td>50(^{n=5})</td>
<td>56(^{n=4})</td>
<td>57(^{n=5})</td>
</tr>
</tbody>
</table>

**Federal funding contribution**

Between 2007-2011, the government’s commitment remained the same as previous years. Financial contributions to staff salary, staff incentives, fuel cost and running costs of CFCI state offices were continuously provided by the government but during this coverage, this line item was moved towards the contribution of the state level in relation to the financial reporting procedures after the devolution. In 2008,\(^{92}\) aside from staff salary and office running cost, the federal government afforded additional funding, except for South Darfur. It was the first and only time that the federal level provided funding

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\(^{90}\) SDG stands for Sudanese Pounds.

\(^{91}\) The budget of West Kordofan in lieu of South Kordofan was selected for financial evaluation since the sample community fell in its jurisdiction.

\(^{92}\) Financial report from CFCI Kassala did not have a desegregated date for federal and state in 2008.
against program activities between 2007-2011. North Kordofan used to fund for on-going community activities and the purchase of a generator and lamp in one community, which presently serves as a source of CDC income. Two other states, the Blue Nile and Gedarif reported the purchase of a generator from this fund.

**UNICEF funding contribution**

UNICEF funding in Figure 5, above represents funding for activities related to:

- Community capacity development and empowerment;
- Capacity development for CFCI and government counterparts;
- Monitoring and evaluation;
- Support for community initiatives.\(^9^3\)

A review of selected Annual Work Plans of 2010 illustrate that, most of the funding requested by CFCI units go to capacity building and empowerment of communities with a reported budget range of 30%-50%. This is followed closely support to community initiatives with a budget range of 20%-45%. Monitoring and evaluation activities received a budget range of 20%-35% while the capacity development for CFCI and government counterparts received the least budget range with 8%-15%.

Based on Figure 5, UNICEF fulfilled 62-90% of its financial contributions between 2007-2009 while only 54% - 57% were fulfilled in 2010 and 2011. In the last two years, funding of non-sectoral activities has dropped given the data provided by the states. In addition to UNICEF’s financial contribution reported above, it has also provided significant contributions in terms of staff salary and sectoral activities. It is important to note that state interviews indicate a decline in sectoral activities in CFCI communities across all states from 2008, especially those that were not target for any specific joint UN programming.

**State funding contribution**

Most state funding reported are on staff salary, incentives, fuel and office running cost except for West Darfur. Of the six states that reported their budget, only West Darfur stated that the budget submitted exclusively reports on financial allocations from the state level against program activities. Between 2010-2011, West Darfur state provided 139% (2010) and 181% (2011) program funding against it planned budget respectively. The increase in funding at the state level in 2007 (Gedarif), 2009 and 2010 (Gedarif and Kassala) are attributed to the combined state and community contributions. The spike in numbers in 2007, 2009 and 2010 does not necessarily indicate additional funding allocation in the state level. Without data desegregation during these years, it is difficult to ascertain if and how much additional resources are leveraged at the state level for CFCI communities. Information provided by the said states were excluded for further analysis of funding trend for those three years.

In 2008, 54% of all financial commitment was fulfilled in four states with an average of 51% contribution. The highest state contribution came from South Darfur; 65% and the lowest at 42% by North and West Kordofan at 42% respectively. Gedarif’s state contribution was at 56% that year. Between 2008-2011, the lowest state contributions were made in 2009 with an average of 27%.\(^9^4\) Of

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\(^9^3\) See Annex 6 for a Sample of Non-Sectoral Activities under each category.

\(^9^4\) Only desegregated data was used for this computation. N=4.
the four states, which provided desegregated data, West Kordofan had the highest contribution at 49% while North Kordofan had the lowest at 14%. South Darfur: 23% and West Darfur: 21%.

Between 2007-2011, the average state level contributions from South Darfur, West Darfur, North Kordofan and West Kordofan was at its highest in 2011 resulting to an 88% fulfilment of financial commitment in the state level. North Kordofan provided 115% while West Darfur allocated 148% of its state resources. West Kordofan provided its lowest state contribution during this year at 17%. The increase in most state level allocations in 2011 is the result of a stronger advocacy campaign of CFCI units and communities to augment the steep decline of sectoral and non-sectoral aid received by CFCI communities from UNICEF and sectoral ministries.

Community funding contribution

“We are ready to contribute” is a common phrase heard in green and yellow evaluation communities. Communities are aware of the scarce resources and the high competition in accessing basic social resources or having teachers, doctors, nurses, health cadres and midwives, appointed in their communities, especially in some red communities. CFCI communities organize themselves to provide at least 10% of the actual cost of construction requested in terms of materials needed and labour to persuade different government offices or NGOs to provide the required service. Sample evidence collected above show that that community mobilization resulted to at least 15% if not higher in some areas.

From 2007 to 2011, the most consistent contribution has been at the community level. Community level contributions consistently surpassed the combined contributions of all government levels. It is important to note that the 2010 community contribution would be significantly higher if desegregated data were provided by two of the six states. Green and yellow CFCI communities visited frequently stated that they “are always ready to support and contribute.” Since 2008, CFCI communities in North Kordofan have contributed over 200% above planned contributions. During the entire evaluation period, the lowest contribution per state has been in South Darfur.

Community contributions have been over a hundredfold. Interviews and records show that community contributions come in cash and in-kind. Communities may contribute local materials such as sand, water, stones and others as well a construction labour. All these in-kind contributions are then given an equivalent estimated monetary market value. In 2009 alone, North Kordofan’s community contribution was recorded at 225,700 SDG for the construction of 59 local classrooms, one permanent classroom, two permanent health units, renovating 130 local classrooms, maintenance of eight hand pumps and installation of one mini water yard.

A field visit in El Khiseim, confirmed this information. A permanent health unit, four classrooms made of local materials and two permanent classrooms were all constructed through community contribution and community mobilization. Though the assistance of CFCI and the contributions made by the community in building infrastructures, the CDC of this community was able to lobby the government to provide a trained health cadre in their community. The only assistance received to date from UNICEF

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95 A phrase also reportedly used by state government officials in Gedarif to incite donors.
and sectoral ministries in this community was construction of three water points and one water tank and the training from the Communication for Development (C4D) section.

Although community contribution is encouraged and welcome, one downfall of the extremely high contribution of communities is that already vulnerable and poor communities may be overburdened to contribute beyond their means to try to attract more investments from partners. Community contributions must be supplemented by resource and financial allocations from duty bearers.

**Locality funding contribution**

Though part of the CFCI Coordination Mechanism, the weakness in coordination between CFCI units and localities is reflected in recording its contributions. Although CFCI units state they have some form of relationship with the locality level, only one state out of nine recorded its contribution. Locality contribution recorded by one state was not reflected in Figure 3 to avoid confusion. West Darfur stated that the locality level also provided support for some activities but this was not reported. Locality level participation and a sense of ownership are critical in ensuring the sustainability of a community-driven, participatory approach in development. Localities are not directly involved in the implementation process of the program as need be. There is reportedly a belief that “localities have no money,” this in addition to the fact that the annual work plan does not necessarily require locality contribution may be the reasons why its contributions are not obtained nor systematically recorded. Unreported locality financial and resource contributions undermines its involvement the Initiative.

To accomplish the objective of improving access to basic social indicators of a community and sustaining its improvement would require local participation and accountability, access to resources, a diversified and broad funding base for continuous activities. The prevailing thinking that the Initiative or UNICEF will be able to accomplish all this alone, is misguided given their own limitations.

A slide presentation in early 2012 by CFCI/UNICEF showed that partners have contributed a total of 83,066,080 USD in CFCI. It was explained by the SPMM&E Chief that the financial contributions reflected under UNICEF’s column was the total of both non-sectoral activities and sectoral funding provided to all CFCI communities. Partner contributions are those from various NGOs, UN agencies and Donor agencies that have implemented programs within CFCI communities. Partner contributions were for activities such as food distribution, agriculture, training, education, health, WASH, income generation and others. Based on Figure 5, contributions in percentage are as follows: UNICEF-20%, Federal Government-2%, State Government-21%; Community –19% and 37% from other partners.96

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96 Efforts were made to verify the data in this slide presentation but with no other available CFCI documents or reports to compare and support the figures with, this information remains unverified. An important question raised in the contribution, is the low percentage of community contribution. The information provided is not consistent with the findings of the CFCI midterm review (2004) and this evaluation. During the course of this evaluation, it was noted that certain states did not have desegregated data for state and community contribution.
Impact of unmet financial pledges

While community mobilization continued and activities for women which is mostly funded under this budget line continued, activities were greatly reduce. The sustained community mobilization in various states has created unmet expectations in many communities in terms of the provision of basic services. Participatory work conducted by CFCI units and CDCs with communities in planning and preparation of local materials, whilst awaiting the fulfilment of identified gaps in communities remain unaddressed; this has put CFCI units and their credibility in a dire situation.

What systems are in place in CFCI units to ensure the timely and transparent documentation of programs and program expenses?

Program documentation

As mentioned earlier in the report, an annual and bi-annual meeting was conducted yearly between 2007-2011. Progress reports were given in terms of slide presentations. Progress reports significantly focused on programs and activities conducted, and the financial expenses to a lesser degree. An interview with one UNICEF zonal representative indicated that the reports “did not necessarily provide impact results,” which was verified during the evaluation. Reports during annual and bi-annual meetings focused on achievements on progress indicators, more on the % of achievements. The most accurate information gathered on CFCI activities are based on the slide presentations provided by the different states in the two meetings mentioned above. Undoubtedly, vital information and decisions were made during these meetings but of the three CFCI retreat reports secured, only one report (2011) provided pertinent information on decisions reached.

During the course of the evaluation, no monthly, quarterly or annual report was ever secured for the five-year implementation period under evaluation from the CFCI/UNICEF Unit in Khartoum. Except for specific donor reports in compliance with donor requirements of activities implemented in selected CFCI communities, no documentation of a yearly comprehensive review, analysis or compilation of all CFCI activities and information in all states was never obtained. There is a scarcity of easily accessible program reports and other print materials in contrast to the amount of work done in the field level, especially for the early years of the evaluation period. The lack of proper, accessible program documentation in the federal level, both in UNICEF and the HCDG undermines all the work conducted
and achieved in the different states. The accomplishments of CFCI in the state level are irrefutable and recognized in by State government branches and specific donor programs in various states. A comprehensive analysis of CFCI success and contributions in all state would have provided an evidence-based advocacy platform for stronger partnership commitment from UNICEF, within its sectoral units, the Government and other potential partners.

Interviews with CFCI units and field visits in CFCI communities provide a different reality. Close coordination exists between CFCI Units and UNICEF zonal offices where activity reports are reportedly submitted. Based on interviews, CFCI seconded sector staff reportedly provides monthly and or ad hoc reports to their ministries and CFCI Coordinators. The government monthly reporting process was confirmed by DGs of relevant ministries interviewed. One UNICEF focal point stated that coordinators provide a short activity report together for liquidation. Interviews with CFCI coordinators provided various responses when asked how often they submitted reports to CFCI/UNICEF, some mentioned providing monthly, quarter reports while one former CFCI coordinator indicated providing reports “whenever necessary...there is no schedule aside from the bi-annual and annual report...” It is unclear if the reports provided to CFCI/UNIEF are actual documentation on a report format or if these reports are the information provided as slide presentations during the bi-annual and annual meetings.

Progress of CFCI activities is reported by CFCI unit coordinators to the MoF Planning and Development, the frequency of reporting may vary from state to state. In Gedarif, a report is submitted to the MoF Planning and Development unit then apparently shared with the Minister of Councils and the Legislative Council. During the evaluation period, scheduled quarterly meetings with the STC were reportedly regularly conducted in eastern states. These meetings still take place to date. The regularity of these meetings reportedly varied in other states though this is no mechanism for this to be verified at this juncture.

On the federal level, UNICEF and the HCDG jointly conduct monitoring field visits though interviews indicate that there are no corresponding monitoring forms for the field visits. It is unclear as to what, who or where the field visit reports go to or how these results are shared to a wider audience. Obviously, coordination meetings are different from what the field visits mentioned above. Reports indicate that the frequency of joint state field visits varied across states.

Financial documentation

During the evaluation, one of the major challenge experienced by the evaluation team was access to program and budgetary documents from CFCI units and different government offices. On budgetary documents, interviews with the MoF and CFCI staff indicate that the Unit undergoes two financial audits corresponding to their budget submission. For non-sectoral CFCI activities, the budget is submitted to UNICEF, all budget under this proposal is cleared through UNICEF state offices utilizing UNICEF’s financial system. Sectoral activities provided by UNICEF through sectoral ministries and have no bearing on CFCI Units. All budget provided by the government is dispersed though the MoF in the state level. All finances under this budget line are subject to government internal audits. Efforts were made to secure a report or document relevant to CFCI activities but to no avail.

A review on partner contributions was challenging since there is no transparency in freely accessing financial reports related to CFCI on the government side. Reported government contributions were
taken at face value since there were no other documents collected to verify the actual contributions made. Information on which activities were funded was based on data gathered during interviews.

As shown in the financial table above, Figure 3, even financial reports already shared with UNICEF during annual meetings were difficult to secure from 70% CFCI units. There is a need for stronger transparency in terms of easy, timely access to full program and financial documents. As discussed earlier, the quality of financial data and data management as reflected by the information gathered by the team varied greatly across states. Of the six states that provided information, only one state consistently provided quality, desegregated data in a written format requested.

Stronger program and financial management systems need to be in place for documentation purposes in the federal level within UNICEF, between HCGD and UNICEF and in states. Transparency and accountability in data sharing between partners is crucial in developing trust. The fulfilment of resource and financial commitments will also assist in a more realistic planning and program implementation.

The lack of contribution on the federal level has adversely affected program implementation.

**CFCI Progress Indicators/CFCI Database**

The CFCI database is one of the strongest contributions of CFCI in the state level.

“CFCI database is more comprehensive and reliable than existing government data...has also provided a foundation for staff in state governments to plan and analyse development needs. This was stressed as a very positive outcome of CFCI in both states.”

Reports from states confirm that various stakeholders in the state for planning purposes are using the database.

“Donor agencies, NGOs, the Ministry of Finance, the ministry of education and health...come here and use our database because it shows the gaps in the different communities it is the most updated and complete in CFCI communities and we have started adding non-CFCI communities...” CFCI Data Analyst, South Darfur.

“State economic planning department, sector ministries, and research and studies (use the database).” CFCI Data Analyst, Red Sea

“The Development of planning and Development, University students, research institution, localities, UNICEF offices use our database...” CFCI Data Analyst, Gedarif

Interviews in the state level indicate the positive impact of the database. Information, originally based on the CFCI progress indicators has been useful and used by corresponding sectoral ministries in their planning and other state stakeholders. The sectoral information from CFCI communities are the most updated source of information in their corresponding ministries. Regular CFCI monitoring and survey of progress indicators collected by CFCI seconded staff from the ministry of health, ministry of education,

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97 Gedarif and Kassala states

WES, social services and others are all forwarded to their respective ministries through monthly reports or when specific activities occur.

CFCI data analysts have been trained and are reportedly sought after by other organizations. A standard form is used to collect data across all CFCI states. As reported earlier, though there may be ambiguity in the collection of some indicators, never the less, the collection process within states is done systematically. The CFCI database has carved a niche in the state level; it is one the strengths of the Initiative and must further be developed and strengthened.

“(Data collection) it is done through a pre-set plan in which the team goes to the community and meets the heads of the committees and conducts discussion. Forms will then be filled by the team and the community development committee members, plus direct information on the current situation in the community. Data Analyst, CFCI Kassala.

In Khartoum level, the DevInfo was introduced in CFCI/UNICEF in 2010. DevInfo is a useful tool. Updating information may be done online from different sites with no additional expense. Efforts have been made to compile all CFCI database from the state level in Khartoum but this is taking more time since state level CFCI information is not linked to the DevInfo in Khartoum. Databases must be physically brought to the head office and uploaded manually; interviews indicates that the platform used for the two databases are different. With the lack of specific people to conduct CFCI related work, there is a backlog in CFCI information on the DevInfo, some of the communities randomly selected for evaluation were not even in the DevInfo database in Khartoum. Based on information gathered, there is no institutional mechanism within UNICEF to ensure that the most updated CFCI databases from various states are included in the DevInfo. This is a missed opportunity.

Documentation, both programmatic and financial documentation in the CFCI is weak. Best practices, innovations from the field and important learning over the years have not been captured in a comprehensive manner that may provide in-depth information and better understanding of the program, its mechanics and achievements. The red-tape and difficulty in accessing documents from CFCI Units in various states further complicates the matter. Program implementation requires transparency and accountability, without access to written information and documentation for it is difficult to assess the actual extent of progress.

**Sustainability**

The continuation of benefits from a development intervention after major development assistance has been completed. The probability of continued long-term benefits. The resilience to risk of the net benefit flows over time.\(^{99}\)

**What are the contributing factors for the sustainability of CFCI programs?**

A comparative analysis was conducted between the green, yellow and red communities to determine the contributing factors of sustainability in CFCI communities. Based on observations and data collected, there is little difference between green and yellow communities in terms of sustaining

\(^{99}\) Ibid. 2004b.
progress indicators and activities related to training and programs provided by the Initiative. With CFCI communities mostly starting at the same level and provided similar (though curtailed) access to varying degrees of basic social services, leadership training in participatory community work, peace-building; "sustainability" will look through the lens of people or communities which have successfully overcome the same problems experience by other people or communities given similar resources.

**Broader partnerships**

As stated earlier in the report, partnership with other stakeholders, NGOs and other Donors was not CFCI strategy in the early years of the evaluation. Partnerships happened ad hoc or coincidentally; CFCI communities provided an entry point to Donors and other NGOs to many vulnerable communities. In Gedarif, Kassala, North Kordofan, West Darfur and South Darfur, CFCI staff have reportedly been contacted by other NGOs to help mobilized both CFCI and non-CFCI communities prior to the entry of a new program or new NGO in the community. In 2008 in Gedarif, after many similar incidences where CFCI communities were not included in the program said NGO, the team began negotiations of facilitating the community mobilization process with the agreement that selected CFCI communities would also be targeted for that NGOs program. With the decline in sectoral intervention and support by UNICEF through sectoral ministries, Gedarif was the first recorded state that was able to bridge the gap for some communities. Partnerships expanded CFCI programs into agriculture, livestock, livelihood and income generating activities. In the early years of the evaluation, there were only a few planned inter-sectoral partnerships. The ICRD program in South Kordofan where a joint UN program was conducted and the CDF in Kassala, Blue Nile and North and South Kordofan. The success of these partnerships encouraged CFCI Units from all states to actively explore partnerships on their own.

Although initially, CFCI was able to solely address a handful of community needs in basic services through UNICEF and their respective line ministries. Starting with a smaller number of communities, the continuous geographic expansion of CFCI made it difficult to sustain the initial progress of the program also given UNICEFs reliance to outside funding. The (long) gap in program implementation and community activities results to a reduced momentum for change and adversely impacted the level of community participation. The slow decline in UNICEF sectoral support from 2008 forced CFCI Units and communities to look for other institutions, groups or people to assist in fulfilling needs identified by communities. By 2010, based on documents obtained from UNICEF SPPME, a new directive for actively soliciting 2-3 partners for communities became a part of the CFCI strategy. During the evaluation (2013), 60% of the evaluation sample communities reportedly have/had other NGOs working in their community.

**Proactive CDC leaders**

The realization for the need of a broader funding base resulted to the empowerment of a handful of CDCs by putting their advocacy training into practice. In North Kordofan, the CDC of a community, not part of the evaluation sample, came to CFCI requesting stationary school stationary items. With no funding allotted for this, the CFCI unit suggested exploring other sources, community based organizations or NGOs. The CDC members went to different NGOs right after their meeting with the CFCI coordinator to secure funding for the stationary items and they were successful in doing so. A local NGO funded their stationary request. In the Kassala, the CDC reportedly collected 8 SDG from people based in Qatar originating from their community to assist in community projects. In West
Darfur, a CDC went to three different NGOs requesting assistance; Catholic Relief Services (CRS) for water and student seats, Sida for a Woman’s center, and TDH for assistance on farming and an irrigation pump. At the time of writing, it was reported that CRS agreed to provide the seats for the school for the said community.

These are the ideal situations. Sustainability is obviously based on personal attitudes, initiatives and priorities. It has been reported that non-proactive CDCs outnumber the one who are. In the initial implementation phase, it is critical to ensure CDCs are functioning as expected through regular monitoring visits and performance audits to tract its progress, establish expectations and mechanisms. This is one of the gaps mentioned earlier in the coordination within CFCI.

“…people didn’t pay their water tariff...water stopped for two months...we went back to drinking water from the river and people got sick...the community leaders reactivated the collection of money......” In-depth Interview, Gedarif.

Registration of CDCs

One of the main activities of CFCI during this timeframe was the registration of CDCs. The official registration of CDCs with a recognized Government body is crucial in its quest for recognition and financial independence. Securing an official registration stamp/certificate provides legitimacy to the CDC in its dealings with other institutions or people. The registration also opens doors for the registered CDC to open a bank account. Having a bank account is critical since it indicates the CDC financial independence, thus they may directly approach possible donor and engage in micro-credit programs with local banks.

“...in North Kordofan, CDCS or groups can get financing from partners on activities they have been trained on...an example is the Community Development Fund (CDF) funded by the World Bank...if the CDCs are registered...they can get funds from there...” Key Informant Interview. Coordinator, Water Harvesting Unit/Food for Work. North Kordofan.

To date, 32% of CDCs are registered, 6% short of the CFCI objective for 2007-2011. Reports indicate that a huge deterrent to CDC registration is the registration fee. See table below for a breakdown of registered CDCs per state.

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100 N= 190/913 communities. 913 is the sum of CFCI communities covered in the 10 states, West Kordofan included where sample communities were taken for the evaluation.

As shown above, registrations per state vary according to institutions as well as procedures. In West Darfur the registration process is as follows:

**CDC Registration for West Darfur**
- Address Social Affairs Ministry officially through CFCI;
- Issue registration certificate stamped;
- CDC stamp will be issued accordingly;
- CDC stamp should be used according to following standards (to be communicated by CFCI unite to the CDC);
  - Not to be used for personal or political purposes
- All official letters should be stamped;
- Any project proposal should be stamped;
- In case of loss, it should be reported to the police and the CFCI office.

### Establishment of procedures and mechanisms promoting local ownership

A truly sustainable program requires local ownership and established procedure and mechanisms to ensure continued work even with the change in leadership. In states that are performing better than others, it was evident that all levels of society from the state, locality and community level had some form of involvement in community work.

The CFCI bottom-up approach, is a community-driven program combined with a convergence of basic social services and empowerment initiatives for women requires a *buy in* from influential decision makers in the state level. With the frequent reshuffling of government staff and UNICEF personnel in Khartoum level, it is not surprising that there is a lack of common understanding on the basic principles espoused by the Initiative. *Advocating for the "CFCI approach"* takes time and resources.

This was evident during key informant interviews with the newly appointed DG of Education and Humanitarian Affairs Commission (HAC) in North Kordofan. Both saw CFCI as an NGO addressing the needs of selected communities, therefore, "those communities no longer needed government..."
assistance.” The confusion about the status of CFCI Unit and CFCI communities puts it in a disadvantage in leveraging government and UNICEF resources. Similar observations were made with UNICEF section staff interviewed. There seemed to be a low sense of interest in learning about and/or engaging in CFCI work. It was unclear if it was because CFCI was seen as a parallel structure to the government within UNICEF or if it was the sectoral priorities or CFCI impact that is the ones in question.

Presently the CFCI units falls under the Directorate of Planning or Directorate of International Cooperation. In this set up, foreign funded program units under the planning directorate are dissolved at the end of funding. South Darfur, the MoF reorganized and created a new unit; the Department of International Cooperation. CFCI unit has been institutionalized under this unit and a broader mandate was created to accommodate local realities and state needs. There is a need to fully institutionalize the CFCI Unit, directly under the MoF in the state level, the second option presented above is the preferred option.

“Yes. Other development partners such as the EU, Japan (JICA) are currently consider being part of the Government structure in order to ensure continuity of their activities from within the administration.” Director - General Directorate for Economic Planning and Development, Kassala.

In spite of the progress made by South Darfur in integrating the Unit in the MoF structure, it was evident that the focus of the new Unit has also shifted and there was little time for monitoring of CFCI communities. The coordinator and the sample communities confirmed this when they reported that in the last two years, there was hardly any monitoring visit from the CFCI team. This provided a birds eye view on why it is important to closely work with the locality level, for the continuation of links and support to communities.

**Locality level**

The locality level is tasked by law to provide the basic services to communities, yet it also seen as the weakest link in the CFCI coordination structure. In Kassala, one of the better performing states, the state government body is fully supporting the Initiative’s approach. With funding from the Department of Planning and Development in the state level, the government brought this concept down to the locality level. Locality Development Program officers have been put localities to provide community support and coordination for CFCI programs in the locality level.

“In Beda locality, 2 CFCI communities were very active…the locality commissioner said that whatever you build I will match…this man moved to another locality and because he believed in the CFCI approach of community participation…he introduced the same concept there…” Key Informant Interview with CFCI Unit Coordinator, West Darfur.

**Community level**

In the community level, three out of four102 of the communities randomly selected for a field visit by the writer still had functioning water points, wells and water pumps after one to three years of installation. Although reports on access and equity were raised in two of the communities, the water points, pump

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102 There is no WES program in the fourth community in West Darfur. It was reported that the in past, the community had water well but was destroyed during the war.
and water well were all functional. Community people reportedly pay a certain amount, which varied, across the states. The amount given was between 4 to 5 SDG for 2-4 jerry cans. Again, depending on the state, the money goes to the community fund, which is later divided, into incentives for teachers and/or health cadre, person in-charge of the maintenance of the well/pump and other community workers (40%); community initiatives or self-help programs (40%), and an emergency fund (20%).

The local ownership of communities in projects they have been directly involved in is evident in these three communities. Key informant interviews with partners in the state level on the subject indicate that communities who were not able to maintain resources provided to their communities because: community members (mostly referred to internally displaced people who lived in camps and had free access to services) did not want to pay for water which discouraged others from paying, the money collected was too little- not enough for maintenance, poor collection process, poor budgeting, people were too poor to pay. To ensure the proper functioning of committees in-charge, there is a need for frequent monitoring and performance audit.

Security, protection and accessibility

Security and accessibility are very important factors in sustainability. Sixty-seven percent of states reported conflict in their communities, which made it inaccessible. Mitigation is the first step to managing disasters and conflict. Peace-building training has proven to be an effective tool in mitigating inter-tribal conflict in selected CFCI communities. This is evident in West Darfur where only 3 out of 53 CFCI communities are displaced given the context of the State. In the participating communities in South Kordofan, the Blue Nile and North Darfur, peace building training has also reportedly brought a sense of harmony to the participating communities.

Accessibility is an important matter when it comes to quality programming. Technical support is vital in providing quality programs, if areas are inaccessible due to conflict, it not only implies that little or no technical support can be provided it may also mean that programs within the community need to stop at a certain point due to insecurity and/or displacement. This is something that is already observed in some of the CFCI communities. Given the financial resource and the limitations in the provision of technical support, it is important to carefully reconsider the selection criteria of CFCI communities. There is a high number of identified vulnerable communities in each state in the same situation which is more accessible.

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103 Percentage may vary across states.
Lessons and Recommendations

As in most developing countries, the main challenge in Sudan is access to an equitable distribution of resources and basic social services; education, health, sanitation, WES and child protection, in the most vulnerable communities. This is further complicated with its peculiar situation of having to respond simultaneously to the various states of development and emergency needs. Recommendations below are based on the present socio-political realities observed and reported during the evaluation period. It is the intent of the recommendations to: empower local governance; establish transparent and reliable mechanisms within corresponding government institutions for a more equitable access to resources and basic social services using evidence-based data; tap latent and highly trained individuals within the government structures to provide support to this endeavour; strengthen the social participation of communities; and lastly, preserve the best practices of the Child Friendly Community Initiative in relation to the needs of the states.

This report provides recommendations with two options. The first option, the preferred one, is proposed from a Government-UNICEF partnership lens. The first option focuses on government leadership, expanded partnership with various key stakeholders from the donor community through community-based organizations and a streamlined provision of development assistance in the state level for better provision of social services.

Option two is presented from UNICEF’s lens as a partner and the key contributor to the Child Friendly Community Initiative. The Child Friendly Community Initiative evaluation has documented several challenges and gaps from both internal and external factors in the Child Friendly Community Initiative. Achieving CFCI objectives and implementing planned activities in a vast and diverse geographic coverage with extremely limited resource and financial allocation coupled by the lack of or minimal sectoral support extended by both the government in the federal and state levels (in majority of target states) and UNICEF through relevant duty bearers has contributed to the failure of the Initiative to achieve CFCI objectives for the evaluation time frame. After careful analysis of data gathered from various sources, it is evident that the CFCI cannot succeed with its present set-up and needs for service provision without the full support and buy-in of duty bearers from the federal and state governments and with the limited support from only one partner. It is therefore recommended without prejudice, that a program phase out be initiated. The phase out is expected to complete within two years, at which time, focus will be on tying up lose ends, expansion of partnerships or program hand-over and lastly, the strengthening of community systems and mechanisms to ensure that infrastructures and equipments (example: water pump, water tanks) are maintained and continue to service the community beyond the program lifespan.

Recommendations below are based in a holistic approach involving different stakeholders and are presented accordingly. Recommendations are not meant to be prescriptive, rather it is envisioned to be a springboard for a participatory discussion amongst stakeholders.
Option One

Recommendations for the Government

**A stronger political will and leadership**

It is recommended that the Government of Sudan take the lead role in adapting and advocating for an integrated package for basic social service delivery systems supplemented by community leadership training and peace-building in all development and relief work. The success, continuation and sustainability of providing an integrated package of basic socio-economic services, the empowerment of the poorest and most vulnerable communities in Sudan is highly reliant on the government’s continued political will for change and leadership. The GoS needs to exhibit strong leadership and political will in adapting a comprehensive, grassroots approach whilst recognizing social accountability and providing equitable access to resources.

**An integrated package of social services and community leadership training**

It is recommended that the grassroots, participatory approach of mobilizing communities and empowering it through the formation of community development structures receive training in participatory planning, implementation and monitoring local projects complemented with the provision of an integrated package of basic social services, and training for women and youth and peace-building be adapted as the government’s rural development strategy, as well as in its relief and community recovery framework. As proven in CFCI communities, it is an effective mechanism that raises the awareness of community members on their rights and entitlements leading to advocacy and self-reliance, in addressing the needs of their communities resulting in local pride. This approach not only hastens the time of improving the situation and lives of children and women by jumpstarting the change process, it also provides a built in system of ensuring community participation, local ownership, sustainability and better equity.

**Resource Mobilization and Allocation**

It is recommended that the GoS mobilize financial resources and support from within the government and the donor community with the rural development platform mentioned above. The long-term sustainability of a successful community-driven delivery of integrated social and economic services relies on a broad funding base and technical support.

**Development of a cost model for the rural development strategy**

It is recommended that the federal and state governments, together with CFCI units develop a cost model involving both the expansion and continued support of the rural development strategy (pilot CFCI communities) utilizing a combination of a bottom up and a top bottom approach. Better understanding of the costs associated with identifying new communities and support needed for existing CFCI communities, as well as who the potential funders may be, will aid in effective planning, program implementation and scale-up.

**Fulfilment of government contributions**

It is recommended that the GoS allocate sufficient financial funding to the proposed rural development strategy. Recognizing the government’s continued commitment with the secondment of staff, staff salary and the running costs of CFCI offices, a further fulfilment of allocations from the federal level
against planned activities would greatly benefit target communities and hasten the completion of a comprehensive delivery of basic social services and socio-economic packages. The fulfilment of government contributions may further signify the government’s sincerity in support of pro-poor policies, which may stimulate donor interest in the government’s rural development plan.

Coordination of donor support in the state level
It is recommended that one coordinating body for foreign aid and technical support be established at the state level to streamline and maximize the utilization of limited resources for the state rural development plan. In recognition of limited Government and Donor resources and funding availability, coordination and mainstreaming of all donor support must be done systematically and transparently in the state level. Selection of vulnerable communities must be conducted in an open, methodical, evidence based manner. Advocacy campaigns promoting the buy in of donors for a comprehensive and coordinated provision of relief and development work must occur. See the section “Way Forward” for a detailed explanation and proposed transition plan.

Information Sharing and Transparency
It is recommended that the GoS provide the public, a yearly compiled State Department of International Cooperation (SDIC)\textsuperscript{104} report on the success, challenges, best practices and innovations from the various states, together with a yearly financial statement of expenditures. Information sharing and transparency is key to a successful joint partnership. A culture of information sharing and transparency must be developed at all levels of work with the coordinating entity. Full access to program and financial documents by all partners improves work relations and strengthens trust. An improved data management and financial management system will facilitate work in communities and coordination between partners. This is an area for technical support from donors and other state actors.

Recommendations for UNICEF

Advocate for a comprehensive rural development strategy with other key players
It is recommended that as the government takes the lead role in adapting a comprehensive rural development strategy in providing basic services, economic and livelihood opportunities/training and peace-building training, UNICEF advocates within the donor community and other key stake holders to provide technical assistance and invest in a comprehensive approach in providing development (and relief) programs in line with the government rural development strategy.

Publications of CFCI best practices and success stories
It is recommended that UNICEF support the government’s proposed rural development strategy by commissioning a publication of best practices or success stories from CFCI communities and state government responses and support. The publication on best practices will help stimulate donor interest, which may lead to donor support in the rural development package for vulnerable communities. Though this publication will focus on best practices and success stories, it is equally important to highlight challenges faced across all CFCI states and how these challenges may be addressed in a new program phase.

\textsuperscript{104} This name is only used in this document for discussion purposes.
Provision of technical support in the transition phase from CFCI to the State Department of International Cooperation

It is recommended that UNICEF support the transition of the CFCI Unit into the State Department of International Cooperation by providing the necessary technical support in the first two years of its transition phase. Technical support may come in the form of assisting in the development and implementation of a three-year, yearly and quarterly transition work plan with CFCI units, assistance in the planning and implementation of the handover of relevant CFCI roles and responsibilities to the locality level, the identification of essential training for SDIC staff in relation to their new roles and responsibilities, technical support from the SPMME Unit in the training DevInfo training on both SDIC and locality level units. Assist in stimulating donor support to fund and provide the necessary technical training for the transition period. See the “Way Forward” section for more information.

Prioritizing of pilot SDIC rural communities in the provision of a comprehensive basic package

It is recommended that UNICEF, through relevant ministries prioritize selected rural SDIC communities in providing a comprehensive basic service package of education, health, nutrition, WES, child protection and communication along with technical support whenever necessary. As the main partner in CFCI, UNICEF can lead other partners in providing a coordinated assistance in support of the government’s rural development strategy in the non-government sector.

UNICEF support in establishing Locality State Development Units (LSDU)

It is recommended that UNICEF provide assistance to selected pilot Locality State Development Units (LSDUs) with the provision of key office equipments. In line with UNICEF’s support to localities in training database analysts in DevInfo, the provision of necessary office equipment such as computers, printers, desks and chairs is further recommended as part of a complete transition and training package from UNICEF.

Recommendations for Donor and Non-state actors

Donors and non-state actors coordinate and support the SDIC

It is recommended that donors and non-state actors, such as NGOs coordinate all their state programs, from the selection of target communities through the provision of sectoral support though the SDIC. As a lesson learned in CFCI, earmarking a certain percentage of sectoral support, if not all, to selected pilot SDIC communities would ensure the provision and completion of a package of basic services.

Link donor support to specific program outputs and clear program indicators

It is recommended that donors and non-state financial support be linked to specific program outputs and clear program indicators. Donor support to the rural development program of states must be linked to clear stipulations on specific program outputs with given time frames, with transparent and accountable programmatic and financial data management systems to ensure that the funding flow reaches the vulnerable communities, women and children. Having clear program mid-year and annual targets or indicators will assist the Government, donors and non-state actors in evaluating their progress.

105 See the “Way Forward” for more details on the proposed transition phase.
106 This name is only used in this document for discussion purposes.
Technical support in transparent and stronger fiscal management systems

It is recommended that Donors and non-state actors like NGOs provide technical support in strengthening the fiscal management of cash flow, transfers and disbursement from the federal, state to locality level going through the SDIC. Setting clear guidelines on the roles and responsibilities from the federal, state and locality level on fiscal allocations, disbursements and expenditures will create a more transparent and accountable system that will ensure higher social accountability.

Program and financial transparency and accountability

It is recommended that Donors and non-state actors assist the GoS in the development of program and financial systems for improved documentation, with access to reports at all times. The development of strong financial systems promoting transparency in financial disbursement, strong program documentation and filing may be part of the indicators identified in the recommendation above. Promoting social accountability requires transparency and up to date and easily accessible information/documents. Documents such as the disclosure of resource allocations in budgets, procurement, program expenditures and program impact must be easily available to all partners at all times.

Recommendations for Programming

Develop minimum standards for threes sets of SDIC support packages

It is recommended that the GoS set minimum standards for the development of three kinds of packaged SDIC support; the minimum package, average and full or complete package. Since the provision of SDIC support will vary greatly and rely on available funding and community needs, it is vital that minimum standards are developed for each package. Example of standards are as follows: a full package may comprise of training for CDCs\(^{107}\), a livelihood or income-generating program for women, peace-building and conflict mitigation training and the provision of all sectoral support. An average package may include all CDC training, women’s and peace-building training and at least three sectoral service support. The minimum package may include all CDC training, women’s and/or peace-building training and at least two sectoral support. Although the provision of a full package is always preferred, packages SDIC communities receive must respond to community identified needs.

Increased economic opportunities for women

It is recommended that the well-being of women be measured beyond the improvement of basic social indicators, it must include a women’s financial independence. Measuring the improved well-being of women must go beyond the basic social indicators of health, nutrition, life expectancy; it must include women’s financial income and freedom to decide on expenditures. Economic opportunities and skills training for women must be an integral part of the government’s rural development framework. Improving the well-being of women directly relates to the improvement in the lives of their children.

\(^{107}\) CDC training on participatory planning, facilitation, program implementation, monitoring, survey, budgeting and documentation to mention a few.
Earmark number of posts for women participants in CDCs and its subcommittees

It is recommended that a percentage of CDC and subcommittee positions be earmarked for women, which will incrementally increase over the years to a 50-50 participation between men and women by the 5th year of program implementation. Similar to CFci, the number of position for women should be initially earmarked at 20% with the incremental increase over the years. This should be closely monitored to guarantee a continued increase in women’s participation to reach the level of decision-making. Making this part of the proposed yearly donor indicator would guarantee its implementation.

The Way Forward

This section of the report discusses the proposed operationalization and transition phase of the Child Friendly Community Initiative Unit into the State Department of International Cooperation. The success and contribution of CFci in improving the situation and rights of women and children in the most vulnerable communities in Sudan are widely recognized. But given the present realities, limited funding, greater requirement for technical expertise in varying fields and a wide geographic area to cover, it is critical for CFci to evolve and adapt its work to address a wider range of needs in a larger geographic area by pooling available resources from various sources. To preserve the strong points of the Initiative, a group of highly trained government staff, with a deep understanding of development work principles, grassroots and participatory approach in development work and the provision of an integrated package of basic services to the community, it is recommended that the CFci Unit fully integrate within the existing government structure of the Ministry of Finance in the state level, which will provide access to a pool of financial resources in a coordinating role with decision-making authority.

The State Department of International Cooperation

To coordinate foreign aid and UN financial contributions for development aid in the state, it is recommended that the CFci Unit be fully integrated in the Ministry of Finance in the state level as a permanent department, a State Department of International Cooperation. A parallel structure to the Department of Planning and Development (DPD). As a permanent department, instead of a unit under the DPD, being dedicated to the coordination of foreign and all UN aid with decision-making powers will ensure the continuity of coordinated work across various funding sources.

It is recommended that the proposed State Department of International Cooperation be responsible for the coordination of all foreign development aid coming to the state and ensuring the provision of a minimum integrated package of basic social services to the poorest and most vulnerable communities, including community leadership training. Whenever possible, and depending on funding availability, this package may be expanded to include peace-building programs, livelihood, farming or other economic opportunities. As a department for foreign aid coordination, it provides the staff access to a wider range of resources to develop a minimum, standard and full development assistance packages that will address the different needs of vulnerable communities.

108 Only a suggested name. For the purpose of this report, this is the name that will be used to address the proposed coordinating unit at state level.
It is further recommended that the present LTC/CFCI be transformed into the Locality International Cooperation Unit.\footnote{The name is provided only for reporting purposes.} It is perceived that this unit in the locality level will serve as the direct link of the SDIC to communities in terms of coordinating all community programs. Further discussion on this Unit is found below. In Kassala, as stated earlier in the report, this evolution has begun with a different mandate.

**A three-pronged approach to adapting the Initiative to the present context**

A three-pronged approach is suggested in the evolution stage of CFCI. The first prong is the restructuring in the state MoF with the establishment of the State Department of International Cooperation in the state level. The second prong is to build the capacity of the locality level with the full devolution of CFCI coordination responsibilities to these localities. And the third and last prong is the establishment and expansion of the SDIC database system in the state and locality levels, to include non-CFCI communities.

Below is the proposed organogram or reporting structure of the SDIC.

**Figure 6: Proposed State Department of International Cooperation Structure**

Proposed Staffing: In the initial stage of the SDIC, it is recommended that CFCI staff from the MoF be assigned to the SDIC and focal people from various sectoral line ministries are identified for coordination purposes on SDIC relevant work. The Initiative has highly trained and qualified staff from the MoF and seconded staff from the various ministry lines who may provide the necessary leadership and coordination skills for the start-up phase. To guarantee institutional knowledge, ensure technical expertise and continuity of workflow within this department, it is recommended that government personnel and focal sectoral technical experts be assigned to this department a minimum of four years. For state staffing purposes, the proposal is for a director-general, assistant director-general, state database coordinator, database encoder, secretary and accountant. In the locality level, it is proposed that each locality have a LICU head, assistant, database encoder, accountant and the relevant seconded ministry staff assigned to the LICU. All the people suggested for this unit are staff who are presently in the locality level but there may be no organized unit. In addition to these core staff CDCs should also be represented in the LICUs.
Proposed roles and responsibilities: The proposed roles and responsibilities of this department are as follows:

- The coordination and/or allocation of all foreign/UN aid in the state level;
- Coordination with the state technical committee and non-state partners on identifying target localities for specific integrated intervention packages;
- Coordination and networking with other relevant key players in development;
- Identification of the most vulnerable and poorest localities for program implementation based on existing data;
- The development and provision of a minimum, standard and optimal “integrated development package and service delivery mechanism” to target localities with a given timeframe;
- Development of corresponding indicators for minimum standard and optimal integrated development packages;
- Mapping of the services delivered by all development/relief actors in the state;
- Ensure quality work, infrastructures and systems are in place prior to the phase out stage of identified programs for enhance sustainability,
- Provision of technical support to the LICU;
- Coordination with and performance monitoring of locality technical committees, collection and updating of a state-wide desegregated database;
- Disseminate annual program updates and financial report in line with the transparency and accountability.

Locality and State-wide SDIC Database system

It is recommended that the existing CFCI database be converted into the SDIC database. This database must be strengthened and expanded to include other non-CFCI communities for state-wide use and open to all.

The community database of CFCI has been recognized as an important planning tool for the state government, Donors, development and relief partners. Reliable data is key to decision-making and rule making, it is envisioned that the database will serve as a locust for the most updated information to assist decision-makers in making informed and equitable decisions. A state-wide database system will provide decision-makers valuable information and evidence-based data of achievements, needs and gaps in basic social services and economic related services in various localities. The SDIC database is also pertinent in the identification of the poorest and most vulnerable localities for inclusion in specific programs.

The complete transition phase of CFCI into SDIC is envisioned to take three years as envisioned in Figure 7, in the next page.
### Figure 7: Proposed Transition Phase

<table>
<thead>
<tr>
<th>Year</th>
<th>Activity</th>
<th>Why</th>
<th>Who</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Year 1</strong></td>
<td>Establishment of the SDIC in the state level by the MoF, setting up mechanisms and systems by the MoF with the technical assistance from UNICEF and other partners</td>
<td>Establishment of a state coordinating department of all foreign and UN aid in the states with clear mandates; creation of steering committee</td>
<td>MoF, UNICEF, SDIC, LICU, concerned stakeholders in the state level: Donors, JICA, WB, and other NGOs</td>
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<tr>
<td></td>
<td>Review &amp; development of indicators minimum, average and full program package</td>
<td>Coordination with donors and other partners based on gaps, needs, funding and resource availability in developing integrated packages for development response</td>
<td>MoF, UNICEF, SDIC, LICU, concerned stakeholders in the state level: Donors, JICA, WB, and other NGOs</td>
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<tr>
<td></td>
<td>Continue CFIC activities in selected pilot communities for the transition</td>
<td>Communities to serve as community laboratories for learning purposes</td>
<td>MoF, UNICEF, SDIC, LICU, concerned stakeholders in the state level: Donors, JICA, WB, and other NGOs</td>
</tr>
<tr>
<td></td>
<td>Provision of a minimum intervention package basic social services to selected vulnerable target communities by UNICEF and other partners through sectoral line ministries.</td>
<td>Piloting of basic core services in different levels of response depending on funding and needs</td>
<td>MoF, UNICEF, SDIC, LICU, concerned stakeholders in the state level: Donors, JICA, WB, and other NGOs</td>
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<td></td>
<td>The training of Locality International Committee Units (LICU) will be supplemented with actual fieldwork.</td>
<td>Transition on handover of coordinating role to locality level</td>
<td>SDIC/LICU/UNICEF/Donors and/or other responsible institution</td>
</tr>
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<td></td>
<td>LTC will accompany SDIC staff in conducting their regular monitoring visits to SDIC activities.</td>
<td>The role of SDIC staff in this stage is as trainers and mentors</td>
<td>SDIC/LICU/UNICEF</td>
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<td></td>
<td>CFIC/SDIC seconded sectoral ministry staff will be work within corresponding ministry staff in the LICU</td>
<td>The role of the relevant LICU staff will progress over the year starting as an observer, implementer and coordinator</td>
<td>SDIC/LICU/UNICEF/relevant ministries</td>
</tr>
<tr>
<td><strong>Year 2</strong></td>
<td>Technical support on Dev Info and database integration</td>
<td>Integration of CFIC database and survey of non-CFIC communities and other existing state available information in locality and state levels</td>
<td>SPMME on DevInfo training by SPMME unit</td>
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<td></td>
<td>Continued on the job training for LICU</td>
<td>Increase in roles and responsibilities of LICU</td>
<td>SDIC/LICU/UNICEF and other partners</td>
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<td></td>
<td>Graduation of CFIC communities</td>
<td>SDIC/LICU/UNICEF</td>
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<td></td>
<td>Development of new sampling criteria for target localities</td>
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<tr>
<td></td>
<td>Coordination of donor funding for integrated basic service provision for SDIC target localities/train and mobilize CDCs</td>
<td>Identification of level of support and plan accordingly</td>
<td>MoF/SDIC/LICU/UNICEF</td>
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<td></td>
<td>Update database and coordinate with other stakeholders in the state level for resource mobilization</td>
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<td>MoF/SDIC/LICU/UNICEF</td>
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<tr>
<td></td>
<td>Capacity audit in the federal level; identify needs and gaps for smooth technical support of the SDICs</td>
<td>For the provision of possible technical support from Donor agencies</td>
<td>MoF, UNICEF, SDIC, Donors</td>
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<tr>
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<td>Technical support on Dev Info</td>
<td>Integration of CFIC database and survey of non-CFIC communities and other existing state available information; link SDIC dev info to CBS and UNICEF (?)</td>
<td>SPMME on DevInfo training</td>
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<tr>
<td><strong>Year 3</strong></td>
<td>Full evolution of roles and responsibilities between SDIC and the LTC</td>
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<tr>
<td></td>
<td>Evaluation of program at the end of the third year</td>
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</table>
Federal level Coordinating Unit

It is recommended that to facilitate coordination on the federal level for all SDICs across the states, the UN Desk and Foreign Aid desk in the Ministry of Finance be combined and appointed as the focal point for all SDIC activities.

A program cycle versus an approach

It is recommended that the provision of an integrated package of basic social services and economic services, leadership training and peace-building be conducted in a program cycle. The Initiative’s concept of providing an intervention package of basic social services is an ideal and effective approach in response to the most urgent needs of the poorest and most marginalized communities. Yet development work is a continuous process and mostly dependent on available funding. Aside from the provision of quality infrastructure and trained staff for basic services, focus should equally be given in building up the capacity and leadership skills of the CDCs for future advocacy work in preparation for when the program ends.

Development of standards for integrated basic support, community mobilization and sustainability

It is recommended that standards for an integrated basic support indicators, community mobilization program, sustainability and equity be developed to ensure that the rural development model is not diluted as it continues to scale-up. There was no evidence of existing standards for CFCI support indicators aside from the accomplishment of progress indicators. The development of context-based state assessment tools for successful rural development strategy implementation should be factored into the scale up and technical decision.

Separation and independence

It is recommended that this aspect of the decision-making authority of the SDIC be reviewed by each state in response to their own needs. The agreement between the GoS and UNICEF to have the CFCI Unit as an independent entity gave it leeway to function and respond to requests swiftly, without the red tape involved in government work. For many that were interviewed within the government structure, this was seen as a positive aspect. A review of the advantages and disadvantages of this approach must be conducted by each state and decide on how it would best fit their needs.

Pilot programs and evaluation

It is recommended that empirical and qualitative data on the impact and efficiency be collected on the recommended full integration of the CFCI Unit with the MoF in state level and its corresponding activities. Having a full restructuring requires resources and commitment at the federal and state levels, therefore it would only be prudent to recommend that this recommendation be piloted in selected states which have already began some form of state-initiated integration and adaptations on their own. In line with the permanent changes suggested in this report, empirical and qualitative data must be collected and analyzed concerning the impact and efficiency of the proposed structure and processes with the eventual goal of making recommendations for improvement prior to any permanent changes.
Option Two

Recommendations under this option focuses on UNICEF as a contributing partner to CFCI. Recommendation below are proposed with the premise that UNICEF, through CFCI Units in various states have mobilized and trained community leaders but certain CFCI communities have received minimal social service sectoral support, if any, which has raised the expectations of communities and put the reputation of CFCI Unit staff and UNICEF in question. A complete program closure of the Child Friendly Community Initiative is expected to take two years therefore no new activity will be introduced during the phase-out period. Option Two focuses on the phase out of CFCI Unit with UNICEF withdrawing its support to the Initiative and redirecting it to existing mainstreamed government structures and non-government actors coupled with strengthening community support mechanisms.

Recommendations under Option Two, otherwise know as the exit strategy is as follows:

A packaged inter-sectoral approach in providing basic social services
UNICEF as an institution, has the capacity to affect rapid positive change in the situation and lives of children and women by simultaneously providing an institutional inter-sectoral coordinated assistance resulting to the local participation of community members in health, education, child protection supported by media through its Communication for Development section. As documented in this report and in others mentioned earlier, the provision of a package of basic sectoral services to a vulnerable CFCI community increases the community’s chance to develop, strengthen and/or reactivate social protection mechanisms for vulnerable families and individuals in their community. This work strategy is not new. USAID’s PEPFAR program has long required that program beneficiaries receive at least two to three social services under this program. The success of a collaborative and inter-sectoral approach in development work is well documented. It is highly recommended that UNICEF Sudan re-assess its approach to development and relief work and continue providing an integrated package of social services to vulnerable communities with beneficiaries, either individual and/or family members, benefiting from at least three programs implemented various by UNICEF sectors or through its partner government ministry lines.

Program oversight, documentation and information dissemination
Program closure requires oversight, it entails constant information flow, follow up and documentation. The recommended quarterly progress report cycle\textsuperscript{110} within UNICEF sectors and CFCI Units (above) in nine states alone requires the consolidation of both information and data to provide a cross-check and a holistic understanding of program progress and gaps. It is recommended that a foreign focal person with a broad and extensive program and management experience be appointed for the last two years of the Child Friendly Community Initiative. The main role and responsibility of this person is to provide leadership in the phase out stage of the program, provide technical support and oversight to CFCI Units, facilitate information flow, document, manage and disseminate information and data of all activities related to the phase-out with all partners; UNICEF sector units, CFCI Units, High Commissioner for Decentralized Government and other potential non-state partners and donors.

Prioritize CFCI communities in service provision and program implementation

\textsuperscript{110} Further discussed below.
A successful program closure ensures that basic services have been met to a certain degree and that communities are equipped to continue advocating for the provision of existing and future basic social service needs. It is recommended that in the next two years, with the anticipated CFCI program closure, sectoral units of UNICEF and its partner ministries consciously target CFCI communities in program implementation and/or that certain slots are allocated for CFCI communities in capacity building training. (example: a) Training of midwives provided by the Ministry of Health in the states must explicitly specify “X” number of participants coming from CFCI communities, b) “X” number of teachers and/or health cadres are assigned in CFCI communities).

**Review and simplification of existing CFCI progress indicators**
The success of the Child Friendly Community Initiative was hinged on accomplishing and maintaining all CFCI progress indicators. This evaluation documents the gaps within the indicators and the (lack of) support and/or services received by CFCI communities, which made it impossible to achieve the target number of Child Friendly Communities. The success of the Child Friendly Village, a precursor to the CFCI was based on achieving simple and basic indicators, examples of which are the provision of social service infrastructures such as schools, health clinics and the provision of school materials. Revising the present CFCI progress indicators to the basics and corresponding with actual activities that are implemented by UNICEF sector units through relevant government ministries will provide a more realistic gauge of success. It is recommended that UNICEF sectoral units review its priorities for the next two years and revise the existing CFCI progress indicators to match activities that will be provided to CFCI communities. Progress indicators from each sector must contain at least three to five basic, achievable and measurable indicators in a span of two years in line with UNICEF and Government priorities per sector. This exercise must be initiated in the national level involving all UNICEF sectoral units. The result of this exercise must be presented in the strategic planning workshop as a key document to work with in moving forward. Read below for more information on the proposed strategic planning workshop.

**Clear goals and objectives for program closure**
Closing a program which has run at various time lengths with uneven distribution of assistance across several states requires clear goals for a smooth transition. Though a number of the exit strategies may be used across all states, it is important to address specific needs of each state according to the stage at which the program is ending. It is recommended that High Commissioner for Decentralized Government’s CFCI representatives, UNICEF, though the M&E unit, the UNICEF/CFCI Focal point at the national level, UNICEF state representatives or acting CFCI focal points, together with the CFCI Units conduct a strategic planning workshop whereby realistic priorities are set for the next two years in light of the program closure. A clear set of common and state specific guidelines must result from the strategic planning workshop in terms of an achievable goal, clear objectives and measureable indicators (indicators may be state specific taking into consideration local/state needs). CFCI Unit’s yearly plans for the next two years must utilize documents produced during this strategic planning workshop. It is further recommended that an independent, external person with no prior links to CFCI and UNICEF facilitate the strategic planning workshop.

**Re-assessment of target beneficiaries for close down**
With the use of the revised indicators, the goals and objectives set out for the next two years and the strategic planning workshop, parameters for the selection of target vulnerable CFCI communities
compared to those that have achieved a certain level of acceptable Child Friendly community status must be delineated. It is recommended that CFCI communities be re-assessed with the most vulnerable communities, which have received no, or minimal support be included and prioritized in the last two years of program support.

Program accountability
Program documentation on the CFCI program closure is essential for UNICEF’s institutional learning. Presently, CFCI Units prepare annual plans and report on a bi-yearly and annual calendar, which is shared with UNICEF’s M&E unit; with no further structured information dissemination to other UNICEF sectors. Having a sense of joint ownership for a collaborative work such as the closure of CFCI requires and open communication amongst UNICEF sectors and constant information flow. Program documentation and accountability should be seen from both UNICEF as an institution and CFCI Units. It is recommended that UNICEF sectoral units be held accountable and report on sector activities conducted in CFCI communities and on CFCI sector specific indicators on a quarterly basis for the next two years. Concurrently, it is recommended that CFCI Units provide progress reports on a quarterly cycle against planned annual activities and indicators to the UNICEF/CFCI focal person and other partners, as presently practiced. Report must include both qualitative and quantitative data gathered in the field. Information received from UNICEF sector units and CFCI Units will be compiled and analyzed for strengths, gaps and weakness with the consolidated report provided to partners for implementation revision/input and improvement for the next reporting cycle.

Handover to state and community structures
Existing government and non-state structures
It must be understood that the exit strategy here is the withdrawal of UNICEF assistance and support from the CFCI Unit as a coordinating unit with the hopes of ideally linking present work with existing responsible government bodies or duty bearers. The next step is to link present work for a possible hand-over should the program cycle end with unfinished work, ideally to duty bearers and/or to non-government organizations in the states or to local community based organizations.111 It is recommended that the appointed UNICEF/CFCI focal person, UNICEF sector units in the state level together with CFCI Units and State Steering Committees conduct a mapping of stakeholders within their states for possible hand-over of CFCI communities for continued work beyond the program cycle of CFCI. Results of this exercise may be used by CDCs for advocacy purposes.

It is further recommended that UNICEF together with the State Steering Committees facilitate discussions for a possible hand-over of pending sectoral activities in CFCI communities to relevant government ministries and identified non-state partners.

Working with mainstreamed CFCI Units
In the more advance states, the CFCI Unit is the main coordinating body for the government’s development work and has been institutionalized. Though this is said to be evident in three states, the role of the CFCI Units have either evolved or expanded. Since the Unit is now a government entity reporting mechanisms fall under government required processes. It is recommended that the assigned UNICEF/CFCI focal point conduct a state specific assessment of the CFCI Unit’s mandate, needs and

111 Also referred to as “non-state actors.”
relate this back to the goals and objectives for the next two years. Should the CFCI Unit’s needs correspond with goals and objectives of the next two years then a yearly plan will be developed to provide technical assistance to the Unit. Available resources, time, technical expertise and completion of a quality program must be taken into consideration in planning for technical support. Examples of such assistance will fall under mapping, exploring and expanding partnerships and linkages for (CFCI) vulnerable communities, strengthening existing reporting and data management systems between the Unit, CDCs, localities (if applicable).

**Capacity building and strengthening of community mechanisms**

It is recommended that in the next two years, CFCI Unit’s focus must be on the following specific areas:

- Training and strengthening community leadership for advocacy work to advocate for community needs with duty-bearers;
- Monitoring and strengthening of community support systems and mechanisms to make certain that infrastructures such as schools, health clinics and equipment such as water pumps, water tanks, and others are maintained and a continue to provide equitable access to services (and social services programs) beyond the end of the CFCI phase out;
- Document and report successful community practices on a quarterly basis.

All recommendations provided above are not meant to be prescriptive. Recommendations are meant to provide a pathway in reaching the ultimate goal of program closure. Variations according to local needs, available state resources; level of community participation and other unforeseen external factors play an important role in the strategy and final product for program closure per state.
### Annex 1: Research Team

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<thead>
<tr>
<th>Name</th>
<th>Designation</th>
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<tbody>
<tr>
<td>Emily Coinco</td>
<td>International Consultant</td>
<td></td>
</tr>
<tr>
<td>Abdelrahman Khalifa</td>
<td>National Consultant</td>
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<tr>
<td>Manal Mohammed Ibraheem</td>
<td>Team Leader</td>
<td>North Kordofan</td>
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<td>Mohammed Ahmed Hamid</td>
<td>Researcher</td>
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<tr>
<td>Shaza Tarig Alshazali</td>
<td>Researcher</td>
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<td>Um-Salama Jabra Ibraheem</td>
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<td>Alzaki Althajer Ali</td>
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<td>Abdulrazig Rahma Mostafa</td>
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<td>Ahmed Khaliel Abb’akar Ahmed</td>
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<td>Mostafa Khalied Mostafa</td>
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<td>Khalid Othman Ahmed Altaieb</td>
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<td>Husien Mohameed Badawoi</td>
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<td>Mohamed Mosa</td>
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<td>Rasha Abdalla Ibrahim</td>
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<td>Amina Mahjoub Ahmed</td>
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<td>Hashiem Husien</td>
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Annex 2: Status Map of State Ranking According to SMC MICS 2002
**Annex 3: CFCI Geographic Focus, Distribution & Coverage of Vulnerable Communities**

**Child Friendly Community Initiative (CFCI): Geographical Focus Distribution and Coverage of Vulnerable Localities and Communities**

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**Annex 4: List of Evaluation Participants**

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Annex 5: CFCI Evaluation Communities

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<td>Armankul</td>
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Annex 6: Sample of CFCI Non-sectoral Activities

- Community Capacity Development and Empowerment:
  - Train 150 locality technical committees members to promote, sustain and expand community collaboration, planning partnerships, effective utilization of resources.
  - 150 locality committees members trained and advocated on CFCI approach in localities namely (Belai, Assalaya and Awahda locality).
- Conduct (4) Communities development Committees(CDCs) training sessions to promote leadership in the development of communities.
  - 160 CDCs members trained and promoted in community capacity and leadership.
  - Training of (6) women groups (150) women of food processing & intermediate technology (10 days).
  - Training of (6) women groups (150) women of food processing & intermediate technology (10 days).
  - 150 women trained and acquired basic knowledge on food processing from (4) CFCI communities namely (2) Abusaida, (2) Alsuntah, (2) Nimry, (2) Azuli, (2) Doro and (2) Demo.

- Capacity Development for CFCI staff and government counterparts:
  - Capacity building for 30 CFCI staff and government counterparts on Emergency Preparedness and Response (EPR).
  - 30 CFCI staff and government counterparts acquired basic knowledge and skills in (EPR).
  - TOT training for CFCI staff and CFCI unit counterparts (WES, Education, CP & health) in assessment and evaluation using KAP methods.
  - (15) CFCI staff and CFCI counterparts trained for KAP analysis.

- Monitoring and Evaluation:
  - Support field visit to supervise and monitor project activities 10 day per month to visit at least five CFCI communities.
  - CFCI project monitored and community development committees (CDCs) supervised in 10 localities namely (Alsalem, Kasa, Edafursen, Rehad abirdi, Assalaya, Baherarab, Buram, Adila, Belai and Awahda).
  - Update the community profile to establish database in collaboration with central bureau of statistics at the state level and localities.
  - 50 community profile updated and data base system established for purpose of planning and development at CFCI unit.

- Support Communities Initiatives:
  - Support 5 communities to establish small scale productive projects (Sarambaga, Amasho, Yara, Nimry and Abusaida).
  - 5 communities namely (Sarambaga, amasho, Yara, Nimry and Abusaida) were supported and established small scale projects and sustain the basic social services.
Annex 7: Selected List of People Interviewed

A complete list of people interviewed is available in the SPMME Unit of UNICEF. UNICEF sectoral staff in Khartoum and UNICEF/CFCI focal points in states, CFCI Coordinators, data analysts and a sample of seconded staff, together with Representatives from the state Ministry of Finance participated key informant interviews.

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<th>State</th>
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Annex 8: Reference


United Nations Department of Economic and Social Affairs (UNDESA). 2013. Empowerment. What does it mean to you?


Websites