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2023 | Evaluation report
SYNTHESIS

Iraq

Evaluation of "Emergency
initiatives for the most
vulnerable people in Iraq"

(2017 - 2020)
(AID 011048, 011267)



This independent evaluation was commissioned by Office III by the Directorate General for Development Cooperation of the Ministry of Foreign Affairs and International Cooperation to the company Think Global SRL through a public award procedure pursuant to Article 36 of the Code of Public Contracts.

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The views expressed in this document represent the views of the assessors and do not necessarily coincide with those of the client.

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1. Framework of the Evaluation Activity

The activity at the origin of this report is aimed at assessing according to DAC/OECD criteria the impact of two Emergency Initiatives funded by DGCS, managed by AICS and implemented by OSC, held in Iraq between 2017 and 2020.

Specifically, these are :

- AID 11048: "Emergency Programme in response to the Mosul crisis"
- AID 11267: "Emergency initiative in favor of displaced persons, refugees and host communities in the Autonomous Region of Kurdistan and surrounding areas"

The projects funded through the Initiatives have been implemented in the framework of the broader humanitarian response coordinated through the sector Clusters; The main activity sectors were:

- Health
- Education

The 11048 Program, with a budget of € 1,773,682.00 (€ 435,000 for each project) took place from July 2017 to the end of October 2018. The areas of operations were the Nineveh Governorate for the activities of the Education and Health sector, the Dohuk Governorate for Health initiatives, the Erbil Governorate in the Education sector and the Sulaymaniyah Governorate in the Health sector.

Within the framework of the 11048 Program, two projects have been implemented for a total commitment of € 870,000 in the Health Sector (OSC AISPO and UPP) and two projects in the Education Sector (OSC COOPI and INTERSOS) for a commitment of € 860,000.

Programme 11267 ran from September 2018 to the end of September 2020.

The activities related to the Health sector were implemented in the Governorates of Dohuk and Nineveh, the activities related to the Education sector were carried out in the Governorate of Nineveh.

The financial allocation in this case was € 1,220,000 for each of the two sectors, For a total of 4 projects carried out, with the CSOs AISPO and UPP implementing actions in the field of Health and PIN and INTERSOS in Education

The activities are to be considered in substantial continuity with what has been achieved during the AID 11048 Program, of which they represent the continuation in a rapidly evolving context.

The initiative had an approach aimed at promoting territorial and community recovery; through the reactivation of public services that benefit the entire population without distinction regardless of income, status (refugee / displaced / returned); therefore aiming to support local authorities in the perspective of the H-D Nexus with the prospect of facilitating the transition to medium-term initiatives focused on stabilization and development. The initiative aimed to improve the accessibility, inclusiveness and quality of basic education and health services for Syrian refugees, Iraqi displaced persons and host communities, paying particular attention to the most vulnerable groups, in particular ethno-religious minorities, women, children and persons with disabilities.

The period of implementation of the two programs coincided with a structural change of the humanitarian crisis in the area and, in particular, in Iraqi Kurdistan, going through a first phase of assistance to populations fleeing from ISIS to a phase of support for the return of

the same populations in the territories of origin and, at the same time, to support the reintegration of populations settled in the areas of intervention following the fall of ISIS and to the people who remain Displaced.

The evaluation therefore considered the DAC/OECD criteria for the analysis of the implemented projects, while focusing on the long-term impact of the interventions, also considering the current strategic structure of the Italian Cooperation in the area of intervention. Following the approval of the Launch Report (April 2023), the data collection activity was launched, carried out through analysis of data from the documentation made available by AICS and the implementing CSOs, desk review of the sector literature and targeted interviews with key stakeholders, Focus Group Discussions with groups of beneficiaries, carried out partly remotely and partly on the occasion of the field mission that took place from 17 to 27 May 2023, during which primary data was collected to define the evidence that emerged already during the documentary analysis phase.

For each of the 5 criteria identified, the evidence that emerged during the survey activities was reported. Based on the results of the analysis, Lessons Learned, Conclusions, Recommendations were then identified and elaborated, organizing them according to the evaluation criteria and codifying them univocally, so each lesson learned corresponds to a conclusion that originates a recommendation

1.1 Objectives of the Evaluation

The purpose of this assignment is to provide an external and independent evaluation of the activities related to the AID 11048 "Emergency Programme in Response to the Mosul Crisis" and AID 11267 "Emergency Initiative for Displaced Persons, Refugees and Host Communities in the Autonomous Region of Iraqi Kurdistan and Neighbouring Areas"

The Evaluation, also considering the output indicators related to each project activity, focused on the analysis of the impact generated by the projects under examination, and specifically:

- Observed changes in the social context of reference (IDPs, returnees and host communities)
- Triggered changes in the capacity of local authorities to take charge of activities supported by projects
- Unexpected or unexpected changes, triggered directly or indirectly by projects and their activities
- Impact of context fickleness in project execution

The impact assessment was based on the examination of cause-effect links demonstrable through qualitative and quantitative analysis

1.2 Scope and Object of the Assessment

The scope of the analysis included the evaluation of the main project sectors of the portfolio related to AID interventions 11048 and 11267:

- Health
- Education

The evaluation exercise analyzed the extent to which the action of the Italian Cooperation has influenced national policies, strategies and programmes, contributing to the achievement of the SDGs indicated in the project documentation:

- Goal 1 – Target 3: Implement adequate social protection systems and measures at national level for all, including plans, and by 2030 achieve substantial coverage of the poor and vulnerable.
- Goal 11 – Target 1: Ensure access to adequate, safe and affordable housing and basic services for all.
- Goal 16 – Target A: Strengthen relevant national institutions, including through international cooperation, to build capacity at all levels, particularly in developing countries, to prevent violence and fight terrorism and crime.

Initiatives were evaluated against the following DAC/OECD criteria:

- Relevance
- Coherence and complementarity
- Effectiveness
- Efficiency
- Impact

It also considered how and to what extent the initiatives have changed the context in a direction of greater equity and social justice or have influenced cross-cutting issues (including human rights, gender equality, environment and disability).

2. Framework of Initiatives

2.1 AID 11048 – Description and Objectives of the initiative

Project title: Emergency Programme in Support of the Mosul Crisis

General Objective: Support to the most vulnerable displaced populations from Mosul, the Nineveh plain and host communities through the rehabilitation and strengthening of basic social, health and educational services, promoting and facilitating the return of displaced persons to their communities of origin, where security conditions allow

Sectors of Intervention: Education and Health

Executor CSOs:

- Health Sector: AISPO UPP
- Education Sector: INTERSOS COOPI

Direct Management: Interventions in the health sector and emergency management in the governorates of Dohuk, Soulemania and Erbil.

The program ran from July 2017 to the end of October 2018. The areas of operations were Nineveh Governorate for Education and Health activities, Dohuk Governorate for Health initiatives, Erbil Governorate for Education and Sulemania Governorate in Health sector. The initiative aimed to improve the accessibility, inclusiveness and quality of basic education and health services for Syrian refugees, Iraqi displaced persons and host communities, paying particular attention to the most vulnerable groups, in particular ethno-religious minorities, women, children and persons with disabilities.

2.2 AID 11267 – Description and Objectives of the Initiative

General Objective: To improve the living conditions of displaced Iraqis, Syrian refugees, returnees and host communities in the governorates of northern Iraq most affected by the humanitarian crisis that began in June 2014, promoting and facilitating the return of displaced persons to their communities of origin, where security conditions allow.

Sectors of Intervention: Education and Health

OSC Performers:

- Health Sector: AISPO UPP
- Education Sector: INTERSOS PIN

Direct Management: substantially not implemented.

The program ran from September 2018 to the end of September 2020. The activities related to the Health sector were implemented in the Governorates of Dohuk and Nineveh, the activities related to the Education sector were carried out in the Governorate of Nineveh. The activities are to be considered in substantial continuity with what has been achieved during the AID 11048 Program, of which they represent the continuation in a rapidly evolving context.

3. Results of the Analysis

3.1.1 RELEVANCE

The assessment of relevance shall cover the extent to which the actions and measures implemented are aligned with the needs identified when drafting the programme proposal. The evaluation also takes into account the relevance of the different projects in the wider context of the humanitarian response in the reference area. In addition to the above, it is also considered the relevance of the Initiatives in terms of financial allocation compared to the extent of the humanitarian response in the reference sectors.

Health Sector

The Health sector is one of the two sectors supported by the Initiative.

The implementing CSOs were AISPO in Dohuk Governorate and UPP in Nineveh and Erbil Governorates.

With regard to the needs assessment, it should be noted that in both cases the proposing CSOs can be considered as actors most devoted to the implementation of long-term and development initiatives, not being structured according to the canons of coordinated emergency response; however, their strategic positioning vis-à-vis local authorities and the experience gained, Also in the context of the humanitarian response, in the area of implementation, they were found to be characterizing elements with regard to the ability to intercept needs not covered by other interventions and to coordinate effectively with local actors of reference for the health sector. In accordance with the procedure, it was not necessary for the proposing CSOs to proceed with the elaboration of a baseline of reference, using, as regards the identification of the pool of beneficiaries, the data made available by the Cluster Lead Agencies.

Within the field of intervention, Protection and in particular the psychosocial support (PSS) has been considered as crosscutting theme within project activities.

Support for pre-existing structures and strengthening the local response capacity of local departments to a first analysis could fall within the scope of development cooperation rather than in the context of the emergency response, however the framing of actions in the context of the humanitarian response is justified by:

- 1) The DoHs have been integrated in Health Cluster and determine its strategic and operational orientation in defining intervention priorities¹
- 2) Between 2016 and 2017 it is estimated that between 10% and 20% of users of primary health services (PHC) and Emergency-Urgency are attributable to the category of refugees or returnees²

¹ Health Cluster Annual Report 2017 – section 1: <https://reliefweb.int/report/iraq/health-cluster-iraq-annual-report-2017>

² .AISPO – Complete Proposal AID 11048 – Section "Context Analysis" page 4

Education Sector

The projects funded by the initiatives have been:

AID 11048

- INTERSOS: Improve access to and quality of basic education services for 3,500 children aged 6-14 through the rehabilitation of 10 primary schools, the provision of school equipment and the training of teaching staff
- COOPI: Promote access for students between 6 and 12 years of age affected by the conflict to inclusive formal education services, in accessible and protected environments, in urban areas of the sub-district of Al Qayyarah, – Nineveh Governorate.

AID 11267

- INTERSOS: strengthen the quality and offer of educational services for vulnerable populations of Ninewa Governorate, Telafar district.
- PIN: improve the education of young people of school age by combating early school leaving and providing psychosocial support to girls and boys affected by the conflict in Iraq.

All project proposals include:

- Infrastructural components for the improvement or recovery of school spaces
- Training and capacitation components of local staff
- Components of psychosocial protection and support

From the point of view of responding to the needs expressed by the supported communities, it is considered appropriate to underline that all the CSOs involved in the response are an integral part of the Education Cluster. In particular, PIN and INTERSOS, in the years related to the implementations carried out, have held coordination roles in the territorial sub-clusters, coordinating the analysis of needs, assessments and identification of priorities³. Moreover, as for the health sector, also for the Education sector, the Ministry of Education and the Directorates of Education are active members of the cluster and direct its operations and intervention strategy.

Directly managed activities

The directly managed activities were carried out only within the framework of the AID 11048 Initiative, both in support of existing projects on the identification of specific needs in the final phase of the project⁴ and in the context of the response to the Iran-Iraq earthquake of 2017 at the request of the Joint Crisis Coordination Center⁵. The activities, although of negligible importance on a financial level, have nevertheless responded to specific needs expressed mainly by local authorities and stakeholders of the program (DoH, DoE), in this sense they are fully relevant with respect to the needs identified and in full synergy with the projects in place.

³ <https://reliefweb.int/report/iraq/iraq-education-cluster-dashboard-december-2017>

⁴ Determines to contract – AICS Amman 01/10/2018 Medical Equipment Dohuk and Medium Distribution Ashti CAmp

⁵ 12/12/2017 – ref 5687 KRI Ministry of Interior – Request for support – Addressed to the Italian Consulate in Erbil

LESSONS LEARNED

- **Identification of needs**

The AICS Offices in Amman and the Erbil Program Office have not systematically availed themselves of the right to carry out missions aimed at supporting the identification of needs, not providing them in the budget estimate for the Initiatives, trusting in fact in the capacity of the individual CSOs or in the Assessments conducted at the Cluster level without considering it appropriate to introduce a second level of verification.

Considering that some of the implementing CSOs have played coordination and guidance roles in the thematic clusters in the reference areas, which determine the decision-making regarding sectors and areas of intervention, an additional technical adequacy check step conducted independently by AICS could have been useful.

- **Evaluation of Project Proposals**

The selection of proposals was carried out on the basis of the standard evaluation grid, with minor adaptations made directly by the Programme Office; in this case some elements potentially useful to determine the selection of project proposals, including the adoption of standardized monitoring matrices, were the subject of the only evaluation conducted by the Program Office on the basis of the ability of organizations to demonstrate an adequate monitoring capacity.

- **Sectors of Intervention and Internationalization**

The limitations due to the procedural peculiarity and the need for the use of Italian as a vehicular language, in fact limits participation only to Italian CSOs, so much so that the only Project (relating to the 11267 Program) carried out by the Czech CSO PIN required the administrative support of the Italian CSO CESVI to ensure, as far as possible, compliance with AICS procedures; consequently, there is a risk of discouraging the participation of international actors that could bring added value and innovation to Emergency Initiatives.

CONCLUSIONS

- **Identification of needs**

According to the guidelines for the implementation of AICS emergency initiatives, the identification of needs is delegated to the sectoral clusters and, when drafting the project proposal, to the proposing CSOs. In a context where the cluster approach is fully implemented, this feature is not an obstacle or criticality. However, much depends on the functioning mechanisms of the reference Clusters. AICS, through the Erbil Program Office, has had regular discussions with the CSOs, also in the identification of the sectors of intervention; however, it has not been able to support punctual and independent Assessment activities regarding the identification of needs, especially with regard to the sectors of intervention (Health) less subject to a fully structured and coordinated response by the reference Cluster, also possibly resorting to the use of external and independent experts. This potential criticality is mitigated by the fact that until December 2022 the Sectoral Clusters have guaranteed the conduct and regular updating of needs assessments; however, with the closure of the Clusters, the current coordination structure may require a greater involvement of AICS in the identification of needs, in order to be able to verify and support both implementing CSOs and institutional stakeholders more effectively.

- **Evaluation of Project Proposals**

The evaluation grid of the project proposals is standardized and the weight of the criteria can be partially adapted to the operational context. Ultimately, the criteria for evaluating proposals do not currently have a margin of adaptability that would allow an evaluation that is always consistent with the operational context.

- **Sectors of Intervention and Internationalization**

The definition of the sectors of intervention of the Emergency Initiatives is the result of several factors, which include, in addition to the identification of needs, considerations relating to the technical, operational and organizational capacity of the potentially eligible CSOs present in the theater of operations. Emergency Response is generally *needs-oriented*, however the current procedural structure of AICS limits the audience of potential executing bodies only to CSOs able to use Italian as a vehicular language, thus limiting the sectors of intervention to those covered by Italian CSOs or belonging to networks that include Italian CSOs; the involvement of CESVI by PIN in the implementation of project 11267 is proof of this.

RECOMMENDATIONS

- **Identification of needs**

In order to be able to more contribute to the identification of needs and the definition of intervention strategies, it is suggested to strengthen AICS capacity to make use the technical contribution of experts inside or outside the Agency, in order to be able to carry out, where necessary, support to the reference users in the identification phase of needs and establish more stable relationships with Clusters Technical Teams, also considering the fact that the sectors of intervention related to the evaluated initiatives are basically two.

- **Evaluation of Project Proposals**

It is recommended to provide for the possibility of developing evaluation grids of project proposals adapted to the reference context, developing at central level an univocal and codified standard that is flexible and broad enough to cover all cases that contribute to define the adequacy of a project proposal in the context of reference.

- **Sectors of Intervention and Internationalization**

Given the plurality of actors participating in the emergency response, it would be desirable to adopt a system of procedures and formats similar to those proposed by the main international donors (European Union) using a vehicular language that can be used realistically by international actors.

3.1.2 COHERENCE AND COMPLEMENTARITY

Health Sector

In terms of coherence, the activities of the projects are substantially in line with similar initiatives implemented in the various governorates by comparable realities.

In particular, the following points should be noted:

- The components of PSS and Mental Health respond, for both programs, to a logic of "Gap Filling" starting from the Assessments conducted by the Health Cluster and included in the humanitarian response plan (HRP).

- The support components for the emergency facilities in the area (Zakho and Dohuk), as far as AISPO is concerned, are fully consistent with the positioning of the Organization in the area and with the mandate of the Organization.
- The Organizations (UPP and AISPO) engaged in the health sector, at the time of drafting the project proposals relating to the AID 11048 Program, were strongly rooted in the implementation areas and engaged in the implementation of emergency response projects, as reported in the project proposals presented⁶.

AISPO, in the Governorate of Dohuk, has implemented an integrated response program to support the emergency health services of the Governorate, in particular AID 11048 has directly supported:

- The realization of an analysis laboratory at the Emergency Hospital Zakho.
- Support to the Dohuk emergency services centre through the strengthening of the 122 emergency number management centre.

The same services were supported in complementary components through several projects launched between 2015 and 2017, some of which were funded by AICS.

About 11267 program, AISPO has implemented a project more focused on mental health, training and capacity building of the district's health personnel, in discontinuity with the AICS 11048 program, but consistent with the needs identified in a subsequent phase of the emergency response, more aimed at supporting and accompanying refugees and returnees at the beginning of the reintegration and return phase, strengthening the component of psychosocial support and referrals to mental health services for taking care of patients, mainly minors or vulnerable categories, residing in the camps or returning to their areas of origin, in line with the HRP 2018⁷.

UPP carried out the activities related to the 11048 programs mainly in the Governorate of Nineveh and Erbil, providing assistance to the population residing in the camps, it must be considered that a significant part of the residents of the Ashti camp (KRI), came from the areas around Mosul. In 2016-17 the Nineveh DoH operated in the Dohuk area, as the area around Mosul was being liberated, therefore the activities implemented by UPP took place mainly in the governorates of Nineveh and Erbil, focusing the intervention in the district of Bashiqa. The activities follow exactly what is foreseen by the HRP 2016-17 in terms of "first line Response" and "second line Response", focusing on reproductive and maternal and child health, as well as psychosocial support (falling within the Protection sector) and mental health⁸. The 11267 Program (Salamtak), immediately following, substantially replicated the previous intervention, adding, consistently with the reference HRP, ⁹in a structured way the components of mental health. The Salamtak Project, the strengthening of the relationship with the local DoH and the proposal of basic services and training through the use of the Bashiqa Hub (in addition to Mosul) have formed the backbone of subsequent UPP implementations in the area, in fact the Salamtak project, with minimal modifications, has been replicated on an annual basis in the following years and is still active and financed by

⁶ AISPO AID 10402 – 10272 – 10739 – 10548 - EU MADAD – DG ECHO - WHO; UPP: "Darna" – UNHCR – AICS "Zhyan" -

⁷ HRP Executive Summary 2018 - Health- page 20: <https://reliefweb.int/report/iraq/iraq-2018-humanitarian-response-plan-advance-executive-summary-enar>

⁸ UPP 11048 Final Proposal – page 9

⁹ HRP Executive Summary 2018 - Health- page 20: <https://reliefweb.int/report/iraq/iraq-2018-humanitarian-response-plan-advance-executive-summary-enar>

AICS emergency funds, integrating WASH components for the improvement of water services of health facilities in the area in consortium with Solidarités International¹⁰.

Education Sector

Also for the education sector, there is a substantial consistency between what has been achieved during the two initiatives being evaluated and what is envisaged by the HRP of the reference years.

In particular, it should be emphasized the role played by the CSOs in reference clusters, both in terms of identifying needs and in terms of conducting multi-sector assessments (Multi Sector Initial Rapid Assessment – MIRA).

For example, INTERSOS coordinated the initial assessments for the Education cluster in the governorate of Nineveh in 2017 (close to the drafting of the project proposal).¹¹

Within the project proposals of INTERSOS it is evident the consistency of the design system with the other projects carried out by the organization, especially in terms of Protection, presence in the fields and integration of the components of PSS and Protection. COOPI, despite having a historical presence in Iraq, has resumed its activities in the country through the Initiative 11048, focused on infrastructural interventions in support of the Nineveh DoE.

PIN, OSC that implemented the project in the framework of 11267 Initiative, is a member of the Strategic Advisory Group of the Education Cluster and was co-chair of the territorial Education Cluster of Dohuk¹². PIN has been active in Iraq since 2015 and, as part of the emergency response, has carried out projects in the Education sector in the areas of implementation since 2015. The peculiarity of the PIN project proposal is to use CESVI to ensure the reporting of activities in the AICS format¹³. CESVI is in fact a member of the same international network but not yet qualified to work in Kurdistan Iraq at the time of drafting the project proposal. This aspect emerges from the analysis of subsequent projects, in which CESVI, having the necessary authorizations, has helped to ensure the commitment in the Education sector¹⁴ after the conclusion of the project carried out by PIN within the 11267 program. From the point of view of the involvement of local institutional stakeholders, it should be kept in mind that the DoE are part of the education cluster, therefore the projects appear to be in full coherence with the needs identified and shared at the cluster level. As for the Health sector, Protection and PSS components have been integrated into the project proposals, in line with the sectoral recommendations relating to the reference HRPs¹⁵.

Directly managed activities

The directly managed activities, as noted in the section on relevance and relevance, are not the result of ex-ante planning, but are intended to respond to needs identified during the implementation of the programs.

With regard to complementarity, it should be noted that, in the final stages of the implementation of the program, the purchase and distribution of devices, consumables and

¹⁰ <https://www.unponteper.it/it/projects/salamtak-la-tua-salute/>

¹¹ <https://assessments.hpc.tools/assessment/8b5f48f9-a1d6-4320-a937-af5ba10a223d>

¹² <https://www.humanitarianresponse.info/en/operations/iraq/document/education-cluster-sag-expression-interest-pin>

¹³ PIN Annex A1 – Proposal Progettual – page 3

¹⁴ <https://www.cesvi.eu/news/cesvi-launches-the-new-zero-in-condotta-project/>

¹⁵ HRP 2018 – Executive Summary page 25

medical equipment were carried out, to be allocated to local health services strongly connected to projects included in 11048 program.

LESSONS LEARNED

- **Connection with Development Cooperation Projects**

There were partial shortcomings in the coordination mechanism between the Amman office (Beirut for the 11048 Programme) and the Erbil Programme Office, which apparently was not always involved in the decision-making process aimed at defining the strategies and themes of intervention. It must also be considered that at the time of implementation the development component was entrusted to the Iraq Task Force based in Rome. Although after the Initiatives evaluated, it was observed that some development initiatives have substantially covered the same themes and sectors of intervention simultaneously with the emergency initiatives, which is not in itself a critical issue, even if it implies the use of different programmatic approaches in responding to the same needs in comparable areas.

- **Transition, Post-Emergency Phase and Exit Strategy**

The sectors of intervention related to the Initiatives evaluated do not appear to have been included in the strategic programming relating to LRRD, but have nevertheless been included in subsequent Development Initiatives; however, some of the projects characterized by a multi-year thematic and geographical continuity, at the moment do not have an adequate *exit strategy* or concrete prospects of continuity, with the risk of not capitalizing on the results obtained by the projects financed by the Initiatives in question.

CONCLUSIONS

- **Connection with Development Cooperation Projects**

Protracted emergency scenarios such as the Iraqi one, imply the simultaneous nature of different types of projects, both emergency and development interventions, also given the recent inclusion of Iraq as a priority country for Development Initiatives. During the evaluation, however, no complementary strategies were adopted by the Amman office, on the contrary a certain "disconnect" emerged between the current Emergency Initiatives and the implementation of the so-called "Affidato", ¹⁶with a real risk of overlapping interventions, considering that some of the issues envisaged by the "Affidato" calls, elaborated by the Amman office, focus on the same sectors included in the Emergency Initiatives¹⁷.

- **Transition, Post-Emergency Phase and Exit Strategy**

With regard to the organizations most oriented to the response to the Emergency and structured in this sense (INTERSOS, COOPI), it emerges a lack of a clear strategy of approach to the transition in relation to the sectors of intervention of the Initiatives evaluated (Health and Education), despite being explicitly provided for by the guidelines¹⁸ through the definition of LRRD (Linking Relief and Rehabilitation to Development), which falls under the broader definition of Nexus Humanitarian-Development. At present, the LRRD Initiatives are oriented towards issues such as Protection and GBV, considered as priorities¹⁹ even in a

¹⁶ Interview with AICS Office in Erbil 25/05/2023

¹⁷ "Programme for resilience and return to Nineveh governorate through an integrated approach in the educational, health and livelihood sectors" (AID 012020/01/3) - 2022

¹⁸ Linee Guide for Initiatives BHumanitarian Aid – Sec. 1

¹⁹ <https://amman.aics.gov.it/home-ita/opportunita/bandi/>

post-emergency phase as they belong to two of the particularly critical sectors also following the closure of the Clusters. Health and Education initiatives will not be further supported in the context of Emergency Initiatives,²⁰ therefore CSOs engaged in the humanitarian response are required to develop a long-term sustainability strategy or progressive disengagement, which is found to be weak with regard to the Initiatives evaluated.

RECOMMENDATIONS

- **Connection with Development Cooperation Projects**

It is recommended to consider the Humanitarian-Development nexus in the elaboration of regional and country strategies, ensuring coherence and sectoral continuity between Emergency Response Initiatives, LRRD and Development Initiatives. To achieve this result, it would be necessary to strengthen coordination activities, considering that the existence of a detached Programme Office must represent an added value for the quality of interventions and the development of related strategies.

- **Transition, Post-Emergency Phase and Exit Strategy**

It is suggested to standardize the transition phase, especially for CSOs more structured and equipped for emergency response, weaker in attitude in territorial roots, through the adoption of an approach that encourages a greater operational involvement of local partners in Emergency projects and that systematically provides for the inclusion, in an operational function, of local partners in LRRD projects. or *Early Recovery*, in order to facilitate the possible disengagement of CSOs in favor of strengthening local capacity, especially in contexts, such as Iraq, particularly advanced from the point of view of local management and technical capacities.

3.1.3 EFFECTIVENESS

The general approach of emergency projects does not provide for the adoption of standardized outcome indicators associated with the programmatic objectives, limiting itself to the use of indicators relating only to the outputs of activities and references relating to the achievement of project targets, including the possibility of not using data collection to form a baseline to measure the achievement of objectives²¹. This setting, while greatly simplifying the management of monitoring activities, conditions their setting, linking them directly to the implementation of activities. It should be noted that, with the exception of activities defined as "first emergency response", some of the main international donors, for emergency response projects planned on an annual basis,²² adopt sets of coded indicators and require the implementing entities to adopt a detailed monitoring plan based on the adoption of the aforementioned indicators²³²⁴. The effectiveness of the interventions was therefore evaluated on the basis of the activities carried out consistently with the provisions of the project proposals, taking into account any changes and additions that may occur.

²⁰ Interview with AICS 25/05/2023

²¹ Guidelines for Bilateral Humanitarian Aid Initiatives 2016 – Sec. 7 par 12.

²² DG ECHO HIP – USAID DRL

²³ <https://www.state.gov/drl-guide-to-program-monitoring-and-evaluation/>

²⁴ <https://www.dgecho-partners-helpdesk.eu/ngo/actions-implementation/monitoring-and-evaluation>

Health Sector

The projects implemented under the initiatives have substantially achieved their output targets, as widely reported in the final programme reports and project reports carried out by NGOs.

Specifically, with regard to the interventions managed by AISPO in the Governorate of Dohuk, the following is noted:

- As part of the activities envisaged by 11048 project, the infrastructural projects carried out at the Zakho Emergency Hospital were found to be fully operational and fully taken over by the local hospital management. The laboratory has the capacity to carry out 100 daily analyzes, both at the service of the departments and at the service of the resident population.
- The project also provided for the training of medical, nursing and support staff in accordance with the provisions of the project proposal.
- The Emergency Services of Dohuk (122) have been strengthened within an integrated program of equipment and training carried out by AISPO also thanks to the contribution of the 11048 project.
- In the framework of the interventions carried out in 11267 program, more focused on mental health, it is noted that training, outreach and referral activities have been correctly implemented, despite the last phase of the project was heavily affected by the COVID 19 pandemic.
- The undersizing of the Mental Health Center of Duhok, called to cover the needs of all neighboring districts, has affected the response capacity in terms of referrals and follow-ups, especially in coordination with the outreach activities carried out also by other actors in the IDP camps present in the area²⁵.

With regard to the interventions carried out by UPP, the following should be noted:

- The multipurpose center of Bashiqa was built and equipped, in support of the local DoH and dedicated mainly to reproductive, maternal and child health.
- The center, which is to be considered as a hub for UPP activities in the area, has also been at the center of participation and community-awareness activities, psychosocial support and training of operators, as well as a reference for the outreach activities conducted in the camps.
- During the project included in the 11267 Initiative, the activities were substantially replicated in continuity with the previous project, strengthening the psychosocial support and mental health component, in coordination with the Nineveh DoH, Bashiqa detachment.

²⁵ Perception Detected in the course of the focus group conducted at the Duhok Mental Health Center on 23/05/2023

Education Sector

As in the health sector, projects in the education sector have largely achieved their objectives.

For both initiatives the design model was the same, namely:

- Rehabilitation and improvement of school buildings
- Distribution of School Kits
- Training of Teachers and Staff on protection issues and referral mechanisms
- Implementation of protection activities and referrals to support target communities

The design approach was determined by the education cluster and aimed to cover needs identified during the Assessments conducted during the drafting of the HRPs.

During the projects included in the 11048 Initiative, INTERSOS proceeded with the rehabilitation of 10 schools between Nimrod and Qayaara, to which must be added the 8 schools rehabilitated in the Telafar area during the 11267 Initiative.

PIN, during the 11267 initiative, adopted the same project model, focusing on 5 schools in the districts of Mosul, Tilkaif and Hamdiya

At the same time as rehabilitation, all the projects mentioned above, the PTA (Parent s and Teachers Committees) were created, trained and followed up , in accordance with the recommendations of the reference cluster.

It is an exception to the design structure presented so far as what has been carried out by COOPI in the Qayaara area within the 11048 Initiative.

In fact, in this case, 4 prefabricated school blocks were installed, equipped and commissioned, made through the positioning of containers.

However, the decision to install residential containers permanently, while meeting immediate needs, proved to be counterproductive from the point of view of the takeover of the facilities by the local DoE.

From this point of view, to meet immediate space needs, also given the reduced financial resources, it would have been possible to opt for the installation of temporary and removable structures, given that the school buildings were temporarily unusable and, at the moment present, the local DoE has not expressed any intention to rehabilitate the existing masonry buildings as the needs relating to school spaces are be covered by the structures carried out by the project in question²⁶.

Directly managed activities

Regarding directly managed activities, it was judged not relevant to evaluate the effectiveness of the 4 interventions carried out in 11048 program, due to the fact that they can be considered as one-off activities, realized upon request of local stakeholders without any follow up activity on this subject.

²⁶ Interview with COOPI's Coordination Team in Erbil – 22/05/2023

LESSONS LEARNED

- **System of Indicators**

The CSOs, having completed the projects related to the initiative, monitored, in accordance with the guidelines²⁷, only the *output* indicators related to the activities, not being able to measure the impact on the supported communities through outcome and change indicators. This, considering that some of the projects have been repeated and refinanced in the same areas for years, represents a missed opportunity to measure the real impact of the Initiatives.

- **Monitoring Strategies**

The failure to adopt a standardized monitoring system in methodology and tools, makes the analysis of the real effectiveness of the projects more uncertain, based only on the project progress and the achievement of the objectives related to the realization of the activities.

CONCLUSIONS

- **System of Indicators**

At present, in accordance with the guidelines, the system of indicators used is mainly linked to the implementation of the activities envisaged by the project proposals, they are therefore to be considered as indicators of achievement of the outputs of activities and achievement of the target of beneficiaries envisaged. AICS, for Emergency Initiatives, does not require the adoption of Outcome Indicators referable to International Standards recognized by the humanitarian community, however some institutional donors that provide for the mandatory adoption of codified and standardized sets of indicators.

- **Monitoring Strategies**

The monitoring system currently required by the guidelines is essentially linked to the progress of the activities, does not provide for specific data collection methodologies and does not identify specific tools. The only action explicitly provided for by the guidelines is to monitor the progress of the activities and the achievement of the Output Indicators of the activities themselves, which determine the achievement of the project objectives. Some of the most structured CSOs involved in response (PIN, INTERSOS), with dedicated internal functions and an independent monitoring system, have nevertheless carried out structured project monitoring actions.

RECOMMENDATIONS

- **System of Indicators**

It is recommended to adopt a codified system of *outcome* indicators adapted to the characteristics of emergency interventions, which can be included in standard project formats, developed from the sets of indicators currently in use for some of the main donors²⁸. This point is all the more important the more the interventions are similar to medium-term, Early Recovery or transitional interventions.

²⁷ LINES GUIDE FOR BILATERAL HUMANITARIAN AID INITIATIVES ed. 2016: https://www.aics.gov.it/wp-content/uploads/2016/10/Aiuto_Umanitario_Linee-Guida_Bilaterali_AICS.pdf

²⁸ USAID DRL: <https://usaidlearninglab.org/monitoring/monitoring-toolkit>

- **Monitoring Strategies**

It is considered necessary to suggest introducing the mandatory use of a uniquely codified and uniform monitoring system by the implementing CSOs. The system should be complete with methodological references related to data collection, analysis and processing, providing dedicated roles and standardized tools. Alternatively, a monitoring system based on codified and unambiguous indicators should be developed and included in project management formats.

3.1.4 EFFICIENCY

Health Sector

In accordance with AICS guidelines, indicators referring to this type of outcome have not been included in any of the projects analyzed, therefore the evaluation of the efficiency of the Initiatives is essentially based on the analysis of synergies aimed at minimizing duplication and optimizing the integrated response.

From this point of view, similarly to what has been observed with regard to the Coherence of Initiatives, the role of the reference Cluster in identifying priorities is clearly aimed at avoiding duplication and overlapping.

As for the projects implemented by AISPO, focused on similar but non-overlapping themes, no observations emerge.

With regard to the projects implemented by UPP, on the other hand, a substantial project continuity emerged during the survey activity; In essence, projects 11048 and 11267 cover the same sector, insist in the same areas, involve the same local stakeholders, with minimal differences due to the inclusion of additional components or the strengthening of certain components in the different projects.

This observation derives from the fact that, even for subsequent implementations, the projects are substantially replicated²⁹.

Education Sector

Similarly to what was observed for the Health sector, the projects supported by the two Initiatives evaluated are, for costs incurred and beneficiaries achieved, the average of similar initiatives implemented in adjacent areas by comparable organizations³⁰.

The fact that the projects carried out are standardized according to the criteria dictated by the Education Cluster, means that any design inefficiencies are not among the risk factors.

In essence, the "project package" promoted by the Education Cluster is standardized and proposed, with minimal adjustments due to the context of operations, by all donors involved in emergency response in the reference sector.

From this point of view, once again, the exception is the project relating to the Initiative 11048 implemented by COOPI, which although not substantially different from other similar projects, had a completely different approach to the infrastructure component, with an

²⁹ SALAMTAK 1-2-3-4, all funded through Emergency initiatives managed by AICS between 2017 and 2023

³⁰ https://reliefweb.int/report/iraq/iraq-education-cluster-mosul-crisis-response-education-dashboard-08-jan-2017?_gl=1*v8xz8j*_ga*MTU3NDY2MDg4NS4xNjg1NjE2MTA3*_ga_E60ZNX2F68*MTY4Njc0ODcyNi40LjEuMTY4Njc0ODcyNy4yMC4wLjA.

investment for the installation of prefabricated school modules (€ 184,000)³¹ much higher than the costs of rehabilitation of existing buildings incurred within the same program by INTERSOS, equal to about € 135,000, ³²despite having a similar ratio with regard to the ratio between Activity Areas, Personnel and Management Costs.

Directly managed activities

With regard to directly managed activities, it was judged not relevant to assess the efficiency of the 4 interventions carried out.

LESSONS LEARNED

- **Project Replication**

The fact that some projects have been replicated in the same areas and with similar activities by the same actors has had as a first consequence an "*overprocessing*", defined as the reiteration of processes of writing and presenting substantially identical project proposals, on an annual basis. This, in addition to implying an additional workload as well as the risk of a blockage of activities due to any contingent delays in selection and contracting activities, has potentially prevented the identification of recurring cost optimization strategies necessary, for example, for the operation of the centers supported by the projects or to prevent the rotation of strategic personnel for their implementation.

CONCLUSIONS

- **Project Replication**

Some of the projects analyzed in the context of the Evaluated Initiatives (UPPs), including subsequent implementations, can be considered as substantially identical projects incidents in the same areas, involving the same *stakeholders* and responding to the same needs, typical of a protracted emergency. Some of these projects have reached the fourth edition with minimal changes related to the sectors of activity and some additional components included in subsequent re-editions. Considering the existence of needs and the rooting of CSOs in the territory, the replication of the activities financed by subsequent initiatives has implied over the years the replication of writing, evaluation and assignment activities, requiring the use of financial and operational resources by the proposing CSOs and by AICS, with the real risk of interrupting project continuities responding to real needs due to, for example, formal errors in the submission of proposals³³.

RECOMMENDATIONS

- **Project Replication**

If it is necessary to replicate substantially identical projects, implemented by the same actors in the same geographical areas, it is suggested to consider the opportunity to finance such interventions, if the actual adequacy is found, through multi-year financing channels.

³¹ COOPI 11048 Final Financial Report

³² INTERSOS 11048 Final Financial Report

³³ Occurred for UPP between Salamtak 3 and 4 in 2022

3.1.5 IMPACT

Health Sector

With regard to the measurement of the impact, since a quantitative measurement of the change induced by the project activities is not possible, as regards the 11048 programme, reference was mainly made to the achievement of the objectives set in terms of output of the activities³⁴. In this sense, thanks to the intervention of AISPO in collaboration with the Directorate of Health, the following actions have been carried out in the districts of Zakho and Dohuk, in order to ensure significant improvements:

- Upskilling medical staff (doctors, nurses and ambulance staff) in emergency services through peer-to-peer training. Incentives were provided to trainers to recognise and value their contribution.
- Improvement of the Duhok ambulance services operations centre through the construction of a new operations centre, the rehabilitation of existing spaces and the provision of up-to-date equipment and medicines.
- Security of the analysis services of the Zakho emergency hospital through the demolition of a previous unsafe structure and the reconstruction of a new, larger and more adequate building, equipped with modern equipment.

During the field visit, through a series of targeted interviews carried out with local stakeholders, it was possible to see that the infrastructures built are still operational, used and completely managed by local stakeholders (hospital management) and that the medical and non-medical staff who benefited from the training is still in service. AISPO, also through other donors, also continues its collaboration with the DoH and with the emergency and urgency services, as well as with the 122 operations center.

With regard to the project carried out by AISPO and supported by the 11267 Initiative, it is noted that the decision to open a collaboration with the local Department for Mental Health was particularly significant from the point of view of long-term capacity building.

In fact, the current Management of the Center, recently renovated, has been able to benefit from training and capacity building activities, acquiring considerable awareness of the need to structure at DoH level a sustainable referral mechanism for the management of mental health and associated disorders, despite the general scarcity of resources made available by the Ministry of Health of Iraqi Kurdistan³⁵.

The project implemented by UPP in the context of 11048 Initiative has had a significant impact that focuses mainly on the vulnerable population of Bashiqa district (Nineveh) and Erbil, in particular displaced women and returnees belonging to ethnic minorities. The main objective was to make a range of basic services accessible to this population and to ensure connection and follow-up with higher-level health facilities, as well as to integrate reproductive health services and psychosocial support.

At the same time, this initiative has also contributed to the strengthening of local capacities, leading to an improvement in the quality of basic health services. This was achieved through

³⁴ AID 11048 – AICS Final Report

³⁵ Focus Group conducted with the direction of the Department of Mental Health of Duhok on 23/05/2023

the training and updating of medical and psychosocial support staff on the proper integration of mental, reproductive and GBV health services³⁶.

As specified above, the project carried out by UPP in the context of Initiative 11267 is to be considered in continuity with the previous implementation, this has led to a strengthening of the relationship with the local DoH, to the loyalty of the local staff employed, making sure that, as verified during the mission on the ground, the Bashiqra Hub has increasingly represented a health garrison considered as a reference by the local population. The replication of activities through subsequent implementations, still in progress, has further strengthened this positioning, currently the UPP hub is perfectly complementary in the offer of basic services to what is made available by the local PHC³⁷.

In addition, the Bashiqra Center is used, in addition to the offer of basic health services or psychosocial support, also as a center for Community Engagement and Peace Building activities³⁸ carried out by UPP in the context of its projects in the region.

Education Sector

In analogy with what has been observed for the health sector, also for interventions in the education sector, the considerations relating to the impact are to be limited to the analysis of the outputs of activities as envisaged by the Education Cluster.

With regard to the 11048 Program, COOPI and INTERSOS have contributed to increasing the accessibility and inclusiveness of the education and training system in the governorate of Nineveh, which has been strongly affected by the crisis and has recorded a high number of displaced persons and returnees.

Through targeted interventions, 10 schools have been rehabilitated at the infrastructural level and 4 centers have been created, initially planned as temporary but still used. In addition, school and recreational equipment and materials were provided, allowing more than 5,000 minors to access education according to the minimum standards of education in emergency situations.

In parallel, training sessions were organised for teachers, parents' associations and local authorities on issues such as psychosocial support (PSS), child protection, inclusion and awareness campaigns on the importance of education. These initiatives have helped to improve the quality and inclusiveness of educational services in the area.

The same approach was followed by 11267 initiative, which supported 13 schools in Nineveh governorate by implementing the same "project package" implemented by both the 11048 Initiative and similar initiatives coordinated by the Education Cluster³⁹.

The added value of the cluster-based approach is in the involvement of local authorities in the definition of priorities, tools and intervention strategies, which ensures a certain continuity in the replication of good practices acquired during the implementation of projects.

For example, to date COOPI has no active projects in the implementation area, however the PTAs created during the project are still active and followed by the local DoE⁴⁰.

³⁶ AICS 11048 – Final Report

³⁷ Interview with Bashiqra's DoH conducted on 24/05/2023

³⁸ <https://www.unponteper.it/it/projects/hiwar-dialogo-un-contratto-sociale/>

³⁹ HRP 2017 -2018 Education – Pag 21 "Education First Line and Second Line Responses"

⁴⁰ COOPI – Follow up Visit AICS – Short Report - April 2023

Directly managed activities

With regard to directly managed activities, it was judged not relevant to assess the impact of the 4 interventions carried out during 11048 Initiative.

LESSONS LEARNED

- **Budget**

As far as possible, the budget has been increased in order to allow a wider implementation, however, compared to other donors, the average size of the projects financed is lower, especially considering that the Initiatives, for the most part, do not respond to the logic of first emergency, but of *Early Recovery*, the which implies, for example, the realization of infrastructural works that, when present, represent an important part of the project budget.

- **Stakeholder Engagement**

Some of the projects implemented in the context of the Initiatives evaluated, especially in the Education sector, can be considered One-Off (COOPI – PIN), therefore, while responding to the needs conveyed by the Cluster, they have not allowed the creation of a lasting relationship with local stakeholders, both institutional and operational.

CONCLUSIONS

- **Budget**

In relation to the total volume of funds allocated to emergency response for the years between 2017 and 2020, the absolute value of the initiatives examined is low, especially with regard to the Health sector, which was overfunded in 2017 compared to the total funding requests.⁴¹ In the Initiatives following AID 11048, the absolute value of the financial envelope has been increased, allowing proposing CSOs to develop project proposals of a comparable size to projects financed by other donors. Moreover, the potential impact of the Initiatives, regardless of the relevance and effectiveness of projects, is limited by the strategic choice to cover two areas of activity. By limiting the areas of activity covered by the Initiatives and concentrating efforts on supporting a single sector, the level of Impact of the Initiatives could have been raised. In any case, the decision to focus, for the health sector, on CSOs particularly rooted in the areas of implementation, has allowed to maximize the results obtained despite the scarcity of funds made available.

- **Stakeholder Engagement**

The proposing CSOs, especially with regard to the health sector, have benefited from the long experience in the field and the network of relationships created prior to the implementation of the Initiatives. This approach has proved to be strategic in order to actively involve local institutions or supported services (DoH, DoE) in a long-term perspective. From this point of view, the level of involvement of educational institutions, *stakeholders* in the Education sector, was lower, which benefited from extremely standardized projects whose approach was substantially defined by the reference cluster. In reference to this, the example represented by the DoH of Duhok, the Center for Emergency Management of Duhok and the Hospital Management of Zakho is emblematic, which have taken charge and maintained the infrastructures and services implemented during the AISPO AID 11048 project, guaranteeing their full operation 5 years after the end of the project.

⁴¹ <https://fts.unocha.org/appeals/550/clusters>

In conclusion, it seems legitimate to say that the long-term impact of the projects implemented has been greater where it has been possible to build the project proposals on the basis of the actual experience gained in the field by CSOs which, although less structured than the humanitarian response oriented organizations, have been able to benefit from significant sectoral experience and / or consolidated presence on the territory.

RECOMMENDATIONS

- **Budget**

Given the limited financial resources available, where the objective of the Initiatives is to maximize the impact of the Actions in addition to the strategic orientation of the Sectoral Clusters, it is suggested that consideration be given to the possibility of further circumscribing the sectors and geographical areas of intervention according to the strategic positioning of the Agency, giving priority to the sectors of intervention. included in the Three-Year Plans.

- **Stakeholder Engagement**

In order to maximize the impact of the Initiatives, it is suggested to consider the possibility of supporting projects and CSOs that guarantee the effective involvement of local institutional *stakeholders* and local operating *partners*, regardless of any strategic orientations of the reference Clusters. In order to achieve this objective, the role of the Erbil Programme Office in defining intervention strategies is considered crucial.

Rome 05/07/2023