



OXFAM

OXFAM'S TURKEY-SYRIA EARTHQUAKE APPEAL PHASE 2



Final Evaluation Report

August 2025

List of acronyms

AWD:	Acute watery diarrhea
CFM:	Community feedback mechanism
CGPA:	Community Gender Protection Analysis
CHS:	Core Humanitarian Standard
CSO:	Civil Society Organization
EFSVL:	Emergency Food Security and Livelihoods
EQ:	Earthquake
FDG:	Focus Group Discussion
FSP:	Financial Service Provider
GBV:	Gender Based Violence
GDP:	Gross Domestic Product
HRP:	Humanitarian Response Plan
HTP:	Harmful Traditional Practices
IDP:	Internally Displaced People
KII:	Key Informants Interview
LHL:	Local Humanitarian Leadership
MHM:	Menstrual Hygiene Management
MPCA:	Multipurpose Cash Assistance
OECD/DAC:	Organization for Economic Co-operation and Development/ Development Assistance Committee
PPS:	Probability Proportionate to size
SEA:	Sexual Exploitation and Abuse
SSSD:	Syrian Society for Social Development
WASH:	Water, Sanitation and hygiene
WLOs:	Women Led Organizations
WRO's:	Women Rights Organizations

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Executive Summary

This evaluation report presents the findings of the final evaluation of the DEC-funded earthquake response project implemented by Oxfam in Syria from August 2023 to July 2025. The project was designed to bridge the gap between immediate humanitarian relief and early recovery, targeting communities in Aleppo, Hama, and Latakia governorates severely affected by the February 2023 earthquake. The intervention focused on restoring essential services, improving livelihoods, and enhancing protection and gender equality through a multi-sectoral approach.

Context and Project Overview

The Syrian context remains complex and fragile, shaped by over a decade of conflict, economic collapse, and displacement. The 2023 earthquake exacerbated existing vulnerabilities, damaging critical infrastructure and leaving millions in need of humanitarian assistance. In response, Oxfam implemented a second phase of its earthquake recovery program, supported by DEC, focusing on:

- Water, Sanitation and Hygiene (WASH)
- Emergency Food Security and Vulnerable Livelihoods (EFSVL)
- Protection and Gender
- Support to local actors and community engagement

The project aimed to deliver life-saving aid while laying the foundation for long-term resilience and recovery.

Evaluation Purpose and Methodology

The evaluation aimed to assess the project's performance against OECD-DAC criteria—relevance, effectiveness, efficiency, impact, coherence, and sustainability—while also evaluating adherence to Core Humanitarian Standards (CHS) and Oxfam's humanitarian principles. It sought to generate actionable insights for future programming.

The evaluation employed a **descriptive cross-sectional study design** using a **mixed-methods approach** that was both participatory and gender-sensitive. Both qualitative and quantitative data were collected targeting different groups, including targeted beneficiaries, local authorities, local water authorities, local actors, schoolteachers, and local implementing partners. This methodology was selected to ensure a comprehensive understanding of the project's performance across multiple dimensions and to capture the perspectives of diverse stakeholders.

- **Household Surveys:** Structured questionnaires were administered to 434 households across Aleppo, Hama, and Latakia governorates using a 95% confidence interval and a 5% margin of error.
- **Focus Group Discussions (FGDs):** Ten FGDs (5 men and 5 women) were conducted with community members, stratified by gender to ensure comfort and openness. These discussions explored community experiences, perceptions of project impact, and suggestions for improvement.

- **Key Informant Interviews (KIIs):** Nine KIIs were conducted with local authorities, water authorities, school staff, and local actors. These interviews provided deeper insights into implementation challenges, coordination mechanisms, and sustainability prospects.
- **Desk Review:** A comprehensive review of project documents—including proposals, output tables, periodic reports, and strategic plans—was conducted to triangulate findings and assess alignment with planned objectives and indicators.

Key Findings

Relevance: The project was highly relevant by addressing the critical needs of the earthquake-affected communities, particularly in restoring access to safe water and sanitation, aligning with Oxfam policies and strategies and government priorities. Evidence showed the project's adaptive management capacity to align with the changing context. However, gaps were noted in addressing water infrastructure needs in Hama, where community expectations were unmet.

Coherence: The project demonstrated strong internal and external coherence across sectors and was well-aligned with national humanitarian priorities and cluster strategies. Coordination and collaboration with other actors helped avoid duplication and ensured complementarity.

Effectiveness: The project was largely effective in meeting its humanitarian objectives across WASH, food security, protection, and gender components. Over 450,000 people benefited from the project.

- The water supply component of the project is implemented as per the plan and helped affected communities in improving equitable access to safe water to meet their drinking and domestic needs.
- Awareness-raising sessions and distribution of hygiene kits have helped the community to improve personal hygiene behaviors and practices. Close to 98% of households report regular handwashing, and 97% of them use water with soap to wash their hands. Moreover, 75% of respondents in all locations were able to correctly identify at least three critical moments, reflecting a strong level of awareness regarding hygiene practices.
- Food security interventions, including multipurpose cash assistance, improved household purchasing power and reduced negative coping strategies.
- Under protection and gender, the project made a significant contribution to building the capacity of local actors. MHM kit distribution (both under WASH and Gender components) and MHM awareness and gender training to adolescent girls in school have contributed a lot to building the confidence of female students and allowed girls to attend schools regularly without interruption.

Efficiency: Overall, the project demonstrated a moderate to high level of efficiency in delivering its multisectoral interventions across WASH, food security, protection, and gender components. Overall, activities were implemented within the planned timeframe despite some challenges due to access constraints resulting from insecurity, delayed approval from authorities, and supply chain disruptions. Resource allocation across sectors was generally well balanced, and cost-effective

measures such as joint community mobilization and integrated service delivery enhanced operational efficiency.

Impact: the project contributed to:

- Improved access to safe water and sanitation
- Reduced prevalence of waterborne diseases
- Enhanced household food security and livelihoods
- Increased awareness of protection risks and referral pathways
- Improved school attendance and confidence among adolescent girls through MHM support.

Sustainability: The project made important contributions towards the sustainability of its results across WASH, food security, protection, and gender sectors. These include –

- Local capacity building, including local water authorities, local actors, and local community structures.
- The project integrated a participatory approach and massive investment, especially in the WASH sector, has laid the foundation for lasting impact.

Accountability to the affected population: information sharing about the project remains low, as only 48% of respondents felt they received relevant information about the project. More than 57% of interviewed households (with 60% of Male and 52% of female respondents) reported that they did not participate in any project cycles, including design, implementation, or monitoring. As far as community feedback management, although systems were reportedly in place by Oxfam and partners for most project locations, awareness and utilization remained notably low. Only 24% of respondents (25% male and 22% female) stated that they know how to provide feedback or complaints related to the project.

Oxfam humanitarian approaches: The project aligned well with Oxfam’s principles of feminist programming, local humanitarian leadership, safe programming, and community engagement, though further efforts are needed to deepen community involvement and institutionalize safe programming.

Conclusion and Recommendations: The evaluation findings demonstrate that the project has laid a strong foundation for recovery and resilience, and future programming must build on these lessons to enhance effectiveness, inclusivity, and sustainability.

- Strengthen community engagement and participation
- Improve timeliness and quality of distributions
- Institutionalize sustainability through structured exit strategies, capacity building, and stronger government linkages
- Improve accountability and feedback mechanisms
- Expand gender and protection programming to reach broader community segments
- Promote local humanitarian leadership
- Institutionalize safe programming

1. Background

1.1 Country Context

Syria's political and economic context is shaped by a long-standing authoritarian regime, devastating civil war, and the influence of regional and international actors. The protracted civil war that started in 2011 and lasted for 14 years has resulted in massive loss of life and displacement, widespread destruction of infrastructure, disruption of people's livelihoods, and a complex web of armed groups and international involvement. The political landscape of the country is further complicated by the significant interest and involvement of different regional and international powers, including Russia, Iran, Turkey, and the United States.

Pre-civil war, the country was relatively peaceful and secure, though an authoritarian regime blocked all ways to democracy through single-party dominance, limited political freedom, and shrinking political space for CSOs, and public discourse was limited. Moderate economic growth averaged 4-5% annual growth was also hampered by the civil war, and the GDP shrank by over 60% and infrastructure and industry have been decimated. Hyperinflation and poverty are widespread, leaving over 90% of Syrians to live below the poverty line post-civil war.

In February 2023, earthquakes struck Syria and Turkey and added agony to the already existing catastrophic situation. The earthquake impacted Syria's war-torn northwest region and resulted in thousands of casualties and injuries (almost 6000 deaths and more than 12800 people injured), widespread displacement with over 2 million people left in need of shelter, and inflicted massive damage to critical infrastructure (damaging thousands of buildings and homes, schools, hospitals, and water systems). Many families lost their breadwinners due to death and injury, resulting in many more people unable to meet their basic needs.

Economically, the catastrophe caused significant economic losses, including damage to capital stock, further GDP decline, and an increased poverty rate. Inflation rose by almost 88% driven by reduced access to goods, disrupted supply chains, and high logistics costs.

The effects of economic deterioration and lack of livelihood opportunities further expose women and girls to the risk of Sexual Exploitation and Abuse (SEA) and other forms of Gender-Based Violence (GBV) in their efforts to access food and job opportunities. Children continue to be killed, women and girls continue to fear for their safety, and 7.2 million Syrians remain in displacement, many of whom live in overcrowded camps.

Women and girls face heightened gender-based violence risks in overcrowded shelters lacking gender-segregated facilities and safe WASH services (UNFPA, 2025).¹ Health system collapse has cut off maternal and reproductive care, increasing risks for pregnant women (WHO, 2025).² Livelihoods, often informal, have been disrupted, deepening women's economic dependence (OCHA, 2025).³ Psychosocial distress is severe, and women from minority groups, facing targeted violence and exclusion from decision-making (UK House of Commons, 2025; Human Rights Watch, 2025).⁴

Barriers include restricted humanitarian access, cultural stigma in GBV reporting, and the underrepresentation of women-led actors. Immediate priorities are gender-segregated safe shelters, GBV mobile services, SRH clinics, psychosocial support, and targeted protection for minority women, alongside ensuring their inclusion in peace processes (OCHA, 2025; UNFPA, 2025).

The already existing limited access to clean water was highly affected due to the damage to water and sanitation infrastructures, exacerbating the pre-existing cholera outbreak in the affected areas.

Lack and/or loss of civil documentation, as well as the lack, loss, or destruction of housing, land, and property documents, remain serious issues for hundreds of thousands of Internally Displaced Persons (IDPs) with devastating physical and psychological effects and risks of statelessness.

After 14 years of conflict, Syria enters a new era in 2025, which brings a glimmer of hope for the restoration of peace and security, reduced levels of violence, renewed diplomatic engagement, and growing potential for economic revitalization. However, the humanitarian situation remains dire, and in 2025, around 16.5 million people were identified as people in need of humanitarian support (50% female and 17% people with disability).

1.2 Project Overview

Oxfam in Syria has received financial support from DEC to continue the earthquake response in 3 governorates (Aleppo, Hama, and Latakia) as part of the continuation of the phase I project to bridge the gap between the immediate life-saving response and building the resilience of the affected community. The project focused on bringing sustainable solutions to affected areas through support in income generation opportunities, restoration of disrupted livelihoods, as well as bringing feasible and sustainable WASH solutions.

The project outcomes are:

- **Outcome A:** EQ-affected men, women, girls, and boys have equitable access to safe water to meet their drinking and domestic needs in the immediate and medium term
- **Outcome B:** EQ-affected men, women, girls, and boys demonstrate improved hygiene practices based on increased awareness and access to essential hygiene items
- **Outcome C:** EQ-affected men, women, girls, and boys have improved, safe, and accessible sanitation facilities and solid waste management options.
- **Outcome D:** EQ-affected women, men, girls, and boys have improved food security through supporting the increased access to food and basic needs using the most appropriate modalities.
- **Outcome E:** EQ-affected individuals and communities at risk to their safety and/or dignity are identified, assessed, and provided with protection assistance.
- **Outcome F:** EQ-affected individuals and communities are supported to identify and analyze their protection risks and decide on relevant modes of protection responses.

- **Outcome G:** EQ-affected men, women, girls, and boys have increased equitable access to early recovery-tailored water, sanitation, hygiene, and infrastructures, bringing in feasible self-sustained solutions
- **Outcome H:** Equitable, dignified, and safe access to sustainable livelihood assets, livelihoods, and income sources to the population and businesses affected by the earthquake
- **Outcome I:** EQ-affected women, men, girls, and boys have increased its access to essential non-food items through the use of in-kind winterization kits
- **Outcome J:** EQ affected adolescent girls have increased their access to Menstrual Hygiene Management materials through MHM Kits, knowledge about menstrual health and gender equality, and can design messaging for peer-to-peer learning
- **Outcome K:** Local actors (I.e., women-led organizations, NGOs, charities) responding to the EQ have been identified, and have increased their knowledge about Gender in Emergencies and how to mainstream gender into their programmes, and have access to support for gender-related activities.
- **Outcome L:** EQ-affected women and girls have increased their understanding of what constitutes gender-based violence, can identify the root causes, and have access to customized gender-responsive kits with appropriate and tailored items.

2. Evaluation Process

2.1 Purpose of the evaluation

The primary purpose is to gauge the impact of the project design on enhancing the quality of life and welfare of the targeted communities and, secondly, to identify areas of success and areas for improvement, facilitating insights that can guide future programming endeavors in similar contexts.

To achieve this, the evaluation will:

- a. Synthesize lessons derived from Oxfam's implementation experience by retrospectively analyzing program design, implementation strategies and processes, partnerships, coordination mechanisms, and the planned vs achieved results.
- b. Provide strategic, pragmatic, realistic, and actionable recommendations aimed at guiding DEC and Oxfam in adapting future response programming. These recommendations are based on the lessons learned and focus on enhancing effectiveness and efficiency in future emergency responses.

The key objectives of this evaluation, as stipulated in the ToR, are as follows:

- Evaluate the impact of the interventions according to the OECD criteria, which include relevance, coherence, effectiveness, efficiency, impact, and sustainability.
- Assess the incorporation of the Core Humanitarian Standard (CHS) in the design, implementation, and monitoring of the emergency response program.
- Evaluate the integration of gender considerations in the design, implementation, and monitoring of WASH, EFSVL, Protection, and Gender interventions.

- Provide learning opportunities for the organization to understand what works and what doesn't in similar contexts. This includes extracting lessons learned on implementation strategies and processes, partnership modalities, and coordination mechanisms.
- Strengthen accountability towards Oxfam's key stakeholders (communities, donors, partners, and government).
- Develop strategic, realistic, and actionable recommendations aimed at improving the implementation processes and performance of programming.

2.2 Scope of the evaluation

The thematic, geographical, and chronological scope of the evaluation is presented below.

- **Thematic Scope:** The evaluation will focus on the programming, implementation, and monitoring of EFSVL, WASH, Protection, and Gender interventions at community, partner, and Oxfam levels.
- **Geographical Scope:** The documentation review to be conducted as part of this evaluation is expected to cover all the EFSVL, WASH, Protection, and Gender interventions implemented as part of emergency response and recovery programming in the targeted districts of Aleppo (Jabel Saman and As-Safira districts), Hama (Hama district), and Latakia (Jablah and Latakia districts). However, the primary data collection in the field will focus on targeted samples of intervention districts identified during the evaluation's inception phase.
- **Chronological Scope:** The evaluation captures the essence of the interventions implemented between August 2023 and July 2025, covering the emergency response and recovery phase (Phase 2). The second Phase of the programme focuses on bridging the life-saving and short-term humanitarian response with early recovery and long-term resilience-building actions to allow the earthquake-affected populations to recover from the stressors and shocks through the most appropriate and context-specific means and enable them to better adapt to the resulting shocks.

2.3. Evaluation Questions

The evaluation aims to address the following questions under each of the OECD/DAC criteria, as well as questions related to the Core Humanitarian Standard (CHS) and Oxfam humanitarian approaches.

To address the evaluation's intent at capturing pertinent lessons learned, the evaluation will include the 'why' questions, e.g., not just to ask whether the project was effective in meeting its objectives but also why it is deemed to be so, or not.

A. Relevance:

- To what degree has the intervention addressed the needs of the targeted population and contributed to reduced vulnerability? How responsive have project activities been to the needs of the affected population, given their circumstances and priorities?

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- How effectively did Oxfam and its partners identify the needs (expressed and unexpressed) of men, women, boys, and girls' beneficiaries before implementation? How do these identified needs compare with those observed during field evaluations?
 - To what extent have beneficiaries been fairly identified and targeted?
 - How well does the project adapt to the changing circumstances and to the evolving needs within the areas of intervention?
 - Is the project consistent with the strategies and priorities of the stakeholders, including local authorities, donors, and humanitarian agencies?
 - What was the best practice related to this criterion? Any examples?

B. Effectiveness:

- To what extent did the implementation approaches contribute to achieving the intended emergency response outcomes?
- What were the key factors, both internal and external to Oxfam, that significantly contributed to the achievement of the planned emergency response and recovery objectives?
- What were the primary factors, internal and external to Oxfam, that hindered the achievement of the anticipated emergency response and recovery objectives?
- What were the unintended outcomes, both positive and negative, resulting from the intervention?
- Extent to which the strategic partners and partnerships contributed to the success of Oxfam's emergency response program?
- To what extent were the findings from monitoring and other review and reflection processes used/integrated to inform programming?
- What lessons were drawn from phase I implementation to improve project effectiveness in phase II?

C. Efficiency:

- To what extent were the resources made available in a timely manner?
- What strategies/approaches were used to ensure efficiency of service delivery?
- Were there alternative strategies available that could have achieved similar results but at a reduced cost? Were these alternatives taken? If not, what were the factors that hindered adapting these alternatives?
- How well did the implemented activities complement those of other humanitarian agencies, avoiding duplication, maximizing efficiency, and leveraging added value?
- How does the management act in a changing context (adaptive management)

D. Impact:

- Was the response strategy put forward cognizant not only of the immediate needs of the affected population but also of the long-term consequences of the action?
- What were the immediate impacts of the emergency response efforts on the affected population?
- How did the emergency response affect the overall well-being of the affected individuals and communities, women, men, boys, and girls?

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- How effective were the emergency response strategies in mitigating the primary risks and challenges faced during the emergency response?
 - Were there any unintended consequences or negative impacts resulting from the emergency response actions?
 - Were there set objectives, outcomes, or outputs that the response failed to achieve? How did this affect the situation of the affected population? Why were they not achieved? What could have been done differently?
- E. Coherence:**
- To what extent do other interventions support the projects' activities?
 - Are there any other ongoing projects or programs addressing similar issues in the area? If so, how has this project ensured synergy rather than duplication or competition? What mechanisms were used to ensure coordination?
 - How does the project ensure that its activities do not contradict or undermine other interventions in the region?
 - Are the project's activities coherent with the broader humanitarian and development goals for the Earthquake Response?
 - Has the response taken measures to ensure complementarity with implementing partners' own humanitarian mandate and thrust? Has the selection of a partner taken this into account? How?
- F. Sustainability:**
- What measures, if any, have been implemented to ensure the sustainability of interventions in the absence of Oxfam's support? Was there any exit strategy in the project design, and what did we do at the end to ensure the gains of the project are sustained?
 - Have the recommendations from the DEC Exit strategy workshop been integrated into the Oxfam approach?
 - How has the project integrated long-term strategies to promote gender equality and prevent the reinforcement of pre-existing gender inequalities after the humanitarian intervention ends?
- G. Core Humanitarian Standards (CHS) and Accountability to Affected Population (AAP):**
- To what extent were the CHS and CFM integrated in the design, implementation, and monitoring of the emergency response?
 - Were there any notable challenges encountered in integrating CHS and CFM into the emergency response, and if so, how were they addressed?
 - How effectively were CHS and CFM communicated to community members and humanitarian actors involved in the response effort?
 - How was the feedback received from CFM used to improve emergency response interventions?
 - How were vulnerable groups, such as women, children, elderly individuals, and persons with disabilities, specifically engaged and supported within the CHS and CFM framework during the emergency response?
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H. Community participation and empowerment:

- To what extent have the beneficiary groups participated in decision-making processes and the different phases of the project?
- Have the strategies been adapted to ensure the active participation of women in all of the phases of the project?
- To what extent have the project or programme actions contributed to the beneficiaries being protagonists of their own individual and community development, understanding, demanding, and proposing changes in interventions and practices that generate their exclusion and/or discrimination against them?
- Any experience, good practice that demonstrates affected communities taking a lead at various stages of project implementation?

I. Oxfam Humanitarian approaches

To what extent does the project design and implementation adhere to Oxfam's humanitarian approaches

- Contributions of the project to gender equality by benefiting vulnerable women and girls
- Engagement of men in preventing VAW and promoting gender equality, and challenging the existing negative norms
- The involvement of local partners at the different stages of the project and the building of long-term partnerships with the local organizations
- What did we do to ensure the project does not inadvertently cause harm to the community?
- Participation and engagement of the community at different stages of the project.

3. Evaluation methodology

3.1 Evaluation design

A descriptive cross-sectional study methodology was applied using a participatory and gender sensitive mixed methods approach of data collection. Both qualitative and quantitative methods of data collection (i.e., document review, key informant interviews, household interviews, and focus group discussions, as well as significant stories of change) were used in addressing the study objectives.

- **Documentation Review (Desk Review):** A Comprehensive and structured review of relevant background information was made, and different project-specific documents, such as the project proposal, project output table, and periodic project reports, etc., were reviewed. The desk reviews focused on gathering a wide range of quantitative data from programme documents and reports that give insights into the indicators outlined against the assignment objectives.
- **Surveys with beneficiaries:** There is no better source of feedback than the affected population, who were both active players and at the receiving end of the services and benefits resulting from project implementation. HH Surveys conducted with beneficiaries to

get direct feedback and perspectives are crucial for evaluating the effectiveness of the response efforts.

- **Key Informant Interviews (KIIs):** Engaging with key informants will provide a deeper understanding of various aspects of the emergency response, including the challenges faced, successes achieved, and opportunities for improvement. Multiple groups are involved in KIIs to get more in-depth information.
- **Focus Group Discussions (FGDs):** FGDs were conducted with community members, which facilitated gathering diverse viewpoints and uncovering community-specific needs, preferences, and concerns relevant to the emergency response.

3.2 Sampling and sample size

The total sample size defined for this exercise is 434 HHs, calculated considering a 95% CI and 5% margin of error using the online sample size calculator <http://www.raosoft.com/samplesize.html>. To ensure representativeness, the evaluation employed a stratified random sampling approach. The total sample size was distributed across project locations based on the intensity of project interventions and the presence of key components (WASH, food security, protection, and gender). Each location was treated as a stratum, with sample allocation determined using a probability-proportional-to-size (PPS) procedure to ensure fair representation of areas with greater project coverage. Within each stratum, simple random sampling was applied to select households, giving each an equal chance of being included in the survey and minimizing selection bias. Data collection was conducted using a structured household interview questionnaire.

Table 1: Interviewed HHs per location

Governorates	Districts	Community	Interviewed HHs
Aleppo	As-Safira	Aqraba	56
		Terkan	50
	Jebel Saman	Aleppo	56
		Esan	40
		Talafeh	26
Sub Total			228
Hama	Hama	Harbanifse	44
		Kawkab	9
		Shihet Hamah	11
		Suran	19
		Tiba Elemam	17
	Masyaf	Shiha	36
Sub Total			136
Lattakia	Jablah	Beit Yshut - Ein Qayta	70
Overall Total			434

3.3 Qualitative data collection

Qualitative data were collected using FGDs and KIIs to triangulate the information obtained from the HH survey and to get more in-depth information. 10 FGDs, 2 KIIs with local authorities, 3 KIIs with water authorities and 4 KIIs with targeted schoolteachers and principals were conducted, and 126 people (64 Male and 62 Female) participated in the interviews.

3.3.1 Key Informant Interviews (KIIs)

Key informant interviews (KIIs) were conducted with local authorities, water authorities, schoolteachers/principals, local actors involved in capacity building supports and Oxfam staff to provide insights into the different notions of the programme, including detailed information on the overall implementation features of the programme, including the coordination with and overall performance of implementing partners and other national and local stakeholders.

3.3.2 Focus Group Discussions (FGDs)

Beneficiary consultation was mostly done through focus groups discussion (FGDs) using a tool covering the main issues of the evaluation exercise to provide information by fostering dynamic group conversations. In the randomly selected localities, following the stratified purposeful sampling technique, a sample from each intervention was randomly selected, considering characteristics such as gender. Separate focus group discussions were organized for each group to tease out gender dimensions and to ensure free expression of viewpoints, and generally make each group feel more comfortable sharing their opinions and thoughts.

Table 2: Qualitative data, locations and participants

Type of qualitative data	Governorate	District	Village	Participants			
				NO FGD/KII	Male	Female	Total
FGD				10	53	60	113
	Aleppo	Jabel Semen	Assan	2	14	8	22
		Al Safire	Terkan	2	11	10	22
		Sub Total		4	25	18	44
	Hama	Hama	Hairbenfsh	2	9	13	22
		Hama	Masha Aljajeha	2	11	14	25
		Sub Total		4	20	27	47
	Lattakia	Lattakia	Beit Yashout	2	8	15	23
KIIs				13	11	2	13
• KII with Local authorities	Aleppo	Jabel Semen	-	1	1	-	1
	Lattakia	Lattakia	Beit Yashout	1	1	-	1
• KII with Water authorities	Aleppo	Al-Safira	-	1	1	-	1
	Hama	Hama	-	1	1	-	1
		Hama	-	1	1	-	1
	Lattakia	Lattakia	Ra's Alein	1	1	-	1
• KII with schoolteachers	Aleppo	As-Safira	-	1	1	-	1
		Tal- Amrm	-	1	1	-	1
	Lattakia			1	1	-	1

• KII with Local actors			1	1	-	1
	Hama		1	1	-	1
	Lattakia		1	-	1	1
			1	-	1	1
Overall Total				64	62	126

3.4 Data collection tools

The final evaluation data collection tools were designed in cooperation with Oxfam’s Syria team to capture all necessary data that would answer the evaluation questions and the project key indicators. Questionnaires and discussion guiding questions were also designed for focus group discussions and key informant interviews.

3.5 Data collection and Analysis

3.5.1 Data collection

One day training was provided to identified data collectors (FSPs) by Oxfam staff to create clear understanding about the purpose of the evaluation and the different questions in the household survey tool. Oxfam staff translated the household survey questions into Arabic to make the interview process easier for the data collectors and uploaded into SurveyCTO platform for digital data collection. Oxfam staff members facilitated the household survey data collection in identifying and linking the enumerators (FSPs) with the beneficiaries and identifying data collection locations.

Qualitative data collection was made by Oxfam MEAL team supported by programme staff in identifying the interviewees and communications. Some interviews were conducted through phone call while most interviews were conducted by meeting the interviewees physically.

All the data collections in this exercise have taken into consideration the four main ethics in research principles: 1) free consent, 2) no harm, 3) justice and 4) beneficence. Description of the main study objectives and confirmation of free consent were provided to all potential respondents involved in the actual study. Respondents were informed that they are entitled to stop responding or participating in the study at any time and complete interview was conducted with those who were able to give oral consent.

3.5.2 Data analysis

The quantitative data collected using SurveyCTO was exported to SPSS and Excel and coding, cleaning and analysis was made. The data were analyzed based on two stages: First, a descriptive summary of characteristics of respondents and their districts/settlements, based on study demographic information. Secondly, an analysis of selected outcomes in the various thematic areas by location.

Thematic analysis is used to synthesize the qualitative data to identify, analyze and interpret patterns across the data. Conceptual and relational analysis was also utilized to determine the

existence and frequency of certain concepts in the different documents and examine the relationship among the concepts.

Triangulation involved seeking areas of convergence, complementarity, and divergence within the data collected from diverse sources and through different methods. Its purpose extended beyond validation during the analysis and systematization phase; it also served as a means to gain new insights throughout the evaluation process. Additionally, triangulation supported analysis focusing on intersectionality while examining the findings concerning the beneficiaries, as well as common patterns and emerging priorities across different geographical areas.

4. Limitation of the evaluation

While every effort was made to ensure the credibility and reliability of this evaluation, several limitations should be acknowledged. The study utilized both quantitative and qualitative data, which may have been influenced by respondents' recall bias, social desirability, or reluctance to disclose sensitive information. The reliance on self-reported data and the absence of a control group limits the ability to attribute observed changes solely to the intervention.

Additionally, the evaluator's inability to travel to Syria—due to visa delays and regional insecurity—disrupted the initial evaluation plan, resulting in extended delays and missing data across both qualitative and quantitative components. The lack of baseline information further constrained the ability to conduct a baseline-endline comparison to explicitly demonstrate the project's contribution.

Data collection was also affected by logistical challenges, limited access to certain populations, and potential response biases. Despite these constraints, the evaluation presents a balanced and sufficiently robust picture of the project's achievements, key lessons learned, and actionable recommendations.

5. Ethical consideration

The evaluation exercise is adhered to standard ethical principles to ensure the safety, dignity and rights of all participants. All participants were provided with brief information about the purpose and nature of the baseline survey, and their right to voluntarily participate or withdraw at any time without any consequence. Informed consent was obtained from all respondents prior to the data collection. Confidentiality and anonymity were maintained throughout the process, with data collected and reported in a manner that protects the identity of participants. Furthermore, efforts were made to ensure the process is fair and equitable by avoiding bias and ensuring relevant groups are represented fairly.

The data collected will only be used for the stated purpose of the baseline survey, and findings are presented in a fair and balanced way without misrepresentation or harm to participants or communities.

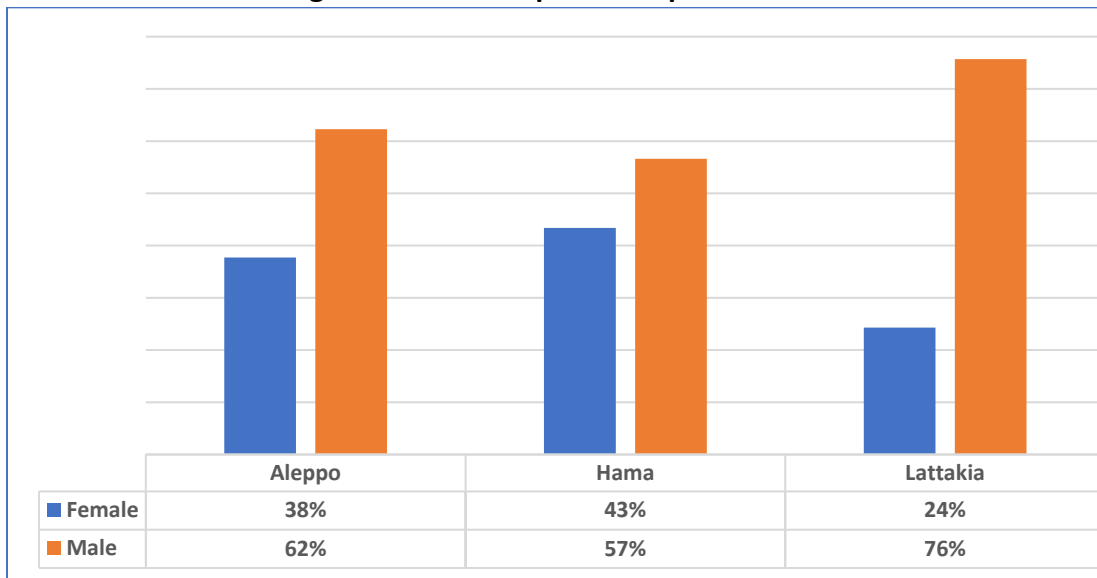
6. Discussion and Findings

This section of the report provides the key evaluation findings based on the analysis of the collected qualitative and quantitative data. Findings are provided under the six evaluation criteria (namely coherence, relevance, efficiency, effectiveness, impact, and sustainability). Additional findings on accountability and alignment to Oxfam humanitarian approaches are also included in this section.

6.1 Household demographics

A total of 434 households (HHs) were interviewed for this exercise, including 228 HHs (52.5%) were from Aleppo, 136 HHs (31.3%) from Hama, and 70 HHs (16.1%) from Lattakia governorate. Most respondents were found to be male, as 62.7% were male and 37.3% were female respondents, and similarly, 86.9% of the interviewees were found to be male-headed households, while only 13.1% were female-headed households.

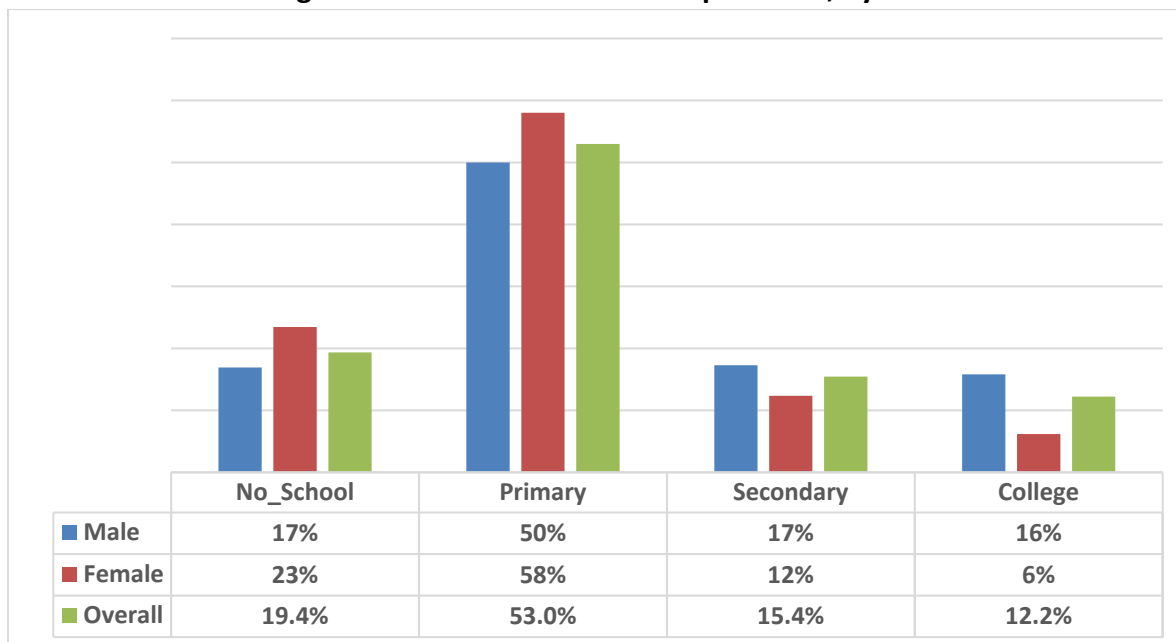
Figure 1: Sex of respondents per location



The majority of interviewed households (96%) were from the host communities, while 2% (all from Hama governorate) were returnees and 2% (all from Latakia governorate) were IDP communities. All the interviewed households are above the age of 18, while the majority (76%) are above the age of 35. The findings of the evaluation indicated that the average household sizes of the sampled households varied slightly across the study locations; mean [min, max] with Aleppo at 6 [1, 15], Hama at 5.5 [2,12], Lattakia at 4 [2,7], and overall, at 5.6 [1,15] members.

As far as the education status of respondents is concerned, the result exhibited that 53% of the survey participants have completed primary education, 15.4% secondary education, 12.2% have college education, and 19.4% have reported they did not attend any school.

Figure 2: Educational level of respondents, by sex



6.2 Household vulnerability

As per the household survey result, close to 10% of the survey participant households are categorized as highly vulnerable as they have at least one household member with chronic illness, physical or mental disability, or lactating/pregnant women. The following table summarizes the number of people under each vulnerability category.

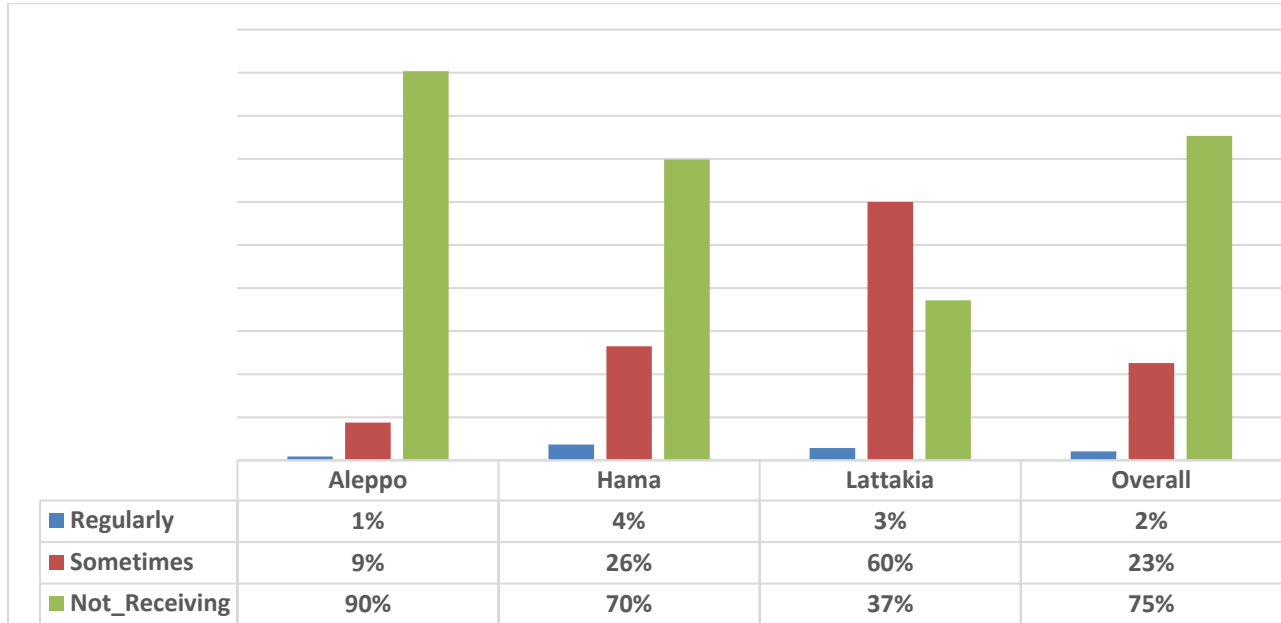
Table 3: Number of people per the vulnerability categories

Vulnerability category	Aleppo			Hama			Lattakia			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Chronically ill	7	14	21	8	12	20	2	6	8	17	32	49
Physical disability	15	15	30	13	5	18	3	2	5	31	22	53
Mental disability	13	5	18	4	3	7	3	1	4	20	9	29
Pregnant and lactating women	-	11	11	-	16	16	-	1	1	0	28	28

6.3 Humanitarian Assistance

Only 25% of respondents (26% Male and 16% female-headed households) are currently receiving humanitarian assistance, primarily WASH and NFI support. The remaining 75% (74% male and 84% female-headed households) indicated they are not receiving assistance, either regularly or at all.

Figure 3: Number of people currently receiving support per location



Safety in accessing humanitarian assistance does not appear to be a major concern. The vast majority of interviewed households (97%) reported that they do not face any safety issues when accessing assistance. Similarly, findings from multiple PDMs confirm that nearly all respondents perceive humanitarian aid delivery as safe and secure.

6.4 Relevance/Appropriateness

Relevance/Appropriateness: refers to the extent to which the initiative and its intended outputs or outcomes are consistent with the needs of intended beneficiaries, national and local policies and priorities and the organization plan.

6.4.1 Addressing priority needs of the targeted community

Community members who participated in the FGDs reported that they have been facing multiple challenges following the earthquake. A key concern is the lack of safe water access due to damaged water networks, pipelines, and other water infrastructure. In addition, there is limited access to sanitation facilities as a result of destroyed household latrines, broken sewage networks, and overburdened systems, many of which are experiencing operational failures that further restrict safe sanitation access. These conditions have increased public health risks, particularly the spread of waterborne diseases, such as diarrheal diseases, Acute watery diarrhea (AWD)/Cholera,

FGD participants in Lattakia governorate, Beit Yashout district has mentioned that the biggest problem was the contamination of artesian and drinking water by sewage, which led residents to stop using this water for many months almost a year due to its danger, until Oxfam intervened.

Leishmaniasis, etc., beyond WASH-related challenges. Communities highlighted chronic unemployment, low income, and food insecurity as major difficulties that continue to affect their well-being in the aftermath of the earthquake.

As a continuation of phase I, the project has managed to address the multifaceted problems of the community in the different locations, with more focus on WASH-related support.

The household survey result indicated that a significant proportion of the interviewees (91%) in most locations agreed that the project had addressed the core problem that their community was facing.

Table 4: Project's contribution in addressing the core problem of the community

Governorate	The project addressed the core problem of the community.						% Agree	% Disagree
	Agree	Strongly agree	Disagree	Strongly disagree	undecided			
Aleppo	90	128	3	1	6	96%	2%	
Hama	63	66	3	-	4	95%	2%	
Lattakia	33	15	13	1	8	69%	20%	
Total	186	209	19	2	18	91%	5%	

A similar viewpoint was observed from the KIIs with local authorities and water authorities. Most of the KII participants (11 M, 1F) agreed that the project has contributed significantly to alleviating the suffering of earthquake-affected communities through restoration of essential water services, support to health and hygiene through infrastructural rehabilitation, hygiene kits distributions, and enhancing awareness.

However, both Male and female FGD Participants from Hama governorate, Hairbenfsh district have reflected different opinions on this. FGD participants acknowledged their participation in the livestock support component of the project, which provided cash assistance to purchase animals and enhance livelihoods. But they feel that the project missed prioritizing the community's most urgent need, which is addressing the water needs of the community to save both lives and livelihoods. Despite repeated appeals to Oxfam representatives, no water infrastructure support was provided, leaving families unable to meet basic needs for drinking water, household use, or livestock.

Similarly, FGD participants in Hama, Masha Aljajeha village, have reflected their feelings that the project has not adequately addressed their priorities. The critical problems that they identified earlier during the project planning discussion, such as water infrastructure, sanitation, waste management, and economic hardship, remained largely unsolved.

Beneficiary selection and identification followed a transparent and participatory process to ensure that the most vulnerable and eligible households were targeted. Specific criteria for specific interventions were developed, and community and local authorities were involved in the process of identification and validation of beneficiary selection, which helps to minimize bias.

In the household survey, an effort was made to assess communities' perception of beneficiary selection, and the result indicated that close to 83% (81% Male and 83% Female) reported that they feel beneficiaries of the project are targeted and identified fairly. Focus Group Discussions (FGDs) across most locations echoed this sentiment, noting that the project reached the most affected communities. However, both male and female FGD participants from Hama district expressed concerns that strict registration criteria and panel screening processes excluded highly vulnerable individuals. These individuals, often uneducated or suffering from severe war-related physical and mental trauma, struggled to provide the 'correct' responses required during Oxfam's panel screening.

6.4.2 Alignment with regional and country policies and strategies

6.4.2.1 Alignment with Oxfam policies and strategies

The project, with its WASH, food security, gender, and protection, is found to be highly aligned with and contributing to Oxfam in Syria's commitment towards increasing resilience of affected Syrian women, girls, men, and boys stipulated in the Country strategy 2021 – 2026 as **country goal 1**. The WASH component contributes to **Outcome 1.1** of the country strategy, which anticipates improving equitable, safe, and dignified access to adequate water, sanitation, and hygiene services and water for livelihoods to crisis-affected women, girls, men, and boys. The food security component of the project is aligned with Outcome 1.2 of the country strategy, which aims to improve access to food and enhance the capacity of sustainable livelihoods of affected communities to improve their wellbeing despite shocks and risks. The protection component of the project is found to be in line with Outcome 1.3 of the country strategy, aiming at enabling the crisis-affected community to identify protection risks and problems and adequately link them to relevant actors for required support. The gender component of the project is aligned with Goal 2, Outcome 2.2 of the country strategy's ambition to increase agency of women and girls in mitigating the negative impact of discrimination and injustice.

The Earthquake response plan with the timeline of Feb 2023 to Feb 2026 has explicitly committed to an initial lifesaving response for 6 months, and during this period, the response is planned to focus on providing life-saving aid to affected communities in the targeted areas. The second and longer-term response is deemed to focus on addressing the infrastructure damages created by the earthquake and addressing underlying challenges such as providing alternative sources of energy for water structures, longer-term cash support for housing and restoration of livelihoods, and rehabilitation of water and sewage networks. Protection and gender are also planned to be integrated to not only provide mainstreaming but also, and more importantly, actively address protection risks and gender issues. As a continuation of the Phase I project, the Phase II project has continued the earthquake response in 3 governorates and managed to bridge the gap between immediate life-saving action and early recovery, and build the resilience of the affected community.

6.4.2.2 Alignment with government priorities

The 2023 Humanitarian Response Plan (HRP) for Syria identified Aleppo, Hama, and Lattakia as among the most affected areas, with high proportions of people in need of humanitarian assistance—66.7% in Aleppo, 73.3% in Hama, and 30.7% in Lattakia. These locations also hosted significant numbers of internally displaced persons (IDPs) and returnees, with 48% in Aleppo’s Jabel Saman district, 22% in Hama, and 44% in Lattakia. The majority of these populations have lost the ability to meet their basic needs and remain highly vulnerable.

In response to the scale of the crisis and the concentration of affected populations, the project targeted these three locations. The intervention focused on delivering life-saving assistance, enhancing protection, and building resilience among vulnerable communities. Priority sectors included Protection, WASH (Water, Sanitation, and Hygiene), and Food Security. The project ensured alignment with government and stakeholder priorities by delivering essential services in the targeted areas.

All participants from local authorities have confirmed that the project has strictly aligned with local priorities in restoring essential water services, maintaining sewage systems, and supporting livelihood recovery of targeted communities, which are fundamental for both immediate relief and long-term community resilience.

6.4.3 Adaptability

Before the earthquake, Oxfam was not operating in Hama and Lattakia governorates, but a significant decision was made by the country management to expand Oxfam's northern hub reach to cover Hama and Lattakia so as to reach the unreached after the earthquake, as many people were affected in those governorates.

During the project implementation period, the project demonstrated a high level of adaptability to evolving contextual factors. Despite facing unexpected challenges such as political instability, inflation, climate-induced shocks, etc., the project team managed to make timely adjustments to the operational plan to maintain relevance and continuity of services. Regular monitoring and communication with stakeholders such as local authorities, water authorities, etc., enabled the identification of emerging risks and modification of activities and plans where necessary. Although the original project design had limited built-in flexibility, the implementing team showed initiative in revising certain strategies in consultation with pertinent stakeholders and communities. These adaptations contributed to sustaining project results, even if some targets were adjusted to align with the emerging realities.

In the event of uncertainties and insecurities, Oxfam continues operation through remote management and engages national staff as front-line operators stepping into the most senior roles and providing remote backstopping by expatriate staff.

MHM awareness sessions were planned for male learners without a proper analysis of the context, which didn’t get acceptance by male target groups, and Oxfam decided to discontinue the sessions after understanding the sensitivity of the issue.

6.5 Effectiveness

The project was largely effective in meeting its humanitarian objectives across WASH, food security, protection, and gender components. Key activities were implemented as planned, with notable achievements.

WASH

Over 450,000 people were reached through the different WASH services in all the targeted locations. Operation and maintenance of water systems, project's contribution in addressing the core problem of the community rehabilitation of water tanks and water networks, rehabilitation of pumping station, solarizing water systems, operation and maintenance of sewage systems, distribution of hygiene kits, and hygiene and sanitation awareness sessions are some of the key activities implemented under the WASH component of the project.

Table 5: Survey participants reported benefiting from WASH services

Benefited from	Aleppo	Hama	Lattakia	Overall
Access to safe water	54%	19%	100%	50%
Hygiene and sanitation messages	62%	41%	73%	57%
Hygiene kits distribution	64%	35%	93%	59%

The water supply component of the project is implemented as per the plan and helps affected communities in improving equitable access to safe water to meet their drinking and domestic needs. The survey findings indicated that households in the targeted locations access water from different sources. However, the majority reported (71% rainy season and 72% dry season) that their main source of water, both during rainy and dry seasons, is the public water network. Households were asked if they have problems related to water supply and access, and the majority (72%) feel that there is no problem. However, this finding varies across the different locations where households in Aleppo and Lattakia governorates report relatively fair access to water supply, while the majority in Hama governorate still feel they have different problems related to safe water access.

Table 6: Challenges to water supply and Access

	Aleppo	Hama	Latakia	Overall
No problems	68%	35%	74%	72.0%
Water points are too far from the residence	3%	27%	3%	3.7%
The water point is dirty	2%	0%	0%	0.0%
Not enough water at the source	25%	8%	20%	0.0%
Waiting time is too long	3%	31%	0%	11.9%
Other	3%	8%	3%	0.0%

Distance to the nearest water source is less than 30 minutes for the majority of households (88%) in all locations, and the majority (80%, 79% in Aleppo, 69% in Hama, and 87% in Lattakia) reported that the distance to the main source of water is less than 5 minutes (inside their compound).

Almost all the FGD participants have witnessed that the project has significantly improved their access to safe and adequate water, as now they are accessing water near their dwelling, and the distribution of water is much longer than it used to be before the project. However, Female FGD participants in Aleppo governorate, Jabal Saman district, Assan village still feel that access to safe water is insufficient, though significant improvement is observed compared to the situation before the project intervention.

“The water station project provided a reliable and safe water source, saving time and effort (especially before this intervention people were either need to go too far for water source to bring water or need to buy water from water tanks which was very much expensive).”

FGD participants, Male groups, in Lattakia, Beit Yashout

The KII with local authorities in Lattakia governorate has also confirmed that the project has contributed a lot to alleviating the suffering of earthquake-affected communities. This is evident through several key interventions that directly improved access to essential resources like water and electricity. For example, replacing worn-out pumping sets at Ras Al Ain and Beit Yashout improved water supply reliability, which is crucial during the severe summer thirst. The living conditions of the villagers have improved as they no longer pay huge amounts to buy and secure water. Water supply in the village has improved significantly, now delivered every 6 days instead of 26 days, and is expected to reach every 4 days soon, following UNICEF’s intervention.

Awareness-raising sessions and distribution of hygiene kits were conducted in all project locations to improve the personal hygiene behaviors and practices of the targeted communities. This component of the project has brought about significant positive changes in the lives of the targeted community and led to improved health outcomes by reducing the prevalence of waterborne and hygiene-related diseases. The interventions enhanced the community knowledge and practices around key hygiene behaviors, such as handwashing and safe and clean water storage practices. Access to essential hygiene materials not only improved personal and household cleanliness but also restored dignity, especially for women and girls.

The survey findings indicated that handwashing practice among the interviewed households is significantly high, as 98% (98% in Aleppo, 100% in Hama, and 97% in Lattakia) reported they wash their hands regularly, and 97% of them use water with soap to wash their hands.

The identification of at least 3 critical handwashing moments- such as after using the toilet, before eating or preparing food, and after cleaning a child- serves as a proxy indicator of improved handwashing practices and positive hygiene behavior. According to the survey findings, 75% of respondents in all locations were able to correctly identify at least three critical moments, reflecting a strong level of awareness regarding hygiene practices. This result indicates that hygiene promotion

efforts have been effective in enhancing knowledge and encouraging behavior change, contributing to the prevention of hygiene-related illness and fostering healthier daily habits within the targeted community.

Table 7: Critical handwashing moments

Moments of handwashing	Aleppo	Hama	Latakia	Overall
At least 3 moments	71%	81%	81%	75%
At least one moment	6%	1%	7%	5%
At least two moments	23%	17%	11%	19%

The FGD participants in the different locations have confirmed that the awareness-raising support from the project has helped them a lot by improving their awareness in terms of preventing communicable diseases such as leishmaniasis and water-related diseases, helping them to lead better health practices.

As far as solid waste management is concerned, the survey findings indicated a relatively low prevalence of open dumping, with only 7% of respondents reporting that they dispose of solid waste in open sites. The majority of households have adopted alternative waste management practices, including burning, burying, and utilizing common collection sites. This suggests a positive trend towards improved solid waste management at the household level, reflecting growing awareness of environmental health risks associated with improper disposal.

The distribution of hygiene kits played a crucial role in improving access to essential hygiene items among the vulnerable communities and reducing their financial burden. This intervention not only addressed immediate needs but also reinforced key hygiene promotion messages delivered through community outreach and awareness sessions. However, FGD participants in most places reflected that the distributed items were not enough to cover their household needs, the two months between the distributions is long, and the quality of some items distributed (laundry detergent, soap, and water containers) is poor.

To address the pressing sanitation needs in densely populated areas of Aleppo and Hama, sanitary and sewage network rehabilitation activities were carried out.

This intervention aimed at restoring and improving the functionality of existing infrastructure, ensuring the safe

collection and disposal of wastewater. The rehabilitation work helped reduce the risk of environmental contamination and the spread of waterborne diseases, particularly in vulnerable communities where infrastructure had been damaged or overwhelmed due to prolonged service, conflict, and earthquakes. Through enhancing access to improved sanitation services, the project contributed to a healthier living environment and strengthened community resilience against public health risks.

“By reactivating the plant and sewage network, Oxfam reduced environmental pollution and protected surrounding communities from exposure to harmful pathogens and unsafe wastewater.”

KII participant from water authorities, Hama

Food security and livelihoods

The aftermath of the earthquake left affected communities with a massive impact on livelihoods, including reduced employment or loss of jobs, reduced income, business closure, loss of livestock and equipment, and damage to agricultural infrastructure (such as greenhouses, irrigation systems, storage facilities, etc.).

The main objective of the livelihoods component of the project is to improve access to food and basic needs through multipurpose cash provision and improve access to livelihoods assets through cash for agriculture and cash for livestock provision. Affected communities in rural Aleppo and rural Hama governorates were targeted for the agriculture and livestock support, while the MPCA was implemented in Aleppo governorate only.

The multipurpose cash programme significantly contributed to meeting the basic needs of vulnerable households by enhancing their purchasing power and enabling them to prioritize expenditures according to their specific circumstances. The flexibility of the assistance reduced reliance on negative coping strategies, which were exercised by the majority of the affected communities after the earthquake hit. The cash injection has also helped in stimulating local markets by increasing the demand for goods and services.

The household survey result indicated that most people believe (87%) the cash support was enough to cover their household food needs, and 92% of households interviewed reported the cash intervention had contributed to improving their household food security.

Table 8: Communities' perception of cash programming

	Overall			Aleppo			Hama		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Cash support enough to cover the HH's food needs?									
• Yes	84%	89%	87%	77%	85%	82%	91%	95%	93%
• No	16%	11%	13%	23%	15%	18%	9%	5%	7%
Cash support has improved your household food security.									
• Yes	89%	94%	92%	91%	94%	93%	87%	95%	91%
• No	11%	6%	8%	9%	6%	7%	13%	5%	9%
HH income improved because of the cash grant.									
Strongly agree	4%	15%	10%	5%	18%	13%	4%	10%	7%
• Agree	64%	67%	66%	55%	65%	61%	74%	70%	72%
• Undecided	20%	7%	13%	27%	3%	13%	13%	15%	14%
• Disagree	11%	4%	7%	14%	3%	7%	9%	5%	7%
• Strongly disagree	0%	7%	4%	0%	12%	7%	0%	0%	0%

The cash for livestock and agriculture interventions have played a key role in strengthening self-reliance and restoring productive capacity among vulnerable communities engaged in farming and livestock rearing. Targeted households were able to purchase essential agricultural inputs such as seeds, tools, and livestock.

Findings from the PDM for cash for livestock revealed that 63% of households reported an improvement in their ability to meet food needs, while 57% noted an increase in income.

However, feedback from Focus Group Discussions (FGDs) in Hairbenfsh, Hama governorate, highlighted concerns about the adequacy of the support. Many participants felt that the cash assistance was insufficient to cover the full cost of purchasing livestock and feed, forcing some community members to borrow additional funds, which in turn led to financial strain.

Protection and gender

Under the protection component of the project, distribution of PLW kits and winterization kits was carried out in Aleppo and Hama governorates, while Individual Protection Assistance (IPA) was provided across all three targeted governorates.

Findings from the PDMs for both PLW and winterization kits indicate that the majority of beneficiaries expressed satisfaction with the quality and quantity of items received.

Furthermore, evidence from the PDM of IPA beneficiaries highlights the effectiveness of cash-based protection assistance in addressing urgent needs and reducing vulnerabilities. A significant majority—90% of interviewed beneficiaries—reported that the support enabled them to meet immediate needs such as medical treatment, winter clothing, rent, and school supplies.

However, beneficiaries also expressed concerns about the temporary nature of the assistance and emphasized the need for more sustained and long-term support to help them recover and rebuild their lives.

Distribution of MHM kits with 6 iterative MHM sessions to 12 schools and implementation of initiatives based on consultations with the participating girls. The initiatives included providing hygiene materials for the schools, cabinets, sanitary pads, curtains, water tanks, and painting materials. Capacity building training (on gender in emergencies, transformative leadership, MEAL, and HR) to 30 local actors, GBV awareness to the larger community (GBV awareness sessions for Male and female groups), and DRR training for schoolteachers are the key activities implemented under the gender subcomponent of the project. Moreover, to mitigate potential GBV issues, 480 female community members and 120 male community members from three communities in Aleppo, one in Hama, and two in Lattakia were provided with training on GBV and gender equality, with 6 sessions for females and 3 sessions for males.

As per the household survey findings, communities were able to identify different protection risks affecting the community, and the most common ones are Theft/robbery, lack of basic services, inability to access basic services, child labor, and early marriage. However, close to 27% (11 Male

and 3% female respondents) of the interviewed households were not able to identify any protection risk.

The survey results also indicated a high level of awareness and knowledge on protection, referral pathways, and mechanisms within the community, as close to 98% of respondents were able to identify at least one appropriate action to take when faced with or informed about protection risk. Among them, 48% referred to local leaders, 39% mentioned reporting to community-led conflict/dispute resolution structures, and 17% indicated reporting to local authorities. However, 2% either did not know what to do or stated they would take less or no action.

The teachers who participated in KIIs confirmed that the MHM kit distribution to adolescent girls has contributed a lot to building the confidence of the female students and allowed girls to attend schools regularly without interruption. Moreover, it has helped their families by reducing their financial burden. The awareness sessions targeting female students have also helped female students by raising their basic understanding of hygiene practices during menstruation, types of safe use of menstrual products, and safe disposal of menstrual waste.

The project successfully conducted a capacity-building training targeting 30 local actors, including women's rights organizations, women-led organizations, and gender-focused interest groups operating in the project areas. The training primarily aimed to enhance participants' understanding of gender in emergencies, support gender mainstreaming in their programs, and strengthen their ability to implement gender-related activities effectively.

Feedback from Key Informant Interviews (KIIs) indicates that the training significantly contributed to improving the organizational capacity and operational approaches of these local actors. Most interviewees reported that they have begun integrating the basic gender concepts learned during the training into their regular operations, demonstrating a positive shift in practice and commitment to gender-responsive programming.

Factors contributing to the effective implementation of the project

As per the findings from the KIIs with Oxfam staff, the following are internal and external factors that significantly contributed to the project's effectiveness.

Internal factors

The project benefited from strong technical capacity within the team, supported by effective internal coordination mechanisms such as joint planning, joint assessments, and regular planning and review meetings. The joint assessments ensured accurate identification of beneficiaries, while integration across departments enabled the delivery of complementary activities. Established policies and procedures, particularly in procurement (e.g., framework agreements with suppliers and construction works), also facilitated timely implementation by reducing delays in procurements. Overall, strong teamwork, structured planning, and robust systems contributed to efficient and coordinated project delivery. In addition, strong management and leadership support played a central role in guiding implementation, providing timely decision-making, and ensuring effective oversight. Most importantly, the project demonstrated strong internal integration with other

earthquake response projects/grants (ECHO, SHO, Appeal grants, Syria joint response funding, etc.), which enhanced synergies, avoiding duplication, providing complementary support to the needy communities, and maximizing the overall impact of the response.

External factors

Externally, the project's effectiveness was enhanced through active engagement and collaboration with different coordinating mechanisms, including the INGO forms, WASH, protection, GBV, NFI clusters, and the cash working group. Strong coordination with local authorities helped ensure access, legitimacy, and responsiveness to local needs.

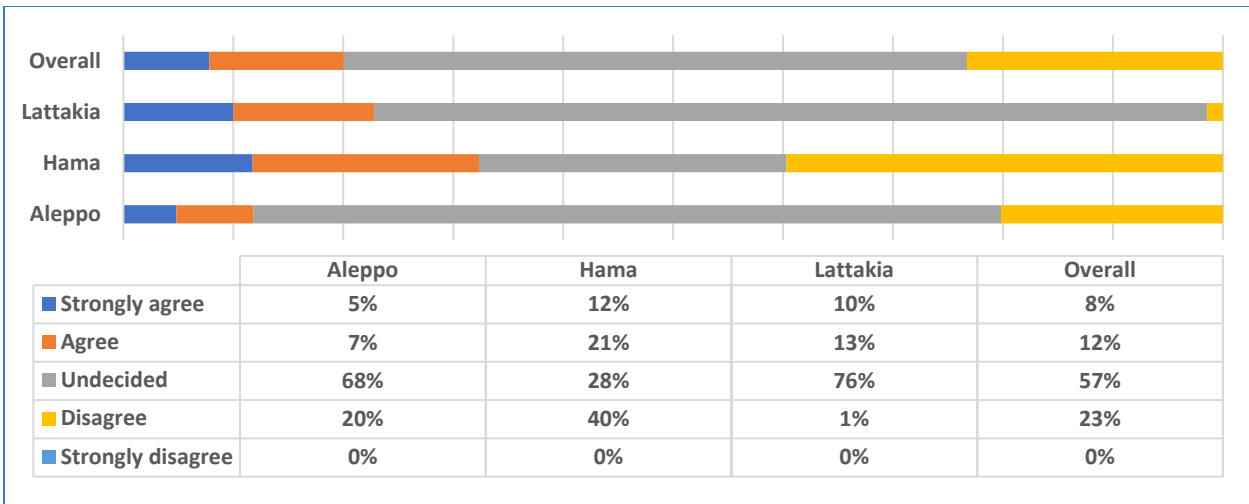
Despite the positive results achieved, some unintended negative outcomes were reported. The Menstrual Hygiene Management (MHM) sessions for male counterparts were not well accepted by communities due to cultural sensitivities and social norms, which limited participation and the intended awareness-raising impact. In addition, cash assistance for livestock support was considered insufficient by FGD participants in Hama governorate, as the amount provided did not cover the cost of high-value livestock such as milking cows and associated feeding expenses. As a result, some households were compelled to borrow additional funds, which in turn pushed them into debt and financial strain, undermining the resilience the project aimed to strengthen.

6.6 Efficiency

The timeliness of project delivery received mixed feedback from community members. According to the survey findings, a significant portion of respondents (57%) were unable to clearly assess whether the project was implemented on time. Meanwhile, 20% explicitly reported delays in receiving support, citing issues such as late distribution or interruptions in service delivery. On the other hand, another 20% indicated that the assistance—particularly WASH and protection interventions—was delivered in a timely manner.

In contrast, findings from multiple PDMs (covering PHP, PLW kits, MPCA, winterization kits, and livestock support) show a more positive perception, with 98% of interviewed households reporting that humanitarian assistance was delivered at an appropriate time based on their needs.

Figure 3: Timeliness of project support



An exception emerged among the male FGD participants in Al-Safire sub-district of Aleppo governorate, who felt that the distribution of the winterization kit was not timely. According to their input, the kits were distributed in January, whereas it would have been more effective to distribute the items in November, prior to the onset of harsh winter conditions. This feedback highlights the importance of aligning seasonal interventions with the local climate calendar to maximize impact and community satisfaction.

The evaluation revealed strong coordination and collaboration with respective local authorities, which significantly contributed to the project’s acceptance and smooth implementation. The project team actively engaged with the INGO forum and participated in different cluster meetings, ensuring information sharing and alignment with broader humanitarian strategies and avoiding duplication of efforts. In addition, robust referral linkages were established with various protection actors, enhancing service delivery and ensuring that affected communities accessed appropriate support beyond the scope of the project. These efforts demonstrate that the project maximized efficiency by leveraging existing coordination platforms and partnerships, while also complementing the work of other humanitarian actors in the response.

Overall, the project demonstrated a moderate to high level of efficiency in delivering its multisectoral interventions across WASH, food security, protection, and gender components. Overall, activities were implemented within the planned timeframe despite some challenges due to access constraints resulting from insecurity, delayed approval from authorities, and supply chain disruptions. Budget allocation to most of the activities was sufficient, and utilization was closely aligned with projects with minimal variances between planned and actual expenditures. Resource allocation across sectors was generally well balanced, and cost-effective measures such as joint community mobilization and integrated service delivery enhanced operational efficiency. Coordination with respective local authorities and community structures minimized duplication of efforts and enabled shared use of resources, particularly in remote areas. However, certain inefficiencies in procurement lead times for some distributed materials resulted in delayed distribution, and the quality of the items distributed was observed. Despite these challenges, the project’s multi-sectoral integration

and emphasis on gender sensitive planning, strong collaboration with local authorities and respective sectoral offices contributed to effective use of resources and maximized impact relative to inputs.

6.7 Impact

The project brought tangible improvements in the lives of earthquake-affected communities in the targeted locations through an integrated approach targeting the critical needs of the community in WASH, food security, and protection.

WASH

The project's substantial investment in WASH infrastructure and services has made a multi-level impact, benefited the communities, and capacitated local authorities and water authorities. These contributions not only improved access to safe and equitable water but also ensured long-term sustainability, institutional capacity, and public health protection.

Household and community level impact

Enhanced access to safe water and reliability: The activities implemented by the project have resulted in more reliable and affordable access to safe water. Community members reported that they can now access water from locations closer to their homes. According to a household survey, 72% of respondents indicated that they no longer face issues with water supply and access.

Furthermore, the majority of communities now rely on safe water sources, such as public water networks, which have significantly improved the overall quality and safety of water available to them.

Improved functionality and sustainability: The operation and maintenance of water systems, including the rehabilitation of water wells, have significantly enhanced water delivery and reduced system downtimes. Community members have reported fewer disruptions, longer water distribution periods, and improvements in water pressure and quality.

Key Informant Interviews (KIIs) with local authority representatives from Lattakia Governorate, Beit Yashout, and Lattakia Sub-district highlighted the severe water scarcity in villages before the project intervention.

"Thanks to the project, water is now available every 6 days— compared to once every 26 days before the intervention— greatly improving access and reliability for the community"

KII participant from local authorities, Lattakia

Improved sanitation and environmental health: operation and maintenance of sewage systems and treatment plants helped to mitigate environmental contamination risks, improved latrine access and use, and improper waste disposal, contributing to safer living conditions.

“The absence of materials, technical inputs, and budget for maintenance had severely hindered the operation of the water treatment plant in Hama, rendering it nearly non-operational for an extended period due to aging infrastructure and lack of upkeep. With support from Oxfam, the treatment plant was successfully restored. This intervention helped prevent the discharge of untreated water, thereby reducing contamination risks to soil, water bodies, and surrounding communities. Additionally, the restored plant has provided local farmers with a reliable and safe source of irrigation for fruit trees such as peach, plum, and greengage—contributing to improved food security in the area.”

All participant from water authorities, Hama

Households demonstrated improved hygiene behaviors, particularly in handwashing practices, menstrual hygiene management, and solid waste disposal. These positive changes in hygiene and sanitation, combined with improved access to safe water, have contributed significantly to the reduction of waterborne diseases in their households during the two weeks preceding the survey—indicating a strong correlation between the project’s interventions and improved health outcomes.

Institutional and system-level impact

Reduced operational burden on authorities: By upgrading and renovating infrastructures, the project significantly lowered maintenance and operation costs for local water authorities. This helped reduce financial burden on local authorities and improved service continuity.

Capacity building and service continuity: the project enhanced the technical and managerial capacity of local water authorities through direct support and provision of critical tools and spare parts. As a key achievement, for example, the provision of advanced laboratory equipment enabled water authorities to conduct accurate and regular water quality monitoring. This improved organizational capacity to detect and respond to contamination, prevent public health risks, and ensure regulatory compliance.

Food Security and Livelihoods

Though limited in scale, the food security and livelihoods intervention provided critical support to vulnerable households facing food insecurity and livelihood disruption.

Improved household food security: though it is for the short term, the multi-purpose cash support allowed beneficiary households to meet essential food and non-food needs with flexibility and dignity. The majority of the survey respondents (77%) witnessed that the cash support has contributed towards improving household food security. The cash for agriculture and livestock restocking activities enables households to buy agricultural tools, inputs, and livestock, which helps to restore their productive capacity.

Strengthened coping mechanisms: The cash assistance not only addressed immediate food gaps but also reduced the need for negative coping strategies such as asset selling or reducing meals.

Protection and Gender

The protection and gender interventions contributed to enhancing the safety, dignity, and resilience of the most vulnerable groups, improved awareness of community members and girls in school on Gender Equality and MHM with GBV and built the capacity of local actors for better project management and gender in emergencies.

Individual protection assistance (IPA): IPA supported 174 individuals are enabling them to address their pressing needs and encouraged them to access basic services.

Seasonal support: distribution of winterization kits provided critical protection against cold-weather risks, particularly for displaced people living in substandard housing. Apart from the delay in distribution and quality of items mentioned in some locations, the distribution of this kit has supported vulnerable households to survive the cold weather.

Gender based violence (GBV) prevention and awareness: GBV awareness sessions were conducted for both male and female community members. These sessions contributed to increased awareness among the targeted groups. However, the impact appears to be limited to these specific groups, with no evidence of the information cascading to the broader community, and it was completed just a month before the evaluation.

A Key Informant Interview (KII) participant from the local partner implementing the GBV component of the project noted that the sessions helped shift community attitudes toward harmful traditional practices (HTPs), such as child marriage. Additionally, the sessions enhanced community awareness of available GBV services.

The distribution of MHM kits and the related initiatives, along with awareness activities, helped schoolgirls break taboos surrounding menstruation. This contributed to increased confidence and improved regular school attendance. Furthermore, the kits helped reduce the financial burden on families.

6.8 Coherence

The project demonstrated strong internal coherence across its WASH, food security, gender, and protection components. The project design ensured that these sectors are strategically integrated to address the multifaceted needs of earthquake-affected populations, contributing to a holistic and coordinated response. Activities, outputs, and outcomes of the project are well aligned with the overall objectives of the project, and the implemented activities are found to be complementary to each other. The project is aligned with Oxfam's humanitarian mandate and broader operational framework. As part of the earthquake response program, Oxfam in Syria has been implementing different projects funded by ECHO, Appel, Syria joint response funding, etc., and this project was well integrated with those fundings.

Externally, the project was consistent with national and governorate humanitarian priorities and respected the guidance of relevant cluster strategies, including WASH, Food security, and protection clusters. Active engagement in coordination platforms and joint assessments with UN agencies,

NGOs, and local authorities helped prevent overlap and ensured complementarity with other ongoing interventions. Nonetheless, opportunities remain to strengthen inter-sectoral linkages at the field level and to enhance collaboration with government bodies for longer-term sustainability.

Oxfam was coordinating with the local water establishment on the rehabilitation of key water infrastructures and with Municipalities for sewage-related activities. Oxfam has jointly planned and implemented the activities with the respective authorities.

Local authorities and Representatives from water authorities who participated in the KIIs have confirmed that there was strong collaboration with Oxfam in project design, planning, and implementation through joint planning, different consultative meetings, and daily follow-up.

6.9 Sustainability

The project made important contributions towards the sustainability of its results across WASH, food security, protection, and gender sectors. Efforts to promote sustainability were evident through local authorities, community-based structures, and sector-specific service providers throughout the project cycle. In the WASH sector, the rehabilitation of water systems was accompanied by the provision of tools and spare parts to ensure continuity of services and enhance their capacity to manage and maintain the infrastructure beyond the project period. The provision of cash for agriculture and livestock helps communities to reduce dependency by enabling households to improve their productive capacity.

In the protection and gender component, the project invested in awareness raising and coordination with different actors for referral, which ensures the service continuity after the project completion. The involvement of trained community volunteers has the potential to continue working with other actors and the local government even after the project ends.

However, sustainability remains partially challenged by contextual factors such as insecurity and ongoing displacement, economic instability, and limited institutional capacity. While community ownership and local participation were emphasized, the ability of local actors to independently sustain service delivery remains uneven and would benefit from continued technical support and investment.

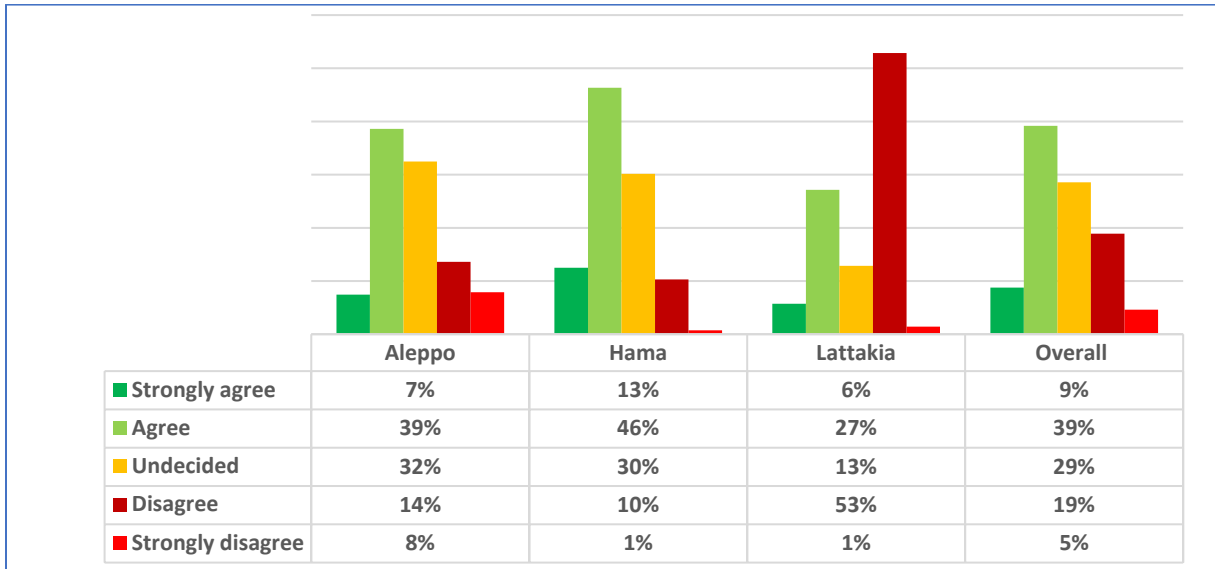
Overall, the project's integrated and participatory approach and massive investment, especially in the WASH sector, have laid the foundation for lasting impact, but future programming should prioritize strengthening local systems, increasing linkages with government structures, and ensuring continued capacity development to enhance long-term sustainability.

6.10 Accountability to affected populations

This section of the evaluation assesses the project's overall performance against Oxfam's accountability principles, with the focus on information sharing, participation, and community and feedback mechanisms (CFM).

Survey findings indicate that approximately 48% of respondents felt they received relevant information about the project throughout its implementation, while 24% reported they did not receive sufficient or relevant information. The remaining percentage were unsure if they had received relevant information or not. The data revealed location-based differences, with Lattakia governorate having a higher proportion of uninformed respondents compared to Aleppo and Hama. Analysis by sex of respondents showed no significant difference, with 47% of males and 49% of females reporting they received relevant information.

Figure 4: Information sharing about the project



In terms of community participation, the survey data indicate limited engagement of targeted households across all locations. More than 57% of interviewed households (with 60% of Male and 52% of female respondents) reported that they did not participate in any project cycles, including design, implementation, or monitoring. Participation rate also varied significantly by location: only 13% of respondents in Aleppo governorate reported full participation, compared to 33% in Hama and 23% in Lattakia. These figures underscore the need for more inclusive and structured community engagement mechanisms, especially during the planning and design stages, to ensure community voices are adequately represented.

Additionally, findings from various Post-Distribution Monitoring (PDM) exercises were reviewed to assess community awareness regarding the availability of community and feedback mechanisms. The results consistently show low levels of awareness, with only 40% of respondents across the different PDMs reporting that they knew about the available channels for submitting feedback or complaints.

About community and feedback management, although systems were reportedly in place by Oxfam and partners for most project locations, awareness and utilization remained notably low. Only 24% of respondents (25% male and 22% female) stated that they know how to provide feedback or

complaints related to the project. Among those aware, the most common channels used were face-to-face reporting to project staff and reporting through community representatives. However, actual usage of these mechanisms was minimal -only 5% of the surveyed households reported having submitted feedback or complaints during the project period. This highlights the need for increasing accessibility through diversified channels, stronger promotion of the available CFM, assurance of confidentiality, and follow-up mechanisms to build community confidence and increase utilization.

In summary, while the project demonstrated efforts to meet accountability standards, particularly in establishing CFM structures and sharing some information, there remain significant gaps in community participation, information flow, and feedback uptake. Future interventions would benefit from adopting a more systemic, inclusive, and transparent approach to accountability, ensuring that affected populations are not only informed but also meaningfully engaged and heard throughout the project lifecycle.

6.11 Oxfam Humanitarian Approaches

Oxfam's humanitarian approach centers on four pillars: feminist principles, local humanitarian leadership, safe programming, and community engagement. The focus in these approaches is on empowering local actors, ensuring safety in whatever we are doing, and making sure that we are not causing any harm to the people we are working with, while addressing the root causes of the crisis while upholding human rights, and promoting accountability.

Feminist approach

The project has made an effort to integrate elements of a feminist approach by prioritizing gender equality, addressing structural barriers, and promoting women's and girls' agency across all sectors. As part of addressing the different impacts of earthquake and crisis on women, men, girls, and boys, project designs were based on gender and power analysis and community gender protection analysis (CGPA). Though participation of communities in general was not at full scale, an effort was made to ensure engagement of women in the different cycles of the project.

In the WAH component, MHM kits distribution and awareness sessions not only addressed the practical needs but also challenged stigma and taboos around menstruation, enabling adolescent girls to participate more fully in school and community life. Within the protection component, the project delivered GBV awareness raising sessions for adolescent girls in school and to community members, both women and men, equipping them to identify, prevent, and respond to gender-based risks.

The food security was limited, but all the cash assistance (MPCA, Cash for agriculture, and cash for livestock) was designed to benefit both male and female-headed households, and the most vulnerable women were made to be prioritized.

Across all sectors, the project promoted inclusive participation, equitable access to resources, and empowerment of women and girls as right holders. While the project was primarily implemented in a humanitarian context, these actions laid the groundwork for transformative change by fostering

an environment where women's voices are valued, their protection is prioritized, and barriers to equality are addressed.

Local humanitarian leadership (LHL)

Oxfam is dedicated to empowering local actors and networks, enabling them to lead and shape humanitarian programmes. Below are key actions taken by the project to promote local humanitarian leadership:

1. Strengthening Local Capacity

- The project worked closely with local authorities, community representatives, and grassroots organizations to plan, implement, and sustain interventions.
- By engaging local water authorities in the operation and maintenance of WASH systems, and providing technical support and tools, the project enhanced local capacity for improved service delivery.

2. Building Gender-Sensitive Response Capacity

- Capacity-building training was provided to 30 local actors, including women-led organizations (WLOs), women's rights organizations (WROs), and youth groups.
- The training aimed to improve their ability to address the diverse needs of women, girls, men, and boys affected by the earthquake, and to integrate gender considerations into their programmes.
- Key Informant Interviews (KIIs) revealed that participants gained a deeper understanding of women's central role in humanitarian response and adapted their approaches accordingly.

3. Enhancing Emergency Preparedness

- To strengthen community preparedness, 80 teachers from 12 targeted schools received training on Disaster Risk Reduction (DRR). However, the coverage was limited relative to the project's geographic scope, indicating a need for broader outreach.

4. Collaborative Partnership with SSSD

- One local partner, SSSD, was involved in implementing the GBV awareness and kit distribution component.
- According to KIIs, the partnership with Oxfam was built on mutual trust, shared values, and joint decision-making.
- SSSD reported receiving technical, financial, and advisory support and felt meaningfully engaged throughout the project lifecycle.

Safe programming

Safe programming in humanitarian work refers to the deliberate integration of protection, safeguarding, and do no harm principles into all stages of programme design and delivery to ensure that assistance protects and upholds the safety, dignity, and rights of crisis-affected people.

At the onset of the project, a safe programming risk assessment was conducted to identify potential risks that could arise from project activities and to define appropriate mitigation measures. However, this process was not maintained on an ongoing basis, as regular updates to the risk assessment were not conducted through implementation.

Wherever required, project implementation adhered to the principle of confidentiality, and safe physical and social spaces were created to enable dignified and inclusive participation. Multiple and complementary feedback and complaints channels were made available to the community; however, utilization of these mechanisms remained low due to various factors, including limited awareness and cultural barriers.

To strengthen internal capacity, project staff received training on safeguarding and the organizational code of conduct, helping to equip them with the skills and competencies necessary to integrate safe programming principles into daily operations. While the project made notable efforts in embedding safe programming, sustaining and enhancing these practices would require ongoing risk monitoring, improved awareness of the community and feedback mechanisms, and continuous capacity development of staff.

Community engagement

Community engagement is a central aspect of humanitarian programming, ensuring that affected populations are actively involved in the planning, implementation, and monitoring of activities and that their voices are heard and considered in decision-making. However, evidence from both quantitative and qualitative data indicates that community participation in this project was quite limited. Only a few FGDs were conducted during the design phase, restricting opportunities for communities to influence project priorities from the outset. Household survey results showed that only 20% of respondents reported participating in any phase of the project. Similarly, most FGD participants stated that their engagement was minimal, with involvement largely limited to a few community committees participating in the beneficiary selection process. These findings highlight the need for more systematic and inclusive community engagement mechanisms to ensure greater ownership, transparency, and responsiveness in future interventions.

7. Conclusion and Recommendations

7.1 Conclusion

The DEC-funded earthquake response project implemented by Oxfam in Syria has made significant strides in addressing the immediate and medium-term needs of affected communities across Aleppo, Hama, and Lattakia governorates. Through a multi-sectoral approach encompassing WASH, food security, protection, and gender, the project has contributed to restoring essential services, improving household resilience, and promoting dignity and safety among vulnerable populations.

The evaluation findings demonstrate that the project was largely relevant, effective, and impactful, particularly in the WASH sector where infrastructure rehabilitation and hygiene promotion led to improved access to safe water, sanitation facilities and reduced public health risks. The food security

and livelihoods interventions, though more limited in scale, provided critical support to vulnerable households, enhancing their purchasing power and restoring productive capacity. Protection and gender components contributed to increased awareness, reduced stigma, and improved access to essential services, especially for women and girls.

However, challenges remain in ensuring equitable coverage, timely delivery, and sustained community engagement. Gaps in community participation, feedback uptake, and the quality and timing of distributed items were noted. While efforts were made to promote sustainability through capacity building and infrastructure support, contextual factors such as economic instability and limited institutional capacity continue to pose risks to long-term impact.

Overall, the project has laid a strong foundation for recovery and resilience, but future programming must build on these lessons to enhance effectiveness, inclusivity, and sustainability.

7.2 Recommendations

Complementarity and coordination

- Continue with strengthened collaboration with local authorities and maintain active participation in different forums and cluster coordination mechanisms to sustain alignment with humanitarian priorities. In addition, documenting and sharing best practices from these coordination efforts would help inform wider humanitarian response strategies and foster stronger inter-agency collaboration

Coverage of trainings

- While the project successfully delivered targeted trainings, such as GBV awareness sessions for community members, gender mainstreaming trainings for adolescent girls in schools, DRR training to schoolteachers, etc. and these efforts reached only few numbers of participants. The evaluation found no clear strategy to cascade or disseminate the knowledge and skills gained to the wider community. As a result, the broader impact of these efforts on community behavior and practices remained constrained. It is highly recommended that future programming integrates mechanisms to ensure that training outcomes extend beyond direct participants through working with peer-to-peer learning groups, community-based structures, etc.

Strengthen Community Engagement and Participation

- Establish structured and inclusive mechanisms for community involvement throughout the project cycle, especially during design and planning stages.
- Promote meaningful participation of women and marginalized groups to ensure interventions are responsive and equitable.

Enhance Timeliness and Responsiveness

- Align seasonal interventions (e.g., winterization kits) with local climate calendars to maximize relevance and impact.
- Improve procurement and supply chain processes to reduce delays and ensure the quality of distributed items.

Improve Accountability and Feedback Mechanisms

- Increase awareness and accessibility of community and feedback mechanisms (CFM), ensuring confidentiality and responsiveness.
- Regularly analyze feedback data to inform adaptive programming and strengthen trust with affected populations.

Expand and Deepen Sustainability Measures

- Continue investing in local capacity, especially among water authorities and community-based structures, to ensure service continuity.
- Strengthen linkages with government systems and local actors to embed interventions within broader development frameworks.

Scale Up Gender and Protection Programming

- Broaden the reach of GBV awareness and MHM initiatives to include wider community engagement and male involvement.
- Ensure protection risk assessments are regularly updated and integrated into all sectors of programming.
- As a standard, it is highly recommended to have at least one gender mainstreaming indicator in every project.

Promote Local Humanitarian Leadership

- Deepen partnerships with local organizations through joint planning, capacity building, and shared decision-making.
- Support local actors in leading emergency preparedness and response efforts, fostering long-term resilience.

Institutionalize Safe Programming

- Maintain and update safe programming risk assessments throughout implementation.
- Continue training staff and partners on safeguarding, do-no-harm principles, and inclusive service delivery.

Annexes:

Annex 1: Activities implemented, and people reached, per location



Activities
implemented and peo

Annex 2: Locations for data collection



locations for data
collection.xlsx

Annex 3: HH survey data set and analysis



HH_Survey tool DEC
final evaluation (versi

Annex 4: Qualitative data summary



Qualitative data
summary KII with autl