SUMMARY

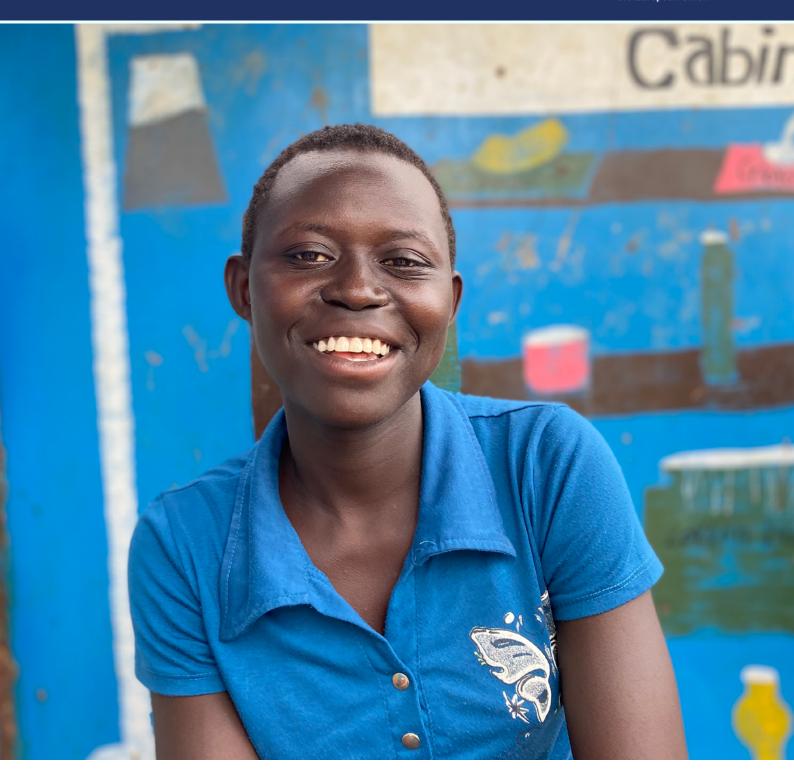
Joining Forces for Africa: Final Evaluation Summary Report

Joining Forces for Africa (JOFA)



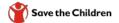


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0. INTRODUCTION

The Joining Forces (JF) Alliance, a collaboration between the six (6) biggest children focused agencies Child Fund Alliance, Plan International (lead), Save the Children International, SOS Children's Villages International, Terre des Hommes International Federation and World Vision International initiated in June 2017 to accelerate the Sustainable Development Goals (SDG) for Children while achieving measurable improvements in the lives of children through ending violence against children and advancement of children's rights.

JOFA Background

The Alliance has recently concluded implementation of the project "Joining Forces for Africa (JOFA) - protecting children during the COVID-19 crisis and beyond" in five countries (Senegal, Mali, Ethiopia, Kenya and Uganda) across three years (August 2020-2023). Funded by the European Union (EU) to address and advance protection related issues of children while responding to unfolding humanitarian crisis as a result of COVID-19 and its secondary impacts, the overall objective of the project was to ensure that children and adolescents experience reduced levels of violence, abuse, exploitation and neglect. The specific project objectives were to contribute to the strengthening of national and local protection and response systems; the improvement of protection in resilient families, communities and institutions in the context of COVID-19 and during recovery phase; the increase of capacity and agency of children to prevent and respond to violence against them during COVID-19 crisis and recovery phase; and the increase of learning and sharing of knowledge and best practice related to child protection approaches

Objectives and scope of the evaluation

The purpose of this evaluation was to assess the project's performance and identify the project's achievements, challenges and best practices in order to inform future similar programmes. The evaluation also ensures accountability to the beneficiaries of the programme and to the European Union as a donor. On the other hand, it offers a learning aspect for all incountry consortium partners, stakeholders and JOFA Alliance agencies.

JOFA Objectives

- Strengthen national and local protection and response systems.
- Improve protection in resilient families, communities, and institutions in the context of COVID-19 and during recovery phase.
- Increase capacity and agency of children to prevent and respond to violence against them during COVID-19 crisis and recovery phase.
- Increase learning and sharing of knowledge and best practice related to child protection approaches.

Key facts

- **Duration**: 06.08.2020-05.08.2023
- Budget 10,000,000 € EU Funding 771,486 € consortium members

Countries: Ethiopia, Kenya, Mali, Senegal,

- Uganda.
- Direct beneficiaries:

439,000 child beneficiaries 3,000 service providers 23,000 parents and caregivers



2. OVERVIEW OF THE METHODOLOGY

Each project country team conducted a final evaluation to provide insights on the project's results as well as successes and challenges. This report consolidates those findings to inform future similar JOFA or non-JOFA projects.

Each country evaluation was informed by a review of existing information and relied on a mixed-method design. Primary quantitative data was gathered through the same methods, tools and sampling strategies used for baseline, outcome monitoring exercises and midterm review, which included surveys with children aged 10 to 17, peer-based network members, parents and caregivers and child protection actors, focus group discussions with children, Community Based Child Protection

Mechanisms (CBCPM) and in some cases also with parents and caregivers, and key informant interviews with project staff and staff from other child protection agencies working in the same areas as JOFA.

The information was gathered in the five countries from June to August 2022.

The final evaluations (country level and consolidated) also reviewed secondary data sources, including relevant monitoring reports, including baseline and midterm reviews, needs assessment, ways of working documents, implementation plans and targets, Monitoring and Evaluation (M&E) framework, meeting minutes, etc.



3. SUMMARY OF EVALUATION FINDINGS

Relevance

The implementing countries were selected based on a high risk of negative impacts due to the COVID-19 crisis as well as high needs for child protection and long-term presence of Joining Forces agencies in the countries. Within the countries, locations were chosen based on high pre-existing needs, children's vulnerability to multiple forms of violence and existing presence of JOFA members. In all countries, the choice of implementation areas was deemed relevant.

Project Design: Due to the short timeframe, the team at global level developed the project logic, including the expected impact, the four specific objectives and the thirteen result areas.

The country teams were then asked to add their proposed activities under each result, selecting from a "menu" of 63 activities based on relevance to their context and on discussions from technical sharing workshops organised to understand what evidence-based child protection approaches and methodologies have been used successfully by consortium members. The project design was also based on country-specific needs assessments undertaken during year 1 and year 2. As a result, the project managed to adapt to the needs and specificities of each context but also target areas within each country.

In all countries, all categories of stakeholders including parents, community leaders, child protection actors and children have reported being consulted either through the various

assessments done or through initial consultations at the start of a new cycle of activities. In the vast majority of cases, these stakeholders argued that the project was relevant to addressing the needs of children. However, some gaps were also mentioned including one major one: economic strengthening. The project was implemented in all countries in areas where households lack access to basic needs and economic resources. This was further amplified by the COVID-19 pandemic which destroyed or paused many households' livelihoods.

Poverty is also considered a strong driver of some major child protection issues such as child labour, exploitation, child marriage and often violence against children in the household due to increased stress and tension.

The project involved notable efforts to include specific target groups such as girls and children living with disabilities. All country teams collect disaggregated data by age, disability and gender for all activities and indicators. Inclusion of disability-related data and consistent gender-related data was however added at the end of the first year, which created challenges for country teams to track those specific beneficiaries retrospectively.

In most countries, inclusion of children and parents living with disabilities relied solely on integrating them into existing planned activities, but no specific targeted activities for people with disabilities were included in the project design to address their specific needs and barriers.

Increase learning and sharing of knowledge and best practice for child protection approaches





Between 2021 and 2023, the JOFA project produced two documents that, along with this final evaluation, provide useful data about both the progress and the impact of the project:

- Initial assessment report.
- Mid-term review.



Coherence

Overall, the project was considered aligned with National Child Protection Plans in all countries. The project has been working with governmental partners to support national and sub-national level processes to strengthen standard operating procedures (including COVID-19 response plans), as well as child protection guidelines, tools and referral pathways, and strengthening the capacities of national service providers.

The project was also considered aligned with international child protection standards (such as the INSPIRE strategies with the exception of the 5th strategy on income and economic strengthening) and the Joining Forces Safeguarding standards. The project also consistently aligned with international instruments such as the UN Convention on the Rights of the Child, The African Charter on the Rights and Welfare of a Child and Sustainable Development Goals 4, 5 and 16.

In all countries, the project has also been working in a coherent manner with other child protection interventions in the implementation areas. This was done particularly with projects implemented by Joining Forces Alliance members in-country (Childfund, Plan International, Save the Children, SoS Children's Villages, Terre des Hommes, World Vision) due to the existing relationship. Country teams in Ethiopia, Kenya, Mali, Senegal and Uganda have reported developing synergies with ongoing EU funded actions. Meetings have taken place with the local EU Delegations in all countries, which has helped to develop these synergies and ensure effective coordination.

In addition, the project teams maintain strong relationships with other key actors within the child protection sector in each country through participation in child protection coordination form. In particular, good relationships are maintained with UNICEF country offices in all 5 countries.

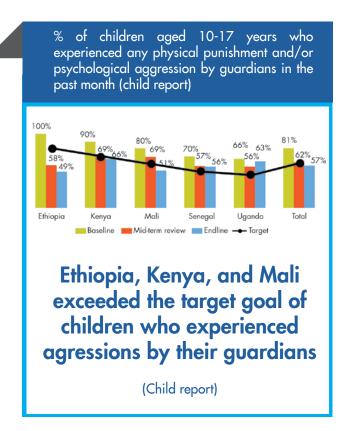
Effectiveness

Impact indicators: Reduced levels of violence, abuse, exploitation and neglect experienced by children and adolescents experience.

The endline evaluation looks at progress towards reaching the impact of reducing all forms of violence against children in Senegal,

Mali, Ethiopia, Kenya and Uganda. The graphic below presents results based on children's and parents' report and we can see good progress in almost all countries.

Qualitative testimonies confirmed an overall reduction of Child Protection violations in all countries.





Outcome 1: Strengthened national and local protection and response systems

JOFA members collaborated with child protection actors and civil society organisations to review, update and disseminate referral pathways to support the strengthening of the child protection systems as a sustainability strategy. In all areas covered, Child Protection actors were trained on case management and standard operating procedures.

The endline evaluation measured the increase in self-confidence and knowledge of Child Protection actors in the supervision areas which shows great improvement since the baseline, only 2 countries did not reach the target set from themselves: Senegal and Uganda.

% of child protection actors (formal and nonformal) who report feeling self-confidence that they have the skills and knowledge to respond to child protection risks during COVID-19

	Ethiopia	⊒⊫ Kenya	Mali	* Senegal	Ugando	ı Total
Target	40%	60%	70%	50%	55%	55%
Baseline	0%	26%	36%	9 %	32%	21%
Mid Term	26%	50%	67%	25%	31%	40%
Endline	63%	54%	77%	29%	48%	54%
Target reached				Sar e) prog		Regression

Overall, the endline findings shows that the knowledge and skills of formal and non-formal child protection actors across the target areas has been continuously enhanced through various trainings, support and mentoring on case management, community based psychosocial support, and standard operating

procedures for identification, reporting and referrals, among others. They are now fully able to identify and refer cases. The turnover of trained staff and the remaining cultural barriers leading many cases to go unreported are nonetheless persisting challenges faced in JOFA communities in most countries.

Outcome 2: Improved protection in resilient families, communities and institutions in the context of COVID-19 and during recovery phase

The JOFA team also engaged more than 34.000 parents and caregivers, including men, in parenting skills sessions through approaches such as Parenting without Violence.

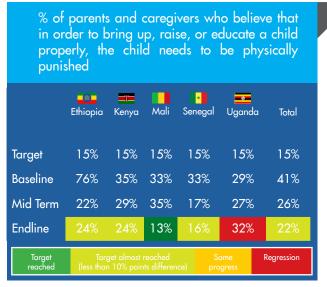
In all countries, consulted parents have acknowledged some changes in the perceptions and attitudes towards their children and the way they communicate and raise them.

This is confirmed by the table aside for most countries.

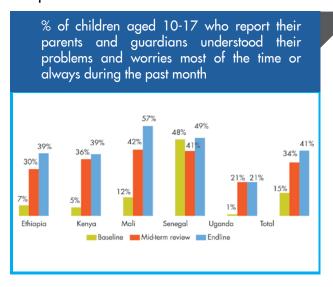
The results in Uganda are particularly skewed by the high proportion of parents who believed a child needs to be physically punished in the urban areas of Kamapala and Wakiso.

It is noted that the sampling methodology in the parents survey did not specifically target participants of project activities and that due to the high population in urban areas such as Kampala, the probability of the sampled parents having actually taken part in the project activities is very low, especially when compared to other target regions.

A detailed review of results for this indicator across all target areas in the five countries showed reductions in almost all areas, and increases only in urban areas with a high population and therefore low probability of sampling project participants.



The evaluation also looked at the proportion of children who reported their parents and guardians understood their problems and worries most of the time or always during the past month. Progress was noted in most countries but the same 2 countries did not reach their target with only limited progress observed in Senegal and Uganda. It should also be noted that the baseline figure in Senegal was already surprisingly very high compared to other countries.



The evaluation also measured the percentage of parents and caregivers who self-report increased ability to manage stress and provide protective and nurturing environments for their children.

This was also a complex indicator to measure as it computes five separate variables, including the ability of parents to communicate around COVID, which became less relevant from the end of year two. As such, JOFA decided to focus on the first three variables measured by the indicator (results are presented below.)

Section A: There are still few parents surveyed who indicated that they were currently not stressed by parenting, with only a small increase from baseline in most countries.

Parents from all countries except Senegal reported to have increased ability to manage stress, and especially in Ethiopia.

In regards to managing challenging child behaviour, endline results show good progress in all countries except Uganda.

Section A: Current level of stress-proportion of parents not stressed			Section B: Ability to manage stress			Section C: Ability to manage challenging child behaviour					
	Baseline	Midterm	Endline		Baseline	Midterm	Endline		Baseline	Midterm	Endline
Ethiopia	0%	12,8%	13%	Ethiopia	0%	NA	97%	Ethiopia	2%	17,2%	10%
Kenya	8,64%	1,7%	8%	Kenya	24%	48%	52%	Kenya	11%	17,1%	22%
Mali	3,12%	5,2%	8%	Mali	16,67%	NA	58%	Mali	18%	26%	32%
Senegal	5,70%	7%	19%	Senegal	56,14%	45,6%	55%	Senegal	13%	14,7%	31%
Uganda	9,65%	12%	9 %	Uganda	28,07%	24,6%	37%	Uganda	15%	19%	7%

Parents from all countries except Senegal reported to have increased ability to manage stress, and especially in Ethiopia. In regards to managing challenging child behaviour, endline results show good progress in all countries except Uganda.

Lastly, Community-Based Child Protection Mechanisms (CBCPM) are also key players to improve protection in resilient families, communities and institutions. As such, the endline looked at the proportion of CBCPM in the project's targeted areas which can be considered as functional and recorded good progress in all countries.

Most of the community-based child protection mechanisms that were sampled were found to be operational and fulfilling their obligations. Overall, in all countries the increase in functionality of CBCPMs can be linked to JOFA's work. All country teams providing trainings and supporting CBCPMs to reach minimum standards and to support CBCPMs and traditional and religious leaders understand child protection risks.

% of supported community-based child protection mechanisms which are functional Total and carrying out their roles and responsibilities 70% 70% 70% **Target** Baseline 48,6% 19% Ethiopia and Ugada reached 65% Mid Term 100% 64% the target goal of functional 79% Endline 94% child protection mechanisms Indicator not assessed at baseline in Kenya

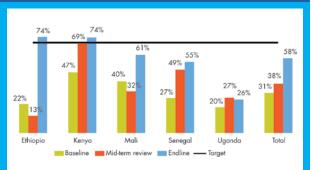
Outcome 3: Increased capacity and agency of children to prevent and respond to violence against them during COVID-19 crisis and recovery phase

In all countries, members of peer-based networks consulted through FGDs highlighted their increase ability to discuss with adults, to claim their rights and to mobilise their peers. Children were involved in life-skills sessions through approaches like Peace Road, Plan Z or Team Up through school clubs mostly.

The endline looked at the proportion of children who state that they are confident to report a protection violation to a reporting structure. The results from indicator measurement reflect both the confidence of children related to their own capacity and knowledge, but also related to the capacity of the reporting structures to which they should report within the local child protection systems.

The evaluation measured the proportion of targeted children who demonstrate knowledge of child protection risks and how to seek help, with improvements in all countries, albeit only minimal gains in some.

% of targeted children who demonstrate knowledge of child protection risks and how to seek help



Ethiopia and Kenya reached the target goal of children who demostrate knowledge of child protection risks In Ethiopia and Kenya, more than 70% (target) of children were able to identify the main types of child protection risks and ways to protect themselves from violence. Good progress was made in Mali and slower progress made in Senegal and Uganda.

As part of this outcome, JOFA is trying to foster an increased participation of children as active agents of change for ending violence. In order to assess this, the endline looked at the proportion of targeted children who could articulate the contribution their group has on ending violence against children and the percentage of members of peer-based networks who demonstrate adequate knowledge of child protection and child-friendly accountability approaches:

% of targeted children who can articulate the contribution their group has on ending violence against children

	Ethiopia	≕ ⊏ Kenya	Mali	★ Senegal	Uganda	Total
Target	80%	80%	80%	80%	70%	78%
Baseline	23,3%	0%	38%	0%	14,6%	22%
Mid Term	99,7%	58%	68%	71%	74%	74%
Endline	100%	96%	100%	99%	88%	97%

% members of peer-based networks who demonstrate adequate knowledge of child protection and child-friendly accountability approaches

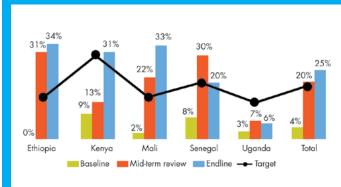
	Ethiopia	⊒⊫ Kenya	Mali	Senegal	U ganda	Total
Target	70%	70%	70%	70%	70%	70%
Baseline	19,9%	52,3%	37%	39%	34,1%	36%
Mid Term	32,1%	65%	15%	72,2%	43%	45%
Endline	85%	73%	22%	79%	54%	63%
Target reached		et almost rea 10% points d		Same progres		ession

In all countries except Mali, where challenges related to the data collection for one question were faced, members of peer-based network demonstrated increased knowledge of child protection risks and child friendly accountability approaches. Great progress has been made in supporting child clubs and other peer-based networks and groups to understand their contribution to ending violence all teams on track to reach or having already reached their targets. However, the project could have paid more attention to the ostracism and resistance expressed against peer educators and other members of the communities showing good

involvement in the project, which was seen as a negative effect in most countries.

The project also aimed to strengthening regional and national child participation mechanisms to enable children to conduct advocacy with decision makers on issues relating to violence and impact of COVID-19. This is assessed through the percentage of targeted children who report that their views are sought and incorporated into the decision making of regional or national government. As highlighted below, all countries are showing good progress compared to baseline.





Ethiopia, Kenya, Mali, and Senegal reached the target goal of children who report their views are sought and incorporated into the decision making of governments





Efficiency

Overall, external evaluators considered the project as efficient and well managed considering the number of outputs and results achieved with the allocated budget and time.

In most countries, the pooling of project's resources with those of the partners and the synergy established as well as the use of existing community and governmental structures were identified as strong factors of efficiency which allowed for cost reduction. Most activities have been delivered on time, despite some delays in most countries at the beginning of the implementation due to the discovery and contextualization of new technical approaches. In some countries, difficulties were encountered in making financial resources available in time to ensure that the quarterly action plans were implemented according to schedule.

Additionally, the project had a good governance structure and mechanisms at both global and country level. There is generally a clear delineation of roles and responsibilities across the different bodies and the working relationship across all entities was good. The project also created a good support system around the country teams but some of them would have appreciated receiving in-person support at the inception stage to have more guidance on the implementation

and contextualization of technical approaches and use of monitoring tools. This was however not possible due to COVID-19 related travel restrictions. Coordination and human resources management challenges were noted in a few countries, especially gaps in the monitoring and evaluation functions.

Working as a consortium brought significant added value as the different agencies were able to share good practices, experiences and learning and to have more weight in advocacy. Nonetheless, working with 14 different agencies and their headquarters was challenging at times as some agencies initially preferred to keep their own tools and practices. This, combined with the human resource gaps created difficulties in monitoring and evaluation at the start of the project, which were later resolved in years two and three.

Sustainability

The project developed comprehensive sustainability strategies at country level in all five countries, albeit in some cases relatively late (during quarter 11). Nonetheless, different sustainability strategies were included from project design, which included the use of the local government structures and systems to implement the project activities, and local capacity-building strategies including the

establishment of community-based committees and groups focused on the identification, reporting, and response to child violence to enhance child protection.

The first four result areas of the project logic and their related activities focus on strengthening child protection coordination mechanisms and services at national, sub-national and local levels for example. The project also built the capacity of community actors (including children) on leadership, communication and life skills among others, which often has long lasting effects on the targeted individuals.

Material support, including some support for ongoing transport and operational costs has been provided to child protection service providers, to enable them to confidently fulfil their role within the child protection systems at

local level. This was combined with advocacy activities to increase budget allocation to the child protection workforce at local and national government level, and to ensure child protection issues are incorporated into COVID-19 response plans. However, in many countries, the activities and support provided by the project have not yet received dedicated funds from the government and many government bodies but also community-based structures which have been engaged and trained as part of the project raised concerns about the ability to continue case management and awareness raising activities in the absence of funds despite great interest, motivation and adequate technical capacities.

The length of the project – three years- was also seen as limited to reach policy, behaviour and social norm change.



Monitoring, Evaluation, Accountability and Learning (MEAL)

Overall, the project relied on a comprehensive MEAL system including a full set of tools and guidance documents. The global MEAL coordinator had the role to develop and implement a coherent monitoring approach across the five countries, this was done together with the country-based MEAL specialists of the different consortium members.

Following each main data collection process, an After-Action Review process was implemented leading to the development of a Management Response and Action Plan, which provided an opportunity to review the findings from the MEAL exercise and reflect on what this means for the project. The project regularly involved key stakeholders and community members as part of identifying the felt needs and necessary adjustments through baseline, progress reports, need assessment, outcome monitoring and midterm evaluation.

The project also set up child friendly feedback and complaint mechanisms in all target areas. Some delays were noted in their establishment in Senegal and in Uganda caused by the COVID-19 restrictions imposed towards the end of year one. In establishing the community based complaint and feedback mechanism as part of accountability and community engagement processes, consideration was made to ensure accessibility for persons with different types of needs including people with disabilities; by using different means of gathering feedback. In Q7 a comprehensive review of feedback and complaints mechanisms was undertaken to identify any gaps or challenges.

A learning agenda was also developed to collect and share key lessons learnt to inform external actors and future projects. Monitoring, Evaluation, Accountability and Learning (MEAL) was tracked as a separate project outcome to ensure ongoing focus and prioritization.

As such, in all countries the MEAL mechanisms in place were seen as effective ways to monitor the effects of the project, to collect difficulties and shortcomings in implementation, to draw lessons learned, and especially to scale up good practices. Nonetheless, interviews with project staff revealed a few challenges, including:

At the start of the project, the COVID-19 restrictions delayed the monitoring visits until the second year of implementation.

The multitude of tools, templates and processes were not always known by all members of staff and were not updated in a synchronised manner. The harmonisation of the understanding of the indicators between the different implementing organisations was challenging due to a lack of staff capacity, changes in key staff and the inability of the global team to travel to countries due to COVID-19 related travel restrictions. The calculation methods for some indicators were also not understood at the outset. The reporting templates also evolved to better reflect the inclusion of women and girls and people living with disability. While this was

a valuable addition, it led country offices to engage in a data rebuilding process afterwards.

Not all partners and supervision sites had a monitoring and evaluation specialist which affected project tracking. There is need to have a dedicated monitoring and evaluation specialist in each of the project sites to work hand in hand with the overall monitoring and evaluation officer.

Lastly, at the global level, the team wanted to try to include indicators specifically tailored to measure progress related to COVID-19 specific actions. In practice, this meant adapting or modifying existing tools, which showed varying levels of success depending on the tool.

Conclusions and Recommendations

Overall, the project was found relevant. Its design was based on a global framework of action which was developed based on best practices and evidence-based approaches which had been tested in other contexts. This global framework was contextualised based on an in-depth situation analysis in each country to ensure relevance to the needs.

However, the project did not address the needs for economic strengthening and livelihoods which arose during COVID and were seen as critical to address child protection risks in a holistic manner. While good efforts, even if slightly late, were made to collect gender and disability disaggregated data and to address

the needs of girls, more could have been done to further foster the inclusion of children and parents living with disabilities and better accommodate their specific needs. The JOFA project was also found to be coherent with strategies and objectives of other actors working towards child protection across the five countries.

The evaluation highlights a reduction in the occurrence of violence in all targeted areas through both qualitative and quantitative reports, which is a great achievement.

Despite numerous challenges, the project has done well towards the achievement of its intended outcomes and impact as described in the table below.

		OUTPU	TS		
Ethiopia	Kenya	Mali	* Senegal	U ganda	
16	14	16	17	1 <i>7</i>	
1	2	0	0	0	
				0	
0	0	0	0	0	

IMPACTS & OUTCOMES						
Ethiopia	⊐¦⊑ Kenya	Mali	* Senegal	O Uganda		
10	7	8	3	2		
1	2	- 1	2	1		
0				6		
0	0	- 1	1	2		
Target				Regression		

Some indicators were particularly complex to measure in a harmonised and consistent manner, making the assessment of progress tricky in some cases.

The project also put strong governance mechanisms in place, which were able to provide adequate support to the implementation of activities and keep the delivery on track. This allowed the project to manage time and resources efficiently. Other factors such as the working relationship among Joining Forces members and with government entities have also been identified as having a positive

influence on the efficiency of the project. Working as a consortium is adding value to the work done.

The involvement of stakeholders (community structures, administrative authorities and services, resource persons, community members including children and young people) in the implementation of the project is an assurance of ownership, which is one of the elements necessary for sustainability. Thus, having strengthened their capacities, the project has created an environment conducive to the sustainability of its achievements. However, the

development of a transition plan and strategies aimed at mobilising financial resources and setting out roles and responsibilities among project stakeholders occurred late and the lack of continuous funding for local government actors and community structures was seen as the main hampering factor to the sustainability of the JOFA project.

Lastly, the project developed a comprehensive

monitoring, evaluation and accountability system which allowed for adequate tracking of results and identification of lessons learnt, feedback and recommendations to make timely adjustments. However, the downside of the system was its complexity and the level of capacity building, sensitisation and harmonisation effort necessary to ensure that it was adequately and consistently implemented in all countries.

Based on these findings, the following are the main recommendations for similar projects in the future:

- Plan for more accommodations of project activities to meet the specific needs of children living with disabilities. This target group requires not only to be intentionally targeted but also to make necessary adjustment and provisions to ensure their full participation (providing transportation for participants with mobility issues, sign interpretation, inclusion of braille letters on communication materials, etc.)
- Review the design of the project technical approaches before the start of the implementation and make sure that those are ready to be rolled out at the same time as all the other activities. This requires to anticipate the training of staff before starting implementation in the field, if possible, through in-person engagement.
- Coordinate MEAL frameworks, tools and approaches across partners and countries from the project's inception to ensure common reporting with comparable and adequate levels of disaggregation and consider in-person training on the tools and calculation methods too.
- Plan sufficient dedicated human resources at field level including for MEAL functions.
- When addressing child protection issues in contexts or times of economic hardships (such as pandemic or high inflation contexts), make sure to include an economic strengthening/livelihoods or social protection component to make sure that some of the key drivers of those Child Protection issues are being addressed, that children can remain in school and ensure full buy-in from community members. Explore the option to add a multipurpose cash / livelihoods component to similar projects in areas where households are not able to meet their basic needs to ensure the relevance to the priorities of the target group and to ensure their full engagement in the activities. If this is not possible, try and create synergies with organizations that cover basic needs to deliver a joint action in the same areas.
- Ensure long-term engagement projects when working on behaviour change as three years seemed insufficient to be able to reach longer-term objectives at scale. Five years would be more appropriate to be able to reach such objectives.
- Monitor better the project's unintended effects and particularly for members of peer groups leading awareness raising activities in the communities as they can face resistance from adults who do not adhere with the principles communicated by the project.
- Develop a strong exit plan in each country from the first year of implementation to ensure the key stakeholders taking over responsibilities are engaged from the start and sufficiently capacitated;
- Further support the local protection committees in terms of financial resource mobilization, this could include income generating activities for self-financing and identification of financial partners.







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