

**GENDER EQUALITY ASSESSMENT OF
THE BASIC SERVICES FUND (BSF) IN
SOUTHERN SUDAN
PHASE II**

**CANADIAN INTERNATIONAL DEVELOPMENT
AGENCY (CIDA)**

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TABLE OF CONTENTS

Executive Summary		
1	Background	
2	Purpose	
3	BSF Gender Equality Assessment Scope and Conceptual Framework	
4	The Method	
5	Key Findings of the GE Assessment of BSF Secretariat and Partners	
	5.1	BSF Secretariat
	5.2	Government and NGO Partners
		5.2.1 Extent of Contribution and Commitment to Gender Equality Results
		5.2.2 Institutional Mechanisms and Strategies
		5.2.3 Enabling Environment
6	Key Findings of the GE Assessment of BSF Projects	
	6.1	Education
		6.1.1 Sector Overview
		6.1.2 GE Assessment of BSF Education Projects
	6.2	Health
		6.2.1 Sector Overview
		6.2.2 GE Assessment of BSF Health Projects
	6.3	Water and Sanitation
		6.2.1 Sector Overview
		6.2.2 GE Assessment of BSF Water and Sanitation Projects
7	Conclusions	
8	Recommendations	
9	Recommended Follow Up Actions and Studies	
10	Selected References	
11	Annexes	
	11.1	Annex 1 Sectors Specific Checklist
	11.2	Annex 11 List of Persons Met
	11.3	Annex 111 BSF Training Data
	11.4	Annex 1V BSF All Sectors Data
	11.5	Annex V Photos (some are courtesy of CARITAS)

EXECUTIVE SUMMARY

1. Background

A gender equality (GE) assessment was conducted in Southern Sudan during the period of November 13th to 23rd. The assessment included a review of reports, data, and interviews with the Management Agent (BSF Secretariat), Government Counterparts, and NGO partners implementing BSF projects in education, water and sanitation (WATSAN), and health. The GE assessment included site visits, interviews, and focus group discussions with field management and project staff from NGO partners, local government partners, and project beneficiaries in Juba, Torit, Lainya, Imuruk (Eastern Equatoria), and Bori (Western Equatoria).

2. Highlights of Key Findings and Conclusions

Over the past two years, the Basic Service Fund (BSF) has undertaken considerable interventions that addressed serious gaps in basic social services including education, health, and WATSAN in post-conflict Southern Sudan. There is evidence of a consultative approach, careful and judicious selection of interventions, and partnerships, which altogether have resulted in cumulative positive outcomes, manifested in the difference these interventions have made in the lives of the populations affected.

Although well-prepared, the BSF application guidelines for calls for proposals, and the format and the evaluation criteria of the Concept Notes and Proposals do not clearly indicate gender equality considerations and requirements.

The Government of Southern Sudan's (GOSS) political commitment to gender equality is demonstrated through a wide range of policies and actions. However, the political commitment alone is not sufficient in the absence of adequate institutional and physical capacities.

The selected interventions in the three sectors, education, health and WATSAN, which were each reviewed against specific gender equality indicators, showed varying degrees of fulfilment of gender equality results.

Despite the lack of gender expertise and effective tracking mechanisms, there are indications of attention given to gender equality results with positive gender mainstreaming outcomes.

In the absence of GE guidelines, thematic unity in data collection methods, and gender equality indicator reporting, most of the positive outcomes could not be captured in order to be tracked and carried forward effectively.

Key gender equality results in terms of equal shares of project benefits for both women and men, resources and participation in decision making, and promotion of women and girls' rights are still below the required and achievable levels.

Extensive community awareness-raising and gender training of policy makers, management, project staff, and community leaders are extremely important in handling the persistent gender inequalities.

The available data on training reveals the low levels of female participation and benefit for women from the training opportunities across the three sectors. The overall

coverage of women's rights, empowerment, and gender equality considerations across the three sectors was found stronger in some areas than in others.

The post-conflict gender perspective in terms of changing gender relations and roles, changing demographic profiles because of internal and external displacement, increasing numbers of female headed households and orphans, and the ongoing movement of returnees are factors that should receive adequate consideration in project design and implementation.

3. Recommendations

3.1 Recommendations For Immediate Action

- 3.1.1 Gender equality focused technical review of the current round of proposals submitted for Phase II by a GE specialist.
- 3.1.2 Proposed areas of priority for Phase II funding for proposals with the following components:
 - Girls boarding schools
 - Training of teachers and health care personnel with an emphasis on female teachers and psycho-social support components.
 - Primary Health Care Centres (PHCs) in remote under-served areas with traditional birth attendants (TBAs) and reproductive health training components.
 - Water projects with innovative options (rainwater harvesting, shallow wells, and spring catchments) and innovative, user-friendly technology for children and women.

3.2 Recommendations for the Short-Medium Terms

- 3.2.1 In order to ensure gender mainstreaming across BSF interventions, the BSF Secretariat should be supported by a Gender Advisor, either on a part-time or occasional consultancy basis. She/He will extend support to the Government and NGO partners.
- 3.2.2 With regard to a call for proposals, data collection, and monitoring mechanisms, a set of measures is recommended which will constitute the basis of BSF gender equality guidelines that align with the donors' gender equality policies.
- 3.2.3 In the project settings where there is limited gender awareness, it is necessary to provide gender training for the project staff and others.
- 3.2.4 Community awareness and sensitization on gender equality issues to be considered among the project activities with the necessary budget provisions.
- 3.2.5 Consideration of scholarships, dress, comfort kits, and school feeding for female students.
- 3.2.6 Consideration of teachers' incentives/allowance in the education projects budgets.
- 3.2.7 In order to increase illiterate women's participation and benefit from training opportunities, encourage extensive use of visualization tools, drama, songs, etc. Attention to women's reproductive responsibilities through gender sensitive timing, duration, and location of the trainings is equally important.
- 3.2.8 Due consideration of PHC equipment and availability of drugs.
- 3.2.9 Linking up the water projects with the Government plans for construction and establishment of water supply networks.

- 3.2.10 Coordination and complementarities of BSF interventions with other early recovery and rehabilitation interventions of other actors in other sectors such as infrastructure, food security, and rural development.

4. Recommended Follow Up Actions And Studies

- 4.1 Conduct a Gender Equality baseline survey to establish the baseline gender equality indicators against which future progress will be measured.
- 4.2 Conduct an in depth gender analysis of post-conflict recovery challenges with a focus on changing demographic profiles, gender roles and relations, and support of possible Government led initiatives for other related gender profiles, gender needs assessments, etc.
- 4.3 Extensive study and analysis of the social institutions, norms, values, and cultural, traditional, and religious practices. Such study may be conducted as a collaborative effort with other partners and stakeholders within the UN, Government, and Int. NGOs.
- 9.4 Follow up on the possibility of UNIFEM presence in Southern Sudan.

1. BACKGROUND

The Basic Services Fund (BSF) for Southern Sudan was launched by the UK Department For International Development (DFID) in January 2006 to contribute to addressing the emerging human development challenges and to provide immediate 'peace dividends' in support of the Comprehensive Peace Agreement (CPA).

In the initial stages of the BSF, DFID directly contacted NGOs to deliver basic services. In January 2007, DFID agreed on a contract with Mott MacDonald to manage the programme. Since its establishment, the BSF has awarded £15.6 million to non-state providers of basic services in primary education, primary health care, and water and sanitation (WATSAN). The BSF Steering Committee, led by the Government Of Southern Sudan (GOSS) has selected 14 NGOs to implement projects during two calls for proposals (one in 2006 and one in 2007). Projects were awarded between £200,000 and £1.5 million for a maximum of 24 months.

Three broad types of activities have been financed through the BSF:

- the construction and rehabilitation of primary schools, health centres, and water points;
- the training of teachers, health personnel, community workers, Parent Teachers Associations (PTAs), and Water User Associations (WUAs); and
- the costs of delivering basic services including the salaries of education and health personnel, the running costs of schools and health centres, and the cost of material supplies such as textbooks and drugs.

This Second Phase of the BSF (2008 – 2011) remains a DFID project with the Government of the UK providing £9 million, the Government of the Netherlands providing €6.5 million (approximately £5 million), and the Government of Canada providing CAD 15 million (approximately £4.8 million). The Norwegian Government also plans to contribute NOK 40 million to the BSF. The BSF will continue to work to complement other aid instruments and donor initiatives including the Multi-Donor Trust Fund (MDTF), the Sudan Recovery Fund (SRF), and the Common Humanitarian Fund (CHF), as well as the European Commission (EC) and United States Agency for International Development (USAID) funded programmes.

Phase II of the BSF will continue to support the basic services in line with the identified six medium-term expenditure priorities of GOSS for the period of 2008 – 2011 of which three relate to basic services:

- To provide primary health care to improve the health status of the population
- To provide equitable access to basic education
- To increase access to safe water and sanitation

With the Paris Declaration on Aid Effectiveness (2005), donors – including the four donors that intend to contribute financially to the second phase of the BSF which are Canada, the United Kingdom, the Netherlands and Norway – reiterated the importance that they give to promoting a harmonized approach to integrating cross-cutting issues, such as environmental sustainability (art. 41) and gender equality (art. 42), to their projects and programs.

Achieving gender equality has been a specific objective of Canada's Official Development Assistance (ODA) since 1976. Recently, Canada's Minister of International Cooperation has accepted to be the Millennium Development Goal #3

(MDG3) Champion Torch recipient, underlining the leadership role that Canada aims to play on the issue of gender equality.

The Canadian International Development Agency (CIDA) has developed a policy on gender equality whose objectives are: to advance women's equal participation with men as decision-makers in shaping the sustainable development of their societies; to support women and girls in the realization of their full human rights; and to reduce gender inequalities in access to and control over the resources and benefits of development. CIDA's *Framework for Assessing Gender Equality Results* was released in 2005 and provides the Agency with tools to determine the extent to which an investment contributes to achieving the corporate GE results.

The UK's Department For International Development (DFID) has also adopted its own Gender Equality Action Plan (GEAP) in 2007, reflecting its commitment to promoting gender equality and women's rights across its development assistance.

In the context where CIDA wishes to make a contribution to the BSF, a DFID-led project, it has been agreed by DFID and CIDA that CIDA would carry out a Gender Equality (GE) assessment to provide recommendations aimed at strengthening the gender responsiveness of the BSF.

2. PURPOSE

The purpose of this GE assessment is to provide to CIDA and DFID an assessment of the gender responsiveness of the Basic Services Fund. The assessment aims at identifying the positive and negative effects that could arise from this initiative, identifying entry points to increase the contribution of the BSF to furthering gender equality through access to the full benefits of health, education, and water and sanitation, and making related recommendations to CIDA and DFID.

3. BSF GENDER EQUALITY ASSESSMENT SCOPE AND CONCEPTUAL FRAMEWORK

The overall result or impact that CIDA's Gender Equality Policy has emphasised is to contribute to equality between women and men to ensure sustainable development. To this respect, the policy has identified three corporate objectives that can be restated in the form of results as follows:

- i. Development resources and benefits: reduced inequalities between women and men in access to and control over resources and benefits of development.
- ii. Decision making: more equal participation of women and men as decision makers in shaping the sustainable development of their societies.
- iii. Rights: women and girls are more able to realise their full human rights

Along the same lines, promoting equal opportunities for women and men as participants and beneficiaries of development is emphasised in DFID's Gender Equality Action Plan (2007 – 2009). The plan has further called for more direct actions to promote women's rights and freedoms as ends in themselves, while improving women's access to services, economic and political opportunities, and reducing violence against women.

CIDA's Framework for Assessing Gender Equality Results, identifies two approaches:

- 1- Approach for directive and responsive programming:

In this approach the assessment focuses on the results achieved by projects that are completed or near completion and aims to identify whether project results contribute to any of CIDA's gender equality results.

2- Approach for core funding of institutions:

In this approach, the assessment focuses on the quality of institutional strategy and mechanisms for achieving gender equality results.

For both approaches, the framework developed appropriate tools for the categorization of the achieved results, weighing their significance and rating them in order to provide an overview and summary assessment of performance.

DFID has also identified four key steps to gender mainstreaming which can be adapted into broad indicators to make a preliminary assessment on how far the agency's interventions have reflected a gender equality component. These indicators are:

- Use of disaggregated statistics and gender analysis
- Extent to which women and men contribute to policy making
- Relevance of action to promote women's rights and gender equality including appropriate indicators of achievement
- Evidence of organizational capacity development and change

DFID's action plan has further identified four main areas of activities to ensure achievement of gender equality results:

- 1- Results
- 2- Building partnerships
- 3- Use of resources
- 4- Planning for the future

On the basis of the above guiding principles and commonalities of gender equality assessment approaches highlighted in CIDA's Policy on Gender Equality, CIDA's Framework for Assessing Gender Equality Results, DFID's Gender Manual and DFID's Gender Equality Action Plan, the BSF Gender Equality Assessment is designed to address key questions at two levels:

3.1. NGO partners implementing the BSF projects:

A sample of NGO partners implementing BSF projects were assessed with the purpose of reviewing the extent to which these NGOs are in a position to contribute to DFID and CIDA gender equality results. The following were examined:

- To what extent does the BSF contribute to gender equality development results?
- To what extent are the partners implementing the projects committed to contribute to gender equality development results through these projects?
- What are the institutional mechanisms and strategies that contribute to achieving gender equality results which include:
 - i. gender equality policy;
 - ii. the broader institutional framework; and
 - iii. gender expertise and human resource management practices?
- What are the enabling environments that facilitate achievement of the GE results goal and what are those which represent constraints to achieving this goal.

3.2 At the projects' level

Selected interventions representing a cluster of Education, Health, and WATSAN projects being implemented by the selected NGO implementing partners were

assessed against the overarching gender equality objectives. A set of questions were prepared under each of the general objectives. Similarly, for each of the sectors, the specific gender equality indicators were examined (annex 1). Additionally, the following major questions were raised across the three sectors:

- Does the project consider equal share of women and men over the project's benefits and contribute to reduced inequalities in women's access to and control over resources?
- Does the project facilitate increased participation of women and men as decision makers at all project stages?
- Does the project promote women and girls' rights and build their capacity to advocate for and realise their full human rights?
- Has sex-disaggregated data been collected at the planning stage and on current practices and how these practices differ between men and women?

Drawing on the findings of the described approach, the assessment has further satisfied the requirements of DFID (planning for the future) and CIDA (Follow up phase – Future studies) in terms of recommendations covering the following:

- GE elements that could be included in the call for proposals;
- the NGO Selection Grid;
- data collection by the Management Agent;
- gender equality within implementing NGOs; and
- follow-up on recommendations, including accountabilities for implementation and follow-up assessments, and possible indicators to monitor gender equality results.

4. THE METHOD

In order to encompass the objectives of the GE Assessment, data requirements for the above tasks were obtained from both primary and secondary sources.

The primary qualitative data was collected through semi structured and open ended interviews, Focused Group Discussions, and observations.

The main stakeholders who were interviewed and consulted included the following:

- Management Agent (BSF Secretariat)
- Joint Donors Office (JDO)
- Senior Management and project staff of selected NGOs implementing BSF projects
- Government counterparts
- Projects beneficiaries
- Other relevant stakeholders

The data collection exercise entailed field visits to selected project sites to assess the status and understand the general impact of the projects together with the specific impacts on female participants.

A desk review approach constituted a major source for data collection from secondary sources.

5. KEY FINDINGS OF THE GE ASSESSMENT OF BSF SECRETARIAT AND PARTNERS

5.1 BSF Secretariat

The BSF Secretariat is fully committed to the donors' Gender Equality policies and follows the donors' requirements in all aspects of the program at its different stages. During the project's implementation, the Secretariat provides the NGO partners with guidelines on increasing women and girls' participation and it monitors its progress. In general, the partner NGOs live up to their original commitment although a complete set of gender equality guidelines is not in place.

The Secretariat's monitoring mechanism places emphasis on the gender-disaggregated data to be provided by the NGOs' partners on some of the activities being carried out by the NGOs. Some of these activities are not quantitatively reported in a format which is broken down by sex. In addition, some activities are under-reported in terms of women's participation in areas such as informal trainings. This adds to the difficulty of recording and capturing most of the positive gender equality dimensions in the course of the projects' implementation. Consequently, a situation of "evaporation" of gender equality considerations between activities on the ground and reporting exists. One of the contributing factors is the lack of thematic unity in data collection formats and methods.

The BSF application guidelines and call for proposals do not include clear gender equality statements in the sections of Conditions and Priorities for BSF Funding (page 6) and the Evaluation Criteria of the Concept Notes and Proposals (pages 10 and 11).

Similarly the concept notes, proposals, and logframes formats do not include sections on how the project will improve gender equality in terms of equal participation of women and men in the project's activities, decision making and share of the project's benefits and resources, and promotion of women and girls' rights.

5.2 Government and NGO Partners

5.2.1 Extent of Contribution and Commitment to Gender Equality Results

The GOSS commitment is demonstrated in the establishment of the Ministry of Gender, Social Welfare and Religious Affairs with a main Directorate of Gender. Some of the ministries such as the Ministry of Education have specialised Departments of Gender which mandate activities geared towards ensuring gender mainstreaming across the ministry's programs. Others have focal gender officers.

In general terms, the assessment exercise generated interest and awareness on gender equality issues among the participant partners at both senior management and project levels. The assessment at the senior management levels of the partner NGOs showed strong commitment to gender equality results, and satisfactory levels of awareness on gender equality issues and the importance of women empowerment and gender mainstreaming.

The project's GE assessment showed that the staff felt and was aware of the gender inequalities in the project's settings, but there is evidence to suggest that not everyone is aware of how gender affects the dynamics and evolution of the project or how the gender inequalities could be overcome.

5.2.2 Institutional Mechanisms and Strategies

The GOSS Gender Policy, whose formulation extended over a period of two years was recently passed by the Parliament and is awaiting the President's final approval. The Directorate of Gender, whose activities are cross cutting through 26 ministries, have yet to acquire the required capacity in order to be fully functional. More studies and surveys need to be carried out to provide the clarity and the direction of GE results.

These may include Southern Sudan GE Baseline Surveys, Gender Needs Assessment, and development of a Southern Sudan Gender Profile together with a strategic action plan for the implementation of the GOSS Gender Policy.

Only two out of the five partner NGOs interviewed have global gender policies at the level of their HQs. Some of them (Merlin) adhere to the Sphere Standards in WATSAN, Health Care, and Nutrition to which they are a signatory. These Standards clearly embed gender. In the absence of gender strategies or policies within their organizations, the partners indicated when designing a project, they do it with gender in mind and make sure gender is incorporated although they don't have specific guidelines or standards to follow.

None of the partners employ a gender officer in the field. However, some of them have their proposals checked by the Gender Advisors at their HQs prior to submission to the donors. Others do not do this check as part of the proposals approval procedure within their organizations.

5.2.3 Enabling Environment

The donors' concern which is translated into generous contributions, together with the political commitment which is demonstrated in the GOSS Affirmative Action that established a minimum share of 25 percent for women's participation in all public and political institutions together with other positive actions, are significant enabling factors towards the results of gender equality.

The low levels of women's participation in projects' activities and decision making combined with their lower share of the project benefits and resources is a result of the gender inequality 'trap' that persists over generations and gains strength from the institutionalised sources; the norms, values and cultural, traditional, and religious practices.

6. KEY FINDINGS OF THE GE ASSESSMENT OF BSF PROJECTS

6.1 Education

6.1.1 Sector Overview

The GOSS education policy states the principles that education shall be the right of every child; be accessible to any citizen; achieve equality, including gender equality, through raising awareness; foster nation-building through integration, peace, self-reliance, patriotism, and promoting respect and tolerance for other cultures, traditions, opinions, and beliefs; and promote national socio-economic sustainable development. Yet GOSS records and the Joint Assessment Mission (JAM 2005) conclude that an entire generation has missed out on education during the two decades of war. The current situation of the education sector is still under-resourced and almost entirely dependent on outside funding. Because of this lack of resources, most schools are extremely under-staffed and often funded and operated by parents and NGOs. Just half of the existing schools have access to water; 68 percent do not have latrines; and 62 percent have no health facilities in the vicinity.

The people of the Southern Sudan have the lowest access to primary education in the world; their gross enrolment ratio, 20 percent, is the world's lowest, as is the female to male enrolment, 27 percent. Only 2 percent of the population complete primary education and the general adult literacy rate is 24 percent.

The rate of illiteracy among women was estimated at 98 percent in 2006 with an improvement in 2008 that brought it down to 90 percent. Still it is one of the highest in the world. In 2005, girls were estimated to account for only 27 percent of total

enrolment. The 2008 Annual Education Census of the primary schools in East Equatoria state provides an estimate of girls' enrolment in at 39 percent. The current ratio of female to male primary school teachers is 1:5. The percentage of qualified teachers in 2008 is estimated at 14 percent in comparison to the 6 percent in 2005. Despite the steady progress over the past three years, reducing and eventually closing the gender gap in education remains one of the most difficult challenges in Southern Sudan.

6.1.2 GE Assessment of BSF Education Projects

While some of the BSF supported primary schools are accommodating a reasonable number of children, others are extremely overcrowded. One of the schools in Torit, East Equatoria, was initially designed for 400 children. The current number of children attending the school is 1972 which is almost five times the intended capacity. As a result, the classrooms cannot accommodate any more students, and therefore more than 50 percent of the children have to be taught outdoors under the trees and temporal tents.

Enrolment of girls is marked by extremely limited access due to a complex mix of cultural, traditional, and religious practices. Also, the practice of the cow dowry, which reduces the girls to a source of wealth for the family through marriage, is regarded more highly than education. Other factors include the girls' involvement in domestic chores, looking after younger siblings, the long distances to schools, lack of decent dress, and basic feminine needs. The most disadvantaged groups which are currently excluded from education are orphans who live with relatives not willing to pay the costs of their education, and at the same time burdening them with domestic chores.

Some of the primary schools have a higher percentage of female students over males. The explanation for this is the intensive community awareness-raising activities carried out by the school teachers and educated community members. The results provide strong evidence of the efficiency of such activities in increasing girls' enrolment. Gender sensitization of communities at large has been emphasised by teachers while female teachers highlighted gender sensitization of their partners as equally important.

In general, boys' performance is reported to be better than girls. Explanations provided by school teachers and girls for the poor performance was that girls usually arrive late in the morning because they have to carry out some domestic tasks before they can get ready to go to school. They are also occupied in some income generating activities after school hours to secure their school fees and other needs. Therefore they do not have enough time to attend their school work.

The drop-out rate is much higher among girls as they proceed with their schooling to higher grades. The explanations provided for the low enrolment rate and poor performance also apply to the high drop-out rate. Government officials from the Ministries of Gender and Education cited the government's plans for expansion in girls' boarding schools, which have yet to materialize due to financial and human resource constraints. Additionally, scholarships for girls, supply of school uniform, comfort kits, and school feeding are widely seen as effective measures to counter the socio-economic and cultural barriers to girls' education.

The ratio of female to male teachers in primary education stands at 1:5. The low percentage of educated females is the main reason. Some of the discouraging factors include the transfer of female teachers to remote areas while the few educated females within communities are attracted by other well paid jobs with NGOs and

private businesses. Parents and Teachers Associations (PTA) are male dominated with significantly lower shares of female members in training opportunities.

Teachers are aware of the discrimination against girls, but especially male teachers lack clarity and understanding on how to handle the discrimination. Consequently, apart from the low quality system-wide, teachers of both genders are not well prepared and are unable to become good role models for both boys and girls particularly in regards to gender equality.

As a result of the low percentage of trained and qualified teachers in both males and females, the percentage of untrained female teachers was found to be much higher in comparison. The percentage of those who received long-term professional training is insignificant.

Teachers' training remains one of the major concerns. Currently; it is limited to short-term trainings provided by NGOs and the few long-term opportunities at the Government Teachers Training Institutes (TTI).

In addition to the comprehensive education and teaching training, the teachers indicate their need for training in some skills that they lack. These include life skills, computer skills, rehabilitation, and psycho-social support training. The teachers' complaints of low and unpredictable delays of remuneration have been repeatedly communicated as one of the top problems.

6.2 Health

6.2.1 Sector Overview

Overall, the health and nutrition situation in Southern Sudan is among the worst in the world. According to JAM 2005, MDG health outcome indicators are dismally poor: 45 percent prevalence of chronic malnutrition among under-fives, combined with a mortality rate of 250 per 1,000, and a maternal mortality rate of 1,700 per 100,000 live births.

The present records of 2008 indicate an improvement in the under-five mortality rate at 123 per 1000 while maternal mortality is reported to be as high as 2300 per 100,000 live births. Unfortunately this exceptionally high rate, which is higher than that of Afghanistan's in the midst of the war, is not receiving the appropriate international attention it deserves.

The overall coverage of basic health services is estimated at 25 percent of the population and most of rural Southern Sudan has no access to hospital-level services with some regions dangerously under-served. The ratios of skilled health personnel to population are extremely low (0.5 physicians and 9 nurses per 100,000).

Common communicable diseases cause the heaviest burdens, such as malaria which accounts for a particularly high proportion of morbidity and mortality. The health situation is also characterized by very high levels of malnutrition and a high prevalence of classic tropical diseases that are largely controlled elsewhere. Examples include sleeping sickness, river blindness, guinea worm, and visceral leishmaniasis. Annual tuberculosis incidence is estimated at 325 per 100,000. HIV/AIDS prevalence among adults is unknown, but various studies have found rates between 0 and 8 percent, and less than half the women know of the disease.

Most health services in Southern Sudan are supported by international NGOs under

humanitarian programmes, with local and church-based organizations also active. Most external funding has been and still is provided by humanitarian programmes, and thus it is short-term and cannot support development-type activities (in particular institutional capacity building).

Similarly, drug supply in rural Southern Sudan is largely undertaken by humanitarian health programmes, and there have been recent efforts to centralize purchasing and distribution. At present, most of the drugs are brought into Southern Sudan illegally and distributed through illegal channels, this raises deep concerns among government and other concerned circles about the quality of the drugs and the population's safety.

6.2.2 GE Assessment of BSF Health Projects

With the high reported rates of maternal and infant mortality, high prevalence of common communicable diseases combined with the low human resource capacity in the background, BSF partner NGOs involved in primary health care activities are striving, in collaboration with the government and other stakeholders, to contain the situation. NGO partners have embarked on the community based approach strategy of the Ministry of Health on the Basic Package of Health Services. The strategy is designed on the basis of hierarchy; the Central Hospitals will serve County Hospitals, which will serve as referrals for the Primary Health Care Centres (PHCC) within the county. In turn, each of the PHCC will support the surrounding cluster of Primary Health Care Units (PHCU). The strategy places emphasis on diverting the focus to community based health support through more training and capacity development of Community Health Workers (CHW) and Traditional Birth Attendants (TBAs). The main purpose of the strategy is to overcome the existing constraints of capacity, delivery, and accessibility.

To date, the achievements of the partners are visible on the ground in terms of construction and equipment of PHCCs and PHCUs. It was not possible to obtain data on the gaps analysis, but there is evidence of many under-served regions and areas which have yet to be attended to. The efforts on human resource capacity building have extended to training common health workers; traditional birth attendants (TBA); midwives; medical, pharmacy, and laboratory technicians; and nurses. However, the training durations are shorter than the required levels to produce qualified health personnel. In order to increase the efficiency of the established PHCCs and PHCUs, it is necessary to complement the current structures and training efforts with long term professional training, drugs, and equipment. Also, it is necessary to operate some of the existing structures which are not functional due to lack of human resources, budget, and equipment on the part of the government.

The interviews conducted with some of the trained staff revealed the low levels of knowledge and expertise. With the exception of women specific trainings such as midwives and TBAs, females' share of the trainings is much lower than males. The training activities covered other areas including HIV/AIDS, nutrition, health promoters and malaria. High rates of illiteracy among women; socio-cultural barriers; and the absence of gender sensitive considerations for women's reproductive roles when determining the trainings' locations, timing, and duration all contribute to the low level of female participation in training activities.

Women and children's access to PHCCs is mostly constrained by long distances and lack of means of transport. The language barriers between the patients and health personnel, as well as the little help received from male partners to arrive at the PHCC, have been cited by some of female patients in the explanation of poor access to health facilities. As reproductive health training at the community level is not evident among partners' activities, it is necessary to plan for future interventions in this area and to

also include men in order to enhance the sense of male responsibility in reproductive health issues. Deep rooted community beliefs on preference of injections over tablets and oral medications indicate a source of conflict between the patients and the partners' policies. Awareness-raising on this issue is crucial.

6.3 Water and Sanitation

6.3.1 Sector Overview

Though southern Sudan is generally well favoured in terms of water resources, JAM (2005) reported that around 75 percent of the rural population still lacks access to safe water. Up to 6 percent of the 6,500 water points in rural areas may be out of order or not functioning properly because of a lack of spares and expertise. The estimated overall level of access to appropriate sanitary facilities is around 30 percent and the incidence of waterborne diseases is widespread; children under 5 are the most affected. The general level of hygiene awareness and of vectors of disease is very low.

Common water consumption at existing water points does not exceed 6 litres per capita per day, which is far below the recommended standard of 20 litres, which is the required level for survival and basic hygiene. The majority of the rural population is forced to consume unsafe water from traditional water sources. Less than 50 percent of existing primary schools and an even lower percentage of health facilities have access to safe water and sanitary latrines. Southern Sudan bears an estimated 70 percent of the world's remaining guinea worm disease burden and approximately one in four children die before turning five. 48 percent of these deaths are the result of water related diseases – a statistic that highlights a clear need for coordinated health, water, adult education, and consciousness-raising campaigns.

6.3.2 GE assessment of BSF Water and Sanitation Projects

The BSF WATSAN projects demonstrated satisfactory levels in linking up these basic social facilities, which constitute the backbone of the basic social service facility network, with the needs of communities, health, and education projects of safe water and sanitary installations. At the community level, these installations have an impact on reducing the incidence of unsafe water and hygiene related diseases. They have also reduced the burden on women fetching water from remote locations.

In some areas the construction of latrines was faced with difficulties due to cultural norms at the part of men who believe that digging a hole, which is similar to the grave, inside the house is an invitation to death. Women's participation at the design stage and site selection is absent because the NGOs go through the consultations process with community leaders who are usually men. For example, a water point was installed in the market area, which was the men's preference, despite the women's needs and interest in having it within the community residence.

The technology used in some sites such as water hand pumps is not user-friendly for women and children.

Some of the fundamental challenges to the water sites selection are the typical post-conflict features of the ongoing influx of returnees and IDPs. It was observed that livestock watering represents a danger to the proper use of water points, an issue that should be carefully handled to avoid potential health hazards and possible conflicts.

In general, as the main users of WATSAN facilities, women are found prepared to actively get involved in maintenance. Their financial skills make them ideal candidates in saving and managing funds for the ongoing operation and maintenance of WATSAN facilities. However, due to a complex combination of socio-cultural barriers and female

reproductive roles, especially for single mothers, women's participation in operation, maintenance, and management of activities is below the expected levels with very few exceptions. One of the exceptions is a successful spring water catchment project in Isoke, East Equatoria where women constitute the majority of the project's management committee.

While women's share was found to be high in community and hygiene and sanitation trainings, the percentage of their participation in health promoters and pump technician trainings was found as low as 24 percent and 30 percent respectively.

7. CONCLUSIONS

Over the past two years, the BSF has undertaken considerable interventions that addressed serious gaps in basic social services including education, health, and WATSAN in post-conflict Southern Sudan. There is evidence of careful and judicious selection of interventions and partnerships. Consultations with central and local government authorities and communities are satisfactorily applied in the identification and selection of intervention sites, and project implementation. Altogether, resulting in cumulative positive outcomes manifested in the difference these interventions have made in the lives of the populations affected.

Although well prepared, the BSF application guidelines for calls for proposals, and the format and the evaluation criteria of the Concept Notes and Proposals do not clearly indicate gender equality considerations and requirements.

The GOSS political commitment to gender equality is demonstrated through a wide range of policies and actions. However, the political commitment alone is not sufficient in the absence of adequate institutional and physical capacities. The Government and Southern Sudan women organizations could have achieved more capacity development if UNIFEM, the UN specialised agency for women empowerment, had been present in Southern Sudan.

The selected interventions in the three sectors: education, health and WATSAN, which were each reviewed against specific gender equality indicators, showed varying degrees of fulfilment of gender equality results.

Despite the lack of gender expertise and effective tracking mechanisms, there are indications of attention to gender equality results with positive gender mainstreaming outcomes. This is evident in the high and rising percentage of girls' enrolment in some primary schools and the majority of women on one of the water projects' management committee.

These positive outcomes appear to be driven by the commitment and expertise of individuals at the BSF secretariat, and senior management of the partners, combined with the gender sensitization of leaders and communities at large. It would be good to report lessons learned from this experience, and how to effectively function such mechanisms.

In the absence of GE guidelines, thematic unity in data collection methods, and gender equality indicators reporting, most of the positive outcomes could not be captured in order to be tracked and carried forward effectively.

Key gender equality results in terms of an equal share of project benefits for women and men ; equal access to resources and participation in decision-making; and promotion of women and girls' rights are still below the required and achievable levels.

Extensive community awareness-raising and gender training of policy makers, management, project staff, and community leaders is extremely important in handling the persistent gender inequalities. However, both are not considered among the project activities. The NGO partners, though willing to include gender training and community sensitization, are constrained by the fact that there is not enough room in project structures and budgets .

There have been serious constraints to the availability of data for this assessment. These difficulties were observed by the BSF secretariat, Government, and NGO partners, especially with regard to gender-disaggregated data. Most of the data is not available, is scattered, or is managed on an individual or ad hoc basis.

The available data on training reveals the low levels of women's participation and benefit from the training opportunities across the three sectors. Research findings suggest that improving women's access to training while reducing their duration, will generate both efficiency and welfare gains. Yet encouragement of more training for women is very crucial to achieving the required gender equality results.

The overall coverage of women's rights, empowerment and gender equality considerations across the three sectors was found stronger in some areas than in others. While the rating was possible due to a lack of data, the observations, interviews, and focus group discussions provide evidence towards momentum being gained through interventions pushing towards empowerment of girls and women to effectively advocate for their rights.

The post-conflict gender perspective in terms of changing gender relations and roles; changing demographic profiles because of displacement; increasing numbers of female headed households and orphans; and the ongoing movement of returnees are factors that should receive adequate considerations in project design and implementation. Similarly, the socio-cultural practices and beliefs on gender equality and other day-to-day life issues should be considered as well.

8. RECOMMENDATIONS

8.1 Recommendations For Immediate Action

8.11 Gender equality focused technical review of the current round of proposals submitted for Phase II by a GE specialist.

As the deadline for submission of proposals for onward screening and selection was November 28, 2008 and finalization of the selection process is scheduled before the end of December 2008, immediate action is required on this recommendation. The purpose of the technical review is to:

- Provide comments and suggestions for further improvement of the selected proposals with regards to GE.
- Develop guidelines and sector specific checklists for the project's implementation.
- Unified thematic reporting format to facilitate effective monitoring of the implementation of GE components.

This exercise can be a practical starting point for placing at work the recommendations in the following section 8.2 aimed at integrating the gender mainstreaming mandate.

8.12 Proposed areas of priority for Phase II funding for proposals with the following components:

- Girls boarding schools

This recommendation is highly emphasised by the schools' girls and Government senior officials in the Ministries of Education and Gender.

Since it is most likely there may not be submitted proposals for girls' primary boarding schools, it is suggested that another round of a limited number of proposals be encouraged as a pilot project with the potential of future expansion. Construction, high operational cost, human resource capacity and sustainability are to be carefully considered.

- Training of teachers and health care personnel with emphasis on female teachers and psycho-social support components.
- Primary Health Care Centres in remote under-served areas with TBAs and reproductive health training components.
- Water projects with innovative options (rainwater harvesting, shallow wells, and spring catchments) and innovative women and children user-friendly technology.

8.2 Recommendations for the Short-Medium Terms

8.2.1 In order to ensure gender mainstreaming across BSF interventions, the BSF Secretariat should be supported by a Gender Advisor, either on part-time or occasional consultancy basis. She/He will extend support to the Government and NGO partners.

The BSF Team Leader expressed the need for such support. The BSF may look into the possibility of taking advantage of the possible service of the JDO planned Gender Advisor. Donor partners may also look into the possibility of making available the expertise of their gender specialists or hiring a consultant in successive missions to provide the required support and backstopping in light of the slim chances for finding an available local gender specialist.

The recommended gender equality specialist is expected to play an active role towards the realization of the following recommendations in this section.

8.2.2 With regard to the call for proposals, data collection, and monitoring mechanisms, the following measures are recommended:

8.2.2.1 The call for proposals, evaluation criteria, and formats of the concept notes and proposals are to include sections on the GE results that state the following:

- a) Information to be provided by applicant NGOs on whether they have a Gender Equality Policy/Strategy at both global and country levels.
- b) Information on availability of gender expertise within the organization.
- c) How the project under consideration will enhance gender equality in terms of promotion of women and girls' rights, equal participation of women and men in the project's activities, decision making, and equal share of projects' benefits and resources.

8.2.2.2 Along the same lines, the projects' logframes should reflect the relevant indicators and means of verification.

8.2.2.3 On basis of the projects' logframes, unified data collection methods and reporting format should be developed and made available for the NGO partners.

- 8.2.2.4 The unified reporting format has to include, among other indicators, gender sensitive quantitative and qualitative indicators that monitor and evaluate innovations and benefits to accrue to both men and women fairly. The gender indicators will monitor men and women's involvement in the following:
- Projects' design and activities
 - Management and development of resources
 - Opportunities for improved access to and control of resources
 - Opportunities for training and skills promotion
 - The development and application of appropriate technology
 - Transfer of knowledge and management of resources from men to women
- 8.2.2.5 Development of BSF gender equality guidelines in line with the donors' gender equality policies to compile above recommendations into one package.
- 8.2.3 In the projects' settings where there is limited gender awareness, it is necessary to provide gender training for the projects' staff and others.
- 8.2.4 Community awareness and sensitization on gender equality issues to be considered among the projects' activities with the necessary budget provisions.
- 8.2.5 Consideration of scholarships, dress, comfort kits, and school feeding for female students.
- 8.2.6 Consideration of teachers' incentives/allowance in the education projects' budgets.
- 8.2.7 In order to increase illiterate women's participation and benefit from training opportunities, encourage extensive use of visualization tools, drama, songs, etc. Attention to women's reproductive responsibilities through gender sensitive timing, duration, and location of the trainings are equally important.
- 8.2.8 Due consideration of PHCs' equipment and availability of drugs.
- 8.2.9 Linking up water projects with the Government plans for construction and establishment of water supply networks.
- 8.2.10 Consider coordination and complementarities of BSF interventions with other early recovery and rehabilitation interventions of other actors in other sectors such as infrastructure, food security and rural development.

9. RECOMMENDED FOLLOW UP ACTIONS AND STUDIES

- 9.1 Conduct a Gender Equality baseline survey to establish the baseline gender equality indicators against which future progress will be measured.
- The overall objective of the baseline survey is to assist the BSF and other actors to set baseline indicators which will facilitate the tracking of changes on the efforts and interventions geared towards the achievement of gender equality results. The report of the baseline survey will form a useful framework for further preparations of future interventions for the enhancement of women's participation as well as the development of required training curriculum and capacity development of women. The baseline survey can be conducted whenever possible with other partners (UN agencies and donors) following the beginning and rolling out of the Phase II projects.
- 9.2 An in depth gender analysis of post-conflict recovery challenges with a focus on changing demographic profiles, gender roles and relations,

- and support of possible Government led initiatives for other related gender profiles, gender needs assessments, etc.
- 9.3 Extensive study and analysis of the social institutions, norms, values and cultural, traditional, and religious practices which represent the sources of gender inequality to explore the ways and means of tackling them. Such a study may be conducted as a collaborative effort with other partners and stakeholders within the UN, Government, and Int. NGOs.
- 9.4 Follow up on the possibility of UNIFEM presence in Southern Sudan.

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