



Комітет медичної допомоги
в Закарпатті

Final Report for the external evaluation of the project

“Improving protection of children in emergencies in Ukraine, through safe shelters, provision of food and non-food items and psychosocial support”

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Executive Summary

The objective of the assessment was to provide an external, strategic review of the project “Improving protection of children in emergencies in Ukraine, through safe shelters, provision of food and non-food items and psychosocial support”. The following evaluation analyzes the overall results of the project, with a focus on lessons learned regarding project design, implementation, and management, as well as offering further recommendations. The findings are also illustrated through several case stories.

Background of the project:

The project outcome - the humanitarian situation of 49,238 war-affected children and youth and their families and caregivers in Ukraine has been improved and institutional care facilities been provided with urgently needed supplies.

The project covers three outputs with multiple types of activities described in section “scope of the project.”

Output 1 - The humanitarian situation of 38.990 children and youth staying with their families and in institutional care facilities and other institutions (e.g. children hospitals or boarding schools) improved (Sectors: Shelter, Food and Non-Food Items).

Output 2 - The protection of 3.000 children and youth improved through established safe recreational spaces and provision of emergency education services (Sector: Child Protection).

Output 3 - Psychosocial situation of 7.248 displaced Ukrainian children with their families and in institutional care facilities improved (Sector: Health/Mental health).

The project was implemented by a consortium consisting of **five local partners and two international organizations**: ChildFund Deutschland and Terre des Hommes.

Overall, the project covered multiple oblasts (more details on the map below) and was implemented by a consortium consisting of **five local partners and two international organizations**: ChildFund Deutschland and Terre des Hommes.

The total budget of the project is 4.444.444,00 EUR and the project duration from 15.06.2023 to 15.06.2024.

The key project fundings¹

What worked well:

1. Emergency Response

- The project effectively addressed acute needs in emergency settings, particularly through food and hygienic parcels distribution and voucher assistance to internally displaced persons (IDPs) and vulnerable populations in conflict zones.
- Used the cash assistance modality in Western Ukraine as preferable modality in more safe locations.
- Exceeded initial beneficiary targets by being flexible in adjusting the budget to meet on-the-ground realities. For instance, more hygiene kits were provided due to increased demand.
- Local partners played a crucial role in reaching beneficiaries efficiently, ensuring that aid was delivered where it was most needed.
- The project prioritized a dignified approach to aid distribution, tailoring logistics and procurement to the specific needs of beneficiaries. This included organizing distributions in a way that minimized waiting times and ensured that vulnerable individuals, such as those with disabilities, were prioritized.

2. Mental Health Support and Community Integration

- The project successfully provided mental health support through camps and individual counseling sessions, significantly benefiting both children and parents.
- Activities enhanced parenting skills and strengthened mother-child relationships, contributing to the overall well-being of families under stress.
- Camps were designed to be inclusive, fostering social integration and understanding among participants from diverse backgrounds including people with disabilities.

3. Livelihood Approach to the Capacity Development in the Communities

- The project provided essential training for women, especially IDPs, leading to the establishment of new businesses. This training also included psychological support, helping participants feel more relaxed and supported.
- Inclusive spaces were created for youth, offering educational and recreational activities. These spaces can play critical role in supporting young people in war-affected regions where most of education and services are online.

¹ More detailed descriptions of findings, challenges, factors and recommendations will be listed below

5. Enhanced Partners' Capacity and Grassroots Initiatives

- The project contributed to the overall institutional growth of partner organizations, particularly in areas like financial management, scale up of the humanitarian response, development of a new partnerships and program implementation.
- All partner organizations improved their child protection and safeguarding policies, integrating these into their operations.
- Local partnerships and grassroots initiatives were enhanced, helping retain people in Eastern Ukraine and strengthening the volunteer movement and localization approach.

6. Focus on People with Disabilities

- The project placed a strong emphasis on supporting individuals with disabilities, including both families and institutions. This included making premises more accessible and providing specialized equipment.
- Partners supported the development of accessible facilities and provided essential medical equipment, particularly in regions with high IDP populations.

8. Project Management and Efficiency

- The project's management approach was adaptable and supportive, enabling timely adjustments to meet the evolving needs of beneficiaries. The project team made ongoing improvements based on feedback, ensuring that activities remained relevant and effective.

Areas for development:

1. Adopt as much as possible multisectoral support approach in the humanitarian assistance:

- Integrate various forms of assistance, such as winterization supplies and response of address needs. It can also be done with increasing voucher of cash assistance approach instead of parcels, which not only safe logistic costs, but also increase better adaptability to the needs of beneficiaries.
- Further develop the internal referral system for more complex support of the diverse needs of beneficiaries.
- Ensure budget flexibility to adapt to evolving needs and consider implementing a case management approach to provide targeted and continuous support, especially for vulnerable groups like families with disabilities.

2. Enhance and expand local infrastructure and capacity:

- Continue and expand technical support for institutions that serve as shelter, youth hubs and other children facilities, medical institutions (supporting with repair, new equipment) but also add the capacity support such as trainings on PSS support, burn out prevention, CP policies, management issues, etc.

3. Continue to focus on extensive psychosocial support (PSS) initiatives and long-term community healing and education:

- Maintain and even expand psychosocial camps for children and mothers, with an emphasis on broader family formats, including those focused on veterans and their families.
- Integrate PSS components into all project activities, particularly those aimed at women and youth, to address mental health challenges and foster resilience.
- Develop dedicated community spaces especially in rural areas for ongoing socialization, support, and routine-building, particularly in de-occupied areas where trauma is prevalent.
- Continue educational programs for children and youth, both formal and informal, to support their development and address gaps caused by the crisis.
- Address the isolation of people with disabilities by creating community spaces where they can interact and engage.
- Such activities might less reflect the direct humanitarian response in crisis situation, but it is important to take into account that the war is lasting the third year and the need for more sustainable and complex solution is key to support communities, especially children in daily life with war situation and long-term consequences.

3. Foster further organizational support and management cohesion

- Build thematic networks among partners working in similar areas, for example on topic of disability services, to share best practices and collaborate on joined advocacy efforts.
- Provide ongoing training and retreats for volunteers and grassroots organizations in the fields to sustain their efforts in high-need areas.
- Continue ongoing mental health support and burnout prevention for partners through structured meetings and clear management guidelines. Continue offline meetings as place for networking as it is highly valued by local organization.
- Support partners' professional growth in fundraising, team management, advocacy, and financial management that can help them to grow and look for new fundings.
- Enhance data collection standardised approach to ensure consistent reporting and improve synchronization at the central management level.

Introduction

Purpose and Scope of the Assessment:

The evaluation team² has been commissioned by TDH in May 2024 to conduct the External evaluation for the project “Evaluation for the project **“Improving protection of children in emergencies in Ukraine, through safe shelters, provision of food and non-food items and psychosocial support”** financed jointly by terre des hommes Germany (tdh) and the German Federal Foreign Office (GFFO)” that is considered (based on the preliminary information on extension of the project for one more year) as evaluation of the **project first stage**.

The Terms of Reference (ToR) under this assignment specifies that **its purpose** is “the provision of an external, strategic review of the project’s performance, achievements, and challenges. It shall analyse the project’s overall results. In doing so, it shall provide lessons learned about the project design, implementation, and management and identify components, which were beneficial or harmful for achieving the project’s objectives. Overarching question is **“how successful has the project been in achieving the goals set by consortium partners for the work in Ukraine?”**”ⁱ

The evaluation team develops evaluation framework based on the international principles for the evaluation of humanitarian assistance in complex emergencies. These include standard **OECD/DAC criteria**: Relevance, Coherence, Effectiveness, Efficiency, Impact (looking only on small changes where relevant), Sustainability (long-term effects from certain recovery activities), Coverage, Coherence/Coordination, Protection.

Scope of the Project and Key Data:

The project **“Improving protection of children in emergencies in Ukraine, through safe shelters, provision of food and non-food items and psychosocial support”** has been implemented in the consortium of two international and five national partners.

Terre des Hommes served as the key applicant, responsible for overall management and communication with the project team, while **ChildFund** played a dual role as both an implementing organization and a coordinating entity. ChildFund also handled reporting to the cluster system and was responsible for Monitoring, Evaluation, Accountability, and Learning (MEAL) and feedback coordination.

The local partners:

1. **CAMZ (The Medical Aid Committee)** registered in Zakarpattia region since 2000 (the NGO as such started its activities in 1996 as a local mission of the French humanitarian organization "Committee for Medical Aid"). In addition to humanitarian work that they provided since 2014

² Nataliya Tserklevych (team leader) Artem Krill (instead of Oleksandr Malov who was mobilized in Juny 2024) and Olena Kopina (support team) are referred collectively as “evaluation team” all over the text.

with Donbass war, originations worked on reforms of the institutional care for children and adults with disabilities and on promoting the development of civil society in Ukraine. Since February 2022, has started providing humanitarian assistance to IDPs fleeing to western Ukraine from the embattled regions. They provided direct shelter support for woman with children, supported municipal facilities, delivered direct humanitarian assistance, provided case management support and PSS recovery opportunities. In the project they cover Zakarpattia, Kharkiv, Zaporizhzhia, Dnipropetrovsk, Donetsk, Kirovohrad, Sumy, Chernihiv and Kherson Region.

2. **YBW / Yellow Blue Wings** (established in 2014) is based in Kyiv. Before 2022 mainly focused on Donetsk and Luhansk region, working on child protection in particular for disabled children and education services. Now active in most parts of Ukraine, also through sub-partners. The key focus of NGO is Child Protection, Shelter/NFI, Food Security, Livelihoods. In current project focused mainly on food distribution focusing on Kyiv, Chernihiv and Kharkiv regions especially de-occupied areas.
3. **The VPLYV Fund**, (established in 2015), based in Kyiv. Initially provided long-term social and medical projects, focusing on supporting initiatives for people with disabilities. Since March 2022, they are active in the field of humanitarian assistance as one of the founding partners of the initiative “Shelter Ukraine” together with SiLab (another project partner). In addition to providing humanitarian aid to vulnerable families and children, they provide day care for children with disabilities (including complex disabilities, day care as an alternative to residential institutions), offer social workshops, rehabilitation activities of children and adults with disabilities and psychological support. In the current project covered Kherson, Zaporizhzhia, and Nikopol, Dnipropetrovsk mainly with focus on the frontlines and de-occupied area
4. **SILAB Ukraine**, is founded in 2017 and based in Kyiv. Is a professional platform aimed to develop an ecosystem for social entrepreneurship and social innovations in Ukraine. Since 2022 co-founder of the humanitarian aid initiative “Shelter Ukraine” that helped 41.000 Ukrainian IDPs by providing shelter, food and medicine as response to the Russian invasion. In this project, SILAB focuses of livelihood work increasing capacity of woman in the social enterprises and starting of their business for economic recovery of the county and boosting the self-employment.
5. **NUMO ("National Ukrainian Youth Association")** established in 2019 and based in Kyiv. Unites nine biggest Ukrainian youth and volunteers organizations. In current project covered Bucha, Kyiv region, Chernihiv, Kharkiv region, Zaporizhzhia Region, Kherson. Focusing on camps, development of youth hubs, mentorship work with youth.

Overall, the project covered multiple oblasts with various activities. The key activities can be more seen at the map on the page 7.

Activities

- 1 Supporting safe living spaces for IDP children and youth with their families and caretakers
- 2 Providing direct humanitarian assistance for families with children in humanitarian crisis.
- 3 Providing equipment to critical infrastructure and facilities.
- 4 Child and youth friendly, safe, and inclusive spaces in East and West of Ukraine.
- 5 Children and adolescents who participate in emergency education classes.
- 6 Above mentioned safe spaces (youth centres) are equipped to become hubs.
- 7 Psychosocial support of the parents and children in need is provided for beneficiaries



Legenda:

- | | | |
|--|---|--|
| ■ - CAMZ | ■ - NUMO | ■ - SILAB |
| ■ - VPLYV | ■ - CHILDFUND | ■ - YBW |

The key **Outcome** was - **The humanitarian situation of 49,238 war-affected children and youth and their families and caregivers in Ukraine has been improved and institutional care facilities been provided with urgently needed supplies.**

Based on the final monitoring of data – **95247** unique beneficiaries have been reached (mainly due to increase of family households and bigger cover of medical support).

Under the **Output 1 - The humanitarian situation of 38.990 children and youth staying with their families and in institutional care facilities and other institutions (e.g. children hospitals or boarding schools) improved (Sectors: Shelter, Food and Non-Food Items).**

In fact the project reached:

- Supporting safe living spaces for IDP children and youth with their families and caretakers (organizing living spaces, renting, equipping)
Expected target 180 - reached 205
- Providing direct humanitarian assistance for families with children in humanitarian crisis, IDPs, local families, families that stayed in their homes in the East and South, families in de-occupied territories (Food and Non-Food items, vouchers, medicine and hygiene kits).
Expected target -29 460 people as the results 47765 people reached with food, medical, voucher and hygienic support.
- Providing equipment to critical infrastructure and facilities relevant for the supply, care and accommodation of children and youth needed for sustainable child growth (power generators for child hospitals, heating of institutions and houses, vouchers or in kind support for heating fuel and electricity for private households, preparing for next winter, etc.)
Expected target 9350 – reached 38096³

Output 2 - The protection of 3.000 children and youth improved through established safe recreational spaces and provision of emergency education services (Sector: Child Protection)

- Child and youth friendly, safe, and inclusive spaces in East and West of Ukraine (e.g. at youth centers). Disaggregation by regions.
Expected target 10 - reached 10
- Children and adolescents who participate in emergency education classes with functional equipment and qualified mentors (cumulative indicator).
Expected target 1500 - reached 1447
- Above mentioned safe spaces (youth centers) are equipped to become hubs for local information and provision of humanitarian assistance services for children and youth.
Expected target 750 - reached 1573

³ It is important to take into account that these number difficult to verify in terms of unique beneficiaries as the data are provided by hospitals directly and they might count people several times depending on the number of visits per person.

Output 3 - Psychosocial situation of 7.248 displaced Ukrainian children with their families and in institutional care facilities improved (Sector: Health/Mental health)

- Psychosocial support of the parents and children in need is provided for beneficiaries (psychotherapeutic first aid, low threshold psychological first aid, group sessions for youth, individual sessions for children and parents, rehabilitation camp for youth and children).
Expected target 6268 – reached 6029
- Psychoeducation in trauma-informed approach for staff of shelters, institutions, NGOs working with children in this project and other relevant groups
Expected target 150 – reached 124
- Providing social support for mothers through engagement in volunteering and entrepreneurship trainings in order to provide perspectives and reduce psychosocial stress and PTSD through encampment.
Expected target 260 – reached 258
- Displaced children and youth who received direct case management. At least 80% of them are satisfied with the support provided by the case workers.
Expected target 1170 – reached 196

Methodology:

DAC criteria are consistently reflected in the description of the key findings.

Evidence-based approach.

The Assessment will generate evidence using following evidence sources:

- Desk research data, including data on beneficiaries, PDMs, interim reports, database of beneficiaries, indicator tracing table etc.
- Focus groups (FG) and Key informant interviews (KII) with all project partners both international and local partners that works in the fields (7 organizations).
- FG and KIIS with grass roots partners, local stakeholders and volunteers in the fields communities recommended by partner organization (total number 19).
- FG and KIIS with the supporting staff that directly work with beneficiaries such as psychologists, mentors, teachers, etc. (total number 9).
- Facilitated After Action Review workshop with the key partners (12 people).
- FG and KII with project beneficiaries (15 people) based on the relevance of the evaluation (the key focus will be paid to beneficiaries that have received more complex support such as psychosocial support, capacity building, and children who participated in camps (15 beneficiaries).

- KIIs with experts in the humanitarian response and other humanitarian and protection organizations (5 KIIs).
- Data from three meetings with children (FGD in the interactive format under facilitation of the children psychologists) have been provided under management of person responsible for feedback mechanism.

The sampling approach seeks to maximize triangulation of sources. This will be done through triangulating evidence from interviews (individual and between interviews), focus group discussions/community consultation, between primary and secondary data sources. A range of sites will be selected that meet the criteria below:

- Local networks responsible for direct distribution of the support in the frontline locations
- Field personal that works directly with beneficiaries
- Beneficiaries that have received mental health support of capacity programs
- People who took part in summer camp activities both as organizers and beneficiaries (parents, children)
- Key stakeholders in the communities like state institutions, etc
- External experts in child protection topic

Limitations and mitigation actions.

There are several limitations in the evaluation that have to be taken into account.

First of all, the project so far has lasted one year and mainly focused on humanitarian emergency response, which means that the long-term Impact is not in the scope of the project to measure. Therefore, the project will rather look at immediate output and partly outcome level with the precious focus on some recovery activities.

Another limitation – it is not always possible to generalize data obtained with the most of assessment’s methods to broader population. Even though, this limitation is rather inherent to qualitative research methods. This is especially relevant for the humanitarian emergency response with inability to have safe access to all the locations or engage vulnerable beneficiaries to FG or KIIs.

The response bias might be a high risk for this assessment as during the evaluation stage, due to emergency needs, the project already has received the continuation with similar activities, budgets, partners etc that doesn’t leave much space for improvement for the future second stage. Therefore, the recommendations that will be provided might not be fully taken into account due to the lack of time.

Finally, the project is conducted in the high stress conditions, where partner experience often lack of electricity, deep level of fatigue and tiredness, which might also influence on level of their engagement and resource to reflect.

The gender focus was not focused in the project as both girls and boys have access to services.

Ethical protocol

The evaluation team realizes that the “qualitative” nature of this assignment and quite a limited circle of partners involved in the operation may lead to the situations where some opinions will be inherently revealing of a person who shares them. This will require from the evaluation team to be even more cautious and keep integrity and confidentiality of those engaged in the Assessment. The team will ensure correct treatment of personal information to maintain confidence between our interviewees/FGD participants and ourselves. We will follow the following principles, that information.

Context analysis

In order to analyse the project response, the evaluation team also make brief overview of the situation in Emergency response and needs in Ukraine covering 2023-2024 based on the data from the external sources. According to the data presented in Relief Web. 2023 “Since the start of the conflict on 24 February 2023, Ukraine has experienced widespread destruction, leading to the internal displacement of 6.3 million people and more than 14.33 million Ukrainian refugees who have fled across the borders, with 17.6 million in need of humanitarian assistance”⁴

Based on data from 2023, highest needs remain near the frontline locations “approximately 5.4 million people remained in areas close to the frontlines. This figure includes those in hard-to-reach and besieged areas where humanitarian access is particularly challenging people that remain living in line of contact oblasts which is increasing. They are forced to depend on direct humanitarian aid to meet their needs, yet access to those areas by humanitarian responders remains extremely challenging due to the ongoing hostilities, security risks, and logistical obstacles”⁵ One the other hand people relocated and returnees are also in the need for more complex support to establish their settings in new environment. As well as local people affected by the war.

It is important to note that besides rapid emergency response, people in Ukraine needs in parallel **recovery activities** that can help at least partly to stabilize their livelihood, routine and resilience. Therefore, activities focused on retraining in job market, development of the entrepreneurship skills, development of the jobs, education opportunities, after class support for kids and youth socialization, complex services for children with disabilities, for families with small kids, families with veterans, families that faced losses are very demanded in order to allow people become less dependent on humanitarian support and capable in the longer perspective.

⁴ "Child Protection Multisectoral Needs Assessment: Ukraine 2023." Accessed June 30, 2024. <https://reliefweb.int/report/ukraine/child-protection-multisectoral-needs-assessment-ukraine-2023>.

⁵ ACAPS. 2024. "ACAPS Thematic Report: Ukraine - Quarterly Humanitarian Access Update." ReliefWeb, February 6, 2024. <https://reliefweb.int/report/ukraine/acaps-thematic-report-ukraine-quarterly-humanitarian-access-update-06-february-2024>.

This goes in parallel with the key reform process in education, social policy etc. (more analysis will be provided in the final report).

The key challenges that have started with 2022 remain relevant for 2023-2024

- 1) Significant **increase of poverty** with a steep rise from 5.5% in 2021 to 24.1% in 2022. Since February 2022, 65% of Ukrainian households faced income reductions and nearly 44% of these cannot meet basic needs. It is connected with the loss of jobs and often main provider in the family. This decline in income exacerbates the food, medical and hygienic insecurity situation, as households struggle to meet their basic nutritional needs. These also lead to increase of alcohol dependency especially within the pre-war vulnerable groups.
- 2) **Increase of GBV and child protection issues** connected to the loss of family members, deterioration of mental health, lack of services and infrastructure needed for families. According to the data of 2024 - 2.9 million children in need of humanitarian assistance due to the reasons mentioned above.⁶ The most vulnerable groups are children from vulnerable families, children who lost one or two of caregivers, children with disabilities. Especial need appears with decrease of social services function to support families in frontline areas and increase of workload in areas with high number of IPDs.
- 3) The ongoing conflict has led to widespread **mental health risks** and trauma among millions of Ukrainians. The World Health Organization (WHO) reports that “nearly 10 million people are at risk of or suffering from mental disorders, with 3.9 million experiencing moderate to severe symptoms. Children are particularly vulnerable, with over 1.5 million in urgent need of support to cope with stress, anxiety, and other mental health challenges. The relentless attacks and the resulting disruption of education further exacerbate these issues, creating long-term implications for the well-being of the younger population.”⁷
- 4) **Lack of access to offline education** that is critical for children. Eastern and South locations in the majority continue to be socially isolated. At certain age like preschool or early school years this has significant negative impact on both learning, socialisation and mental health of kids. Moreover, teenagers and youth become also incredibly vulnerable due to the lack of joined space for communication. Finally, these increase risk of asocial behaviour, inability to define some learning or other inclusion needs on time and react on them, learning gaps, etc. Additionally, the electricity challenge further complicated access even to online learning. This also lead to increase of safety risk with constant use of online among children (isolation, exposure to cyberbullying and inappropriate content, etc).

⁶ UNICEF. 2024. "UNICEF Ukraine Programme Overview." Accessed June 30, 2024. https://www.unicef.org/ukraine/en/media/44846/file/Brief_UNICEF_Ukraine_Programme_Overview.pdf.

⁷ United Nations Office for the Coordination of Humanitarian Affairs. 2024. "Ukraine - Situation Reports." Accessed June 30, 2024. <https://reports.unocha.org/en/country/ukraine/>.

Tendencies in the context:

- Due to significant increase of local NGOs at the ground, the request for increased localization is growing. Many new volunteer networks and professional NGOs appeared since 2022. They all need more resources to admin and support their teams. Therefore, the more direct engagement on behalf of INGOs with direct financial opportunities and increase of capacity in management will be significant added assets for communities
- Second tendency is cross cutting response that include both humanitarian, recovery and development approaches and multiple areas to ensure ability of people self-manage their life in the future (support to the business, education, mental health, development of school bomb shelters etc is key)
- Develop more complex sets of services for vulnerable groups based on the agenda of social reform in the county. Including assessable infrastructure for people with disabilities, day care services in the community, as well as for child protection mechanisms
- Increase role of communities in complex response to ensure sustainability of services even when INGOs and NGOs finish the projects. For example, currently there are strategy to develop resilience hubs in communities.

Overall, it is possible to conclude that the project aligns closely with Germany's humanitarian assistance priorities, particularly in its focus on highly vulnerable target groups such as women, children, internally displaced persons (IDPs), families with children with disabilities, and ethnic minorities. The project addresses essential needs through Food and NFI support, Shelter, and MHPSS services, with a special emphasis on reducing social isolation among vulnerable groups, including people with disabilities.

Furthermore, the project is guided by a nexus approach, integrating immediate humanitarian assistance with long-term development opportunities. This includes initiatives like youth policy development, the creation of youth hubs, and social entrepreneurship training for women. The nexus approach emphasizes the importance of capacity building, particularly in mental health and psychosocial support (MHPSS), where there is a recognized need for training and further education of specialist personnel. This is an area where the project has already made significant strides but also offers potential for further expansion.

Additionally, the project's strategic use of cash assistance where relevant underscores its commitment to providing flexible, efficient support tailored to the specific needs of the affected populations.

Outcome Harvesting

Criteria of evaluation with short descriptions of findings

The consultants team develops evaluation framework based on the international principles for the evaluation of humanitarian assistance in complex emergencies. These include standard **OECD/DAC criteria**. Here is a short description of findings based on the criteria. More detailed information will be described below in the text after the table.

Name of the criteria	Research question in the framework of the evaluation	Short description of findings (will be followed by more detailed description below)
Relevance	<ul style="list-style-type: none"> • How well does the project address the specific needs and priorities of the affected populations (It would be important to understand how needs were specified in targeted locations)? • How the project adopted to the changes of the needs in the fields? • How the project coordinated with local strategies? 	<p>Based on the fieldwork conducted during the evaluation, the project team can conclude that the project addressed the most acute and relevant needs in the regions, such as shelter, food, NFI, MHPSS support, and more. Partners made efforts to adapt the project to the changing needs (examples provided below).</p> <p>The project aligned with the local strategy in responding to high emergencies by:</p> <ul style="list-style-type: none"> • Focusing on response efforts in rural and frontline locations. • Prioritizing families and people with disabilities as the primary vulnerable category. • Emphasizing a multisectoral response. • Including cash assistance where relevant. <p>Most partners mentioned that some preliminary assessments were conducted in different modalities (more details in the section on findings).</p> <p>Feedback forms and PDMs were used to gather feedback during the project's implementation.</p>
Coherence	<ul style="list-style-type: none"> • Was the project in line with tdh’s Child Safeguarding Policy (it is also important that it is in line with Ukraine contextualized 	<p>For most partners, focusing on humanitarian response became a necessity due to the full-scale invasion. Three out of six partners began their humanitarian work only in 2022. This project was one of the largest in terms of funding and tasks over the past 3-5 years.</p>

	<p>recommendations and approaches in child protection)?</p> <ul style="list-style-type: none"> • Was the project in line with the partner organisations’ objectives / strategies and did it take into account the partners’ capabilities? • Were synergies as well as strategic and / or thematic alliances between the partner organisations (and beyond) established? How can these be strengthened and used more in the future? • Was the coordination with other stakeholders effective in terms of complementarity and harmonization? How could this be further improved? • Was the project in line with the strategies of the national government of Ukraine and German development policy, etc.? 	<p>Most organizations felt they had the freedom to plan the scope of activities based on both the needs they observed and their own strategic objectives. Some partners (two) are part of the humanitarian coordination team (clusters). One organization plays a strategic key role in coordinating youth strategy at the Ministry of Youth and Sports level.</p> <p>Coordination with others was more the responsibility of each partner and requires some improvements. While no formal thematic alliance was established within the consortium, informal experience exchange proved to be relevant.</p> <p>The project itself is a good example of combining acute emergency response activities, such as food and NFI delivery and shelter work, with more recovery-oriented activities, such as youth training, education services, and the reconstruction of youth hubs.</p> <p>According to the analysis of community needs, the best approach is a combination of both emergency and recovery efforts. This approach aligns with the German nexus policy, which combines humanitarian and recovery focuses as a response to prolonged crises. The project mandate is also in line with TdH safeguarding principles.</p>
<p>Effectiveness</p>	<ul style="list-style-type: none"> • To understand to what extent have the project’s objectives and outcomes been achieved? • Were the project management capacities adequate? Were all involved stakeholders aware of their roles and responsibilities and did they live up to these responsibilities? Where is room for improvement? • What factors helped or hindered the achievement of project objectives? • Were the timelines for the project’s activities realistic and adhered to? Were the project activities delivered on schedule? 	<p>Overall, all stated objectives were achieved, and in some cases, overachieved (more details will be provided below).</p> <p>According to the survey conducted with partner organizations, four organizations reported that they had enough or almost enough personnel to run the project.</p> <p>However, during interviews, the evaluation team observed that some fieldwork could have been more extensive and effective if additional personnel or support had been provided (more details will be described below).</p> <p>Supportive and hindering factors will be discussed in the text below.</p>

	<ul style="list-style-type: none"> • Did tdh and CFD provide adequate political, technical, and administrative support to the implementing partners? Where is room for improvement? • What were the strengths and weaknesses of the projects' monitoring and evaluation system in terms of measuring the achievement of objectives; both the partners' and tdh's monitoring and evaluation system? • How do beneficiaries perceive the quality of the services provided? 	<p>Most activities were delivered according to the planned schedule, with only minor shifts that did not impact the project results.</p> <p>Overall, despite coordination and management challenges (described below), partners reported an incredible level of support from the TdH side.</p> <p>Further details will be provided on MEAL and feedback from the beneficiaries.</p>
Efficiency	<p>How well were the project resources (funds, time, human resources) utilized to achieve the desired outcomes? How was the project's management structure organized, and how did it contribute to the efficiency of the activities?</p>	<p>Most partners reported that they highly appreciated the independence and flexibility they experienced in planning and running the project. Each partner developed their budget based on their own salary scales and plans. They also had the opportunity to budget for new types of activities that they had never done before, such as PSS support or vouchers.</p> <p>Two partners defined the price per parcel in the budget, while one partner had a general budget line for food without a specific link to the price per parcel, which allowed for greater flexibility and the ability to purchase more parcels.</p> <p>Partners did not encounter significant issues regarding the division of coordination and management tasks between CFD and TdH, as they noted that the management team was well-coordinated.</p> <p>However, for the INGOs, it was somewhat challenging in the initial stages to properly divide the tasks. There was also a division in who coordinated which partner, as some partners joined the project through CFD's recommendation and others through TdH. As a result, they all had different due diligence procedures, and it took time to synchronize the partners under similar requirements.</p>
Impact (Primarily focused on behavior changes or the		<p>It is difficult to assess impact from a one-year perspective, especially within the context of humanitarian projects.</p>

<p>creation of new opportunities within communities)</p>	<p>What changes both positive or negative have occurred in the target population and the broader community due to the project? Are there any unintended consequences as the side effect of the project? How has the project influenced the broader policy environment or other humanitarian efforts in the region? To what extent has the project contributed to broader community goals (protection, education, health improvements, localization)? Which activities and measures were particularly helpful for contributing to these matters? Which were hindering? Are there any examples of successful partnerships or collaborations that have enhanced the project's impact? How successful were capacity development measures carried out at the partner organisations as part of the project? Where is room for improvement?</p>	<p>However, since the project includes components focused on MHPSS, capacity building, and youth support, there has been an opportunity to collect stories of change from beneficiaries and conduct interviews and focus groups to examine the longer-term consequences. These efforts have had a positive influence on organizations, communities, and beneficiaries through the work that has been done. More details on each aspect will be provided below.</p> <p>The most successful cases of cooperation have been demonstrated by organizations that closely worked with local partners on the ground, such as small grassroots NGOs that emerged before or during the full-scale invasion. This approach supported localization by empowering local actors in frontline locations. The project also contributed to youth policy development and increasing the resilience of children and mothers, aligning with Ukraine's First Lady's agenda on building mental health capacity.</p>
<p>Sustainability (longer term effect) relevant for the components such as trainings, MHPSS support not focused purely on emergency respond</p>	<p>Did the project have any impact beyond its runtime? If yes, which measures and activities were particularly helpful for reaching a lasting impact? What measures have been put in place to ensure the continuity of project benefits How has the project built local capacity (skills, institutions, infrastructure) to sustain its outcomes? To what extent did the project contribute to an increase in local participation and ownership?</p>	<p>Investments in infrastructure, such as the creation of safe living spaces, energy-efficient shelters, and the provision of medical equipment, ensured that the benefits of the project would be sustained. These physical assets continue to serve the community and will do so for years to come.</p> <p>By working closely with grassroots organizations and local institutions, the project helped to solidify these entities' roles in their communities. The development of comprehensive databases of beneficiaries and the reinforcement of local volunteer networks has created a foundation for continued humanitarian efforts.</p> <p>The introduction of recovery camps and other PSS activities provided immediate relief and contributed to the long-term mental health resilience of participants. The tools and techniques learned by beneficiaries, such as using metaphorical cards and stress-reduction strategies, have ongoing applications in their daily lives.</p>

		<p>By actively involving local volunteers in distribution, service delivery, and infrastructure projects, the project fostered a strong sense of ownership among community members. This local engagement is critical for the sustainability of project outcomes, as community members are more likely to maintain and build upon the project's achievements.</p> <p>The project made a conscious effort to listen to the voices of local partners and beneficiaries. By involving them in the planning and implementation stages, the project ensured that the interventions were aligned with local needs and priorities, thereby enhancing ownership.</p> <p>The emphasis on community-based approaches, such as the involvement of local institutions and grassroots organizations, ensured that the project's initiatives were deeply rooted in the local context. This approach not only increased participation but also ensured that the benefits of the project would be sustained by those who are most invested in its success.</p> <p>In summary, the project's impact has extended well beyond its runtime, with lasting benefits secured through capacity building, infrastructure development, and the active engagement of local stakeholders. The measures put in place have ensured that the communities involved are better equipped to manage and sustain the outcomes achieved.</p>
<p>Coverage</p>	<p>What are the specific groups (e.g., women, children, elderly, disabled) covered in the project? How were the target areas and beneficiaries selected? What barriers exist that may prevent certain groups from accessing the project's services?</p>	<p>The project particularly focused on families with children, families with children and young people with disabilities, institutions that care for children, and supporting staff who work with mothers and children. The child protection focus defined the target audience (TA) of the project. Additionally, children are among the most severely affected groups in war due to increased poverty, security risks, loss of family members, and constant movement both within the country and abroad.</p> <p>The project targeted cities and smaller communities close to the frontline, de-occupied areas, and locations in Western Ukraine with fewer security concerns (for summer camps) and a high number of internally displaced persons (IDPs). Several barriers were identified and are described in the text below, including infrastructure that is not accessible for people in wheelchairs, a high number of</p>

		applications creating competition for programs, and a lack of opportunities in certain locations or within the work of certain partners.
Coherence/coordination	<p>How well does the project align with other humanitarian efforts in the region?</p> <p>How does the project align with national policies and priorities?</p> <p>To what extent does the project adhere to international humanitarian principles and standards?</p>	<p>The project is designed with focus on humanitarian response, therefore should correlate with the humanitarian needs and coordination cluster system. Nevertheless, for some partners the humanitarian work is rather new type of work (3 organization) and they haven't been reporting to clusters. While, two other organizations are active members of protection, education and health clusters and provide data themselves. Overall, the task to report project data in the mapping system was laying of GFD MEAL manager (the food/NFI and vouchers are reported) while other activities are not.</p> <p>Partners also mentions in the assessment form that they are familiarized with humanitarian standards and principles (87%)</p> <p>Some partners are active members of national advocacy groups, for example, NUMO is one of the leader in the youth policy work with Ministry of Youth and Sport. CAMZ is active in local groups on humanitarian response (shelter, medical support).</p>
Protection	<p>How does the project ensure the safety and dignity of beneficiaries, particularly vulnerable groups?</p> <p>What measures are in place to prevent and respond to protection risks (e.g., violence, exploitation, abuse)?</p> <p>How does the project address the specific protection needs of children, women, and other at-risk populations?</p> <p>To what extent do beneficiaries feel safe and supported by the project's activities and staff?).⁸</p> <p>What mechanism was developed for the staff engaged in child protection activities to be trained?</p>	<p>The project was particularly focuses on protection of vulnerable groups – single headed families, families with children, families with disabled children, foster families that care for many children, relocated families, pregnant woman. Besides direct work with beneficiaries, also project focused on institutions that work with groups in need – maternity and children hospitals, shelters for mothers with children.</p> <p>Within the project all organization managed to develop child protection policies and safeguarding policies. According to the FGD and survey, organization are proud to have now policies that can increase their capacity, capacity of their partners on the ground (some partners conducted small learning and shared the policies) improved the recruitment procedures and their overall trustworthy in face of other donors.</p>

⁸ Alistair H., 1998. "Evaluating Humanitarian Assistance Programmes in Complex Emergencies." Accessed June 30, 2024.

<https://evaluation.msf.org/sites/default/files/2021-12/Evaluating%20humanitarian%20assistance%20programmes%20in%20complex%20emergencies.pdf>

Detailed Description of the Key Findings of the Project:

Based on KIIs and FGD (both with partners, beneficiaries, and local authorities), followed partly by monitoring visits, the evaluation team has made the following conclusions concerning the **general outcome harvesting** of the project, which are the strongest project achievements besides the overreaching of the expected number of beneficiaries in the response. At the same time, the team highlighted some positive and hindering factors that either supported or complicated the project implementation.

1. Provided the response to acute needs in an emergency

Most of the project's work indeed addresses acute needs in emergency response. For example, the head of one grassroots partner involved in food distribution mentioned: "The project is invaluable for people's survival because we have beneficiaries—families with children who refuse to leave areas close to the combat zone, and their children are starving. If only you could see the eyes of those children when we bring them food... I have a family with 18 children who fled from Lypsti in Kharkiv Oblast (an area of active fighting during the Russian offensive in May-June 2024). When they stand there with those food boxes... this truly saves lives; it's a 'road to life!' One local organization in Chernihiv that helped with the distribution of the food parcels mentioned: "People received not just food, but hope. This was crucial assistance because food is a basic need that many could not meet, especially those who had just arrived from other areas and were disoriented about where to live and work." All partners mentioned that they used some kind of assessment approach to define the beneficiaries needs, for example:

- Preliminary Monitoring Through On-Site Presence: Communication with Local Authorities, Educational Institution Representatives, and Parents.
- Data from local NGOs and interviews with them
- Preliminary On-Site Monitoring Visits, followed by beneficiary surveys using the Kobo platform.

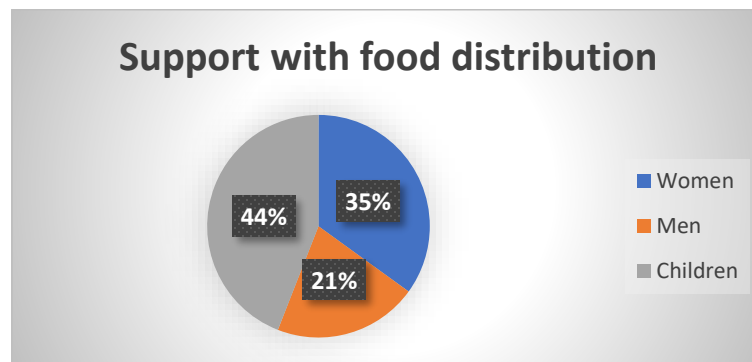
They also regularly (one month after the distribution) used PDM format (MEAL officer counted how many beneficiaries need to be questioned with the probability of 95% and an error margin of 5%) to understand the needs and feedback on the quality of goods and the distribution process. Finally, the central project management team provided a unified approach to gathering feedback from beneficiaries (the feedback form had four options: to submit a suggestion, remark, complaint, or expression of gratitude). That option was available at all locations and with all distributions via various tools, such as Google forms, calls, emails, etc.

1.1. Food, vouchers and NFI support (activity 1.2.)

- Overall, the food distribution was done by three partners. The approximate cost of the food parcels was defined according to OCHA standards with the cost (60 EUR per parcel and 40 EUR per hygienic kits). It was agreed at the managerial level that 20% of beneficiaries might receive both hygienic and food items. In reality, the families who received support were bigger than planned (2.5) on average - 3.8 people in the household. Due to that, the total number of beneficiaries has increased. For example, one partner organization named "Vplyv" planned to distribute 2.450 food kits + 4.500 hygienic kits and cover 11.250 people. At the end of the project,

they distributed 2590 food kits to 8285 people and 4743 hygienic kits to 15332 people. In total, they covered 24,104 people. A positive aspect of the project was the organization's flexibility in making adjustments within the budget, allowing it to respond to the beneficiaries' needs. As a result, they managed to save some costs on taxes and purchase more parcels, particularly hygiene kits (based on more requests for hygienic kits).

Overall, 23455 people received support with food parcels.



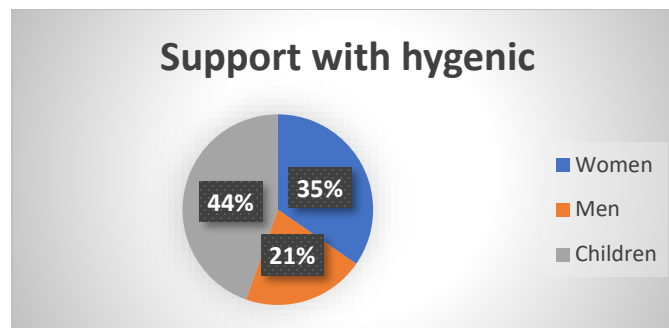
Out of that number – 7 % are people with disabilities and 45 % IDPs

- Overall, based on the data provided, it is possible to conclude that project partners managed to focus **food delivery in the regions where the humanitarian needs are still high**, which are especially relevant for Eastern Ukraine, Chernihiv, partly Kyiv (less relevant already in 2023/24), and the South regions (with focus on deoccupied areas). In interviews with partners, the evaluation team clarified that each partner responsible for delivery worked through grassroots partner organizations or other stakeholders, such as schools and education departments. These grassroots partners have been active in the field since the full-scale invasion, possessing well-verified databases and comprehensive information about the affected populations.
- The food parcels were good quality (that was mentioned many times by beneficiaries and almost all local partners) and people felt more cared for and supported (some beneficiaries mentioned that they are thankful that they are not forgotten)
- The logistics of delivery and procurement were managed differently by each partner but were generally timely and efficient. Some partners budgeted based on the price per parcel and the total number of items planned, while others allocated a single budget line for food distribution. In both cases, partners used any remaining funds to purchase additional support and reach more beneficiaries. However, there is a need for better coordination among partners to share experiences, provider details, and best practices, which could enhance the overall efficiency and effectiveness of the logistics process.
- All the items were purchased from local Ukrainian providers, and where relevant, the food items were purchased directly in Eastern Ukraine (such an approach supports local economic development). Moreover, some partners mentioned that they managed to build such a trustworthy relationship with providers who could have waited for payments that they could not postpone delivery when the financial transaction was coming later.

- Local partners indicated that the dynamic of movements/relocations was still high during 2023, which means that there might have been changes with planned beneficiaries and factual beneficiaries that complicated the identification process. Also, one partner raised the issue that, for example, some recently relocated people from the Kharkiv region's frontlines didn't have proper documents as they had to move very rapidly, but needed support. Then partners took such risks on themselves.
- The project primarily focused on families with children, which occasionally drew criticism in communities from elderly people who felt overlooked. The project allowed for 5% of the distributed parcels to be given to beneficiaries outside the target audience (TA) to foster a more inclusive community approach. An analysis of the distribution database indicates that most partners adhered to this guideline. However, one partner's data shows that approximately 15% of their distributed parcels went to families without children, raising questions about compliance with the agreed-upon criteria. That question needs to be clarified by the management team.
- In the Post Distribution Monitoring (PDM) feedback, beneficiaries highlighted a greater need for non-food items (NFI), with some even prioritizing these over food parcels. Many beneficiaries noted that the food parcels provided by the project were of such high quality that they preferred them over parcels offered by other organizations, often refusing assistance from others in favor of those distributed by TdH partners.
- All recipients expressed gratitude for the support, as it allowed them to save resources that would otherwise have been spent on food. Given the widespread loss of jobs, the absence or loss of family breadwinners, health issues, and other factors, the assistance helped mitigate the risk of poverty and increased vulnerability.
- The food assistance was provided as safely as possible in areas with a high risk of shelling, often by splitting recipients into smaller groups. However, the risk remained a significant challenge, as noted by partners. Some partners suggested that it would be beneficial to budget for separate activities for children in bomb shelters while parents filled out necessary documents. Additionally, partners organized special distribution days without lines for people with disabilities, pregnant women, and other vulnerable groups. Despite these difficulties, all partners demonstrated a high level of responsibility in selecting the most vulnerable beneficiaries, even if it required additional travel or time to ensure accurate targeting.

1.2. Hygienic support

Overall, 22860 people received hygienic support with kits.



42 % are people with IPD status and 7 % people with disabilities (approved by documents)

1.3. Cash assistance (amount 100 EUR per family)

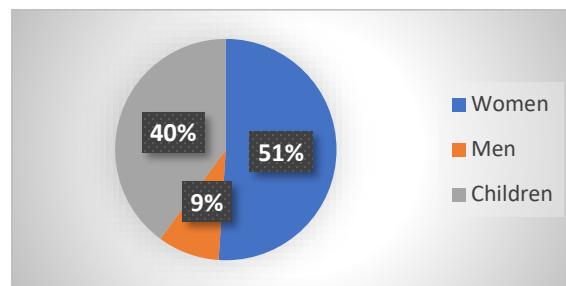
- One partner provided cash assistance in the form of vouchers in the Lviv region, managing the distribution directly without the involvement of additional grassroots partners. The initial plan was to provide 2,500 vouchers to benefit 6,250 people. By the end of the project, **6993 people received 1998 vouchers**, with the remaining funds allocated to enhance summer camp activities for children.
- From partner observations and external interviews, it can be concluded that international support in Western Ukraine was rapidly scaled back, leaving some categories of IDPs in significant need of assistance. The primary focus was on supporting newcomers from the front lines arriving in the Lviv region. However, due to the large scale of internal migration, the project team had to reduce the number of vouchers distributed, as fewer people were identified as needing assistance than initially anticipated. For example, some vouchers were given to families traveling from the front lines to Western Ukraine during the camp activities. In the project's next phase, other regions will be included for support. Overall, vouchers or cash continue to be a preferred modality, particularly in urban areas. It can be taken into account for other partners too.

1.3. Direct Shelter support

- One partner provided support for creating safe living spaces for internally displaced (IDP) children, youth, and their families and caretakers. This involved organizing, renting, and equipping living spaces. They focused on repairing and reconstructing energy-efficient shelters that had been purchased with other funds. Additionally, they worked on improving an institutional care home for people with disabilities, including both adults and children, who had been relocated from the Dnipro region, making the premises more suitable for those with disabilities. Overall, 205 beneficiaries received shelter support, with more expected to be supported in the coming years.
- Furthermore, three partners provided critical equipment to infrastructure and facilities (Activity 1.3) essential for the care and accommodation of children and youth, ensuring sustainable development. This included supplying power generators to children's hospitals, heating institutions, and homes, and providing vouchers or in-kind support for heating fuel and electricity to prepare for the next winter. One school in the Irpin region was furnished, benefiting 500

children and equipping 30 classrooms. Additionally, 649 people were hosted in various institutions thanks to the support of another partner who assisted with equipment, kitchen facilities, and minor repair work. This included shelters in the Berizka Kindergarten of the Valky community, Veselka Kindergarten, Romashka Kindergarten, the Centre of Tourism, and the Staromerchytskyi Lyceum of the Valky community in Kharkiv Oblast.

- A total of 22,497 people were supported through the provision of medical equipment by one partner across Ukraine, with a particular focus on Uzhhorod, a city with a high concentration of IDPs. This support included hygienic facilities for women and equipment for children's hospitals. While the exact number of unique beneficiaries is difficult to determine (the expected number is 8,200), the impact is significant, as the equipment will continue to benefit institutions for years to come. The partner organization noted that while many medical needs are covered by state procurement, some specific needs remain unmet. For instance, during an interview with the Head of the Senior Childhood Department at Uzhhorod Children's Hospital, it was revealed that there is a growing need for antidepressants and sedatives for children, particularly teenagers who have attempted suicide. Additionally, there is a demand for specialized equipment, such as devices to measure hormone levels needed for cancer treatment. Closer to the frontlines, more medical support is required for surgeries and injury treatments.



2. Mental health support and increase of tolerance within communities and parenting potential

In total project covered 6029 people. Out of them 3542 children.

- The project has taken into account the community approach principle, thus trying to support not only relocated children **but also local ones** (oriented on all families that suffered from war (where children lost dads, children from families in difficult life circumstances that worsened in war.) Moreover, activities for children in the format of summer camps and family retreats have brought many positive outcomes for mental health and positive parenting (more in the section of PSS support)
- Psychosocial support for parents and children in need was provided to beneficiaries through various services, including psychotherapeutic first aid, low-threshold psychological first aid, group sessions for youth, individual sessions for children and parents, and rehabilitation camps for youth and children (Activity 3.1). **The evaluation team identified the psychosocial support component as one of the most significant achievements of the project.** This support was delivered through a variety of approaches and tools, particularly through camps for children and families. Five out of six partners incorporated the PSS (psychosocial support) component. While one partner

focused on direct work by psychologists through group and individual sessions, others utilized camp activities and retreats.

- One of the most positive aspects noted in various Key Informant Interviews (KIIs) with partners and beneficiaries was **that the camps and retreats were designed for both mothers and children**, not just children alone. This approach enhanced positive parenting capacity, provided essential mental health support to women living under high stress, and strengthened the mother-child relationship. As one partner noted, *"Because if you provide resources to a mother, she will pass them on to her child. Moreover, mothers at our camps not only receive counseling from psychologists for self-recovery, but they also gain knowledge in psychoeducation, understanding their child's psychological state—how to recognize 'red flags,' when to worry and seek professional help, and when to wait. They also learn how to spend quality time with their children."*
- The camp activities and retreats **were inclusive**, bringing together people from across Ukraine with different languages, regions, statuses, abilities, and ages. This diversity was an added value for the project, as it fostered tolerance and understanding among participants. Moreover, specific focus was paid for including children with disabilities. For example, the inclusive camp "Spacecamp" developed day space for both children with special needs and without, thus, increasing space for integration and communication. In evaluation process the team managed to get opinions from five children who took part in the camp. Some of them mentioned that they liked to dance and play, they mentioned that Space camp was one of the best in recent period as most of them do not go to school or go online and they stay at home most of the time as there is nowhere to go. One participant mentioned: *"I like the most when we do something creative. Especially when we sing—there were moments when we danced or sang some songs. And I also enjoyed when we painted. For example, on May 29th, our last day there, Lyuba and I made postcards. I made a postcard all by myself, without any help, without anyone else."* Another boy described *"After the space camp, I've been in a good mood all summer."*
- It was mentioned by another local organization "Shchyre Serce" that *"Apart from internally displaced persons (IDPs), we had children from vulnerable families, children with disabilities, those from large families, and children from local Uzhhorod families. These are different groups of children, and in our activities, the divisions are erased, which promotes integration. The children learn to listen, become more united, and more responsible."* Local community members also volunteered at the camps or provided technical support. One notable case involved a man who came to assist with setting up the area and communications. While he was working, a "sunny" girl with Down syndrome, who was living at the camp, approached him and began to talk. The man was moved to tears and said, *"I have a 4-year-old child myself, and what you're doing here is incredible... I'll help you for free."* This example illustrates how the camp fostered a socially responsible attitude among community members, awakening compassion and a willingness to help. It was also indicated by participants of the business trainings that a mixture of people both local and IPDs was a positive factor of the program (people that are relocated motivated local people to see new opportunities) and they even started cooperating together).

- One partner organization provided individual and group counselling sessions (up to five per case) one child described her experience: *“Well, for example, I worked with Zhenya, a psychologist, online. There were also moments related to what was bothering me, some misunderstandings. So, Zhenya and I talked, and I felt better; she calmed me down...”* another girl mentioned: *“I felt supported and understood. The psychologist found the right words to support me, and I can tell her absolutely everything, and she is on the same level with me.”*
- For some beneficiaries, **this was their first time traveling outside their region**, which broadened their cultural experiences. Partners also noted that after participating in these activities, people became more open to working with psychologists and were more willing to seek further consultation if needed, overcoming the stigma often associated with seeing a psychologist. This was especially significant for small rural communities where such opportunities had never existed before. Respondents recognized the value of the project in providing free, high-quality psychological assistance, offering support, and giving people a chance to be heard: *“Many beneficiaries received this type of service for the first time. The impact of the project on the community goes beyond reducing psychological stress among beneficiaries; it also improves the effectiveness of their work in organizations where they are employed and within their families.”*
- Partners emphasized **that family-format camps are particularly important** and needed because many people do not have the resources to afford vacations, especially those living in Eastern regions under constant shelling or those who have lost their homes or loved ones. One mother shared during an interview, *“We felt as if it were peacetime... as if we were on vacation... And also, the children finally slept; I slept too, because before that they were constantly screaming and crying at night. We returned to a pre-war way of life, with the children nearby, but without needing constant supervision or being in a state of perpetual fear for them.”* Another mother said, *“I could finally sleep in my pajamas, not in clothes, ready to run out of the house at any moment.”*. Further topic of engaging single dads also can be discussed, as losses happens also among females leaving single male parents who might need special program. Therefore, further topic of gender inclusivity can be discussed.
- A psychologist mentioned, *“Mothers not only had the opportunity to express themselves during psychological sessions and reduce stress, but they also took away tools (such as metaphorical cards and techniques) to use at home when communicating with their children. They learned to talk about their fears instead of keeping them inside and accumulating anxiety and stress. Additionally, a network was created among the mothers—a chat group where they exchange useful information.”*
- The prolonged consequences of war, such as the loss of loved ones, multiple relocations, and the destruction of homes, have led to depression, suicidal thoughts, PTSD, and other issues that cannot be easily addressed through short-term interventions like crisis intervention. In some camps, for example, psychologists used instruments to assess the level of PTSD in children before the camp and to determine if individual support would be needed after the camp. Such recovery camps are one of the best gateways for mothers and teenagers to access professional psychological support. *“They do need help, but they won't ask for it themselves... However, through conversations, various activities, games, and a compassionate, humane approach, the*

teenagers start sharing their stories with peers in a circle, which allows them to release the burden... The same happens with the mothers."

- In another case, a respondent had her first experience with such support and was surprised to find that psychologists can genuinely help, and that after meeting with them, things became easier: *"Everything happens according to your wishes: if you want to talk, talk; if you want to be silent, be silent; if you want to draw, draw; if you want to cry, cry... it's all up to you."* The effect of the meetings was almost immediate. She also observed that her child stopped being frightened of loud noises and alarm signals, and most importantly, began to analyze what was happening.
- One more achievement of the camp programs is that **teenagers** who participated in the camps **made new friends**. With prolonged online learning and the loss of social contacts, this has become a significant problem for children. It was mentioned by the children that the camp *"was the happiest event in their lives, or during the war."* Two mothers from KIIs mentioned that their teenagers still talk to each other after the camp and have learned to make new friends more easily. Many children reported that they felt heard seriously for the first time.
- Partners also noted that the project support helped camp and PSS teams increase their capacity and professionalism. Some team members, who had previously been volunteers with a passion for working with children, have now become professional mentors, among other roles.

3. Boosted local partnership and grassroots initiatives

- Partners mentioned several times that they are **happy their opinions are heard**. They had the opportunity to communicate with the TdH and CF managerial teams, allowing them to be proactive and flexible. Additionally, two partners noted that they consulted with TdH on other institutional matters, such as financial and program planning. Moreover, all partner organizations indicated that TdH's approach was very human-oriented, and the three offline meetings and ongoing support helped, at least in part, to reduce the level of professional burnout among staff—a significant issue in the NGO sector after three years of constant emergency response. The positive factor is that it covered admin cost and indirect support for organizations.
- Furthermore, all project partners initiated cooperation either before or during the project with a **broader network of volunteer and grassroots organizations in the field**. As a result of such projects, these organizations were able to expand their teams and capacities. This is a very positive dynamic, as it helps retain people in Eastern locations and strengthens the volunteer movement. For example, the small organization "Unity of Chernihiv" started as a group of volunteers helping hospitals in Chernihiv. They mentioned that, due to strong support from CAMZ, including the reimbursement of travel costs, they were able to accomplish more. Partners also expressed their gratitude for support with items like stationery, rent, and other essentials. Additionally, they mentioned, *"We managed to develop more professional skills, created a database of internally displaced persons (IDPs) in Chernihiv, and compiled a database of people who lost relatives. Now, we are proficient in reporting and providing data."* Also, partners used various SMM channels for communication with beneficiaries.

- Overall, organizations in these fields have developed highly effective beneficiary databases. For instance, a local partner organization in Nikopol, "Doloni Dopomohy Nikopolshchyny," supported by the Charity Fund Vplyv, has a database of 8,000 beneficiaries, including families who have lost the head of the family or families with disabilities. In Kherson, there are 6,000 people in their database, and they have learned to use KOBO. The teams on the ground demonstrated a values-driven approach to providing assistance, as one person expressed: *"The task is to view our work as a mission—we are helping those who truly need this assistance."*
- One partner that works primarily with teenagers and youth also mentioned that the project supported the increase in professionalism and scaling within **youth engagement and the volunteer movement**. Additionally, two other partners indicated that parents who had been recipients of some services, like camps, also started to engage as volunteers in future camps or local activities.

4. Focused particularly on people with disabilities.

- One of the most significant values of the project is its focus on people with disabilities. In total project covered **4173** people with disabilities (according to understanding of Ukrainian people, there are several levels of disabilities and they all have medical conclusions, this doesn't include inclusion in broader term when person do not have medical document). The project places particular emphasis **on supporting beneficiaries with disabilities, including both families and institutions** that provide such services. For example, in the Zakarpattia region, the organization provided support to institutional care homes for children and people with disabilities. These institutions host individuals under 18 as well as adults with mental disabilities. The project helped make the premises more accessible for people in wheelchairs and also repaired old parts of the building to increase the number of places available for children. They also helped to develop a new genealogical cabinet accessible for people at the wheelchairs. Another partner worked with and supported grassroots initiatives that aim to organize daycare services for children with disabilities in the region.
- Based on interviews with external experts and key informant interviews (KIIs) in the field, families with disabilities are identified as one of the most vulnerable groups. First, many services that were available before 2022 have been terminated. Second, there are numerous challenges brought on by the war for people with disabilities, such as difficulties in quickly accessing shelters, explaining security concerns to children, using the online education system, dealing with relocation issues, and finding suitable living accommodations. Partners mentioned that this component of the project is one of the most valuable. For example, *"A woman with two children, who has a disability, arrived from Popasna to Nikopol and requires constant treatment. Our assistance is very important for this family."*
- During the evaluation, the team received a transcription of the focus group recording, where five children and young people with disabilities who participated in activities organized by the local organization "Bachyty sercem," which develops spaces for education and socialization for children with inclusion needs, shared their experiences. Based on the observations of the beneficiaries, we can conclude that such spaces are vital for them. They do not have many places to go. They mentioned how happy they are to be there, engaging in creative work, dancing, studying, and other activities. One participant, who is 21 years old, mentioned that she really needs places

where she can be with her peers, as she doesn't study or work anywhere. Another child said, *“What would I change about the camp? I would make it so that we all became close friends and spent a lot of time talking together, maybe even visiting each other. Like normal people, we would go out together somewhere.”*

- Another important aspect of the support provided is **medical equipment**. For instance, due to support from a CAMZ partner in Uzhhorod, the state clinic managed to open a cabinet for pregnant women, equipped with new, modern, free-of-charge diagnostic equipment. This facility is also accessible to people with disabilities, as they were able to develop a ramp for easier access.

5. Enhanced capacity on different levels

5.1 Child protection and safeguarding policies

Based on the assessment forms, all organizations participating in the consortium successfully improved their **child protection and overall safeguarding policies**. It was mentioned by 62,5% of partners' representatives that they had some work in CP policies before the project and 37% had partly some work in this direction. Nevertheless, the work with a safeguarding approach was universally acknowledged by all partners as a positive development. The partner organizations NUMO, VPLYV and CAMZ highlighted that they now implement these policies with their local partners and are also teaching them to develop their own policies. NUMO became a big adapter of the policies and tries to bring it to all its partners. As a result of Tdh's support, these organizations have increased their awareness of child protection in crisis situations and have discussed protection cases in shelters, camps, and other settings. This approach has enabled them to develop prevention measures in case any issues arise. Additionally, they integrated child protection protocols into their recruitment processes.

- To illustrate, here are some quotations from partners: *“A final version of the [safeguarding] policies was formulated, which employees not only reviewed but also signed a written agreement to adhere to. This ensures that all staff members are fully committed to working in accordance with these policies.”*
- Another partner, who works with grassroots initiatives focused on people with disabilities, mentioned: *“The team successfully formulated a comprehensive version of the policies that are now used consistently across all operations—not only for children but also for adults, with a focus on people with disabilities.”*
- One organization reported significant progress by updating existing policies and integrating newly developed ones into their operations. These included *“Child and Vulnerable Adult Protection Policy”, “Policy on Preventing Sexual Exploitation and Sexual Abuse”, and “Whistleblower Policy.”* These updated and newly developed policies are now a core part of the organization's activities, ensuring a higher standard of care and protection for vulnerable populations.”

5.2. Institutional growth of partners

According to the organization assessment forms and interviews, the project contributed to a significant increase in the **overall capacity of the partner** organizations. Specifically, 62.5% of respondents (who could indicate up to three priorities) reported that the project helped improve their financial management, MEAL (Monitoring, Evaluation, Accountability, and Learning) systems and expanded the

scope of their programmatic work. Additionally, 50% of respondents indicated that the project facilitated the strengthening of local partnerships on the ground. However, there was no notable improvement in communication, advocacy, or networking capacities. A few partners (three responses) also mentioned improvements in their procurement systems. Besides, they also learned to use new data system like KOBO as 75 % never used it before.

- At least three partners mentioned that the humanitarian response is a relatively new sector for them, where they became active following the full-scale invasion. They faced a rapid increase in tasks, personnel, and a lack of time to establish proper processes. Nevertheless, they view this as a positive push for their organizations. Two partners mentioned that the project inspired them to do more humanitarian work. One organization even managed to set up a few shelters thanks to a joint project with Terra, which led them in this new direction.
- It appears that partners were successful in providing adequate visibility for the project through media articles, social media channels, and external visual branding of parcels (The evaluation team did not specifically assess the quality and quantity of these publications and only verified that child protection principles were upheld in photo and video content).

5.3. Demonstrated the human-oriented approach and project efficiency

- The overall project integrated AAP principles in its work. In particular, via close work with volunteers at the ground, feedback mechanism and regular PDMs, sharing of information with each other and other clusters' partners (but only part of the information was shared with clusters, more explanation in challenges) The PDM forms included a set of questions to receive people feedback on the quality of product and distribution process, with ability to improve in the following period. At the same time, it is important to remember that people who receive basic humanitarian support will hardly say negative feedback over the phone due to the fear of not receiving support next time and also their vulnerability status when the person becomes dependent and thankful for any support. Therefore, additional small talks with beneficiaries will be helpful to improve the design of the project in the future.
- Based on interviews with grassroots partners, who helped with distribution, it is possible to observe that the management team made efforts to enhance the efficiency and responsiveness of various activities. For instance, organizations aimed to make the **distribution process more people-oriented**. A volunteer from "Unity of Chernihiv" shared a story that exemplifies this approach: "I remember a story about a woman who arrived from Kharkiv with three children and had just given birth to her fourth child in Chernihiv two weeks earlier. She came with her newborn to collect a humanitarian package. We organized everything so that she wouldn't have to stand in line and could receive everything she needed. The same approach we did for people with disabilities." This demonstrates a commitment to ensuring that beneficiaries are treated with dignity and care during the distribution process.

In addition, there were efforts to provide **child-friendly services** while parents waited for support. However, according to key informant interviews (KIIs) with partners, this area still requires improvement as there was a lack of materials, place and staff to do it on regular basis.

- The project team continuously **adapted the project to better meet the actual needs of the communities**. For example, in regions where other organizations were distributing food items, this project focused on distributing hygiene kits or reaching more remote communities. Or use remaining costs for more important activities if food items were irrelevant. They also used saved cost (due to the growth of the foreign currency or decrease of prices in the regions) to scale up activities as much as possible (for example SiLab mentioned that they spent less cost for renting and hotels and could add more participants instead - 29 women instead of 20 in Kyiv region and 25 or 24 women in each region instead of 20 that was planned).

The same example was relevant for the case management approach implemented by CAMZ. They planned **legal support** for people in the Zakarpattya region, but they found that there is a much higher need in areas where the food items are distributed (closer to the frontline) therefore, they worked online with people there, providing all the needed consultations. CAMZ noticed that *“Often people do not know their rights or what assistance they can expect from the government. We help with documents (initially, a lawyer tried to visit collective centers, but it became clear that the greatest need was at food distribution points where lawyers could not reach, so we started providing assistance online). The most requests are about property in occupied territories, payments, and so on.”*

The project team demonstrated the ability to make small improvements not waiting till the end of the project (for example, the psychologists noted: *“We faced with the situation when clients sometimes were not responsible for attending consultations and groups. Clients filled out a registration form and chose a time, but then simply did not respond and did not come to the meeting. To change the situation, we gathered supervision and wrote down the rules for receiving free consultations, which we started sending to all new clients directly”*).

According to the PDM data, 75 % of respondents (sample - 1663 people) confirmed that the assistance that was provided met their needs on 4 out of 4. 26 % selected 3 out of 4. 75 % replied that one parcel was enough for their family versus 18 % who claimed that not.

- To add more, local partners and beneficiaries, particularly in schools and hospitals, praised the **project's procurement and logistics management**. One partner noted, *“Everything that was promised and negotiated was delivered. We felt cared for and appreciated. For example, partners asked us if it would be convenient to receive the food items on a specific day. Such attention was unprecedented. This experience was a pleasant revelation in our collaboration and greatly helped us to work effectively.”*
- **The predictability of supplies and well-planned schedules were also highlighted as key strengths:** *“We knew exactly what to expect, in what quantities, and during which periods.”* Moreover, local partners appreciated the careful selection of items for food and hygiene kits, which were genuinely based on the specific needs of the community rather than being generic, one-size-fits-all solutions. According to some local grassroots partners, this cooperation helped increase their sense of self-respect and dignity.

- **Finally, it is important to mention that significant efforts were made at the central level from TDH team to support partners throughout all stages of the project.** A sensitive and careful approach was employed, which played a crucial role in assisting partners in their daily work and helped to prevent burnout. This level of support ensured that the partners could maintain their capacity and motivation, contributing to the overall success and sustainability of the project.

6. Livelihood component - capacity development for women and youth and social workers

- Another strong aspect of the project is **its multisectoral approach, combining humanitarian aid with recovery efforts.** This approach is reflected in activities **focused on capacity development for mothers and women who wish to start businesses and gain entrepreneurship skills.** The program specifically targeted women who had previously owned small businesses but lost them due to the war, as well as those who already had business ideas but needed additional knowledge and skills to get started.

6.1. Entrepreneurship trainings for women

- Under Activity 3.3, this component was implemented through a three-day offline training program run by one partner organization SiLab. The approximate cost per participant was 550 EUR, which covered all expenses, including accommodation, travel costs, and the training itself—a reasonable cost for such services. On average, each session included 25 participants per region. Overall, 261 women were selected out of 1,475 applications, with more than 70% being internally displaced persons (IDPs). Out of them 28 were mothers of three or more children, 16 were single mothers, 19 were people with disabilities.
- The results of the training show that 18 women have already opened their businesses, and 45 are almost at the finish line (as of June 2023). In Kharkiv, a network of ten women self-organized to register an NGO and pursue social business initiatives.
- It was mentioned by one beneficiaries that they improved specific skills like developing business plans and marketing strategies for example, one woman told us that she is satisfied with the training because she learned "how to properly" develop a business. She received a boost for development and has actually grown her business: she came up with a new name for her products, registered her trademark, conducted market analysis, studied the needs of her target audience, started managing social media pages, and introduced new products into her production (in addition to meat, she began producing fruit pastilles).
- One of the most positive outcomes observed among the beneficiaries was the psychological support provided during the evening sessions of the training. Many women found this aspect particularly valuable, as it helped them feel more relaxed and supported.
- Moreover, the training allowed participants to bring their children along if they had no one to care for them at home. This was also highlighted as a very positive aspect of the program.

6.2. Youth work component

- The project placed particular emphasis on supporting youth and teenagers, especially those who are already students living independently from their parents but who remain a vulnerable group in the context of the ongoing war. One partner NUMO contributed to the repair and equipping of 10 child- and youth-friendly, safe, and inclusive spaces in the following regions:
 - Kyiv - Kyiv Oblast
 - Bucha - Kyiv Oblast
 - Kyiv - Kyiv Oblast
 - Lutsk - Volyn Oblast
 - Kryvyi Rih - Dnipropetrovsk Oblast
 - Mykhailivka - (There are several places named Mykhailivka in Ukraine, but one prominent one is in Zaporizhzhia Oblast)
 - Znamianka - Kirovohrad Oblast
 - Izium - Kharkiv Oblast
 - Kherson - Kherson Oblast
- These spaces offer young people **access to individual and group activities, recreation**, and opportunities for exchange and information. These spaces' capacity and operational models vary; some are housed in local community premises and do not incur rental costs, while others are located in commercial spaces. Five locations for these premises were selected through a competitive process and five belonged to local partners of NUMO (two of them were damaged by war). Most hubs based on the KIIs are already engaging with their target audiences.
- In addition, **specialized mentorship support** was provided for teenagers and youth in various settings such as youth centers, universities, clubs, and libraries. A total of 1,447 young people, with an average age of 19, were reached through these activities (in total, around 180 activities or events on various topics). The focus was on preventing information propaganda, promoting active citizenship, and providing lectures on historical heritage and national identity.
- One partner CAMZ also supported teenagers in preparing for graduation exams, which was highly valued, especially given the need to bridge educational gaps.

6.3. Psychoeducation in trauma-informed approach for staff of shelters, institutions, and NGOs

- One partner organization, CAMZ, was responsible for providing **trauma-related training** to staff in institutions like the Pension Fund, facilities for people with disabilities, and hospitals. This training was conducted on-site in a short format, lasting up to two hours per session with multiple sessions spread over several days. This format was most suitable for the participants, as they were not willing or able to attend training after work or on weekends, and conducting it during work hours was also nearly impossible. For many participants, particularly those in remote areas like Zakarpattia, this was their first experience working with trauma-related topics. They often interact with individuals who have experienced trauma, such as vulnerable families, pensioners, veterans,

and displaced persons. The training was positively received, and there is interest in expanding this component in the future.

To summarize, the project successfully implemented its expected activities, achieving both anticipated and unexpected positive outcomes.

Factors that contributed to this success:

- **Flexible and Supportive Management Approach:** TdH's management approach was adaptable and supportive, which played a crucial role in navigating challenges and maintaining project momentum.
- **Use of the Local Networks and Knowledge:** The local partners' existing databases and on-the-ground knowledge were crucial in identifying and reaching the most vulnerable populations, ensuring that aid was delivered to those in greatest need. The grassroots organizations and local institutions were generally trusted by the communities, which helped facilitate smoother distribution processes and increased the willingness of beneficiaries to engage with the aid programs.
- **Multisectoral Focus on Families with Children:** By concentrating on families with children as the primary target audience, the project ensured a holistic approach, addressing a wide range of needs through multisectoral interventions.
- **Combination of Humanitarian and Livelihood Support:** The integration of immediate humanitarian aid with longer-term livelihood support created a balanced response, catering to both urgent and sustainable needs.
- **Consortium of Diverse Partners:** The consortium comprised partners with varying agendas and priorities, which enriched the project with diverse perspectives and expertise, contributing to its overall success.

Challenges Defined in the Project:

Based on the evaluation assessment, it is possible to highlight the following challenges that arose during the project implementation:

Managerial and Security Constraints

1. The project is run as a consortium of partners, but due to overburdening with the overall response tasks and lack of constant communication, **the partnership network for referrals** and joint cooperation in delivery was not fully developed. During the interviews, it was noted rather ad hoc that, for example, information about training on women's entrepreneurship skills was shared among women in some partners' shelters and partners' networks, but the effectiveness of that was never followed. However, in general, no proper internal referrals were organized. This led to another challenge: some partners, who focused solely on specific components like food

distribution, lacked a multisectoral approach. Consequently, people in the communities where they received food parcels **did not have access to case management support or opportunities to work with psychologists**. Meanwhile, people in those communities identified such needs, frequently mentioning that summer camps for their children would be one of the greatest needs for the community. Besides, only one organization provided a case management approach while such an approach would be needed more for partners to integrate.

2. Another challenge identified by the team is the **varying capacity and engagement levels of partners**. As a result, the quality of data produced and the quality of services provided may differ significantly from one partner to another. As a result, there was **no unified approach to organizing the system to collect the data**, report or use SOPs developed for certain services. Not a standardized data collection approach complicates synchronization on the central management level (as a result, not all positive achievements are reported to the cluster system for example or are easy to get for external parties like our team). Such an approach also decreases the level of responsibility as some partners do not report on planned time.
3. Another important challenge mentioned several times is the **overall burnout within the NGO sector at all levels**. Staff members are working tirelessly, but many personal are women, often mothers, whose husbands are at war. These women not only have to manage their professional responsibilities but also take full care of their families. Additionally, they face difficulties in finding manpower for essential tasks such as logistics, driving, and repairs. This has complicated the selection of service providers and led to delays in certain aspects of the project. Besides, they mentioned that such fatigue complicated their engagement in better cooperation and networking as it all requires resources and time.
4. One significant challenge for fieldwork is **security**. The management team constantly worries about the safety of staff responsible for delivery and distribution in high-risk areas like Nikopol and Kherson. It is difficult to predict what might happen during distribution and other operations in these areas. Additionally, technical obstacles such as blackouts and lack of internet connectivity further complicate the workflow. Managerial challenges, including delays in financial payments, postponement of budget change decisions, and the inability to modify activities, have also been noted as additional difficulties.
5. The division of management tasks between the charity foundation (CF) and Terre des Hommes (TdH) initially led to some confusion about roles and responsibilities. Although this issue was largely addressed through improved cooperation and communication, regular coordination meetings would help resolve management issues more effectively. Such meetings could facilitate ongoing feedback and ensure a clearer delineation of duties within the project.
6. Finally, some partners expressed interest in scaling up certain activities within the project. However, they noted that there are insufficient budget resources allocated for these components, which limits their ability to expand these efforts. It was also noted that some types of activities like capacity development of local state institutions in dealing with trauma were provided by only one partner, while such work can significantly impact the capacity of social personnel, who work with children on the ground (teachers, social workers, etc).

7. Several times, partners mentioned that the **MEAL** (Monitoring, Evaluation, Accountability, and Learning) system was not set up from the beginning, and they expressed a desire for clearer feedback on what they were doing well or poorly, along with more explicit guidelines. It was also noted that not all beneficiaries have access to the internet, making it difficult for them to provide feedback via QR codes. Partners indicated their readiness to learn and improve their services based on the feedback they receive from beneficiaries, but they emphasized that this needs to be part of a constant cycle of communication.

Challenges related to the direct fieldwork

1. The significant challenge identified in the PSS component was **the time limitation in the psychological support provided**. Partner organization “Vplyv” was responsible for offering psychological support through group and individual counseling in areas close to the frontline. The program was designed as a crisis response, covering approximately five sessions per case. However, this number proved to be insufficient for addressing severe trauma, such as PTSD and loss of loved ones. Unfortunately, there is an increasing number of people who need ongoing support to deal with the consequences of war, especially those related to loss and trauma. Also, the supervision support was not budgeted for the teams of psychologists although badly needed for the field teams.
2. One partner responsible for providing training on business skills for women mentioned that they were only able to select 10% of the applicants for the training program. Many more women expressed the need for these skills, highlighting a gap between available resources and the demand for such training (one of the options proposed by the partner is to do part of the training online for the broader audience). They also mentioned that mentorship support will be needed. The same was relevant for selecting families for recreational activities, people wanted to stay longer (some programs were only for weekends) and mentioned a few times that there were many families in need.
3. With the direct food and hygienic distribution, the main complaints came from elderly individuals and those from different target areas. Unfortunately, overall, external observations indicate that **humanitarian assistance in the community has become 'the apple of discord**.
4. The delivery of food parcels was planned to occur only once during the project (with only a few locations covered twice), raising concerns about whether this approach effectively met the long-term needs of the beneficiaries. This issue was particularly relevant in rural frontline areas where people were not covered by other donors, making the project's support crucial. The question remains whether the single distribution provided sufficient resources to sustain these communities beyond the initial relief.
5. A few times, partners mentioned that their humanitarian parcels were highly valued and seen as the best compared to other humanitarian missions, with people eagerly awaiting their distribution. While this was perceived positively, it also highlighted a challenge: it could foster unnecessary competition between providers of support and raise concerns about the necessity of the support if multiple organizations are working in the same area.

6. Local grassroots initiatives observed that humanitarian support reveals diverse reactions among people. Some continue to accept aid even when they don't need it as urgently as others, while some refuse assistance due to a sense of pride or self-respect. One quote captures this sentiment: "There are cases where people, out of dignity and shame, refuse the humanitarian package, even though they need it. We work with them individually to reassure them that this aid is temporary support that can save lives.
7. Another challenge mentioned by a few partners is **that people are in great need of psychological support**. When they come to receive food parcels, they often start sharing their stories and require more time and attention. However, those distributing the aid often don't have the time to listen to these stories, making it difficult to address the emotional needs of the beneficiaries. To illustrate: *"A young man, a university student and IDP from Mariupol, came to us and shared all the horrors he had witnessed... Children openly talk about the terrifying experiences they've had. On one hand, it's good that they are expressing these things, but on the other hand, during the distribution of humanitarian aid, it requires more time..."* — Volunteer, NGO "Unity of Chernihiv."
8. Many people require **targeted support** beyond just food, especially after shelling, when they have lost everything and need clothing or kitchen supplies. Families with disabled children also mentioned that they badly need more complex support like daycare.
9. In certain cases, non-specialized organizations (such as educational institutions that were asked to distribute humanitarian aid) encountered difficulties in managing beneficiary documentation (due to the large number of beneficiaries).
10. Finally, it was mentioned a few times that organizations need to consider how to make their services more accessible for people with physical disabilities. This challenge is significant, especially in the context of older Soviet-era buildings with stairs, which can limit accessibility to the youth hubs and other services provided on the ground. This issue was raised as a broader concern that may require additional funding and resources. However, it plays a crucial role in creating a more inclusive society.

The project faced several challenges during its implementation, both related to internal processes and the on-the-ground situation.

Key Hindering Factors:

There were both internal and external key factors that impacted the realization of the project such as

- There were insufficiently articulated guidelines for certain coordination processes such as MEAL (Monitoring, Evaluation, Accountability, and Learning), reporting standards, shared databases, and internal referrals. (internal factor)
- The security risks in frontline areas, coupled with the technical and emotional burdens associated with working in a war zone, significantly hindered operations. The constant threat to the safety of staff and beneficiaries complicated the delivery of services. (external factor)

- There was a strong desire to provide more comprehensive and complex support to a larger number of people, but this was constrained by the limited budget and time available. Balancing the need for broad coverage with the depth of support provided was a continual challenge (external)

Key Lessons learned and recommendations:

- After a detailed analysis of the project's context and operations, it is evident that people require **multisectoral support** to effectively meet their needs. Providing food parcels in isolation from other forms of assistance does not always make a significant difference. To enhance the impact of support, it would be beneficial to offer more **targeted assistance** where needed, including winterization supplies, basic kitchen items, and other essentials based on address needs. Ideally, the budget should be planned with flexibility to adapt to evolving contextual needs. Implementing a case management approach could potentially strengthen the response in the region, particularly for targeted assistance to vulnerable groups like families with disabilities. Case management can become place for joined affords with the **state social services** (therefore covering the gaps or using referral approach, as well as supplemented by mentoring or learning programs for state social services). This approach would allow for more tailored and continuous support, ensuring that the specific needs of these groups are met more effectively and comprehensively. Moreover, it is preferable to switch in 2025 for **cash or voucher modality** where relevant in bigger cities even in the frontline like Kharkiv thus increasing the dignity approach and flexibility for the beneficiaries to support their needs. The expedition is relevant for families with limited mobility.
- It is important to keep in mind that providing humanitarian assistance in highly dangerous frontline locations lead to reluctance of people to relocate to the safer place leading to increase of protection risks for children. Therefore, careful selection of place have to be taken into account with additional option to support with evacuation in case of needs and **national strategy of evacuation from locations where situation deteriorate**.
- Additionally, **continuing or even increasing support to institutions**, such as medical facilities, could extend the project's reach and benefit a greater number of people. This is especially relevant for specialized equipment that can serve many more beneficiaries in the long term.
- **Expanding services for people with disabilities is also crucial**. That was mentioned during a few interviews with the external experts and also highlighted in the meeting with a mother (Kyiv region), who cares for her 25-year-old child with a disability and supported by two interviews with external stakeholders. At the community level, there are often no services available for people with disabilities to interact and engage with others, leading to their isolation at home. Addressing this need is critical and should be prioritized alongside more traditional humanitarian assistance.
- It's very positive that the project supports the **localization process**, engaging volunteers and small grassroots initiatives, as well as partners involved in supporting local communities. During one interview, it was mentioned that there are frontline villages where no INGOs are willing to go, but local volunteers are stepping up, with permission from military services, to provide humanitarian

assistance. To sustain and further develop these efforts—considering how invaluable their work is—there should be provisions for retreats, training, and financial support to **cover salaries and administrative costs**, among other needs. For some people in distant frontline locations, where no jobs are available that is also important support for their families and it important to support them so that stay and do the work they do.

- One of the project's biggest achievements are the **psychosocial camps** for children and mothers, offered in various formats. Partners have highlighted that, while not many donors are willing to fund such camps, they have the most significant impact on families and children, as evidenced by case stories. Therefore, these camps should **remain a priority**, with a possible extension to include broader family formats, particularly those focused on veterans and their families.
- For most partners, cooperation within the consortium was a relatively new experience. They **expressed interest in enhancing collaboration**, exchanging experiences, and working on future joint projects, advocacy, and networking. More **focused efforts can be facilitated** at the managerial level, which would be beneficial in developing thematic networks that extend beyond specific projects and are centered around thematic areas. For instance, organizations involved in camp activities or those working with disabled children could collaborate to share experiences, best practices, and possibly develop a shared strategic vision for advocacy or joint policies. This approach could strengthen partnerships and create more cohesive and impactful initiatives.
- A targeted focus on developing an **internal referral system** based on specific needs (for example legal, cash, MHPSS support, etc) would be highly beneficial in creating a supportive environment for beneficiaries. This approach could be particularly relevant for certain categories identified as the most vulnerable, such as families with children with disabilities. In addition, (under the condition of engaging finance support for admin position) **the external referral** might be also significantly beneficial for project and impact on beneficiaries who might need more complex support (for example legal, winterization, shelter, evacuation, education). Many other INGOs and local NGOs have focus on the same locations and can be beneficial for complex approach towards needs of beneficiaries.
- Based on partner observations in the **PSS work**, it was found that adults preferred group meetings over individual sessions, particularly at the initial stages of working with a psychologist. Group settings allowed parents to share their needs, requests, troubles, and experiences with each other, highlighting the importance of mutual support and communication. Therefore, developing of dedicated communities for individuals to recover, socialize, and establish stable routines could significantly benefit **long-term healing**, especially in deoccupied areas. In these regions, where people have endured significant trauma and have a strong need for dialogue, creating spaces for ongoing support and **rebuilding trust within communities** is essential, even after the initial psychological support has concluded. The same approach is applicable to teenagers, who often remain online and need spaces to connect with their peers. Therefore, continuing to support the **development of hubs** for such community meetings and networking represents a significant added value for the project

Overall, the **PSS** (Psychosocial Support) component was recognized as an immensely helpful and **supportive activity**, complementing other services offered. For instance, the partner organization SiLAB, which conducted business skills training for women, integrated a small PSS component into their evening

programs. This addition proved crucial in supporting women on the ground. For example, one participant stated, "I smiled for the first time since February 2022." Often, individuals struggle to engage in new activities because they are overwhelmed by negative thoughts, loss, and depression. Therefore, it is recommended that PSS services be incorporated into all other project components, including those aimed at youth.

It was also mentioned that almost all people (both beneficiaries and volunteers who work there) who stay for a long time in frontline locations like Kherson, where the constant shelling and deaths take place, there is a **high level of PTSD** and people need to know basic rules and instruction how to self manage the situation and help each other without professional support.

Additionally, state and municipal institutions that received **psychoeducation in trauma-informed approaches** for their staff have expressed a strong interest in further training. Currently, these trainings are provided by only one partner, suggesting an opportunity to expand this practice and share the experience with other partners as well.

- Additionally, partners mentioned that there is a shortage of qualified specialists to work with children in the frontline and rural communities. Therefore, **programs to educate** and prepare individuals, especially young people, to take on **roles in child support** and development (after-school activities, education, and camp work) are needed. These programs are not a short-term solution but involve mentorship support and long-term investment. However, they are crucial for the sustained recovery of society from war trauma.
- Most Ukrainian NGOs, including the project partners, that previously focused on systemic changes and reforms had to shift to humanitarian response due to the ongoing crisis and the majority of available funding being allocated for emergency relief. However, the need for systemic changes remains crucial. In the aftermath of such a prolonged disaster, **both relief and development efforts** must go hand in hand to reduce dependency on humanitarian aid and preserve the country's economic potential.
- Partner organizations operate under high stress and pressure, dealing with logistics, deadlines, security, and other challenges. In such conditions, staff members feel particularly vulnerable. **Supportive meetings** focused on their mental health are essential and highly appreciated; three offline meetings have been conducted during the project year.
- In addition to these meetings, effective burnout prevention involves **coordinated management support** with clear guidelines, expectations, and feedback. Regular managerial check-in meetings with a clear agenda, feedback, and prompt discussions of pressing issues can also help to prevent burnout among managerial teams who make decisions. Such approach can help to **unify certain standards** or develop joined approach to camps, PSS support, case management, etc. Those can be monthly meeting with specific focused on certain topics engaging not the whole team, but only relevant staff. It was also mentioned by staff that the **thematic meetings** for people responsible for admin tasks like finance, procurement, can be added value for NGOs.
- Also partners had recommendations for improving the centralized feedback mechanism (75% expressed that they are satisfied, but have some moments to recommend). By providing a structured framework, these guidelines help ensure that all team members including the new one

are aligned, which can lead to more efficient operations, better data collection, and more effective decision-making processes. For example, partners can decide on feedback mechanism to assess the quality of camps, or PSS work. This work is already done, but rather based on their own experience and practice. It is recommended to discuss on the joined meeting and agree which scales can be used after the PSS support to measure the changes in mental health wellness. As for most of partners these topics are rather new it is recommended to use practices from leading Ukrainian and international NGOs that work in the PSS topic under the facilitation of the expert in mental health support. Additional important topic for discussion is protected data based on beneficiaries data (from evaluations' observation the approach to security is not unified within the project and different organizations might have different approaches that have to be verified in terms of security standards). This is especially relevant for the data exchange at the local level from local partners to national partners.

- All partners have expressed **positive feedback about the work done on child protection** policies, and three of them are eager to extend this knowledge to local institutions and other stakeholders engaged in the projects. Such further work can include potential training sessions for local-level stakeholders or their learning seminars etc.
- Although the project's second phase plans to reduce educational activities, there remains a significant need for both formal and informal **education services** among children and youth. For example, preparation for the graduation exam organized by CAMZ was very positively assessed by beneficiaries, who do not have additional resources to pay for tutors. These services are crucial for their development and well-being, particularly in the current context where many young people have faced disruptions to their education and social environments.
- According to the assessment, the partners are interested in increasing their **professional growth in the topic** of how to improve fundraising, team management, and advocacy, which are less important but still needed in the topic of financial management.

Case stories to illustrate key findings:

To illustrate certain findings, the reporting team used stories and case descriptions from field interviews.

1. First Case to illustrate partnership relationship at the grass root level: "We Are Not Just 'Hands and Feet'" *(Based on the story from staff member, who work in the NGO "Kherson Regional League of 8 Social Workers of Ukraine" (Kherson))*

The organization featured in this project was a subcontractor in collaboration with the Charitable Foundation "Vplyv." It consists of up to 10 people, including volunteers. The organization has been working in the humanitarian field since the de-occupation of Kherson. The Charitable Foundation "Vplyv" initiated the collaboration.

The organization is involved in one aspect of the project: forming and distributing humanitarian aid packages to families with children (including large families and those with disabilities), internally displaced persons (IDPs), and those in difficult life circumstances. The beneficiary database was developed by the

organization even before collaborating with "Vplyv." With the start of the project, announcements about the distribution of humanitarian aid were published on social media, through their Telegram channel, which has 6,000 subscribers. Before working with the Charitable Foundation "Vplyv," the organization had a reputation as a reliable partner and contractor that could be depended on. As a result of fulfilling the project tasks, the organization's employees increased their self-esteem, became more confident in their abilities and talents, expanded their network of contacts, and strengthened their organizational capacity.

Before collaborating with the Charitable Foundation "Vplyv," the organization worked with various partners who saw them as "hands and feet"—a physical resource that carried out tasks regardless of the circumstances. In the project, the organization's employees experienced what "partnership relations" truly mean when they were treated as equals, not just as contractors. The key criteria for such relationships were:

Care: "Is it convenient for you to receive the shipment on this day...? We had never encountered such an approach before. This experience was a pleasant surprise in our collaboration and greatly helped in our work." **Predictability of deliveries and well-planned schedules:** "We knew exactly what to expect, in what quantities, and during which period." **Trust:** "Involving the team in packaging the sets, 'tasting' the products before announcing the tender results, considering the family composition when assembling the kits (e.g., if there are men in addition to women and children, the kits include hygiene products for these categories). As a result, people sought out packages from this organization, 'because you have good ones.'"

This approach is valuable for effectively fulfilling the assigned tasks because, in addition to providing aid, it also involves strategic planning, flexible responses to beneficiaries' needs, and seeing local partners as experts in the population's needs, not just contractors.

"In the first place, it is important to consult with local executors about the content and relevance of needs, clearly understand the context, and treat with respect those whose cooperation is relied upon. 'It's unpleasant when you are treated as just 'hands and feet.' That is, they call and say: we won the project, we need people. And then we find out that the area targeted for aid has been practically deserted, or the aid arrives with a significant delay (e.g., winter clothing in summer, water pumps three months after the Kakhovka dam was destroyed...)."

2. Second Case to illustrate importance of PSS support: "...this is the happiest event in my life since the war began..." *(Based on the activities within the "Recovery Camp" project (Charitable Organization "Shchyre Sertse") (Olena – a mother who attended the retreat with her children, and Ilona – a teenager who attended the camp with her mother).*

The organization "Senciere Heart" has been active since 2014. It consists of public activists, practical psychologists, and psychotherapists. For work in camps/retreats, the organization involves both volunteer and paid staff (volunteer animators are invited from churches and hospitals, and after their volunteer work, they can transition to staff positions). Within the framework of the "Recovery Camp" psycho-emotional rehabilitation program, free psychological assistance is provided to children and mothers who are in a state of prolonged distress. Among the beneficiaries participating in the camps are families of internally displaced persons (IDPs), children whose fathers are on the front lines or far from their families

due to relocation, children who have fled from front-line areas, children with disabilities (including those with Down syndrome and mild forms of autism), children who have been injured, children from Kharkiv who are in remission after cancer, and children who use wheelchairs or have physical disabilities. The camps and retreats are attended by mothers and children, many of whom have left their region for the first time. Some of them still live in areas under rocket and artillery fire.

One of the unique aspects of Recovery Camp compared to many similar programs is its comprehensive focus on the psychological state of mothers and especially the children attending the camps and retreats. The programs of these events vary depending on the specific traumatic experiences of the beneficiaries. A unique service provided here is screening.

"Before a child arrives at camp, a team of psychologists conducts a screening to identify PTSD and other disorders, and then adjusts their work during the child's stay at the camp according to the screening results. After the camp, a social worker helps the family connect with a psychologist for continued work with the child."

A mother who attended the retreat confirmed during her stay that her fears were true, that *"my child is not like everyone else."* According to her, in other camps, counselors and animators did not pay attention to the child's behavioral peculiarities.

"Here, psychologists observed how my child interacted with peers and suggested an initial diagnosis, and later provided support—information about a resource and inclusive center, contacts of a psychiatrist and psychologist for further work with the child. I have changed the way I interact with my older daughter: 'I used to yell at her if something needed correcting that she had done wrong... now I approach it through teaching: 'Look at what was done—let's fix it together.' My communication style has significantly changed after realizing her uniqueness and the need for more attention to her condition...'"

The organization's team operates based on the principle "do no harm":

- Carefully selected team: The team works professionally and with dedication, taking responsibility like doctors under the principle "do no harm," working with families experiencing high levels of distress. *"These are people who love children. We selected our volunteer animators from churches and hospitals. They do their work with love for the kids. Initially, they worked as volunteers; now they receive salaries and are even more enthusiastic about their work..."*
- Established internal communication mechanism: The psychologists and animators work closely with the coordinators. *"...we review cases: how to replicate success with this mother... we are constantly improving our skills..."*
- Well-designed program: Each camp's program is carefully tailored to the specific needs of the beneficiary group.

Teenagers who attend the camps fulfill one of their most pressing needs—making friends and discovering new aspects of their parents:

"We had joint activities and competitions with our mothers, which was unexpected... we saw them—adults—in a different light."

The experience of attending the retreat leaves a lasting emotional impact: *"The emotions I received there will stay with me for a long time... I want as many families as possible to have this experience..."*

Children say that the camp is *"the happiest event in their lives, or at least since the war began."* Sometimes, thanks to the camp, they had the opportunity to leave their city or region for the first time in their lives.

Donors should note that currently, the camp and retreat format is almost the only opportunity for women and teenagers to engage with a psychologist: *"They need help but won't seek it out themselves... yet here, through conversations, various activities, games, and an ecological, humane approach, teenagers begin to share their stories with peers, unloading their burdens... the same goes for the mothers..."*

3. Third Case to illustrate supporting work with integration: "Experience, Achievements, Impact" Based on the Activities of the Organization "Happy Children" (Recorded from an interview with the founder and executive director, L. Syuzeva)

The organization "Happy Children" has been in existence for over 10 years and has an extensive grant history. It was founded as a union of mothers who dreamed of creating an organization for the development of children, their upbringing, support of talented children, and care for children's health. The organization's goal is to create conditions in which every child feels happy despite any circumstances.

Since the beginning of the full-scale invasion, the organization has been helping internally displaced persons (IDPs) – families with children. The team organizes and conducts annual summer camps and "Care Programs." These programs are unique in that they involve not only IDPs but also local children: *"In Zakarpattia, many children also bear 'scars of war'—not only from IDP families but also children from military families, including those of the fallen, children from families in difficult life circumstances, and from large families."*

The organization promotes the experience of "stitching Ukraine together" by inviting people from eastern Ukraine to Zakarpattia: *"IDPs from Kharkiv region—mothers with children from frontline communities—participate in our programs at the request of communities from Chuhuiv district."*

A distinctive feature of the organization is the active coverage of project activities on social media and television: *"Journalists often attend our events, and this is how we spread ideas, set the tone, and set an example."*

Significant attention is also given to working with teenagers: *"Our psychologists work with teenagers on topics important to them because children often feel unheard and overlooked."*

In addition to psychological assistance, children receive educational support: *"We conducted a trial express course to prepare for the National Multisubject Test (NMT)—covering Ukrainian History, Math, Biology, and Ukrainian Language. Based on the demand, we see how important this was. We plan to repeat it this year, inviting excellent teachers who cover the necessary material for the NMT in three months."*

To our mind, children adopt the organization's values: Respect for others' boundaries and caring for those around them. *"We teach children and teenagers mutual respect and humanity. To show respect and tolerance for each other. Children learn to be friends and to be patient with one another."*

We practiced integration and cohesion: Camp participants see that there is no division between local children and IDPs, or between those more or less affected: *"...Each group is a small slice of society. ... In addition to IDPs, we have children from families in difficult circumstances, children with disabilities, large families, and just families from Uzhhorod. These are groups of different children, and activities neutralize divisions, which promotes integration. Children learn to listen, become more united and responsible (during alarms, children follow the adult). We teach them to rest in a quality, interesting, and useful way (we talk about eco-topics, among other things)." "Participants have discovered Zakarpattia and realized that 'people are kind here,' and that in case of critical danger, they can come here..."*

Networking: People have left their region for the first time in their lives and discovered Zakarpattia. In chats, mothers who participated in the programs communicate independently, and children have made new friends. *"These contacts, connections with us, are valuable."*

Mutual support within the community: *"The project has a positive impact on the Uzhhorod community because 'we have taken on some of the work that the authorities are unable to cover. There are many children who need organized leisure, quality education, and families who lack the resources to access services from psychologists or speech therapists.'"*

4. Forth Case to illustrate impact of PSS work: "Doubts Dispelled..." (Recorded from an interview with Valentyna, a mother of one child, an internally displaced person (IDP) from Izium (a de-occupied city in Kharkiv Oblast), currently residing in Merefa, Kharkiv Oblast, who received psychological assistance (through cooperation with the NGO "VPLYV"))

Before the full-scale invasion, Valentyna had never sought help from psychologists. However, due to the tragic events related to the occupation of her hometown, the shelling, and the evacuation, both she and her child were in a state of distress, with her child developing a dependency on gadgets as a way to distract from anxiety and fears. Valentyna learned about the possibility of receiving psychological help at the school in her new city of residence, Merefa, and from social service workers. The request for professional help focused on stabilizing both her and her child's psychological condition after the consequences of the hostilities (explosions, threat to life, evacuation).

"Both my child and I were afraid of explosions, and my child also developed gadget addiction. I wanted to do something about it..."

The program of working with the psychologist included both individual and group consultations for the mother, as well as separate consultations and sessions for the child. This was Valentyna's first experience with such assistance, and she was surprised to find that psychologists do indeed help, that after meeting with them, things become easier, and most importantly, that there is no pressure during the sessions: *"Everything happens at your own pace: if you want to talk—talk, if you want to stay silent—stay silent, if you want to draw—draw, if you want to cry—cry... everything is up to you."*

Another unexpected outcome was the immediate effect of the first sessions: *"The effect of the meetings was felt almost immediately. As the respondent notes, the child stopped being frightened by loud noises and alarm signals, and most importantly, began to analyze what was happening..."*

An additional "bonus" from the consultations included:

- Educational component of the sessions: Gaining knowledge and skills in self-regulation during stress for both herself and her child, organizing free time with the child (how to play, how to talk). *"We found ways to distract from the gadget... and most importantly! In various situations when communicating with my child, I received a set of tools for responding..."*
- Benefits from group communication with other parents: Sharing problems and solutions. *"It was a new valuable experience: I realized that I am not alone, people shared both their fears and how they found ways to overcome them..."*
- Dispelling stereotypes, fears, and doubts about working with psychologists: *"I now spread the word that working with psychologists is necessary because it helps..."*

Overall, evaluating the consultations she received, Valentyna believes that they were not only helpful in addressing her initial concerns but also *"very timely."*

Regarding necessary changes in the provision of services, Valentyna considers it extremely useful to increase the number of consultations planned within the projects for each individual.

"We were lucky; in addition to these consultations, we participated in sessions and consultations offered through other projects, which helped solidify the results we achieved at the beginning... My request is to increase the number of consultations..."

5. Fifth case on youth engagement *(Story from mentor Olha Savchenko at NGO "Building Ukraine Together" about Nadiya, 18 years)*

Nadiia is an athlete who played volleyball professionally for nine years. However, a year ago, she suffered an injury, ending her potential career in the sport. She began searching for new activities to fill the time she used to spend training. One event became a turning point for her. It was a forum on combating domestic violence, which she attended at a friend's recommendation. There, Nadiia met a girl who, at the time, knew nothing about the city or community activism (now she is one of the most active volunteers at BUR Zaporizhzhia). They agreed to send each other announcements of interesting events in Zaporizhzhia and attend them together.

This is how Nadiia ended up at her first BUR event. However, she didn't immediately enjoy this type of volunteering—renovating and repairing homes turned out to be more challenging than she had anticipated. At that time, Nadiia didn't take into account the rule: "You can leave volunteering at any moment, but volunteering will never leave you."

Afterward, she continued attending various events organized by BUR mentors as part of a project implemented jointly by the National Ukrainian Youth Association (NUMO) and Terre des Hommes with financial support from German Humanitarian Assistance. At these events, she began to meet members of the BUR community—energized, motivated, conscious, and compassionate volunteers who always talked about BUR projects. At that moment, Nadiia realized she wanted to give rebuilding volunteering another try. This is how Nadiia found her path, became a participant in numerous BUR events, and ultimately, a part of the BUR Zaporizhzhia community.

Today, Nadiia is an active volunteer involved in various initiatives by different public and charitable organizations. For example, together with other BUR community volunteers, Nadiia developed and implemented the "Language Express" project. The project's goal was to create a comfortable and safe space for learning the Ukrainian language to help teenagers develop fluent communication skills without corrections or judgments. As part of "Language Express," courses in the Ukrainian language were held for Russian-speaking youth, along with public speaking workshops and stage improvisation training.

Nadiia didn't stop there and joined the BUR Zaporizhzhia team, specifically the media department, as a copywriter. The incredibly warm volunteer community encourages creativity and initiative, so Nadiia had the opportunity to read her own poems at a charity gathering in honor of the community's anniversary.

Now, Nadiia feels she is in the right place, has like-minded friends, and knows that her contribution is very important and necessary. And, of course, she now associates herself with civic activism, plans to implement new volunteer projects, do good deeds, create change, and help develop her hometown of Zaporizhzhia.

List of Annexes

Annex 1. List of people interviewed

List of people from the partners management teams

1. Anhelina Kykyna - Office Manager in CAMZ, Ukraine
2. Anna Gulevska-Chernysh - Head of SiLab, Ukraine
3. Bohdan Tsyuvanyk - Field Officer in CFD, Lviv
4. Daria Dmytrenko - Project Coordinator in TDH, Germany
5. Diana Kuzyk - Monitoring & Evaluation Officer in CFD, Lviv
6. Emilia Brovdi - Feedback & Complaint Officer in CFD, Lviv
7. Friederike Brinks – GFD project coordinator
8. Kateryna Hlushcenko - Communication Specialist in NUMO
9. Kateryna Irkha - Responsible for Communication in CAMZ, Ukraine
10. Kateryna Rzhhevskya - Project Coordinator in Charity Organization “Vplyv”
11. Lesya Levko - Project Coordinator in CAMZ, Ukraine
12. Liudmyla Churkina - Head of Organization in Yellow Blue Wings
13. Mariia Romanova - Project Coordinator, SiLab, Ukraine
14. Nadiya Danch - Children Activity Coordinator in CAMZ, Ukraine
15. Nataliya Kabatsiy - Director in CAMZ, Ukraine
16. Olena Pobed-Frankivska - Head of the NUMO Organization
17. Olga Gulevska - Trainer in SiLab, Ukraine
18. Serhiy Chmyra - Regional Manager in Yellow Blue Wings
19. Tetiana Hoydash - Coordinator for Medical Support and Psychosocial Trainings in CAMZ, Ukraine
20. Valentyna Travkina - Logistics Coordinator in CAMZ, Ukraine
21. Veronika Djatkovych - Project Manager in NUMO
22. Vita Mykolayuk - Head of Charity Organization “Vplyv”
23. Volodymyr Melesh - Accountant in CAMZ, Ukraine
24. Yana Domadjuk - MIO Specialist in NUMO
25. Yevheniya Melesh - Jurist in CAMZ, Ukraine
26. Tanya Abubakar-Funkenberg – Safeguarding office, TdH

List of people interviewed from local networks and local stakeholders

27. Alla Syrotenko — local NGO in Nikopol (humanitarian aid)
28. Andriana — support with Camps/mentoring
29. Bohdan – coordinator (Space in Izium, Kharkiv region)
30. Ihor Tsukran — Kherson (humanitarian aid)
31. Iryna Panait — Head of women's consultation, Uzhhorod
32. Khrystyna Dudashvili — NGO “Sincere Heart”
33. Kira Lisman — Volunteer, Kharkiv and Kherson regions

34. Kutsenko Olesya — Regional Pension Fund in Zakarpatya
35. Liudmyla Siuzeva — Responsible for psychosocial support "Happy Children", Uzhhorod
36. Marina Khobotnia — Deputy director for educational work of the Ripky Lyceum of the Ripky Settlement Council, Chernihiv region
37. Nadiia — Psychologist, Kyiv region
38. Nazar Hapii — Camps/mentoring
39. Olena Kress — Head of the Department of Education, Youth and Sports of Semenivska City Council
40. Olena Leshchenko — Kryvyi Rih [Role not specified in the provided list]
41. Oleh Levchenko — PARD (Podolian Agency for Regional Development)
42. Olia Bondarets — Head of "Dzvinochok" PS, Novhorod-Siverskyi
43. Polina Tymoshenko — Meref (psychological aid)
44. Olena Shymon — Obstetrician-Gynecologist, Reproductive Health Office, Women's Consultation of Uzhhorod City Multidisciplinary Hospital
45. Stanislav Fedorov — Head of the third lyceum, Irpin
46. Svitlana Arseniuk — Volunteer, Vyshhorod
47. Tetiana Fedorenko — coordinator NGO "Iednist Chernihova"
48. Tetiana Hoidash — Medical coordinator CAMZ
49. Turianytsia Iryna Anatoliivna — Head of the Senior Childhood Department, Uzhhorod Children's Hospital
50. Vladyslav — hub (WE WORLD Znamyanka. Kirovohradska oblast)
51. Volodymyr hub (Molodizhka, Kharson)
52. Yevheniia — Psychologist, Kyiv region
53. Yuliia Rashkievich — Camps/mentoring

Adult beneficiaries interviewed during the project

54. Anna Borysova - took part in Silab program
55. Ilona Skliarova – mother, IPD, recreation activities
56. Khrystyna – IDP took part in camps
57. Liudmyla Bulatova – mother. Participated in retreat program
58. Maryna Ryndych - mother of 2 children, took part in camps
59. Nataliia Serheieva - mother of multipel children took part in camp
60. Olena Dubina - took part in Silab program
61. Olena Tsarova - mother of multipel children, took part in camp
62. Olha Puchkova – mother of multipel children, took part in camp
63. Olha Startseva - took part in Silab program
64. Sofiko – IPD mother from Kherson
65. Valentyna – took part In PSS consultations
66. Viktoriia – mother from Kharki, recreation camps
67. Vlada Ivakina – mother, recreation PSS
68. Yuliia Kolotylyna – took part in Silab program
69. Alona Radchenko – IDP mother, took part in camp

External consultations

70. Yulia Levanda - Head of Child Programs in Social Service Assistance Local NGO in Kharkiv
71. Nadija Kobeljuh - Manager of the Emergency Program in Ukraine, Caritas Austria
72. Oksana Andrshkiv - Field Monitoring Specialist for BHA in Ukraine

- 73. Dariya Kasyanova – program director SOS Children Viladges
- 74. Olena Rozvadovska – Head of CF “Voices of children”
- 75. Lidiia Kuzmenko - protection officer UNHCR

Additionally, CF organized three FGDs with children under the facilitation of the psychologists. All the texts of children answers were provided to the evaluation team to analysis of children replies. Overall 18 Children took place in FG meetings. There were three groups:

- 1) Focus group in Kyiv with children and youth with disabilities and their siblings, who received psychological consultations from Bachyty Sertsem, partners of Vplyv. 5 children
- 2) Focus group in Uzhhorod. Here, the younger children, aged 6-8, participated. The focus group was conducted with children who attended camps organized by Happy Children, partners of the Committee of Medical Aid in Zakarpattia (KAMZ). 7 children
- 3) Focus group in Uzhhorod. This group involved older children, aged 9-11. The focus group was conducted with children who attended camps organized by Happy Children, partners of the Committee of Medical Aid in Zakarpattia (KAMZ). 6 children

Annex 2. Plan for After Action Review workshop in Berlin 15/06/2024

Introduction Session (10:30 - 11:30)

Team Activity (Mission Accomplished Activity) for better understanding each team:

- Each team receives a flipchart titled “Mission Accomplished” and draws their spaceship.
- Present your spaceship, including:
- Who are these amazing people and who else is with you on Earth (number of people)?
- All regions where you work.
- Your energy recipe.
- What is key for you in the future of your work.
- Questions you have after the project.
- Expectations for this meeting.
- How you have changed since 2022.
- What inspires you about the organizations around you.

Sector Discussion (11:30 - 12:30)

Task: List Sectors and Discuss Their Relevance (*Mixed teams, 5-minute presentations each*).

Sectors to Discuss:

- Social protection and services for children, families, including children with disabilities.
- Food, hygiene assistance, medical aid, etc.
- Heating, shelters, repairs, shelters, etc.
- Psychosocial services for children, parents, and service providers (camps, consultations, etc.).
- Formal and informal education.

Questions for Each Group:

- What were the key tasks of the project in this direction?
- What do you think you did best?
- What do you think was less effective and should be changed?
- What difficulties, risks, and challenges did you face (donor level, community, beneficiaries, organizational needs, etc.)?
- Were there any steps taken to improve? How did you address the described challenges?

Evaluation Metrics (12:30 - 13:00)

- Rate the project on a scale of 1-10:
- Relevance to local needs and requests.
- Interaction within the consortium.
- Feeling of being able to express your thoughts and vision.
- Support from partners Terra and CHR.

Lunch Break (13:00 - 13:30)**Group Task - Future Planning (14:00 - 14:30)****Discussion Questions:**

- What do you think can be improved in the project based on your current experience, within the team, with partners, and beneficiaries?
- What risks and challenges do you see ahead in the communities, sector, and humanitarian response (including escalation risks)?
- What support do you need to strengthen your capacity and respond to challenges?
- How could interactions with local partners and each other be improved?
- What would you like to add or change in the M&E system?
- What, in your opinion, will ensure the sustainability of project results and local leadership?

Group Presentation (14:30 - 15:00)

Present the results of your group's work.

Sharing Session (15:00 - 16:00)

[Annex 3. Questions for Key Interviews with Partner Organizations Implementing Humanitarian Projects](#)

Organizational background:

- How and when did you get involved in this project?

- In your opinion, how has this project affected your activities and organization? What role does your organization play in this humanitarian project?
- Who determined what to do in this project? How was the project proposal written?
- What other projects are you involved in? How do you coordinate these?
- How clear were the project indicators and objectives to you? How were roles distributed within the project?

Accountability, Relevance:

- Tell us about your experience involving beneficiaries in needs assessments.
- What mechanisms were created to monitor and track the progress and effectiveness of the project? What was your experience before and after the project? (How often were field visits, etc.)
- What mechanisms existed for beneficiaries to provide feedback, and how was this feedback used? Who instructed you on how this should work in humanitarian projects?
- What new policies were created during the project?

Cohesion:

- How does your organization coordinate its actions with other similar organizations and local authorities within this project?
- How do you coordinate or interact with each other?
- Have you had any experience interacting with international organizations or donors?
- How did you work with this donor?

Effectiveness:

- What positive and negative consequences resulted from the project? Which activities were appropriate to the context and which were not?
- Can you share specific stories of change or small successes that resulted from the project? (Briefly, with the possibility of scheduling another meeting later)
- Which partners or beneficiaries should we talk to in order to understand their needs and views on the project?

Longer term effects:

- What project activities can have long-term effects after its completion?
- How did the project contribute to strengthening local capacities and self-reliance, particularly within local communities?
- Tell us more about the sustainability of your organization during the project work.

Challenges:

- What major challenges did you face during the project implementation and how were they addressed?

- Were there any unexpected obstacles and what solutions were implemented?
- To what extent did you feel supported by partners in this project?

Lessons and Recommendations:

- What is your vision for further development in the sector you work in and the overall humanitarian situation in the regions where you work?
- Based on your experience with this project, what recommendations would you give to improve this and similar projects in the future?
- Are there specific sectors or regions that need additional support or resources?
- Is there anything else you would like to share about your experience with this project?
- Do you have any additional comments or suggestions for the evaluation team?

[Annex 4. Questions to international partners involved in the project](#)

Organizational background:

- Can you describe your role in this project?
- Can you describe how the activities within this project relates to other projects you have in the country?
- How the LP have been defined?
- What relationship have been established with the LP?
- How the project was designed? What areas set as the priority?

Accountability, relevance

- Tell us about your experience involving beneficiaries in needs assessments.
- What mechanisms were created to monitor and track the progress and effectiveness of the project? How often the monitoring visits took place
- How the project was adopted to the changes of the needs on the ground

Effectiveness and efficiency

- How efficient the management coordination has been established internally within your organization? With each other? With partner organizations?
- How the overall coordination with other partners in humanitarian response work?
- What factors helped or hindered to achieve the results within the project?
- How the project was adopted to the changes?
- Looking on project results can you reflect on how the project was designed, what needs to be improved (question about time, money, activities, etc)?
- Looking on project results can you reflect on how the project was designed, what needs to be improved in terms of activities?

Impact/sustainability

- Can you describe on your opinion, your three biggest achievements within the support you do in the project?
- Can you describe on your opinion three biggest challenges? Which of these challenges do you feel can be controlled over you, the partners, donor?
- What do you think are unintended consequences of the project?
- What parts of the project can make more sustainable effect in the community?

Protection issues and capacity development

- What was the key focus for capacity increase for local partners?
- What events took place during the project?
- How have you worked with policy development with partners?

Lessons learned

- What are key learning from the project?
- What are the changes that will be taking place in the second stage of the project?

[Annex 5. Questions to partners' local networks \(both institutional and non-institutional\) on the grounds](#)

General Information:

- Which organization do you represent?
- How long have you been collaborating with (name of the partner organisation)?
- What specific activities have you implemented as part of the project?
- Please recall the objectives set for you at the beginning of the project.
- Describe what helped you achieve these objectives. What hindered you? What was unexpected? How did you handle it? (Please provide examples)
- How did you assess the needs of the community?
- How did you determine the format of the activities, including the distribution by age and needs? How the beneficiaries got access to the information but also locations?
- Who else did you collaborate with during the implementation of the project?
- Have you had similar project experiences with other donors? How do they compare?
- What have you taken away from this project? How was the management process organized?
- Have you received any other support with trainings, feedback sessions from partner organization?

Lessons learned and impact:

- What should humanitarian organizations consider when planning similar projects?
- In your opinion, what could be the long-term effects of the project (relevant only to camps, trainings, etc)? How do you think the project was perceived by the community?
- What changes can be observed in the living conditions of people covered by the project?

- Share a story about a real child or family that have been supported under the work you did with the project?
- Is there anything else you would like to add that we haven't asked about?

Annex 6. Questions for School Principals, Hospital Directors, Local Government structures, etc.

Introduction to the Project:

- How did you learn about the project? How did you get involved?
- How was communication with the project organizers? Who initiated it, and how was it organized?
- In your opinion, what community needs did the project helped to solve?
- Who determined the priorities of activities within the project in your community or institution?
- To what extent did the project meet the needs of the community in terms of protecting children's rights?
- What do you have set up in the community for children protection already?

Lessons Learned:

- Did you have experience interacting with other organizations providing humanitarian aid/services? If so, how did this project compare to them?
- How might the new opportunities created within the project affect the community as a whole?
- What are the main lessons learned from this project? Whose and what needs should be considered for future planning of similar projects? What should one be prepared for?

Recommendations:

- Based on your experience with this project, what recommendations would you give to improve similar projects in the future?
- Is there anything else you would like to add that we haven't asked about?

Annex 7. Questions for Mentors, Teachers, Trainers, and Psychologists Working with Children or Parents

- Tell us a little about yourself. What were you doing before working on this project? What motivated you to engage in this activity? How did you join this project? What tasks were assigned to you?
- Please describe the needs and process in the target group you work with. Do they express the needs in the work you do? Do you get any feedback on your work? From people from managers?

- Describe the challenges and difficulties you faced while performing the assigned tasks. How did you cope with them? Who or what did you rely on? What issues in management you see?
- What issues within the communities you see?
- What do you think you managed to achieve with the project?
- Describe what aspects of this project could serve as a model for other similar projects. What is worth sharing and spreading?
- What have you personally gained from this project (knowledge, skills, connections, etc.)? Which of these do you consider the most important and why? What have you used in your work?
- Considering your experience working on this project, what would you advise for the future? Whose and what needs should be considered for further planning of similar projects? What should one be prepared for?
- What experience are teenagers, their parents, women, and community members gaining from this project? How is this project impacting the community right now? How will it affect the community in six months?
- How did you include children and people with different needs? Did you have such experience?
- What do you think is the most valuable aspect of the work you do? Is there any real story of changes of child or parent you want to share with?
- Is there anything else you would like to add that we haven't asked about?

Annex 8. Questions for Project Beneficiaries (adults who received various support, woman, parents)

- How did you learn about the project?
- What specific services/assistance did you receive?
- Considering your needs, did the project meet your expectations? Please explain your answer.
- In your opinion, what was the most important aspect of the assistance you received?
- What problems did you face while receiving humanitarian aid/services? How have you learned about this opportunity, how was the process of accessing the service?
- What do you think needs improvement in the provision of such humanitarian aid/services?
- What do you see for yourself as the most important results of the project so far? Which of these results do you think will have lasting significance?
- If you have encountered other projects providing humanitarian or psychological assistance, describe how this project differs from other similar projects. What are its advantages and disadvantages?
- How could you provide feedback about the service you received?
- Were there any conflicts in the community due to you receiving this service?
- What additional types of support or activities do you think would be useful for you and your child?

Annex 9. Questions for feedback groups of children that take part in hubs activities (10+ years old)

- Can you tell more about yourself, what you like to do after school?
- Can you tell me what you do here in the space?
- What do you and your friends like the most about coming here?
- What was the space like before?
- How has it been improved?
- How do you feel when participating in activities here?
- Do you feel safe here?
- Is there anything that makes you feel uncomfortable or that you don't like about the space?
- Are there any challenges or problems you've overcome by having the opportunity to be here?
- Have you made any new friends?
- What else would you like to add to the space?
- What challenges have you faced in accessing these activities (e.g., transportation, timing, cost, stairs)?
- Maybe you want to add anything else?

Annex 10. Questions for feedback groups of children that took part in Camps

- If you were asked to tell your peers about this camp, what would you tell them first?
- What kinds of activities did you like the most at the camp?
- Was there anything you didn't like?
- How did you feel at the camp?
- How was it interacting with other kids? Did you make any new friends?
- How were the adults at the camp different or similar to your teachers at school? Who would you recommend kids talk to at the camp? Why?
- What do you remember from the classes, workshops, or trips?
- What could be improved in the activities in the future?
- Could you share your ideas or thoughts about changes to the program during the camp?
- What was the most important thing for you during the camp?

Annex 11. Feedback from children about group and individual psychological support

- How do you feel today? Can you share what has made you happy or sad recently?
- Do you go to school or study online? What do you do in your free time?
- Have you participated in any activities or programs that help you feel better? If so, which ones?
- How did you come to join this program?
- How do you feel about these sessions?
- Has your mood changed after the sessions? After which ones?

- Can you share an experience where you came to a session in a bad mood and left feeling uplifted? What happened during the session, and why do you think your mood changed?
- What do you think about the adults you worked with during these sessions? How did they treat you?
- What can you do now that you couldn't do before?
- What would you tell your friends about these sessions?
- How was it being with the other children?
- Did you feel safe and comfortable during these activities?
- Is there anything you would like to change in these activities?

Annex 12. Post Distribution Monitoring Questions

The measurement scale is from 1 to 4, where 4 means fully satisfied and 1 means completely dissatisfied.

1. How safe did you feel while receiving assistance?
2. Did the staff of the Charity Foundation treat you with respect while providing assistance?
3. To what extent did the assistance provided meet your needs?
4. Please rate the quality of the food package you received.
5. Please rate your satisfaction with the information and distribution process on a scale
6. Is your family currently able to meet all of your basic needs?
7. Do you live in decent and safe housing?
8. Please rate how well the food package met your nutritional needs.
9. Does your family have enough clothing, bedding, kitchen utensils, fuel, lighting, and other items necessary for basic comfort?
10. Which items in the package were most useful to you (1-3 items)?
11. Do you think one package per family per month is sufficient?
12. Which items do you think are missing from the package?
13. Were you provided with information about channels for making complaints and suggestions?
14. Your recommendations or suggestions for improving the program.

Annex 13. Questionary for partner organizations

General Block of Questions

- Name of the organization
- Position of the person filling out the questionnaire
- How many years has your organization been registered?
- How many humanitarian projects have you implemented up to and after 2022?

- Was this project the largest in terms of funds?
- How many people were involved in the team?
- Was your staff sufficient for the implementation of the project?

Questions on accountability and relevance

- How did you assess the needs in the communities before starting any activities there?
- Was there a needs assessment form?
- Did you have experience involving beneficiaries in assessing needs directly through interviews and in-person or online meetings?
- If you conducted camps as part of the project, did you collect feedback from parents or children afterward?
- If you conducted training sessions for your staff or partners as part of the project, did you collect feedback after the training?
- If you conducted psychological sessions for children or adults as part of the project, did you collect feedback after providing psychological assistance?
- What qualitative criteria were important to you in the psychological service?
- If you collected feedback, who developed the questionnaires, forms, etc.? Options: (Our own, used for all projects, created specifically for this project, provided by the central office)
- How did you ensure the safe storage and transmission of beneficiary data?
- Who collected and verified the criteria for providing humanitarian aid? Options: (Local partner organization, our organization itself, local authorities, local volunteers, educators, etc.)
- Did you study international humanitarian standards before or during the project?
- Did you provide any capacity-building activities for your local partners on the ground?

Institutional Development

- What internal institutional development issues would you like to strengthen based on your observations? Options: (financial management, team management, advocacy, policy writing, fundraising, other - please specify)
- How do you think this project impacted your capacity in the following areas? (Select top 3 priorities): Options: (Strengthened your financial management, Improved procurement system, strengthened monitoring and evaluation system, added new programmatic work areas, Enabled larger-scale projects, Taught networking with others, Found new partnerships in communities, Other - please specify)
- Prior to participating in the project, did you have any developments in child and adult protection? Options: (Yes, No, Partially, Other)
- How did the project help you improve these policies?
- How do you evaluate the networking experience with partners within this consortium? Options: (We achieved very fruitful cooperation, We would like more, Other)
- Have you previously used the KOBO system in projects? Options: (Yes, No, Don't know)
- Describe what you think needs improvement in the project's M&E system.
- Did you participate in clusters before the project?

- If your answer is no, did you start participating during the project?
- What else would you like to improve in your interaction with the central project office?

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