

1. Executive Summary

Country of intervention	South Sudan				
Type of Emergency	<input type="checkbox"/>	Natural disaster	<input checked="" type="checkbox"/>	Conflict	<input type="checkbox"/> Other (<i>specify</i>)
Type of Crisis	<input checked="" type="checkbox"/>	Sudden onset	<input type="checkbox"/>	Slow onset	<input type="checkbox"/> Protracted
Mandating Body/ Agency	FCDO				
IMPACT Project Code	32AZT				
Overall Research Timeframe	20/09/2023 to 31/01/2024				
Research Timeframe	1. Pilot/ training: 29/11/2023		6. Outputs sent for validation: 19/01/2024		
	2. Start collect data: 30/11/2023		7. Outputs published: 31/01/2024		
	3. Data collected: 11/12/2023		8. Final presentation: 9/02/2024		
	4. Data analysed: 15/12/2023				
	5. Data sent for validation: 18/12/2023				
Number of assessments	<input checked="" type="checkbox"/>	Single assessment (one cycle)			
	<input type="checkbox"/>	Multi assessment (more than one cycle)			
Humanitarian milestones	Milestone		Deadline		
	<input type="checkbox"/>	Donor plan/strategy			
	<input checked="" type="checkbox"/>	Inter-cluster plan/strategy			
	<input checked="" type="checkbox"/>	Cluster plan/strategy			
	<input type="checkbox"/>	NGO platform plan/strategy			
	<input type="checkbox"/>	Other (Specify):			
Audience Type & Dissemination	Audience type		Dissemination		
	<input checked="" type="checkbox"/> Strategic		<input checked="" type="checkbox"/> General Product Mailing (e.g. mail to NGO consortium; HCT participants; Donors)		
	<input checked="" type="checkbox"/> Programmatic		<input checked="" type="checkbox"/> Cluster Mailing (Education, Shelter and WASH) and presentation of findings at next cluster meeting		
	<input type="checkbox"/> Operational		<input checked="" type="checkbox"/> Presentation of findings (e.g. at HCT meeting; Cluster meeting)		
	<input type="checkbox"/> [Other, Specify]		<input checked="" type="checkbox"/> Website Dissemination (Relief Web & REACH Resource Centre)		

			<input type="checkbox"/> [Other, Specify]	
Stakeholder mapping	<input type="checkbox"/>	Yes	X	No
General Objective	To better understand the ability of the host community, returnees (who returned from Sudan) and refugees (henceforth: new arrivals) to access health facilities, water, sanitation, and hygiene (WASH), markets, education, and information, as well as to explore dynamics relating to social cohesion, in Renk Town, in Renk County, Upper Nile State, South Sudan.			
Specific Objective(s)	<ol style="list-style-type: none"> 1. To map out the locations of key infrastructure, for WASH, health, markets, and education used by all population groups in Renk Town and inform on their functionality. 2. To understand new arrivals' and host communities' access to health, education, market, WASH facilities and services, and information available to new arrivals about possible areas of relocation. 3. To understand the perceived impact that the entry of new arrivals has had on host communities' access to health, WASH, facilities, markets and education, services, and facilities and what may be needed to increase their ability to integrate the new arrivals. 4. To understand social cohesion dynamics between returnees, refugees and the host community in the area and identify proposals to improve social cohesion from the perspectives of the relevant communities. 5. To understand the informational needs of new arrivals on where or when they would like to relocate by identifying their preferred ways of receiving information. 			
Research Questions	<ol style="list-style-type: none"> 1. Where are the key health, education, WASH, and market infrastructure located in Renk Town? <ol style="list-style-type: none"> a. What is the functionality of existing health, education, WASH, and market infrastructure? b. What are the ownership and maintenance structures in place for existing health, WASH, education, and market infrastructure? c. Which humanitarian actors (non-governmental organisations (NGOs) and international non-governmental organisations (INGOs), if any are supporting the existing health, education, and WASH service provision? 2. What is the current accessibility and availability of health, WASH, education and market facilities and services for returnees, refugees and host community members in Renk Town? <ol style="list-style-type: none"> a. What is the current availability and accessibility of health, WASH, education, and market facilities and services in Renk Town and how does this compare to before April 2023? b. What are the primary obstacles to accessing services, from the perspective of both new arrivals and host community members? c. Are these facilities accessible to all population groups? If not, what are the barriers and for whom? 3. Has the influx of new arrivals impacted the host community's access to markets, education, health, and WASH facilities or services? If so, how? <ol style="list-style-type: none"> a. What measures have been adopted by the government and/or humanitarian actors to deal with any challenges in accessing facilities or services? 4. Are communities in Renk Town facing any challenges related to social cohesion? If so, what are they? 			

	<ol style="list-style-type: none"> a. To what extent do host community members, refugees and returnees think that access to essential services, such as healthcare and education, influence social cohesion and vice versa? b. What are the challenges faced by returnees trying to re-integrate into the community in Renk Town? c. What role do affected communities think that aid actors, community leaders and government actors should play in promoting social cohesion in Renk Town? <p>5. What are the information needs of new arrivals regarding whether/where to relocate?</p> <ol style="list-style-type: none"> a. What information do new arrivals want but have difficulty accessing? Does this vary between groups? b. How would new arrivals prefer to receive information, and from whom? c. Why have some returnees chosen to remain/settle in Renk even if options for onward movement may have been availed to them by humanitarian actors? 			
Geographic Coverage	This area based assessment will be conducted in Renk Town in Renk County, Upper Nile State, South Sudan.			
Secondary data sources	<p>Various secondary data sources have been reviewed:</p> <p>Sudan Conflict</p> <ul style="list-style-type: none"> The International Organization for Migration (IOM), Sudan Crisis: Displacement Tracking Matrix. IMPACT Initiatives, Sudan Crisis Thread (regularly updated). Internews, DEMAC, Elevating communication and engagement in Sudan's growing humanitarian crisis: Priority actions for decision makers and practitioners, August 2023. <p>Renk</p> <ul style="list-style-type: none"> IOM, United Nations High Commissioner for Refugees (UNHCR), Relief and Rehabilitation Commission (RRC), Arrivals from Sudan to South Sudan (Dashboard). REACH Initiative, South Sudan displacement crisis: Critical conditions in areas of transit and return threaten health, wellbeing and sustainable integration, September 2023 REACH Initiative, Area Based Assessment in Areas of Return: Renk County, Upper Nile State, South Sudan, October 2019 Nonviolent Peaceforce, Seeking harmony in hardship: A conflict sensitivity report on Renk, South Sudan, August 2023 REACH Initiative, Emergency situation overview: Sudan-South Sudan cross border displacement, June 2023 <p>Intersectoral</p> <ul style="list-style-type: none"> Integrated Food Security Phase Classification (IPC) 2022, Renk population figures REACH Initiative, South Sudan Cash Working Group, Joint Market Monitoring Initiative 			
Population(s)	x	Host communities ¹	x	Refugees
	x	Returnees ²	□	IDPs

¹ Host communities are non-displaced persons, meaning South Sudanese people that have never been displaced from their habitual residence since the [onset of the conflict in December 2013](#).

² A returnee is the term used by the international community to identify a person who was a refugee but who has recently returned to his/her country of origin. Defining a returnee is thus applicable on a person's prior refugee status. [Returnees are therefore refugees who have re-entered their country but who have not yet re-integrated into their homes and communities](#).

	<input checked="" type="checkbox"/>	Returnees in collective centers ³	<input type="checkbox"/>	[Other, Specify] #:		
	<input checked="" type="checkbox"/>	Returnees in host communities ⁴				
Stratification <i>Select type(s) and enter number of strata</i>	<input type="checkbox"/>	Geographical # Population size per strata is known? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/>	Group #: Population size per strata is known? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	[Other, Specify] #: Population size per strata is known? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input checked="" type="checkbox"/>	Gender #: 2 Population size per strata is known? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/>	Type of settlement #: Population size per strata is known? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Data collection tool(s)	<input checked="" type="checkbox"/>	Structured (Quantitative)	<input checked="" type="checkbox"/>	Semi-structured (Qualitative)		
	Sampling method			Data collection method		
Semi structured data collection tool # 1 Mapping Focus Group Discussion	<input checked="" type="checkbox"/> Purposive			<input checked="" type="checkbox"/> Mapping Focus Group Discussion (MFGD) (Target #): Renk Town : 2 MFGDs (1 male, 1 female)		
Structured data collection tool # 2 Facilities assessment tool	<input checked="" type="checkbox"/> Purposive			<input checked="" type="checkbox"/> Direct observation and key informant interviews (KIIs) (Target #): All infrastructure in Renk Town related to health, education, markets and WASH.		
Semi-structured data collection tool (s) # 3 Focus Group Discussions	<input checked="" type="checkbox"/> Purposive			<input checked="" type="checkbox"/> Focus Group Discussion (FGD) (Target #): 22 (11 female, 11 male)		
Semi-structured data collection tool (s) # 4 Key Informant Interviews	<input checked="" type="checkbox"/> Purposive			<input checked="" type="checkbox"/> Key Informant Interviews (KIIs) (Target #): 8		
Disaggregation by gender and age	Gender			Age		
	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	Yes		
	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	No		
Data management platform(s)	<input checked="" type="checkbox"/>	IMPACT	<input type="checkbox"/>	UNHCR		
	<input type="checkbox"/>	[Other, Specify]				
Expected output type(s)	<input checked="" type="checkbox"/>	Situation overview #: 1	<input type="checkbox"/>	Report #: __	<input type="checkbox"/>	Profile #: __

³ Returnees living in collective centers in Renk Town including the official transit center.⁴ Returnees living with host community members in Renk Town.

	<input type="checkbox"/>	Presentation (Preliminary findings) #:	x	Presentation (Final) #: 1	<input type="checkbox"/>	Factsheet #:
	<input type="checkbox"/>	Interactive dashboard #:	<input type="checkbox"/>	Webmap #: _ _	x	Map #: 5 ⁵
Access	x	Public (available on REACH resource center and other humanitarian platforms)				
	<input type="checkbox"/>	Restricted (bilateral dissemination only upon agreed dissemination list, no publication on REACH or other platforms)				
Visibility Specify which logos should be on outputs	REACH					
	Donor: FCDO					
	Partners: None					
	Coordination Framework: Camp Coordination and Camp management Working Group (CCCM)					

2. Rationale

3.1 BACKGROUND

On 15 April 2023, conflict broke out in Sudan⁶, resulting in mass displacement. As of 23 September 2023, 213,535 returnees have been recorded entering South Sudan through Renk's Joda-Wunthow border points,⁷ with approximately 1,000 new arrivals daily. This includes both refugees and returnees, although it is worth noting that returnees to South Sudan account for at least 89% of these new arrivals.⁸ This is mainly because until 2011 Sudan and South Sudan were one country. After many years of civil war, the southern section seceded following a referendum that birthed one of the world's newest nations: South Sudan. However, even after the cessation some South Sudan nationals chose to stay in Sudan and are only now being displaced back to South Sudan due to the ongoing conflict in Sudan. Following the influx of displaced people to Renk in the beginning April 2023, humanitarian agencies in South Sudan mobilized a response focused on receiving people at the border, providing them with basic services in a transit center in Renk Town, and facilitating their onward movement to their areas of origin in other parts of the country. In parallel, refugees coming into South Sudan are being transported by humanitarian agencies to the existing refugee camp in Maban County.⁹

As of September 2023, the crisis in Sudan is still ongoing and more returnees and refugees are expected to come into South Sudan through Renk. Humanitarian actors, led by IOM, are facilitating the onward movement of returnees from Renk to their areas of origin in South Sudan, but this movement has faced numerous logistical and budgetary challenges.¹⁰ Moreover, some returnees who are eligible for onward transportation have opted to remain in Renk. As of 25 October 2023, the returnees residing with the host community were 26,574 individuals and they accounted for 54% of all returnees in Renk. Normally, refugees are transported directly to Maban but due to heavy rains that have caused flooding in the area the relocation of refugees to Maban is currently on hold and refugees are now being hosted at the Renk Transit Centre.¹¹ Due to this, Renk Town and its surrounding settlements may continue to serve as a transit or settlement location for returnees coming back from Sudan.

Renk Town, the location of this area-based assessment (ABA), is in Renk County, Upper Nile State in South Sudan. Renk is the northernmost county of South Sudan, bordering Sudan to the north at Gongbaar and Joda to the northwest.¹² Renk county is part of the Northern sorghum and cattle livelihood zone, and the primary economic activities include fishing along the Nile, agriculture especially simsim (sesame) and sorghum, and raising livestock.¹³

⁵ Five maps, each of them showing the location of infrastructure identified either in the health, education, markets, and WASH sectors in Renk Town and nearby settlements. A separate map showing the water points will also be produced.

⁶ CNN, [Sudan civil war spiraling out of control, UN says, as more than 1 million flee](#), August 2023

⁷ IOM, UNHCR and RRC, [Arrivals from Sudan to South Sudan \(Dashboard\)](#)

⁸ Ibid

⁹ REACH Initiative, [Emergency situation overview: Sudan-South Sudan cross border displacement](#), June 2023

¹⁰ United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA), [South Sudan: Response to the Sudan Crisis Situation Report No. 10 \(as of 8 September 2023\)](#), 10 September 2023

¹¹ Number One Citizen Daily Newspaper, [Influx overwhelms Renk Transit Centre](#), November 2023

¹² Conflict Sensitivity Resource Facility (CSRf), [Renk County, Upper Nile State](#)

¹³ Ibid

Renk has been relatively stable over the past couple of years except in 2021 when peace was disrupted by an attack meted on humanitarian workers by youth groups.¹⁴ However, the sudden increase in the number of returnees in Renk Town has applied pressure on sectors such as markets, water sanitation and hygiene (WASH), shelter, health, and education.¹⁵ Increased demand due to the arrival of returnees has seemingly led to an increase in prices of goods in the markets as shown by data collected through the Joint Market Monitoring Initiative (JMMI) which indicates a constant rise in the multisectoral survival minimum expenditure basket in Renk since April 2023.¹⁶ Additionally, the increase in prices could be attributed to the disruption of supply routes and goods coming from Sudan, as traders in Renk who previously procured staple foods and other goods from Sudan have had to pivot sourcing to Juba which may have led to an increase in the transportation cost from Juba to Renk due to longer distances that now have to be travelled.¹⁷ As of 23 September 2023, 26,265 new arrivals are staying in Renk Town and living alongside host community members¹⁸, thus raising the need for humanitarian actors and the government to work towards ensuring social cohesion between these returnees, refugees, and the host community. High volumes of arrivals in transit locations like Renk Town have led to congestion and crowding amidst limited infrastructure, deteriorated sanitation conditions and under resourced health services posing significant public health risks for an already vulnerable population.¹⁹ In line with the above highlighted concerns, this assessment aims to establish the capacities of existing WASH, market, health, and education facilities in Renk Town through mapping the facilities and noting their functionality. Findings from this assessment will help humanitarian actors and government bodies in Renk determine how they can support the stronger delivery of basic services and how they can maintain or enhance social cohesion between the returnees and host communities.

2.2 INTENDED IMPACT

With thousands of new arrivals in Renk Town and the challenges regarding onward movement, there is a need to assess the capacity of services in Renk Town to accommodate new arrivals, the information needs of the returnees and refugees, and the state of social cohesion between returnees, refugees, and the host communities. Humanitarian actors and local government need reliable information about the capacity of Renk Town to support new arrivals particularly as the numbers of those remaining in Renk Town increase. Through mapping existing capacities and needs regarding the sectors of health, WASH, education and markets, REACH aims to improve the ability of humanitarian actors, local government, and donors to plan how best to support the new arrivals and the local population of Renk Town. Even though, refugees now have a presence in Renk We will continue to focus more on returnees in this assessment since the refugees stay could be temporary but also the number of returnees coming into South Sudan through the Renk Joda Wunthow border as per the [dashboard](#) is higher than that of refugees so our focus will remain on returnees.

While some returnees intend to remain in Renk Town, others are seeking onward movement to other locations in South Sudan. For that movement to be rights-protecting, new arrivals will need to access relevant information to make informed decisions about whether and where to go. Through exploring the information needs of new arrivals in Renk Town, this assessment will help humanitarian and government actors to communicate effectively with new arrivals, thus promoting informed decision-making. Additionally, the arrival of thousands of people in Renk Town has had an impact on the ability of the existing infrastructure in Renk Town to serve the people in Renk Town and this may impact social cohesion and relations between returnees, refugees, and host communities. Therefore, this ABA also seeks to understand communities' perceptions over the current state of social cohesion in Renk Town, as well as what the host community, refugees, and returnees believe can be done to strengthen social cohesion between the various population groups in the area. This will enable actors in Renk to take a community-centred, conflict-sensitive approach in ongoing programming.

¹⁴ UN OCHA, [Humanitarian coordinator condemns attacks against humanitarian workers in Renk](#), Upper Nile, May 2021

¹⁵ UNHCR, [As more people flee conflict in Sudan, conditions at South Sudan border deteriorate](#), 6 September 2023

¹⁶ REACH, [South Sudan Joint Market Monitoring Initiative \(JMMI\)](#), July 2023

¹⁷ OCHA, [South Sudan: Response for Sudan Crisis Situation Report No. 1 \(As of 22 June 2023\)](#), 25 June 2023

¹⁸ IOM, UNHCR, RRC,), [Arrivals from Sudan to South Sudan \(Dashboard\)](#).

¹⁹ REACH, [South Sudan displacement crisis: Critical conditions in areas of transit and return threaten health, wellbeing and sustainable integration](#), 5 September 2023

3. Methodology

3.1 METHODOLOGY OVERVIEW

This ABA will use a mixed method approach to conduct the research. A qualitative participatory mapping exercise will be conducted by carrying out mapping focus group discussions (MFGDs) with community leaders, experts, and some government officials to identify the boundaries of Renk Town and its infrastructures in the health, markets, WASH and education sectors. The MFGDs will allow us to understand the extent of the territory in Renk Town that has been affected by the displacement specifically the influx of returnees, how different sectors of the town have been affected and how local authorities perceive the changes in the town resulting from the influx of new arrivals, if any. On completion of the MFGDs, REACH will engage enumerators to conduct a quantitative facilities assessment, during which REACH will conduct key informant interviews (KIIs) with subject matter experts using a GPS tracking Kobo tool, to map infrastructure. In parallel, REACH will conduct focus group discussions (FGDs) with returnees, refugees and the host community and KIIs with community leaders and humanitarian actors in Renk Town to understand social cohesion dynamics between the various population groups, but also returnees' information needs. The assessment will be conducted in Renk Town to allow for a better understanding of the capacity of existing infrastructure, and service providers to support new arrivals from Sudan. Overall, this assessment will use the following tools:

Mapping focus group discussions

The mapping focus group discussions (MFGDs) will be conducted with community leaders and experts to map the infrastructure and services in Renk Town including their presence and their quality. The exercise will be conducted in a face-to-face setting using physical maps prepared by the REACH GIS Officer. The mapping session will be conducted with select community leaders from the various neighbourhoods in Renk Town to ensure that information about Renk Town is captured. The MFGD will aim to locate and map the vital, local markets, health, education and WASH infrastructure including water sources, important markets and major hospitals within the town. Two MFGDs (one male, one female) each with four to eight participants will be conducted. The MFGD participants will be asked to describe what the infrastructure is used for, by whom and answer the functionality related questions for each infrastructure.

Facilities assessment

After the MFGDs are completed, the REACH team will proceed to conduct a quantitative facilities assessment. During the facilities assessment data collection, enumerators will use smartphones with the Kobo collect and Maps.me applications installed to complete an infrastructure questionnaire by interviewing key informants who will be subject matter experts such as market vendors, water point vendors, health: doctors, nurses or facility managers and education: head teacher, school director or professors at the relevant infrastructure point. Infrastructure to be mapped will have been pre-identified during the MFGDs. To ensure all of the infrastructures are mapped during the facilities assessment, the REACH GIS team will survey the satellite imagery of the area to be mapped and create grids of 250 m by 250 m areas in Renk Town. These grids will then be loaded into Maps.me on each enumerators' phone. Enumerators will then be given a list of squares to complete on a daily basis after having been trained and advised to ensure they traverse each square until they have covered all the infrastructure in health, WASH, education, and markets. When encountering an infrastructure point within the square, they will use the Kobo collect tool to collect information such as GPS coordinates and the functionality of the facility. Supervisors will monitor which squares have been completed and they will reassign squares where necessary to ensure that all inhabited squares in the area of interest are covered.

Focus Group Discussions

A semi-structured questionnaire focused on collating data on the informational needs of new arrivals, the state of social cohesion, accessibility of health, WASH, education and market facilities and services for returnees, refugees, and the host community in Renk Town will be developed. The questionnaire will be used during FGDs to interview returnees, refugees and the host community in Renk Town on the above topics. The tools for this assessment will be developed by the REACH team with the research design being based on the specific need of the humanitarian actors working in Renk. The specific locations of data collection within Renk Town will be selected based on the presence of populations of interest and security

and logistics considerations. Purposive sampling will be used to identify participants for the FGDs. The REACH team will ensure that gender parity is achieved during the selection of FGD participants. Findings from this qualitative assessment will not be generalizable to the wider population and should be considered as indicative only.

Key Informant interviews

The KIs will be conducted in parallel with the FGDs. A semi-structured questionnaire tailored to collect data on the informational needs of the new arrivals, the state of social cohesion, and accessibility of health, WASH, education and market facilities and services for returnees, refugees, and the host community in Renk Town will be developed. The questionnaire will be used during KIs to interview humanitarian actors, community leaders and government officials in Renk Town. The tools for this assessment will be developed by the REACH team. Purposive sampling will be used to identify participants for the KIs. Findings from the KIs will be used to triangulate the findings of the FGDs and will not be generalizable to the wider population and should be considered as indicative only.

Key definitions

Territorial unit: A territorial unit is a geographical area that is based on community and shared identity, services, or economy, it can also be based on natural boundaries. The territorial unit can be aligned to administrative boundaries for this assessment, the territorial unit is Renk Town, an urban area in Renk County. Renk Town has been selected as the territorial unit as it is considered as the most impactful scale for localized humanitarian or humanitarian development interventions with regards to the returnees' response. The findings of the participatory mapping assessment will be representative at the territorial unit level.

Community: A group of people with common characteristics and a shared identity (cultural/social) and/or shared resources that unite a larger society. For this assessment, community refers to the various population groups in Renk that include the host community, returnees and refugees in the Transit Centre in Renk.

Returnee: The term used by the international community to identify a person who was a refugee but who has recently returned to his/her country of origin. Defining a returnee is thus applicable on a person's prior refugee status. Returnees are therefore individuals who have re-entered their country but who have not yet re-integrated into their homes and communities²⁰. For this assessment, returnees refer to South Sudan nationals who were refugees in Sudan and are now returning to South Sudan due to the ongoing conflict in Sudan.

Host community: Host communities, i.e., non-displaced persons, include South Sudanese people that have never been displaced from their habitual residence.

Refugees: A refugee is any person who owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion is outside of the country of his nationality and is unable or owing to such fear is unwilling to avail himself of the protection of that country.²¹ For this assessment, refugees refer to Sudan nationals crossing the border into South Sudan to flee the ongoing Sudan conflict.

New arrivals: The term new arrivals refer to South Sudanese returnees and Sudanese refugees who have recently arrived in South Sudan after crossing the border from Sudan and are either currently living in the Renk Transit Center run by humanitarian actors or have settled in the host community in Renk Town.

WASH definitions

Water services and infrastructure: Water services and infrastructure relate to available services to make water accessible for the territorial unit population. These include water supply services such as water stations and water trucking initiatives, water treatment services and water resource management. This term also includes water-based transportation systems such as pipelines for irrigation.

Sanitation infrastructure: For this assessment, sanitation infrastructure is related to public latrines used by the community for defecation purposes.

²⁰ United Nations Human Rights Office, [Monitoring and protecting the human rights of returnees and internally displaced persons](#)

²¹ Ibid

Water Governance and Management: This refers to the political, social, economic, and administrative systems in place that can influence water use and management. It determines the equity and efficiency in water resource and services allocation and distribution and balanced water use between socio economic activities and ecosystems.

Water Network: Water networks are a system of pipes and trenches providing the appropriate quality and quantity of water to a community.

Water point: The water point in this assessment refers to all waters of the state where people access water for agricultural, recreational, commercial, public, domestic and consumption purposes. These could be surface water in natural or artificial channels, lakes, reservoirs, rivers, public and private wells, public taps, public handpumps and public boreholes.

Health definitions

Health infrastructure: This refers to any physical facilities that make health care accessible. For this assessment, health care infrastructure includes the number of beds, physical buildings hosting the health facilities and a reliable supply of pharmaceuticals such as medicine.

Health facility: For this assessment a health facility refers to any infrastructure where healthcare is provided and may include hospitals, healthcare centers, pharmacies and drug stores and medical laboratories and research centers. The term will include both privately and publicly owned health facilities. The health facilities must be licensed to operate in the area.

Health workers: Health workers in this assessment will be considered as either health professionals, health associate professionals, and health management in hospitals or public health centers.

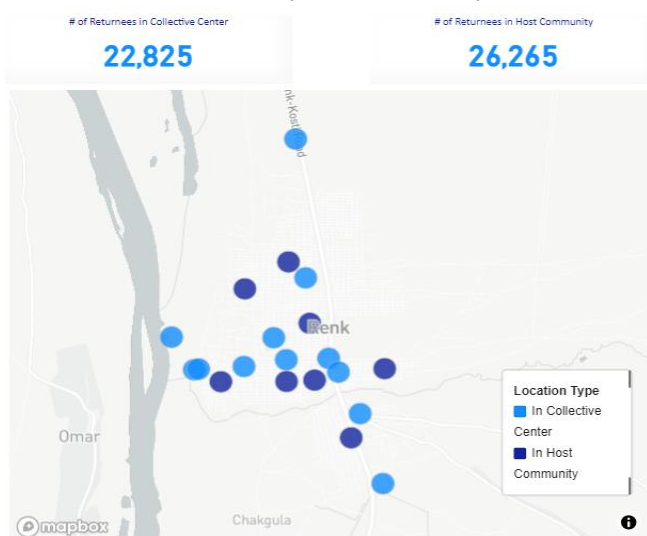
Education definitions

Education infrastructure: This refers to any infrastructure in school that helps to provide students with a learning atmosphere. For this assessment education infrastructure includes classrooms in schools, school kitchen, administration blocks in the school compound and latrines within the school compound.

3.1 POPULATION OF INTEREST

3.2.1 Geographic areas assessed.

Data collection will be conducted in Renk Town. The main criteria for the selection of the study area in Renk Town will be advised by the information available on the population movement [dashboard](#) that was jointly developed by IOM and UNHCR and endorsed by the RRC. IOM and UNHCR collect data at various points of entry where the different population groups are arriving in South Sudan from Sudan. For this assessment REACH will utilize data on returnee's presence in available on the [dashboard](#) to identify the area of study.



Returnee presence in Renk as of 23 September 2023. IOM, UNHCR, RRC [Dashboard](#).

Refugees who are currently being hosted at the Renk Transit Centre as they await transportation to Doro refugee camp in Maban County will be assessed.²² The semi structured FGDs will be conducted in the Renk Transit Centre and areas in Renk Town with heavy returnees' presence, including the: designated collective centers, informal displacement centers hosting returnees and areas in Renk Town where host community members are living together with returnees. FGDs will also be conducted with refugees who are currently domiciled at the Renk Transit Centre. The locations for data collection for the FGDs will be selected as per the information available on the IOM [dashboard](#) that spells the location of returnees within Renk Town. Participants for the host community, returnees and refugees FGDs will be selected with the assistance of community leaders in Renk Town who are aware of the location of the various population groups within the Town. Infrastructure mapping on the other hand will be conducted in all areas within the selected study area in Renk Town.

3.2.2 Population groups assessed.

The population of interest will be the returnees, host community and refugees living in Renk Town. The ABA will focus on South Sudanese returnees and the Sudanese refugees in the Transit Centre who have arrived from Sudan since the beginning of the Sudan crisis in April 2023, and the host community in Renk Town. These population groups were selected to allow REACH to be able to assess the potential impact the presence of new arrivals has had on access to markets, health, education, and WASH facilities and or services, as well as to be able to understand the information needs of new arrivals and the social cohesion dynamics within Renk Town.

3.1 SECONDARY DATA REVIEW

Primary data collected with the infrastructure mapping tool will be partly analyzed with the use of secondary data. Using the [GRID3](#) World Population Dataset, REACH will calculate the approximate number of people living more than 250 meters from WASH infrastructure and the approximate number of people sharing each infrastructure point, to test the adherence to international norms such as the sphere standards and to identify locations that are relatively underserved.

The main secondary data sources for this assessment include:

Sudan Conflict

- The International Organization for Migration (IOM), [Sudan Crisis: Displacement Tracking Matrix](#).
- IMPACT Initiatives, [Sudan Crisis Thread](#) (regularly updated).
- Internews, DEMAC, [Elevating communication and engagement in Sudan's growing humanitarian crisis: Priority actions for decision makers and practitioners](#), August 2023.

Renk

- IOM, United Nations High Commissioner for Refugees (UNHCR), Relief and Rehabilitation Commission (RRC), [Arrivals from Sudan to South Sudan \(Dashboard\)](#).
- REACH Initiative, [South Sudan displacement crisis: Critical conditions in areas of transit and return threaten health, wellbeing and sustainable integration](#), September 2023
- REACH Initiative, [Area Based Assessment in Areas of Return: Renk County, Upper Nile State, South Sudan](#), October 2019
- Nonviolent Peaceforce, [Seeking harmony in hardship: A conflict sensitivity report on Renk, South Sudan](#), August 2023
- REACH Initiative, [Emergency situation overview: Sudan-South Sudan cross border displacement](#), June 2023

Intersectoral

- Integrated Food Security Phase Classification (IPC) 2022, [Renk population figures](#)
- REACH Initiative, South Sudan Cash Working Group, [Joint Market Monitoring Initiative](#)

²² UNHCR, [Sudanese refugees fleeing conflict find safety in South Sudan](#), June 2023

3.1 PRIMARY DATA COLLECTION

3.2.1 Method

This assessment will use a mixed method approach. Qualitative data will be collected by conducting FGDs, KIIs and MFGDs while quantitative data will be collected by use of the facilities assessment tool. Data collection for the assessment will be conducted in Renk Town, Renk County, South Sudan from November 2023 to December 2023. Renk Town was selected as the area of assessment after discussions with humanitarian actors in Renk County and the CCCM it was agreed that there was a need for more up-to-date information on the sectors of WASH, education, health, and markets for current and future programming.²³ The influx of new arrivals in Renk Town raised the need for partners to look into the social cohesion dynamics in the town as some returnees are currently living among the host community.

Mapping Focus Group Discussions

Data for the two MFGDs will be collected by REACH enumerators and will be supervised by the REACH GIS Officer and the Assessment Officer (AO). A set of maps will be prepared prior to the start of the mapping and will be used for the exercise. The MFGDs are focused on area delineation by identifying area and community boundaries that may define the community in Renk because we are interested in understanding the geographical boundaries of the city as well as mapping the main roads in and out of the areas. The MFGD facilitator will orient the participants on the map of the area and point out the pre-identified landmarks and make sure the participants have familiarized themselves with the map before starting the exercise. A tool for use during the MFGDs will be developed for use, the tool includes questions on delineation of community boundaries and questions on the locations of infrastructure in the sectors of health, markets, WASH, and education. Participants will also be asked about the location of the various population groups in Renk Town.

Facilities assessment

The facilities assessment will only begin after the MFGDs have been completed. The MFGDs will provide information on the delineation of community boundaries in Renk Town. For the infrastructure pre-identified during the MFGD, the facilities assessment tool will be used to assign them their precise GPS locations. Data will be collected by enumerators hired by REACH; the enumerators will be supervised by the GIS officer and the AO. Prior to data collection, a two-day data collection training will be conducted with enumerators followed by a data collection pilot. Enumerators will then be assigned a list of 250m by 250 m squares on a daily basis. Using the maps.me app, enumerators will locate their squares and traverse them in a zigzag fashion in order to find all relevant health, education, WASH, and market infrastructure located within them. Once enumerators have found any infrastructure from any of the four sectors, they will open the Kobo collect tool, record their position using the GPS function and answer a set list of questions about the point they have located. Among other things, the tool includes questions about the type of infrastructure, the functionality of the infrastructure point, who can and who cannot use it, and whether payment is required to use it. In order to be more operational, data on damages and challenges should be quite detailed to allow partners tailor interventions. Some of the required information may need to be gathered from people nearby, such as any individuals collecting water, or households who use a particular latrine. For the health, school and education infrastructure functionality questions will be asked to subject matter experts in the various sectors who include professionals at the infrastructure working in the specific fields including doctors or nurses or teachers. Questions for the WASH sectors people at the water point may be asked to people fetching water at the river or borehole. Enumerators are encouraged to speak with local residents about the WASH, health, education and market infrastructure. In instances when no one is available to answer or none of the persons at the infrastructure point are willing to answer the enumerator will end the interview and consult the REACH GIS officer who will in turn look for an alternative community leader who may have information on the public infrastructure and interview them to ensure all infrastructure in the sectors of interest is mapped. If there is no infrastructure in one of the grids or if it's located in an insecure area enumerator can also report this in the Kobo collect tool and proceed to the next square. The supervisors will check the progress made by enumerators on a daily basis and reassign squares where necessary.

²³ OXFAM: Fresh surge in returnees is "worrying" as funding continues to dry on Sudan crisis response.

Focus Group Discussions

REACH will collect qualitative data by conducting a total of 22 FGDs with the following targeted profiles in Renk Town that include host community men and women, returnee men and women and refugee men and women. Each FGD will be composed of a maximum of 6 participants and minimum of 4 participants. Participants for each FGD will be selected purposively.

Key informant Interviews

KIIs will also be conducted with community leaders, government officials and humanitarian actors. The KIIs will be identified with the help of the RRC in Renk Town. REACH anticipates conducting at least seven interviews with KIIs. Interviews with these KIIs will be designed to collect qualitative data. Participants for each KII will be selected purposively.

3.2.2 Sampling

Mapping Focus Group Discussions

A semi structured questionnaire and reference maps produced by REACH will be used for the territorial unit mapping exercise with community members. The participants of the MFGDs will be identified through purposive sampling by relying on the local knowledge and the connections of the RRC in Renk. A total of two MFGDs will be conducted in the territorial unit, one with male participants and another with female participants. Each MFGD will have a total of 4 to 8 participants in each session. The themes that will be covered during the MFGDs include mapping of Renk Town boundaries, identifying the population groups residing in the territorial unit, and mapping of the locations water points, sanitation, health facilities, education facilities and markets.

Facilities assessment

Using the mapping boundaries identified during the participatory mapping sessions, Renk Town will be divided into polygons and further subdivided into grids squares of 250 meters of side length. Data will then be collected on the health, WASH, education, and market infrastructure available in each of the grid squares.

Focus Group Discussions

Purposive sampling will be used to select FGD participants. The specific areas of data collection within Renk Town will be selected based on the following:

- High presence of the subpopulations of interest as per the Sudan crisis population movement dashboard.
- The areas should be accessible to the REACH data collection team.

Once the specific locations of data collection in Renk Town are identified participants will be selected purposively by the REACH team with support from local authorities and other NGOs. The rationale for participant selection will be to ensure that the selected participants are community members with a variety of perspectives on the returnee situation in Renk Town. Care will be taken to ensure that participants are selected in a way they feel comfortable expressing their views amongst themselves by gauging how factors such as age affect this within this specific context.

A total of 22 FGDs will be conducted, 11 with male participants, 11 with female participants, all living in designated collective centres and amongst host community (see table one below).

Table 1: Specific areas of data collection and the population groups of interest

Area	Population group	FGD	
		Male	Female
Abukhadra displacement site	Returnees in host community	1	1
Zero displacement site	Returnees in host community	1	1
Transit Center	Returnees in Transit Center	1	1
Hai Joborana	Returnees in host community	1	1
Kunshuer	Returnees in host community	1	1

Hai Joborana	Host community	1	1
Kunshuer	Host community	1	1
Suarce Renk	Host community	1	1
Ertidad Jidiet	Host community	1	1
Transit Centre	Refugees in Transit Center	1	1
Transit Centre	Refugees in Transit Center	1	1
Total # of interviews		11	11

Key informant Interviews

Participants for the KIIs will be sampled purposively. REACH with the help of the RRC will identify community leaders, humanitarian actors and government officials who are well versed with the new arrival situation and the state of social cohesion and access to services in the sectors of markets, health, education and WASH Renk Town after 15 April 2023.

Table 2: KIIs to be interviewed and number of interviews.

Type of Key Informant	# of Interviews
Humanitarian actors	3
Government officials	2
Community leaders	3
Total # of interviews	8

3.2.3 Tool

Mapping Focus Group Discussions

The participatory mapping exercise will use a semi structured tool to map out Renk Town boundaries and the important health, market education and WASH services and infrastructure. The REACH team will conduct MFGDs with community leaders in Renk. Prior to the assessment the REACH GIS Officer will produce maps that include points of the territorial unit for familiarization. These points characteristics include landmarks such as mosques, schools, health centers, roads as well as geographical characteristics like rivers, lakes, and mountain areas that are visible through satellite imagery to help MFGD participants situate themselves on the map. The maps will be on different scales and levels. Two MFGDs (1 male, 1 female) will be conducted in Renk Town, to ensure that data on all parts of the town is collected. The MFGDs will be disaggregated by gender to ensure that the voice of women and men is represented due to the community context in Renk Town REACH will have community leaders with knowledge on the various parts of Renk Town present during the MFGDs. MFGD participants will cover the health, education, markets and WASH sectors and participants will be asked to provide the approximate locations of the schools, health centers, water points.

During the MFGDs, REACH use two maps as follows:

Reference map 1 will aim to cover:

- **Map familiarization:** to help participants read the map.
- **Territorial unit delineation:** identifying the boundaries of Renk Town.
- **Main Roads:** main roads in and out of the territorial unit and what the road is used for.

Reference map 2 will aim to cover:

- **Water points:** covering the type of water points that are present in the area, who is responsible for the maintenance or management of the water point, how available the water point is to the population, and whether the water is safe to drink or not.
- **Sanitation facilities:** covering the type of latrine (public latrine or place for open defecation), who is responsible for the sanitation facility and how available it is to the population.
- **Markets:** Covering the type of market that is present in the area, if there is any damage to the market, market availability and how often the market is open.

- **Health facilities:** covering the type of health facilities and who is responsible for these health facilities.
- **Education facilities:** covering the public and private school facilities and where they are located in the town and highlighting whether they are damaged or not.

These MFGDs will contribute to a baseline understanding of the territorial unit services and infrastructure. Questions around availability and challenges the population faces with the infrastructure in the sectors of health, WASH, education and markets in the territorial unit. The participants' perception of ownership and responsibility for maintenance or management will also be noted. During the discussions the enumerators will note down any disagreements that arise during the discussion on infrastructure in the four sectors. The MFGDs will be carried out in the community with key informants potentially including service providers and community representatives. The participants will be purposively sampled and identified by REACH with the help of the RRC in Renk County. The interviewer will use the questioning route as prepared by the REACH South Sudan assessment team and listed in the detailed data analysis plan supported by a note taker taking the notes. After each session the enumerator and note taker will complete the debrief form and will focus in whether the participants understood the questions and flagging any missed points.

Facilities assessment

After the MFGDs are complete, the REACH team will use the quantitative tool developed by the AO and the GIS Officer to collect further precise information on the location of infrastructure in our sectors of interest. The specific questions to be included in the tool will be spelt out in the data analysis plan. The tool will then be deployed on kobo collect for use during data collection.

Focus Group Discussions

A semi structured tools focusing on the availability and accessibility of health, WASH, education and market services and facilities and social cohesion in Renk Town will be developed by the REACH team. The questions on social cohesion will seek to understand the social cohesion dynamics between returnees and the host community and refugees in Renk Town and if they need to be improved. Additionally, the tool will have questions tailored towards understanding the informational needs of returnees and refugees. The data collection tools will be in English but where necessary enumerators will translate the tools to the preferred language of the interviewees.

Key Informant Interviews

The KIIs will use a semi structured tool tailored to discuss and understand the social cohesion dynamics between returnees and the host community and refugees in Renk Town, the informational needs of returnees and what humanitarian actors, community leaders and government is doing with regards to the accessibility and availability of health, WASH, education and market services and facilities to the population groups in Renk Town. The data collection tools will be in English but where necessary enumerators will translate the tools to the preferred language of the interviewees.

3.2.4 Briefing/Training of enumerators

Facilities assessment

A two-day enumerator training will be conducted to train enumerators on how to use smartphones to conduct primary data collection for the facilities assessment exercise in the designated urban or peri-urban setting. Enumerators will be trained on how to record the location and condition of basic infrastructure of all infrastructure in the area. Prior to the start of the assessment, the GIS Officer will collate information collected from the MFGDs on community boundaries and the location of infrastructure in Renk Town before dividing Renk Town into square grids of 250 by 250 m each. During the training, enumerators will be trained on how to use Maps.me to navigate their assigned grid, for places where no facility is reportedly present, enumerator will fill "empty place" inside the middle the grid. Once an enumerator has covered a grid, the grids colour will be changed to distinguish them from those yet to be assessed, this will be counter verified during data cleaning by spatially verifying the covered grids through the collected points. In the ODK mapping tool, enumerators will be prompted twice to confirm that they have checked their assigned grid and found no extra WASH, health, education, or market

infrastructure within. To avoid overlap, each enumerator will be advised during the training to only visit the grids they are assigned.

During the enumerator training the AO focal person will ensure the following:

- Ensure a work plan distributing the grids to be covered per enumerator by date is shared with the enumerators. The work plan should be reflected in the Kobo collect form so that only the grids an enumerator is assigned to appears when the enumerator code is inputted.
- Share with enumerators a memo on best practices to be followed which will be part of training manual that can be referred to whenever any clarification is needed. For example, security places shouldn't be mapped as these are sensitive areas that might get REACH staff into trouble.
- Advise enumerators to ensure daily logging of the challenges faced during data collection for future considerations and planning.

At the end of each day of data collection, the GIS Officer will produce a progress map showing the covered grids and those that are still empty. This map will then be used to advise enumerators on progress during the daily briefing. Action points from the day based on lessons learnt from the previous days data collection will also be shared with enumerators during the daily briefings.

Focus Group Discussions and Key Informant Interviews

A training on the qualitative tools will be held in person in Renk Town by the AO. The training will be conducted over a period of one day. The enumerators and field officers will be trained on the following tools:

- The FGD qualitative tools.
- The KIIs qualitative tools.
- A training on protection, gender, and disability mainstreaming guidelines.

For the qualitative data collection tools enumerators will be trained on how to complete transcripts and debrief forms for the FGDs and KIIs. Enumerators will be expected to fill the debrief forms on a daily basis. The debrief forms help to provide timely feedback and clarification on the context of the interview conducted daily. This process enables immediate reflection on and insight into the reliability of the data collected, an understanding of the challenges in the local context and strengthening of the quality and credibility of the data. The debriefing findings will critically inform the processing and analysis phase of the research cycle.

A training package that includes detailed instruction on key principles of ethical data collection to ensure that enumerators abide by international data protection standards will be prepared. The guiding principles of informed consent, "do no harm", confidentiality and respect will be presented during the training. Cultural and gender considerations and how to deal with these dynamics during interviews will also be discussed. The AO will be required to ensure the above principles and considerations are adhered to and respected throughout the data collection process.

Table 2: Description of tools and sampling methods used for data collection.

Label	Method	Objective	Structure	# of surveys	Population of interest	Sampling
Mapping Focus Group Discussions	Mapping Focus Group Discussions	Delineation of the town and identification of key infrastructure.	Semi-structured participatory mapping tool	2 MFGDs in the territorial unit (1 male, 1 female).	Community members with a knowledge of the territorial unit boundaries and the location of WASH, education, health, and	Purposive

					market infrastructure location.	
Facilities assessment	Structured interview	On completion of the MFDGs REACH will deploy the facilities assessment tool to collect data on the precise location of infrastructure in the territorial unit by getting the GPS points and collecting data on the functionality of the mapped infrastructure.	Structured	Dependent on the number of infrastructures in each of the sectors in the territorial unit	Key informants: community leaders, service providers, local authorities, and local experts	Purposive
Focus Group Discussions	Semi-structured interview	Understand the informational needs of returnees and the social cohesion dynamics of the various population groups in the territorial unit. Further, we will also seek to understand the accessibility and availability of infrastructure to these groups in Renk Town.	Semi-structured	22 FGDs (11 male and 11 female)	All population groups in Renk Town	Purposive

Key Informant Interviews	Semi-structured interview	Understand the informational needs of returnees and the social cohesion dynamics of the various population groups in the territorial unit. Further, we will also seek to understand the accessibility and availability of infrastructure to these groups in Renk Town	Semi-structured	8 KIIs	Key informants: community leaders, humanitarian actors,	Purposive
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3.1 DATA PROCESSING AND ANALYSIS

3.2.1 Data entry and cleaning process

Mapping Focus Group Discussions

On completion of the MFGDs, the REACH GIS Officer will photograph the maps produced during the MFGD session and upload the data into GIS software. The GIS officer will then compile the results from the MFGDs, looking for overlapping boundaries. In the case of good saturation of data, the GIS officer will proceed with mapping out the territorial unit in GIS software. The area delineation product from this exercise will then be used during the infrastructure mapping and facilities assessment as REACH engages enumerators to collect data on the precise location of all the infrastructure identified during the MFGDs and any other public infrastructure that may have been missed during the MFGDs.

Facilities assessment

Data collected during the infrastructure mapping exercise will be uploaded daily into the Kobo server. The collected data will be checked and cleaned on a daily basis and a cleaning log maintained. The data checking process will include a review of internal logic and comparing individual records to identify potential data entry errors and standardise answers. Daily spatial verifications will be done by the GIS officer to check on the GPS points, facility types and names and to check that all areas within Renk Town. After cleaning the data will be analysed in order to obtain key statistics that will support the work of humanitarian actors in Renk. The outcomes of the data quality checks will form a basis for debriefing the enumerators before further data collection the next day.

Focus Group Discussions and Key Informant Interviews

During FGDs and KIIs data collection, the AO will monitor data collection progress and data quality daily by checking the quality of notes taken down and the debriefs. Once the data is collected, note takers will ensure that notes from FGDs and KIIs are transcribed in English and digitalized as word documents. During transcript writing the AO will ensure that all individuals writing transcripts do not collect or record any personal identifiable information (PII). On completion of transcript writing, the AO will read the transcripts and debriefs to identify potential needs for clarification on the data and/or needs

Once all clarification has been sought, the final transcripts will be safely stored on REACH online platforms after which the enumerators copies will be destroyed.

3.2.2 Data analysis process

With the analysis, REACH aims to provide humanitarian actors and local government with reliable information about the capacity of Renk Town to support returnees, particularly as departures from Renk Town slow. Through mapping existing capacities and needs regarding the sectors of health, WASH, education and cash and markets, REACH aims to improve the ability of humanitarian actors, local government, and donors to plan how best to support the returnees and the local population of Renk Town.

The data analysis for the infrastructure mapping will be conducted by the GIS Officer and the Assessment Officer. The analysis will include generating key summary statistics such as the number of infrastructure points per settlement and the ratio of functional versus non-functional infrastructure such as water points and latrines. The findings from this analysis will then be combined with population data in order to compare conditions to international humanitarian standards. The analysis will then be shared with humanitarian actors and the government along with the maps that show the locations of the mapped infrastructure points.

For qualitative data processing and analysis, [IMPACT Minimum Standards for Qualitative processing](#) will be followed. The findings will be disaggregated by the different types of population groups and their vulnerabilities. Field teams will ensure that data collected during the FGDs and KIIs is transcribed in English and digitalized as word documents after they have been conducted. To analyse the content of the FGDs and KIIs, a data saturation grid will be developed continuously throughout data collection. As data collection continues a primary codebook will be developed as data collection continues and will include coming up with both discussion topics (DTs) and discussion points (DPs), to facilitate the structuration of the data saturation grid. Building on this, the saturation grid will be using an inductive approach where DPs falling under discussion topics DTs (based on questions in the data collection tools) are noted as they are identified from the FGDs and KIIs. The DPs identified will be stratified by population group and demographic sub-groups and further disaggregated by gender. Eventually, the DTs and the DPs will form the basis for the development of appropriate head and sub-themes which serve as the codebook for further analysis of the data through qualitative data analysis software through NVivo. The assessment team will then use thematic coding to identify key trends across population groups and counties and monitor the level of saturation for each theme. Initially to be able to support this analysis a data saturation grids will be developed by disaggregating by type of population for the FGDs. All maps and findings from FGDs and KIIs will be incorporated into a report that will be made publicly available on the REACH Resource Centre.

4. Key ethical considerations and related risks

The proposed research design meets / does not meet the following criteria:

<i>The proposed research design...</i>	<i>Yes/ No</i>	<i>Details if no (including mitigation)</i>
... Has been coordinated with relevant stakeholders to avoid unnecessary duplication of data collection efforts?	Yes	
... Respects respondents, their rights and dignity (specifically by: seeking informed consent, designing length of survey/ discussion while being considerate of participants' time, ensuring accurate reporting of information provided)?	Yes	

... Does not expose data collectors to any risks as a direct result of participation in data collection?	No	Enumerators will be traversing communities and may face security risks doing so. In order to prevent this from happening enumerators will move in pairs and not move into areas that are considered to be associated with safety risks or national security. The enumerators will be recruited locally.
... Does not expose respondents / their communities to any risks as a direct result of participation in data collection?	Yes	
... Does not involve collecting information on specific topics which may be stressful and/ or re-traumatising for research participants (both respondents and data collectors)?	No	Indicators on social cohesion will be designed to, as much as possible, avoid re-traumatization. This is because returnees from Sudan have recently witnessed a war and some questions on social cohesion could be sensitive in such a context. Tools will be closely vetted to ensure they are sensitive to the context. Respondents are also free to stop the interview if they feel uncomfortable or do not wish to continue.
... Does not involve data collection with minors i.e., anyone less than 18 years old?	Yes	
... Does not involve data collection with other vulnerable groups e.g., persons with disabilities, victims/ survivors of protection incidents, etc.?	No	Even though we do not plan to specifically target vulnerable groups as part of this assessment they might be randomly or purposively sampled as part of the MFGDs or FGDs. Our enumerators will therefore be trained to treat participants respectfully and with dignity no matter the group.
... Follows IMPACT SOPs for management of personally identifiable information ?	Yes	

5. Roles and responsibilities

Table 3: Description of roles and responsibilities

Task Description	Responsible	Accountable	Consulted	Informed
<i>Research design</i>	Assessment Officer	Research Manager	IMPACT-HQ Research Design and Data Unit (RDDU), REACH Deputy Country Coordinator (Programs)	REACH Country Coordinator
<i>Supervising data collection</i>	Assessment Officer, GIS Officer	Research Manager	REACH Country Coordinator and REACH Deputy Country Coordinator (Programs)	IMPACT-HQ RDDU U
<i>Data processing (checking, cleaning)</i>	Assessment Officer	Research Manager	Senior GIS Officer, Research Manager	IMPACT-HQ RDDU , REACH

					Country Coordinator
Data analysis	Assessment Officer, GIS Officer	Research Manager	Senior GIS Officer, REACH Deputy Country Coordinator (Programs) and IMPACT-HQ RDDU		Donors, REACH Country Coordinator,
Output production	Assessment Officer, GIS Officer	Research Manager	Senior GIS Officer, REACH Deputy Country Coordinator (Programs), IMPACT-HQ Research Reporting Unit (RRU) and ABA Specialist (HQ)		REACH Country Coordinator, FCDO (Donor)
Dissemination	Research Manager	Coordination	Cluster/Working Group Coordinators, REACH Country Coordinator		IMPACT-HQ RRU, ICCG, Clusters/Working Groups, FCDO (Donor)
Monitoring & Evaluation	Focal Point	Research Manager	IMPACT-HQ RDDU		REACH Country Coordinator, FCDO (Donor)
Lessons learned	Assessment Officer, GIS Officer	Research Manager	Senior GIS Officer, REACH Country Coordinator		IMPACT-HQ RDDU, IMPACT-HQ RRU

Responsible: the person(s) who executes the task

Accountable: the person who validates the completion of the task and is accountable of the final output or milestone

Consulted: the person(s) who must be consulted when the task is implemented

Informed: the person(s) who need to be informed when the task is completed

6. Data Analysis Plan

- Kindly find the link to the facilities assessment data analysis plan [here](#).
- Kindly find the link to the FGDs and KIs questionnaires [here](#).

7. Monitoring & Evaluation Plan

IMPACT Objective	External M&E Indicator	Internal M&E Indicator	Focal point	Tool	Will indicator be tracked?
Humanitarian stakeholders are accessing IMPACT products	Number of humanitarian organisations accessing IMPACT services/products	# of downloads of x product from Resource Center	Country request to HQ	User logging	X Yes
		# of downloads of x product from Relief Web	Country request to HQ		X Yes
		# of downloads of x product from Country level platforms	Country team		<input type="checkbox"/> Yes
	Number of individuals accessing	# of page clicks on x product from REACH global newsletter	Country request to HQ		X Yes

	IMPACT services/products	# of page clicks on x product from country newsletter, sendingBlue, bit.ly	Country team		X Yes
		# of visits to x webmap/x dashboard	Country request to HQ		□ Yes
IMPACT activities contribute to better program implementation and coordination of the humanitarian response	Number of humanitarian organisations utilizing IMPACT services/products	# references in HPC documents (HNO, SRP, Flash appeals, Cluster/sector strategies)	Country team	Reference_log	2024 Humanitarian Needs Overview (HNO) 2024 Humanitarian Response Plan (HRP)
		# references in single agency documents			Cluster/Working Group response strategies.
Humanitarian stakeholders are using IMPACT products	Humanitarian actors use IMPACT evidence/products as a basis for decision making, aid planning and delivery	Perceived relevance of IMPACT country-programs	Country team	Usage_Feedback and Usage_Survey template	Survey monkey: As part of regular dissemination email, survey monkey sent every six months to assess usage of REACH products.
		Perceived usefulness and influence of IMPACT outputs			
		Recommendations to strengthen IMPACT programs			
	Number of humanitarian documents (HNO, HRP, cluster/agency strategic plans, etc.) directly informed by IMPACT products	Perceived capacity of IMPACT staff			Qualitative feedback: Each REACH staff responsible for reporting back to communications manager each time agency requests REACH information or provides feedback on how REACH information has been used.
		Perceived quality of outputs/programs			
		Recommendations to strengthen IMPACT programs			
Humanitarian stakeholders are engaged in IMPACT programs throughout the research cycle	Number and/or percentage of humanitarian organizations directly contributing to IMPACT programs (providing resources, participating to presentations, etc.)	# of organisations providing resources (i.e.staff, vehicles, meeting space, budget, etc.) for activity implementation	Country team	Engagement_log	X Yes
		# of organisations/clusters inputting in research design and joint analysis			X Yes
		# of organisations/clusters attending briefings on findings;			X Yes