Internal Evaluation of Pilot Complaints and Response Mechanism (CRM)

Mornei and Rongataz IDP Camps,
West Darfur,
Sudan.

March 2012

(Image: PM&E Advisor, Mohammed Toum Abushanab and Tijani Adbal Rahman, CRM Focal Point, with a Concern Complaints Box, in Elgabal Camp, Mornei, April 2012)

Evaluated by
Mohammed Toum Abushanab,
PM&E Advisor,
Concern Sudan.
Executive Summary

Concern Worldwide Sudan piloted a Complaints and Response Mechanism (CRM) in Mornei IDP camp, West Darfur, Sudan, with the support of ECHO. The purpose of this internal evaluation is to ensure the pilot initiative provided safe, accessible, transparent and confidential channels, through which the community lodged complaints, relating to the decisions and actions of Concern. The evaluation will also be used to determine whether Concern has upheld its commitment to ensuring ‘80% of complaints received are responded to within two weeks’, as defined by Concern’s agreement with ECHO, for the 2011-2012 programme period.

The main findings of this evaluation are that 92% of complaints received through the CRM have been resolved within 2 weeks, and that the majority of complaints received were regarding the quantity and quality of services provided (60%), beneficiary selection criteria (38%), and Concern staff (2%). The evaluation also found that a number of improvements need to be made to strengthen the initiative, including providing further community and staff sensitisation sessions on the CRM and quality assurance measures to ensure improved complaint responses.
Introduction

Concern’s Global Strategic Plan 2011-2015 *Greater impact in an increasingly vulnerable world*, states that ‘*we are committed to the highest standards of accountability to our beneficiaries, the public, and the many government donors who support us.*’ Encouraged by Humanitarian Accountability Partnership (HAP) certification, Concern is committed to beneficiary accountability and ensuring that the organisation is ‘*more accountable to our intended beneficiaries and all other stakeholders for our agreed commitments and objectives and for programme quality and results.*’

Concern’s focus on beneficiary accountability ensures that the protection and welfare of beneficiaries is at the centre of all decision making processes. At a national level, Concern’s North Sudan Strategic Plan 2009-2011 (draft) states that we will ‘*be open and transparent in our relations with others, and accept responsibility for our individual and collective actions*’. Thus, Concern recognises the intrinsic link between programme quality and beneficiary accountability, along with understanding that strengthening Concern’s accountability commitments will maximise the impact on the extreme poor.

While operating in West Darfur presents humanitarian organisations with a multitude of programming challenges, Concern strives to ensure these challenges do not prevent the organisations accountability commitments from being realized. The pilot Complaints and Response Mechanism (CRM) has been a key part of these commitments, aimed at providing the community with a channel through which complaints about Concern’s programmes can be lodged in a systematic and effective way.

The CRM pilot was guided by a CRM Paper, developed by the Programme Support Officer. This comprehensive CRM Paper was based on information gathered from 3 focus group discussions with humanitarian actors, 8 community meetings and a meeting with 15 community leaders in Mornei and Rongataz, during August and September 2011. The CRM paper details the initiatives objectives, design, implementation and monitoring and evaluation practices, supported by a number of additional documents, including a CRM user form, CRM database, and fact sheet to be used by Concern staff and volunteers when engaging in community sensitization sessions. The establishment of the initiative began with the training of a number of key staff members in August 2011, including the attendance of Mornei’s Assistant Area Coordinator to training in Nairobi, which was later replicated for 32 staff member in Mornei.

A technical review of the paper was completed by the Programme Coordinator, Assistant Country Director- West Darfur and Concern’s Global Humanitarian Protection Advisor. Despite several attempts by programme staff in El Geneina, the paper has not yet received official approval from Concern’s Country Management Team (CMT).

Thus, this evaluation of the pilot CRM, which was launched in December 2011, was completed in March 2012 by Concern Sudan’s PM&E Advisor, Mohammed Toum Abushanab. The evaluation has involved the collection of primary and secondary data, including consultations with beneficiaries and staff members, in addition to the analysis of the CRM database, which was established to track and classify all complaints received. Finally, the evaluation has produced a number of recommendations to improve the initiative, which are further detailed below.
Methodology

Scope
As further described in the Terms of Reference (Annex 1), the scope of this internal evaluation is to ensure Concern’s pilot CRM provided safe, accessible, transparent and confidential channels through which the community could lodged complaints related to the decisions and actions of Concern. The evaluation will also be used to determine whether Concern has upheld its commitment to ensuring ‘80% of complaints received are responded to within two weeks’, as defined by Concerns agreement with ECHO, who have supported the initiative, for the 2011-2012 programme period.

Approach
The evaluation has been separated into three phases, including: a Desktop Analysis, Field Study, and Reporting and Recommendations.

Phase 1: Desktop Analysis
During this initial phase, the evaluator designed the tools for use during the field evaluation and conducted a thorough literature review of all related reports and policies. This included the CRM Paper and supporting documents, transcripts of consultations with stakeholders conducted during the establishment of the CRM, and the report and recommendations arising from a visit by Concern’s Humanitarian Programme Advisor to Mornei in October 2011.

Phase 2: Field Study
The field study phase involved two stages, primary data collection and the analysis of the CRM database. This phase was based around obtaining answers on the following questions regarding the CRM:

• Has information regarding the CRM been sufficiently disseminated to staff, partners and beneficiaries?
• Has the CRM been accessible to vulnerable and marginalised groups within the community?
• Have complaints been processed appropriately by the CRM Committee and documented accurately through the CRM database?
• Has the initiative been monitored and have the complaints made a difference to Concerns programming?
• What aspects of the CRM have worked effectively? What aspects of the CRM need to be improved and changed?

The data collection process involved collecting data from 52 community members through focus group discussions, key informant interviews with community leaders and community representatives, in addition to 25 house visits, randomly selected in 5 different camps. These consultations were used to assess the community’s knowledge and experience of engaging with the CRM. The data collection process was also strengthened through consultations with 30 Concern staff.

The data collection phase also included a vulnerability assessment, which was conducted in cooperation with Concerns team in Mornei. This assessment was used to evaluate the access and use of the CRM by vulnerable community members, such as women, the disabled, the illiterate, youths and others affected by social and economic exclusion.
The field study phase also included an analysis of the CRM database, which has compiled the complaints according to the nature of the complaint, the sex of the complainant, and the channel lodged. The resolution time of each complaint was also analysed, along with the resolution group (e.g. Mornei CRM Group, West Darfur CRM Group etc.). The quality of the CRM database was also verified through a random selection process, with CRM user forms arbitrarily selected to assess their quality.

Finally, end user surveys, which were distributed to beneficiaries who received a response from Concern, were analyzed to assess their experience in using the CRM.

Phase 3: Report and Recommendations
Having completed the first two stages of the evaluation, the evaluator reconciled the data collected during these phases and created the following report and recommendations.

(Image: Tijani Adbal Rahman, CRM Focal Point, pictured with a Concern Complaints Boz in Mornei IDP Camp, April 2012.)
Findings

Analysis of Complaints Received
An analysis of the 107 complaints received by Concern from December 2011 to April 2012, revealed the following:

- 60% of the complaints were concerned with the quantity and quality of services provided, 38% were concerned with the beneficiary selection process, and 2% were regarding Concern staff.
- The majority of the complaints were regarding the NFI sector, constituting 90% of the complaints, with the remaining 10% about the nutrition sector.
- The vast majority of complaints received were requests for help and support, with most of the complaints regarding the beneficiary selection criteria for the NFI programme.
- 84% of the complaints were found to have been lodged by females, with 16% lodged by males. 85% of the complaints were considered to be valid, and 15% invalid because they did not relate to Concerns programming.
- The most used channel for lodging a complaint was found to be the complaint boxes (98%), followed by complaints made to the CRM focal point in the Concern office, and finally through Concern field staff.
- 92% of complaints received were resolved within two weeks, and the remaining 8% were not resolved because they were recently received.

<table>
<thead>
<tr>
<th>Number of complaints</th>
<th>Sex</th>
<th>Valid</th>
<th>Invalid</th>
<th>Resolved</th>
<th>Non-resolved</th>
</tr>
</thead>
<tbody>
<tr>
<td>107</td>
<td>Male</td>
<td>17</td>
<td>91</td>
<td>98</td>
<td>9</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>90</td>
<td>16</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Source: CRM database, March 2012)

Complaint Channels
Rongataz camp, and each of the five camps in Mornei (Amtidat East, Amtidat West, Elgabal, Elwadi and Elsalaam) received a complaint box. These boxes were found to be located in an accessible place, for both men and women, outside the camps community centres. Each box is fitted with two locks, with a Concern staff member retaining the key for one lock, and a community member, selected by the community in a meeting, retaining the key for the other.

However, with high levels of illiteracy among the target population, especially among women, this was mentioned as a significant barrier to the use of the complaint box. During consultations with the community, it was revealed that those who are illiterate overcome this obstacle through requesting someone to lodge the complaint for them, usually a family member, and often their children. The evaluation also found that the community’s preferred method of lodging a complaint was through the complaint boxes, as they felt this was a ‘safer’ method than raising complaints in person with Concern staff.

Other complaint channels were considered during the establishment of the CRM, and as noted in the CRM Paper, it was decided that despite the presence of a phone network in the programme area, the effectiveness of a phone line for complaints would have been compromised due to technical difficulties and staff resourcing issues. During the evaluation process, the evaluator
also concluded that a phone line for complaints, given the limited coverage and user rates, would not be a viable option.

**CRM Database**

The CRM database (comprising of a Microsoft Excel sheet) was developed to track all complaints received from the community. The database was designed to be updated on a monthly basis, classifying the complaints in terms of the nature of the complaint, the sex of the complainant, the channel lodged, the resolution time, and the resolution group (e.g. Mornei CRM Group, West Darfur CRM Group etc.). Once complaints have been lodged in the database, the CRM Committee files them in a folder, with receipts which acknowledge that the complaints have been lodged. The complaints are then put in sealed envelopes, and placed in a drawer in the HR office, to ensure confidentiality.

The updated database was then designed to be circulated to the AAC, CRM focal person and ACD, in addition to a weekly complaint register. However, it was revealed during the evaluation that this procedure was not carried out, and instead the information was just regularly shared with the AAC.

**The CRM Committee**

Initially, the Complaints Committee consisted of three Concern staff members (the FIM, Nutrition and HR officers) from the Mornei office, who met twice a month to review the complaints received. However, due to their existing responsibilities and frequent travel to programme locations, these meetings were frequently interrupted, resulting in delays regarding the revision of complaints.

Consultations with the CRM Committee also revealed that only one of the members understands how the mechanism works. The rest of the Committee members were found to know little about the initiative, including not understanding how to correctly fill the database spreadsheet, indicated by incorrect data inputs. In light of these anomalies, a database system was created by the PM&E Advisor, with the members of the Committee trained in its use. However, the CRM focal person was also found to have invested a considerable amount of time in issuing acknowledgments for the complaints received, as they were entered into the database.

During the evaluation, it was revealed that members of the CRM Committee believe that a staff member should be recruited to undertake CRM related duties. However, this was rejected by the evaluator who concluded that the related activities are not substantial enough to warrant this, given that only 107 complaints were received during the pilot.

**CRM awareness among Concern staff**

After consultations with both Concern field staff, it became clear that most of them have not been involved in the establishment of the initiative, including community sensitisation sessions. Many made it clear that they were not aware of the existence of the CRM, while some staff mentioned they had heard of it, but where unclear of how the mechanism works.

**Perception of the CRM in the community**

Through focus groups discussions with 20 women and men, and 12 community leaders, it was revealed that the beneficiaries know very little about the CRM, including when the complaints were collected from the boxes, or what the process was for dealing with the complaints.
Many community members were found to be distrustful of the mechanism because those who had lodged complaints had not received feedback from Concern. Many also believed that complaints were not collected systematically from the boxes. Thus, while the evaluation found that 92% of the complaints received by Concern were responded to, neither the discussions with the community, or community leaders reflected this.

During the focus group discussion, the community suggested that perhaps they could be briefed on the types of complaints Concern received, and be involved in responding to them. While the communities were found to be appreciative of the objective of the CRM and value having access to such an initiative, they were unsatisfied by what they perceived as a lack of response to their complaints. Also, as reflected in the analysis of the CRM database, the community was found to have little understanding of what constitutes a valid or invalid complaint. The vast majority of complaints received by Concern have in fact been requests for help and support, with most of the complaints regarding the beneficiary selection process for NFI distribution.

When community members were asked about the most vulnerable people in their society, participants stated that this group comprises of female headed households (especially widows), orphan headed households, and the elderly. Consultations with the community found that these groups had little information about the CRM, and that these vulnerable groups’ needs to be particularly targeted during community awareness sessions, with community leaders playing a major role in ensuring these groups are included.

**Reporting sensitive complaints**

During a focus group discussion with exclusively female participants, the evaluator discussed possible misbehaviour of Concern staff, through the use of examples of inappropriate behaviour. The discussion was translated into a local dialect by a female Concern staff member, who asked participants what they might do if they had something sensitive to complain about.

The participants stated that while they had not experienced any inappropriate behaviour from the staff, they would not report it if they did. They stated that complaining would create problems with the staff members, their husbands and families and from a social and religious point of view, sensitive complaints about inappropriate behaviour would be subject to intense scrutiny, with concrete evidence required. Thus, the effectiveness of reporting and responding to sensitive complaints through the CRM is problematic, due to widespread existing social barriers.

**Timeframe for responding to complaints**

While the CRM database indicates that responses were provided to 92% of the complaints received, there is no evidence of this, despite being registered in the database. The CRM Committee outlined that complaints were responded through individual home visits. However, during the focus group discussions, key informant interviews and house visits, it became clear that this response mechanism is not appropriate.

As noted above, the consultations with the community members revealed they doubted the systematic collection of the complaints from complaint boxes, and believed complaints received by Concern were not responded to. Thus, it is clear the mechanisms response to complaints needs to be strengthened, including involving a public aspect to responses. This would assure the community that Concern is responding to complaints in a transparent manner, where appropriate for non-sensitive complaints.
Recommendations

Improving the response to complaints received
- Ensure the registration of all complaints in the database, from all channels, including those coming from beneficiaries outside the targeted area.
- Ensure who and when each complaint box is opened is recorded, along with how many complaints are in each box.

Improving the confidentiality of complainants
- Ensure only CRM Committee members and other authorised staff members have access to the sealed envelopes with complaints, through the use of a locked drawer.

Improving communities awareness of the CRM
- Provide further sensitisation sessions, explaining to the communities about what constitutes a valid or invalid complaint, centred on the idea that complaints should be made in relation to Concerns activities.
- Vulnerable groups should be particularly targeted by these community awareness sessions, with community leaders also encouraged to increase their inclusion in community meetings etc.

Improving Concern staff awareness of the CRM
- Provide further sensitisation sessions on the CRM for Concern staff and partner organisation staff, including drivers. Topics should include the difference between valid and invalid complaints, the difference channels through which complaints can be lodged, how to deal with a community member who wants to complain to them, issues surrounding confidentiality, and how sensitive and non-sensitive complaints are dealt with, including the procedures around the involvement of the ACD’s and CD.
- Update staff regularly (during monthly or morning meetings) on the non-sensitive complaints which have been received.
- Provide further training to the CRM Committee members on data inputting to the CRM database, ensuring quality control and continuity.

Issues recommended for further discussion
- The timeframe for responding to complaints could be discussed by the CRM focal person and the CRM Committee to decide if it is possible to respond to non-sensitive complaints within 7 days, rather than the current time response period, which is 14 days.
- Mechanisms to improve the transparency of the complaint response process could be discussed with the broader community, especially women and other vulnerable groups who do not usually attend community meetings. Consultations with the community revealed they would like to be involved in responding to the complaints, and perhaps this could be facilitated at community meetings, where non-sensitive complaints could be discussed, demonstrating that complaints are being dealt with in an effective and transparent manner.
- Considering the CRM paper has not yet received official approval from Concern’s Country Management Team (CMT), including in the recent April 2012 meeting. Thus, it is recommended that senior management address this immediately, as managers play a vital role in ensuring a culture of accountability is created throughout the organisation.
## Recommended timeframe for realizing these recommendations

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person(s) responsible</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Intensive training for CRM committee on the use of the CRM database and filling.</td>
<td>John</td>
<td>ASAP</td>
</tr>
<tr>
<td>2 Organize sensitization session for the community, Concern staff and partner staff on the CRM.</td>
<td>CRM committee</td>
<td>April 2012</td>
</tr>
<tr>
<td>3 Review all the complaints in the database and ensure accuracy of inputs.</td>
<td>Tijani, Yahya and Huda</td>
<td>Second week of April 2012</td>
</tr>
<tr>
<td>Ensure complainants receive an acknowledgment receipt, and if a response to their complaint has been given.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prioritize the follow up of sensitive complaints.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respond to all pending NFI and nutrition related non-sensitive complaints</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Consider revising the existing complaint forms and database, adjusting them as required and begin using them correctly.</td>
<td>CRM Committitur</td>
<td>By end of June</td>
</tr>
<tr>
<td>Update the community on the complaints received in community meetings (e.g describe how many complaints have been received and the resolution process.)</td>
<td>CRM committee</td>
<td>Bi-weekly</td>
</tr>
<tr>
<td>5 Include brief information on the CRM in weekly or monthly staff meetings, ensuring confidentiality.</td>
<td>???</td>
<td>ASAP</td>
</tr>
</tbody>
</table>
Annex 1: Terms of Reference

Terms of Reference

Internal Evaluation of Pilot Complaints and Response Mechanism
In Mornei and Rongataz IDP Camps, West Darfur

West Darfur Programme, Sudan

1. Introduction

Mornei town began receiving an influx of conflict affected people in late 2003, with the town’s population swelling from 5,000 to over 80,000 before the end of 2004. The displaced population included people from up to 120 villages, which range in distance from 5-75 kilometres from Mornei town. The population included 5 major ethnic groups, spread across 3 localities. Concern established an emergency response programme in Mornei town in late 2004, addressing the water, sanitation, food, nutrition and health needs of new arrivals. Additionally, at the request of OCHA, Concern assumed the role of Camp Coordinator, supporting the Humanitarian Aid Commission as Camp Manager.

More recently, Concern’s work in the camp has focused on three key determinants of extreme poverty: child malnutrition, food insecurity and poor access to basic services. Concern’s current programme strategy includes the following sectors: Health and Nutrition; FIM, WASH and Camp Coordination. Whilst, Concern directly implements its FIM, WASH and Nutrition programmes, the health programme has been extended into Rongataz IDP camp, in coordination with a national partner, the Sudanese Organisation for Humanitarian Aid (SOHA). Programming is supported by ECHO, USAID-OFDA, Irish Aid and CHF, as well as donations in kind from WFP, UNICEF, FAO, WFP Logistics Coordination Unit and UNFPA. Concern has a field office in Mornei IDP camp, managed by an Assistant Area Coordinator. Programme delivery is supported by technical officers in FIM, Health and Nutrition, WASH and Camp Coordination, as well as Logistics and Finance staff. Figure 1 below outlines Concern’s population profile for Mornei.

Figure 1: Concern’s Population Profile for Mornei

<table>
<thead>
<tr>
<th>Area</th>
<th>Site</th>
<th>Total</th>
<th>IDPs</th>
<th>Host</th>
<th>Nomads</th>
<th>Women</th>
<th>Children &lt;5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mornei</td>
<td>Mornei and Rongataz IDP Camps</td>
<td>92,297</td>
<td>67,269</td>
<td>13,778</td>
<td>11,250</td>
<td>43,380</td>
<td>18,736</td>
</tr>
</tbody>
</table>

Concern is committed to beneficiary accountability which places the protection and welfare of beneficiaries at the centre of our decision making process. We recognise the intrinsic link between the programmes which we deliver and the welfare of those engaging with these programmes. Furthermore, we believe that the strengthening of our accountability commitments will contribute to maximising the impact which our programmes have on those living in extreme poverty. In an effort to further strengthen Concern’s commitment to beneficiary accountability, it was decided to pilot a Complaints and Response Mechanism in Mornei during 2011. The pilot CRM aimed to provide the community with channels through which they could lodge complaints against perceived or realised shortcomings in Concern’s decisions or actions.
The establishment of the pilot CRM began with a number of staff trainings during August and September 2011, including the Assistant Area Coordinator- Mornei attending training in Nairobi and a replica training conducted for 32 staff in Mornei. Concern’s Programme Support Officer developed a comprehensive CRM Paper, and supporting documents, including a CRM user form, CRM database and fact sheet to be used by Concern staff and volunteers when engaging in community sensitisation sessions. The paper guides the establishment of the pilot; from design and delivery, to monitoring and learning, including the rationale and objectives of the CRM. The paper incorporates the outcomes of the 3 focal group discussions conducted with 8 humanitarian actors, 8 community groups and a group of 15 community leaders in Mornei and Rongataz during August and September, 2011. A technical review of the paper was completed by the Programme Coordinator, Assistant Country Director- West Darfur and Concern’s Global Humanitarian Protection Advisor, resulting in its approval by the Country Director in September, 2011. The following complaints channels were selected based on the outcomes of community and stakeholder consultations:

1. Complaints placed in a complaint box
2. Complaints shared with Concern staff or community volunteers
3. Complaints shared with a community leader (Sheiks) and then shared with Concern staff

Concern conducted 7 community sensitisation sessions on the CRM, involving 232 community members. Additionally, an intensive, week long CRM sensitisation campaign was conducted during November 2011, aimed at strengthen the community’s understanding as to the purpose, scope and functioning of Concern’s CRM. Having completed this campaign, complaint boxes were erected outside Concern’s five community centres in Mornei and Concern’s Nutrition Centre in Rongataz. The pilot CRM was launched at the end of November, 2011. The CRM user form and database were used to monitor the CRM’s performance.

2. Purpose of the Evaluation

This internal evaluation aims to ensure Concern’s pilot CRM provided safe, accessible, transparent and confidential channels through which the community can lodge complaints related to the decisions and actions of Concern. The evaluation will also determine Concern’s commitment to ensuring ‘80% of complaints received are responded to within two weeks’, as defined in ECHO 2011-2012, which supported the pilot.

3. Methodology

The following methodology is proposed:

- Literature Review- The evaluator will conduct a desk based literature review including the CRM Paper, and support documents, transcripts of consultations and recommendations arising from the Humanitarian Programme Advisors visit in October 2011.
- Analysis of the CRM database- This will include profiling of complaints according to gender, classification, sector and channel lodged. Analysis will also examine key outcomes including resolution time (time lapse between lodging of complaint and its resolution) and resolution group (e.g. Mornei CRM Group, West Darfur CRM Group etc.).
- Data quality- This will involve random selection of CRM user forms to assess quality of data entry to the CRM database.
Concern Worldwide Sudan,
Internal Evaluation of CRM,
West Darfur, March 2012.

- Community Awareness - Focal Group Discussions with community members to assess their knowledge and engagement with the CRM pilot, including design and usage.
- End user survey - Should complainants be willing, end user survey will be conducted to assess their experience in lodging a complaint.
- Key Informant Interviews - A series of key informants including community leaders and representatives of humanitarian and government agencies will be conducted to assess knowledge of the CRM’s objectives and functioning.
- Vulnerability Assessment - In cooperation with Concern’s team in Mornei, evaluate access and utilisation of the CRM by vulnerable community groups including women, those with a disability, poor literacy, youth and others affected by social and/or economic exclusion. Potential to incorporate vulnerability assessment in the above methodologies.

4. Specific Tasks

The following tasks are proposed for the evaluation:

- Develop and agree a comprehensive evaluation plan with the Programme Coordinator-West Darfur and Assistant Area Coordinator-Mornei.
- Literature review to identify gaps in planning, design and delivery of the pilot CRM.
- Programme performance analysis based on CRM database and data entry quality assurance.
- Focus groups discussions and end user surveys with the community.
- Key informant interviews and vulnerability mapping to evaluate access and utilisation by those experiencing social and economic exclusion.
- Final report including key findings of the evaluation and recommendations to further strengthen the CRM.
- Facilitate the inclusion of a management response to the final report, detailing next steps and those responsible.

5. Management

The evaluation process will, at all times, remain cognisant of Concern’s Programme Participant Protection Policy and Concern’s Staff Code of Conduct. The evaluator will report to the Programme Coordinator-West Darfur throughout the evaluation process and the Assistant Area Coordinator-Mornei during the field evaluation exercise in Mornei. Furthermore, the existing line management structure of the evaluator will remain in place.

6. Proposed Timeframe

The evaluation will occur in late March 2011. The final report, detailing the findings of the evaluation and recommendations, will be available no later than April 10, 2012.

Prepared by: John O’ Brien, Junior Advisor on FIM- Sudan
Reviewed by: (line manager for evaluation)
Approved by: (evaluator)
Annex 2

FGD Questionnaire

How does the mechanism function in practice?
1. Do you know if there is a mechanism in place here where you can raise concerns or complaints about CWW programme or CWW staff? (ask how many in the group are aware of the existence of the CRM)

2. Is complaint a sensitive word in the local language?

3. How can you raise a complaint about CWW programme or CWW staff? What are the channels available to make a complaint? (See if they are aware of all the channels and how channel works)

4. What are some of the barriers to complaining?

5. How were these channels decided? By whom? Were you involved in the decision?

6. How can marginal or vulnerable groups access a CRM? What might prevent them from coming forward to complain?

7. Who can use the CRM? Who can complain? (information)

8. What can people complain about? Ask for examples, linked to next question. Can you give me an example of complaint that CWW cannot respond to? (Complaints about another organization, etc.) (Information)

9. Do you know how CWW staff (and partners) should behave with you? (assess their knowledge of the content of the P4)

10. How often is the complaint/suggestion boxes opened? Who opens them? How were the people who open them selected? Did you participate in the selection of these people?

11. Do you think the composition of the group opening the boxes should change? How should it change?

12. Do you know if you can raise a complaint directly with a CWW staff? With whom? Do you know the person? How often do you see him/her?

13. What can people do if they are not happy with the response received? (appeal process)
14. Are people satisfied with the way complaints are handled and the response received? Why? (linked to the next question)

15. What is their preferred method of receiving this feedback?

16. Is there a ‘culture of complaining’, or ‘a reluctance to complain’?

17. Have you heard of people in your community who have used the CRM for raising a complaint about CWW programme? Were they satisfied by the way the complaint was handled? Why?

18. What happen once the complaint is made? Do you know who deals with the complaint once made? In case they know ask them, if they know who is part of the committee (transparency, information)