Independent mid-term project evaluation

Forensic Human Resource and Governance Development Assistance to the Palestinian Authority

PSEX02
Palestine

June 2016
This evaluation report was prepared by Elca Stigter, evaluator. The Independent Evaluation Unit (IEU) of the United Nations Office on Drugs and Crime (UNODC) provides normative tools, guidelines and templates to be used in the evaluation process of projects. Please find the respective tools on the IEU web site: http://www.unodc.org/unodc/en/evaluation/evaluation.html

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# ABBREVIATIONS AND ACRONYMS

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<tr>
<td>CIDA</td>
<td>Canadian International Development Agency</td>
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<tr>
<td>CLP</td>
<td>Core Learning Partner</td>
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<td>COGAT</td>
<td>Coordinator of Government Activities in the Territories Unit</td>
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<td>DFATD</td>
<td>Department of Foreign Affairs, Trade and Development Department</td>
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<td>EU</td>
<td>European Union</td>
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<td>EUPOL COPPS</td>
<td>EU Police Co-ordinating Office for Palestinian Police Support</td>
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<tr>
<td>GAC</td>
<td>Global Affairs Canada</td>
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<tr>
<td>IEU</td>
<td>Independent Evaluation Unit</td>
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<tr>
<td>INL</td>
<td>Bureau of International Narcotics and Law Enforcement Affairs</td>
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<tr>
<td>LSS</td>
<td>Laboratory and Scientific Section</td>
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<td>MoH</td>
<td>Ministry of Health</td>
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<td>MoI</td>
<td>Ministry of Interior</td>
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<td>MoJ</td>
<td>Ministry of Justice</td>
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<tr>
<td>MoPA</td>
<td>Ministry of Planning and Administration</td>
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<td>MoU</td>
<td>Memorandum of Understanding</td>
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<td>NCFM</td>
<td>National Centre for Forensic Medicine</td>
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<td>PA</td>
<td>Palestinian Authority</td>
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<td>PCP</td>
<td>Palestinian Civil Police</td>
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<td>PNSI</td>
<td>Palestinian National Standards Institute</td>
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<td>PSC</td>
<td>Project Support Costs</td>
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<td>ROMENA</td>
<td>Regional Office for the Middle East and North Africa</td>
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<td>SGBV</td>
<td>Sexual and Gender Based Violence</td>
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<tr>
<td>SMART</td>
<td>Specific, measurable, attainable, relevant and time-bound</td>
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<tr>
<td>Acronym</td>
<td>Full Form</td>
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<tr>
<td>SOP</td>
<td>Standard Operating Procedure</td>
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<td>TSFL</td>
<td>Temporary Scientific Forensic Laboratory</td>
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<td>UN</td>
<td>United Nations</td>
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<td>UNDCP</td>
<td>United Nations International Drug Control Programme</td>
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<tr>
<td>UNDESA</td>
<td>United Nations Department of Economic and Social Affairs</td>
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<td>UNDP</td>
<td>United Nations Development Programme</td>
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<td>UNEG</td>
<td>United Nations Evaluation Group</td>
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<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
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<td>WCLAC</td>
<td>Women’s Centre for Legal Aid and Counselling</td>
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EXECUTIVE SUMMARY

The project ‘Forensic Human Resource and Governance Development Assistance to the Palestinian Authority (PA)’ (hereinafter referred to as the forensic project) has been implemented by UNODC since 2011. It is funded by the Foreign Affairs, Trade and Development Department (DFATD) of the Government of Canada (now called Global Affairs Canada) with USD 10.9 million. The project was formally launched on 8 December, 2011, and in 2014 extended until the end of 2017. The forensic project aims to contribute to ‘Improved criminal justice system for men, women and children of the West Bank’ with the following five outcomes:

• Increased technical skills of forensic science professionals, including women, in providing forensic services in areas such as drug analysis, firearms and tool mark identification and document examination;

• Improved ability of forensic medical professionals, including women, to conduct death investigations and provide gender-sensitive services to victims of abuse, particularly women and children;

• Improved institutional capacity to manage and deliver integrated forensic medicine and forensic science services based on international best practices;

• Enhanced understanding among police, legal and judicial authorities, decision makers and civil society of the role and importance of forensic services, including for sexual and gender-based violence (SGBV) and family violence cases;

• Increased harmonization concerning legal frameworks, approaches, policies, and coordination, including SGBV and family violence cases: Between police, legal and justice sector stakeholders including civil society organizations, among donors and multilateral organization.

The objective of this independent mid-term evaluation was to take stock of the main achievements of the forensic project thus far, to provide recommendations to remedy possible gaps in implementation, and to examine the strategy for project completion. The evaluation covered the first four years and nine months of the forensic project, namely from early 2011 until 30 September, 2015. The evaluation used a mixed method approach (desk review, semi-structured interviews and observation), and interviewed a total of 50 respondents. Qualitative and quantitative methods were used for analysis.

1 UNODC, 2015c: 22-32.
Evaluation findings

The forensic project is undoubtedly relevant. It has responded to needs identified by the PA, civil society organizations, international organizations and other international actors, including DFATD. The weaknesses in forensic science and forensic medicine services in the West Bank were originally identified in a needs assessment conducted by the Canadian International Development Agency in 2009. An inception mission conducted in early 2012, and ongoing communication through Joint Task Force, Project Steering Committee and bilateral meetings, assessment missions undertaken by international consultants and donor-supported monitoring missions re-confirmed, modified and fine-tuned these to underpin the design of activities. The forensic project is aligned with relevant policies, strategies and plans of the PA and the UNODC. Synergies exist with activities undertaken by other actors in support of the Palestinian Civil Police (PCP), the Public Prosecution Service and the judiciary, although a clear risk exists that efforts are duplicated in the absence of more comprehensive assessments.

Project design has been undertaken in a participatory manner, although more consideration could have been given to the ramifications of such an approach in a multi-stakeholder project. Although the intervention logic seemed obvious at first glance, some limitations in design were responsible for a slow start in 2012. In hindsight, the operational context, the inter-dependence of the different components, and the extended time-frame necessary for such capacity-building projects ought to have been taken more seriously regard in the project's design. The logical framework in the 2015 project revision consolidated the numerous changes made since 2011. However, this mainly reflects the activities of the past years, whereas a turning point will be reached in 2016 when the Forensic Science Laboratory starts to function officially, and in 2017 when six of the eight fellows complete their education and can be integrated into the National Centre for Forensic Medicine. This must be reflected in the logframe, and accompanied with specific, measurable, attainable, reliable and time-bound (SMART) indicators, and a comprehensive monitoring system.

The efficiency has been critically viewed by different stakeholders, especially with respect to progress made in the first couple of years. Internal and external reasons offer an explanation for delays in implementation, with quite a few outside of UNODC’s realm of control. Approx. half of the budget has been spent in the first four years, and the project team witnessed significant staff changes in 2013 and 2014 due to the lateral transfer of the Vienna-based P3 post to Jerusalem, and staff turnover in 2013 and 2014. This has resulted in an entirely different team in Jerusalem headed by the P3 (now P4) in 2015. The addition of a national project manager who acts as counterpart to senior officials has been a major boost to project team capacity. The project team is supervised by UNODC ROMENA, and liaises with relevant sections in UNODC headquarters. The project governance structure comprises a Project Steering Committee (PSC), which meets one to up to two times a year, and a Joint Task Force (JTF) which meets more frequently. The JTF has been less effective in 2015, which can be partially attributed to the current management structure at the MoJ. Internal reporting has been done on time, and donor reporting is now up to standard.

Strengthening the governance, management and capacity of forensic services in the West Bank is a partnership activity, and the project team has made consistent efforts to closely liaise with key stakeholders, in particular the Forensic Science Laboratory/the Palestinian Civil Policy (PCP)/Ministry of Interior (MoI), the National Centre for Forensic Medicine/Ministry of Justice (MoJ) and the Ministry of Health (MoH). The working relationship between UNODC and the Forensic Science Laboratory has been viewed as effective by all parties, whereas the one with the MoJ has lately required more attention, partially due to regular staff changes. Cooperation between these different government bodies has been strengthened by project activities, and the same, albeit to a lesser degree considering the current phase of the project, applies to forensic services and other actors in the criminal justice system, especially with
other sections in the PCP, the Attorney General’s Office and the judiciary. The partnership with civil society and the government, especially with respect to the legal framework and the response to Sexual and Gender-based Violence (SGBV), has further been shaped by activities in these areas. The same applies to the expanded international networks involving Palestinian experts and experts of the region and beyond, which led to strengthened knowledge exchange, the inclusion of good practices in training activities, and providing opportunities for international cooperation in the field of forensic services in the West Bank.

The forensic project has been effective to some degree. The Forensic Science Laboratory has to a large extent been refurbished and equipped. Technical training of the laboratory staff is ongoing. As the Chief of the Document Examination Section has been certified (although not under the project), this section has to some degree been functioning by reviewing evidence for public prosecutors. Six of the initial eight fellows completed their second year of their forensic medicine studies at the University of Jordan, and one his first year. The second doctor who dropped out has now been able to join another relevant course in this field. The training component available to forensic medicine staff in the West Bank has not been fully used. This can be partially explained by the absence of a representative mechanism to channel suggestions to UNODC, the work load of the three forensic doctors, and different views on training needs. Two monographs on forensic medicine, and the forensic nursing training have been completed. Three hospitals have selected rooms for refurbishment for forensic medicine, and these are expected to be equipped in the beginning of 2016. Institutional capacity of the Forensic Science Laboratory and the National Centre for Forensic Medicine has been supported to improve the management and delivery of services, including by means of assistance to complete the first draft of the strategic plans in 2015. Two laws on forensic science and medicine are currently being drafted, and workshops have been held with police, legal and judicial authorities to prepare the stage for the opening of the laboratory.

The sustainability of results poses several challenges, which is partially a logical consequence of the current project phase. The (expected) results in the field of forensic science, forensic medicine and related legislative and policy frameworks and coordination mechanisms must receive serious attention in the final two years of project completion. In order to capitalize on already made investments, the technical training of the forensic science staff in their respective disciplines must be continued and completed. The same applies to the eight fellows. The shift towards a mentoring approach of forensic science staff is foreseen, but must be further explicated. Additionally, management training and training on (and application of) ISO 17025 standards, which are international requirements for the competence of testing and calibration of laboratories, must also proceed and be finalized, and a dialogue with the Palestinian Laboratory Accreditation Committee (PLAC) at the Palestinian Standards Institute sought to support national-level accreditation of the laboratory. Key is to strengthen the draft strategic plans, and support work on their operationalization, including the development of budgets and their inclusion into the overall PA budget each year.

PA employment contracts for the eight fellows have been secured since March 2015 for a period of fifteen years. It is still unclear if they can immediately start work upon completion of their education in Jordan, or if they have to pass another national-level examination first. Additionally, the MoJ has not yet prepared a clear plan for their integration into the National Centre for Forensic Medicine. Also the forensic nursing component requires more investments, including in terms of continued training to nurses and midwives, and establishing clear procedures on the use of the forensic medicine space and available capacity in hospitals. Additionally, especially in light of the phased opening of the Forensic Science Laboratory in 2016, and the completion of studies of six of the eight fellows by 2017, more attention must be given to strengthening cooperation between the different criminal justice actors and the effective use of evidence in criminal proceedings at different levels. Nevertheless, management challenges of the National Centre for Forensic Medicine, with the director being located in Gaza, remain.
Furthermore, a continued risk is that due to the ongoing financial crisis of the PA, forensic structures and services may not be adequately supported in the long term.

Human rights and gender have to some degree been mainstreamed in the project’s objectives and activities. Although reference is made to strengthening criminal justice in the West Bank, a clearer effort can be made to clarify how the forensic project advances human rights. Gender has been mainstreamed in project documents, and the project team has a national gender advisor. A gender strategy was prepared at the beginning of the project, which needs updating at this point in time. Although efforts have been made to reach an equal number of male and female recruits for the laboratory and the fellowship programme, the level of representation of female staff is a reflection of the gender balance in the security sector. This is visible in the governance bodies of the project. SGBV training/awareness raising activities have been conducted, and the forensic nursing component to strengthen the response to victims of SGBV has progressed well in 2015.

Conclusions

Despite the difficult start of the forensic project in 2011 and 2012, all stakeholders have been able to move beyond this phase. The relevance of the different project components remains unquestioned. The design must however cover the entire project period, which involves a shift from solely capacity-building activities to one that addresses the actual functioning of the two bodies, including their cooperation with other criminal justice actors. Progress in implementation has without doubt been noticeable, although with only two more years to complete the forensic project, a concerted effort must be made to sufficiently prepare the ground to guarantee the sustainability of results in the longer term.

Recommendations

Key recommendations are directly related to the sustainability of project results, and include the continuation of technical and management training of different stakeholders, the development of a comprehensive mentoring plan for the Forensic Science Laboratory, the continuation of work on the strategic plans of the two main counterparts, and the development of a strategy on the integration of fellows in the National Centre for Forensic Medicine in 2017 and 2018. The project team is further recommended to support the drafting and enactment of standard operating procedures by the MoH, in close cooperation with the MoJ/pathologists, and to review the objectives of the JTF in light of a stronger focus on streamlining and coordinating activities of forensic scientists and forensic doctors, especially in light of the upcoming opening of the Forensic Science Laboratory. The team is also advised to organize workshops with prosecutors, defence lawyers and judges to review information-sharing modalities, including templates. Moreover, the project team is also recommended to undertake a project revision to provide an updated logframe with expected results until the end of 2017. A comprehensive overview of all recommendations is presented in the summary matrix of findings, evidence and recommendations.

Lessons learned

Key lessons learned of this evaluation are in particular related to project design, including the necessity to review the functions of the project team in relation to project size, number of counterparts and the operational context, an extended participatory planning phase when there is a gap between the original needs assessment and the start of the project, and the need to have the Senior Technical Advisor/project coordinator participate in the inception mission. Other lessons concern the use of local staff in a senior position to improve the coordination and management of the project, more clarity on the profiles of forensic experts considering the different sets of specialization in forensic science and forensic medicine.
This must also be reflected in the composition of the team. Last but not least, sufficient attention must be given to expectation management of counterparts, including in light of lengthy UN procurement procedures.
## SUMMARY MATRIX OF FINDINGS, EVIDENCE AND RECOMMENDATIONS

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<th>Findings²</th>
<th>Evidence (sources that substantiate findings)</th>
<th>Recommendations³</th>
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<td><strong>Key recommendations</strong></td>
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<tr>
<td>In order to capitalize on already made investments, the technical training of the forensic science staff must continue and be completed. The same applies to the fellows. Additionally, management training and training on ISO standards must also proceed and be completed.</td>
<td>Project revision 2014 Implementation Plan Progress reports Interviews</td>
<td>Continue with, and support the completion of technical training of the forensic science staff and the fellows in forensic medicine. Additionally, management training and training on ISO standards must also be completed (project team, in close collaboration with stakeholders)</td>
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<td>In 2016, more emphasis will need to be placed on mentoring forensic science staff after completion of their technical training. There is no mentoring plan yet which delineates intervals of mentoring, mentoring activities per technical area, mentors and tests.</td>
<td>Project revision 2014 Implementation plan Progress reports Interviews</td>
<td>Develop a clear mentoring plan for the different sections of the Forensic Science Laboratory, indicating type of mentoring, frequency, mentors and review methods (project team in close collaboration with stakeholders)</td>
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<td>Management training has been given to staff of the Forensic Science Laboratory, and staff of the MoJ and the National Centre for Forensic Medicine. Two draft strategic plans were prepared. There is scope to strengthen these strategies, and translate these in operational plans.</td>
<td>Draft strategic plans Interviews</td>
<td>Continue work on the strategic plans of the Forensic Science Laboratory and the National Centre for Forensic Medicine, and facilitate the further operationalization of translation of strategy into plans with clearly delineated results and benchmarks (project team)</td>
</tr>
<tr>
<td>Before international accreditation will be pursued, accreditation of the laboratory in accordance with ISO/IEC 17025 standards will be sought from the national</td>
<td>Progress reports Expert progress reports Interviews</td>
<td>Engage in a dialogue with PLAC at the Palestinian Standards Institute to prepare for initial accreditation of the laboratory in accordance with ISO/IEC 17025</td>
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²A finding uses evidence from data collection to allow for a factual statement.
³Recommendations are proposals aimed at enhancing the effectiveness, quality, or efficiency of a project/programme; at redesigning the objectives; and/or at the reallocation of resources. For accuracy and credibility, recommendations should be the logical implications of the findings and conclusions.
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<th>Task Description</th>
<th>Methodologies</th>
<th>Comments</th>
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<tr>
<td>Accreditation body, the Palestinian Laboratory Accreditation Committee (PLAC) at the Palestinian Standards Institute. Communication about this issue has not yet began, which is necessary to get further information about the specific requirements for accreditation.</td>
<td>Project revision, Progress reports, Interviews</td>
<td>Support the development of a sound strategy on the integration of fellows in the National Centre for Forensic Medicine in 2017 and 2018. This can be part of the ongoing work on the strategic plans (project team).</td>
</tr>
<tr>
<td>Information is not available on the integration of fellows into the current structure of the National Centre for Forensic Medicine in 2017 and 2018 in terms of lines of command, main responsibilities, working space/location, and access to hospitals and morgues.</td>
<td>Project revision, Progress reports, Interviews</td>
<td>Review the equipment/furniture needs of the National Centre for Forensic Medicine other than Ramallah within the overall framework of a strategic vision of the National Centre for Forensic Medicine, including the integration of fellows (project team).</td>
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<tr>
<td>The National Centre for Forensic Medicine in Ramallah has one room used for examinations by one of the resident doctors. The extent to which the project can and must support the provision of equipment to other MoJ offices for forensic medicine services in the West Bank is still unclear.</td>
<td>Project document, Project revision, Interviews, Observation</td>
<td>A review of SOPS is recommended in the context of developing the legal framework in the field of forensic medicine (project team).</td>
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<tr>
<td>Five SOPs in the field of forensic medicine have been prepared under the project. These SOPs have not integrated references to Palestinian rules, regulations and standards.</td>
<td>Five SOPs, Project revision</td>
<td>Review the current status and division of responsibilities to continue the work of the procedures manual for forensic medicine (project team).</td>
</tr>
<tr>
<td>The procedures manual for forensic medicine has not yet been completed yet, partially because the division of responsibilities was not clear.</td>
<td>Project document, Progress reports, Interviews</td>
<td>Review the current status and division of responsibilities to continue the work of the procedures manual for forensic medicine (project team).</td>
</tr>
<tr>
<td>The two monographs have been finalized, but not yet been translated into Arabic or endorsed by the MoJ.</td>
<td>Project document, Progress reports, Interviews Two monographs</td>
<td>Follow-up on the two monographs, including their translation and endorsement by the MoJ (project team).</td>
</tr>
<tr>
<td>The forensic nursing training component has been completed in August, 2015. More training seems needed in different areas, including practical exercises and role plays.</td>
<td>Training report, Interviews</td>
<td>Continue training and support to nurses and midwives on forensic medicine (project team).</td>
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<tr>
<td>The forensic nursing training has been completed, and rooms/space in three hospitals are refurbished and equipped. SOPs are however</td>
<td>Interviews</td>
<td>Support getting clear procedures from the MoH, in close cooperation with the MoJ/pathologists, on the use of</td>
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<td>Obstacles in the basement in Ramallah hospital still hinder access to the forensic medicine space. Also the possible dual usage of the waiting room (for the security guard, and the victim and her guardians/family) may lead to protection concerns for the victim.</td>
<td>Interviews</td>
<td>Get more clarity on the application of standards, such as unhindered access to the forensic medicine space in the Hospital in Ramallah, security and the protection of victims of SGBV (project team).</td>
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<td>The JTF has regularly met since 2012. The task force has recently become less effective because of changes in representation of the MoJ/National Centre of Forensic Medicine. Additionally, the focus on information-sharing is not fully aligned with the expected functioning of the Forensic Science Laboratory and the increase in capacity of the National Centre for Forensic Medicine.</td>
<td>Project revision</td>
<td>Review the objectives of the JTF, and consider a stronger focus on operational issues, and streamlining and coordinating activities of forensic scientists and forensic doctors, especially in light of the opening of the Forensic Science Laboratory in 2016. Consider the development of a ToR to clarify objective, roles and responsibilities of the members of the JTF, and review the current profiles of JTF members (project team, in collaboration with relevant stakeholders).</td>
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<td>Although some activities have already been implemented to strengthen cooperation between forensic science and forensic medicine experts and other criminal justice actors, more can be done in this area. As templates have been developed by one party, a review of existing templates by all relevant stakeholders may be necessary to agree on evidence-sharing modalities.</td>
<td>Project revision</td>
<td>Organize, in addition to training sessions, also multi-stakeholder workshops for forensic science and forensic medicine practitioners and public prosecutors, defence lawyers and judges to discuss coordination issues, including by agreeing on evidence-sharing modalities (project team).</td>
</tr>
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<td>A common data-management system to support different criminal justice actors (police, public prosecution and judiciary) has already been in use for several years. However, data management issues in forensic services seem to have taken a back-seat because of the ongoing emphasis on capacity-building in the project.</td>
<td>Interviews</td>
<td>Review existing data-management, including archiving, systems of the Forensic Science Laboratory and the National Centre for Forensic Medicine to strengthen these systems and/or link these to the criminal justice system-wide data-management system (Mizan) (project team).</td>
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<tr>
<td>The donor coordination group on forensics has been seen as a useful information-sharing mechanism.</td>
<td>Project revision</td>
<td>Examine the potential for an expanded role of the donor coordination group (project team,</td>
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The expansion of cooperation with other criminal justice actors may also require establishing stronger links with some international actors supporting programmes in the field of RoL, especially with respect to evidence storage, transfer and examination, and the prioritization of the submission of different types of evidence to the Forensic Science Laboratory in collaboration with donor coordination group and other international actors working in the field of criminal justice reform.

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<th>group</th>
<th>in collaboration with donor coordination group and other international actors working in the field of criminal justice reform.</th>
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<td>Especially when one or more counterparts have different views on the direction of the project, more senior involvement of UNODC’s regional office in Cairo and/or headquarters in Vienna is desired to manage relations. This has been done with respect to written communication, but can also be supported by face-to-face meetings. Courtesy visits by ROMENA staff to the donor have also not taken place.</td>
<td>Interviews</td>
<td>Continue providing senior support to the project team in East-Jerusalem, and consider regular visits of senior management to support cooperation with all actors in Ramallah (UNODC ROMENA/UNODC Headquarters).</td>
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<td>The forensic project will come to an end in 2017. It is already clear at this stage that more capacity-building is needed in different areas to work towards a mature forensic service.</td>
<td>Project documentation Interviews</td>
<td>Develop a forensic project phase II proposal for fund-raising purposes to ensure continuity in support (project team)</td>
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<tr>
<td>Risk of duplication of efforts exists, as different agencies have also provided management, gender and SGBV training to actors targeted under this project. Additionally, the initiative of one agency to get a forensic science expert work fulltime with staff of the Forensic Science Laboratory could support and/or undermine UNODC’s ongoing work to build capacity of laboratory staff.</td>
<td>Web pages different agencies operating in the West Bank Interviews</td>
<td>Examine more closely activities undertaken by other agencies to avoid duplication, and explicate if and to what extent the activities of the project capitalize and build on achievements of other agencies (project team); -Continue, and possibly strengthen, communication lines with EUPOL COPPS related to the possible arrival and work of their forensic science expert (project team).</td>
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### Important recommendations

The logframe in the project revision of 2015 gives results related to the first four years of capacity-building, instead of delineating the utilization of newly acquired skills and the improved governance of the two forensic bodies. Outcome level

| The logframe in the project revision of 2015 gives results related to the first four years of capacity-building, instead of delineating the utilization of newly acquired skills and the improved governance of the two forensic bodies. Outcome level | Project document Implementation plans Extension project proposal Project revision | Strengthen the existing logframe to support the measurement of results for the entire project period (project team) |
| Indicators are missing, indicators are not at all times SMART and sources must be reviewed. | Project monitoring is undertaken by the project team and other stakeholders, and responds to some degree to different information needs. Nevertheless, a clear link between sources and monitoring, and a comprehensive data management system is missing. Additionally, decision-making based on recommendations given by experts is not always clearly reflected in reporting. | Project document implementation plans | Project revision reports | International experts | -Strengthen the monitoring system by developing/implementing a corresponding data management system. | -Clearly reflect decision-making based on recommendations given by experts in documentation, such as reporting (project team); |
|---|---|---|---|---|---|---|---|
| The forensic project is complex because of the team’s cooperation with three ministries in the West Bank. The evaluation team would therefore have benefited from more capacity, and technical expertise in the field of forensic science and medicine. | The forensic project is complex because of the team’s cooperation with three ministries in the West Bank. The evaluation team would therefore have benefited from more capacity, and technical expertise in the field of forensic science and medicine. | Project document | Project revisions | Donor monitoring reports | Interviews | Ensure that the evaluation team of the final project evaluation has evaluation, as well as specialized forensic science and forensic medicine expertise. | -Review the budget for the final project evaluation to ensure that sufficient funds are available (project team); |
| Generally, more thought can be given to the overlap and differences of donor monitoring missions (a donor requirement) and evaluations (a UNODC, and also often donor, requirement), considering the fact that these different activities are not only beneficial, but may also duplicate efforts to some degree and/or create a conflict between objectives if undertaken jointly. | Generally, more thought can be given to the overlap and differences of donor monitoring missions (a donor requirement) and evaluations (a UNODC, and also often donor, requirement), considering the fact that these different activities are not only beneficial, but may also duplicate efforts to some degree and/or create a conflict between objectives if undertaken jointly. | Project document | Project revisions | Donor monitoring reports | Interviews | -ToR donor monitor/expert -UNEG and UNODC evaluation guidance notes (website) | Prepare a discussion paper on the relationship between different types of monitoring and mid-term and final project evaluations for the field (IEU); |
| Human rights have not been clearly mainstreamed in the project document, the project revision and other relevant documents. A stronger integration of a | Human rights have not been clearly mainstreamed in the project document, the project revision and other relevant documents. A stronger integration of a | Project revision | Progress reports | Interviews | Mainstream human rights more comprehensively in the project, including the expected outcomes, objective, and corresponding indicators to strengthen focus and support performance management (project team); |
| The gender strategy developed in the beginning of the project is rather general. Additionally, the strategy is also outdated in light of developments that took place since 2013. | The gender strategy developed in the beginning of the project is rather general. Additionally, the strategy is also outdated in light of developments that took place since 2013. | Project revision | Progress reports | Interviews | Update and strengthen the gender strategy of the forensic project, and utilize this for results-based monitoring (project team); |
| Lack of information about the status of payments issued by UNDP led to additional work for UNODC. Problems in this area also reflected negatively on the relationship between UNODC and contracted | Lack of information about the status of payments issued by UNDP led to additional work for UNODC. Problems in this area also reflected negatively on the relationship between UNODC and contracted | Interviews | | | Monitor UNDP activities in the field of procurement and finances to build up a file on performance, which could possibly be used for further discussions if deemed |
parties. Additionally, procurement activities and payments have not always been undertaken within their maximum designated period.
I. INTRODUCTION

Background and context

An integral component of an efficient and effective criminal justice system is the provision of quality forensic services to provide evidence in court proceedings. A needs assessment conducted from 26 April to 09 May 2009 by the Forensic Services Assistance Programme of the Canadian International Development Agency (CIDA) provided the following analysis of these services by the Palestinian Authority (PA) 4:

- Inadequate facilities and related infrastructure. Numerous Palestinian Civil Police (PCP) buildings had been destroyed during the second intifada, and in 2009, there was no laboratory or other provider capable of performing routine forensic examinations;

- Lack of a central facility, coordination and a strategic vision of forensic medicine. Forensic medical services were however available in terms of staff and equipment. Most clinical forensic medicine examinations were performed in hospitals. The Institutes of Forensic Medicine at the An-Najah and Al-Quds Universities provided the facilities and staff for autopsy services, and also performed clinical forensic examinations at that time.

- Insufficient number of adequately trained forensic experts and crime scene personnel. There were only a few PCP staff with work experience in the former West Bank Criminal Laboratory.

- Critical shortage of forensic physicians in Palestine. Only some of the forensic physicians were appropriately trained and certified as specialists.

- Lack of capacity to handle forensic aspects related to sexual, physical and psychological abuse and violence against women and children.

- Lack of strategic planning and governance frameworks. This included standard operating procedures for quality control, assurance requirement and the application of service standards to all forensic services.

- Limited awareness of other criminal justice actors (police, prosecutors, defence and the judiciary) of the evidence submission process, and the use of forensic reports during investigations and court proceedings.

- No formalized cooperation with academic institutions and/or other third parties, such as public health laboratories. The different bodies often operated in isolation, and were not coordinated by a central authority.

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4 UNODC, 2011b: 4-7
In order to address these needs of forensic services in the State of Palestine, UNODC designed the project 'Forensic Human Resource and Governance Development Assistance to the Palestinian Authority (PA)' (hereinafter referred to as the 'forensic project') with funding provided by Foreign Affairs, Trade and Development Department of the Government of Canada (DFATD). The objective of the forensic project is to contribute to 'Improved criminal justice system for men, women and children of the West Bank'. The five expected outcomes of the project are as follows:

- Increased technical skills of forensic science professionals, including women, in providing forensic services in areas such as drug analysis, firearms and tool mark identification and document examination;
- Improved ability of forensic medical professionals, including women, to conduct death investigations and provide gender-sensitive services to victims of abuse, particularly women and children;
- Improved institutional capacity to manage and deliver integrated forensic medicine and forensic science services based on international best practices;
- Enhanced understanding among police, legal and judicial authorities, decision makers and civil society of the role and importance of forensic services, including for sexual and gender-based violence (SGBV) and family violence cases;
- Increased harmonization concerning legal frameworks, approaches, policies, and coordination, including SGBV and family violence cases: Between police, legal and justice sector stakeholders including civil society organizations, among donors and multilateral organization.

The official starting date of the forensic project was the first of March, 2011 (as mentioned in the project document). The project document was authorized on 3 October 2011 following the receipt of signatures of the Minister of Justice and Minister of Interior of the PA. The project was formally launched on 8 December, 2011, under auspices of the Ministers of Interior, Justice and Planning and Administration. DFATD funded the project with a budget of USD 9,510,900 (CAD 10.9 million). The project was initially designed for a four year period until the end of February, 2015. The donor approved the extension of the project in October 2014 with another three years until the end of 2017 to ensure that planned results in the field of forensic science and forensic medicine services will actually be achieved in the West Bank.

At the time of the field mission undertaken for this evaluation (27 Sep-2 Oct 2015), the National Centre for Forensic Medicine was housed on the ground floor of the MoJ in Ramallah, and had eight staff members in the West-Bank (and eight fellows studying in Jordan). The director of the centre was located in Gaza. The centre had one administrator, one judicial expert and six forensic doctors. Three doctors

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5 DFATD is now called Global Affairs Canada.
6 UNODC, 2015: 22-32. In the original project document also two intermediate outcomes were given, as the logframe followed the template provided by the donor. The two intermediate outcomes are 1. Enhanced provision of reliable and credible forensic evidence to the criminal justice system in the West Bank, and 2. Increased application of internationally acceptable practices by the Palestinian Authority in the management of forensic services in the West Bank.
7 UNODC, 2012a: 3
8 The project revision provided a starting date of June, 2011, which is different from the one given in the project document (which was namely 1 March, 2011).
9 Email Director EDP/DFATD to Chief PSFR/UNODC, 27 October, 2014
were certified forensic doctors, with one doctor attached to the Forensic Medicine Centre in An-Najah University, and one doctor to the Forensic Medicine Centre of Al-Quds University. The third forensic doctor worked in Bethlehem, covering the Southern governorate of the West Bank. The other three were resident doctors, not certified to work as forensic doctors, and close to retirement (expected to retire in 2016 or 2017). The MoJ did not have its own morgue, but continued to use the ones at the earlier-mentioned universities. In the National Centre for Forensic Medicine in Ramallah, the resident doctor had only a desk and chairs. No other professional equipment was available. Additionally, the MoJ has forensic medicine offices in four of the eight MoJ offices in the West Bank (Nablus, Hebron, Bethlehem and Jenin). These offices are predominantly empty, and sometimes even without staff.

The Forensic Science Laboratory was housed in one of the PCP buildings of the MoI, and had a total of 24 staff, including the director. Twelve staff were already working with the PCP prior to the project, and twelve were newly recruited to work in the laboratory in 2012. The director and section heads were all PCP career staff. The laboratory had five sections, namely a Document Examination Section, a Firearms and Tool Mark Section, a Drug Analysis Section, an Evidence Section, and an Administrative Unit. The laboratory was part of the Criminal Investigation Division of the PCP.

Evaluation scope

The scope of this independent mid-term evaluation comprises the first four years and nine months of the project ‘Forensic Human Resource and Governance Development Assistance to the Palestinian Authority (PA)’, namely 2011-2015 (until 30 September, 2015). The objective of this evaluation is to take stock of the main achievements of the forensic project thus far, to provide recommendations to remedy possible gaps in implementation, and to examine the strategy of project completion. The criteria used in this evaluation are relevance, design, efficiency, partnerships and cooperation, effectiveness, impact, sustainability, human rights and gender. This evaluation is for learning and accountability purposes, and lessons learned have been given at the end of this report. The original evaluation time-frame from April to June was extended until December, 2015. A six-day field mission took place to Ramallah, Bethlehem and East Jerusalem from 27 September until 2 October, 2015. As a donor-supported monitoring/forensic expert mission was undertaken parallel to the evaluation mission, the more technical aspects of the project, including the application of ISO 17025 and environmental standards, were reviewed by the expert. The main evaluation users are the following stakeholders: UNODC staff and management, the donor, the Forensic Science Laboratory of the PCP/MoI, the National Centre of Forensic Medicine/MoJ and the MoH of the PA in the West Bank.

Evaluation Methodology

During this mid-term evaluation of the forensic project, the following methods were used for data collection: desk review, semi-structured interviews, and observation. Findings were triangulated, and also quantitative analysis of statistical information was undertaken during analysis. All evaluation criteria were addressed during all the different phases.

A desk review was undertaken in April, 2015, and again prior to the field mission in September, 2015. A list of reviewed documents has been given in annex II.

Furthermore, semi-structured interviews have been conducted via telephone/skype with UNODC ROMENA and headquarters staff and donor representatives based in Ottawa in April and May 2015. Additionally, skype interviews were conducted with the former and current technical advisor/project coordinator. The latter person was also not in the mission area at the time of the evaluation mission in September, 2015.

During the field mission, a second period of semi-structured interviews with relevant stakeholders took place. Respondents belonged to the UNODC management team, the Forensic Science Laboratory of the PCP/MoI, the National Centre for Forensic Medicine/Moj (including two fellows in Amman), the MoJ, staff of Ramallah hospital/MoH, the judiciary, the donor, EUPOL COPPS, UNDP, UNRWA, Ritaj and Juzoor. The evaluation criteria provided the overall framework for the main evaluation questions, which were further tailored to the function, level and type of involvement of respondents. A total of 50 respondents (29 male and 21 female respondents) were interviewed for this evaluation, of which 39 were face-to-face and eleven skype/telephone interviews.

An external interpreter was used for the interviews with the MoJ and some other stakeholders. As the interpreter’s firm had also been contracted to provide the management training to this government body, a request was made to hire another interpreter to ensure his/her independence vis-à-vis the project.

Site visits were undertaken to the Forensic Science Laboratory in Ramallah to observe the laboratory structure, equipment, storage space, materials and current operations, as well as the National Centre for Forensic Medicine in Ramallah and one of its local offices in Bethlehem. Observation was also used during a visit to the forensic medicine room in the Hospital of Ramallah, and a private hospital in Bethlehem.

Quantitative and qualitative methods, including statistical analysis and triangulation of sources, have been used for data analysis.

There were several limitations regarding this evaluation. The size and thematic areas covered by the forensic project would have warranted a larger evaluation team with forensic science and forensic medicine expertise (also to adequately cover environmental mainstreaming in the project). Instead, a donor monitoring mission was undertaken at the same time by a monitor/forensic expert to give attention to the more technical aspects of the forensic project. Although project documentation and background information compensated for the fact that only some project sites could be visited (e.g. the universities, the MoH and the hospitals in Nablus and Hebron were not included in the mission schedule), a more extensive mission would have benefited this evaluation. Additionally, this also limited the number of respondents, as it would have been useful to also interview representatives of other police departments, public prosecutors, and other donors. Some skype interviews were undertaken with respondents not available in the mission area and/or not located in Ramallah, Bethlehem or East Jerusalem, thereby broadening the scope of profile of interviewees.
Map 1: Palestine\textsuperscript{11}

Palestinian civilians in the occupied Palestinian territory continue to face humanitarian needs that are rooted in protection concerns related to international humanitarian and human rights law in the context of the ongoing occupation, recurrent violations of human rights and international humanitarian law, and the risk of forced displacement under the Apartheid-like situation in the West Bank, including East Jerusalem, and the Gaza Strip. In recent years, an estimated 45,000 to 60,000 Palestinian refugees have fled to Jordan and Syria, mainly due to the ascending conflict in Syria. In the Gaza Strip, the ongoing land, sea, and air blockade has continued to affect all aspects of civilian life, undermining livelihoods, exacerbating poverty and unemployment, and impeding the development of infrastructure and services for education and health facilities. While Israel has legitimate security concerns, the closures and restrictions it imposes on movement and access to Israeli citizens, to, from, and within the Gaza Strip run counter to international law and amount to collective punishment. There are also concerns regarding the adherence of Palestinian armed groups to international humanitarian law, with respect to the protection of civilians in Gaza and southern Israel.

In the West Bank, continued settler expansion and a multilayered system of restrictions on movement and access to land and resources, planning and construction have resulted in increased fragmentation and undermined livelihoods and access to services. In Area C and East Jerusalem thousands of Palestinians remain at risk of displacement, particularly as a result of forced evictions and demolitions. Restrictions on the movement of Palestinians to East Jerusalem from the rest of the West Bank and Gaza Strip continue to undermine access to education and specialized health services.

Overall, the lack of accountability for violations of human rights and humanitarian law, along with a failure to effectively enforce the rule of law, has created a climate of impunity that contributes to further violence.

\textsuperscript{11} UNOCHA, 2012: 1
II. EVALUATION FINDINGS

Relevance

The forensic project has been highly relevant. The activities have been in response to the needs identified by the PA, civil society organizations, international organizations and other international actors, including DFATD\(^{12}\). As the previous forensic laboratory was demolished during the second intifada in 2001/2002, the need for a new laboratory, equipped and with trained staff was unquestioned. Although forensic medicine staff had been able to continue with their work, with the use of among others the mortuaries of Al Quds University in East Jerusalem and An-Najaf University in Nablus, a profound weakness of the forensic medicine service in the West-Bank was its actual capacity in terms of the number of staff, the lack of coordination, and the overall weak response to victims of Sexual and Gender-Based Violence (SGBV). Thus, a concerted effort was needed to set up a Forensic Science Laboratory in the West Bank, address governance issues, strengthen capacity of forensic science and forensic medicine staff, and support the setting up of specialized clinical space/capacity to support victims of SGBV.

A needs assessment mission was already undertaken by the Canadian International Development Agency (CIDA)\(^{13}\) in late 2009. The further identification of needs was done on the basis of a joint CIDA/UNODC inception mission in January, 2012, and subsequently on an ongoing basis through close cooperation with relevant actors of the PA (bilaterally, and through the Joint Task Force (JTF), and Project Steering Committee (PSC), and with the support of international experts providing independent assessments of particular technical areas (see also the section on design). Additionally, donor-supported monitoring missions undertaken by an independent monitor/expert also provided recommendations in different areas in addition to an update on progress made. The use of external experts has generally been viewed positively by different respondents. One of the challenges has been to navigate the project through the different views on needs, and ensure that the direction set out in the beginning is kept. Sometimes decisions were made by UNODC in close cooperation with other stakeholders to exclude certain proposed activities from funding if these were either considered to be outside the project scope, or not supportive of ownership/cost-efficiency and/or sustainability.

The forensic project has been aligned with relevant policies and plans of the PA and the UNODC. The project’s aims are reflected in the National Development Plan of 2011-2013 (National Sector: Justice ‘Develop Forensic Sciences Capacity’)\(^{14}\) and the National Development Plan 2014-2016 (‘Continue building the forensic system [...]’)\(^{15}\). The project’s objectives are also integrated in the UNODC-supported National Programme for the State of Palestine on Drug Control, Crime Prevention and Criminal Justice Reform, 2014-2017, and other national policy documents in the field of justice, human rights and gender.\(^{16}\) Additionally, the forensic project’s aims correspond with thematic areas identified in UNODC

\(^{12}\) In 2015 the name of the department was changed into Global Affairs Canada (GAC)
\(^{13}\) See footnote 9.
\(^{14}\) PNA, 2011: 94
\(^{15}\) PNA, 2013b: 57
\(^{16}\) E.g. National Strategy to Combat Violence Against Women 2011-2019/Ministry of Women’s Affairs (Strategic objective 4 improve health services in dealing with cases of VAW; Policy one improve facilities and
global and regional strategies and policies. Thus, the project relates to sub-programmes four and six of the UNODC Strategic Frameworks for 2012-2013 and 2014-2015.\textsuperscript{17} The project relates also to Sub-Programme 2 of the UNODC Regional Programme on Drug Control, Crime Prevention and Criminal Justice Reform in the Arab States (2011-2015).\textsuperscript{18}

The forensic project was initially the only UNODC project in this thematic field in the region, although UNODC assisted the PA in establishing a laboratory for illicit drug analysis at the police headquarters in Gaza before the second Intifada in September 2000 (at that time the UN International Drug Control Programme, UNDCP) and has implemented capacity-building projects in forensics (in particular forensic science) in other regions.\textsuperscript{19} Another UNODC project called 'Improving Crime Scene Investigation in Tunisia', which has recently begun implementation, has been aligned with the forensic project in the West Bank. Synergies between the forensic project and work undertaken by other agencies in support of strengthening criminal justice in the West Bank exist since 2012, especially with respect to activities directed at the Public Prosecution Service by the Centre for International Legal Cooperation (until 2013) and the US Bureau of International Narcotics and Law Enforcement Affairs (INL), and support provided to different sections of the police by EUPOL COPPS (see also the section on coordination).

Considering the complex political situation in the West Bank, and the relatively high number of donors and implementing partners in comparison to land and population figures, there is a risk of duplication of efforts as several of these actors are working with the same stakeholders and/or on similar themes. Thus, it is recommended to carefully consider earlier activities directed at counterparts to clearly identify needs, UNODC’s niche, and expected results in relation to the project’s objectives. This applies, for instance, to the management training as well as the numerous training activities undertaken in the field of gender and SGBV for different criminal justice actors and medical professionals.\textsuperscript{20} Additionally, the effort of

\begin{itemize}
  \item administrative systems in health Centres to allow reception of women victims of violence; Policy two develop the quality of the health services available to women victims of violence that approach health Centres).
  \item The objective of sub-programme four is to strengthen the rule of law through the prevention of crime and the promotion of effective, fair, humane and accountable criminal justice systems, in line with the United Nations standards and norms in crime prevention and criminal justice and other relevant international instruments. The objective of sub-programme 6 is to ensure an effective international community response to drugs, crime and terrorism based on a sound understanding and knowledge of thematic trends. A related objective of sub-programme 6 is to improve capacity of States to meet internationally accepted scientific and forensic standards, including increased use of scientific information and laboratory data for inter-agency cooperation activities and in strategic operations, policy and decision-making.
  \item The regional programme included PSEX02 initially into Sub-Programme II – Promoting Justice and Building Integrity, Outcome 2.4 (UNODC, 2012a: 2) but the project was then shifted to Sub-Programme 1 for operational reasons. One of the objectives of Sub-Programme 1 is to assist States in the Arab region in the use of enhanced forensic and scientific services in support of the legal process. Adding the project to Sub-programme 2 would seem to be more justifiable considering the main focus of this sub-programme (justice), and the focus on transnational crime of sub-programme I.
  \item E.g. Enhancement of Forensic Science Services in West Africa (XAWK36), Sub-programme 1 of the Regional Programme on Afghanistan and Neighbouring Countries - Regional Law Enforcement Cooperation (RERV07), Criminal Justice Programme in the Kyrgyz Republic (KGZT90), Strengthening the State Service on Drug Control of the Kyrgyz Republic – Phase I (KGZK50) and Sub-Programme 2: Law Enforcement (Country Programme for Afghanistan 2012-2015) (AFGK61).
  \item Examples in this field are the WCLAC Violence against Women Curriculum For Healthcare Students, 2011, which is designed for use in teaching healthcare faculty students including medical, nursing, midwifery and community health program students (http://www.wclac.org/userfiles/Violence%20against%20Women%20Curriculum.pdf), the training programme of WCLAC to build capacities of service providers in health, social services and police departments (WCLAC, 2014: 9), the EUPOL COPPS workshop on protection of victims of domestic violence(http://eupolcoppes.eu/en/node/4786, consulted 28/09/2015), their support to the Police Family Protection Unit (http://eupolcoppes.eu/en/node/1103, consulted 28/09/2015); and UNDPs work to strengthen the core planning, management, evaluation and administration capacities across the MoJ under the project ‘Supporting Rule of Law and Access to Justice for the Palestinian People’ implemented
\end{itemize}
EUPOL COPPS to identify a forensic science expert to support the Forensic Science Laboratory on a fulltime basis could potentially support UNODC’s work in capacity-building. However, clear communication and decision-making channels must be set up so as not to undermine earlier accomplishments, and to work in tandem to mentor staff of the laboratory in 2016 and 2017.

Design

The project design has been developed through a participatory approach with the project document’s initial intervention logic and logical framework providing overall direction. Although the intervention logic seemed clear at first glance, some limitations in design in combination with requirements beyond UNODC’s influence were responsible for a slow start of the project in 2012. In hindsight, more attention ought to have been given to the operational context, the extended time-frame necessary for profound capacity-building projects, the participatory nature of decision-making, which requires extensive investments in terms of capacity and time, and the inter-linkages between the different components resulting in activities being put on hold in order to wait for progress made in another area (see also section on efficiency). Additionally, more attention could have been given to a clearer hierarchy of objectives with realistic indicators with baseline data and targets.

The project design is developed to address the earlier identified needs in the field of forensic services in the West Bank. These were assessed in the initial design stage, and have since then been regularly reviewed and adjusted by key counterparts, the Project Task Force (PTF) and Project Steering Committee (PSC), and regular bilateral meetings between representatives of the project team and key stakeholders (see also the section on partnerships and cooperation, and sustainability).

In the early project stage, although an inception mission undertaken from 16 to 27 January, 2012 provided the opportunity to review and discuss existing needs by all stakeholders, the necessary fine-tuning, and the amount of inputs this required from UNODC, were not sufficiently considered in the project implementation schedule. The operational context of a highly politicized, resource-scarce environment with different views on substance and ownership (see for instance the National Justice Strategies in this regard) were thereby ignored, and more groundwork could therefore have been done to realize the need for this fine-tuning, and dedicate sufficient capacity to actually implement such a participatory approach. A lesson learned is to include an inception phase of three to six months in the project design, with several technical experts taking part in it, to develop a road map for the project, which entails, in fact, several sub-projects in one project framework. Additionally, the project coordinator, a forensic expert, had not been recruited yet at the time of the inception mission, and major decisions were made before he was actually on board. A second, related, lesson learned is to make sure that the project coordinator is able to take part in the initial decision-making processes that shape the project’s design.

The project design has been elaborated on in different documents. The outcomes, outputs and activities in the project document (2011), which was developed by staff in UNODC headquarters, were substantially altered in the first and subsequent project implementation plans written up in 2012 and 2013 on the basis of requests by the donor. These were perceived to be demanding, especially as UNODC’s

programme management approach at that time was not as advanced (see also the section on efficiency), albeit clearly necessary considering the level of detailed planning that had to be undertaken in the early stages of the project.

The project implementation plan, approved in April 2014 by UNODC, the PA and DFATD, has been the basis for the UNODC project revision of 31 March 2015. The log frame presented in this project revision was for the first time aligned with UNODC’s logframe format. The original project document had only an overview of objective, intermediate and immediate outcomes, outputs and activities, but indicators, baseline data and targets were missing. The logical framework in the 2015 project revision has consolidated the numerous changes made since 2011 to the logframe, and a project objective, outcomes and outputs as well as indicators, baseline data and targets and sources have been given in this document.

The hierarchy of objectives gives clear direction (objective, outcomes and outputs) at this stage of the project, with a focus on the expected improved technical skills of the forensic scientists and forensic doctors/pathologists as well as enhanced understanding and strengthened governance of the two forensic bodies and cooperation with other criminal justice actors. This seems to reflect some of the emphasis of the past years of implementation. Yet, as a turning point will be reached in 2016 when the Forensic Science Laboratory starts to function officially, the hierarchy of objectives must be adjusted to reflect this shift in emphasis towards the application of skills, and the process of strengthening coordination at a more operational level (e.g. integration with existing data-management systems or not; agreeing on SOPs to manage day-to-day communication and actions on material/evidence and related reporting etc.). This could then also encapsulate the return of six of the eight fellows in 2017 to measure their integration into the National Centre for Forensic Medicine.

Additionally, changes made in design can be more fully reflected to make this tool up-to-date (see UNODC, 2015 for an overview of these changes). Indicators are only to some degree specific, measurable, attainable, relevant and time-bound (SMART), and outcome level indicators could also be used to measure the functioning of these institutions (e.g. usage of statistical information of these bodies) on the basis of agreed-on information-sharing modalities. A review of sources to measure indicators is also necessary to align these with existing (or still to be developed) monitoring tools. A logframe must be seen as a ‘living’ tool to support results-based management, and facilitate transparency and accountability. It is therefore recommended to strengthen the existing logframe to turn it into a comprehensive tool to support the measurement of results of the entire project period.

The design was also shaped by the collection and application of international best practice and tools in the field of forensics. International expert meetings were for instance organized to review technical training curricula before their usage in training activities. With respect to the setting up of the forensic medicine laboratory, different views were expressed regarding the use of such practices. Only ISO 17025 standards, which are international requirements for the competence of testing and calibration of laboratories, are available to guide practice for setting up laboratories, and this may have contributed to some lack of clarity and the consequent efficiency of constructing the laboratory at times.

Monitoring is done on the basis of annual implementation plans, which give an overview of planned activities in relation to expected outputs. Additionally, more detailed overviews of courses for each technical area in forensic science (firearms and tool mark identification, document examination and drug analysis) and forensic medicine (forensic nursing) have been prepared. A more extensive monitoring plan is however missing with indicators/expected targets and type of sources per year to create a stronger link between the logframe and the implementation plan. The project further uses international experts to measure progress (e.g. with respect to skills), to examine opportunities and limitations in relation to
particular technical areas, and to provide training courses. Many of the expert reports contain recommendations, and point out risks, and it would be useful to find a way to reflect these observations and consequent decisions on the basis of these recommendations in project documentation. Additionally, monitoring progress in skills would need competency-based testing in addition to the perception of the trainer(s) about progress made, which should follow a structured, transparent approach in order to be able to get the required data.

The monitor/expert recruited by and reporting to the donor offers another monitoring mechanism to assess performance and report on possible bottlenecks in implementation. The reports are shared with UNODC and other partners, and these assessments are appreciated by the donor and to a large extent also by other stakeholders.

Efficiency

The project’s efficiency has been critically reviewed by different actors, especially with respect to progress made in the first couple of years. This section gives an analysis of the cost-efficiency, governance arrangements and staffing. Additionally, an overview of the different internal and external causes underlying the project’s speed of implementation will be given to make a balanced assessment of the difficulties and challenges faced by the project team over time.

Cost-efficiency

The project’s total budget was USD 10,957,767, but with the devaluation of the USD c.f. Canadian dollars, the total budget is now approximately USD 10,200,000. At the end of 2014, approx. half of this budget was spent, namely USD 5,180,986. Mid 2015, expenditures have followed a similar pattern as in 2014. This implies that approximately 40 percent of the available budget must be spent in the remaining 2.5 years of the project, which is possible but will require a concerted effort by all actors to constructively move forward with the implementation of planned activities.

\[\text{\textsuperscript{21} UNODC, 2015b; information provided by UNODC staff.}\]
Graph 1: Total annual project expenditures in USD per year (including support costs)

Annual project expenditures between 2011 and 2014 showed a gradual increase. The relatively low expenditures in 2011 can be explained by the late launch of the project in December that year. In 2012, with the project team in place since April/May, expenditures drastically increased. In 2013, expenditures doubled in comparison with the previous year as project implementation gathered pace, and another increase was clearly noted in 2014.

Graph 2: Annual project expenditures per UNODC budget line 2011-2014

The overall budget of the forensic project also covers 13 percent of Project Support Costs (PSCs), and since 1 January 2014 also a new cost centre, which is used for full cost recovery of ROMENA. The level differs per regional office, and for ROMENA the percentage was initially set at 11.2 percent for the 2015-2017 period. This has in fact been lowered (e.g. in 2014 the percentage was 5.7 percent), so more budget can be diverted to project activities. Different views were shared regarding this cost centre. UNODC
management maintains that this model ensures that regional offices function, which is essential for the continuation of operations at the field level. In the funding agreement of 2011, some of the costs related to the support provided by the Regional Office were already included. Therefore, the creation of the cost centre only meant a proportionally small increase, as those previously-agreed upon and budgeted items (staff and non-staff) were also included in the new cost centre. However, the retroactive nature of this cost-centre, and the fact that a larger budget portion is now not directed towards activities in the West Bank, was not appreciated by the donor.

Procurement and banking services were provided by UNDP as per the MoU called ‘Working arrangement between UNDP and UNODC’. These services have been given on the basis of UNDP rules and regulations, with bids for the procurement of goods and services above USD 50,000 reviewed by a panel for accountability purposes. The provision of these services was not always efficient as a consequence of exceeding the maximum period of delivery by UNDP. Moreover, the lack of information about the status of payments issued by UNDP led on occasion to additional work for UNODC. Problems in this area may reflect negatively on the relationship between UNODC and contracted parties, and it is recommended to maintain records to get a better understanding of the proportion of actions that surpass the agreed on maximum period of delivery and other problems with payments for possible follow-up action by UNODC senior management.

Another arrangement to facilitate payments has been made with the UN Department for Economic and Social Affairs (UNDESA), which appeared to be the only option available to pay stipends to the fellows studying in Jordan. The only other option would have been to pay UN daily subsistence allowance to the fellows during the entire duration of their studies, which would not have been a cost-efficient way to provide financial support. This arrangement appeared to be effective, with payments delivered on time to the fellows in Jordan.

Project design has been subject to advice given by international experts. This led to changes in design, including the cancellation of some activities or outputs. For instance, participants of the expert meeting on document examination held in 2014 in Abu Dhabi recommended removing the module on equipment from the list of training modules as equipment is generally provided with comprehensive manuals. Another example is related to training provided by the Palestinian National Standards Institute (PSNI) in January 2014 on ISO/IEC 17025, due to which a similar activity on standards was removed from the original work plan to avoid duplication in activities.²²

**Human resources**

Since early 2012, the forensic project team has been based at the UNODC Field Office in East Jerusalem. The team witnessed significant staff turnover in 2013 and 2014, which gradually led to a team which had not been part of the initial project team in East Jerusalem. The distribution of responsibilities between the project team, UNODC’s Regional Office for the Middle East and North Africa (ROMENA) in Cairo, Egypt, and the Laboratory and Scientific Section (LSS) at UNODC Headquarters in Vienna, Austria, as well as the composition of the project team on the ground, has been critically reviewed.

Initially, the project team was geographically divided between UNODC headquarters in Vienna and the field office in East Jerusalem. On 1 July 2011 a P3 staff member began her assignment at the Laboratory and Scientific Section (LSS) in Vienna, reportedly to mitigate the impact of the delay in project

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²² Wilson et al, 2014: 2
authorization. Some considered this set up to be beneficial for the start-up of the project, whereas others argued that this would only have been beneficial if the project team would have started at the same time in East Jerusalem. The first members of the project team on the ground, including the technical advisor, only began work on 1 April, 2013. Reasons for these delays in recruitment were not fully disclosed during this evaluation.

Between 2013 and 2015, the composition of the team in East Jerusalem changed entirely. In November 2013, due to a request made by the donor, a new position was created, and a National Project Manager joined the team to act as direct counterpart to the key Palestinian stakeholders on a daily basis. This facilitated project communication, in particular as the new staff member had been a civil servant in the MoPAD, and brought his knowledge of the functioning of the Palestinian government with him. The below graph shows the changes over time in staff number and gender balance of the PSEX02 team at the UNODC Field Office in East Jerusalem.

Graph 3: Sex-disaggregated data of forensic project staff, UNODC Field Office East Jerusalem (1 May 2012/1 May 2013/1 May 2014/1 May 2015)

The project team is backstopped by the Programme Coordination and Analysis Unit (PCAU) of ROMENA located in Cairo, Egypt. The head of PCAU is responsible for the forensic project, and the office provides administrative support. In 2012-2013, the support was seen as minimal, especially as the office has no in-

23 The ‘10%’ clause’ in the UNODC-CIDA agreement was enacted to enable project implementation to begin in the absence of the final signatures (UNODC, 2012a: 6-7).

24 Applications had closed on 1 April, 2011 for the P5 position but reportedly in the beginning of 2012 no incumbent had yet been identified. Applications for the national officer positions also closed in November, 2011. The project team in East Jerusalem started on 1 April 2012 with the arrival of the Senior Technical Advisor (P5) – a toxicologist - and one national project assistant. Two project officers (including one gender specialist) began their assignments on 1 May 2012. A second P3 staff with duty station East Jerusalem was in the end never recruited, and there were different views on the consequences of this change in staff capacity.

25 The P3 expert in Vienna was transferred to East Jerusalem in April 2013 before the end of her two-year headquarters assignment to support the project team on the ground. The project assistant went on maternity leave in 2013 and separated from service early 2014. In November 2014, this position was finally filled. In 2014, the National Project Specialist separated from service in March, the Senior Technical Advisor in April, and the gender specialist in September. The P5 post was terminated on the first of April, 2014, and the P3 officer took on the project coordination, human resource and financial management responsibilities. The post of gender officer was filled by a UNODC Project Officer on a part-time basis (0.8FTE).
house forensic expertise. The project team could however have benefited from more programmatic support considering the numerous challenges it faced at that time. The situation is different now, with many of the initial teething problems solved and ROMENA’s inputs to some degree more visible to the donor. Additionally, the Representative of ROMENA responds to MoJ-correspondance to support the project office in East Jerusalem (see section on partnerships and cooperation).

LSS at UNODC headquarters in Vienna coordinates the implementation of UNODC’s thematic programme on scientific and forensic services. The section offered technical support to the forensic project, initially by the P3 expert funded under this project, and then more remotely by means of sharing their expertise and access to their networks. The inputs of the LSS at this stage of the forensic project are minimal.

**International and national consultants**

The forensic project has made extensive use of national and international consultants in the field of forensic science, forensic medicine (including forensic nursing) and, more generally, with regards to strategic management. The usage of external capacity has contributed to the overall technical capacity of the team, considering that it is not possible to be an expert in all forensic disciplines. Despite the availability of one forensic science expert and one forensic medicine expert (toxicologist) on the team until April 2014, respondents mentioned that more technical capacity on the team would have benefited project design and implementation, including with respect to the design of the forensic science laboratory.

Respondents generally noted the high level of expertise of the selected experts, and confirmed their overall satisfaction with capacity-building activities organized by UNODC in close collaboration with counterparts. It was also pointed out that, ideally, the same experts responsible for training must also be recruited for mentoring the staff of the Forensic Science Laboratory. Some concern was expressed about the limited availability of some experts as counterparts were confronted with fixed training schedules instead of a more participatory approach in determining dates. Additionally, the rigid consultant engagement rules of the UN Secretariat, has led to a situation in which hiring processes can vary between two weeks to several months. This may also lead to complications of timing in certain activities, such as with respect to mentor/training activities.

**Project governance arrangements**

The governance structure of the forensic project is multi-layered, with the project team in East Jerusalem working under the overall authority of ROMENA, and operating on the basis of bi-monthly conference calls between UNODC and the donor. Moreover, internal task forces in the PCP and the MoJ, the Joint Task Force (JTF) comprising representatives of the MoJ, the National Centre for Forensic Medicine and the Forensic Science Laboratory, and the Project Steering Committee (PSC) are essential bodies to confirm the overall direction of the project and monitor decision-making and results at different levels.

The PSC met twice in 2012, and since 2013 once a year to approve annual implementation plans, review results and, for instance, discuss the management response to the 2014 donor monitoring report. The time span between the third and the fourth PSC was over a year, as the third one was held in April 2013 and the fourth one in September 2014. The Committee is chaired by a senior representative of the donor and either a senior representative of the MoJ/PCP or the MoJ – this position alternates between the two counterparts. The donor, the MoI, the MoJ, the Attorney General’s Office, and the MOPAD are all
represented in the PSC. UNODC acts as secretariat/observer, and also the direct beneficiaries are observers in this body (i.e. the Director and three section heads of the Forensic Science Laboratory, and one forensic doctor representing the National Centre for Forensic Medicine). The PSC has been viewed as a functional body, which performs in accordance with expectations, namely to formally endorse decisions made at a lower level.

The JTF is composed of representatives of the Forensic Science Laboratory/PCP and the National Centre for Forensic Medicine and the MoJ. This body meets more regularly to agree on annual implementation plans and discuss activities and other project-related issues. In 2012 and 2013 a total of twelve meetings were held, whereas in the subsequent two years only four meetings took place. The JTF was not regarded as a highly effective body by all stakeholders, which can be partially attributed to the current setting in the MoJ. A clear effort has been made in 2015 to make decision-making processes more transparent; clear procedures have been agreed on for submitting requests for funding to revise or develop new activities, although not all participants have adhered to these procedures. Further discussion is needed on the objectives of this task force, including the extent to which the focus should be given to cooperation in light of the opening of the Forensic Science Laboratory in 2016, including conditions needed to strengthen the streamlining and coordination of activities of forensic scientists and forensic doctors. The development of a ToR could be seen as a useful first step in this direction.

Graph 4: Number of meetings per year of the JTF

![Graph showing the number of meetings per year of the JTF](image)

Monitoring and reporting

The project team set up a system to monitor progress made in training in forensic science, and has kept track of the numerous activities. An additional level of examining acquired knowledge has been created by means of tests undertaken by individual subject matter experts who assess competency and proficiency in each discipline of forensic science. No external tests of the fellows studying at Amman University are envisaged, and the expert’s primarily role is to conduct interviews to assess for potential gaps in the programme that need to be supplemented. Most other training activities have in-built pre- and post training evaluation, and the impact of training in the workplace is measured in part by observing the application of knowledge and skills. Further thought can be given to the integration of information-gathering activities necessary for monitoring purposes, including the collection of sex-disaggregated data for expected outputs and outcomes.
Internal reporting has been done in accordance with UNODC reporting requirements by completing semi-annual and annual progress reports. Donor reporting is undertaken in accordance with donor formats. In the early stages, the reporting was not seen to be entirely on a par with their standards, but since 2013, the quality of project reporting has greatly improved, and is appreciated by the donor. The same applies to communication about activities. The donor has further integrated a separate monitoring component into the forensic project, with a Canadian monitor/forensic expert visiting the West Bank and Jordan for a ten day period each time to review progress, identify key challenges and provide recommendations. One monitor/expert visited the West Bank in 2013 and 2014, and a new monitor/expert from the same organization in 2015. She travelled to the West Bank at the end of September, and undertook field interviews in parallel with the mission for this mid-term evaluation. The external perspective has been appreciated by UNODC, although the recommendations were sometimes also seen as too ambitious considering the development context (e.g. difficult to produce detailed business proposals as counterparts may not have sufficient experience in developing proposals). Such recommendations must therefore be critically reviewed and, if necessary, only partially accepted by UNODC.

**Reasons explicating efficiency**

Numerous reasons give an explanation for progress made, and challenges encountered during the design and implementation of the forensic project. Although some activities were postponed on purpose to respond to ongoing challenges, and ensure their appropriate timing in relation to other activities, other delays were unforeseen and/or could have factored into the design to establish a more realistic timeframe of the project. Factors, such as the multi-stakeholder nature of the project, existing bureaucracies and a complex political environment characterized by limited resources offer sometimes an explanation for progress made.

The desk review and interviews also confirmed that lengthy administrative procedures of the UN led to several delays in project implementation, although this partially also points to too optimistic planning schedules. In particular, the procurement of services and goods above USD 50,000 is a time-consuming process, as technical and financial bids must be reviewed by a procurement committee. The procurement process has further presented different challenges, such as a lack of bids which led to the re-advertisement of the advertisement, delays in receiving items, the receipt of poor quality products, or restrictions posed by import regulations which meant that the project team had to find a local solution. Some training activities also faced delays because of difficulties to identify appropriate experts (e.g. drug analysis training).

Several respondents therefore noted the importance of managing expectations of all stakeholders regarding the different components of the forensic project in order to create a fair understanding of the actual possibilities and limitations. Insufficient communication about these factors has sometimes led to misunderstandings between different actors, which concerned, among others, the various challenges related to procurement processes.

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26 Planned Forensic Science Awareness workshops have been delayed until 2015. This decision was made with PCP counterparts, in order not to ‘advertise’ the future services before the implementation of the quality management system and the completion of the specialized training programmes.

27 E.g. UNODC, 2015a: 41, 49

28 UNODC, 2014a: 33-34
The application of rules on import and immigration by the State of Israel also led to delays in the implementation of the project schedule. Thus, complications arose with respect to getting visa for two experts from the Middle Eastern region, and approval for the import of particular equipment.\textsuperscript{29} Also, due to the overall deteriorating security situation in Israel and the West Bank as a result of the war in Gaza in 2014, a number of incoming missions scheduled in July and August in 2014 were postponed.

The slow start of the project can be explained by different factors, including the need to receive formal authorization of MoPAD in 2011, which led to a six-month delay in launching the project, lengthy UN recruitment procedures, the late on-site arrival of the senior technical advisor, and the slow operationalization of the project implementation plan during the first two years. At the same time, the planning process could have benefited from a better sequencing of activities of the Forensic Science Laboratory, with training activities beginning around the same time as the new laboratory staff. Additionally, although the original team capacity seemed adequate in terms of forensic science/forensic medicine (toxicology) capacity, and Arabic speaking skills at first sight, some respondents were of the view that more specialized on-site forensic expertise would have benefited the project in the early stages of implementation.

Also, rules, procedures and priorities of the PA led to considerable delays in project implementation, especially in the beginning of the forensic project. As a result of the initial lack of clarity on roles and responsibilities vis-à-vis forensic services, the two ministries competed for the physical and technical ownership of the laboratory.\textsuperscript{30} Following the fiscal problems of the PA in the second half of 2012, and the subsequent presidential freeze on expenditures that year, the eight trainee forensic doctors and twelve scientists could only be recruited in 2013.\textsuperscript{31} Furthermore, the recruitment process of the fellows had to be organized twice to ensure quality control by UNODC. In 2015, a temporary freeze on toxicology-related activities for more than six months was reportedly caused by different views within the MoJ on the recommendations made by international experts. Additionally, the frequent rotation of senior staff in the MoJ (since the start of the forensic project, there have been three ministers and two deputy ministers, as well as some gaps in between post-holders) also led to several delays in decision-making, and follow-up with relevant counterparts, and the need for more investments by UNODC to introduce new incumbents to the project. Additionally, the import certificate provided by the Israeli Authorities for reference standards for the Drugs Analysis Section of the Forensic Science Laboratory must be requested by the Palestinian MoH, which has, to date, not approached the concerned authorities.

Several delays were also a consequence of consultation and decision-making processes related to partnerships. For instance, discussions between the Jordanian National Institute of Forensic Medicine and the University of Jordan on the four year forensic medicine training programme did not result in a consensus. Therefore, instead of developing a joint programme, the University of Jordan Higher Degree in Forensic Medicine was selected for the programme to avoid further delays. Also the forensic nursing component started later than initially was envisaged as the signing of the MoU between the MoJ and MoH was later than expected due to some bureaucratic hurdles. It was signed in October 2014, after

\textsuperscript{29} For instance, the delivery of workshops on SGBV were rescheduled from the second to the third quarter in 2014 due to difficulties experienced by the consultant to obtain a visa from the Israeli authorities. A specialized instrument for examining security documents (VSC6000) received customs clearance from the Coordinator of Government Activities in the Territories Unit (COGAT), which is part of the Israeli Ministry of Defence, after several months, and has been delivered and installed in 2014.


\textsuperscript{31} This also led to delays in allocating space for the Forensic Science Laboratory by the PCP, only after which the planning for refurbishment could begin UNODC, 2013a: 18-20; MoJ, 2012b: 5
which the selection of staff for the training, and the identification of space for forensic medicine examinations in hospitals could begin.

A major part of the forensic project is dedicated to capacity-building of government employees. Although activities in this field have generally been appreciated in terms of expertise, sometimes results were less robust than envisaged. Reasons included the limited participation of trainees due to the existing workload/limited capacity (e.g. forensic doctors during the management training, nurses and midwives during the forensic nursing training), or the level of training provided (e.g. the management training). Selected training methods also led to complications in the forensic nursing training. In particular the long-distance component was only to some degree effective, because of sometimes limited access to internet and/or challenges to join all group sessions because of work-related commitments and travel distance. Additionally, selection criteria, such as adequate English language skills of the forensic nursing trainees, were not always honoured, thereby increasing work for UNODC to translate course material in Arabic and providing simultaneous translation during the training. However, a lesson learned is that selection criteria must be determined on the basis of existing skills of particular professional groups. Some trainers also experienced a lack of specific equipment, including the absence of drugs and firearms and ammunition to act as a reference standards in the Forensic Science Laboratory.

Partnerships and cooperation

Strengthening the governance, management and capacity of forensic services in the West Bank has essentially been a partnership activity. Building effective working relationships with key stakeholders of the forensic project, such as the Forensic Science Laboratory/PCP/Mol, the National Centre for Forensic Medicine/MoJ and the MoH, has taken time and much effort of UNODC. Cooperation between these different government bodies has also been supported by project activities, and the same applies to the partnerships between forensic services and other actors in the criminal justice system, especially within the PCP, the Attorney General's Office and the High Judicial Council. The partnership between civil society and the government, especially with respect to the legal framework and in the field of SGBV/the national referral mechanism, has also been undermined by specific project activities. The same is the case for international networks involving Palestinian experts and experts of the region and beyond, which have been initiated and partially strengthened, thereby supporting knowledge exchange and the collection and application of good practices.

UNODC’s working relationship with the key partners of the forensic project needed some time to take shape, and take on a more positive direction. Over time the Office's relationship with the PCP, and especially with the Forensic Science Laboratory, has become a partnership with staff of the laboratory working in tandem with UNODC. The partnership with the MoJ and the National Centre for Forensic Medicine has witnessed more fluctuations due to several changes at the most senior level of the MoJ, project focal points, lead forensic doctors, and the fact that the director of the centre is in Gaza. This posed several challenges to UNODC project management, and ROMENA leadership became more involved in 2015 to divert pressures at the local level. This involvement is recommended for the remaining part of the forensic project, including by means of regular missions of the regional representative to promote and re-confirm the rules of engagement agreed on by the PSC.

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32 See Wells and White, 2015: 4
33 See Cosbey, 2015: 3-4
The confuse management structure of the National Centre for Forensic Medicine has in turn also impacted on their working relationship with the Forensic Science Laboratory. More emphasis must therefore be placed on developing a positive working relationship between the two bodies in light of the upcoming opening of the laboratory (see section on efficiency).

Other actors of the criminal justice chain have also been involved since the beginning, with the Attorney General’s Office represented on the PSC, and the Attorney General’s Office, the Bar Association, and the Palestinian Legislative Council participating in the legislative committee set up to support the drafting of the legal framework. Representatives of different police departments, the Attorney General’s Office, and also the judiciary have participated in different training sessions on forensic evidence, including with respect to SGBV. These activities are expected to be further expanded in 2016. Additionally, it is also recommended to organize workshops between forensic science and forensic medicine practitioners and representatives of the Public Prosecution Office, the judiciary and other legal professionals to review existing reporting templates and other information-sharing modalities.

The MoH has been another key partner in relation to different activities of the forensic project. The ministry has been a provider of laboratory services to the MoJ, and supported the implementation of the forensic nursing component, by allowing staff to take part in training activities, and providing space in three hospitals to set up forensic medicine clinics for victims of SGBV. The MoH is also represented on the PSC. Additionally, the ministry has been a partner in strengthening the operations of the Forensic Science Laboratory, as the management of waste and requests for certain supplies must be submitted to the Israeli authorities via this ministry. At this stage, senior management support of the MoH is needed to provide clarity on lines of command, responsibilities and procedures in relation to the use of the forensic medicine rooms and hospital staff in three hospitals in the West Bank.

Different partnerships with civil society organizations have also emerged during the preparations and implementation of the forensic project. Firstly, staff of BirZeit University has been assigned with the responsibility to review options, and draft new legislation on forensics. The work is guided by a legislative committee, and this work has gained momentum since 2015. Secondly, different partnerships were strengthened with civil society organizations working on the prevention and response of SGBV, such as Juzoor and the Women’s Centre for Legal Aid and Counselling (WCLAC). Cooperation with these non-governmental organizations has for instance been effective during the forensic nursing training when they offered training on the national referral system.

UNODC staff also participated in different inter-agency working groups, such as the forensics donor group, the cross-UN GBV Committee and the National Referral System (Takamol) for GBV working group. The main objective of the donor forensic coordination group has been to offer a platform for information sharing. As the main focus of the forensic project has thus far been rather oriented at capacity-building of the two forensic services, the gradual shift to expand cooperation with other criminal justice actors may also require establishing stronger links with some of these international actors. This concerns, for instance, evidence storage, transfer and examination, and possible upcoming discussions on the prioritization of evidence submission to the Forensic Science Laboratory. Furthermore, cooperation with EUPOL COPPS has also taken place more directly in relation to particular activities. This includes their participation in a governance study tour to Dublin in 2013, and in the earlier mentioned legislative

\[34\] Takamol is a comprehensive national referral system that consists of referral procedures for women victims of violence in the police, health and social affairs sector. The system seeks to provide standardized procedures in providing services for women victims of violence in all locations. It was adopted by the cabinet in session 16/10 on 10th/December/2013 (WCLAC, 2014: 8n14).

\[35\] Participants were representatives of EUPOL COPPS, USAID/JSAP, the German and Canadian government.
committee to support the drafting of the legal framework. UNDP has also supported the organization of training sessions with the High Judiciary Council in 2015.

At the international level, numerous partnerships have been set up in relation to the fellowship programme in Jordan, and as part of study tours, conferences and technical workshops to guide the development of training material. An agreement was signed with the United Nations Department of Economic and Social Affairs (UNDESA) to administer the fellowship programme. A Memorandum of Understanding concerning the fellowship programme was signed between the Palestinian MoJ and the President of the University of Jordan. In workshops to review course material from an international good practice perspective, a relatively large proportion of experts were from the Middle East and North Africa. Furthermore, two fellows undertook a one-month training at the Victorian Institute of Forensic Medicine in Australia in 2015. Ongoing cooperation between one Palestinian forensic doctor, and a forensic medicine expert from Portugal has resulted in an article submitted for publication to the Journal of Forensic and Legal Medicine – a collaboration which started after the UNODC-organized study tour to Portugal in 2013.

Cooperation between UNODC and the donor is nowadays seen in a positive light. Their working relationship in the early stages of project implementation was characterized by regular friction due to factors highlighted in the design and efficiency sections. This led to micro-management by the donor, at least as perceived by UNODC, thereby further increasing pressure on an already burdened project team in East Jerusalem at that time. The donor still maintains that this level of involvement was necessary at that time to get the project into a healthier state. Better lines of communication between the project team and the Canadian mission in Ramallah, and since 2015, the participation of the head of PIU in the bi-monthly calls between the donor and UNODC has ironed out some earlier concerns. The donor would however still appreciate more pro-active liaising of ROMENA staff (e.g. courtesy visits when on duty-travel to East Jerusalem and/or Ramallah), as part of their salaries are paid by the forensic project. Additionally, as part of the team effort, the donor expressed concern in a letter to the MoJ in 2015 about significant delays in delivering project activities, thereby acknowledging the responsibility of this Palestinian counterpart in project performance.

Effectiveness

The forensic project has been effective to some degree. Despite the slow onset of the project, information presented in progress reports and obtained during interviews confirmed that major results have been achieved during the past four years.

The word ‘temporary’ in front of the title Forensic Science Laboratory is sometimes still used, which may lead to confusion about the more permanent nature of the laboratory. The laboratory has to a large extent been refurbished and equipped, and also additional works for facilities for firearm and tool mark evidence receipt and testing have been completed in the basement. Expendable and non-expendable


37 Letter Head of Cooperation/DFATD/Government of Canada to the Assistant Deputy Minister, MoJ, 7 July 2015
equipment, such as scientific equipment, tools, chemicals, consumables, furniture and other materials, have been provided, and offer the appropriate set up for becoming operational in 2016.\(^{38}\)

All course material has been completed, and some material has been translated following a request by the PCP.\(^{39}\) The quality management manual has also been completed, and together with the forensic science strategic plans translated in Arabic. Staff of the Firearms and Tool Mark Section and the Document Examination Section are expected to complete their training in the second quarter of 2016, and the Drug Analysis Section in the third quarter 2016, although there are different views on the potential impact of the absence of an in-house firearm and ammunition reference library and drug reference standards on the completion of the training. This must be further clarified with relevant stakeholders. Further mentoring is envisaged of the staff of the Forensic Science Laboratory after completion of these technical training packages.

In addition to technical training, all sections also receive training on ISO17025 standards for laboratories to underpin the implementation of a quality management system.\(^{40}\) Five plans have been developed and/or finalized, namely an environmental plan, health and safety plan, waste management plan and facility management plan. The aim of the plans is to enable the laboratory to meet international health, safety and environmental standards, including waste disposal. All these plans must still be approved, translated into Arabic and accompanied with training and mentoring of staff.

The Forensic Science Laboratory is expected to open in 2016, and a phased approach has been decided on to manage work load and expectations. Whereas the Drugs Analysis Section and the Firearms and Tool Mark Identification Section are not yet operational, the Head of the Document Examination Section already provides evidence to courts as he is considered to be a certified expert by the MoI (see graph 5).

\(^{38}\) Some of the microscopes have been provided by a German partner.

\(^{39}\) The FSL overall training planning gives an overview of the following training: 1. quality management; 2. general laboratory; 3. safety officer; 4. laboratory protocols and procedures; 5. firearms and toolmark evidence identification (12 modules); 6. drug and chemical evidence identification (5 modules with 13 sub-modules); 7. document examination training programme (8 modules); 8. management training; 9. forensic governance; 10. basic protocols; 11. mentoring heads of sections.

\(^{40}\) At the end of March, 2015, of the 21 documents in support of the quality management system at the Forensic Science Laboratory, eight documents were completed, two were still missing entirely, and the remaining ones were in draft, including the quality manual (Wilson et al, 2015: 8).
The forensic project has further supported different activities to strengthen forensic medicine in the West Bank, and has contributed towards the outcome ‘Improved ability of forensic medical professionals, including women, to conduct death investigations and provide gender sensitive services to victims of abuse, particularly women and children.’ A major component has been the support provided to eight doctors recruited in 2013 to participate in the four-year Higher Specialty Degree in Forensic Medicine at the University of Amman in Jordan.41 Six fellows are expected to complete their education mid 2017, whereas the other two are expected to finish their courses in 2018.42

The budget intended for the continuing professional development of the three forensic doctors and the three residence doctors has not been used, which can partially be explained by the lack of a representative mechanism to channel ideas on training needs to UNODC, the work load of the three forensic doctors, and different views on type of training and level of inputs.

Work on the toxicology component was put on hold, and only recently received the green light from the MoJ. The next step is to re-start the procurement process. The mission team found in 2013 that “apart from a basic and largely unsatisfactory service, there is effectively no current analytical forensic toxicology provision in Palestine [...] an extensive programme of laboratory development and training would be necessary”. New laboratory equipment and laboratory space is outside the scope of the project, and is therefore not contemplated. Instead of only offering training to two forensic toxicologists, as originally envisaged, the decision was made to pursue a broader programme of forensic toxicology laboratory development and training to strengthen capacity and ensure sustainability of this particular function.

41 Two fellows dropped out in 2013 and 2014. One has been replaced with another forensic doctor who is now one year behind schedule. The second doctor who dropped out has now been able to join a course on pathology for which he can use his earlier acquired knowledge and skills.

42 The post-graduate forensic medicine curriculum developed at the first forensic medicine expert group meeting in Amman (November 2012) is based on the standard forensic pathology/doctor curriculum which has been endorsed by the European Council on Legal Medicine in September 2012. The ECLM identified the minimum standards applicable to all EU countries.
The provision of gender-sensitive services to victims of abuse, especially women and children, has received more attention since 2014. Considering the current staffing and facilities of the National Centre for Forensic Medicine, the decision was made to liaise with the MoH to use hospital facilities for such services. A Memorandum of Understanding between the MoJ and the MoH has been concluded, and three rooms in three public hospitals in respectively Ramallah, Nablus and Hebron have been allocated for this purpose. The rooms are in the process of being refurbished and equipped, and are expected to be ready for use at the end of 2015 (Ramallah)/beginning of 2016 (Nablus and Hebron). The rooms in Nablus and Hebron are shared with the ultrasound department is a solution which is far from ideal but the best available option given to the MoJ at that time. The space in the Ramallah Medical Centre is most advanced in terms of planning, and at the time of the field mission the area (comprising two rooms and a waiting area which could be accessed through a door in the basement) had been refurbished, freshly painted, and some furniture and equipment was already in place. The delivery of the rest of the equipment was delayed because of Id-al-Adha, but was expected to arrive by mid October. Nurses and midwives of five hospitals (including the Holy Family Hospital in Bethlehem) were trained over a four months period on the provision of gender-sensitive services to victims of SGBV, including the national referral mechanism called Takamol. Seventeen out of 23 participants completed the course in September 2015. Trained nurses and midwives were supposed to assist visiting forensic doctors and patients in different areas, including by referring victims to other services, but were not responsible for injury interpretation, report writing and court presentation in order to stay within the limits of existing legislation.

Some of the ground work for the third outcome, namely improved institutional capacity to manage and deliver integrated forensic medicine and forensic science services based on international best practice' has been completed. Five out of thirteen SOPs, two monographs and a draft quality management manual have been developed for forensic medicine. A draft quality management manual has been completed for the Forensic Science Laboratory. Additionally, high-level and mid-level governance study tours were organized in 2013 for key Palestinian decision-makers and officials to give exposure to good practices in forensic science and forensic medicine. Management training has been offered to both institutions in 2015, with the aim to develop strategic plans. Draft plans have been completed, although more work must be undertaken to shift the focus, and get forward-looking, results-oriented plans, and a distinction can be made between a strategic plan, and a performance management plan with clear benchmarks, expected results and realistic indicators.

Activities have been undertaken from 2014 onwards in support of the fourth outcome 'Enhanced understanding among police, legal and judicial authorities, decision makers and civil society of the role and importance of forensic services, including for sexual and gender-based violence (SGBV) and family violence cases'. Several workshops have been held with police, legal and judicial authorities in the field of SGBV to sensitize them on the need for a coherent approach to such crimes. A workshop introducing

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43 In Bethlehem, the services of the Holy Family Hospital, a private hospital, will continue to be used by the forensic medicine doctor

44 UNODC, 2015c: 12

45 With the aim of standardising and regulating practice, reporting and management of forensic medicine in accordance with international standards, five Standard Operating Procedures (SOPs) for a number of forensic medicine operations have been developed by UNODC. These SOPs have the following titles: Guidelines for collecting samples or organs from forensic autopsies; Collection of biological samples for forensic toxicology; Guidelines for the examination of alleged victims of torture and ill-treatment; Forensic autopsy, and; On-site corpse inspection. These SOPs are UNODC documents dated January 2014. Two detailed monographs, namely the Forensic Autopsy Manual and the Sexual and Gender-based Violence: Manual for Palestinian Forensic Medical and Healthcare Practitioners, have further been completed in English in 2015 in accordance with recommendations formulated during the forensic medicine expert group meeting held in November, 2012.
forensic science and medicine to judges was held at the end of September/beginning of October, 2015, and further activities in this field are planned to prepare criminal justice practitioners for the use of evidence provided by the Forensic Science Laboratory in particular in 2016.

Several activities have further been undertaken to increase ‘the harmonization concerning legal frameworks, approaches, policies and coordination, including SGBV and family violence cases: between police, legal and justice sector stakeholders including civil society organizations, among donors and multilateral organization’ (outcome five). Bir Zeit University prepared two studies on legislative options, and the decision was made by the two Palestinian counterparts to have two separate but interrelated laws on forensic science and forensic medicine. University staff is currently preparing a revised forensic science law, and will also draft a forensic medicine one as well as related by-laws. Additionally, the integration of forensic medicine into the national referral system has been promoted, although more work must be undertaken at the policy level and in practice to support such integration.

Impact

The impact of the forensic project can only be considered in relation to achievements as a result of project implementation thus far. A lot of work must still be undertaken to complete activities to strengthen forensic science and forensic medicine services in the West Bank. Especially the next two years will be crucial to capitalize on investments made, to consolidate the work undertaken in the field of capacity-building, legislation, policies, procedures and governance and management processes, and actually show the impact of improved forensic services on the criminal justice system in the West Bank.

Nevertheless, impact in some areas can already be noted, such as an agreed-on vision with respect to the development of the legal framework, and the governance of the two forensic bodies is in the process of being strengthened. The Forensic Science Laboratory has been set up and equipped, and although it is mostly still functioning as a training entity, the laboratory is expected to become fully operational in 2016. The Head of the Document Examination Section is already using the available equipment to provide evidence to the Public Prosecutor’s Office, and his staff is assisting with the work under this supervision. Eight fellows have completed part of their studies at the University of Jordan, and seventeen nurses and midwives were able to finish the forensic nursing training. Additionally, cooperation between different stakeholders has been supported under the project, including the PCP/MoI, the National Centre for Forensic Medicine/MoJ and the MoH. Partnerships were further set up with civil society actors, and also at the regional and international level to support networking, information and expertise sharing, training and agreeing on common standards and best practice.

Two unanticipated results were found during the desk review and interviews. Firstly, during the expert group meeting on document examination held in March, 2014, in Abu Dhabi, a discussion was held about the setting-up of a region-wide Arabic hand-writing training programme. Secondly, the nurses and midwives taking part in the forensic nursing training did not only benefit from the information given about forensic nursing, but also with respect to the treatment of victims of SGBV, data-collection and reporting (the usage of an MoH form), and the national referral mechanism. This knowledge can already be applied by these medical professionals, although questions were also raised with respect to information-sharing with the police (that is, must information be shared with police units located on the hospital compound and/or must it only be shared with the Family Protection Unit of the PCP?).

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46UNODC, 2014e: 45
Sustainability

The sustainability of results has received attention, but has also remained a concern since the very beginning of the forensic project. For instance, some decisions taken in the early stages were a consequence of limited capacity to sustain particular outputs (e.g. post-graduate training in forensic medicine). Efforts in several areas must however be further increased and receive serious attention in the final two years of project completion in order to ensure their sustainability and strengthen the ownership of the PA of results in the field of forensic science and medicine. As there are different steps that must be undertaken in the short term in order to secure long-term sustainability, this section will provide an overview of the current status of the different components of the forensic project, and expected steps to move forward. Nevertheless, considering the ongoing financial crisis of the PA, a continued risk is that the authorities may not find the resources in the future to sustain the structures and services created and developed by this project.

In order to capitalize on already made investments, the technical training of the forensic science staff in their respective disciplines must be continued and completed. The same applies to the eight fellows. Additionally, management training and training on ISO 17025 standards must also proceed and be finalized. In 2016, following the opening of the Forensic Science Laboratory, a shift to mentoring staff in the three sections is foreseen when the laboratory is actually receiving evidence for examination. A comprehensive mentoring plan must be developed, as it is thus far not clear how this mentoring will be undertaken, how often and by whom.

Initial accreditation of the laboratory in accordance with ISO/IEC 17025 standards will be sought from the national accreditation body, the Palestinian Laboratory Accreditation Committee (PLAC) at the Palestinian Standards Institute, before international accreditation will be pursued. As Wilson (2014: 7-8) pointed out, it is necessary to engage in a dialogue with this body to get more information about their standards, and to include related requirements already at this stage in the operations of the laboratory, such as the frequency of internal audits and traceability requirements. This will also help with preparing the PLAC with this task, as the Forensic Science Laboratory is the first body which seeks this type of accreditation. Ideally, this would be achieved during the project’s life-time, although several actors pointed out that much needs to be done before this can be achieved.

An integral part of ensuring sustainability is the allocation of an annual budget to forensic activities. As the Forensic Science Laboratory is a new institution within the PCP, the timely preparation of an annual budget for the laboratory, and its integration into the PCP budget, is key to secure the continued functioning of the laboratory. The budget must include provisions for staffing, equipment, maintenance of non-expendable equipment, and expendable items. Budget training has been provided, but further follow-up must be done to advocate for the need of the different components of this budget to relevant stakeholders, and to ensure a timely integration into the PCP budget before it is submitted through the MoI to the Ministry of Finance. This activity must be repeated annually.

Several respondents noted that the rotation of PCP staff could be a potential risk to the functioning of the laboratory. Although some mentioned that rotation is not an issue as staff working in the Forensic Science Laboratory is specialist staff, there is a risk that some may be interested to advance their careers to increase their entitlements to certain allowances. This issue must be part of discussions with the PCP on the future direction of the laboratory.

The efficient and effective management of the Forensic Science Laboratory and the National Centre for Forensic Medicine entails different aspects. Both entities received management training this year in order
to strengthen their skills in this field. More training is required to ensure the effective management of these bodies. The development of strategic (or business) plans was an integral part of the training. The draft plans provide however more an overview of past achievements, instead of a forward looking strategy with clearly identified benchmarks, results, indicators and targets. This requires therefore further attention in terms of substance. It is also suggested to make a distinction between strategy and performance management plans. Additionally, the active participation of all relevant actors of the National Centre for Forensic Medicine, especially the three forensic doctors and ideally also the fellows, in developing these plans is pivotal for the future profile, and profiling, of this centre in the West Bank.

Senior management of the National Centre for Forensic Medicine comprises the director (in Gaza), the deputy director, one of the three forensic doctors, and the administrator (in the West Bank). The centre in the West Bank has therefore to some extent been operating in a leadership vacuum, which has resulted in the current management structure, and the composition of the internal task force with representatives of the MoJ. Altogether this poses several challenges to future decision-making and management of the project, and must be addressed internally to create space for effective management arrangements, including supervision of the forensic doctors and residence doctors. This also concerns giving more clarity on budget ownership, with a clear delegation of powers to the centre, considering that since early 2015 the Head of the Finance Section was appointed as project focal point in the MoJ.

The National Centre for Forensic Medicine has several rooms of which one is used by one of the resident doctors. There are four more forensic medicine offices in the West Bank. Furnishing these offices was not one of the activities given in the project document. This must therefore be clearly justified and based on an integrated vision of the further development of forensic services, including of forensic medicine, in the West Bank, if this activity is actually funded under the project.

Several guidance documents planned under the project, such as SOPs, the procedures manual and the monographs require all more work before project completion. The original plan was to have a total of thirteen SOPs in the field of forensic medicine at the end of the project. Another eight SOPs must therefore be developed in the next two years. However, a review of the relevance, use and application of these SOPs is recommended in light of the ongoing work with respect to the legislative framework, and the particularities of the local context with a view to align these with evidence needs of prosecutors and judges. Additionally, the procedures manual for forensic medicine has also not been completed, and it is advised to review the current status and division of responsibilities in order to continue the work. The monographs must be followed up on, translated into Arabic, endorsed by the MoJ and used in training for the fellows and other criminal justice actors.

The provision of employment contracts to all eight fellows from 1 March, 2015, onwards by the PA has been a major step forward, and averted one of the main project risks identified in 2014.\textsuperscript{47} The PA will at a minimum cover their salaries for fifteen years, which provides job security to those that are currently still in the process of completing their studies in Amman. Further clarification must however be obtained on the status of their diploma in Palestine, and whether they will be subject to further examinations by the MoH before they can start practising. This, in combination with clarity on the possible composition of such a committee, especially considering the necessary specialist knowledge, must already be discussed with the MoH at this stage. Additionally, it is yet unclear how the seven forensic medicine specialists (six in 2017, and one in 2018) and one pathologist (who will complete his studies mid 2018) will be integrated

\textsuperscript{47} See Laird, 2014.
into the current structure of the National Centre for Forensic Medicine in terms of lines of command, main responsibilities, working space/location, and access to hospitals and morgues. The optimal use of the expertise of the only female forensic doctor must also be considered in this regard. This must already be looked into to give clarity to concerned staff, as well as the project team and the donor considering the investments made to build capacity of these future forensic doctors.

The two fellows who will complete their education in 2018 will cover the remaining study costs after project completion at the end of 2017 from their salary only. This issue has been discussed, and agreed on, although there is a minimal risk that their reduced income after 2017 may lead to some difficulties to complete their education.

The forensic nursing component, which began in 2015, requires more inputs to become sustainable. Students will continue to require support and mentoring after course completion, and further hands-on experience through role plays and an educational visit to the Holy Family Hospital in Bethlehem has been suggested by respondents. Additionally, low case numbers may not provide enough opportunities to get into a routine, and the continued lack of clarity on the provision of services by hospital staff may hinder the execution of forensic nursing duties. The renovation of the clinical forensic spaces in the three hospitals must be completed, which is expected at the end of 2015/early 2016. Furthermore, as the ground floor entrance to the area in the Palestinian Medical Complex in Ramallah is now used as a parking lot, accessibility remains an issue, especially as concern has also been expressed about the risk of increased stigmatisation of victims of SGBV due to the use of designated space for forensic examination. Another concern is the co-sharing of the clinical forensic rooms in Nablus and Hebron with other medical services.

A key priority at the moment is therefore to advise on the lack of clarity on rules and procedures between the MoH and the MoJ, including SOPs on the use of clinical forensic space and forensic nurses/midwives, such as with respect to lines of command and the division of responsibilities, to ensure that victims of SGBV are received, protected, treated and cared for in their best interest. Additionally, more work must be undertaken to secure the integration of forensic medicine into Takamol, which ultimately needs to be done by the MoSA, as this ministry is responsible for the national referral system. However, the provision of information to victims of SGBV when they visit the forensic medicine area in hospitals must also be revisited; a more integrated approach must be promoted, such as by giving information on options to access other services, such as legal assistance.

A lot of work must still be undertaken to strengthen coordination between the Forensic Science Laboratory and the National Centre of Forensic Medicine on the one hand, and these two forensic bodies and other criminal justice actors on the other hand. It is therefore recommended to review the functioning of the JTF, and examine ways forward to focus on strengthening cooperation between the Forensic Science Laboratory and the National Centre for Forensic Medicine. More training is further envisaged for other criminal justice actors on the importance of the use of forensic evidence in courts. Additionally, cooperation with these actors must be strengthened to review existing templates for evidence reporting, and the option to integrate forensic evidence in existing data management systems used by other criminal justice actors (Mizan). Additionally, a discussion must be initiated to agree on indicators of success in using forensic evidence. Furthermore, work must continue to strengthen the legislative framework, although it is likely that the Palestinian Legislative Council may not convene before the end of 2017 to adopt new laws.

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48 See Wells and White, 2015 4
Work must also be undertaken to review existing service agreements that existed prior to the project, and revise/develop new ones between the MoJ and universities.

Numerous training modules and tools have been developed by the forensic project in the field of forensic science, with a particular focus on three technical areas, namely firearms and tool mark identification, drugs analysis and document examination. These training modules and tools are available in English. Additionally, training modules have been designed in the field of forensic nursing, and two monographs in the field of forensic medicine. The participation of a professor of the Ibn Sina College for Health Science in the design and implementation of forensic nursing training has been seen as an effective way to integrate this training into existing curricula of this college.

Although designed to address training needs in the West Bank, these tools can be used in other contexts in the Middle East, and possibly adjusted to address training needs of other criminal justice actors. Thus, whereas some are more specific to Middle Eastern culture (e.g. gender relations) and/or this region because of the Arabic language (e.g. document examination), modules prepared in the field of firearms and tool mark identification as well as drugs analysis can to a large extent be used elsewhere. Additionally, the specialist experience gained by UNODC in building capacity in forensics can possibly be used in other (post-) conflict environments to strengthen evidence in criminal justice proceedings.

Furthermore, work in the field of forensics must continue to be strengthened after project completion, as there will be further space to continue providing support to strengthen the provision of forensic services in the West Bank after 2017. It is therefore necessary to develop a second phase on time in order to continue with supporting the PA in this field.

Human Rights and Gender

Human rights and gender have been mainstreamed in project design and implementation. Although the improvement of the criminal justice system for men, women and children in the West Bank has been given as the main objective, a clearer reference to human rights can be recommended to clarify how the project contributes to achieving these rights. This not only implies the integration of human rights into the hierarchy of objectives, and the logical framework of this project, but also a clearer identification of limitations and risks, especially considering the continued challenges experienced by criminal justice actors in the execution of their daily work as a result of the application of different rules related to access to Areas A, B and C.

Gender has been mainstreamed in the forensic project in the field of human resources, in project strategy and project activities, especially in forensic nursing. The project team has a (nowadays part-time) national gender officer to support gender mainstreaming, and manage the forensic nursing component of the project. Gender has been given due attention with respect to gender balance in staffing of the project team, the Forensic Science Laboratory, and among the eight fellows studying in Jordan. Despite clear efforts during the recruitment of laboratory staff and fellows, it has not been possible to achieve an equal number of male and female staff due to the profile of available candidates and prevailing gender stereotypes. Only one out of eight fellows and four out of 24 laboratory staff are female. The project team had most of the time more female than male staff, although the most senior staff member was male in the first couple of years. In 2015 the balance has been turned around in favour

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See ToR for forensic medicine - Standardised Criteria Gender-balanced recruitment.
of male staff, whereas the most senior staff member of the team has been female from April, 2014 onwards (see graph 3).

Graph 6: Sex-disaggregated data Forensic Science Laboratory, PCP/Mol

A gender strategy was drafted in the early stages of the forensic project, and presented during the third PSC meeting held in 2013. This strategy is rather general, and could benefit from an update to make it more specific in light of recent developments and activities. It could also more clearly elaborate on the forensic nursing component of the project, clearly identify UNODC’s niche in SGBV prevention and response activities, delineate the gender strategy of the remaining part of the project, and provide a work plan with indicators and targets. This updated strategy could then also provide the basis for monitoring performance in this area.

A major component of the project in the area of forensic science is the clinical forensic response to cases of SGBV. A key component of the work undertaken in 2014 and 2015 has been to expand the clinical forensic medicine capability by means of awareness raising activities for criminal justice personnel, by training nurses and midwives on forensic nursing, and to set up equipped rooms in three hospitals. Additionally, project staff has participated in a relevant SGBV working groups, and six SGBV workshops with 121 participants (judges, public prosecutors, police, forensic medicine practitioners and civil society organizations), and two Takamol workshops, with a total of 45 participants, have been conducted by UNODC. These workshops offered the stage to advocate on the integration of forensic medicine into Takamol, and participants reportedly agreed to this addition to the referral mechanism. This change has however not yet been reflected in an updated Takamol document, which is the responsibility of the MoSA, and continued advocacy is needed to achieve this. It is further necessary to clarify the different entry points of victims into the referral system, if and when they will be examined by a forensic doctor as a consequence of referral, and review case management data to enhance efficiency and effectiveness of existing arrangements.

In 2015, 24 nurses and midwives (17 female and 7 male) started with the forensic nursing training. It became apparent during the training that sex does not necessarily determine the level of sensitivity

50 The Takamol Project is a project being jointly implemented by WCLAC and Juzoor – a Palestinian health NGO – with funding from the European Commission. The aim of the project is to develop a sustainable legal-health-social service referral system for women victims of violence in Palestine. The three year funding for the project began in 2009, and WCLAC has plans to continue to support training and awareness-raising referral system for service providers following the completion of the current project plan at the end of 2011 http://www.wclac.org/english/etemplate.php?id=1124
towards victims of SGBV, as some female participants expressed much stronger conservative views of female victims of SGBV than some of the male participants, who took part because of their seniority in the concerned hospital departments. The training was completed in September, 2015, with 19 (13 female and 6 male) receiving their certificate of participation. The relatively high level of drop-out has been the consequence of continuing professional and personal responsibilities of participants during the training. The training has been well-received, although some participants noted that a stronger emphasis on domestic violence (which concerns psychological, physical and emotional violence) instead of only sexual violence would have been appreciated considering prevalence rates in the West Bank. Further follow-up to this training has been recommended, including by providing more hands-on experience.
III. CONCLUSIONS

All stakeholders have been able to move beyond the difficult start of the forensic project, and focus on achievements thus far, current challenges and/or the road ahead. The relevance of the forensic project is still unquestioned, as forensic services are needed for quality evidence during criminal proceedings. The project’s design has however been less straightforward, which has partially been the consequence of different views on how to proceed with strengthening these services in the West Bank. The participatory nature of decision-making processes involving different government counterparts caused initial delays in implementation, but also led to the necessary ownership of the implementation process and results. In the case of the Forensic Science Laboratory, this has resulted in a productive working relationship between UNODC, the PCP and laboratory staff. With different views on ownership and the direction of work undertaken in forensic medicine, a concerted effort must be made by all stakeholders to move forward in this particular area.

Different external factors have contributed to the level of efficiency of the forensic project, such as the financial status of the PA, resulting in delays in recruitment, the absence of any infrastructure of the forensic science lab (which had to be built from scratch), staff rotation and changes in leadership in the MoJ and the National Centre for Forensic Medicine (with the director being located in Gaza), the capacity of the project team in East-Jerusalem in the first 1,5 years, and lengthy procurement procedures and import and visa restrictions of the Israeli government. Although most factors are outside UNODC’s immediate scope of influence, lessons learned point to the need to design a more realistic planning and implementation process, thereby taking into regard that participatory decision-making processes require investments in time and other resources, and that capacity-building processes cannot be completed overnight; ensuring sufficient senior-level technical and programmatic project support capacity on the ground to facilitate such processes; and, making sure that expectations of all stakeholders are carefully managed in terms of time-frames, inputs and expected results.

The forensic project could not have been undertaken without the partnerships with government counterparts, civil society and the donor. In light of the shift from capacity-building to applying skills/using equipment in the next two years, the role of the JTF must be reviewed to strengthen the working relationship between the Forensic Science Laboratory and the National Centre for Forensic Medicine. Additionally, from a more internal orientation during the initial years of project implementation, the action radius must be broadened to include other criminal justice actors, including different sections of the PCP, to strengthen their awareness and knowledge about the role forensic evidence can play in court, and to agree on standard operating procedures in terms of communication, transfer of evidence and reporting. The current work on drafting legislation and by-laws is crucial to provide clarity to all stakeholders. The same is necessary with respect to the interlinkages between the forensic nursing component and the national referral system for victims of SGBV called Takamol.

Despite the earlier mentioned constraints, the forensic project has to some extent been effective. The final two years of the forensic project will be crucial to show-case the results of all the hard work of the past years, and to ensure the sustainability of results. The review and use of indicators that are SMART can provide a means to provide evidence with respect to the functioning of the two forensic bodies. In 2016, the three technical sections of the Forensic Science Laboratory are expected to complete their
training. The laboratory will open in a phased manner, initially with the two sections that are expected to complete their training first. The forensic nursing component will also become operational in 2016, and practice will demonstrate if and how investments made benefit the execution of forensic medicine in the West Bank, and provide appropriate services to victims of SGBV. In 2017, six of the eight fellows are expected to have completed their training, and will return to the West Bank to strengthen capacity of the National Centre for Forensic Medicine. The work on strengthening forensic services will not be completed at the end of 2017. It is however expected that the foundation in terms of infrastructure, equipment and staff capacity in forensic services provided under the project will contribute to a stronger justice system with due consideration for human rights in the West Bank, although gains can only be expected in PNA-controlled areas.
IV. RECOMMENDATIONS

The following recommendations concern the road ahead of the forensic project, and are all directed at UNODC. However, the majority of these recommendations can only be undertaken in close cooperation with relevant counterparts in the PCP/MoJ, MoJ and the MoH.

The project team of the forensic project is recommended to continue with, and support the completion, of technical training of the forensic science staff and the eight fellows in forensic medicine until the end of 2017. This also applies to the management training and training on ISO standards. The team is further recommended to develop a mentoring plan for the different sections of the Forensic Science Laboratory, which clearly delineates the types of mentoring and testing, frequency, mentors; continue work on the strategic plans of the Forensic Science Laboratory and the National Centre for Forensic Medicine; and, facilitate the translation of strategy into operational plans. It is further advised to engage in a dialogue with PLAC at the Palestinian Standards Institute to prepare for accreditation of the laboratory.

Additionally, the project team is recommended to support the development of a strategy on the integration of fellows in the National Centre for Forensic Medicine in 2017 and 2018, and to carefully review the equipment/furniture needs of the National Centre for Forensic Medicine other than Ramallah within the overall framework of a strategic vision of the National Centre for Forensic Medicine. The team is further advised to review the development/use/integration of SOPS in the context of the development of the legislative framework, to review the current status and division of responsibilities in order to continue the work of the procedures manual for the National Centre for Forensic Medicine. Additionally, the two monographs must be followed up on, including their translation into Arabic and their endorsement by the MoJ.

In the field of forensic nursing, the project team is recommended to continue training and support to nurses and midwives on forensic medicine, support getting clear procedures from the MoH, in close cooperation with the MoJ/pathologists, on the use of the forensic medicine space and capacity in hospitals, and get more clarity on the application of standards, such as unhindered access to the forensic medicine space in the Hospital in Ramallah, security issues and the protection of victims of SGBV.

Various recommendations have also been provided on coordination. The project team, in collaboration with concerned stakeholders, is recommended to review the objectives of the JTF, and consider a stronger focus on streamlining and coordinating activities of forensic scientists and forensic doctors, especially in light of the upcoming opening of the Forensic Science Laboratory. Consider the development of a ToR to clarify the objectives, roles and responsibilities of the members of this task force. Furthermore, the project team is advised to organize, in addition to training sessions, also workshop style activities between forensic science and forensic medicine practitioners and representatives of the judicial sector to strengthen coordination and effectiveness, including by reviewing existing reporting templates and other information sharing modalities. It is also recommended to assess existing data-management, including archiving, systems of the Forensic Science Laboratory and the National Centre for Forensic Medicine to strengthen these systems and/or link these to the more widely used data-management system called Mizan.

As the main focus of the forensic project has thus far been rather oriented at the two forensic services, the gradual shift to expand cooperation with other criminal justice actors may also require establishing stronger links with international actors. The project team is recommended to examine the possible
expanded role of the donor coordination group, especially with respect to evidence storage, transfer and examination, and possible upcoming discussions on prioritization of evidence submission to the Forensic Science Laboratory. The team is further recommended to examine more closely activities undertaken by other agencies to avoid duplication, and continue, and possibly strengthen, communication lines with EUPOL COPPS related to the work of their planned forensic science expert.

In the field of project management, the project team is recommended to strengthen the existing logframe to turn it into a comprehensive tool to support the measurement of results of the entire project period, strengthen the monitoring system and develop a corresponding data management system, reflect decision-making based on recommendations given by experts in project documentation, mainstream human rights more comprehensively in the project, including in the indicators measuring the outcomes and objective, and update and expand the gender strategy of the forensic project, and use this consequently for performance management. The team is also advised to monitor UNDP activities in the field of procurement and finances to build up a file on performance, which could possibly be used for further discussions if deemed necessary, and ensure that the evaluation team of the final project evaluation has evaluation and criminal justice expertise, as well as specific forensic science and forensic medicine expertise to review the forensic project comprehensively. A review of the budget of the final project evaluation in relation to the size and composition of the evaluation team is therefore also recommended.

Last but not least, UNODC ROMENA and relevant sections at UNODC headquarters are recommended to continue providing senior support to the project team in East-Jerusalem, and consider regular visits of senior management to support cooperation with all actors in Ramallah. The team is also advised to develop a forensic project phase II to ensure continuity in support. The IEU is recommended to develop a discussion paper on the relationship between different types of monitoring and mid-term and final project evaluations in order to guide future programme and project design, monitoring and evaluation.
V. LESSONS LEARNED

The lessons given below came mainly to the fore during the analysis of key findings in the section of efficiency. These lessons can possibly be taken into regard when designing similar projects in other contexts and/or when implementing projects with more than one counterpart in complex political environments.

Design

The project document was designed in 2010-2011 on the basis of a needs assessment undertaken by the donor in 2009. The project was launched approx. three years later, and implementation began approx. 3.5 years later in April 2012. Although a two-week project planning mission was undertaken in January, 2012, to ensure that the earlier identified project components were still valid, this planning activity was not adequate considering the time between the original needs assessment and the actual start of the project. Therefore, in case of similar long periods between the needs assessment and the start of the project, a more extensive planning phase should be introduced in the design of the project to review existing needs, and develop a detailed multi-year planning document together with the main counterparts.

The planning mission of the forensic project was undertaken without the participation of the Senior Technical Advisor (with project coordination and management responsibilities) who arrived over two months later. Different views were shared about the decision-making process at that time. One view was that the project implementation plan drafted in March 2012 following the inception mission was left in draft form so the Senior Technical Advisor could participate in the planning and decision-making process. The plan remained an unfinished draft until December 2013. A contrasting view was that decisions about the substance of the main project components had been made prior to his arrival. This led to complications, especially as not all decisions provided sufficient detail to facilitate planning. A lesson is that a project planning mission cannot be undertaken without the participation of all key stakeholders, including the Senior Technical Advisor/international project manager who will manage the implementation of the project.

The Senior Technical Advisor was the main point of contact for relevant counterparts, the project coordinator and the only expert of the project team in East Jerusalem. In light of the complex political environment, the different ministerial counterparts and the lack of clarity on the road ahead, combining these functions into one position was not realistic considering the work load of the different sets of responsibilities. A good practice emerged when a national project coordinator was recruited with extensive PA experience to take on the responsibility of daily coordination and communication with the main counterparts. This led to a situation whereby the international project coordinator could focus more on the overall coordination of the forensic project.

Additionally, a lesson learned was that a project with similar scope can benefit from a more careful analysis of the needed expertise in the field of forensics. Considering the different sets of specialization in forensic science and forensic medicine, the main areas addressed by the project must ideally be reflected in the field-based team.
The decision to locate the field office in East Jerusalem also meant a physical separation between project management and the main counterparts in Ramallah. The position of UNODC is that security considerations (for staff but also UNODC premises) come into play, and that operating from Ramallah, with international staff, would have led to safety risks and a frequent suspension of activities. Furthermore, it is preferable to be close to UNDP to monitor the administrative/financial aspects of the project. Another view is that Ramallah is relatively safe, and that staff must be closer to project sites and main counterparts, in particular when these are otherwise separated by physical barriers such as roadblocks, checkpoints and/or a wall. Moreover, although not regarded as a requirement of technical assistance projects, the project team, or at least part thereof, can be more integrated into the office environment of the main government counterparts, especially when mentoring begins to take on a more prominent role in capacity-building work.

Duplication of efforts may arise in some project settings in which several donors operate with the same actors, and covering the same thematic areas, such as criminal justice reform and gender. It is therefore necessary to liaise with all actors to get a fair understanding of implemented activities and results before developing and organizing similar activities, unless these clearly show an added benefit. Continuous mapping is therefore necessary in such areas to keep abreast of developments.

In similar complex projects, ensure that sufficient budget is available for mid-term and end-of-project evaluations to recruit a team comprising an evaluation expert and technical experts.

A good practice is the development of implementation plans or logframes for specific components of the forensic project, especially as the entire scope of the project cannot be easily captured in one overall plan or overview because of the project’s complexity. This facilitates monitoring.

Another good practice has been the use of external consultants to undertake assessments of laboratory staff undergoing training to examine progress made, and identify areas that need further attention. This provides an independent system of quality control.

Efficiency

Training modules can be developed on the basis of different methods, such as distance learning and the use of internet to access information on activities and course material. Such methods are only effective if participants have access to internet, and also sufficient time to study in their own time. Additionally, language skills (such as English) must also be taken into regard when preparing training modules. An assessment must therefore ideally be undertaken of the profile of students, their language skills, availability and constraints in online and offline/physical access of training location, before designing training curricula.

Partnerships and cooperation

The main lesson learned in relation to partnerships of the forensic project is that much effort is necessary to manage expectations of all stakeholders from the early stages of project implementation onwards. This is especially relevant if project planning has already covered several years and in light of the lengthy bureaucratic decision-making processes of all stakeholders in such projects.
ANNEX I. TERMS OF REFERENCE

UNITED NATIONS OFFICE ON DRUGS AND CRIME
Vienna

Terms of Reference of the
Mid-Term Independent Project Evaluation
Forensic Human Resource and Governance Development Assistance to the Palestinian Authority

PSEX02
State of Palestine
March 2015

UNITED NATIONS
New York, 2015
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II. List of background documents for desk review .......................... 23
III. List of CLP members ............................................................... 24
I. BACKGROUND AND CONTEXT

<table>
<thead>
<tr>
<th>Project number:</th>
<th>PSEX02</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project title:</td>
<td>Forensic Human Resource and Governance Development Assistance to the Palestinian Authority</td>
</tr>
<tr>
<td>Duration:</td>
<td>2011-2017</td>
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<tr>
<td>Location:</td>
<td>State of Palestine</td>
</tr>
<tr>
<td>Linkages to Country Programme:</td>
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<tr>
<td>Linkages to Regional Programme:</td>
<td>UNODC Regional Programme on Drug Control, Crime Prevention and Criminal Justice Reform in the Arab States (2011-2015) that was developed in partnership with the League of Arab States.</td>
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<tr>
<td>Linkages to Thematic Programme:</td>
<td>Thematic Programme on Research, Trend Analysis and Forensics</td>
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<td>Executing Agency:</td>
<td>UNODC (Programme Office in the occupied Palestinian Territory)</td>
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<td>Partner Organizations:</td>
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</tr>
<tr>
<td>Total Approved Budget:</td>
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</tr>
<tr>
<td>Donors:</td>
<td>Department of Foreign Affairs, Trade and Development (DFATD), Canadian Government</td>
</tr>
<tr>
<td><strong>Project Manager/Coordinator:</strong></td>
<td>Sarah Donnelly</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>---------------</td>
</tr>
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<td>Time period covered by the evaluation:</td>
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<td>Geographical coverage of the evaluation:</td>
<td>State of Palestine</td>
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<td>Planned budget for this evaluation:</td>
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<td>Core Learning Partners(^1) (entities):</td>
<td>UNODC Managers, Palestinian National Authority, Project field staff, Partner Organizations and donor</td>
</tr>
</tbody>
</table>

\(^1\) The Core Learning Partnership (CLP) encourages a participatory evaluation approach by allowing its members to participate in and provide feedback on key steps of the evaluation process. CLP members are the key stakeholders of the subject evaluated (project, programme, policy etc.) who have an interest in the evaluation. The CLP works closely with the Evaluation Manager to guide the evaluation process. The list of CLP members is to be found in Annex.
Project overview and historical context in which the project is implemented

The project is funded by Foreign Affairs, Trade and Development Canada (DFATD) and is implemented by UNODC in partnership with the Palestinian Ministries of Justice and Interior.

In the Palestinian National Policy Agenda (PNPA), which forms part of the Palestinian Reform and Development Plan 2008-2010 (PRDP), the Palestinian National Authority (PA) states that safety and security and good governance are two of four national policy goals towards which their actions must lead. Safety and security should lead to “a society subject to law and order, which provides a safe and secure environment in which the people of Palestine can raise their families and pursue their livelihoods and businesses, free from crime, disorder and the fear of violence.”

The PRDP determines that a strengthened civil and criminal justice system, including better forensic capacities, is a high-level objective for the PRDP period, to move towards the above policy goals. It is further stated that “Modern investigative tools, including forensic facilities, are needed to ensure effective prosecution of criminal and civil cases.” These objectives are further developed in the Palestinian Justice Sector Strategy which sets as a ‘guiding vision’ for the period 2008-2010 the development of the Institute of Forensic Medicine and the establishment of a criminal laboratory. The objectives in this regard are further defined in the Strategy and also include the development of expertise on matters relating to forensic medicine and forensic science. The needs have been repeated in the more recent ‘Objectives, Policies and Interventions of the Justice Sector Plan 2011-2013’. As part of the objective to guarantee fair trials, upgrading and developing specialized forensic medicine facilities and a forensic science laboratory are listed as the first priorities. The Security Sector Strategic Plan (2011-2013) also stresses the ability to collect and analyze forensic evidence as a needed capacity.

The overall objective of the project is to enhance the criminal justice system for men, women and children of the West Bank. To date the project outputs have included improved institutional capacity to deliver forensic services, increased harmonisation of criminal justice sector institutions, including institutions dealing with sexual and gender based violence (SGBV); and improved technical skills of forensic science and forensic medicine professionals, including women, in specialist areas such as firearms and tool mark identification and document examination, forensic autopsy and SGBV examinations.

Under the project, seven Palestinian doctors are studying towards a Higher Specialty Degree in Forensic Medicine at the University of Jordan. A continuing professional development programme for existing forensic pathologists is underway. The project is contributing to the expansion of Palestinian clinical forensic medicine service capability, especially as applied to sexual and gender-based violence. In this context, a memorandum of understanding (MoU) between the Ministries of Justice and Health was signed in October 2014. In accordance with the MoU, four forensic medicine clinics will be established in four West Bank hospitals. The existing infrastructure, legal framework and current training in relation to forensic nursing has been reviewed as part of preparations for a forthcoming training programme in forensic nursing and the establishment of new clinical forensic medicine facilities.

Measures to support effective governance of forensic services included the establishment of a legal and regulatory framework committee for forensic services, engagement of a local institution to undertake a review of the legal framework, a decision by the Ministries of Interior and Justice to develop one integrated legal framework for forensic services, standard operating procedures for forensic medicine and a quality management system for the forensic science laboratory.
An important aspect of the project is strengthening the forensic response to cases of sexual and gender-based violence (SGBV) across the board. A key feature in this context is the expansion of clinical forensic medicine service capability as applied to sexual and gender-based violence. Project staff have organised several workshops for judges, public prosecutors, police, forensic medicine practitioners and civil society organizations to improve awareness and increase gender-sensitisation amongst key stakeholders.

The fit-out and refurbishment works for a Palestinian Civil Police forensic science laboratory is complete. Scientific equipment, tools, chemicals, consumables, furniture and other materials have been procured for the laboratory and are used for training as well as future operations. Specialised training in quality management, firearm and toolmark evidence examination, document examination and drug analysis is ongoing. Palestinian Civil Police laboratory staff are currently receiving specialised in-country training delivered by international forensic experts.

Concerning approaches, policies, and coordination, including SGBV cases, project outputs have included increased harmonization between police, legal and justice sector stakeholders, including civil society organizations, among donors and multilateral organizations. Furthermore, under the project a “joint task force” has been established as a platform for senior managers from both the Ministries of Justice and Interior to meet regularly to discuss progress and issues in the field of forensic science and forensic medicine. A “forensic coordination group” has been established under the project to improve coordination and synergy amongst donors and international organizations working in the field of forensic science. Workshops have been held to review in detail the existing coordination mechanisms between different stakeholders, including the roles and responsibilities of each for the protection of victims of SGBV, to support an improved and comprehensive approach to SGBV case management.

The project also ensures that environmental impact, safety and facility sustainability is taken into consideration by developing technical plans for the forensic science laboratory facility. The aim of the plans is to enable the forensic laboratory facility to meet, to the extent possible, international health, safety and environmental standards, including waste disposal.

Justification of the project and main experiences / challenges during implementation

The origin of the project lies in the Palestinian National Policy Agenda, which formed part of the Palestinian Reform and Development Plan 2008-2010. This was further developed in the Palestinian Justice Sector Strategy 2008-2010 that sets as a “guiding vision” the development of forensic medicine capacity and the establishment of a forensic science laboratory. The overall project outcomes and the expected results are still highly relevant for the Palestinian National Authority. The lack of effective forensic services is often cited by Palestinian stakeholders as a major constraint in effective criminal justice reform.

Challenges faced during implementation, which led to certain delays, included the late signature of the project document by project counterparts. Timelines provided in the draft work plan (submitted with the project document on 21 April 2011) were based on obtaining prompt ministerial signature of the requisite project document and recruitment of project implementation unit staff. There were other delays in the initiation phase of the project. This was partly due to the highly technical nature
of the project, and it became clear that some of the thematic areas had to be more comprehensive and structured differently. For example there were changes to the study programme for the forensic medicine training programme and the study programme structure had to be changed from two years internal and two years external, to four years external. One doctor resigned and a replacement had to be found.

The geopolitical situation during 2014 adversely impacted project implementation. Due to the security situation in Israel, West Bank and Gaza during 2014, a number of incoming missions scheduled in July and August were necessarily postponed. Two UN Fellows (Palestinian doctors) studying forensic medicine in Amman under the project were denied a permit to enter Amman due to a temporary restriction on movement of male Palestinians aged 20-50 from Hebron. UNODC worked closely with UNDP to communicate the urgent need for a permit with the Israeli authorities. The fellows were allowed to return to Amman once restrictions on movement of Palestinians from Hebron had been lifted.

Project documents and revisions of the original project document

The original project document was signed in October 2011. Following a number of setback and delays in project implementation, the project underwent a number of necessary amendments. In recognition that amendments would be necessary to the overall workplan to ensure project delivery and completion, an extension proposal was submitted to the project donor. Endorsement of the extension request was provided by the project steering committee members in October 2014 and the extension request was subsequently approved by the project donor. The project has been revised to ensure alignment of the project with the Project Implementation Plan agreed upon between UNODC, the Palestinian Authority and the Government of Canada in April 2014, and to extend project duration until December 2017 to allow for the completion of activities as agreed upon under a newly developed project work plan. The project work plan indicates rescheduled activity dates. Furthermore, to strengthen both technical and administrative aspects of the project, the Project Implementation Unit (PIU) team was restructured.

UNODC strategy context, including the project’s main objectives and outcomes and project’s contribution to UNODC country, regional or thematic programme

Project objective:
Improved criminal justice system for men, women and children of the West Bank

Outcome 1:
Increased technical skills of forensic science professionals, including women, in providing forensic services in areas such as drug analysis, firearms and tool mark identification and document examination.

Outcome 2:
Improved ability of forensic medical professionals, including women, to conduct death investigations and provide gender-sensitive services to victims of abuse, particularly women and children.

Outcome 3:
Improved institutional capacity to manage and deliver integrated forensic medicine and forensic science services based on international best practices.

Outcome 4:
Enhanced understanding among police, legal and judicial authorities, decision makers and civil society of the role and importance of forensic services, including for sexual and gender-based violence (SGBV) and family violence cases.

Outcome 5:
Increased harmonization concerning legal frameworks, approaches, policies, and coordination, including SGBV and family violence cases: Between police, legal and justice sector stakeholders including civil society organizations, among donors and multilateral organizations.

The project relates to Sub-Programme 1 (Countering Illicit Trafficking, Organised Crime and Terrorism) of the UNODC Regional Programme on Drug Control, Crime Prevention and Criminal Justice Reform in the Arab States (2011-2015) that was developed in partnership with the League of Arab States. The project directly contributes to SB 1 outcome 5: ‘Countries in the Arab region use enhanced forensic and scientific services in support to the legal process.’ Indicator: ‘Number of countries in the region that make regular use of forensic services in their criminal justice systems, including medical forensic services, in line with internationally accepted standards.’

The contribution of the project to the UNODC Regional Programme is operationalised through three main components, namely:

- Strengthened technical skills of forensic practitioners;
- Strengthened management and oversight of forensic services based on international best practices; and
- Materials and tools available for operation.

The project is designed to be in line with the Thematic Programme Thematic Programme on Research, Trend Analysis and Forensics. There is no UNODC Country Programme for the State of Palestine.

II. DISBURSEMENT HISTORY

<table>
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<th>Expenditure (time period)</th>
<th>Expenditure in % (time period)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10,275,357USD</td>
<td>5,185,282 (31 Dec 2014)</td>
<td>50%</td>
</tr>
</tbody>
</table>
III. PURPOSE OF THE EVALUATION

Reasons behind the evaluation taking place

The **purpose of the evaluation** is to determine the extent to which planned objective and outcomes were achieved, so that lessons can be learned and serve as a basis for project planning, design and management.

Deriving from this purpose, the **specific objectives** of this evaluation are to:

- Formulate proposals for actions in order to improve or rectify any undesired outcomes.
- Measure the relevance of the project in the context of the development and governance of forensic services and validate results achieved against the project document.
- Provide a comprehensive assessment of the overall impact of the project on the development and governance of forensic services within the Palestinian National Authority (PNA) and vis-a-vis other interventions in the sector.
- Assess the sustainability of the project, including interventions in supporting this with the stakeholders.
- Serve as a means to empower stakeholders, target groups, and other beneficiaries through a participatory approach;
- Review the project’s efforts to mainstream gender equality, gender interventions and human rights.
- Discuss the main challenges faced by the project, including the ways in which UNODC has sought to overcome them.
- Inform a potential development and strategic repositioning of a new project/programme in the State of Palestine.

To respond to the above objectives, the evaluation team will assess the implementation of the project in terms of the quality and timeliness of inputs and outputs as well as the efficiency and effectiveness with which activities have been carried out. Management effectiveness should also be evaluated, including an analysis of the quality and timeliness of monitoring and backstopping by all relevant project parties.

**Assumed accomplishment of the evaluation**

The expected accomplishment of the evaluation is to highlight strengths, weaknesses, best practices and lessons learned from the project to date. This will serve as a basis for future activities and revisions, which will help further tailoring the project implementation of the local context.

**The main evaluation users**

The intended main users of the evaluation are respective beneficiaries, the Project team as well as the donor.
IV. SCOPE OF THE EVALUATION

The unit of analysis to be covered by the evaluation

The activities of project PSEX02.

The time period to be covered by the evaluation

From the beginning of the project PSEX02 until the end of the evaluation field mission (tentatively April 2015).

The geographical coverage of the evaluation

State of Palestine.

V. EVALUATION CRITERIA AND KEY EVALUATION QUESTIONS

Substantive scope

Notwithstanding the adherence to the UNEG and DAC Evaluation Criteria (Relevance, Effectiveness, Efficiency, Sustainability, and Impact), additional evaluation criteria regarding design, partnerships and cooperation, knowledge management, and other crosscutting issues such as gender and human rights should be considered. Specifically, the evaluation may be guided by the below indicative questions, Please note that these are only indicative and will be further developed by the evaluator as necessary.

Relevance

Extent to which the objectives of the project are continuously consistent with recipients’ needs, UNODC mandate and overarching strategies and policies.

- To what extent are UNODC services and products provided through this project relevant?
- To what extent are UNODC mandates translated adequately into this specific project?
- To which extent are there synergies or complementarities with other implemented interventions within this particular thematic area?
- To what extent are the project objectives still relevant?
- How well do the objectives reflect the specific nature of the problem?

Design
Extent to which (i) the logical framework approach was adopted, with measurable expected Performance Indicators at the country level, outcomes and outputs, performance indicators, including gender equality and human rights, targets, risks, mitigation measures and assumptions; and (ii) an appropriate participatory needs assessment and context analysis took place.

- To what extent are the problems addressed by the project and the project strategy, successfully dealt with- encompassing an assessment of the appropriateness of the objectives, planned outputs, activities and inputs as compared to any cost effective alternatives?
- To what extent have the executing modalities and management arrangements been relevant to deliver the programme outputs?
- To what extent have the stated project objectives been achieved, taking into account the “achievement indicators”?
- To what extent was the feasibility and effectiveness of the work plan achieved?
- To what extent was the feasibility within the budget and time available achieved?
- To what extent have the project documents provided clarity, logic and consistency

Efficiency

Measure of how resources/inputs (funds, expertise, time, etc.) are converted into outputs.

- To what extent is the governance structure adequate?
- How efficient are the reporting mechanisms related to the project?
- To what extent were the resources and inputs, including technical equipment used appropriately and efficiently, and converted into outputs in a timely and cost-effective manner?
- To what extent was the project funding mobilization and utilization efficient?

Partnerships and cooperation

Measure of the level of UNODC cooperation with partners.

- To what extent are UNODC partnerships in Palestine efficient and effective with regard to the implementation of the project?
- To which extent the UNODC takes advantage and maximizes its impact while working with partners and other stakeholders?
- Has working in partnership with other actors, CSOs, stakeholder’s etc. achieved long term results?
- To what extent is the cooperation with other UNODC offices (e.g. ROMENA) and UNODC HQ effective?

Knowledge management

Measure of how knowledge is selected, managed and used in the formation and implementation of UNODC and counterparts policies and programmes.

- To what extent has the project contributed to improve UNODC knowledge about the criminal justice and forensic services in Palestine?
- To what extent did UNODC share and use this knowledge?
- To what extent did this knowledge influence national policies?

Effectiveness

Extent to which the project activities achieves its objectives and outcomes.

- To what extent has the project achieved its planned results to date (objectives and outcomes)?
• To what extent have other results, which are not explicit in the project document, been achieved?
• To what extent is the progress, or lack thereof made so far, the result of external factors rather than of project activities? How did external factors impact on the effectiveness of the project?
• In general, what can be done to make UNODC project more effective?

Impact

Positive and negative, primary and secondary long-term economic, environmental, social change(s) produced or likely to be produced by a project, directly or indirectly, intended or unintended, after the project was implemented.

• What has been the overall impact of the project to date?
• What difference has the project made to key stakeholders, and beneficiaries at the local level?
• What are the social, economic, technical, environmental and other effects on the individuals, the community and institutions- wither short, medium or long-term, intended or unintended, positive or and negative?

Sustainability

Measure of whether the benefits of the project are likely to continue after its termination.

• To what extent are the project results likely to continue after the project completion?
• Do the beneficiaries accept the project, are they willing to continue and is there a capacity and motivation to manage the project?
• Can the activity become self-sustaining financially?
• Is the activity likely to continue after the donor founding or after a special effort such as a campaign ends?

Gender and Human Rights

Measure of (i) how the intervention is designed and implemented to align and contribute to HR & GE as defined by international conventions; (ii) how results were defined, monitored and achieved (or not) on HR & GE and processes that led to these results were aligned with HR & GE principles; (iii) how HR & GE integration led to benefits and related costs; (iv) how the intervention has advanced key factors that need to be in place for the long-term realisation of HR & GE. Further guidance on the incorporation of gender and human rights issues is provided in Annex 6.

• To what extent have men and women benefited /can be expected to benefit from the project?
• Have gender and human rights been mainstreamed in the development and implementation of the project?

Environment

Measure of how the intervention is designed and implemented to align and contribute to good environmental practices and monitoring as defined by internationally accepted standards; (ii) how results were defined, monitored and achieved (or not) on environmental standards and processes that led to these results;
• To what extent have internationally accepted environmental standards been taken into consideration and implemented?
• To what extent have interventions taken into consideration Palestinian capacity to regulate environmental hazards?

Lessons learned

• What lessons can be learned from the project implementation to date in order to improve performance, results and effectiveness in the future?
• What lessons can be drawn from unintended results?
• What best practices emerged from the project implementation to date?

VI. EVALUATION METHODOLOGY

The methods used to collect and analyse data and the sources of data

Secondary Research Methods

a. Desk Review

The evaluator will perform a desk review of existing documentation (please see the preliminary list of documents to be consulted in Annex 3).

Secondary sources for the desk review will include, among others:
• The project document and revisions
• Monitoring data
• Baselines (where these exist)
• Annual and progress reports
• Tools developed under the project and other supplementary documents
• Official communications with key stakeholders

b. Evaluability Assessment

Based on the desk review findings, a basic evaluability assessment could be carried out to identify the limitations to the evaluation since the scope of the evaluation could be affected by such limitations, e.g. does the baseline exist and can it be used? Will the evaluation be able to constitute the necessary evidence base?

An evaluability assessment examines the extent to which the programme can be evaluated in a reliable and credible fashion. It calls for the early review of the programme in order to ascertain whether its objectives are adequately defined and its results verifiable.

Some guidelines can be found on IEU’s website:
http://www.unodc.org/documents/evaluation/IEUwebsite/Evaluability_Assessment_Template.pdf
Primary Research Methods

Primary sources of data include, among others:

- Qualitative methods: structured and semi-structured interviews with key stakeholders, key representatives of different entities (face-to-face, by telephone or by webcam).
- Quantitative methods: survey questionnaires.

c. Phone interviews / face to face consultations

The evaluator will conduct phone interviews / face-to-face consultations with identified individuals from the following groups of stakeholders:

- UNODC staff in the State of Palestine, UNODC’s Regional Office for the Middle East and North Africa (ROMENA) and UNODC’s HQ;
- Partner government officials who are benefitting from and are directly involved in UNODC’s work in the State of Palestine;
- Representatives of the DFATD in Ramallah and HQ;
- Representatives of development partner/donor agencies who are contributing to UNODC’s work;
- Other UN agencies etc. as appropriate.

d. Field visits

The evaluator will undertake a field visit to East Jerusalem and the West Bank. In addition the evaluator will need to establish some sample of additional individuals or project sites needed to represent a full overview of the project.

e. Feedback on preliminary findings and recommendations

Prior to the end of the field mission, the evaluator will provide a debriefing to UNODC’s Project Implementation Unit and ROMENA on his or her preliminary observations.

The draft report will be reviewed by IEU as well as the project team (for factual errors) and only after initial clearance of IEU, will the draft report be shared with Core Learning Partners for comments.

The final report should be submitted to IEU for final review and clearance. A presentation of the key findings, conclusions and recommendations to national counterparts, donors and project staff will be planned for. UNODC’s Project Implementation Unit will be responsible for translating the final report into Arabic and for distributing the report to the relevant projects counterparts.

VII. TIMEFRAME AND DELIVERABLES
Time frame for the evaluation

The evaluation-process started with the ToR in February 2015 and is planned to be finalised by June 2015.

Time frame for the field mission

6 working days for the individual evaluator between 15 and 30 April 2015

Expected deliverables and time frame

The evaluator will have the overall responsibility for the quality and timely submission of all deliverables, as specified below. All products should be well written, inclusive and have a clear analysis process.

- Draft inception report, containing a refined work plan, methodology and evaluation tools; in line with UNODC evaluation guidelines and templates.
- Presentation of preliminary evaluation findings and recommendations to internal and external key stakeholders (if applicable).
- Draft evaluation report in line with UNODC evaluation policy, handbook, guidelines and templates.
- Revised draft report based on comments received from the various consultative processes (IEU, internal and external).
- Final evaluation report, in line with UNODC evaluation policy, handbook, guidelines and templates.
- Final PowerPoint presentation to stakeholders.

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<th>Deliverable</th>
<th>Output</th>
<th>Working Days</th>
<th>To be accomplished by (date)</th>
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<td><strong>Desk review</strong></td>
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<td>20 April 2015</td>
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<td>15 May 2015</td>
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<td>10 days</td>
<td>25 May 2015</td>
<td>Home base</td>
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<tr>
<td><strong>Evaluation mission: briefing, interviews and</strong></td>
<td>preliminary findings</td>
<td></td>
<td></td>
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<tr>
<td><strong>Drafting of the evaluation report</strong></td>
<td>Drafting of the evaluation report, Guidelines and Templates; submission to Project Management and IEU for comments;</td>
<td>7 days</td>
<td>30 August 2015</td>
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<td><strong>Incorporation of comments (including</strong></td>
<td>Incorporation of comments (including revisions according to IEU comments)</td>
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<td>2 September 2015</td>
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<td><strong>Draft Evaluation Report in line</strong></td>
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<td>14 days</td>
<td>16 September 2015</td>
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INDEPENDENT MID-TERM EVALUATION: PSE/X02 - Forensic Human Resource and Governance Development Assistance to the Palestinian Authority

<table>
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<tr>
<th>comments)</th>
<th>25 September 2015</th>
<th>PM after IEU clearance</th>
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<tr>
<td>Submission of cleared Draft Evaluation Report to Core Learning Partners (CLPs) for comments</td>
<td>29 September 2015</td>
<td>Home base; UNODC/HQ</td>
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<tr>
<td>Incorporation of comments of CLPs and finalization of report</td>
<td>4 day</td>
<td>Home base</td>
</tr>
<tr>
<td>Presentation of findings (via Skype)</td>
<td>1 day</td>
<td>Home base</td>
</tr>
<tr>
<td>C. Final Draft Evaluation Report in line with UNODC Evaluation Policy, Handbook, norms, standards and templates; reviewed and cleared by IEU (can entail various rounds of comments) and presentation of findings</td>
<td>5 days</td>
<td>5 October 2015</td>
</tr>
<tr>
<td></td>
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<td>Home base; UNODC</td>
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</table>

1 EVALUATION TEAM COMPOSITION

Number of evaluators needed

The evaluation will be carried out by one independent evaluator.

The role of the evaluator

Carry out the desk review; develop the inception report, including sample size and sampling technique; draft and finalize the inception report and evaluation methodology, incorporating relevant comments, in line with the guidelines and template on the IEU website http://www.unodc.org/unode/en/evaluation/evaluation-step-by-step.html; lead and coordinate the evaluation process and the oversee the tasks of the evaluators; implement quantitative tools and analyze data; triangulate data and test rival explanations; ensure that all aspects of the terms of reference are fulfilled; draft an evaluation report in line with UNODC evaluation policy and the guidelines and template on the IEU website http://www.unodc.org/unode/en/evaluation/evaluation-step-by-step.html; finalize the evaluation report on the basis of comments received; include a management response in the final report; present the final evaluation findings and recommendations to stakeholders.

More details will be provided in the respective job descriptions in Annex I.

Absence of Conflict of Interest

According to UNODC rules, the consultant must not have been involved in the design and/or implementation, supervision and coordination of and/or have benefited from the programme/project or theme under evaluation.
2 MANAGEMENT OF EVALUATION PROCESS

Roles and responsibilities of the Project Coordinator

The Project Coordinator is responsible for managing the evaluation, drafting and finalizing the ToR, selecting Core Learning Partners and informing them of their role, recruiting evaluators (cleared by IEU), providing desk review materials to the evaluation team, reviewing the inception report as well as the evaluation methodology, liaising with the Core Learning Partners, reviewing the draft report, assessing the quality of the final report by using the Quality Checklist for Evaluation Reports, as well as developing an implementation plan for the evaluation recommendations as well as follow-up action (to be updated once per year).

Roles and responsibilities of the evaluation stakeholders

Members of the Core Learning Partnership (CLP) are selected by the project managers. Members of the CLP are selected from the key stakeholder groups, including UNODC management, mentors, beneficiaries, partner organizations and donor Member States. The CLPs are asked to comment on key steps of the evaluation and act as facilitators with respect to the dissemination and application of the results and other follow-up action.

Roles and responsibilities of the Independent Evaluation Unit

The Independent Evaluation Unit (IEU) provides mandatory normative tools, guidelines and templates to be used in the evaluation process. Please find the respective tools on the IEU website http://www.unodc.org/unodc/en/evaluation/evaluation.html. IEU reviews and clears all deliverables of this evaluation – Terms of Reference; Selection of consultants; Inception Report; Draft Evaluation Report; Final Evaluation Report.

Logistical support responsibilities

The Project Manager will be in charge of providing logistical support to the evaluation team including arranging the field missions of the evaluation team. For the field missions, the evaluation team liaises with the UNODC Regional/Field Offices and mentors as appropriate.

3 PAYMENT MODALITIES

Consultants will be issued consultancy contracts and paid in accordance with UNODC rules and regulations. The contract is a legally binding document in which the consultant agrees to complete the deliverables by the set deadlines. It is the responsibility of the requesting office to carefully consider and determine the estimated time period that the consultant would need, to be able to produce quality work and fully complete all the expected deliverables on time. It is
particularly essential that sufficient time is planned for the drafting and finalizing of the report, including the process of consultation and incorporation of comments and changes. Payment is correlated to deliverables and three installments are foreseen:

- The first payment (10 working days) upon clearance of the Inception Report (in line with UNODC evaluation guidelines, templates, handbook, norms and standards) by IEU;

- The second payment (14 working days) upon clearance of the Draft Evaluation Report (in line with UNODC evaluation guidelines, templates, handbook, norms and standards) by IEU;

- The third and final payment (5 working days fee, i.e. the remainder of the fee) only after completion of the respective tasks, receipt of the final report (in line with UNODC evaluation guidelines, templates, handbook, norms and standards) and clearance by IEU, as well as presentation of final evaluation findings and recommendations.

ANNEX I. TERMS OF REFERENCE FOR EVALUATORS

Independent Project Evaluation of the UNODC project

Terms of Reference for the International Evaluation Consultant

<table>
<thead>
<tr>
<th>Post title</th>
<th>International Evaluation Consultant</th>
</tr>
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<tbody>
<tr>
<td>Organisational Section/Unit</td>
<td>Programme Office, occupied Palestinian Territory</td>
</tr>
<tr>
<td>Duty station</td>
<td>Home base; mission to the State of Palestine</td>
</tr>
<tr>
<td>Proposed period</td>
<td>1 April 2015 – 30 June 2015</td>
</tr>
<tr>
<td>Starting date required</td>
<td>1 April 2015</td>
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<tr>
<td>Actual work time</td>
<td>29 working days</td>
</tr>
<tr>
<td>Fee Range</td>
<td>C (USD 390-560 per day)</td>
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1. Background of the assignment:

The main target for this assignment is to conduct the independent mid-term evaluation of the UNODC project PSEX02 in line with UNODC evaluation policy, handbook, templates and guidelines.

The aim of the UNODC project PSEX-02 is to contribute to the establishment of a criminal justice system with adequate forensic science and forensic medicine capabilities in the Palestinian Authority. It will increase institutional capacity to manage, utilize and sustain the forensic services system through improved structure and governance. The results of the project will include: 1) The knowledge, skills and competencies of forensic physicians, toxicologist and nurses on forensic
medicine will be enhanced; 2) The institutional capacity to manage forensic medicine services will be improved; 3) A solid governance framework for forensic medicine services will be established; 4) The knowledge, skills and competencies of forensic scientist and identification specialists on forensic science will be enhanced; 5) A temporary forensic science facility will be established; 6) A solid governance framework for forensic services will be established. The project is funded by Foreign Affairs, Trade and Development Canada (DFATD) and is implemented by UNODC in partnership with the Palestinian Ministries of Justice and Interior.

2. Purpose of the assignment:

The purpose of this evaluation is to conduct an independent mid-term evaluation of PSEX02. The evaluation is expected to provide forward-looking and actionable recommendations, based on the current level of progress made towards achieving the outputs and outcomes listed in the project document.

By carrying out this evaluation, UNODC plans to assess the impact of the project, how results achieved are sustainable, learn lessons from the implementation to date.

The purpose of the evaluation is to determine the extent to which planned objective and outcomes were achieved, so that lessons can be learned and serve as a basis for project planning, design and management.

Deriving from this purpose, the specific objectives of this evaluation are to:

- Formulate proposals for actions in order to improve or rectify any undesired outcomes.
- Measure the relevance of the project in the context of the development and governance of forensic services and validate results achieved against the project document.
- Provide a comprehensive assessment of the overall impact of the project on the development and governance of forensic services within the Palestinian National Authority (PNA) and vis-a-vis other interventions in the sector.
- Assess the sustainability of the project, including interventions in supporting this with the stakeholders.
- Serve as a means to empower stakeholders, target groups, and other beneficiaries through a participatory approach;
- Review the project’s efforts to mainstream gender equality, gender interventions and human rights.
- Discuss the main challenges faced by the project, including the ways in which UNODC has sought to overcome them.
- Inform a potential development and strategic repositioning of a new project/programme in the State of Palestine.

To respond to the above objectives, the evaluator will assess the implementation of the project in terms of the quality and timeliness of inputs and outputs as well as the efficiency and effectiveness with which activities have been carried out. Management effectiveness should also be evaluated, including an analysis of the quality and timeliness of monitoring and backstopping by all relevant project parties.

The intended main users of the evaluation are respective beneficiaries, the project team as well as the donor.
3. Specific tasks to be performed by the evaluation consultant:

Under the guidance of the Independent Evaluation Unit, the International Evaluation Consultant will undertake an Independent Mid-Term Project Evaluation of the UNODC project PSEX02. On the basis of the Evaluation Terms of Reference, key responsibilities include (i) development of the evaluation design with detailed methods, tools and techniques, (ii) leading the evaluation process and assigning responsibilities to team members, (iii) ensuring adherence to the UNEG Norms and Standards, UNODC Evaluation Guidelines and Templates, and the evaluation ToR, and (iv) ensuring overall coherence of the report writing, (v) ensuring that all deliverables are submitted in line with UNODC evaluation policy, handbook, guidelines and templates.

4. Expected tangible and measurable output(s):

The evaluation team leader will have the overall responsibility for the quality and timely submission of all deliverables, as specified below. All products should be well written, inclusive and have a clear analysis process in line with all UNODC Evaluation Guidelines, Templates, Handbook and Policy as well as with UNEG norms and standards.

- Draft inception report, containing a refined work plan, methodology and evaluation tools; in line with UNODC evaluation guidelines and templates – to be reviewed and cleared by IEU (can entail various rounds of comments);
- Presentation of preliminary evaluation findings and recommendations to internal and external key stakeholders (if applicable).
- Draft evaluation report in line with UNODC evaluation policy, handbook, guidelines and templates; – to be reviewed and cleared by IEU (can entail various rounds of comments);
- Revised draft report based on comments received from the various consultative processes (IEU, internal and external).
- Final evaluation report, in line with UNODC evaluation policy, handbook, guidelines and templates; – to be reviewed and cleared by IEU (can entail various rounds of comments);
- Final PowerPoint presentation to stakeholders.

5. Dates and details as to how the work must be delivered:

The consultant will be hired full time for 29 working days (home-based and field mission) over a period of three months between April and June 2015.

On the basis of the Evaluation Terms of Reference, s/he will carry out the following deliverables and tasks. A time-bound calendar will be proposed when the contract will be signed.

The detailed, tentative timeline for the evaluation is as follows:

<table>
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<tr>
<th>Deliverable</th>
<th>Output</th>
<th>Working Days</th>
<th>To be accomplished by (date)</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Desk review</td>
<td></td>
<td>7 days</td>
<td>20 April 2015</td>
<td>Home base</td>
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<td>Preparation of Inception Report</td>
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<td>30 April 2015</td>
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<td>15 May 2015</td>
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<td>A. Final Draft Inception Report in line with UNODC Evaluation handbook, norms, standards and templates; reviewed and cleared by IEU (can</td>
<td></td>
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<td>25 May 2015</td>
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<td>Deliverable</td>
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<td>------------------------------</td>
<td></td>
</tr>
<tr>
<td>A.</td>
<td>Final Draft Inception Report in line with UNODC Evaluation handbook, norms, standards and templates; reviewed and cleared by IEU (can entail various rounds of comments)</td>
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<tr>
<td>B.</td>
<td>Draft Evaluation Report in line with UNODC Evaluation Policy, Handbook, norms, standards and templates; reviewed and cleared by IEU (can entail various rounds of comments)</td>
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</tr>
<tr>
<td>C.</td>
<td>Final Draft Evaluation Report in line with UNODC Evaluation Policy, Handbook, norms, standards and templates; reviewed and cleared by IEU (can entail various rounds of comments) and presentation of findings</td>
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<td>Tentatively 5 October 2015</td>
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</table>
75 percent of the daily subsistence allowance and terminals is paid in advance, before travelling. The balance is paid after the travel has taken place, upon presentation of boarding passes and the completed travel claim forms.

**Payments will be made upon satisfactory completion and/or submission of outputs/deliverables and cleared by IEU.**

6. **Indicators to evaluate the consultant’s performance:**

Timely and satisfactory delivery of the above mentioned outputs as assessed by IEU (in line with UNODC evaluation policy, handbook, guidelines and templates as well as UNEG Standards and Norms)\(^{52}\).

7. **Qualifications/expertise sought (required educational background, years of relevant work experience, other special skills or knowledge required):**

Advanced university degree (Master’s degree or equivalent) in social sciences, economics or related field, with specialized training in evaluation; technical expertise in various evaluation methodologies and techniques, including multiple stakeholders and post conflict situation; 12 years of progressive experience in evaluation design methodology (qualitative and quantitative models); prior experience in planning, designing, implementing, analyzing and reporting results of qualitative and quantitative studies including survey design and implementation; experience in policy planning and policy analysis; academic qualifications or experience in the subject of the evaluation such as forensic science, criminal justice, organized crime, and experience and knowledge of the UN system is an asset; previous work/research/evaluation experience in the Middle East; understanding of gender and human rights considerations is an asset; excellent communication and drafting skills; fluency in oral and written English is required; the ability to communicate in Arabic is an asset.

The consultant should demonstrate:

- extensive knowledge of, and experience in applying, qualitative and quantitative evaluation methods;
- a strong record in designing and leading evaluations;
- technical competence in the area of evaluation (advanced university degree or practical experience);
- excellent communication and drafting skills in English; proven by previous evaluation reports

\(^{52}\) Please visit the IEU website for all mandatory templates and guidelines to use in this evaluation: [http://www.unodc.org/unodc/en/evaluation/normative-tools.html](http://www.unodc.org/unodc/en/evaluation/normative-tools.html)
Absence of Conflict of Interest

According to UNODC rules, the consultant must not have been involved in the design and/or implementation, supervision and coordination of and/or have benefited from the programme/project or theme under evaluation.

Ethics

The evaluators shall respect the UNEG Ethical Guidelines.

ANNEX II. LIST OF BACKGROUND DOCUMENTS FOR THE DESK REVIEW

- Project document;
- Project implementation plan
- Project revision;
- Project Monitoring Report (1 and 2);
- Semi-annual and annual progress reports;
- Manuals and tools developed under the project;
- Sample project documentation (mission reports, training evaluation forms, training reports);
- UNODC evaluation guidelines, templates, handbook, policy

ANNEX III. LIST OF CLP MEMBERS

<table>
<thead>
<tr>
<th>Type</th>
<th>Organisatio</th>
<th>Name</th>
<th>Designation</th>
<th>Locatio</th>
<th>Email</th>
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</table>

54 Please include the information, if this person is e.g. an implementing partner, donor, recipient, UNODC HQ, UNODC field, UN agency, etc.
55 Please include the name of the organisation the person is working for.
<table>
<thead>
<tr>
<th>Field</th>
<th>Agency</th>
<th>Name</th>
<th>Position</th>
<th>Location</th>
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<tr>
<td></td>
<td>UNODC</td>
<td>Sarah Donnelly</td>
<td>Project Coordinator/Forensic Expert</td>
<td>State of Palestine</td>
<td><a href="mailto:Sarah.donnelly@unodc.org">Sarah.donnelly@unodc.org</a></td>
</tr>
<tr>
<td></td>
<td>UNODC</td>
<td>Mutasem Awad</td>
<td>National Project Officer</td>
<td>State of Palestine</td>
<td><a href="mailto:Mutasem.awad@unodc.org">Mutasem.awad@unodc.org</a></td>
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<tr>
<td></td>
<td>UNODC</td>
<td>Khulod Nijem</td>
<td>National Project Officer</td>
<td>State of Palestine</td>
<td><a href="mailto:Khulod.nijem@unodc.org">Khulod.nijem@unodc.org</a></td>
</tr>
<tr>
<td></td>
<td>UNODC</td>
<td>Masood Karimipour</td>
<td>Regional Representative for North Africa and the Middle East (ROMENA)</td>
<td>Egypt</td>
<td><a href="mailto:Masood.karimipour@unodc.org">Masood.karimipour@unodc.org</a></td>
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<tr>
<td></td>
<td>UNODC</td>
<td>Julien Garsany</td>
<td>Regional Programme Coordinator</td>
<td>Egypt</td>
<td><a href="mailto:Julien.garsany@unodc.org">Julien.garsany@unodc.org</a></td>
</tr>
<tr>
<td></td>
<td>UNODC</td>
<td>Justice Tettey</td>
<td>Chief, Laboratory and Scientific Section</td>
<td>Austria</td>
<td><a href="mailto:Justice.tettey@unodc.org">Justice.tettey@unodc.org</a></td>
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<tr>
<td></td>
<td>UNICRI</td>
<td>Leif Villadsen</td>
<td>Deputy Director, UNICRI (previous Deputy Regional Representative, ROMENA)</td>
<td>Italy</td>
<td><a href="mailto:Villadsen@unicri.org">Villadsen@unicri.org</a></td>
</tr>
<tr>
<td></td>
<td>PA</td>
<td>Brigadier Ozreil</td>
<td>Head of the National Programme on Drug Control, Crime Prevention and Criminal Justice Reform in the State of Palestine</td>
<td>State of Palestine</td>
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<tr>
<td></td>
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<td>Brigadier Abdul Jabbar Burkan</td>
<td>Forensic Science Laboratory</td>
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<td></td>
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<td>Lt. Col Najeh Samara</td>
<td>Forensic Science Laboratory Director</td>
<td>State of Palestine</td>
<td><a href="mailto:najehsamara@yahoo.com">najehsamara@yahoo.com</a></td>
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<tr>
<td></td>
<td>PA</td>
<td>Lt. Col Nazih Jaradat</td>
<td>Forensic Science Laboratory</td>
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<td><a href="mailto:n.jaradat@hotmail.com">n.jaradat@hotmail.com</a></td>
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56 Please include the designation/job title of the person.
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<tr>
<th></th>
<th>Ministry of Justice</th>
<th>Deputy Director</th>
<th>State of Palestine</th>
<th>Email Address</th>
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</thead>
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<td>National Counterpart</td>
<td>Deputy Director</td>
<td>Munjed Abdullah</td>
<td>State of Palestine</td>
<td><a href="mailto:saloul@moj.pna.ps">saloul@moj.pna.ps</a></td>
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<td>National Counterpart</td>
<td>Deputy Director</td>
<td>Dr. Saber Aloul</td>
<td>State of Palestine</td>
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<td>Dr. Ashraf Al Qadi</td>
<td>State of Palestine</td>
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<td>National Counterpart</td>
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<td>Yusra Illawi</td>
<td>State of Palestine</td>
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<td>National Counterpart</td>
<td>Deputy Director</td>
<td>Dr. Rayan Al Ali</td>
<td>Al Najah University</td>
<td><a href="mailto:ralali@moj.pna.ps">ralali@moj.pna.ps</a></td>
</tr>
<tr>
<td>National Counterpart</td>
<td>Deputy Director</td>
<td>Dr. Amjad Izz Eldein Hussein</td>
<td>Al Najah University</td>
<td><a href="mailto:amjadhs@najah.edu">amjadhs@najah.edu</a></td>
</tr>
<tr>
<td>National Counterpart</td>
<td>Deputy Director</td>
<td>Ibrahim Salem</td>
<td>Ministry of Health</td>
<td><a href="mailto:ibraheemsalem8@hotmail.com">ibraheemsalem8@hotmail.com</a></td>
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<td>Amal Abu Awad</td>
<td>Ministry of Health</td>
<td><a href="mailto:amalabuawad2012@yahoo.com">amalabuawad2012@yahoo.com</a></td>
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<tr>
<td>Other stakeholder</td>
<td>Juzoor</td>
<td>Marina Zayed</td>
<td>State of Palestine-Ramallah</td>
<td><a href="mailto:mzayed@juzoor.org">mzayed@juzoor.org</a></td>
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<tr>
<td>Other stakeholder</td>
<td>Birzeit University</td>
<td>Mahmoud Alawneh</td>
<td>Birzeit Institute of Law</td>
<td><a href="mailto:MAlawni@birzeit.edu">MAlawni@birzeit.edu</a></td>
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<tr>
<td>Other stakeholder</td>
<td>RITAJ Managerial Solutions Ltd.</td>
<td>Nisreen Musleh</td>
<td>General Director</td>
<td><a href="mailto:ramallah@hotmail.com">ramallah@hotmail.com</a></td>
</tr>
<tr>
<td>Donor</td>
<td>DFATD</td>
<td>Khaled Rajab</td>
<td>DFATD</td>
<td><a href="mailto:khaled.rajab@international.gc.ca">khaled.rajab@international.gc.ca</a></td>
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<td>Donor</td>
<td>DFATD</td>
<td>Steve Podesto</td>
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<td><a href="mailto:steve.podesto@international.gc.ca">steve.podesto@international.gc.ca</a></td>
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<tr>
<td>Other</td>
<td>Holy Family</td>
<td>Hanan Saliba Bano</td>
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<td><a href="mailto:Hanan_saliba@yahoo.com">Hanan_saliba@yahoo.com</a></td>
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<tr>
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<td>rah</td>
<td>Family Hospital - Dealing with GBV victims</td>
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stakeholder
Hospital
rah

Family Hospital - Dealing with GBV victims
ANNEX II  DESK REVIEW LIST


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<td>Egypt/Italy</td>
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