



## **EXTERNAL EVALUATION Complaints Handling Mechanism (CHM) Evaluation at the National Aid Fund (NAF)/ Jordan**



**INTEGRATED**  
from insight to impact

February 28, 2022

**Contents**

AKNOWLEDGEMENTS.....4

EXECUTIVE SUMMARY .....5

    SCOPE AND PURPOSE .....5

    EVALUATION QUESTIONS, METHODOLOGY .....5

    CONCLUSIONS .....6

    RECOMMENDATIONS .....7

INTRODUCTION.....1

    BACKGROUND AND CONTEXT .....1

EVALUATION PURPOSE AND SCOPE.....4

METHODOLOGY .....5

    EVALUATION QUESTIONS .....5

    METHODOLOGICAL APPROACH .....6

DATA COLLECTION METHODS, TOOLS AND SAMPLING .....7

    LIMITATIONS AND CONSTRAINTS.....9

EVALUATION FINDINGS ..... 10

    ACCESSIBILITY OF THE CHM ..... 10

    RELEVANCE OF THE CHM..... 13

    EFFECTIVENESS OF THE CHM..... 16

    SUSTAINABILITY AND SCALE UP PROSPECTS FOR THE CHM ..... 23

RECOMMENDATIONS..... 24

Annex 1: Documentary Review Insights..... 30

Annex 2: Data Collection Tools..... 33

Annex 3: The key stakeholders who were interviewed..... 46

Annex 4: Sampling Framework ..... 47

Annex 5: Evaluation Team ..... 48

## ACRONYMS

DAC	Development Assistance Committee
CFM	Complaints and Feedback Mechanism (CFM)
EQAS	Evaluation Quality Assurance System
FCR	Findings, Conclusions, Recommendations
FGDs	Focus Group Discussions
CHM	Complaints Handling Mechanism
CFM	Complaints and Feedback Mechanism
GBV	Gender Based Violence
IVR	Interactive Voice Response
KII	Key Informant Interviews
MEL	Monitoring, Evaluation and Learning
NAF	National Aid Fund
OECD	Organisation for Economic Co-operation and Development
WFP	World Food Programme
WB	World Bank

## List of figures

### Figures

<i>Figure 1: CHM Staff during a working -day .....</i>	<b>Error! Bookmark not defined.</b>
<i>Figure 2: INTEGATED's Mixed Methods Approach for This Assignment.....</i>	6
<i>Figure 3: Data Sources Used for Data Triangulation .....</i>	7
<i>Figure 4 NAF's Takaful Brochure.....</i>	10
<i>Figure 5: Beneficiary Awareness of Online Form.....</i>	11
<i>Figure 6 Beneficiary Awareness of NAF's Call Centre .....</i>	10
<i>Figure 7: Areas for Improvement as Identified by Beneficiaries .....</i>	11
<i>Figure 8: Programs Most Frequently Enquired About by Beneficiaries.....</i>	15
<i>Figure 9: Stakeholders and Staff positive sentiments about the CHM .....</i>	16
<i>Figure 10 CHM User Satisfaction Rate.....</i>	20

## ACKNOWLEDGEMENTS

This report is made possible by the support of the World Food Programme (WFP). It was developed by Dr. Suzanne Hammad, Yosra Al Sarraj, and Zeid Qiblawi of Integrated International. The team extends special thanks to Hind Farahat of the WFP, who has worked hand in hand with both the National Aid Fund (NAF) and the Integrated International team to bring this evaluation to fruition. The team would also like to thank the CHM Call Centre team for their support and commitment to the objectives of this evaluation. They are:

- Ayman Rabbaa
- Khawla Abu Sarara
- Mohammad Al Riahi
- Monther Maslat
- Victoria Al Whahshat

# EXECUTIVE SUMMARY

## SCOPE AND PURPOSE

As a country with one of the smallest economies in the Middle East, Jordan faces multiple strategic challenges in its efforts to combat hunger and poverty. In 2019, Jordan launched its National Social Protection Strategy (2019-2025) to guarantee “dignified living, decent work environment, and empowering social services” for all Jordanian nationals. The strategy is based on 3 pillars: Opportunity, Dignity, and Empowerment. The National Aid Fund is the core of Jordan’s social protection system, supporting Jordan’s most vulnerable (not refugees), and linking them to other actors in the social support system. Established in 1986 under Law No. 36, NAF is a semi-autonomous arm of the Ministry of Social Development (MoSD),<sup>1</sup> providing cash transfers to almost 100,000 households (7.5% of the Jordanian population with a poverty prevalence rate of 15.7% in 2018) in addition to other benefits for the poor, disabled and the elderly. In 2018-2020, NAF expanded coverage to an additional segment of the vulnerable population through the Takaful 1, 2, and 3 programs, and emergency cash assistance in 2020 in response to COVID-19, benefitting a total of 213,418 households.

The World Food Programme (WFP) has supported the National Aid Fund since 2018, striving to ensure the NAF has the institutional capacity to address its increasing caseload, and meet its obligations with respect to achieving the outcomes noted in the National Social Protection Strategy. As part of its assistance, the WFP has supported the establishment of a Complaints Handling Mechanism (CHM), inclusive of a fully staffed call centre receiving direct calls from the public, supported by a ticketing system and linked to a complaints and feedback online form within the NAF MIS.

The purpose of this assignment was to conduct an overall evaluation of the NAF-CHM with the objective of enhancing the capacity, effectiveness, and quality of Complaints and Handling Mechanism services, in addition to enhancing its integration with different units at NAF and any other referral pathways to other service providers. This report presents the findings, conclusions, and recommendations of this commissioned study undertaken by Integrated International in November 2021 to January 2022.

## EVALUATION QUESTIONS, METHODOLOGY

INTEGRATED adopted a mixed-methods approach to the evaluation, utilizing quantitative and qualitative data collection methods from November 2021 to December 2021. This evaluation was guided by a set of questions under the categories of accessibility, relevance, effectiveness, and sustainability. Against this evaluation framework, the team collected data from the following sources:

Data Collection Tool	Target Groups	Sample Size
Key Informant Interviews (KIIs)	Selected key stakeholders (donors)	11 key informants
Focus Group Discussions (FGDs)	CHM Staff (frontline)	1 FGD (9 staff members)
	NAF Beneficiaries	6 FGDs in total (North, Centre, South)
Beneficiary survey questionnaire	NAF Beneficiaries	485 survey respondents
Observation checklist	Digital system	Field visit

<sup>1</sup> Zureiqat, Ghaith, and Hadeel Abu Shama. 2015, *Social Protection and Safety Nets in Jordan*.

## FINDINGS & CONCLUSIONS

**Accessibility:** Overall, the findings affirmed that the call centre fills an important gap and is appreciated by NAF beneficiaries. Of the surveyed beneficiaries who reached a call center operator, 97% were successful in receiving the help they sought.<sup>2</sup> Beneficiaries in focus groups highlighted some of the advantages of the call centre, such as the confidentiality it offers, in addition to saving money and time from going to NAF branch offices. However, barriers inhibiting full access to all beneficiaries included low levels of awareness of the existence and purpose of the CHM, high wait times and lack of operator response during peak periods, and lack of call cost-coverage to the CHM. Those who knew of the CHM said they had heard about it mostly from social media (Facebook), google, website, or their local branch. These findings point to a trend of reliance on social media and smart phones for information and communication, which may place some populations without access to social media, internet and phones, at risk of exclusion from accessing the CHM. While for the most part the CHM is accessible to all, accessibility relies on availability of a phone, phone/data credit and/or internet access, which may exclude some vulnerable populations.

**Relevance:** The beneficiary survey findings revealed that of those who had successfully reached the call centre, the vast majority of callers (75%) had inquiries about their eligibility for NAF assistance, while only 5% of survey respondents reported calling to lodge complaints. The survey indicated a high satisfaction rate of 80% among callers who were able to reach the CHM call centre, with 97% of those that reached the call centre reporting that their use of the call centre contributed to them receiving NAF aid. For these beneficiaries the relevance of the CHM is high, as it enables them to receive the assistance and guidance needed. However, survey results reveal high levels of unawareness of the CHM. Of those who had not used the CHM, 78% of survey respondents reported not being aware of the CHM call center. Of those who were aware of the CHM, almost 80% did not know the hours of operation, while only 6% of survey respondents were aware that they could submit complaints online. Others in FGDs noted that the call centre staff did not always have answers to their queries, and were transferred from one department to the other or back to their closest branch office. The SMS ticketing system poses challenges to complain resolution, as it records the opening and closing of a complaint but not the resolution of the complaint, leaving beneficiaries unclear as to what the outcome of their complaint was. While relevance of the CHM to beneficiaries remains high, there is a need to improve awareness, outreach, responsiveness, and cohesion in CHM call resolution.

**Effectiveness:** There is consensus among all stakeholders that the CHM has effectively achieved its objectives. Established in 2019, the CHM's introduction coincided with both the expansion of the NAF caseload and the COVID emergency response, placing the CHM in a position to play a central role in enhancing NAF's capacity to support this expansion. The digitization of NAF systems also supported improved responsiveness of the CHM. Today the CHM is "a specialized support centre established to help beneficiaries" designed to assist beneficiaries throughout application, registration, home visits, feedback, follow up and appeal processes, through streamlined automated process of tracking, follow up, and reporting. This has resulted in a reduction of HQ visitors and pressure on branches. The CHM offers beneficiaries an avenue of accountability as well as a channel of communication with the affected communities.

While beneficiary satisfaction levels for those who access the CHM remain high, challenges noted reveal the opportunity to improve workflows for improved beneficiary responsiveness. Strengths of the CHM revolved around digitization of payments, the track ability of complaints, and the well-integrated mechanisms of registration applications

---

<sup>2</sup> A survey was conducted among NAF beneficiaries. The population surveyed consisted of those who used the CHM services and those who did not. Among those who did use the NAF CHM, 19% of respondents reported they were unable to reach an operator. Data from the survey therefore reflects three subgroups: those who used the CHM services, those who used the CHM services and reached a response, and those who did not use the CHM services. A full analysis of the survey can be found in the annexes.

and follow up. The CHM data also provides an opportunity, if utilized to augment MEL tracking and data-driven decision-making. Opportunities for improvement revolve around two primary areas: work flows that require cohesion and refinement of processes and coordination among referral departments; and MIS systems cohesion to ensure clear communication and tracking of beneficiary complaints.

Institutionally, there is a need to clarify the scope and linkages of the CHM vis-a-vis other NAF departments, especially by strengthening linkages to the branches. Finally, the demands placed on the staff are greater than their capacity to respond, leaving calls unanswered and tracking of incoming calls incomplete. CHM staff are trained to respond to Takaful queries, which limits their ability to support queries outside of Tankful. Staff feel overwhelmed, particularly in peak seasons, and run the risk of burnout or lowered performance of the CHM.

**Sustainability:** While the partnership with WFP has enabled the establishment, staffing and strengthening of the CHM, there is a recognized need to continue to support CHM capacity to serve all of NAF programming, as well as to plan for an eventual exit strategy. Institutionally, sustainability would require discussions and linkages to the larger national social protection framework, inclusive of budget allocations, and a wider scope of response beyond Takaful programming. Linkages to the Ministry of Social Development, as well as sponsorship from the private sector should form part of this discussion.

## RECOMMENDATIONS

### Address Current Workflow Gaps in Protocol and Supervision

**Adjust workflow processes that could enhance timeliness of response and efficient practices on-the-job at call center.**

- Facilitate call center staffs' access to information through one centralized database that provides on-screen access to all beneficiary data.
- Consider introducing an internal automated chat mechanism between staff, supervisor, key departments and branches to enable call centre staff to consult with the supervisor, to better respond to new queries.
- Encourage more efficient use of the CHM Manual as an all-encompassing reference for staff and workflow issues.
- Increase call center response capacity during peak seasons.
- Improve CHM staff capacities, skills, and wellbeing.
- Strengthen the supervisory role of CHM focal point and extend this oversight across all CHM channels with a view to streamlining CHM purpose and functioning.
- Benchmark CHM against established customer service provision in the corporate sector. To improve work processes, consider tapping into corporate expertise and benchmark CHM against their management and ways of working.

### Improve workflows within MIS Systems

**Fine-tune and unify the CHM digital system and develop its role as a repository of beneficiary data that can be used to enhance NAF programmes and planning.**

- Ensure that the digital infrastructure responds to the needs of the CHM, technical advisors in senior management, and streamlines beneficiary data across the different channels into one platform.
- Institute a number of additional technical amendments within the digital system to optimize loop closure mechanisms and efficiencies.
- Handover access and responsibility to NAF technical team to update/ amend CHM database.
- Utilize the MIS to provide evidence quality data and deeper analysis of calls, repeated questions, recurrent issues and concerns. Consider merging relevant databases within the MIS, and integrate a unified targeting process that takes into account different 'types of poverty' and respective target populations.

### Increase Awareness and Outreach

---

**Increase awareness and outreach of the CHM to wider affected community, and enhance inclusion/ access to all.**

- Ensure that vulnerable groups do not fall through the cracks (of NAF aid) and have equal access to the CHM for advice and support.
- Identify sustainable ways of financing a free hotline to enable more beneficiaries to reach CHM and address the cost of calls barrier to reaching the service.
- Improve outreach to communities through increased visibility of the CHM.
- Increase trust in the CHM system through reliability, response rate, and increased accountability.

**Increase Engagement of the Branch Offices****Better utilize branches in relation to the CHM. Capitalize on the trust and close proximity to affected communities.**

- Develop protocols, guidelines, and training workshops to clarify the role and relationships between branches and CHM.
- Activate CHM at branch level. Establish clear guidelines and procedures on branch offices' role vis a vis the CHM, enhanced technical capacity.
- Branch and HQ could lead research at community levels to update knowledge about protracted poverty and new forms of poverty, enabling and disabling factors, with a view to incorporating their findings into program direction and support mechanisms in place across the NAF.
- Mobilize branches in leading the shift towards empowerment of Jordan's poorest by organizing local skills-training and empowerment workshops, matching apprenticeships and employment opportunities in their community with beneficiaries, raising awareness about NAF's other empowerment and capacity building initiatives.

**Expand vision encompassing the larger set of NAF programmes**

Create an overall vision that drives a strategic plan and phased roadmap towards a more coordinated parts of NAF programs.

- Expand the scope of the CHM digital infrastructure to incorporate wider NAF programmes and beneficiaries.
- Focus on outcome, not just output measures.
- The CHM could make better use of NAF Social Workers to enhance its outreach to new areas/ hard-to reach communities.

**Phase 6: Sustainability of the CHM**

- Foster closer ties with MOSD and engage them in visioning of the contribution of NAF and CHM purpose. This would ensure their support and buy-in as the CHM expands, and pave the way for future resourcing within MOSD budget, for staff and other running costs, for example.
  - Recap of theory of change among partners at all levels. Consider engaging the CHM (and other departments) into the understanding their role in the NAF's overall theory of change, to better reinforce their role within the overall goals of the NAF.
  - Consider ways in which to enable a mindset shift from dependency to graduation. To the extent that the CHM can support pathways to graduation, these pathways can become part of referral support by the CHM.
-



# INTRODUCTION

## BACKGROUND AND CONTEXT

### Jordan's Social Assistance Strategy

As a country with one of the smallest economies in the Middle East, Jordan faces multiple strategic challenges in its efforts to combat hunger and poverty. It is estimated that poverty rates have increased from 14.4% to 15.7% in 2019<sup>3</sup>, while unemployment reached to 23.2%<sup>4</sup> in Q3 of 2021. Populations in Jordan such as youth in transition, persons with disabilities, and women often face challenges to employment and responsibilities such as unpaid care work at home, raising their socio-economic vulnerability.

To mitigate these challenges and more, Jordan launched its National Social Protection Strategy in 2019 to guarantee “dignified living, decent work environment, and empowering social services” for all Jordanian nationals. The strategy is based on 3 pillars:

- **Opportunity:** Government ensures a just, private sector-focused labor market based on decent working conditions and social security. Government enables families to be economically self-sufficient.
- **Dignity:** Government provides targeted, temporary social assistance to citizens who are unable to be economically self-sufficient, allowing them to maintain a basic level of consumption.
- **Empowerment:** Government provides universal, high-quality, basic services including education, health care, and services to special-need individuals that allow them to remain integrated within their families and communities.

As the largest poverty-targeted provider of social assistance programmes, the National Aid Fund (NAF) is a key player in achieving the strategy's goals. Currently, NAF's poverty reduction programs support over 380,000 vulnerable Jordanians through cash transfers, 60% of which are women. In 2018-2020, NAF expanded coverage to an additional segment of the vulnerable population through the Takaful 1, 2, and 3 programs, and emergency cash assistance in 2020 in response to COVID-19, benefitting a total of 213,418 households. NAF has been instrumental in reducing the economic risk caused by the COVID-19 pandemic, with the expansion of its Takaful programmes resulting in the reduction of poverty impact by approximately 12% within the first four months of the pandemic.<sup>5</sup>

However, 11% of households benefiting from NAF assistance remain food insecure, and 59% are vulnerable to food insecurity.<sup>6</sup> The WFP, in coordination with development partners including the World Bank (WB), UNICEF, UNCHR, and the European Commission, has worked towards expanding and strengthening the institutional capacity of the NAF and its programmatic reach. In addition to other lines of work, WFP has invested in the institutionalization and enhancement of NAF's Complaints and Feedback Mechanism, also known as the Complaints Handling Mechanism (and will be from here-on in this report referred to as the CHM). The CHM is the focus of this evaluation.

### Project Background

In its efforts to support national bodies and mechanisms in progressing towards the Sustainable Development Goal of Zero Hunger, WFP Jordan has joined efforts with Government representatives and counterparts to make sure the most vulnerable people in Jordan benefit from strengthened, effective, equitable and inclusive national social protection schemes (Activity 3 under Strategic Outcome 2 of the WFP Jordan Country Strategic Plan 2020-2022) for improved

---

3 WFP Jordan Country Strategic Plan 2020-22. Page 4. <https://docs.wfp.org/api/documents/WFP-0000108637/download/>

4 Jordan Department of Statistics. “23.2% Unemployment Rate during the Third Quarter of 2021”. [http://dosweb.dos.gov.jo/unemp-q3\\_2021/](http://dosweb.dos.gov.jo/unemp-q3_2021/)

5 World Bank - UNHCR MENA - “Compounding Misfortunes: Changes in Poverty since the onset of COVID-19 on Syrian Refugees and Host Communities in Jordan, the Kurdistan Region of Iraq and Lebanon”. Page 6. <https://documents1.worldbank.org/curated/en/878321608148278305/pdf/Compounding-Misfortunes-Changes-in-Poverty-Since-the-Onset-of-COVID-19-on-Syrian-Refugees-and-Host-Communities-in-Jordan-the-Kurdistan-Region-of-Iraq-and-Lebanon.pdf>

6 WFP Jordan Country Strategic Plan 2020-22. Page 4.

1 | Complaints Handling Mechanism (CHM) Evaluation at the National Aid Fund (NAF)/ Jordan

targeting, coordination, and expansion of gender-and age- responsive social programmes. The strategy posits the National Aid Fund (NAF) central role in delivering and administering social assistance programmes which has benefited a long-term partnership with WFP Jordan.<sup>7</sup> The National Aid Fund (NAF) is the core of Jordan's social protection system, supporting Jordan's most vulnerable (not refugees), and linking them to other actors in the social support system. NAF was established in 1986, according to Law No. (36), as an administratively and financially independent institution to assist disadvantaged Jordanian families<sup>8</sup>. The National Aid Fund implements poverty reduction programmes as the Government of Jordan's main safety net provider supporting over 150,000 vulnerable Jordanian households (29% of the total Jordanian population) through cash transfers. The NAF harbors an extensive network of 42 branch offices, as well as 16 smaller sub-branch offices closer to remote areas<sup>9</sup>, focused on service delivery throughout major cities and towns of Jordan. NAF provides targeted cash assistance to vulnerable households, for up to a maximum of 250 JOD per household per month. Starting in 2018, NAF with the support from development partners including the World Bank (WB), UNICEF, UNCHR, World Food Programme (WFP), and the European Commission, has worked towards expanding and digitizing the programmes. A budgetary increase to incorporate an additional 100,000 households into the assistance programmes was planned for 2021. The addition of these households will occur in annual batches between 25,000 up to 50,000 households.

WFP has invested in the institutionalization and enhancement of a Complaints Handling Mechanism (CHM). This includes a call centre with a ticketing system receiving direct calls from the public and linked to a complaints and feedback form on the Fund's online platform. WFP established the call centre in 2019 inside NAF HQ, and has since extended support in terms of staff, funds, and on-the-job training. After providing the infrastructure, WFP supported staffing by recruiting and training 11 operators, available for inquiries from 8:30 am-3:00 pm every day.<sup>10</sup>

In 2019, WFP and NAF signed an agreement based on which WFP provided technical support in the development of a CHM system that matches the exigencies of the new cash assistance programmes, as one of the main work streams that the agreement covers. Under the CHM component, the following technical support was provided:

- Reviewing CHM operational manual,
- Integrating NAF CHM tool with the NAF MIS, with assistance of a WFP service provider Optimiza
- Establishing a call centre, supporting the recruitment of its staff, building their capacity and providing regular oversight on how to handle received complaints and the referral mechanism

With support from the WFP, in June 2019, the NAF established a Support and Call Centre with 6 staff, who were trained on best practices, phone etiquette, NAF FAQs, and the ticketing system, with the goal of improving communication with affected populations, whether they are beneficiaries or non-beneficiaries in order to provide all necessary information, answer questions about the complementary support programmes, and follow up on complaints. The Establishment of the Call Centre included setting up the telephony system, ticketing system, computers, and sound-proof walls.

## **The CHM: Overview and Purpose**

---

7 WFP RFP21/JOCO/015

8 NAF Annual Report, 2020

9 NAF [https://naf.gov.jo/En/Pages/About\\_the\\_Fund](https://naf.gov.jo/En/Pages/About_the_Fund) The General Administration of the Fund oversees the provision of all services provided by the Fund through 42 (forty-two) branches located in various cities in the governorates and provinces of the Kingdom and through 16 branch offices spread in the countryside and in the Jordanian Badia regions. Source NAF website: [https://naf.gov.jo/En/Pages/About\\_the\\_Fund](https://naf.gov.jo/En/Pages/About_the_Fund)

10 WFP RFP21/JOCO/015

2 | Complaints Handling Mechanism (CHM) Evaluation at the National Aid Fund (NAF)/ Jordan

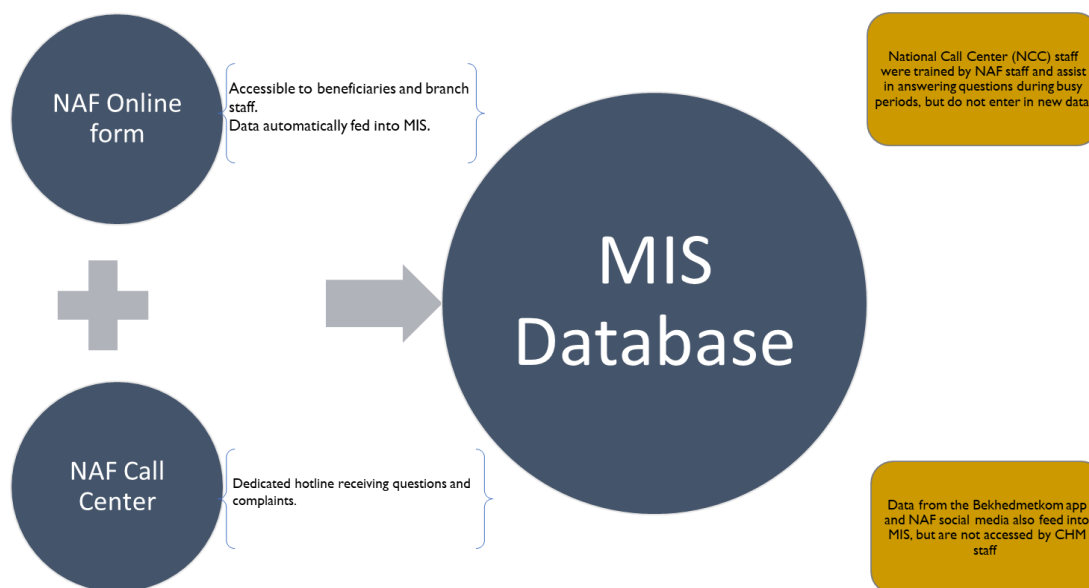
NAF was previously using a manual CHM approach through the Public Service desks available at its HQ and its branches located in all Jordanian governorates, which were responsible for receiving complaints and grievances applications (paper documents), processing the referral to concerned units and providing feedback through NAF staff working on the cases. The received complaints mainly consisted of grievances and requests for inclusion to benefit from NAF's assistance programs. Received complaints, and applications were not documented/saved for reporting and tracking. With the expansion of the coverage of NAF's programmes and with the move towards a new digital payment solution for its social assistance, NAF's Complaints and Handling Mechanism (CHM) needed to be enhanced in order to strengthen the communication with affected population, and to provide a centralized system to receive queries and feedback through several channels providing real-time assistance to beneficiaries, and when necessary refer cases to the correct technical focal points who take action to resolve arising issues in a timely manner.<sup>11</sup>

Figure 1: CHM Staff at Call Centre



The aim of the CHM is to respond to questions, complaints, and feedback regarding NAF operations. Specifically, as CHM staff report to NAF's "Complementary Support" department.<sup>12</sup> The CHM includes various channels of communication through which beneficiaries can reach out to NAF: the Call Centre which receives direct calls from the public, online feedback on the NAF Website, and Social Media avenues. These are all linked to the NAF wider MIS database. The below diagram illustrates these relationships as conceptualized in CHM's early days of establishment in a NAF report<sup>13</sup> produced in 2020.

Figure 2: Linkages between MIS and CHM



11 NAF's Complaints and Handling Mechanism: descriptive report

12 NAF. "Complementary Support System: Operation Manual" 2nd Edition (2020).

13 Monitoring, Evaluation, and Learning Capacity Needs Assessment of the National Aid Fund  
3 | Complaints Handling Mechanism (CHM) Evaluation at the National Aid Fund (NAF)/ Jordan

The staffed Call Centre is based at NAF Headquarters in Amman and operates as follows:

- Calls are received in a soundproofed room to ensure clarity and prevent external noise.
- Around 11 dedicated staff members receive and respond to calls
- Call centre staff are responsible for entering relevant information into the CHM database based on the purpose of each call, and beneficiaries can log in directly to the website themselves through the Supplementary Support (Takaful) portal by using same flow and categories. Each entry generates a ticket with an assigned automatic status tracking number which can be used to track each case during the follow up process.
- All calls are recorded for quality assurance and accountability.
- All devices are connected to the complaints and grievance registration system to record the purpose of all incoming calls and ensure that the inquiry is attended to by the relevant NAF staff.
- A display screen is linked to the system to monitor the number of calls received, number of calls on hold, rate of response to the calls, service or service level (which is the percentage of answered calls of those waiting in the pipeline), and the number of calls received per employee.
- An automated response system is available to introduce the call centre and its working hours providing callers with the option to have more information in the events of Public holidays, Line suspensions due to malfunctions, and/or busy lines.
- The support and help centre line number: 0791268888.
- The call centre operates from 8:30 a.m. to 3:00 p.m. on Sunday through Thursday.

With the establishment of the CHM, a manual was developed and translated into Arabic to serve as reference and guideline for the CHM operation. Staff received a series of training workshops and continue to receive support from line managers at NAF and ongoing FAQs on new programmes introduced.

## EVALUATION PURPOSE AND SCOPE

The World Food Programme (WFP) has consistently supported the National Aid Fund since 2018, striving to strengthen the NAF's capacity to achieve its strategic goals including those noted in the National Social Protection Strategy and increase its accountability towards the Jordanian beneficiaries it serves. With the Complaints and Handling Mechanism (CHM, hitting its 3-year mark, Integrated International was commissioned to undertake the first evaluation of the CHM. Further to a kick-off inception meeting held with the WFP's senior management team in November<sup>2nd</sup>, 2021 followed by a subsequent meeting at NAF offices, a common understanding of the WFP's key information needs and anticipated end uses of evaluation findings was established<sup>14</sup>.

The stated purpose of this assignment was to conduct an overall evaluation of the NAF-CHM with the objectives of:

- Further enhancing the capacity and effectiveness of the CHM;
- Improving the quality and scope of services provided by the CHM to beneficiaries and the public;
- Evaluating and enhancing the integration of the CHM with different units and systems at NAF, and its adaptability to the planned scale-up of NAF operations.

This report presents a detailed summary and discussion of the key findings of the evaluative study which took place over a period of 3 months (November 2021 - January 2022), in response to the above-stated objectives. It first outlines the key evaluative questions steering the evaluation and the rich methodological approach followed.

---

<sup>14</sup> An inception report was produced by the Integrated Evaluation Team and approved by WFP prior to data collection.

## METHODOLOGY

### EVALUATION QUESTIONS<sup>15</sup>

This evaluation was guided by a set of questions organized under the areas defined by WFP: accessibility, relevance, and effectiveness. An additional evaluation criterion - “Sustainability and scale up prospects” - was added to accommodate a few questions raised by WFP management during the kick-off meeting, as follows:

Table 1 Evaluation Questions

EVALUATION QUESTIONS
To what extent is the CHM/ call centre accessible to beneficiaries regardless of area of residence, gender, age, disability, socioeconomic status, literacy levels, nationality?
What is the level of awareness of the CHM/ call centre among NAF beneficiaries and the general public? To what extent is the CHM /call centre well-integrated with the broader NAF programmes/staff, and plugged into other relevant governmental and non-governmental service providers (referrals)?
To what extent is the CHM /call centre well-integrated with the broader NAF programmes/staff, and plugged into other relevant governmental and non-governmental service providers (referrals)?
What are the biggest challenges affecting accessibility and outreach to targeted beneficiaries? How can these be overcome?
To what extent are the scope and quality of services of the CHM / call centre responsive to the actual needs of beneficiaries and communities (external relevance)?
Has the operational context changed since 2019? If so, in what ways and how did the CHM adapt to this change, and to what extent is it prepared for other unanticipated contextual changes in the future?
How useful is the CHM/ call centre in supporting the NAF various programmes (internal relevance/ value added)?
Which entities support the CHM to succeed and why? Conversely how could the CHM potentially play a role in supporting other national institutions that share common strategic objectives?
How can the effectiveness, capacity, and operation of the CHM be further enhanced?
What have been the CHM’s main achievements and limitations since its launch in 2019?
Workflow effectiveness, reporting and MEAL: How can CHM daily operations and reporting mechanisms be optimized?
User satisfaction: To what extent are beneficiaries satisfied with the service provision of the CHM?
<u>Integration and referral</u> : Are there mechanisms in place to link the CHM with various NAF programs, and facilitate external referrals to other call centres or service providers? What are the barriers or facilitators for such linkages?
<u>Staff capacity</u> : Are staff well-supported to deliver on outreach, response, and referrals to beneficiaries?
Based on the partnership between WFP and the government, what has gone well with the WFP-supported cash assistance programme? And what needs further improvement- gaps and needs? What are the entry points for further partnerships that support this collaboration?

<sup>15</sup> Exchanges between the Integrated and WFP-NAF teams during the inception stage of the consultancy led to a critical step of fine-tuning and agreeing this predefined set of objectives and the specific evaluative questions.

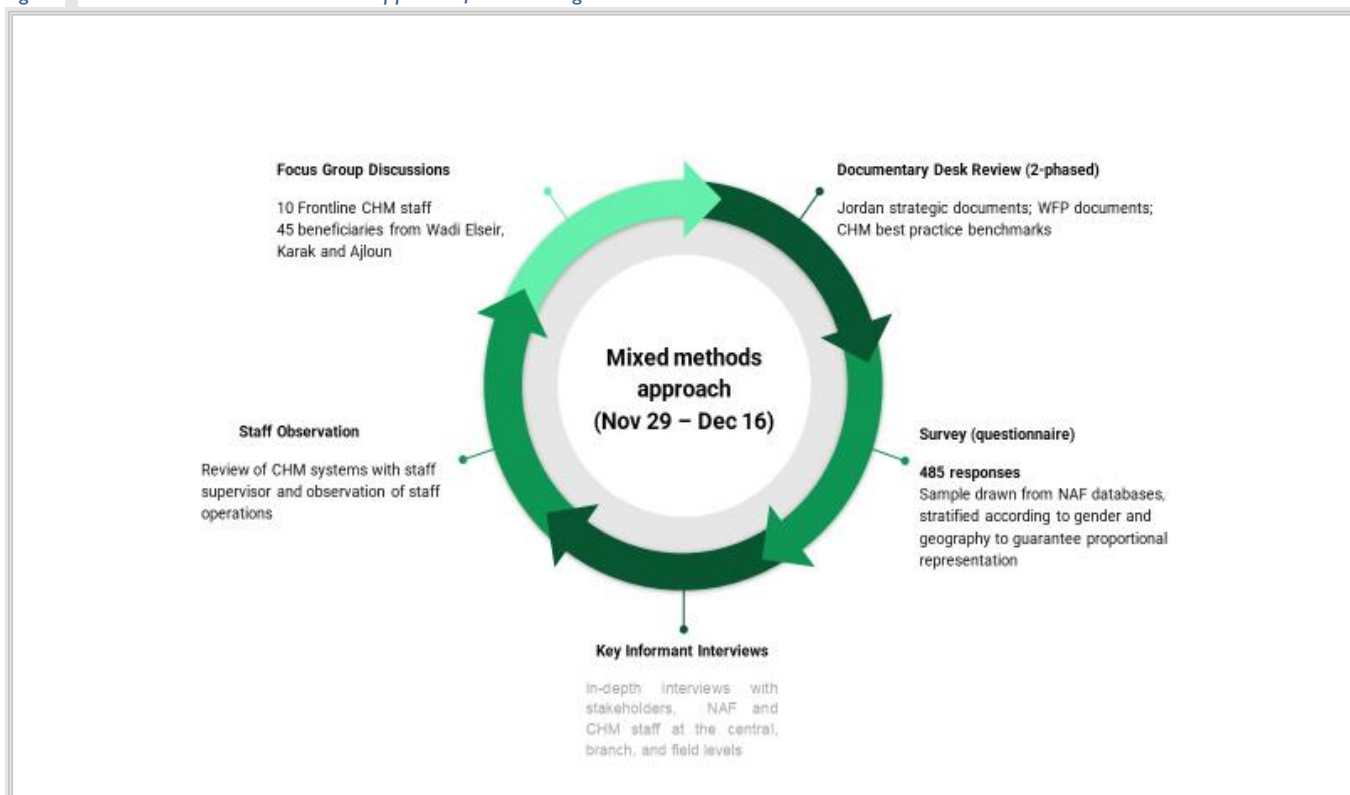
Exit strategy: How can efficient and smooth exit take place? What enabling factors are needed to establish this transition/transformation/handover? What capacity development is needed to enable that?

To what extent does NAF-CHM have the potential and capacity to step forward and play a central role in connecting with other relevant support services providers?

## METHODOLOGICAL APPROACH

The evaluation team attained insights and guidance from the documentary desk review and inception meetings with key stakeholders from WFP and NAF, and has accordingly developed a **mixed methodology approach** of both *qualitative* and *quantitative* primary data sources that were administered during the period mid-November to mid-December 2021. Data collection activities and detailed descriptions of data collection tools, and sampling frameworks are elaborated upon further below (iv).

Figure 3: INTEGRATED's Mixed Methods Approach for This Assignment

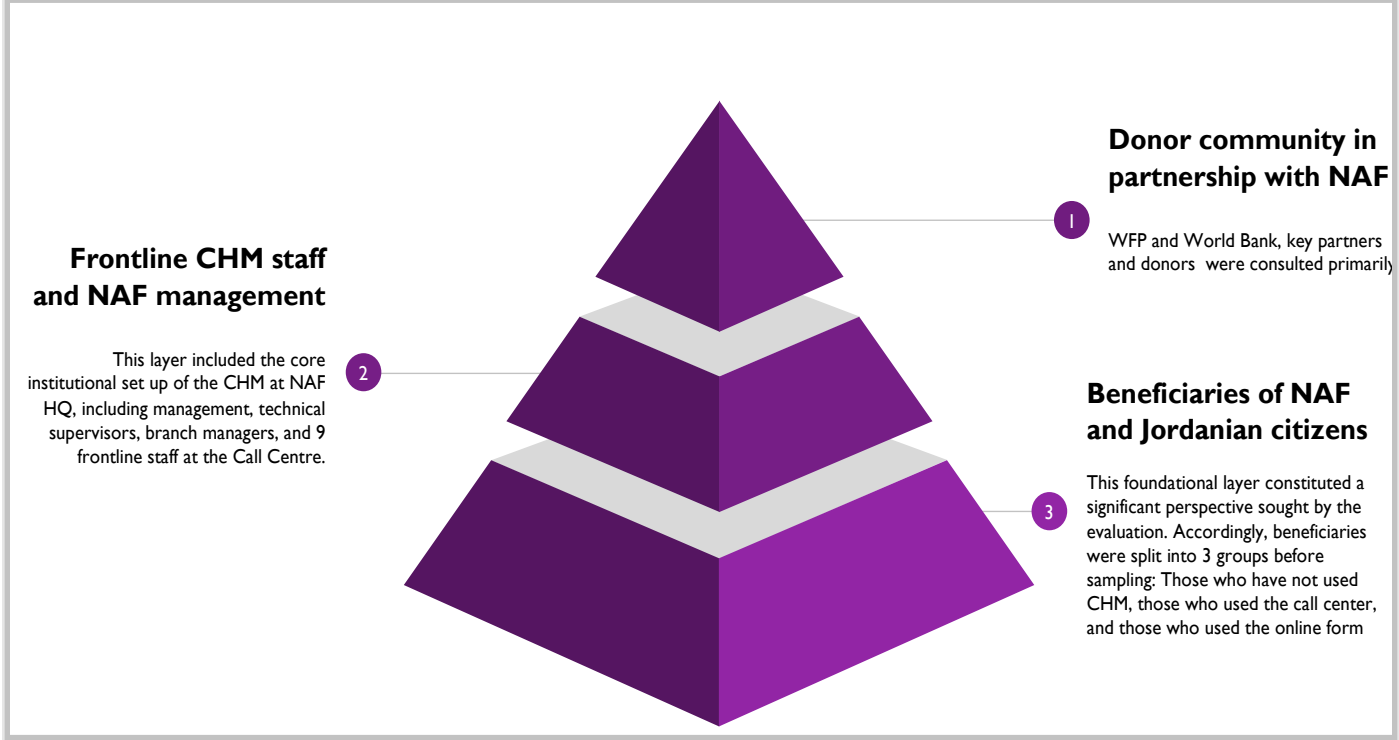


## Strengths of the Chosen Methodology

Considering this was the first evaluation to be conducted for the CHM, insights were collected from multiple perspectives: all stakeholders associated with the CHM in some way whether at strategic conceptualization and planning level, organizational and operational level, and beneficiary level. This served to tell a more holistic story and helped extrapolate the value and shortcomings of the CHM from several standpoints. Thus, the methodology was created with the intent to enhance the rigor of the methodological approach- and, consequently, the relevance and trustworthiness of its findings. The evaluation team triangulated data from multiple sources at the strategic, management, frontline, and beneficiary levels which served to increase the investigation's authenticity and trustworthiness (see Figure 2 below), yielding robust findings on which we based our recommendations to WFP and NAF. Further nuance was necessary at geographic and gender divides: the evaluation was designed with astute attention to cultural context and existing social norms. Moreover, this evaluation adopted a "Participatory Approach," that was gender sensitive, and all relevant stakeholders were fully engaged. To that end, the beneficiary satisfaction

survey sample was stratified by gender to ensure an accurate and proportional distribution of responses across genders. Furthermore, knowledge of local customs and power dynamics was taken into account and informed our sampling approach for FGD gender-homogeneous groups.

Figure 4: Data Sources Used for Data Triangulation



**DATA COLLECTION METHODS, TOOLS AND SAMPLING**

The data collection tools are listed in Table 2 below. As detailed further down in the report, they included key informant interviews with concerned stakeholders, ii) focus group discussions with NAF beneficiaries and CHM frontline staff, ii) a beneficiary survey questionnaire using a representative, gender-inclusive sample of NAF beneficiaries, and iv) an observation checklist of the call centre. Each tool was designed to meet and respond directly to the needs of the target group (s). In addition to NAF beneficiaries, NAF staff (at HQ and decentralized levels), CHM staff, WFP staff, and other identified stakeholders were interviewed and consulted. The documentary review of a few key NAF documents identified a few important issues which alerted the Evaluation Team to useful issues whilst conducting primary data collection (summarized at Annex 2); they have been considered in the Evaluation Team’s formulation of final recommendations.

Table 2 Data Collection Tools

Data Collection Tool	Target Groups	Sample Size
Key Informant Interviews (KIIs)	Selected key stakeholders (including NAF-CHM, WFP, and JFA partners namely World Bank, UNICEF)	11 key informants
Focus Group Discussions (FGDs)	CHM Staff (frontline)	1 FGD (9 staff members)
	NAF Beneficiaries	6 FGDs in total (North, Centre, South) 45 beneficiaries in total

Beneficiary survey questionnaire	NAF Beneficiaries	485 survey respondents
Observation checklist (call centre/digital system)	Digital system Accompaniment specialized staff	Field visit I technical expert

**Key Informant Interviews (KIIs):** INTEGRATED conducted in-depth interviews with key informants from NAF and CHM staff at the central, branch, and field levels, as well as other stakeholders such as WFP and the World Bank. Interviewees were selected in collaboration with the WFP team based on their affiliation with and familiarity with the project, their ability to answer questions about the effectiveness and relevance of the project and its activities, and their ability to inform lessons learned and areas for improvement. The in-depth interviews were guided by a semi-structured interview guide that included the key evaluative questions identified by the client in coordination with the Integrated team (See Annex 2). The guide was created to facilitate a relatively free-flowing conversation while also creating a standardized format to allow for a reliable, comparative analysis of data pertaining to the evaluation questions. Although the interview guides were based on the evaluation questions, they sometimes varied depending upon the identity of the informants in how they were articulated during the interview. The KIIs were conducted via Zoom and recorded after obtaining permission from the interviewees. In accordance with the evaluation questions, responses were summarized and interpreted in English for incorporation into the report. Annex 3 summarizes the stakeholders who were interviewed, organized by organization and role in relation to the CHM.

**FGDs in branch offices:**<sup>16</sup> FGDs were held to generate data on in-depth qualitative issues, and they were structured to respond to the evaluation questions while allowing for a free flow of discussion and probing by experienced facilitators. Six focus group discussions (FGDs) were held in each of the Jordanian regions of Central, North, and South. The Focus Groups were held in the following three governorates/localities, with two FGDs held in each: Amman, Ajloun, and Al Karak, with 6-8 beneficiaries in each. Each of which consisted of a mixed group<sup>17</sup> of NAF beneficiaries from an identified 'poor' community who had benefited from NAF CHM and those who had not. Engaging both of these categories in discussion aided in identifying issues of access, awareness, and perception of the service's added value. In other words, they were to capture the deeper qualitative nuances that would help us better understand beneficiaries' perceptions and experiences with the NAF-CHM. Two focus groups were held in each area, one all-male and one all-female, to ensure freedom of expression and minimize intercommunal and gendered power dynamics that may affect discussion and access to all perspectives. The total number of beneficiaries attended the FGDs was 45. An FGD guide (found in Annex 2) was used.

**FGD with CHM staff (frontliners):**<sup>18</sup> Another focus group was held at CHM offices with 9 of the frontline staff delivering the service to gauge their perspectives and experiences using the service and responding to calls since the CHM's introduction in 2019 and throughout the Covid19 period. The perspectives of frontline staff informed evaluation questions, which were triangulated with management and strategic informants on the one hand, and beneficiaries/end users on the other (See Annex 2 for the FGD guide and Annex 4 for the sampling framework).

INTEGRATED conducted a survey in order to assess beneficiary satisfaction. NAF beneficiaries were chosen through drawing a sample of the populations targeted based on agreed-upon representation: those who used the NAF CHM channels, and those who did not.<sup>19</sup> The beneficiary satisfaction survey was conducted over the phone, using NAF's national scale representative database of beneficiaries, from which the team accessed beneficiary contact information and data sets from the CHM. Before the survey was launched in the field, enumerators were trained to ensure that

16 Beneficiaries names will be kept anonymous for confidentiality purposes, as an ethical best practice.

17 The evaluation team held separate male and female focus groups to allow for gendered perspectives to emerge, as well as to ensure freedom of expression and to minimize intercommunal and gendered power dynamics that may affect discussion and access to all perspectives.

18 The names of CHM frontline staff will be kept anonymous for confidentiality purposes, as an ethical best practice.

19 Two sampling populations: those who used NAF's CHM, and those who did not, were specified by WFP.



they understood the questions. In addition, survey piloting was carried out immediately after to guarantee that the questions are clear to respondents, and that they cover all possible options. Annex 2 includes the survey questions.

Table 3 Survey Sample

External NAF CHM Evaluation - Beneficiary Satisfaction Survey		
Beneficiary Population Subgroup		Sample Size
Beneficiaries who have never tried to use the CHM		160
Beneficiaries who have tried to use the CHM channels	Those who have tried to reach the call centre*	26
	Those who used the call centre and online form*	131
	Those who only used the online form	168
<b>TOTAL</b>		<b>485</b>

\*30 beneficiaries surveyed tried to reach the call centre but were unable to get through to an operator.

**Proportional Stratified Random Sampling** was used for this survey, with a simple random sample calculated for the study population. The total sample was then split into 3 beneficiary groups in equal proportion.

- a. NAF beneficiaries who have not submitted complaints or feedback;
- b. Those who have used the call centre;
- c. Those who have used the online complaints form on NAF’s website.

Finally, the respondents were stratified into mutually exclusive strata based on their gender and geographical location (North, Centre, South), with each stratum receiving a portion equal to one-third of the sample size. This ensured quantitative generalizability for respective results with a confidence level of 95% and a margin of error of 5%. The total number of respondents surveyed is 485 (see sampling framework at Annex 4).

**NAF Call Centre Observation:** INTEGRATED conducted an observation of NAF call centre activities on December 12th, 2021. The evaluation team was taken through CHM protocols, data processing procedures, quality assurance and performance tracking methodologies, and referral pipelines by the on-duty supervisor. Staff also exhibited their ability to verify callers’ identities and assist them by accessing beneficiary information using NAF’s internal MIS database.

**LIMITATIONS AND CONSTRAINTS**

A few challenges were encountered by the evaluation team during the course of this study. One limitation was related to the timeframe for data collection, which was conducted during the time when a new NAF programme was being introduced. Accordingly, staff were mostly focused on responding to registration questions during observation, as opposed to complaints. A second issue was that all cases in the CHM (inquiries and complaints) were previously ticketed in order for the system to keep track of them, but due to the workload and time spent on ticketing, the CHM now only issues tickets to complaints. This has led to a lack of data on the demographic makeup of CHM callers and limited the population that could be sampled from to callers who have registered complaints. Additionally, despite being told that the evaluation is not about evaluating the branch and its services, but about the call centre service, beneficiaries kept talking about the branch services, some of which were positive and some of which were negative. This could be attributed to the fact that the branch manager or employee were present for the first 20 minutes to clarify some terms to beneficiaries, or because the focus group was held at the NAF branch. That said, the team made certain that they returned to the focus group objective of obtaining beneficiaries’ feedback and views/answers to questions about the call centre rather than the branch, and the team requested that the branch manager or employees not be present during the focus group.

## EVALUATION FINDINGS

### Evaluation of the CHM: A Synthesis of Findings

This section brings to the fore the primary themes identified through our cross-cutting analysis, synthesizing the key findings across the multiple perspectives sought through this evaluation and supported with evidence gathered.<sup>20</sup> A discussion of the key findings emerging from this evaluation is presented here, organized according to the evaluative criteria which guided our lines of inquiry: *accessibility, relevance, effectiveness, and sustainability*.

#### ACCESSIBILITY OF THE CHM

Overall, the findings affirmed that the call centre fills an important gap and is appreciated by NAF beneficiaries. Of the surveyed beneficiaries who reached a call center operator, 97% were successful in receiving the help they sought.<sup>21</sup> Beneficiaries from governorate level discussions highlighted some of the advantages of the call centre, mainly the confidentiality it offers, in addition to saving money and time from going to NAF branch offices. Barriers inhibiting full access to all beneficiaries were identified. These findings are summarized here.

**Awareness levels about the CHM:** Beneficiaries' awareness of the existence and purpose of the CHM was found to be low: Of those beneficiaries surveyed who had not used the call center, 78% reported that they were not aware of it. Subsequent FGDs confirmed that many beneficiaries were not aware that the CHM had been set up to handle complaints. Of those who were aware of the CHM, almost 80% did not know the hours of operation. Furthermore, only 6% of the beneficiary sample were aware that they could submit complaints online. This finding emerges against a backdrop of a CHM campaign through TV spots, brochures, mainstream and social media coverage, and high-level visits by HRH the King's visit. Additionally, branch offices continue to inform visiting beneficiaries about this option and refer them when needed. Most WFP and NAF stakeholders interviewed assumed that this coverage would have raised sufficient awareness of the CHM. Additionally frontline staff seemed to believe that "100% of our beneficiaries know about us." A few of the stakeholders interviewed felt that the CHM had not been given adequate focus next to programme information and webpage. Our informant from World Bank shared the finding from a rapid social assessment of the NAF taken in 2020 which had shown that 73%<sup>22</sup> of respondents had never used

Figure 5: NAF's Takaful Brochure

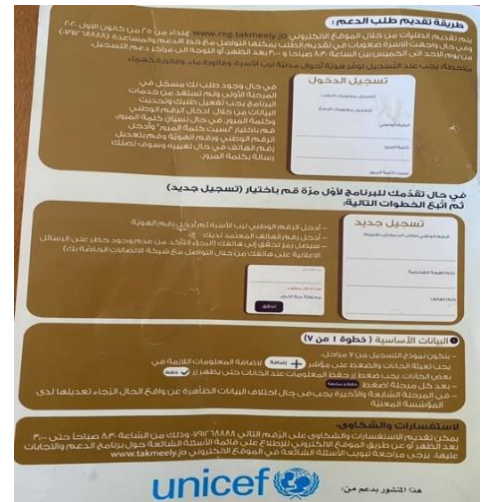


Figure 1 Beneficiary Awareness of NAF's Call Centre



20 These perspectives were: the CHM-NAF, the national project partner and home to the CHM- NAF (including NAF management, NAF branches, NAF-CHM frontliners), donors and partners to the NAF (WFP, World Bank), and the perspective of NAF beneficiaries (those who have as well as those who have not used the CHM service).

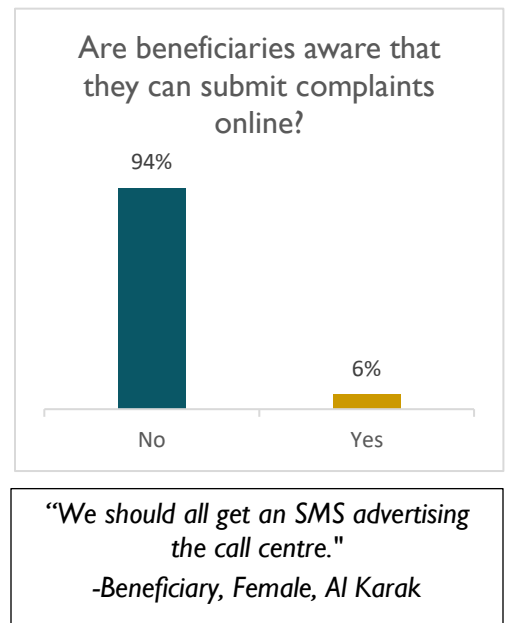
21 A survey was conducted among NAF beneficiaries. The population surveyed consisted of those who used the CHM services and those who did not. Among those who did use the NAF CHM, 19% of respondents reported they were unable to reach an operator. Data from the survey therefore reflects three subgroups: those who used the CHM services, those who used the CHM services and reached a response, and those who did not use the CHM services. A full analysis of the survey can be found in the annexes.

22 UNICEF (2020). Jordan Emergency Cash Transfer Project Additional Financing: Rapid Social Assessment  
10 | Complaints Handling Mechanism (CHM) Evaluation at the National Aid Fund (NAF)/ Jordan

the CHM. In spite of all that, this evaluation reveals that more awareness about the CHM, its purpose, and the advantages of using it, is still much needed.

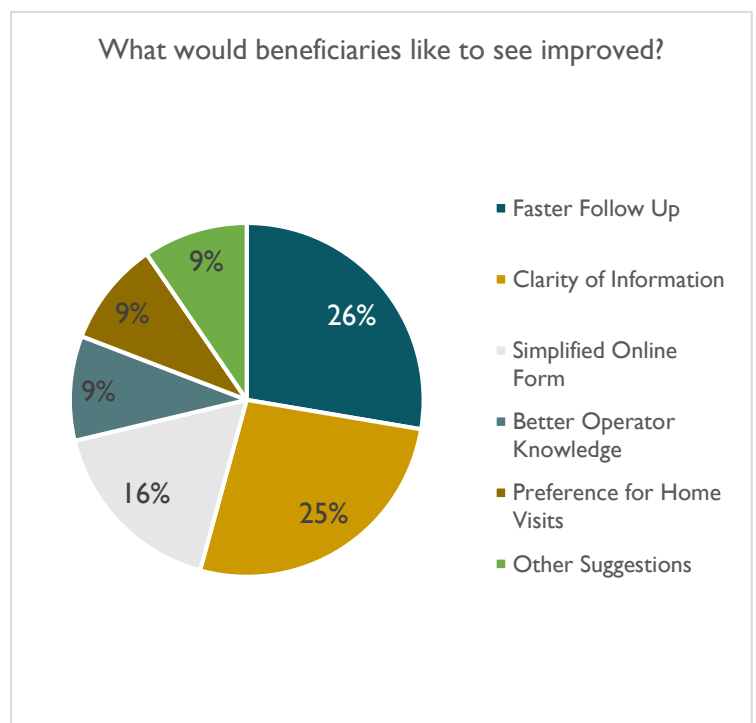
NAF social media was found to be the most effective way of raising awareness of CHM. According to beneficiaries, 66% of surveyed beneficiaries said they found out through NAF social media; just under a third through families, friends and community members, and the remainder (5%) on NAF webpage. This was confirmed by beneficiaries in FGDs, the majority of whom were unaware of the CHM but were aware of other relevant service providers' call centres such as that of the National Call Centre (NCC)<sup>23</sup>, Ministry of Awqaf, Zakat Fund, Ministry of Social Development, Orphans Centre, Albayader Centre, Tikiyet Um Ali among others. Those who knew of the CHM said they had heard about it mostly from social media (Facebook), google, website, or their local branch. These findings point to a trend of reliance on social media and smart phones for information and communication. It also points to the importance of word of mouth within the communities NAF mostly reaches out to, and the need to capitalize community-level outreach modes, namely branch offices and outreach staff. SMS messages could have been useful to advertise the CHM and online and call centre options. Further, frequent visits and positive relations with NAF branch offices indicated their certain role in advising beneficiaries of its added value.

Figure 7: Beneficiary Awareness of Online Form



**Barriers to accessing the CHM:** Probing further to identify barriers that stood in the way of accessing the CHM, the evaluation uncovered a number of issues. Even among those who had a good level of awareness about the call centre and the online form, the majority of beneficiaries: 79% of callers and 55% of online users said they did not use it because they did not need it. This is while 18% of callers and 36% of online users believed the CHM would not help them. This suggests a prevalent lack of understanding of the benefits associated with using the CHM. Our subsequent discussions with beneficiaries across the Kingdom and branch-level NAF staff confirmed this survey finding, illuminating our understanding further with another reason why they were reluctant to use the CHM: interviews revealed a widespread preference for face-to-face communication especially when it came to complaints. Indeed, this preference to being assisted by a staff member at the branch (or ideally the branch manager themselves) emerged as a repeated explanation for many beneficiaries' preference to swing by the branch office and resolve their problem there and then. According to a NAF branch manager, it was also because of the good

Figure 2: Areas for Improvement as Identified by Beneficiaries



23 A Memorandum of Understanding was signed with the National Call Centre to assist during peak periods.

relationships and trust built between branch staff and people from the community over the years: “the call centre has only been around for two years while we’ve become one family with our beneficiaries, they’ve gotten used to us.” Additionally, many were unaccustomed to using technology and “find it hard” to shift to electronic registration. To encourage beneficiaries to use the CHM, one branch manager had explained that it was “better for their own dignity rather than being seen in gatherings or banks [collecting aid]”. However, she still witnessed a preference for face-to-face interaction at her branch.

One of the barriers that appeared to be the most prominent amongst findings was that the call centre could be hard to reach which was frustrating to beneficiaries. Most beneficiaries who took part in the Karak district FGD said they had to try multiple times until they were able to reach an operator. Survey data indicated that just about a fifth of surveyed respondents never got through to an operator, while 40% of respondents reported that they got through after three attempts. Beneficiaries from our sample and the subsequent in-depth discussions across three regions of Jordan, said operators’ response time should be improved and the wait times were too long. For example, beneficiaries explained that sometimes the line was not picked up quickly, for some, it took up to 10 minutes or had taken 3-4 attempts at different times, while for a few others it took 3 minutes or less to get through to an operator. One beneficiary stated that it had taken him more than three days to get through. From frontliners’ perspectives, during peak times when pressure was high, there tended to be long queues. They had heard from some beneficiaries that they had to wait two days before reaching the CHM.

*"The branch provides us with all the details we need so there is no point calling the call centre. Also operators don't have enough information to deal with all our questions, so we prefer going to the branch."*

*-Beneficiary, Female, Al Karak*

A related issue for beneficiaries of FGDs was when they were transferred from one employee to the other to get the response they needed. Beneficiaries also faced frustration of being asked to revert to their branch when operators could not provide the information they needed after eventually getting through, necessitating a visit to the branch. This led to a sentiment that there was no need to use the CHM if the same information could be provided through a visit to their local branch. This indicates the need to build more legitimacy and trust through precedent and word of mouth. The CHM should demonstrate its ability to close loops every time with no exception, as that would encourage beneficiaries to continue using it and spread the word.

The cost of calling the CHM was also raised as a point of concern by beneficiaries and staff alike. The call centre line is not a toll free number. One female beneficiary from Al Karak explained “if somebody does not have a credit bundle, they may not be able to call the call centre, and those who do the waiting time would drain their credit.” As a result, beneficiaries, who themselves are among the most vulnerable in Jordan, are required to use their ‘call minutes’ or pay as you go cards to reach the call centre, which can be consumed rapidly due to long queues. To facilitate access by all, it was suggested that the phone call be free, possibly supported by corporate social responsibility from telecom operators. Ultimately a beneficiary line for the poor should be ‘free’ and accessible to all. This issue also applies to those without internet data to access the online form channel.

*"Lines are not free, especially if you're left waiting in the queue for a long time, you're still paying."*

*-WFP informant*

*"People just want to feed their kids bread. That's it. [The call centre] isn't really free if you don't have free minutes. They'd have to charge their phone and not everyone can."*

*-NAF informant, branch level*

A few other barriers to using the CHM included high levels of illiteracy among the target population, reliance on someone to help them call or go online, fear of not getting aid if they call as opposed to seeing a NAF official, difficulty remembering the number especially for older persons or persons living with disabilities, or not owning a smart phone.

**Which population groups are at most risk of exclusion?** Staff were unaware of any evidence to that end. Therefore it was difficult for them to ascertain the extent to which NAF beneficiary population groups were being excluded from accessing the CHM. There was consensus however that older persons, especially those with challenges to their

mobility or cognitive abilities, could be the most at risk of exclusion from NAF programmes. They would most probably need assistance from family members, neighbours or NAF staff to reach out to the call centre (whether by phone or online) and may find it more difficult to remember its phone number. Additionally illiterate beneficiaries or those with a lower educational attainment could experience exclusion due to their inability to understand and reach this new service. Further, the evaluation pointed to the added challenge faced by those living in remote areas who may not have a good network to call from, or may not have heard about the programmes, as a NAF manager explained “some may live in a tent with no TV, they may not have heard about the programmes.”

Having said that, the other side of that same coin could be the potential role which the CHM could play to enable these at-risk population groups to reach out. Awareness and ability to access the CHM for assistance, information, or grievance could empower population groups who are physically, geographically, or living with disabilities “without them having to leave their homes”. This is what the CHM should actively strive for. It also would be worth disaggregating incoming calls and inquiries by age group, governorate of residence, gender, and perhaps a question about how easy/difficult it was for them to reach the CHM.

*"Some may live in a tent with no TV, they may not have heard about the programme."*

*-NAF participant*

Two noteworthy issues regarding inclusion emerged from our data. One was a comment by an informant on whether the CHM had the mandate to *divert funds away* from heads of households who were found to misuse the aid. This was seen as one way of enhancing inclusion of family members in vulnerable situations such as these. The other was the realization that the needs of persons with disabilities was not covered in the CHM Operational Manual. To that end, the evaluation team concurs that a section within the CHM Manual providing guidance on how to ensure inclusion of those ‘at risk’ of falling could be useful. According to a technical specialist at WFP, this could easily be incorporated within the digital system as an amendment. She highlighted the importance of finding ways (via the system and staff awareness) to ensure inclusion of those most excluded, rather than focusing on exclusion criteria as is currently the case. Another consideration would be inclusion of beneficiaries of the monthly assistance programme who could benefit from reaching out to the CHM if and when they need to.

*"The call centre is helpful for those who cannot afford transportation, or who have children to care for at home."*

*- Female NAF beneficiary, Karak*

## RELEVANCE OF THE CHM

**Relevance of the CHM to the actual needs of beneficiaries:** Beyond the access issues identified through this evaluation, there is the important consideration of relevance and legitimacy of the CHM *from the perspective of its users*. This is because beneficiaries' assessment of the newly-introduced CHM relevance to their needs will influence whether they reach out to it or not. Our beneficiary survey findings showed that the vast majority of callers (75%) reached out to the call centre with inquiries about their eligibility for NAF assistance, while only 5% of calls were to lodge complaints. The survey indicated a high satisfaction rate of 80% among callers who were able to reach the CHM call centre, with 97% of those that reached the call centre said that their use of the call centre contributed to them receiving NAF aid. This was echoed in FGDs with beneficiaries. According to NAF and CHM staff, the call centre enabled many people to get the assistance they need, saving them time, effort, and reducing the load on branches. According to a WFP respondent, "there is now a phone people can call...it gives beneficiaries the reassurance that they are being heard."

*"I would give them [the call centre] 10/10 because they provided me with what I need and followed up with me, and I was satisfied with the follow up."*

*- Female beneficiary, Ajloun*

Findings indicate some discrepancies, however. 78% of the survey respondents were not aware of the CHM call centre, which raises the question of its relevance to the target population. While the CHM was described by the partners (WFP and World Bank) as a dedicated service of trained staff familiar with NAF programmes, some beneficiaries expressed some frustration at the call centre for not always having answers to their questions. In FGDs with beneficiaries, many stated that they were transferred from one department to the other or back to their closest branch office without having their problem resolved. Further, the SMS function was raised on numerous occasions by technical staff as well as beneficiaries, stating that after a complaint ticket is closed, beneficiaries receive an SMS stating that "their complaint was processed and closed," with no further information about the action taken. Because the SMS does not provide beneficiaries with information, they must contact the Call Center again to find out what action was taken in response to their complaint, which increases the number of people calling the Call Center. A proportion of the beneficiaries who had used the CHM added that they preferred follow up to take place through calls rather than SMS, which they often found vague and not sufficiently informative about their specific situation, while other beneficiaries stated that they prefer SMS follow-up when the network is down.

*"Before they would call the branch or the HQ operator, who would just transfer not really understanding the issues, so when you have a call centre with trained staff, a dedicated service to view all cases with mandate to respond, it saves time, effort, and avoids transfers to staff who are not relevant to the issue."*

- NAF branch level

**Continued responsiveness and relevance of the CHM during the pandemic:** During the Covid19 pandemic, the CHM demonstrated its ability to adapt and utilize its infrastructure to continue serving some 200,000 households (NAF informant). Staff initially used their personal phones then were provided with tablets to work from home, and 2-way SMS messages were activated intensively as the primary channel keeping beneficiaries informed and receive feedback from them. There were some informants who believed the response could have been more prompt as there had been a short gap of no open lines until the CHM got itself organized, which in effect led to a short gap in reporting. Having said that, the majority of informants from WFP and NAF management teams assessed the CHM's ability to continue their work remotely very positively.

According to a WFP Technical Specialist, the lockdown was an opportunity to "prove [the CHM] effectiveness; that it can work from anywhere and remain functional". Further, the inherent flexibility within the digital system was, according to a World Bank staff involved in the conceptualization of the CHM, designed intentionally to enable the CHM to accommodate changes, adapt, and expand along with new programmes as circumstances changed. CHM staff recommended access to laptops in the event of emergencies such as the pandemic as that would enable them to navigate multiple windows more effectively. Furthermore, the quick action to enroll the National Call Centre's help in receiving the increasing callers is well-regarded. In terms of preparedness for future emergencies, the digitization and multiple communication avenues in themselves make the CHM a valuable tool during 'normal' and 'abnormal' times and ensure that communication is not severed with beneficiaries under any circumstance. However, documented protocols and guidelines in such events would be an advisable measure, ideally incorporated within the CHM manual and supported by staff training.

*"The programmes were designed to adapt to strategic level changes. So there is no disconnect between strategy and operation."*

- World Bank informant

**Internal relevance:** The Evaluation also examined the extent to which the scope and quality of services of the CHM were *internally* relevant and had filled a gap within the organization. The CHM was initially set up to serve the Takaful programmes whose launch coincided with its establishment in 2019, and the expansion of programmes and increase in families affected by Covid-2019 necessitated working with people in new ways and increasing modes and channels of outreach. The CHM did respond to this need adequately through its multiple channels- online, phone, and social media. It allowed for a "higher level of transparency and efficiency when compared to older ways of doing things," according to World Bank representatives. Previously, things had been manually done, with no proper channels or

*"The CHM is one of our success stories that we are proud of. We take every visitor to show them the call centre"*

- NAF participant

referral processes to receive and address complaints adequately and systematically. The fully automated CHM system was well-integrated within the wider NAF MIS system. Further, the technology infrastructure was described by two branch level key informants as "excellent" as it enabled branch managers and staff to view personal data and hence work more effectively with their constituencies. It also made it possible to deal with the growing scope of work.

The Evaluation Team also asked whether the CHM had been able to support wider NAF programmes through an integrated approach that encompassed all beneficiaries' queries rather than solely Takaful programmes. According to our beneficiary survey, 72% of incoming calls were regarding NAF's complementary support system, and 25% for Takaful 2. Our guided observation of the system and FGDs with frontliners showed that callers who asked about NAF programmes other than Takaful were asked to go back to their closest branch, contact the NAF operator, or directed to the website. Since they were not technically part of the purview of CHM operators, and due to frontliners' feeling 'overburdened', there tended not to be any follow up on these incoming calls. Having said that, there was widespread consensus across stakeholders at HQ, branch, and donor levels that "it made sense" that the CHM be better utilized to advise and respond to queries and complaints regarding *all* NAF programmes. This line of thinking is also aligned with recent discussions regarding merging of programmes at NAF (Monthly Assistance beneficiaries and Benchmarks and Complementary Support programmes), whereby the CHM expansion would be a logical next step.

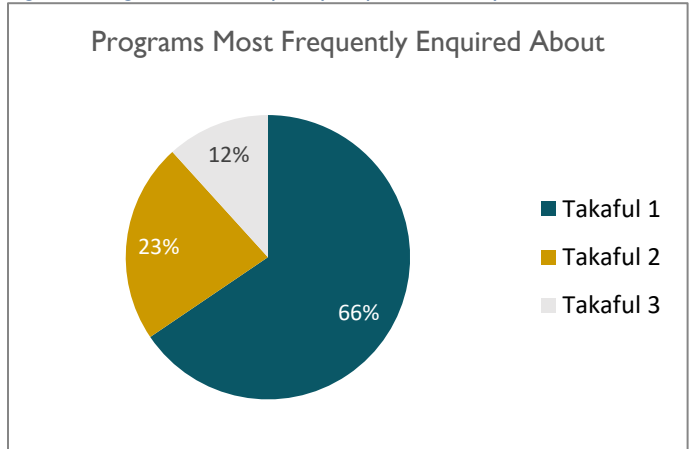
This, however, would require increased staff capacities in numbers, more thorough training, ongoing communication across units, and clarification of referral pathways and how and where the loop for different programmes would be closed. This expanded role could be facilitated if project cycles start at different times and do not peak simultaneously, explained a WFP participant. All NAF departments as well as branches would need more clarity about the CHM role, an issue that this evaluation found to be lacking at present. Stakeholder interviews also suggested the CHM's added potential to identify trends that can inform programmes at NAF about target populations, conduct telephone surveys or polls to gauge beneficiary perspectives when needed, and ultimately enable the wider organization NAF to accommodate increasing target families in a more streamlined fashion.

*"CHM staff have basic knowledge of other programmes but are not equipped to respond fully, so often give the NAF operator's number."*

- NAF participant

**External relevance:** the CHM's potential role in referring beneficiaries to governmental and non-governmental services beyond the NAF. Opinions were divided on whether the CHM could and should extend its mandate beyond the NAF. On the one hand, expanding the CHM beyond NAF programmes would require a substantially larger call centre and staff capacity, and possibly longer shifts to accommodate a surge in beneficiary numbers. Direct case handling and resolving should stay within NAF's scope of work and a time invested in consolidating systems, capacities, and referral pathways within the organization and with branches before considering additional services outside of NAF.

Figure 3: Programs Most Frequently Enquired About by Beneficiaries



With the CHM struggling to manage the current caseload, NAF had recruited the help of the National Call Centre to support, especially during the pandemic and peak periods. This was the primary sentiment expressed by the donor community and CHM staff. Most beneficiaries participating in FGDs agreed it was preferable to keep the call centre's current services as they were and not add any new ones; only a few felt that the CHM's mandate should include additional services such as GBV-related services. A manager at NAF said, "we can hardly manage referrals within our own NAF programmes." An expanded role however would be possible with a vision, planning, training and sensitization of CHM staff. At present, the CHM is not linked externally to call centres and service providers, but it is linked to the Social Security Corporation, the Central Traffic Department, the Land Department, the Tax Department, and is able

to retrieve information needed from other governmental agencies. A technical specialist from WFP staff was of the view that "if databases become integrated with other national databases (mainly NUR which has a broader scope), updates could happen more systematically and changes in circumstances amended directly [on one system]." Digitally connecting the MIS with other governmental entities through Application Programming Interface (API) would cut time and streamline processes, ensuring things do not happen outside the system such as through personal connections or phone calls, and quicker updates on cases. There is some learning that can be extracted from the UN/INGO agencies' referral system.

Regarding the potential for CHM staff to refer beneficiaries to other services beyond the NAF, a few considerations were raised. One was regarding whether their current qualifications would enable them to pick upon issues and advise appropriately, or if this role would require recruiting specialists trained in social work or counseling. On the one hand, one NAF branch manager believed that it was their duty to help beneficiaries beyond the scope of NAF assistance programmes if they needed it. She said, "you can't just tell someone sorry you're not eligible, someone who might be exposed to GBV or drugs. When we want to help, we go out of our scope of work because we want to protect people from poverty and all that comes with it." The evaluation team notes that this could be considered a role for the social workers within the NAF rather than operators of a CHM, and is an issue that will be reverted to in the conclusion and recommendations section.

**Alignment with strategic direction of government, NAF mission, and donor community:** The CHM is directly aligned with the organizational strategic shift from manual to fully automated mechanisms that can accommodate its growing programmes and increasing beneficiaries. The MIS system allows for the centralized data generation and desegregated reporting, through which the CHM can demonstrate to its citizens and donors that there is a good level of accountability, transparency, and open channels with its beneficiaries. As explained by a WFP participant "this was all non-existent before the CHM". This move towards digitization corresponds with governmental wider strategic direction and is an initiative that replicates the WFP Jordan's tried and tested call centre with its refugee beneficiaries. A CHM at the NAF was seen as a monitoring and evaluation arm through which partners could assess their contributions towards national objectives and finetuning their support accordingly. However, stakeholders did express some concern regarding whether that 'upward trickle of information' was actually happening as hoped.

A concern expressed by a World Bank was that the vision and plans to merge programmes (under discussion at the time of the evaluation) were not being communicated adequately within the NAF and the CHM. Branch managers, departments, and CHM managers and staff were not necessarily aware and involved in discussions around this potential shift, which would require a shared vision and understanding to ensure the CHM frontliners and branches have unified messages and answers. The role and position of the CHM playing a larger role within NAF would need to be clearer and institutionalized with the organization. Moreover, several key informants expressed the importance of ensuring that the CHM was acknowledged within NAF's comms strategy, which is currently not the case.

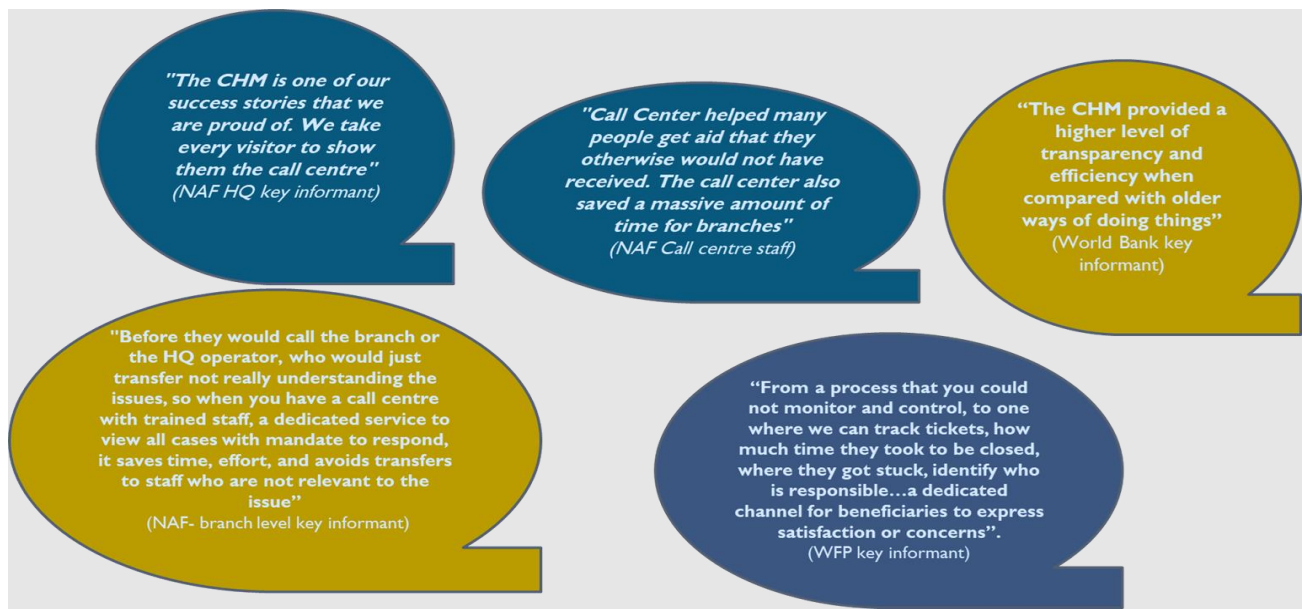
### EFFECTIVENESS OF THE CHM

The effectiveness criteria assess the extent to which the CHM in achieving what it was designed to achieve, namely in terms of its operational processes, workflow, and staff capacity. A number of practical suggestions from call centre staff and stakeholders across the board enriched the Teams' insight into the operational aspects of the CHM, informing some of the ensuing recommendations.

**The Extent to which the CHM has achieved its intended objectives:** There is consensus among WFP and NAF management teams and CHM frontline staff interviewed in this evaluation that the CHM did achieve what it was established to achieve, as reflected in these quotes:

*Figure 4: Stakeholders and Staff positive sentiments about the CHM*





The CHM was introduced at a time when the NAF was expanding its programmes and doubling its caseload with the introduction of the Complementary Support Programmes. This further expanded with the onset of the Covid19 pandemic and its repercussions on Jordan's poor communities. The CHM was in a position to play a central role in enhancing NAF's capacity to support this expansion. It helped people receive the aid they need, guiding those who may otherwise have been unable to figure it out on their own. Call centre staff proudly explained: "the call centre was able to control calls for three programmes at the same time. We assisted a large number of people and are meeting peoples' needs; they tell us they are grateful at the end of the call. By 2020 we were recognized as a call centre and received a letter of appreciation." The CHM's supervisor agrees fully that the CHM "has made a difference. 100%. It is something new and it's shining." He explained his perspective on why that was so: "before the citizen had to do all the process via paperwork and in-person or through the NAF operator. If the operator was busy, he would not be able to reach the person responsible... but now we have a digital system".

Involved NAF staff see it is "a specialized support centre established to help beneficiaries" inspired by WFP's call centre, designed to assist beneficiaries throughout application, registration, home visits, feedback, follow up and appeal processes. This view is shared by WFP staff, who highlighted the role of the CHM as an accountability mechanism (to the Jordanian population) as well as a channel of communication with the affected communities. Moreover, this new way of working had shifted ways of working to a whole new level: from hand-written reporting to a systematic accountable system, with faster, clearer and more streamlined automated process of tracking, follow up, and reporting (WFP informant).

" [It is] a new means of communication with poor people and new ways of doing business with largest cash distribution institution in the country. It is a very important addition."  
-World Bank informant

Other reported achievements included the significant reduction in number of visitors to HQ inquiring about NAF programmes and services due to the process automation versus manual enables report-generation on incoming cases, beneficiary profiles. The decreased pressure of callers and visitors on NAF departments and branches was helpful and decreased their workload. Furthermore, the CHM had increased transparency and improved documentation which fed back into the operation of NAF programmes and benefitted other NAF units. Importantly, the CHM offered mechanisms to assist those most in need of aid at risk of slipping through the cracks due to lack of know-how. The below Good Practice box illustrates the CHM's ability to identify exceptional cases and raise issues to help them receive assistance during hard time.

Table 3 Good Practice Example 1

**CHM good practice example**  
Enhancing inclusion of those most in need of aid

The number of eligible beneficiaries is growing; and those who are not eligible are being phased out. The CHM is there for people who did not receive aid enabling them to make a complaint which may result in them becoming eligible. It enabled some people to become eligible after being previously ineligible by merely giving them the option of uploading their electronic documents.  
- CHM staff

“We’re talking about number like 50,000 cases closed, when we review cases that were not eligible and find that they are eligible, it means a we’re working right”.  
- WFP staff

An issue which the evaluation team felt was important to investigate was the extent to which there was a common shared understanding amongst stakeholders and users of the purpose and added value of the CHM. Having a common understanding of the purpose of the CHM is considered central to the success of a CHM.<sup>24</sup> Findings indicated a disconnect between those closer to the conceptualization of the CHM and its running, and others like NAF staff who are not directly involved. Further, clarity and clearer connecting points across programmes would benefit the positioning of the CHM within NAF wider operations and strengthen its integration, and therefore its impact internally and externally. Also low awareness levels of beneficiaries indicates that the purpose and added value of the CHM needs to be clarified in order to more effectively support current and potential beneficiaries. This also calls for a revamped information campaign highlighting this added value more clearly.

**Effectiveness and areas of improvement at process and workflow levels:** As far as the system was concerned, there were more specific insights captured as to the effectiveness of processes and workflow aspects. The most prominent strengths of the system included the digitization of payments, the trackability of complaints, and the well-integrated mechanisms of registration applications and follow up. These were unanimously described as ‘highly effective’ and ‘excellent’, and features that were “non-existent before”. The process was deemed most effective in that it offered multiple channels and options for reaching out for assistance, queries, complaints and grievances via online form, phone calls, and social media posts. Branch managers explained that if they were unable to support a visiting beneficiary, they would themselves reach out to the CHM or a colleague at NAF Headquarters who would register their complaint onto the online form on their behalf. Further, the Memorandum of Understanding signed with the National Call Centre to assist during peak periods can be considered a good practice which further enhances the effectiveness and outreach of the CHM and NAF programmes. It is worth pointing out that although they were trained by CHM staff, the National Call Centre staff have their own supervisor. The National Call Centre supports by only responding to questions and does not register complaints on their own. This raises the question of whether beneficiaries reaching out to the National Call Centre are incorporated within the CHM MIS to ensure full data across all channels.

A few issues were raised regarding possible areas of improvement in the CHM effectiveness. These included the following:

- Demand is greater than the capacity of existing staff of the CHM (addressed in more detail in ‘Staff capacity and wellbeing’ below)
- The question of who should be closing the loop across all these different channels was also raised. The Team’s observation indicated that incoming complaints are transferred directly to NAF’s Eligibility Department to be

---

<sup>24</sup> WFP (2017). Minimum Standards for Implementing a CFM

resolved but CHM staff do not receive any notification when it is resolved. This often leads to their inability to respond to that caller when they call back to inquire about the status of their specific case. Call centre staff should be informed where and when the action is taken and tickets resolved in some way, even when tickets are closed in another department or at branch level. This would facilitate follow up, ensure that all NAF staff are on the same page and increase effectiveness of the system.

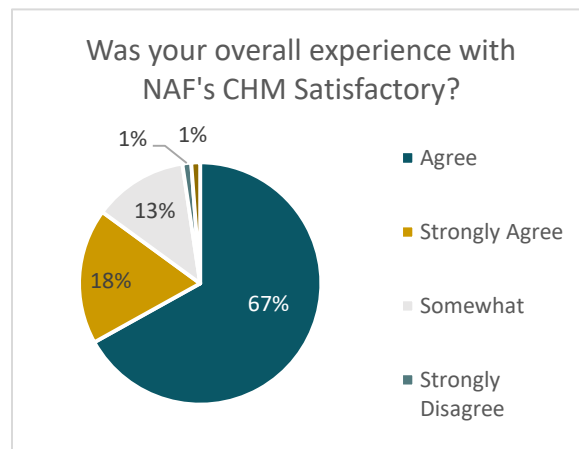
- Time-effectiveness is often compromised due to staff's inability to access full beneficiary data on their screen during a call, or their incomplete understanding about eligibility requirements and reasons for rejection. Resorting to their supervisor every time leads to long waits on the phone or repeat calls, which can take the place of another potential caller. This issue can be resolved if staff have read-only access to full beneficiary data or the option of generating a query, as opposed to opening up various excel sheets on their screen for answers. This should minimize the risk of ad hoc or incomplete decisions/responses being untraceable and enhance workflow effectiveness.
- Staff have encountered situations when beneficiary information is not updated which necessitates making calls to other governmental institutions or getting a repeat call, both of which are time consuming. Streamlining databases so that beneficiary data is up-to-date in real time would address this issue. Moreover, online and offline protocols must be aligned to any changes that staff need to be aware of as and when needed.
- The Interactive Voice Response (IVR) system is in place but not activated. This function could be more strategically used to minimize queues by incorporating answers to common questions and built-in referral functions.
- The SMS system is a valuable tool that is not fully utilized in information sharing and supporting follow up and loop closure.
- Although data from the ticketing system (phone) and web application (online) all go to one place, they give different statistics and different levels of disaggregation e.g. the web application is not gender disaggregated. The CHM would benefit from having one unified platform pulling together all data across channels with consistent categories, which according to a WFP technical specialist is technically possible.
- There is a discrepancy of incoming calls and numbers of recorded calls (i.e. tickets) due to staff advised to only give tickets to complaints or referrals and not issues resolved during the call. A WFP informant explains this discrepancy: "if 1200 calls come in in one day, there will not be 1,200 corresponding tickets showing up. This is a discrepancy and staff need to be advised to record everything and understand why they are doing this." According to CHM staff, the reason they do this is due to workload: issuing ticketing for calls resolved as well would increase call time from 1.5 minutes to 5 minutes and result in less capacity to answer calls during the day.

*"Being able to capture this information is crucial otherwise we are in the dark about a majority of callers. Something should be done to make it easier for operators to register questions. For example, we know that the system automatically shows the phone number calling on the screen. It should be technically feasible to match this phone number with applicants' information that already exists on the system without necessitating manual data entry by the operator."*

*- Evaluation team member during observation visit*

**Extent of beneficiary satisfaction with the CHM:** There was a high general satisfaction rate among CHM users: 85% of our sample agreed and strongly agreed that the CHM was satisfactory. There was a slightly higher positive experience by female callers (94%) compared with 73% of male callers according to our survey, with negligible differences by region. Satisfaction levels were higher among online form users than callers in our survey sample, that is 90% online users vs. 80% callers. 93% of callers said the information provided to them was clear and understandable, and around 73% found the online form easy to understand. Further, beneficiaries had no complaints about staff performance. They expressed satisfaction with call centre staff, describing them as cooperative, respectful, friendly, and polite even when they did not provide them with answers to their questions.

Figure 5 CHM User Satisfaction Rate



*“Beneficiaries tell us we call the number but no one answers or it doesn’t work. So I tried for myself. I rang for 2-3 days to check for myself and no one answered.”*

-NAF branch level

However, frustration among callers with the time it took for their calls to be answered was high. There were long waits in the queue or pressure accessing the net for online forms. The wait time for reaching the call centre varied from beneficiary to another; only 6% of survey respondents waited over 10 minutes to reach an operator; 48% of survey respondents reported waiting 6-10 minutes, and 35% of respondents reported waiting 4-6 minutes. Some FGD participants it had taken an entire day or up to three days to reach an operator. CHM staff noted challenges in response time during registration, whereas on normal and routine days, CHM staff note that calls are quickly answered. This experience was corroborated by a branch level informant who agreed it was not easy getting through to the call centre.

For some, there were concerns about receiving the answers they needed from call centre staff. One beneficiary who was transferred back to the branch asked, “what was the point of calling the call centre if they send me back to my local branch?” Others in FGDs noted that the time taken to resolve a complain could reach up to 4-5 days. Still others noted that complaints requiring additional support or documentation sometimes did not get resolved. There was a preference among beneficiaries that follow up is done through phone calls, as not everyone can read messages. Follow up phone calls or SMS messages specifying reasons for rejections could avoid repeat callers.

*“We need better explanations for why our application for aid was rejected. The criteria were not explained well. Operators give vague answers, and ask people to visit the nearest branch”*

-Male beneficiary. Karak

**Role of branches:** A few key issues arose around the current and potential role of NAF branch office networks in enhancing the effectiveness of the CHM more widely. While many beneficiaries still prefer the face-to-face contact with branch office staff to get assistance and answers to queries, those who do are not taken account of within the CHM system and wider MIS. This in turn may skew beneficiary data, and their omission may prevent a holistic picture of the spread and types of issues. As a WFP key informant clarifies, it is not just about resolving the issue there and then, it is about capturing full data and enabling NAF to identify strengths, limitations and better ways of servicing citizens. “If the issue is solved on the spot, [at the branch level] how will I know if we receive more inquiries on the same issue? How will I know if branch x receives more inquiries than other branches and the types of issues they receive?” This relates to the as yet under-utilized potential role of the CHM in M&E process and performance tracking. Engaging branches in this role of streamlining efforts was seen as important according to a WFP informant, especially considering the high competencies and long experience of many branch managers. Liaison staff at selected branches could be trained

*“Branches are multifunctional offices, they register, guide, do all sorts of referrals, counseling, internal follow up, they are a massive network not capitalized on so far. Branches add value... They have to be unified and streamlined.”*

-WFP informant

and given the responsibility of creating tickets and logging them into the system from where they are. A wider consultation with other branch offices is advisable in order to consolidate more branch level perspectives in regard to activating the CHM.

Another important finding was that there had been no clear directive from NAF management about what was within the scope and linkages of the CHM. Branch managers themselves appeared to not understand how they related to the CHM. "If we want to activate the call centre, the first step is to clarify its role and function to all branches. I'm still not sure what their mandate is, I don't have any official document specifying what the call centre is." On the other hand, there were a few concerns among WFP and NAF about engaging branches in the CHM more directly such as "too many people having access to the system" and "who will monitor, who will close loops?" There was also the question of whether branches had the right staff capacities to take on CHM support duties. Good line management of a centralized focal point for the CHM could resolve such concerns. Allocating read-only access to branch staff is another, among other possible scenarios that The Evaluation Team encourages the NAF to discuss further. Other concerns related to a more active role of branches in relation to the CHM is that branch staff do not have strong internet connectivity, and in some places none. It was understood that there are no laptops at branch level; staff tend to use phones to consult on any issues or resolve the beneficiary's issue in-person. If their role is to be activated more fully, or instate a CHM liaison, enhancements at decentralized levels would be needed. Furthermore, if it is decided to open an additional channel to the CHM receiving queries and complaints at branch level, the number of tickets will be beyond the capacity of the present CHM.

*"We need the complaint [that goes through branches] to reach somewhere so the issue is not forgotten and to make sure the beneficiary gets a response; if the issue is solved on the spot, how will I know if we receive more inquiries on the same issue? How will I know if branch x receives more inquiries than other branches and the types of issues they receive?"*

- WFP informant

Table 4 Good Practice Example 2

<b>Good practice example</b> NAF Karak branch: Encouraging a culture of feedback at community level
Karak Branch has a feedback/complaint section where beneficiaries can share their feedback and complaints. A complaints committee reads through complaints; the committee member then refers relevant concerns that were not reported digitally to the branch manager to be resolved verbally. Otherwise, beneficiaries are asked to take their complaints to the call centre. This is good practice and finding a way to connect to CHM system would be a bonus.

**Staff capacity and wellbeing:** The most often-repeated concern across CHM staff and their line managers at NAF was the issue of staff capacity and the ability of current 11 call centre staff to absorb the number of incoming calls adequately. Staff are overworked and overstretched particularly during registration phase and other peak seasons, when they receive around 350-400 calls/day. During these periods, staff and supervisors are in firefighting mode and their priority is to take as many calls as they can. This can leave staff burnt out and as mentioned earlier, not ticketing queries (only complaints) in order to save time and take more calls. With any expansion plans and possibility of increasing the mandate of the CHM to respond to all NAF programmes, staffing issues should be taken into account and perhaps staff should specialize by programme.

Further 'low seasons' could be utilized more effectively through engaging staff in skills-enhancement training workshops related to the issues they encounter. On the training front, staff have received a thorough training upon entry and are well-acquainted with the CHM Manual which remains the main reference point for staff and their supervisors. As programmes are introduced or amended, FAQs are shared with staff there and then; they are referred to as calls come in with related questions and requests for assistance. Staff learn on-the-job thereon and do not undergo any systematic form of refresher trainings nor specialized workshops such as leadership, communication skills, dealing with

sensitive cases or persons with disability, showing empathy. One NAF informant suggested that CHM staff should become more familiar with the NAF's empowerment programmes such as employability, vocational training, assistance for persons with disability, and take the opportunity to advise beneficiaries to consider benefiting from them alongside cash assistance. This points to the importance of ensuring that CHM staff are well-aware of all NAF programmes rather than just the Takaful series. A related issue is to ensure that CHM staff are sufficiently informed about eligibility criteria and able to respond to all possible queries in this regard. They frequently resort to their supervisor for advice and information and could benefit from more clarity on eligibility formulae and reasons for rejection when asked (an issue raised by beneficiaries who were transferred to branch when CHM staff was unable to answer their question).

Management plays an important role towards the capacity building and supervision of CHM. Findings suggested that breaks and leaves could be organized more systematically at year-start, together with regular debriefing sessions on lessons learned from practice and periodic training boosters. According to CHM staff FGD, staff communicate new information to each other in between calls, or a supervisor shares it with the rest of the team if an issue is brought to their attention. NAF staff who have worked with the CHM have a close collegial relationship where they will stop to have a cup of tea at the end of the day and talk about issues they faced in the day, or if faced with an emergency reaches out to supervisor via WhatsApp or in-person. The support is there however a more systematic approach would be of great benefit for staff wellbeing and collective learning and improvement. It was noted that the current supervisor is responsible mainly for call centre and not all other CHM channels such as the online form and social media. This leads to fragmented lines of management for the CHM as a whole; it is advisable to have one focal point who can ensure loops are all closed, data consolidated in one place, and lessons and data extracted from them all.

An unanticipated finding from the FGDs with call centre staff was their exposure to harassment or threats from some callers. A female CHM staff member expressed her concern stating “we need better protection from abusive callers”. Staff had not been trained specifically on how to deal with angry, abusive, or distressed callers and were not aware of best-practice protocols and their rights- this is something that could be more prominent through designing a dedicated manual and future training workshops. Staff wellbeing is affected by a prevailing sense of insecurity among staff, them being on temporary contracts. This concern was echoed by line managers who had invested in call centre staff with training and continued support and developed a relationship over the years.

**Participants’ desires for improving the role and function of the CHM:** Below is a synthesis of selected suggestions made by CHM stakeholders and users consulted in this evaluation. It includes a few tangible (and doable) action points that were seen to enhance the effectiveness and functioning of the CHM from their viewpoint.

Table 5 Wish lists of NAF beneficiaries and CHM staff

Beneficiaries’ Desires	Desires of CHM frontline staff
Reduced waiting times for calls to be answered, and quicker follow up would reduce beneficiary frustration	Access to one centralized database that shows all applicant data to speed up response to beneficiary eligibility inquiries
That CHM operators are capable of responding to eligibility inquiries (instead of referring callers to branches)	Access to key resources and governmental contact numbers that beneficiaries ask for (to assist them in external referral function)
The CHM have more than one number for quality accessible service.	Access to the MIS regarding eligibility (read only) to avoid delays asking supervisor every time
Quicker processing and follow up mechanisms to their complaints	Staff feel they would benefit from refresher trainings with new programmes launched
To have NAF and the ministry of development connected again, so as to get a unified source for answers for all social system support.	Introducing an automated chat box function; live internal chat box between CHM, managers, branches

Facilitating calling, inclusive of a free line for beneficiaries to call; or more than one number to call for improved responsiveness.	A summary of each call to be sent to the caller at the end of the call and tell them what they asked, and what the response was, so that they have a record for what happened.
Better advertising of the CHM (for example, advertising via SMS)	To blacklist callers who have been confirmed to be abusive, allowing supervisors to call back abusive callers and warn them of possible repercussions, such as the rejection (or withdrawal) of aid.

From this table we can extrapolate a few distinct concerns that drive these suggestions. These issues reinforce earlier analysis, pointing to the issue of time efficiency, and lack of preparedness of staff to respond fully and adequately. Participants’ suggestions are incorporated within the recommended actions section pertaining to ‘enhancing effectiveness of the CHM’ (on p.31).

### SUSTAINABILITY AND SCALE UP PROSPECTS FOR THE CHM

**On WFP-NAF partnership:** Our stakeholders’ interviews indicated a highly positive working relationship between WFP and NAF teams. Both sides affirmed the presence of open channels of communication and prompt responsiveness to needs of the newly digitized system as issues arose. The partnership with WFP was described as “excellent” manifested through the qualitative transformation in how work was now done through the digital system. There was a joint sentiment among WFP and NAF senior staff to not lose sight that the NAF/CHM is but a means not an end in itself. A reality check, so-to-speak, to ensure all frontline staff, social workers, and managers do not lose sight of the bigger picture “that we are here to support the poorest segments of Jordanian society”(WFP staff).

This would entail addressing a few issues to enhance this holistic inclusive mindset within NAF team at all levels, including:

- Ensuring that the CHM has the capacity to capture and support those who could inadvertently be excluded from assistance;
- Steering a mindset shift from routine validation of eligibility and ‘fear of supporting someone no longer eligible’ to one of inclusion and outreach to those who are at risk and likely to fall through the cracks;
- Training social workers and updating field visit and application forms to incorporate this more holistic approach to data collection and assessment;
- Undertaking community-level studies to identify new forms of poverty and new indicators to begin looking out for;
- Using this evidence to prompt NAF (and CHM arm) to accommodate ‘new’ poverty types and tailor programmes to ensure appropriateness of conditions entitlements to these emerging trends.

A long-term approach to eradicating poverty should also give more prominence to empowering aid recipients and encouraging them to benefit from employment programmes recently introduced by NAF and others. A NAF branch-level participant, well-aware of her constituency and community, urged more attention to “more of these [programmes] that could push and encourage people to work, even those working need help getting out of the poverty cycle.” The implication seemed to be that the CHM could play a role in encouraging this better utilization of wider NAF programmes that have a more empowerment focus than relief and assistance, especially as poverty deepens and widens. This issue requires a dedicated discussion at strategy level among partners and a plan to operationalize it across staff, branches, data, and information sharing.

*“We need a reality check, a reminder. That the NAF/CHM are means not an end; we must ensure none of us lose sight of the bigger picture and purpose: the eradication of poverty and support to the poorest segments of society.”*

– WFP participant

**Exit strategy, transitioning to self-sustaining entity:** The CHM project is still in its early stages, and both WFP and NAF felt it was too soon to think about a phase-out plan. However, it is never not too soon to begin thinking of long term capacity development, and institutionalization within a wider national vision. The term ‘accountability’ floated around across the board, as a key requirement for sustainability. The responsibility for greater accountability was

located at a number of levels. At government level, there needs to be a decision to secure jobs whose cost is currently still borne by WFP. Allocating funds for recruitment of staff and taking over the 72 existing NAF staff contracts, out of which 12 are call center staff would be a reflection of a national administrative vision and conviction of the core function played by the NAF-CHM. This has not happened yet, but is a basic steppingstone for a roadmap to the CHM becoming a self-sustaining entity. At organizational level, NAF should be considering strengthening the skills and capacities of existing staff in addition to increasing the numbers of staff. More attention to the important role of branches and the potentially larger role they could play in relation to the CHM should be given. In the transition towards sustainability, staff at branch level should be more empowered, informed, and their roles streamlined with an HQ-based focal point for the CHM.

Sustainability of the CHM would thus require more stringent management at HQ and clearer lines of management and accountabilities through more clearly defined roles and guidelines across the organization, the programmes, and the branch offices. Quality assurance of the CHM through greater accountability from its frontline staff were similarly key concerns. How to ensure that CHM staff recognize the importance of their role as a 2-way link between the NAF and the people who need assistance? that their role is "much more than answering calls". That was seen as an important step that would sustain and facilitate the CHM's expansion to serve more of Jordan's poorest.

**Long term vision and hopes for the CHM:** The Evaluation team posed the following question to all stakeholders: "what is your dream for the CHM? Where would you like to see it in the next 5-10 years? What would you like to see it doing for Jordan?" Stakeholders across international and national, central and branch, strategic level and frontliners held a similar vision of what the CHM could achieve for Jordan in the long term. This was a CHM that could function as an expanded service and specialized centre connecting larger segments of the population to all NAF programmes, as well as other government agencies through existing referral networks. According to the World Bank, the CHM should be accessible to any Jordanian seeking financial support or anyone with an enquiry to find answers within established protocols of government. It would be an entity equipped with sufficient staff and endorsed by a vision from higher government authorities to sustain its operation through fixed budget allocation. If expanded to hold such a role, the CHM could potentially play a larger strategic role of not merely handling and responding to incoming issues, but to one of consolidating and feeding back "data from the ground" that could influence the social assistance programmes' operation and design. Conversely, with greater awareness and getting used to the technology, it would become a service that people know and trust and "talk about more ...even in the supermarkets."

*"We don't wish for more beneficiaries; we want to see people improving their circumstances, moving to training, to employment, we want to see [positive] outcomes...find a way to educate people to get them out of the cycle of poverty."*

-NAF participant

There was consensus that deepening poverty and unemployment that would inevitably continue to increase in Jordan, and that the end-goal of the NAF should really be about reducing poverty levels and helping beneficiaries transition from relief aid recipients to empowered independent individuals, demonstrating the high level of commitment and empathy of NAF staff towards the populations they serve.

*"We need a vision from higher management, the Minister of Social Development. After that it is easy."*

- NAF participant

## RECOMMENDATIONS

As the first evaluation of the CHM since its establishment, this evaluation offers a baseline of information about the CHM, and paves the way towards a set of actionable recommended next steps needed to enhance the capacity, effectiveness and outreach of the CHM to its primary target group: NAF beneficiaries in Jordan. These recommended actions correspond to the Evaluative Objectives that guided the evaluation, but are presented in a phased approach.



## Phase I: Address Current Workflow Gaps in Protocol and Supervision

- **Adjust workflow processes that could enhance timeliness of response and efficient practices on-the-job at call centre.**
- **Facilitate call centre staffs' access to information** through one centralized database that provides on-screen access to all beneficiary data. This would give call centre staff a full picture of beneficiary status, eligibility status, and all other relevant documentation. Incorporate programme updates and all FAQs within the system (digitally) for the staff to draw upon whilst on the call. If possible, include checklists and explanations on eligibility criteria with comment boxes from the relevant departments explaining why a beneficiary was rejected. Regularly update FAQ with recent questions raised to them by beneficiaries and ways of resolving them.
- **Consider introducing an internal automated chat mechanism** between staff, supervisor, key departments and branches to enable call centre staff to consult with the supervisor, to better respond to new queries. This is intended to minimize the need to end the call with no resolution or even transfer the caller to someone else on the team, and enhance the legitimacy of the call centre as the go-to place where queries and concerns receive adequate responses.
- **Encourage more efficient use of the CHM Manual** as an all-encompassing reference for staff and workflow issues. Update the manual regularly to incorporate new FAQs in the Manual's annex, new programmes introduced to beneficiaries, new guidance on resolving issues. Where possible, digitize the manual to encourage easy and user-friendly access to relevant sections as and when needed. Periodic refresher trainings workshops would benefit the staff. To preserve the experience and institutional memory of the call centre, add to the manual a section for frequently encountered issues by staff and how they are resolved.
- **Increase call center response capacity during peak seasons.** The call centre should consider recruiting additional staff to cope with the demand from beneficiaries, especially as programmes expand, merge, and beneficiary groups increase. During peak seasons, other measures could be instated such as the mobilization of internal and external support e.g. staff from other NAF departments, liaison staff supporting the CHM at branch level, and continuation of the National Call Centre arrangement. Additionally, anticipated and commonly raised questions could be incorporated within the webpage and Interactive Voice Response (IVR) System and Social Media, which would reduce the number of incoming calls and queries, and allow the CHM to give one-to-one attention to wider beneficiary concerns. As indicated by evaluation findings, it is crucial that staff are reminded to that all calls should be ticketed, even the ones where issue is solved within the call.
- **Improve CHM staff capacities, skills, and wellbeing.** While staff are well-prepared and trained for their role upon entry, it is recommended that ongoing booster/refresher training continues to be offered periodically e.g. accompanying newly launched programmes or specialized trainings to enhance skills on the job. Skills trainings suggested by staff included: customer service, communication skills, dealing with angry or difficult callers, supporting callers with disabilities, upgrading skills related to complaints handling roles. Ensuring all staff have a uniform understanding of eligibility criteria and indicators that determine eligibility formula on the system was another area identified. To that end, we recommend that a Training Needs Assessment is conducted on whose basis systematic training plan is introduced not only for new but also offering advanced levels for longer-term staff members. Further, to maintain motivation of staff, management should recognize that this is pressurizing role and address staff burnout through attention to their wellbeing and safeguarding from abusive callers. This could be incorporated into dedicated stress-reduction training as well as guidelines to ensure staff are protected from verbal harassment. It would also be helpful if staff could have access to key resources and governmental contact numbers that beneficiaries may ask for.

- **Strengthen the supervisory role of CHM focal point and extend this oversight across all CHM channels with a view to streamlining CHM purpose and functioning.** This role would serve as a focal point for the CHM at NAF HQ with the responsibility of providing strategic leadership and supervision of the *whole* system. Specifically, there is a need to unify supervision of all complaints, inquiries and feedback from all channels, within a unified platform for all social system inquiries (See Action 2). This would include call centre staff supervision, support, systematic spot-checks on performance, ensure quality assurance and consistency, identify and resolve bottlenecks as and when needed; s/he would conduct regular debriefs and advice, on-job trainings, advise on redefinition of protocols, and engage with branch-level CHM focal person/s to ensure no beneficiaries are missed (see recommended role of branches vis-à-vis the CHM below). The CHM focal point could also have an expanded role of thinking beyond daily operations of the CHM and serving as the liaison person within the wider organization sharing CHM datasets and updated disaggregated information to give a bigger picture analysis. The CHM could help NAF draw lessons and feed them into CHM planning processes and programmes. Further, low seasons (in between peaks in programmes) could be used more effectively. For example, staff could take this time as an opportunity to organize and reflect on work processes and outcomes, to debrief as a team, and communicate lessons learned which could be incorporated into their practice. Further low peak seasons could be scheduled time for alternating R&R time.
- **Benchmark CHM against established customer service** provision in the corporate sector. To improve work processes, consider tapping into corporate expertise and benchmark CHM against their management and ways of working.

#### Phase 2: Improve workflows within MIS Systems

- **Fine-tune and unify the CHM digital system and develop its role as a repository of beneficiary data that can be used to enhance NAF programmes and planning.**
- **Ensure that the digital infrastructure responds to the needs of the CHM, technical advisors in senior management, and streamlines beneficiary data across the different channels into one platform.** In addition to aligning digital processes to the above-recommended workflow process enhancements (recommended action 1), it is recommended that the digital system unify all channels within one platform, and is made more user-friendly. Access should be given to all staff involved in feeding into or using the CHM across its different channels, branch offices, as well as National Call Centre support teams to streamline data into one unified platform. It can be determined who gets read-only access or access to input, refer, and analyse data. To enhance comprehensive reporting, all categories must be consistent and it is advised to include further levels of disaggregation such as age cohorts, years of receiving aid, education levels, number of times seeking CHM assistance, and others to be determined by NAF. Such measures will ensure that programmes provide quality service to applicants and enhanced complaints handling, while facilitating more streamlined reporting. Systematic training and supervision of use of the system is advisable to ensure the digital system is being used correctly and to its full potential.
- **Institute a number of additional technical amendments within the digital system to optimize loop closure mechanisms and efficiencies.** Some of the suggested amendments include: showing trail of actions until loop closure such as making comment boxes mandatory, installing a user-friendly query function for staff, pop-up boxes to alert when follow up is needed, a function that allows a menu of loop closure messages with some specification of action taken (rather than a generalized SMS). It could also be a good idea to save a summary of each call which would be automatically sent to the caller at the end of the call, to minimize repeat calls. It could act as written record of the call that states what they asked, and what the response was, what actions are to be taken if any- and be saved in the beneficiary file.
- **Handover access and responsibility to NAF technical team to update/ amend CHM database.** This will allow any amendments or adjustments to the database or tech-related issues to be made in-house rather

---

than through steps of seeking help from 3<sup>rd</sup> party-provider, which tends to be more time-consuming. The expertise is present within the NAF and changes are happening frequently requiring in-house attention and follow-up.

- **Utilize the MIS to provide evidence quality data and deeper analysis of calls**, repeated questions, recurrent issues and concerns. Consider merging relevant databases within the MIS, and integrate a unified targeting process that takes into account different 'types of poverty' and respective target populations.

### Phase 3 Increase Awareness and Outreach

- **Increase awareness and outreach of the CHM to wider affected community, and enhance inclusion/ access to all.**
- **Ensure that vulnerable groups do not fall through the cracks (of NAF aid) and have equal access to the CHM for advice and support.** Primary populations who were found to be at greater risk of exclusion were older persons especially those living alone or with no social support network, persons living with disabilities, populations living in remote areas with little or no access to information and modes of communication and far from branches, prisoners, orphans, or others who live in pockets of poverty and may not know that they are eligible and entitled to national assistance. Brainstorm ways to enhance inclusion within existing processes and outreach mechanisms of the CHM.
- **Identify sustainable ways of financing a free hotline to enable more beneficiaries to reach CHM** and address the cost of calls barrier to reaching the service. For example, the private sector could be mobilized to support for a Toll-free service to Jordan's poor. Consider other cost-free solutions which could connect beneficiaries with the CHM channels such as a no-dial free phone situated in branch office's reception area directly connecting callers with the call centre.
- **Improve outreach to communities through increased visibility of the CHM.** This requires an awareness raising campaign as well as more flyers within targeted communities' living spaces e.g. supermarkets, road signs, community centres, and branch offices they frequently visit. Consider a simpler visual identity and brand/motto for the CHM, as in Arabic it is quite long and a mouthful. This could be accompanied with more attractive signs and an easier number to recall, an added benefit for the visually or cognitively impaired, and older persons. Better advertising of CHM services and working hours could be supplemented through regular SMS messages to registered beneficiaries.
- **Increase trust in the CHM system through reliability, response rate, and increased accountability.** Increase response rate across all platforms to the beneficiaries with the aim of resolving complaints from the first call. Through the above-mentioned recommendations, it is anticipated that call waiting times will be minimized and quicker follow up which would reduce beneficiary frustration and encourage use of the CHM. When call centre staff and online forms submitted communicate promptly and effectively with applicants on reasons behind their failed applications, complaints or inquiries, so satisfied beneficiaries speak well of their experience: word-of-mouth can be the most effective form of advertising.

### Phase 4: Increase Engagement of the Branch Offices

- **Better utilize branches in relation to the CHM.** Capitalize on the trust and close proximity to affected communities.
- **Develop protocols, guidelines, and training workshops to clarify the role and relationships between branches and CHM.** It is important to ensure there is a common understanding of the purpose and added value of the CHM to branch offices. This will aid its activation and full use to the benefit of beneficiaries, enhance NAF programmes' outreach and accountability, and its institutionalization.

- **Activate CHM at branch level.** Consider introducing a direct line or chatbox or chatbot connecting branch level with CHM staff and/or focal point at NAF HQ. **Establish clear guidelines and procedures on branch offices' role vis a vis the CHM, enhanced technical capacity.** Clarify linkages/position of CHM within NAF. Develop closer working mechanisms between branches and main CHM. Introduce integration mechanism with the CHM- if there was enough momentum for it. To improve coordination between CHM and branches, a liaison focal point can be allocated at branches to register cases into CHM. Consider making the call center number and CHM logo more visible at branches' entrance.
- **Branch and HQ could lead research at community levels to update knowledge about protracted poverty and new forms of poverty,** enabling and disabling factors, with a view to incorporating their findings into program direction and support mechanisms in place across the NAF. Encourage more multi program/department joint reflection between branches – who are closer to the grassroots and realities of poverty, as opposed to statistics and eligibility indicators, and incorporate outreach. Understanding the local contexts and needs of NAF's beneficiaries would contribute towards enhancing the relevance and outreach to the CHM.
- **Mobilize branches in leading the shift towards empowerment of Jordan's poorest** by organizing local skills-training and empowerment workshops, matching apprenticeships and employment opportunities in their community with beneficiaries, raising awareness about NAF's other empowerment and capacity building initiatives.

#### Phase 5: Expand vision encompassing the larger set of NAF programmes

- **Create an overall vision that drives a strategic plan and phased roadmap towards a more coordinated parts of NAF programs.** Many of the people interviewed raised the need to consolidate integration/coordination between different units/services within NAF. In this regard it is important to develop a vision of a “one stop shop call center” solution for more than Takaful program but extends to others across NAF. CHM has proven to be an effective mechanism for handling complaints and providing clear information to beneficiaries. Other programs at NAF can make use of its infrastructure, workflows and processes to go along the same path as Takaful programs and provide increasingly accountable, transparent and reliable social protection service to Jordanian people. In order to achieve the levels of coordination/integration between the various parts of NAF a strong buy-in and ownership needs to be secured from all the stakeholders involved and come to appreciate the concept of one-stop-shop for information and complaints across NAF programs.
- **Expand the scope of the CHM digital infrastructure to incorporate wider NAF programmes and beneficiaries.** Ensure that the existing infrastructure and equipment can handle integrations or maximizing linkages between NAF different programs. Include NAF staff in CHM trainings to facilitate coordination/integration.
- **Focus on outcome, not just output measures.** There is a need to enable the CHM to provide information that lifts beneficiaries *out of poverty*, moving away from continuous dependency on aid towards greater empowerment and self-reliance, by providing information on NAF economic empowerment programs, skills-training workshops to help beneficiaries get out of poverty. NAF could potentially identify cohorts of their

---

beneficiaries who have the potential to pull themselves above the poverty line and reach out to them through SMS's, social workers, or adding preconditions to receiving aid after a certain period of time.<sup>25</sup>

- The CHM could **make better use of NAF Social Workers to enhance its outreach to new areas/ hard-to reach communities**. Social workers could also conduct follow up on beneficiaries of concern or those at risk of falling through the cracks and link them with the CHM to support. This is an area that requires further scrutiny as it was beyond the scope of the present evaluation, but is worth flagging as a valuable resource that can engage more effectively with the CHM to the benefit of the most vulnerable of NAF beneficiaries.

#### Phase 6: Sustainability of the CHM

- **Foster closer ties with MOSD and engage them in** visioning of the contribution of NAF and CHM purpose. This would ensure their support and buy-in as the CHM expands, and pave the way for future resourcing within MOSD budget, for staff and other running costs, for example.
  - **Recap of theory of change among partners at all levels**. Consider engaging the CHM (and other departments) into the understanding their role in the NAF's overall theory of change, to better reinforce their role within the overall goals of the NAF.
  - **Consider ways in which to enable a mindset shift from dependency to graduation**. In line with the NAF's multi-pronged approach to building self-reliance and efforts to track beneficiary graduation from the NAF, consider exploring ways in which to celebrate those success stories in order to enable a mindset change among those beneficiaries who are able to graduate from the NAF. To the extent that the CHM can support pathways to graduation, these pathways can become part of referral support by the CHM. Where possible, consider **building on the positive partnership between WFP and NAF and their common understanding and vision** of the CHM's role within the NAF's Theory of Change and the NAF's role in addressing multidimensional view of poverty, to support ways in which these pathways can be supported by the CHM.
- 

---

25 It is advisable for the WFP-NAF to consider commissioning a scoping review of different approaches of welfare assistance programs across North and Global South in weaning beneficiaries from aid dependency to empowerment, and extra key lessons and options for Jordan to support its citizens in making this transition.

# Annex I: Documentary Review Insights

## Documents reviewed

Integrated International (2021). Monitoring, Evaluation, and Learning Capacity Needs Assessment Report. WFP Commissioned Study on the National Aid Fund. January 2021.

Jump (2013). Beneficiary Feedback Mechanism, Literature Review. Available from : <http://devinit.org/wp-content/uploads/2013/08/Beneficiary-feedback-mechanisms.pdf>

Martin, V. (2010). Literature Review: Complaints Mechanisms and Handling of Exploitation and Abuse. Available from:  
<https://www.syrialearning.org/system/files/content/resource/files/main/literaturereviewcomplaintsmechanismsandhandlingofexploitaitonandabuse-veronikamartinhapinternational-english.pdf>

The Danish Refugee Council (2008). Complaints Mechanism Handbook. Available from:  
<https://www.alnap.org/system/files/content/resource/files/main/complaints-mechanism-handbook-2008.pdf>

Transparency International (2016). Complaint Mechanisms Reference Guide for Good Practice. Available from:  
[https://knowledgehub.transparency.org/assets/uploads/kproducts/ti\\_document\\_-\\_guide\\_complaint\\_mechanisms\\_final.pdf](https://knowledgehub.transparency.org/assets/uploads/kproducts/ti_document_-_guide_complaint_mechanisms_final.pdf)

USAID (2020). Final Performance Evaluation of USAID CEGAH. Available from:  
[https://pdf.usaid.gov/pdf\\_docs/PA00X3RI.pdf](https://pdf.usaid.gov/pdf_docs/PA00X3RI.pdf)

UNICEF (2020). Jordan Emergency Cash Transfer Project Additional Financing: Rapid Social Assessment. Available from: [https://naf.gov.jo/EBV4.0/Root\\_Storage/EN/EB\\_List\\_Page/Rapid\\_Social\\_Assessment\\_-\\_ECT\\_AF2\\_c.pdf](https://naf.gov.jo/EBV4.0/Root_Storage/EN/EB_List_Page/Rapid_Social_Assessment_-_ECT_AF2_c.pdf)

WFP (2017). Minimum Standards for Implementing a CFM. Available from:  
<https://docs.wfp.org/api/documents/310fde2bfbfa4bc8b3ecabe44c0f0815/download/>

WFP(2020). Decentralized Evaluation: WFP's relief food and cash assistance for conflict-affected people in Kachin and northern Shan (January 2016- December 2019). Available from: <https://docs.wfp.org/api/documents/WFP-0000118500/download/>

WFP (2016). The Complementary Initiative. Available from:  
[https://cdn.wfp.org/wfp.org/publications/CI%20UPDATE%20JAN-APR2016\\_LR.pdf?\\_ga=2.121330696.1459393131.1639384492-1224132633.1639384492](https://cdn.wfp.org/wfp.org/publications/CI%20UPDATE%20JAN-APR2016_LR.pdf?_ga=2.121330696.1459393131.1639384492-1224132633.1639384492)

Wood (2011). Overview of NGO- Community Complaints Mechanisms. Available from:  
<https://www.alnap.org/system/files/content/resource/files/main/complaint-mechanisms-overview-final.pdf>

**Documentary review of a few key NAF documents** identified a few important issues which alerted us to useful issues whilst conducting primary data collection (summarized at Annex 2); they have been considered in the Evaluation Team’s formulation of final recommendations.

- The CHM does not appear in the latest annual report organogram, and it is not clear how it is positioned within the overall NAF operation. NAF programs and departments appear to operate in silos of each other and their connection with the CHM is unclear. This points to the importance of clarifying its current and aspired role within NAF.
- The CHM encountered some challenges which were identified in one of the WFP reports<sup>26</sup>, subsequently confirmed by the evaluation team during the observation and focus group discussion with frontline staff. This report raised the following issues many of which were confirmed in the present evaluation:
  - That complaints are transferred directly to the eligibility department to be resolved, and that the CHM is not the one who closes the loop with beneficiaries who raised a complaint.
  - The eligibility department does not notify the Center staff that the referral has been resolved and the ticket has been closed. After a complaint ticket is closed, beneficiaries receive an SMS stating that "their complaint was processed and closed," with no further information about the action taken. Because the SMS does not provide beneficiaries with information, they must contact the Call Center again to find out what action was taken in response to their complaint, which increases the number of people calling the Call Center. In this case, the call center is not notified that the problem has been resolved as the beneficiary is, but the system is automatically updated and center staff are aware of the complaint being resolved when the beneficiary calls the CHM to inquire about how their problem was resolved. This confirms the importance of adding a notification alert to the tool to indicate the number of complaints resolved, but we learned from our observations that this was not done due to program overload and COVID-19.
  - To address the issue of what SMS beneficiaries receive and to reduce the number of calls beneficiaries make to the call center, staff suggested sending a summary of each call to the caller at the end of the call, telling them what they asked and what the response was, so they have a record of what happened, rather than calling the call center to inquire about the status of their complaint.
- The monitoring role of the CHM is described as a means of helping “assess the effectiveness of the complaints function and can be a substantial opportunity to receive and implement valuable feedback to be utilized in trend analysis and highlight beneficiaries’ needs shifts, as well as assessing institutional performance”<sup>27</sup>. This important role of the CHM is inadequately being utilized, and we carry over this key recommendation in the present report, as it is indeed one of the primary benefits of having a centralized entity such as the CHM holding the information and status updates of all of the NAF’s beneficiaries across the Kingdom.
- While not within the scope of the present evaluation, we deem it important to take note of the role and scope of work of other national call centres in Jordan, and consider the CHM with a view to other initiatives to digitize in the country. The National Call Centre (NCC) was frequently mentioned in the reports reviewed in association with the role of the CHM, as was Bkhedmetkom service. This was taken into consideration in our fieldwork and we found a discrepancy between what was anticipated and what is done in practice, specifically in regard to ways of relating between CHM staff, online system and Bkhedmetkom. The National Call Centre (NCC) alignment with CHM’s role appears to have served its purpose especially during the pandemic times when calls increased dramatically. Since the NCC-CHM will continue beyond the pandemic supporting during peak seasons, it could be beneficial to finetune this relationship further and capitalize on this support.

---

26 NAF’s Complaints and Handling Mechanism: descriptive report

27 Monitoring, Evaluation, and Learning Capacity Needs Assessment of NAF, Desk Review and Needs Assessment (p.25)

**Good practices and Benchmarks of CHM initiatives elsewhere:** We conducted a rapid review of a few other Complaints and Handling Mechanisms or Complaints and Feedback Mechanisms from which the CHM could draw experiences and lessons. While this task was not within the scope of the present evaluation, we felt that the WFP and NAF could benefit from some exposure to a range of types of CHMs that have been adopted and used within humanitarian assistance or social assistance sectors. These CHM experiences incorporate various channels including hotlines, complaints and feedback desks or focal points within organizations, complaints and feedback boxes, or social media, among others.

- Ultimately, according to WFP Minimum Standards document 28 there is a common purpose that they are designed to serve: to act as “a formal mechanism for receiving information from people in communities where [the organization] operates.” This is a useful document to consider when formulating minimum standards or benchmarks to measure the CHM performance against.
- As the CHM seeks to strengthen accountability with its beneficiary population, involving them through beneficiary consultations is crucial. The present evaluation would be the first initiative to build this trust and accountability by seeking and responding to issues uncovered that can increase beneficiary satisfaction.
- Another important point that this review confirmed was the importance of tailoring a country CHM to its local context as well as organizational needs and approach. According to DRC (2008), “one standard CHM cannot be developed to fit all programme contexts. Issues such as literacy levels, the type of assistance offered, protection gaps, the culture of dealing with grievances, available resources, security levels, agency operational approach, all influence how a CM should be designed, managed and communicated.” This is very important and underscores the significance of the present evaluation, which considered the systemic (and technical) aspects, organizational processes and oversight of the CHM, as well as local cultural and socioeconomic considerations that inhibit or encourage reaching out to the CHM. The introduction of the CHM in the Jordanian context and within the framework of the NAF-Takaful programmes launched in 2019, came with its own custom-designed manual. This is kudos to the programmes and to the teams that conceptualized and launched the CHM which is currently under evaluation.
- A CHM can serve as an ‘early warning system’ to prevent, mitigate, or resolve tensions and problems before they escalate into more serious issues. This can enhance programme monitoring—specifically, to identify weaknesses and areas for improvement in programme activities, staff behaviour, and when further resources are needed.
- A CHM also helps in building and maintaining good relations, trust, transparency and dialogue between the organization and the community.
- As emphasized earlier in this section, this was but a rapid review of what is out there and we would encourage WFP to explore in more depth key aspects that can be of benefit to the CHM as it grows and matures. In particular key indicators of effectiveness across complaints-handling systems that could be consolidated and adapted as benchmarks for future evaluations of the CHM. It would also be worth ensuring the Manual mirrors any benchmarks identified through this process and staff aligned through ongoing training and periodic reviews.



## Annex 2: Data Collection Tools

### Beneficiary Satisfaction Survey

Section 1: Beneficiary Info	
1	Name
2	Age
3	Gender
4	Governorate
5	Have you ever received assistance from a NAF program?
6	Have you ever <b>tried</b> to call NAF's call centre to submit a complaint/comment/question?
7	Have you ever <b>tried</b> to submit a complaint/comment/question via the online form on NAF's website?
8	What NAF program have you benefitted from?
Section 2: Beneficiaries who have not used CHM	
9	Were you aware that NAF has an online form on their website that you can use to submit complaints/comments/questions to?
9.1	If yes, why have you not used it?
10	Were you aware that NAF runs a call centre that you can submit complaints/comments/question to?
10.1	If yes, why have you not used it?
10.2	Were you informed of the call centre's working hours?
11	If you had any complaints/comments/ questions about NAF or the benefits you receive or may be entitled to, who would you direct them to? [Multi-Select]
Section 3: Call centre Callers	
12	How did you find out about the call centre?
13	When did you last call the call centre?
14	Was your call answered by NAF staff?
15	What is the longest you have waited in a queue before your call was answered?
16	Why did you call the call centre? [Multi Select]
16.1	What program were you submitting your query or concern about? [Multi-Select]
17	Was the operator able to respond to your query or concern directly?
18	Did the operator refer you to another department?
19	Was your query or concern resolved while you were still on the call?
20	Did the operator inform you when/if they would be able to get back to you and respond to your query or concern?
20.1	Did you receive a follow up call to resolve your query or concern?
20.2	Did you receive the follow up call within the timeframe proposed by the operator?
20.3	How many days later than the proposed timeline did you receive a call?
21	Was your query or concern ultimately resolved?
22	Please Explain
23	Did your use of the call centre contribute to you eventually receiving assistance from NAF?
24	Why not?
25	How would you rate the following?
25.1	The time it took for my call to be answered was appropriate
25.2	The operator was friendly and respectful
25.3	The operator had adequate knowledge of NAF systems and programs
25.4	The information provided by the operator was clear and understandable
25.5	The referral process was smooth and easy
25.6	My complaint was taken seriously and handled professionally
25.7	My experience with the call centre overall was satisfactory
Section 4: Online form users	
26	How did you find out about the form?
27	When did you last submit using the online form?

28	Was the form easy to understand?
29	Why did you use the form?
29.1	What program were you submitting your query or concern about? [Multi-Select]
29.2	Did you receive a follow up call to resolve your query or concern?
30	How quickly did you receive a call after submitting your query or concern?
	Repeat Questions 21-25.7
	Section 5: Wrap Up
31	Is there a complaint that you could not resolve using CHM, but were able to resolve using other means?
33	Are there any ways you feel that NAF CHM can be improved?
	"Thank you, we appreciate your time". End Survey and mark as "complete"

KEY INFORMANT INTERVIEW PROTOCOL

**KII Interview Guiding Questions**

**Introduction**

We would like to thank you for taking the time to participate in this interview.

I am/We are (...) from INTEGRATED, we are currently working with WFP and NAF to assess the effectiveness, capacity, quality, efficiency, responsiveness of the CHM and how it can better serve NAF beneficiaries and the public. The evaluation of the NAF-CHM project aims to:

To further enhance the capacity and effectiveness of the CHM;

To improve the quality and scope of services provided to beneficiaries and the public;

To evaluate and enhance the integration of the CHM with different units and systems at NAF, and its adaptability to the planned scale-up of NAF operations.

We ask that you share your thoughts and opinions on all presented topics and areas of discussion, noting that all information provided will remain confidential and will only be utilized and included as recommendations to inform and give reliability to our final research piece.

**Consent**

Before we start with our discussion session, we would like to note that an audio-recorder will be used to ensure that all information is documented and can be accessed at a later stage. The audiotapes and typed notes will be kept but will not be shared with the general public and will not have any identifiable information about you as participants. Do you consent to having an audio-recorder tape recording this discussion session? (Y/N)

Date	
Number of Attendees	
Organisation	
Title	
Demographic breakdown of attendees	M:                      F:
Place	

There are three lines of inquiry that will be outlined at the outset of the interview.

***Line of inquiry 1: Accessibility to and relevance of the CHM call centre to beneficiaries, public, and NAF programs.***

**On relevance**

In your mind, what is the purpose and identity of the CHM/call centre?  
Before 2019, there was not CHM/call centre. What difference did it make since then and in what ways? In other words, did the CHM service fill a gap? In what ways? What has been its value added in your opinion?  
To what extent is the CHM role and purpose aligned with stakeholders’ strategic priorities, including government, donors, and national strategy?  
Has the operational context changed since 2019? If so, in what ways and how did the CHM adapt to this change, and to what extent is it prepared for other unanticipated contextual changes in the future?

To what extent do you consider the service to have been responsive to the information needs and concerns of beneficiaries and the public? (based on the types of feedback/complaints received to date)

From where you sit, what is *your* expectation of this call centre? What could it be doing better to meet the need? How can it be supported further to do so?

How useful is the CHM/ call centre in supporting the NAF various programs? Why/why not? How can it be adapted to be more relevant to NAF various programs and new initiatives?

How can the CHM role be expanded to better serve the targeted beneficiaries? (e.g. other service providers and services (counseling financial literacy/ guidance, employment opportunities, support funds, GBV, other types of advice not offered by CHM)

### **On accessibility**

How well known is the CHM/ call centre to the people in Jordan? If so, how? If not why?

How are targeted communities made aware of CHM? Which communication channels have been the most successful/effective? How can this be improved?

What are the barriers that prevent eligible population group/areas from reaching the service? And why? (probe: Is the call centre affordable to all NAF beneficiaries? Difficulty getting through to the call centre, average waiting time, cost/affordability, busy lines, etc.) Is it safe or stigmatizing to call? What could be other possible barriers? How can these be overcome?

Is there evidence of exclusion to NAF of specific caseloads such as women, older persons, people living in remote areas, persons with disabilities, any other)?

[Can we get access to an analysis of beneficiaries disaggregated by gender, age, disability, and type of concerns/complaints?]

Do beneficiaries/callers have access to all NAF programs when they reach out to the CHM? Is it part of the mandate of the CHM to facilitate access to NAF programs i.e. refer internally? If not, should it be? (*validating earlier question CHM role within NAF*)

### **Line of inquiry 2: Effectiveness of the CHM/ call centre since its establishment - achievements and shortcomings and lessons from practice**

What was the CHM designed to achieve? And to what extent do you think it has delivered what it intended to do since its launch in 2019? (what is your evidence/indicator on this)

What would you say have been CHM/ call centre's main achievements? What would you consider your measure of success at the end of each quarter or year? (give examples if possible)

What have been the CHM/ call centre's shortcomings? What would you pinpoint as the biggest challenge affecting CHM's effectiveness?

In your view, how can the CHM daily operations (call centre work flow, ticketing, etc.) and reporting mechanisms be optimized?

Have you encountered any issues with the digital ticketing system? Is it fulfilling its purposes? Any glitches, issues, concerns? (within CHM, within broader NAF MIS)

To what extent are beneficiaries satisfied with the service provision of the CHM?

Are there mechanisms in place to link the CHM with various NAF programs? Is there a mechanism (or interest in establishing one) for external referrals to other call centres or service providers? What are the barriers and facilitators for such linkages?

Are there any accountability and compliance measures in place to ensure program quality, adherence to regulations related to privacy, data protection, and secure data backup?

Are staff well-supported to deliver on outreach, response, and referrals to beneficiaries? (tailored training, refresher professional trainings, regular debrief, adaptation of manual, etc.)

**Line of inquiry 3: Sustainability and scale up prospects- reflections and the way forward**

Where do you want to see the CHM in 5-10 years? What would you hope that it achieves for Jordan by then? Do you see the CHM playing a bigger role in the social assistance ecosystem within and outside the NAF? Please elaborate.

To what extent does the CHM have the potential and capacity to step forward and play a central role in connecting with other relevant support services providers?

Based on the partnership between WFP and the government, what has gone well with the WFP-supported cash assistance program? And what needs further improvement (gaps and needs)? What are the entry points for further partnerships that support this collaboration?

Exit strategy: How can efficient and smooth exit take place? What enabling factors are needed to establish this transition/transformation/handover? What capacity development is needed to enable that

*In closing this interview, is there anything else you would like to add that you think could support this evaluation?*

Thank you for your time and support for this evaluation. We really appreciate your time and willingness to talk to us about this and sharing such important information.

## DATA FLOW QUESTIONNAIRE AND OBSERVATION:

- Please give us an overview of the system and how it works. Work flow, issues, linkages and referrals
- Are calls answered by an automated voice answering system? If so, what options are made available to callers?
- Do you record all incoming calls you answer inquiries and complaints from?
- How does a call complaint get registered?
- Where does the registration data go? Is it linked to a unique beneficiary ID? Please show me in the system.
- How does a complaint get processed? What is the call processing diagram? Please show me in the system.
- How is adherence to this diagram ensured? How is it measured? Please show me in the system.
- Quality Assurance Procedures – what are they? Where is the record of quality assurance stored? What happens to that information? Is it analyzed? Is there a feedback loop to the team? To NAF? Is there regular review for identification of areas of improvement? Please show me in the system.
- If a referral made, is it tracked/followed up by NAF CHM? If not, by which institution? Please show me how this is done in the system.
- How does the CHM know when the referral has been resolved? How? Where is that information tracked and stored? Please show me in the system.
- How does the beneficiary receive the feedback regarding her/his complaint? Who does that and how?
- Online submission and dealing with them (does it go to the departments), where does it go?
- Is the system connected with other branches?
- How is the National Call Center connected with the CHM? Do they have access to the digital system?
- Is the government service *Bi Khedmtkom*, connected with the CHM, what is the relationship and how it is connected?
- What are the metrics the CHM uses for measurement of performance? How are those metrics calculated? Please show me in the system.
- Are there any areas for improvement of data flows that you would recommend? Any needs with respect to data, MIS that the CHM could benefit from?

**FGD Protocol and Guiding questions**  
**Frontline Call Centre Staff CHM**

**Introduction**

We would like to thank you for taking the time to participate in this interview.

I am/We are (...) from INTEGRATED, we are currently working with WFP and NAF to assess the effectiveness, capacity, quality, efficiency, responsiveness of the CHM and how it can better serve NAF beneficiaries and the public. The evaluation of the NAF-CHM project aims to:

- To further enhance the capacity and effectiveness of the CHM;
- To improve the quality and scope of services provided to beneficiaries and the public;
- To evaluate and enhance the integration of the CHM with different units and system

We ask that you share your thoughts and opinions on all presented topics and areas of discussion, noting that all information provided will remain confidential and will only be utilized and included as recommendations to inform and give reliability to our final research piece. No names will be attributed to opinions shared in order to encourage call centre staff to engage freely and be assured that there will be no repercussions on their job status or performance.

**Consent**

Before we start with our discussion session, we would like to note that an audio-recorder will be used to ensure that all information is documented and can be accessed at a later stage. The audiotapes and typed notes will be kept but will not be shared with the general public and will not have any identifiable information about you as participants. Do you consent to having an audio-recorder tape recording this discussion session?  
(Y/N)

Date	
Number of Attendees	
Organisation	
Title	
Demographic breakdown of attendees	M:                      F:
Place	

We will begin with a round of introductions of CHM staff and reassurances that their opinions will be fully anonymized and their input will be of utmost value to the purpose of the evaluation and the CHM. (Note: We do not recommend that managers be present at this meeting to give staff space to express concerns with anonymity.)

## **Effectiveness**

### On frontline staff's overall assessment of scope of work

- In simple terms and your opinion what is CHM trying to achieve? Is it fulfilling this?
- To what extent do you think CHM has delivered what it intended in 2019?
- What would you say have been CHM main achievements and limitations?
- When do you know you have left an impact on the people you serve and want to respond to/reach?
- How did CHM adapt to Covid-19? What lessons were learnt from Covid change of operation? How can CHM be made more ready for similar future unanticipated conditions? Is there a preparedness manual or guidelines in cases of emergency?
- What is your measure of success at the end of a quarter or a year?

### On work flow and reporting mechanisms and linkages

- This will be facilitated through an interactive collective process (workshop style discussions) whereby a typical day/week in the life of call centre staff will be visualized on a whiteboard and workflow processes identified and discussed as a group. Elements of effectiveness and difficulties will be plotted where they tend to emerge. Internal and external relationships and linkages will be considered against this backdrop of this mode of work.
- Below are the facilitators' guiding questions for this interactive process:
- Can you please walk me through the steps you take once a client calls in?
- What do you expect to happen after a call is received and responded to? What is the flowchart of steps and actors involved? Is there a follow up there? Is time made to analyze weekly calls as a team and debrief and learn?
- Do operators record all tickets revised?
- Do they record tickets according to their respective category?
- Do operators open- close tickets according to protocol?
- Do staff close the loop with beneficiaries by informing them of the actions taken or solutions reached regarding their referred tickets?
- How can call times be reduced without compromising the quality of closing the tickets?
- Is the quality of the tickets compromised because of staff shortage? Is the load of calls on staff members reasonable?
- Do staff report follow-up action taken on all closed tickets?
- Is the ticketing system working well? Is it compatible with NAF MIS? Should it be?
- What do you recommend to management to improve the ticket handling process?
- To what extent does MEAL process and reporting mechanisms capture disaggregated data by factors of exclusion (such as gender, PWD, age, ethnicity, nationality ...etc)?
- What do you do with the info you receive/retain a call? What tools do you use to report and document learnings and how often do you report (daily/weekly/monthly)?
- How do you know if the response was useful to the caller? Do you/probe at the end of the call? Are there follow up calls/surveys/quality control measures from a senior team member? If yes, how and when do you follow up? In what ways are these tools/ data useful?
- Is it required to follow up/spot check on case reports/tickets/clients? Is there a mechanism in place for that? What are your thoughts about having such mechanisms?
- Is CHM is linked
- internally to various NAF programs
- Is CHM linked to NAF MIS, and do you receive a report with complaint analysis from MIS?
- externally to call centres and service providers? Please elaborate?
- What are the barriers or facilitators for these linkages?
- Which other services could the call centre potentially provide?



### On staff capacity and professional development needs

- On average how long does each call take to resolve? How many calls can staff handle per hour (practically speaking)? In your opinion is this optimal? Why/why not?
- Are you able to respond to all the incoming calls in a reasonable amount of time?
- Is there allocated time among the team for leaves and breaks?
- Is there a web-based chat communication with callers? If not, could it be useful to complement the call centre (or other comms platforms with clients). Is it part of your responsibility to respond to request received via other platforms?
- Do you feel CHM and your role within it is valued by NAF and callers?
- What support do you need to enhance the effectiveness of the CHM call centre?
- What training (s) have you received (for example, GBV), and how useful have these trainings been to you? Has it helped your work, and have you trained your colleagues?
- What further training could you benefit from in your current roles?
- Do you have regular debriefs with the CHM team to take stock of issues and exchange experiences? If so, how often? Are they helpful? If not, would that be useful?
- What happens when you encounter a problem or dead end (cannot help the caller at all) what do you do? What if you encounter a potentially life threatening situation e.g suicide or DV, or an agitated caller? How do you handle that? Do you need support in such situations? Who do you reach out to?
- Are you aware of referral options which can direct callers who need assistance that you cannot provide in your current role? Do you have access to a referral directory? Did you receive training on that?
- How often do you refer to/use the manual? How could it be improved/updated to support your work more effectively? Is the manual updated, and if so, how frequently? (every year, two years, etc.)
- How useful is the manual? How frequently and when do you use it? Where do they keep FAQs for future use?

### **Relevance**

- In your opinion did the CHM service fill a gap? In what ways?
- In your mind what is the purpose and identity of CHM?
- Before 2019- there was no CHM. What difference did it make since then (value added) and in what ways?
- Was the response helpful, did it resolve the question you called for?
- Where do you see CHM in 5-10 years? What would you hope to have achieved in Jordan by then? Do you see the CHM playing a bigger role in the social assistance ecosystem within and outside the NAF?
- For which NAF program is the call centre used? And why? How can the Call centre be adapted to be more relevant to NAF various programs?
- To what extent can the call centre and CHM be linked to other service providers?
- How can the CHM role be expanded (linkages with new NAF entities, services (counseling financial literacy/guidance, employment opportunities, support funds. etc, types of advice) to better serve the targeted beneficiaries?

### **Accessibility**

- Is the call Centre accessible to all beneficiaries regardless of area of residence, gender, age, disability, socioeconomic status, literacy levels, nationality? If so, how? If not, why?
- Do you refer callers to the disability, employment and other programs offered by NAF?
- In your opinion what are the barriers that prevent eligible population groups/areas from receiving the service? And why?
- Is there evidence of exclusion to NAF subsets of caseloads (women, elderly people living in remote areas, PWD)
- Can we get overview analysis of beneficiaries disaggregated by gender, age, disability, location, income bracket, access to internet?
- What are the possible barriers to access the CHM?

- How successful / or effective are available communication channels used to publicise the call centre as a service?
- How well known is the CHM to the people in Jordan?
- How are targeted communities made aware of CHM? Can it be improved?
- How easy or difficult is getting through to the call centre? What is the average waiting time? Are the calls affordable to beneficiaries?
- What are easier ways than the phone line for the beneficiaries to communicate with NAF?CHM?

Would it be helpful to have a Whatsapp direct line to assist/alternate direct access with CHM staff and reduce wait times?

**Close with..**

- Do you have any questions or advice for us as we progress in our review of the CHM?
- What aspects do you advise us to look into further that could help you in your current role?
- When we reach out to beneficiaries across N,S,C regions in Jordan, what would be the key questions you think we should be asking them? Avoiding?

Thank you for your time and support for this evaluation. We really appreciate your time and willingness to talk to us about this and sharing such important information.

## Beneficiaries /end users of CHM

---

### Introduction

---

We would like to thank you for taking the time to participate in this interview.

I am/We are (...) from INTEGRATED, we are currently working with WFP and NAF to assess the effectiveness, capacity, quality, efficiency, responsiveness of the CHM and how it can better serve NAF beneficiaries and the public. The evaluation of the NAF-CHM project aims to:

- To further enhance the capacity and effectiveness of the CHM;
- To improve the quality and scope of services provided to beneficiaries and the public;
- To evaluate and enhance the integration of the CHM with different units and systems at NAF, and its adaptability to the planned scale-up of NAF operations.

We ask that you share your thoughts and opinions on all presented topics and areas of discussion, noting that all information provided will remain confidential and will only be utilized and included as recommendations to inform and give reliability to our final research piece. Full anonymity is promised and no names will be attributed to opinions or issues raised. Participants will be reassured that their participation will in no way affect their benefits or status with the NAF.

---

### Consent

Before we start with our discussion session, we would like to note that an audio-recorder will be used to ensure that all information is documented and can be accessed at a later stage. The audiotapes and typed notes will be kept but will not be shared with the general public and will not have any identifiable information about you as participants. Do you consent to having an audio-recorder tape recording this discussion session?  
(Y/N)

Date	
Number of Attendees	
Organisation	
Title	
Demographic breakdown of attendees	M:                  F:
Place	

After thanking participants for their willingness to participate and offer reassurances of their full anonymity and that no reward or retraction of benefit will be offered based on their participation, the evaluation team will begin the FGD with an opening question to put participants at ease and initiate a conversational style engagement.

The below list of questions constitutes a guide and a series of probing questions to help keep the conversation going and remain aligned with the information needs of this exercise. An opener/opening question would be posed and allow for interaction and exchange between the participants themselves on the related issues; probes will be used to redirect and dig deeper when needed. The discussion will by no means follow a Q&A format.

### Accessibility

- Are you aware of the call centre? How did you learn about the CHM?

- Is the call centre accessible to you? If so, How? (Probe: phone, online, cost, unaware of it). If not, why? Would it make a difference to you if calling the CHM was free?
- Were you able to use the call centre? Did you get through? Do you believe the categories are clear on what you need to do? How long did it take?
- Describe your experience with the IVR in terms of: 1) user friendliness 2) adequacy of information provided 3) no further calls needed 4) responsive to client needs
- What do you think are the possible barriers to access the CHM?
- Do you know people who need it? Why do you think they don't receive the service?
- Do you know people who receive it but do not need it? Why do you think this happened?
- How aware are you of the relevant services provided by various programs of the NAF? Other government, NGO service providers?
- Did CHM facilitate your accessing NAF programs?
- Who helped you communicate with CHM/NAF?
- How easy or difficult was getting through to the call centre? What is the average waiting time? How often do you call? Are the calls affordable? Do you call back when the lines are busy? please explain your answer?
- Have you ever reached out to the national call center? How does CHM compare in terms of staff, usefulness, and efficiency?
- Do you prefer to reach out the branch or to call the CHM/call center? why

### **Relevance**

- Have you been a beneficiary of NAF before 2019? Do you think that the presence of CHM has made a difference?
- In your view how can the CHM role be more relevant and responsive to the needs of the community at this time?
- What program did you call for?
- Were you given the advice you were seeking and an explanation, was the response/information provided helpful? Did it answer the question you called for? Were you able to resolve your concern because of the call?
- If your question/concern was not answered, were you referred to the relevant department or service provider who could help?
- Were you treated with respect? Is there anything the staff could have been more supportive in manner, approach, etc.

### **Effectiveness**

- What did you call for?
- Did you get a response for what you called for?
- Did you get a referral? to which department? Did it resolve your issue? (if yes or No) Why?
- Is there any service you think the call service could have provided in addition to what they offered you? If yes, what would that be?
- Do you think you have special needs that were unaddressed by the call centre? If so, what are they? Probe (Gender Based Violence GBV, sensitive case, etc.
- Are you satisfied with what was provided to you by the call centre?
- Are you satisfied with the call centre operation? Probe (working hours, call centre agents, quality of feedback provided, follow-up actions, etc)
- What would you recommend the call centre would deliver a quality service?
- How long did it take the call centre to offer you a response once the complaint was registered?
- Did you have a complaint against a call centre personnel? If yes, were you able to speak to a supervisor?
- Were you satisfied with the quality of the follow up?
- How long did it take the call centre to offer you a response once the complaint was registered?
- Did you have a complaint against a call centre personnel? If yes, were you able to speak to a supervisor?

- **Complaints Handling Mechanism**

- Were you satisfied with the quality of the follow up?
- Did the call centre staff close the loop with you? By informing you of the actions taken or solutions reached regarding the complaint registered?
- Were you referred to a specific department? If yes, tell me what happened? Is the call centre team well integrated with other NAF staff/ units?
- After you called the centre, there was a follow up from the department? Please elaborate?

## Annex 3: The key stakeholders who were interviewed

Organization	Key informant	Title	Role in relation to CHM	Date of Interview
WFP	Oroub Eneim	Programme Associate/ Social Protection	WFP focal point and embedded staff within NAF	29 November 2021
	Stefano Santoro	Head of Cash Based Transfer	To provide general background and strategic inputs about CHM.	1 December 2021
	Manal AlKhateeb	WFP Call centre Supervisor	WFP focal point within NAF on all issues related to CHM and the call centre.	2 December 2021
	Lina Al Abdullat	WFP	WFP embedded staff at NAF and was instrumental in developing and enhancing the CHM digital system with Optimiza	14 December 2021
NAF- CHM	Munther Mazlaq	NAF Call Centre Supervisor	Munther is currently the supervisor of the NAF call centre.	30 November 2021
	Khawla Abu Sarara	Head of Studies Department	NAF's Management and oversight	2 December 2021
	Victoria Alwahsha	NAF Call Centre Former Manager	Victoria was the NAF call centre's Manager.	6 December 2021
	Mohammad Reyahi	Management	NAF's Management and oversight	7 December 2021
World Bank/ UNICEF	Rada Naji	Social Protection Specialist	Rada Naji served as the UNICEF focal point at the time the CHM was established, and now works for the World Bank.	9 December 2021
NAF- Branches	Dr. Wafaa Tarawneh	Branch Manager/ Al Karak Branch	To assess the handling of queries, complaints, or grievances at branch level to the CHM and vice versa.	19 December 2021
	Firas Darouqa	Branch Manager /Wadi Elseir Branch	To assess the handling of queries, complaints, or grievances at branch level to the CHM and vice versa.	19 December 2021

The evaluation team was supposed to meet with his excellency Mr. Ayman Rabaa, as stated in the inception report, but the meeting was rescheduled several times based on his request due to his busy schedule, and the meeting did not take place, as the team finished data collection by the time the meeting was rescheduled to.

# Annex 4: Sampling Framework

Survey Sampling										
Sample Size	Sample Size (per beneficiary group)									
<p>The sample size n and margin of error E are given by</p> <table border="1"> <tr> <td>x</td> <td>=</td> <td><math>Z(c/100)2r(100-r)</math></td> </tr> <tr> <td>n</td> <td>=</td> <td><math>N x / ((N-1)E^2 + x)</math></td> </tr> <tr> <td>E</td> <td>=</td> <td><math>\text{Sqrt}[(N x) / n(N-1)]</math></td> </tr> </table> <p>N is the population size, r is the target fraction of responses, and Z(c/100) is the critical value for the assumed confidence level.</p> <p>Assumed response distribution = 50%</p>	x	=	$Z(c/100)2r(100-r)$	n	=	$N x / ((N-1)E^2 + x)$	E	=	$\text{Sqrt}[(N x) / n(N-1)]$	<p>Sample Size (total)/3</p> <p>Sample size across the three population sub-groups (online CHM users, hotline users, and NAF beneficiaries who do not use the CHM) were uniform to ensure that beneficiaries who have not utilized any form of the CHM are not overrepresented. Each group was further stratified by gender and geographic location to guarantee proportional representation of all demographics.</p>
x	=	$Z(c/100)2r(100-r)$								
n	=	$N x / ((N-1)E^2 + x)$								
E	=	$\text{Sqrt}[(N x) / n(N-1)]$								

## Focus Group Discussion Sampling

**FGDs in branch offices:** The Focus Groups were held in three governorates/localities, each with two FGDs: Amman, Ajloun, and Al Karak, with 6-8 beneficiaries in each. The branch managers were responsible for inviting 6-8 beneficiaries to each of two focus groups, one all-male and the other all-female, with each group consisting of a mixed group of NAF beneficiaries from an identified 'poor' community who had benefited from NAF CHM and those who had not.

## Annex 5: Evaluation Team

**Suzanne Hammad (Team Lead)** has over 20 years of progressive experience in the non-profit and academic sectors, 10 of which were senior roles or consultancies involving strategic planning, rights-based program design and conceptualization, research and evaluation, partnerships development, and staff management and capacity building. She is a strong advocate of community engagement and empowerment, participatory and collaborative approaches, youth and women's roles in societal progress and intergenerational dynamics. She has a solid set of design, participatory and innovative qualitative methodologies and data analysis, as well as strong conceptualization, critical analysis and writing skills. She has a strong understanding of the MENA region and challenges confronting societies in diverse contexts; and has experience with UN bodies. She has excellent command of English and Arabic as well as excellent leadership and communication skills. She holds a DPhil in Sociology from Queens University in Belfast; an MA in Social Policy and Administration from Nottingham University in the UK; and a BA in Sociology from the American University of Cairo in Egypt.

**Yosra Al Sarraj (M&E Specialist)** is a MEL Specialist with extensive experience in Jordan with USAID, DAI, Jordan Exports, Level 5 Consulting Group and Business and Professional Women Amman, serving multiple sectors and populations inclusive of refugee and marginalized groups. She has developed and implemented sound M&E plans/strategies that include a theory of change and logical framework; as well as methods and tools for collecting data on defined outputs and outcomes in the theory of change. She has proven experience in results-oriented performance, ensuring adherence to deliverables and timelines and capacity building evidence-based decision-making. She has excellent command of English and Arabic as well as excellent communication skills. She holds an MSc in International Development Management from University of Westminster and a BA in Business Economy from University of Jordan.

**Zeid Qiblawi (Data Analyst)** is an experienced researcher with a focus on data analytics. His portfolio of work includes data quality assurance and analysis on large scale data collection activities revolving around employment, COVID and social cohesion. Illustrative assignments include EBRD-funded research on impact of COVID, Mercy Corps Local Community Development Evaluation, and USAID Training for Employment Activity Evaluation. His focus is on data analysis and quality assurance and utilizes Alchemer, PowerBI, SPSS and STATA. He has a degree in Sociology and Anthropology (with a minor in Philosophy) from the American University of Beirut.