

EVALUATION
REPORT

December 2015

Evaluation of UNICEF's humanitarian response to the Syria crisis



Volume 2: Appendices

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EVALUATION OF UNICEF'S HUMANITARIAN RESPONSE TO THE SYRIA CRISIS

Final Report

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ACRONYMS

3RP	Regional Refugee and Resilience Plan	L3	Level 3 emergency
ALNAP	Active Learning Network for Accountability and Performance	M&E	Monitoring and evaluation
CCCs	Core Commitments for Children in Humanitarian Action	MENA	Middle East and North Africa
CEAP	Corporate Emergency Activation Procedure	MENARO	Middle East and North Africa Regional Office
CEE/CIS	Central and Eastern Europe and the Commonwealth of Independent States	MRM	Monitoring and Reporting Mechanism
CERF	Central Emergency Response Fund	NGO	Non-governmental organization
CFS	Child-friendly schools	NSE	Non-state entity
CMT	Crisis Management Team	OCHA	Office for the Coordination of Humanitarian Affairs
CO	Country office	OECD	Organisation for Economic Co-operation and Development
CP	Child protection	OHCHR	Office of the United Nations High Commissioner for Human Rights
DAC	Development Assistance Committee	PCA	Programme cooperation agreement
DED	Deputy Executive Director	PD	Programme Division (UNICEF)
DFID	Department for International Development	PPD	Public Partnerships Division (UNICEF)
DHR	Division of Human Resources (UNICEF)	RD	Regional Director
ECHO	European Commission's Humanitarian Aid and Civil Protection department	RO	Regional office
ED	Executive Director	RRP	Regional Response Plan
EMOPS	Office of Emergency Programmes (UNICEF)	SARC	Syrian Arab Red Crescent
EMT	Emergency Management Team	SHA	Strengthening Humanitarian Action
EO	Evaluation Office	SHARP	Syrian Arab Republic Humanitarian Response Plan
EWEA	Early Warning Early Action	SSOPs	Simplified Standard Operating Procedures
FAO	Food and Agriculture Organization	ToR	Terms of reference
GBV	Gender-based violence	UN	United Nations
GEC	Global Emergency Coordinator	UNDP	United Nations Development Programme
HFSS	Humanitarian Field Support Section (UNICEF)	UNEG	United Nations Evaluation Group
HQ	Headquarters	UNESCO	United Nations Educational, Scientific and Cultural Organization
HR	Human resources	UNFPA	United Nations Population Fund
IASC	Inter Agency Standing Committee	UN-Habitat	United Nations Human Settlements Programme
IDP	Internally displaced person	UNHCR	United Nations High Commissioner for Refugees
INEE	Inter-Agency Network for Education in Emergencies	UNICEF	United Nations Children's Fund
IP	Implementing partner	WASH	Water, sanitation and hygiene
IRT	Immediate Response Team	WFP	World Food Programme
ITS	Informal tented settlement	WHO	World Health Organization
L2	Level 2 emergency	WoS	Whole of Syria

APPENDIX 1: EVALUATION TERMS OF REFERENCE

TERMS OF REFERENCE

1. BACKGROUND

1.1 Starting from non-violent protests in February 2011, the crisis in the Syrian Arab Republic accelerated into an all-out conflict inflicting untold suffering and hardship on civilian populations, resulting in 6.65 million children living in dire conditions. Spiralling levels of violence and displacement to this day continue to tear apart the fabric of Syrian society, creating one of the largest refugee crises in recent years. The refugee dimension of the crisis is placing countries in the region – and vulnerable host communities – under such stress that their situation may become politically and socially unsustainable. The political challenges faced locally have changed and evolved, while the security situation is under constant flux. This environment is impacting the implementation challenges and conditions faced by humanitarian organizations assisting the local population. The Syria Coordinated Accountability and Lessons Learning portal presents a crisis timeline, situation analysis and other information relevant to this crisis.¹

1.2 As of October 2014, the United Nations estimated that more than 11 million people inside the Syrian Arab Republic were in need of humanitarian assistance,² including 5.1 million children. A further 1.55 million children require assistance across the sub-region.³ Approximately 6.4 million people have been displaced inside

the Syrian Arab Republic, with more than one third of all Syrian children no longer living in their own homes and communities. Conservative figures from the United Nations meanwhile estimate that more than 191,000 people have lost their lives in the conflict. With at least 10,000 children killed in the Syrian Arab Republic since 2011, child casualty rates are the highest recorded in any recent conflict in the region.

1.3 Since 2011, more than 3 million Syrians have left their homes to become refugees in neighbouring countries. This number continues to rise. Some are stranded at the border, while those who are able to cross face multiple hardships, from coping with harsh refugee camp environments, to finding a way to settle in already under-resourced host communities. The Syrian Arab Republic's regional neighbours have made tremendous efforts to accept the flood of refugees. Yet, in these countries, the influx has pushed up demand for already scarce supplies and resources, such as increased competition for livelihoods and access to basic social services, including places in school.

1.4 In response to the deteriorating crisis in the Syrian Arab Republic and the sub-region, the United Nations Children's Fund (UNICEF) mounted a complex and costly response operation, taking into account the middle-income context of the affected countries and the exponentially growing scale of the needs. Since 2012, UNICEF has appealed for nearly US\$1.36 billion in

¹ See Syria Evaluation Portal for Coordinated Accountability and Lessons Learning (CALL), <www.syrialearning.org/>, accessed 2 May 2016.

² See Office for the Coordination of Humanitarian Affairs, 'Syrian Arab Republic', <www.unocha.org/syria>, accessed 2 May 2016.

³ '#Childrenof Syria', UNICEF, <<http://childrenofsyria.info/>>, accessed 2 May 2016.

total for the Syria crisis (US\$765 million⁴ for 2014 alone, which was more than one third of UNICEF's 2014 annual global Humanitarian Action for Children appeal). Against the appeal since 2012, UNICEF has received a total of US\$965 million for the Syria crisis as of September 2014. UNICEF's response now encompasses six country offices – Egypt, Iraq, Jordan, the Syrian Arab Republic and Turkey – and coordination between two regional offices (ROs) – the Middle East and North Africa Regional Office (MENARO) and the Central and Eastern Europe and the Commonwealth of Independent States (CEE/CIS) Regional Office. The situation reports that include updated funding status and other relevant information can be found on the UNICEF website.⁵

- 1.5 The crisis has been the focus of organization-wide support from January 2013 onward with the declaration of the Level 3 (L3) Corporate Emergency Activation Procedures (CEAP).⁶ A massive effort was made to scale up UNICEF's operational and programmatic support. The pre-emergency profile of small upstream-focused country offices was radically changed to meet the needs of large-scale, emergency-oriented programmes, with the necessary increase in the volume of country office staff, where some countries had to expand by more than 300 per cent in less than two years. This scale-up facilitated cooperation and support in entirely new areas of programming and the opening of new field sub-offices to support children located in hard-to-reach areas.

- 1.6 With the Syria crisis now well into its fourth year, UNICEF requires an independent evaluation of its humanitarian response to the Syria crisis, including the response in the sub-region, to advance organizational learning and accountability. A scoping mission and preliminary consultations conducted on behalf of the UNICEF Evaluation Office in September 2014 informed the preparation of these Terms of Reference (ToR). The results of the interviews and the preliminary desk review conducted during this scoping phase will be made available to the evaluators to minimize duplication of effort and provide an indication as to which lines of enquiry are most significant and relevant in pursuing the objectives of the evaluation.

- 1.7 It is recognized that UNICEF teams and their partners are continuing to provide assistance under very difficult circumstances. In undertaking the evaluation, every effort should be made to use existing sources of information and to minimize demands on staff and partners while undertaking sufficient consultations to allow a systematic and coherent approach.

2. PURPOSE AND OBJECTIVE

- 2.1 The evaluation is intended to serve both an accountability function (historical/summative) and a learning function (forward-looking/formative). The scale and funding for the crisis necessitates an accountability function; the fact that the crisis is becoming a protracted emergency necessitates the learning function. Equal weight is attached to both. The evaluation

⁴ United Nations Children Fund, 'Humanitarian Action for Children 2016 – Syrian Arab Republic', <www.unicef.org/appeals/syria.html>, accessed 2 May 2016.

⁵ For additional information, see: <www.unicef.org/appeals/syria_sitreps.html>, accessed 2 May 2016.

⁶ An L3 emergency is declared on the basis of: scale, urgency, complexity, capacity and reputational risk to UNICEF and/or the United Nations. In an L3 emergency, UNICEF calls for an institution-wide and global mobilization through its CEAP. Predefined Simplified Standard Operating Procedures (SSOPs) allow UNICEF to respond effectively and immediately to the situation. A Level 2 (L2) emergency is led and managed by a regional office.

aims to support further strengthening of UNICEF's performance in protecting children's rights and well-being in the region and in responding to large-scale multi-country emergencies.

- 2.2 The purpose of the evaluation is to provide a comprehensive assessment of UNICEF's overall response to the Syria crisis against its own mandate and standards, its stated objectives, and standard evaluation criteria. The evaluation, based on collation and analysis of relevant data and information, will generate evidence, conclusions and key lessons and will make recommendations concerning UNICEF's future humanitarian responses both in the sub-region and elsewhere.
- 2.3 The main objective is to provide an independent and robust evaluation of UNICEF's emergency response under three main headings (core themes):
 - (i) UNICEF's **strategy and key programme interventions**, programme choices and related operations, including attributable results.
 - (ii) UNICEF's **engagement with other actors**, with a primary focus on its role in sector coordination where relevant; and a secondary reflection on its collaborations with key stakeholders, including governments, other United Nations agencies, beneficiaries and implementing partners.
 - (iii) UNICEF's **management structures and operational processes**, including its L2 and L3-related procedures, in relation to its Syria crisis response and performance.

The evaluation should take into consideration the evolving political context and its influence on decisions made during each phase of implementation. To this end, a detailed political timeline should be developed alongside the implementation timeline to illustrate the interaction of political and humanitarian events,

processes and decisions. The above three themes are further elaborated in the evaluation questions in Section 4 below.

- 2.4 The main intended users of the evaluation are managers and staff in MENARO and the CEE/CIS Regional Office and in the country offices in the sub-region; senior managers, policy makers and advisors in headquarters; and others in UNICEF for whom the Syria response holds relevant lessons. It is also envisaged that the evaluation should be of interest and use to UNICEF's governmental partners, donors; other United Nations agencies; UNICEF's sector co-leads; members of working groups led or co-led by UNICEF and its implementing and other partners.

3. SCOPE

- 3.1 As noted above, the intention is to evaluate the UNICEF response in terms of three core themes: programme delivery (including programme strategy and programme implementation); external engagement; and internal process. However, given the scale, extent and duration of UNICEF's response in the sub-region, it will not be possible to evaluate every aspect of the response, nor to go into equal detail on every element of the programme. While maintaining an overview of the response as a whole, the evaluation will focus on a sub-set of issues for in-depth consideration.
- 3.2 One of the important elements of this evaluation will be an assessment of how the UNICEF response changed as it moved from a modified L2 to an L3 emergency response. The proposed primary focus period was, therefore, chosen to cover six months of the modified L2 period and two years of the L3 period. The geographic focus is based on (1) the number of refugees in each country and the scale of UNICEF's response; (2) an initial assessment of availability of data; and (3) ease of access for evaluation purposes. UNICEF's response to the refugee crisis in Turkey

will be considered within the scope of the current evaluation – but the source of data and analysis on the response in this country will largely be based on a separate country evaluation to be managed by the UNICEF CEE/CIS Regional Office and the UNICEF Turkey Country Office. The separate evaluation of the UNICEF response in Turkey will be coordinated with this evaluation so that the results of the two evaluations can be easily aggregated. The Syrian Arab Republic itself is included as a central element of the evaluation, despite the acknowledged difficulties posed by access restrictions and limited availability of data. The flagship programmes are those identified by the Regional Office as being of particular importance to the relief effort. In addition, UNICEF's response should be assessed in relation to the established benchmarks, such as the Core Commitments for Children in Humanitarian Action (CCCs)⁷ and the degree to which the UNICEF response was aligned with the existing guidelines, standards and criteria.

- 3.3 Based on initial scoping consultations with staff in the sub-region and in UNICEF Headquarters (HQ), the following areas of focus are proposed (subject to further validation during the inception phase):

Temporal focus

- Primary focus on the periods (i) from first quarter of 2012 to the end of 2014 (L2/L3 period)
- Secondary focus on mid-2011 to the first quarter of 2012; and on January 2015 to mid-2015 (i.e. the end of the evaluation period)
- The evaluation will present recommendations on best path forward focused on the period mid-2015 to end 2016.

Geographic focus

- **Jordan, Lebanon, the Syrian Arab Republic and Turkey**

Programmatic focus

The evaluation will focus on the UNICEF 'flagship' programme areas:

- Water, sanitation and hygiene (WASH): **water supply**
- Health: **immunization**, with a special analysis of measles and polio immunizations
- Education: **access to education**
- Child protection: **psychosocial support and the Monitoring and Reporting Mechanism⁸ on grave violations against children in armed conflict.**

- 3.4 The evaluation aims to address UNICEF's response to the emergency across the sub-region. It is not intended to evaluate separately each country programme response. Rather, examples from country programmes will be considered for the light they shed on the four core themes of the evaluation, and on other specific topics identified over the course of the evaluation. To this end, the evaluation questions will follow the lines indicated below. Furthermore, the evaluation should draw to the extent possible on desk reviews, existing programme reviews and evaluations that have produced high quality outputs. This is to avoid duplication and maximize the work already undertaken, with an assessment of the quality of outputs to ensure they do not negatively impact this evaluation.

⁷ See United Nations Children's Fund, 'UNICEF in Emergencies & Humanitarian Action: Core Commitments for Children', 18 March 2016, <www.unicef.org/emergencies/index_68710.html>, accessed 2 May 2016.

⁸ Office of the Special Representative of the Secretary-General for Children and Armed Conflict, 'Monitoring and Reporting', <<https://childrenandarmedconflict.un.org/our-work/monitoring-and-reporting/>>, accessed 2 May 2016.

4. EVALUATION QUESTIONS

The proposed guiding questions for the evaluation cluster into four groups based on the core evaluation themes (the precise scope will be determined during the inception phase):

4.1 UNICEF's role and strategy

- (i) *Given its mandate and capacities, did UNICEF establish for itself a relevant and appropriate role in the affected countries – with regard to the focus, scale and nature of its interventions? (In Jordan, Lebanon, the Syrian Arab Republic and Turkey)*
- (ii) Did UNICEF establish a clear strategy for its interventions (including advocacy and partnership)? How clear was the theory of change in each case and was it plausible? Were other strategic options considered? Were the strategies adopted best suited to the prevailing country situation?
- (iii) Was UNICEF's strategy adequately informed by needs assessment, the prevailing political situation and situational analysis? Did UNICEF have adequate capacity to manage the crisis? Was it related to UNICEF's actual or perceived comparative advantage? Was specific attention given to disaggregated analysis of the needs of children, women and various communities and social groups? How far did UNICEF follow a rights-based approach?
- (iv) How responsive was the UNICEF strategy over time to changes in the external environment, including the evolving role of other actors?

4.2 UNICEF's programme and advocacy response⁹

- (i) Were the individual components of UNICEF's response to the crisis *appropriate* in kind, *proportionate* to need and

timely? Did UNICEF give active consideration to alternative approaches?

- (ii) Was the programme design and implementation adequately informed by needs assessment and monitoring information? What was the quality of UNICEF's and its partners programme monitoring approaches, processes and systems? How far were results disaggregated?
- (iii) How *effective* was UNICEF's response in achieving its objectives? What evidence exists concerning the results of UNICEF's responses? What evidence can be produced to show the results improved equity or increased inequalities?
- (iv) How *efficiently* did UNICEF use its resources (money, people/time, skills and reputational assets) in responding to the crisis? What was the cost-benefit profile across the sub-region (actual vs. comparative), and how do costs and benefits compare (a) across UNICEF programmes on a country by country basis; and (b) with comparator organizations?
- (v) How *coherent* was UNICEF's programme in each country? Were sectorial interventions mutually reinforcing? How consistent were the overarching approaches with respect to the CCCs and quality of sectorial interventions across the sub-region?
- (vi) As the emergency evolved, and taking specific country situations into consideration, how well has UNICEF combined emergency relief and service delivery with more developmental or resilience-related approaches?
- (vii) How far did UNICEF attend to cross-cutting issues including equity, gender and disability? Was sufficient attention given to consideration of human rights and equity issues, including discrimination and social exclusion?

⁹ 'Response' includes the UNICEF advocacy response plus the supply and services components of the response.

4.3 UNICEF's engagement with others

- (i) Was UNICEF's choice of partners appropriate and based on adequate assessment of capacity? Was consideration given to the alternative partnership options open to UNICEF?
- (ii) How effectively did UNICEF and its partners engage with affected communities and those targeted by its programmes, including children, young people and women, concerning the design and implementation of its responses? What processes of beneficiary feedback were put in place? Were there differences between sectors and geographical locations, including camp and non-camp locations?
- (iii) Did UNICEF establish appropriate and productive working relations with key partners including government where relevant (at central/ministerial and local levels) in Jordan, Lebanon, the Syrian Arab Republic and Turkey? Did these relations evolve appropriately over time? Were capacities built to address children's issues?
- (iv) Did UNICEF manage to establish effective and mutually accountable implementing partnerships with international and national non-governmental organizations (NGOs) in Jordan, Lebanon and the Syrian Arab Republic? Where such capacity was lacking, how well did UNICEF adapt its approach?
- (v) How well did UNICEF perform as co-lead of the relevant sector working groups and sub-working groups in the sub-region (WASH, education, child protection), particularly within key interagency joint planning processes (Syria Humanitarian Assistance Response Plan (SHARP)/ Regional Response Plan (RRP))? Did it have conflicting interests in this role, and if so how well did it manage such conflicts?

4.4 Internal UNICEF management and process

(For all questions: by country/sub-region)

- (i) Were UNICEF's management arrangements for the sub-regional crisis response appropriate and effective? Were roles and accountabilities clear as between Headquarters, MENARO, the Syria Crisis Hub and country offices? As between the MENA and CEE/CIS regions?
- (ii) Specifically, how *efficient and effective* was the Syria Crisis Hub mechanism in supporting the response? Were other arrangements considered?
- (iii) What effects did the L3 declaration have on the crisis response – initially and over the course of 2013–2014? Were the L3 SSOPs appropriate to the context, how well were they applied, and what effect did they have on UNICEF's performance?
- (iv) Operational support: how *effective and efficient* were UNICEF's operational support services? In particular, how well was the human resources (HR) function performed? How well were the supply functions performed? Were the relevant SSOPs applied with respect to HR and operational processes?
- (v) Financial and risk management: how *effective and accountable* was UNICEF's management of the funding and finances of the programme? To what extent did the dependence on particular funding sources constrain or support UNICEF's efficiency and effectiveness? (To the extent possible, the audits presented to the evaluators should be used for this question).
- (vi) Were applications for funding from the Central Emergency Response Fund (CERF) timely and appropriate? With respect to effectiveness, efficiency and quality of results, how well were CERF funds managed? (For additional information on CERF grants, please refer to following link: <www.unocha.org/cerf/about-us/humanitarian-financing>).

- (vii) How well did UNICEF manage related contractual processes (programme cooperation agreement (PCA), procurement, supply contracts and other)? Were the relevant SSOPs applied with respect to contractual processes?

4.5 Recommendations

Looking ahead, on the basis of evidence to date and in view of the continuing evolution of the crisis, what should be UNICEF's role from mid-2015 to the end of 2016, taking the conflict and political situation into consideration? Does it have the right strategy? What are the relevant options open to UNICEF?

Recommendations should cover all aspects of the evaluation, including those related to Sections 4.1–4.4 above.

5. METHODOLOGY AND APPROACH

- 5.1 With regard to the approach taken by the evaluation, given the combined accountability and lesson-learning rationale of the evaluation, a balance will need to be struck between independent scrutiny and participatory approaches. With respect to the latter, a relatively high level of participation is anticipated in terms of feedback and discussion of interim and final findings and recommendations. That said, the intention is not to produce a consensus report, but rather one that reflects the judgement of the evaluation team, fully informed by evidence and feedback.
- 5.2 With regard to methodology, the exact questions to be pursued and the methods for pursuing them will be agreed during the inception phase (see below), but some overall stipulations can be made here. The evaluation will employ a mixed-method approach, using qualitative and quantitative techniques and triangulation of data to compile a robust and credible evidence base in order to assess UNICEF's response to the Syria crisis at the global, regional and country levels. Assessing

the response will require disaggregated analysis by age, gender and disability, as well as by camp / non-camp location. Attention is also required regarding issues of equity, child rights and discrimination. It is expected that the evaluation will use the following methods at a minimum:

- **Key informant interviews and focus group discussions:** The evaluation team is expected to interview or conduct focus groups with key informants in person or by telephone or Skype. Key stakeholders will include, but not be limited to, UNICEF staff in the relevant country offices, regional offices and the Syria Hub, and Headquarters; Immediate Response Team (IRT) and other surge staff, cluster members and partners; national and sub-national authorities; donors; and members of the affected population (including children and youth).
- **Direct observation:** The evaluation team will undertake field visits to observe UNICEF's responses directly and conduct interviews with aid recipients and affected populations to determine their view of UNICEF's programmatic and operational responses. Methods for consulting effectively with affected populations will need to be developed in consultation with UNICEF staff and partners in the relevant areas with a particular focus on the 'do no harm' principle, i.e. ensuring that the safety and security of beneficiaries and partners is not compromised by any actions on the part of the evaluation team.
- **Formal desk review:** In addition to rapid review of data in the scoping and inception phases (*see below*), the evaluation team will conduct a systematic and detailed desk review of documents, data and other inputs, building on the existing preliminary desk review conducted in the scoping phase. The evaluation team will use appropriate

data collection tools to organize the information, in collaboration with the Evaluation Office.

- 5.3 The evaluation will be conducted in phases as follows:

Phase 1: Scoping phase (September/October 2014)

The scoping phase of the evaluation has already been completed. This involved consultations with key internal and external stakeholders in the sub-region and at Headquarters level concerning the purpose and essential elements of the evaluation, together with a preliminary desk review of the availability of relevant data and documentary evidence.

Phase 2: Inception phase (January 2015)

Given the work already done in the scoping phase, it is envisaged that the inception phase of the evaluation will not involve a separate mission to the region. The purpose of the inception phase is to enable the evaluation team and UNICEF to reach a common understanding as to the nature of the task, the questions to be addressed, the sources and methods to be used, and the outputs to be delivered. It will also enable the evaluation team to undertake initial consultations with key informants, and also to review the available data and documentary material, including material generated in the scoping phase.

The inception report, a draft of which will be circulated for comment internally, will form the mutually agreed basis for conducting the evaluation. It should include an evaluation matrix, detailing the questions to be asked together with related indicators and likely sources of verification.

UNICEF will be responsible for providing all of the relevant documentation, including strategy documents, situation and monitoring reports, needs assessment reports, lessons learned exercises,

timelines of key decisions and main contact lists of key informants in the country offices, the regional offices and at Headquarters level. Other documents will be made available on the request of the evaluators through the course of the evaluation. During the inception phase, a detailed stakeholder analysis; tools that will be used for additional data gathering and analysis; and detailed methodological approach should be documented and provided as an annex to the inception report.

The inception phase will require a visit by the Team Leader and (as appropriate) other members of the team to UNICEF Headquarters in New York, for briefing and initial consultations. During this phase, phone consultations and other preparatory communications with the Amman (MENARO), Geneva (CEE/CIS Regional Office and the Office of Emergency Programmes (EMOPS)), New York (EMOPS, Programme Division (PD), Evaluation Office, etc.) and Copenhagen (Supply Division) and other regional offices will be undertaken.

The main output from this phase will be (i) an inception report with annexes indicated, (ii) a short (two-page) evaluation brief, summarizing the purpose, key questions and process for the evaluation, for sharing with internal and external stakeholders. A full bibliography of key documents reviewed for the inception phase is to be provided as an annex to the inception report. Where the documents are used to provide secondary data, the source should be clearly noted.

Phase 3: First field mission, data gathering and preliminary briefings (February to mid-March 2015)

This is the main data-gathering phase. The timing, schedule and itinerary should be agreed with the regional offices and country offices, which will facilitate the mission as appropriate. It is envisaged that the field component should commence in the first week of February and

last for approximately three weeks. Based primarily on key informant interviews, direct observation and documentary review, the team should by the end of this phase have produced a preliminary briefing report for discussion with UNICEF staff. The purpose of this is two-fold: (i) to feed into relevant strategic planning and policy review processes (mid-year reviews, etc.); and (ii) to provide an initial basis for validation of findings to be followed up on in Phase 4.

Prior to the writing of the preliminary briefing report, a presentation on the initial findings should be given in MENARO in Amman before the team leaves. It is envisaged that a discussion of these initial findings with UNICEF staff in the sub-region should help inform the writing of the preliminary briefing report.

The main output from this phase will be: (i) a presentation on the preliminary briefing from the first field mission; and (ii) a preliminary briefing report.

Phase 4: Second field mission, validation of findings and production of first draft report (end of March to mid-May 2015)

This phase is intended to allow time for more detailed follow up on key areas of the evaluation, cross-checking and validation of the provisional analysis from Phase 3, and filling of gaps in documentation, key informant interviews and other consultations. Further field visits are envisaged during this phase, on a basis to be agreed with the regional and country offices concerned. This phase should also allow time for conducting and analysing the results of a survey (or multiple surveys) on relevant aspects of the UNICEF response, if this forms part of the agreed methodology. In the inception phase the details of beneficiary surveys will be decided upon. The rapid beneficiary survey undertaken as part of the evaluation of the UNICEF response to the Typhoon Haiyan emergency in the Philippines can be used as a model.

The main output from this phase will be a first full draft of the evaluation report as a basis for consultation.

Phase 5: Consultation on draft report, revision and production of final report (mid-May to end of June 2015)

This phase allows for full consultation with internal stakeholders on the draft report. Two main rounds of consultation and revision are envisaged (second draft, third draft) plus a more limited consultation on the final draft.

The main output from this phase is the production of a final evaluation report that takes due account of feedback given during the consultation phase. The consultants will be responsible for compiling feedback in the form of a comments matrix for each round of consultation.

Phase 6: Dissemination (July 2015 onwards)

It is envisaged that a final visit to the sub-region will be scheduled to communicate the findings, conclusions and recommendations of the evaluation, to facilitate strategic reflection on the response and to discuss the uptake of lessons learned and recommendations. One or more facilitated, participatory workshops would be conducted with staff from the regional offices and country offices, potentially also including UNICEF's key partners. This is subject to further discussion with the regional offices and country offices at the inception phase and later stages of the evaluation.

6. MANAGEMENT AND GOVERNANCE ARRANGEMENTS

- 6.1 The UNICEF Evaluation Office will manage the evaluation, in close collaboration with the country offices, regional offices, EMOPS, PD and other divisions and offices concerned with the Syria crisis. A senior evaluation specialist, supported by an evaluation specialist, will manage the evaluation process from start to finish,

under the guidance of the UNICEF Director of Evaluation. The Evaluation Office will commission a team of external consultants to undertake the evaluation (see Section 8 below for details).

- 6.2 The Reference Group for the Syria sub-regional humanitarian evaluation will be established at the outset of the evaluation to ensure the relevance, accuracy and credibility and therefore the utility of the exercise. The Reference Group will serve in an advisory capacity and its main responsibility will be to provide feedback on the main evaluation deliverables. The Reference Group will be chaired by the Evaluation Office Director, with membership composed of members of the Emergency Management Team. A ToR outlining the roles and responsibilities of the Reference Group has been developed and can be shared upon request.
- 6.3 UNICEF regional offices and country offices will be kept informed of the evaluation progress on a regular basis, and will be invited to the participatory workshops at the end of the evaluation process. A page on the UNICEF Syria Evaluation team site will be set up for the evaluation to post regular updates, promote communication and ensure transparency.

7. DELIVERABLES AND TIMEFRAME

- 7.1 The main deliverables and proposed related dates are as follows:

A. Inception report (including a two-page evaluation brief)

The inception report should be no longer than 12,000 words, not including annexes.

Due dates:

- (i) First draft by 19 January 2015 (for draft inception report and two-page evaluation brief)
- (ii) Comments given by 27 January 2015
- (iii) Inception report finalized by 30 January 2015

B. Initial findings presentation; preliminary findings report

Preparation for the field mission is to take place from 2–6 February 2015. Clearance from the UNICEF Evaluation Office is needed before the field mission can start. The preliminary findings report should be no longer than 5,000 words.

Due dates:

- (i) Initial findings presentation by 20 February 2015
- (ii) Preliminary findings report by 13 March 2015

C. Evaluation report

The evaluation report should be no longer than 15,000 words, not including annexes, and should include an executive summary of no more than 2,500 words.

Due dates:

- (i) First full draft by 15 May 2015
- (ii) Second draft by 1 June 2015
- (iii) Third draft by 15 June 2015
- (iv) Final version by 26 June 2015

8. EVALUATION TEAM

An evaluation team of between seven and eight people is envisaged. This would be made up as follows:

Team Leader responsible for the overall delivery of the evaluation according to the ToR and inception report. This person will have a minimum of 15 years of experience working in the humanitarian sector, including previous experience leading major, multi-disciplinary evaluations. S/he should be conversant with UNICEF, its mission and working methodologies, and should have an in-depth knowledge of the international humanitarian system. By preference, s/he should have previous experience managing humanitarian operations or have led major humanitarian evaluations. S/he will have primary responsibility for producing/compiling/editing/writing of the evaluation reports and deliverables indicated in this ToR.

Evaluation specialists (five to six) each with at least 10 years of experience working in the humanitarian sector, together with substantial evaluation experience. The team needs to cover between them a number of areas of sectoral expertise: WASH, health, education, child protection, operational support (including HR, logistics, procurement, supplies and information and communication technology) and financial/risk management. One team member should have strong supply chain management background that includes logistical support.

Document Analyst and support person, capable of organizing and analysing large quantities of data in support of the rest of the evaluation team.

Knowledge of UNICEF's mandate, procedures, mode of work in emergencies, and UNICEF previous work in other emergencies would be an asset for the team.

9. TENTATIVE SCHEDULE FOR THE EVALUATION

The Evaluation Office plans to conduct this evaluation over 25 weeks between January and June 2015, which excludes final dissemination activities. The table below provides an overview of the tentative schedule for the evaluation team.

10. ADDITIONAL INFORMATION

Please note that this ToR will be the basis for a request for proposal for both institutional and individual responses. UNICEF reserves the right to use a mixture of institutional and individual contracting to attain best value for money. Therefore, detailed costing tables need to be presented with each submission or proposal.

The time frame presented in this ToR is approximate and subject to change. Once funding has been received by the Evaluation Office, the request for proposal of services has been advertised, the selection process has been finalized and before the contract is issued, the time frame will be finalized based on negotiation between UNICEF and the selected firm.

2015 Months	Task	Team members (WoW ^{*1} envisaged)	Location
January	Inception phase	TL ¹⁰ (3) S1-S6 (2) DA (3)	NY Home-based NY
2–6 February	Preparation for field mission and issuance of travel clearance by EO	TL (1), S1-S6 (1), DA (1)	Home-based
9–20 March	Doc review; phone interviews; preliminary findings	TL (2) S1-S6 (2) DA (2)	Home-based
6–17 April	Second field mission	TL (2) S1-S6 (2) DA (2)	Jordan, Lebanon, Damascus ^{*2} , Turkey
20–24 April	Report drafting: first full draft out for consultations	TL (1) S1-S6 (1)	Home-based
27 April – 8 May	UNICEF response and comments compiled and sent to lead consultant		
11–15 May	Report drafting; second draft	TL (1) S1-S6 (1)	Home-based
18–29 May	UNICEF and stakeholders' response and comments compiled and sent to lead consultant		
1–5 June	Report drafting; third draft	TL (1)	Home-based
8–12 June	UNICEF response and comments compiled and sent to lead consultant		
15–19 June	Finalizing report; final version	TL (1)	Home-based
July	Dissemination events	TL (1)	NY/MENARO

*1 WoW – Weeks of Work

*2 When visits to Damascus may not be possible due to security situation, Skype calls, or interaction in Jordan may be undertaken.

¹⁰ TL = Team Leader; S1-S6 = Evaluation Specialists; DA = Document Analyst.

APPENDIX 2: EVALUATION QUESTIONS¹¹

UNICEF'S PROGRAMME AND ADVOCACY RESPONSE

- Were the individual components of UNICEF's response to the crisis appropriate in kind, proportionate to need and timely? Did UNICEF give active consideration to alternative approaches?
- Was the programme design and implementation adequately informed by needs assessment and monitoring information? What was the quality of UNICEF's and its partners' programme monitoring approaches, processes and systems? How far were results disaggregated?
- How effective was UNICEF's response in achieving its objectives? What evidence exists concerning the results of UNICEF's responses? What evidence can be produced to show the results improved equity or increased inequalities?
- How efficiently did UNICEF use its resources (money, people/time, skills, and reputational assets) in responding to the crisis? What was the cost-benefit profile across the sub-region (actual vs. comparative), and how do costs and benefits compare (a) across UNICEF programmes on a country by country basis and (b) with comparator organizations?
- How coherent was UNICEF's programme in each country? Were sectorial interventions mutually reinforcing? How consistent were the overarching approaches with respect to the CCCs and quality of sectorial interventions across the sub-region?
- As the emergency evolved, and taking specific country situations into consideration, how well has UNICEF combined emergency relief and service

delivery with more developmental or resilience-related approaches?

- How far did UNICEF attend to cross-cutting issues including equity, gender and disability? Was sufficient attention given to consideration of human rights and equity issues, including discrimination and social exclusion?

UNICEF'S ROLE AND STRATEGY

- Given its mandate and capacities, did UNICEF establish for itself a relevant and appropriate role in the affected countries – with regard to the focus, scale and nature of its interventions? (In the Syrian Arab Republic, Jordan, Lebanon and Turkey)
- Did UNICEF establish a clear strategy for its interventions (including advocacy and partnership)? How clear was the theory of change in each case, and was it plausible? Were other strategic options considered? Were the strategies adopted best suited to the prevailing country situation?
- Was UNICEF's strategy adequately informed by needs assessment, the prevailing political situation and situational analysis? Did UNICEF have adequate capacity to manage the crisis? Was it related to UNICEF's actual or perceived comparative advantage? Was specific attention given to disaggregated analysis of the needs of children, women and various communities and social groups? How far did UNICEF follow a rights-based approach?
- How responsive was the UNICEF strategy over time to changes in the external environment, including the evolving role of other actors?

¹¹ See Appendix 1 for the evaluation terms of reference, pp. 5–7.

INTERNAL UNICEF MANAGEMENT AND PROCESS

- UNICEF's engagement with others (by programme area and country)
- Was UNICEF's choice of partners appropriate and based on adequate assessment of capacity?
- Was consideration given to the alternative partnership options open to UNICEF?
- How effectively did UNICEF and its partners engage with affected communities and those targeted by its programmes, including children, young people and women, concerning the design and implementation of its responses? What processes of beneficiary feedback were put in place? Were there differences between sectors and geographical locations, including camp and non-camp locations?
- Did UNICEF establish appropriate and productive working relations with key partners including government where relevant (at central/ministerial and local levels) in the Syrian Arab Republic, Jordan, Lebanon and Turkey? Did these relations evolve appropriately over time? Were capacities built to address children issues?
- Did UNICEF manage to establish effective and mutually accountable implementing partnerships with international and national NGOs in the Syrian Arab Republic, Jordan and Lebanon? Where such capacity was lacking, how well did UNICEF adapt its approach?
- How well did UNICEF perform as co-lead of the relevant sector working groups and sub-working groups in the sub-region (WASH, education, child protection), particularly within key interagency joint planning processes (SHARP/RRP)? Did it have conflicting interests in this role, and if so how well did it manage such conflicts?

WERE UNICEF'S MANAGEMENT ARRANGEMENTS FOR THE SUB-REGIONAL CRISIS RESPONSE APPROPRIATE AND EFFECTIVE?

- Were roles and accountabilities clear as between country offices, regional offices, the Syria Crisis Hub and Headquarters? As between MENA and CEE/CIS regions?
- Specifically, how efficient and effective was the Syria Crisis Hub mechanism in supporting the response? Were other arrangements considered?
- What effects did the L3 declaration have on the crisis response – initially and over the course of 2013–2014? Were the L3 SSOPs appropriate to the context, how well were they applied, and what effect did they have on UNICEF's performance?
- Operational support: how effective and efficient were UNICEF's operational support services? In particular, how well was the human resources function performed? How well were the supply functions performed? Were the relevant SSOPs applied with respect to HR and operational processes?
- Financial and risk management: how effective and accountable was UNICEF's management of the funding and finances of the programme? To what extent did the dependence on particular funding sources constrain or support UNICEF's efficiency and effectiveness? (To the extent possible, the audits presented to the evaluators should be used for this question).
- Were applications for CERF funding timely and appropriate? With respect effectiveness, efficiency and quality of results, how well were CERF funds managed? (For additional information on CERF grants, see: <www.unocha.org/cerf/about-us/humanitarian-financing>).
- How well did UNICEF manage related contractual processes (PCA, procurement, supply contracts and other)? Were the relevant SSOPs applied with respect to contractual processes?

APPENDIX 3: EVALUATION CRITERIA

The Organisation for Economic Co-operation and Development - Development Assistance Committee (OECD/DAC) Criteria for Evaluating Development Assistance¹² are widely regarded as the most appropriate standards against which to gauge the interventions of humanitarian response agencies. In 2006, the Active Learning Network for Accountability and Performance (ALNAP) published a framework

designed to assist further with the interpretation of key DAC criteria within a humanitarian context. The criteria for evaluating the UNICEF Syria response have been selected from the guidance in the ALNAP Guide.¹³

The criteria used to evaluate the main themes, and the UNICEF Syria response main components covered by each are in the table below.

Area	Selected criteria	Response components covered
A1	Effectiveness measures the extent to which an activity achieves its purpose, or whether this can be expected to happen on the basis of the outputs.	Stated objectives versus achievements
		Process used and influence on the response
		Timeliness of the response
A2	Relevance/Appropriateness is concerned with assessing whether the project is in line with local needs and priorities.	Needs assessment activities
		Types of programme and support distributed over time
		Inclusion of cross-cutting issues (including gender and human rights)
A3	Coverage is the ability to reach major population groups facing life-threatening suffering wherever they are.	Type and number of affected people targeted
		Type and number of affected people reached
		Aid provided compared to need and influencing factors
A4	Efficiency measures the ratio of outputs achieved to the total inputs contributed.	Sources of input to the response (financial, human, technical and material)
		Use of input in creating outputs
		Output of the response and influencing factors
A5	Coherence is the need to assess and ensure that there is consistency (in approach) and all policies take into account humanitarian and human rights considerations.	Usefulness and use of guidance on non-state actors
		Usefulness and use of guidance on the MRM ¹⁴
		Usefulness and use of guidance on cross-cutting issues (including gender and human rights)

¹² OECD-DAC established several principles to guide evaluation of development programmes in 1991. These principles were further refined and further adapted in 1999 for complex emergencies into seven criteria: relevance/appropriateness, connectedness, coherence, coverage, efficiency, effectiveness and impact.

¹³ Active Learning Network for Accountability and Performance, 'Evaluating humanitarian action using the OECD-DAC criteria: An ALNAP guide for humanitarian agencies', London, ALNAP, March 2006, <www.alnap.org/material/78.aspx>, accessed 26 March 2016.

¹⁴ In 2005, the Security Council requested in Resolution 1612 that the United Nations Secretary-General establish a MRM, managed by country-based task forces co-led by UNICEF and the highest United Nations representative in the country. Through task forces in conflict-affected countries covered by the MRM, UNICEF and partners collect information on grave children's rights violations to share with the United Nations Security Council and to develop appropriate responses to respond to children's needs. (Source: www.unicef.org)

APPENDIX 4: STAKEHOLDER ANALYSIS

During the inception phase, a preliminary stakeholder analysis was conducted based on rapid document review and impressions

gathered from interviews. In addition, the expressed and/or anticipated stakeholder interest in the evaluation was documented.

#	Group	Category	Stakeholders	Role in UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region	
1	UNICEF	Global/ HQ	Executive Board, Senior Management (Executive Director (ED) and Deputy Executive Directors (DEDs))	Final decision making power and establishment of policies, approve programme approaches and implementation, and decide on administrative and financial plans and budgets	
1	UNICEF	Global/ HQ	Management and staff (New York, Geneva and Copenhagen)	Provide management, administration, support and global policy on children	
1	UNICEF	Regional	Management and staff	Guide the work of UNICEF's country offices and provide technical assistance as needed	
1	UNICEF	Country*	Management and staff	Carry out UNICEF's mission, focusing on practical ways to realize the rights of children and women. This should be in support of the host governments	
2	Implementing partners	Country	Local and international (I)NGOs, private sector, government entities and civil society	Support implementation of UNICEF's programme activities and increase the geographic coverage of the response	

	Power related to UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region	Interest in the evaluation
	As the final decision makers in the organization, senior management has direct influence and control over the scope, strategic approaches, objectives and implementation of future humanitarian response plans and activities for the Syrian Arab Republic and the sub-region and other crises	Interested in findings from the evaluation to provide insights for decision making on (i) the next phases of UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region and (ii) strategies and approaches for future response activities in similar contexts. Also, the evaluation will inform communication/influencing of key stakeholder groups
	By providing management and guidance, global level staff have direct influence and power over strategic UNICEF-wide approaches, programme directions, supporting mechanisms and implementation of humanitarian response activities (including in the Syrian Arab Republic and the sub-region)	UNICEF Global (HQ) level management and staff are interested to know if the programme response was the right one for the environment and the changing needs, how UNICEF performed after the scale up (to L3) and what can be learned, and if the existing UNICEF guidance has been of use. They are also interested in learning how to optimize response in a human rights crisis, how to increase system resilience and how to maximize programmatic implementation. Findings from the evaluation will inform management response plans and may be used in communication/influencing of key stakeholder groups
	By providing guidance and assistance, regional level staff have direct influence and power over regional approaches, programme directions, supporting mechanisms and implementation of humanitarian response activities in the region (including in the Syrian Arab Republic and the sub-region)	UNICEF regional level management and staff are interested to know how well UNICEF was able to scale up to meet the needs (including resource mobilization) and if the assistance provided was efficient and effective. They are also interested to learn to what extent UNICEF is 'fit for purpose' for a crisis like that in the Syrian Arab Republic, if the L3 process was (well) used and if the model (with the Syria Hub) would be an appropriate model for other operations
	Country offices control (ultimate direct power) the design and implementation of humanitarian responses (programmes) in their country; within the parameters set for UNICEF on a global level and with guidance and assistance from the regional office	UNICEF country level management and staff is interested to know if UNICEF did what it planned to do, if UNICEF did the right thing and if the response was effective and efficient in terms of speed, cost, quality and impact. They are also interested in learning what worked, what didn't work and how this can help to do better in the future
	An integral part of delivering UNICEF's programmes to the affected population, implementing partners have a relative high level of power and influence on UNICEF's response in the Syrian Arab Republic and the sub-region	Implementing partners have an interest in knowing if they supported UNICEF in doing the right thing and if the response was effective and efficient in terms of speed, cost, quality and impact. They also have an interest in learning what worked, what didn't work and how this can help to jointly do better in the future

continued: Stakeholder analysis

#	Group	Category	Stakeholders	Role in UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region	
3	Coordinating partners	Global, regional and country	(I)NGOs, other UN agencies, donors, private sector, research institutions, networks, coalitions	Work with UNICEF and other sector partners to coordinate the response and reach the most vulnerable people in need	
4	Donors	Global, regional and country	Government, private sector and individual donors	Fund UNICEF's humanitarian response.	
5	National governments	Country	National and local governments in the Syrian Arab Republic and the sub-region (Jordan, Lebanon, Turkey**)	Varying roles towards and participation in UNICEF's humanitarian response activities	
6	Affected population: direct beneficiaries	Country	Targeted recipients (individuals) of UNICEF's response in the Syrian Arab Republic (incl. internally displaced persons (IDPs))	Targeted for UNICEF assistance and the group most affected by the response, both by positive and negative and intended and unintended consequences	
6	Affected population: direct beneficiaries	Regional	Targeted recipients (individuals) of UNICEF's humanitarian response outside of the Syrian Arab Republic (refugees).	Targeted for UNICEF assistance and the group most affected by the response, both by positive and negative and intended and unintended consequences	
6	Affected population: indirect beneficiaries	Regional and country	Wider communities/ individuals impacted by UNICEF's humanitarian response.	Not directly targeted for UNICEF assistance though at the forefront of meeting the needs in country, and can be positively or negatively affected by UNICEF's humanitarian response	

	Power related to UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region	Interest in the evaluation
	Adequate coordination and collaboration with other humanitarian stakeholders should ensure that UNICEF's humanitarian response addresses the most pressing needs and gaps in assistance, by considering other organizations' efforts and avoiding duplication. Coordinating partners have a relatively low power over UNICEF's humanitarian response, though jointly in collaboration with UNICEF a high power over responding to people in need	Coordinating partners have an interest in knowing if, considering the context and available sectoral resources, UNICEF did the right thing and if the response was effective and efficient. They have an interest in learning about possible gaps and duplications in programme responses, understanding how to optimize the overall efforts to meet the needs of the affected population
	Relatively high level of power over UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region as they have direct influence over the availability and allocation of current and future funds	Donors have an interest in knowing how UNICEF spent available funds, if this was used to do the right things, what the results were and if the response was effective and efficient. Also, they will be interested to learn how to optimize the use of funds in meeting the needs of the affected population
	Power and influence on UNICEF's humanitarian response in the Syrian Arab Republic and the sub-region is high though depends on the country context and relationship. National governments are the ultimate responsible entity for the overall assistance to affected populations	National and local governments have an interest in learning from the evaluation to gain clarity on UNICEF's approach to the humanitarian response, learn what has been done so far, what can be improved, and get insight on the results towards the affected population. They have an interest in voicing opinions, concerns and lessons learned to ensure that these are considered in UNICEF's planning and delivery of future humanitarian aid
	Direct beneficiaries in the Syrian Arab Republic have a relatively low amount of power in the design and implementation of the humanitarian response. The use of participatory methods is limited due to country related restrictions including security issues	Targeted beneficiaries will have an interest in voicing opinions, concerns and lessons learned to ensure that these are considered in UNICEF's planning and delivery of future humanitarian aid (including specific needs, vulnerabilities and capacities)
	Direct beneficiaries outside of the Syrian Arab Republic have a relatively low amount of power in the design and implementation of the humanitarian response. The use of participatory methods in some countries increased their influence, but only when preferences and needs were explicitly taken into account in programme design	Targeted beneficiaries will have an interest in voicing opinions, concerns and lessons learned to ensure that these are considered in UNICEF's planning and delivery of future humanitarian aid (including specific needs, vulnerabilities and capacities).
	Indirect beneficiaries have a relatively low power in the design and implementation of the humanitarian response. In some countries the use of participatory methods increased their influence, but in general the wider communities are of the opinion that more needs to be done to ensure that they are consulted meaningfully and a level of decision making power is devolved to them	Indirect beneficiaries will have an interest in voicing opinions, concerns and lessons learned to ensure that these are considered in UNICEF's planning and delivery of future humanitarian aid (including specific needs, vulnerabilities and capacities). Ultimately UNICEF's efforts should support communities in meeting their own needs

APPENDIX 5: EVALUATION METHODOLOGY

EVALUATION DESIGN

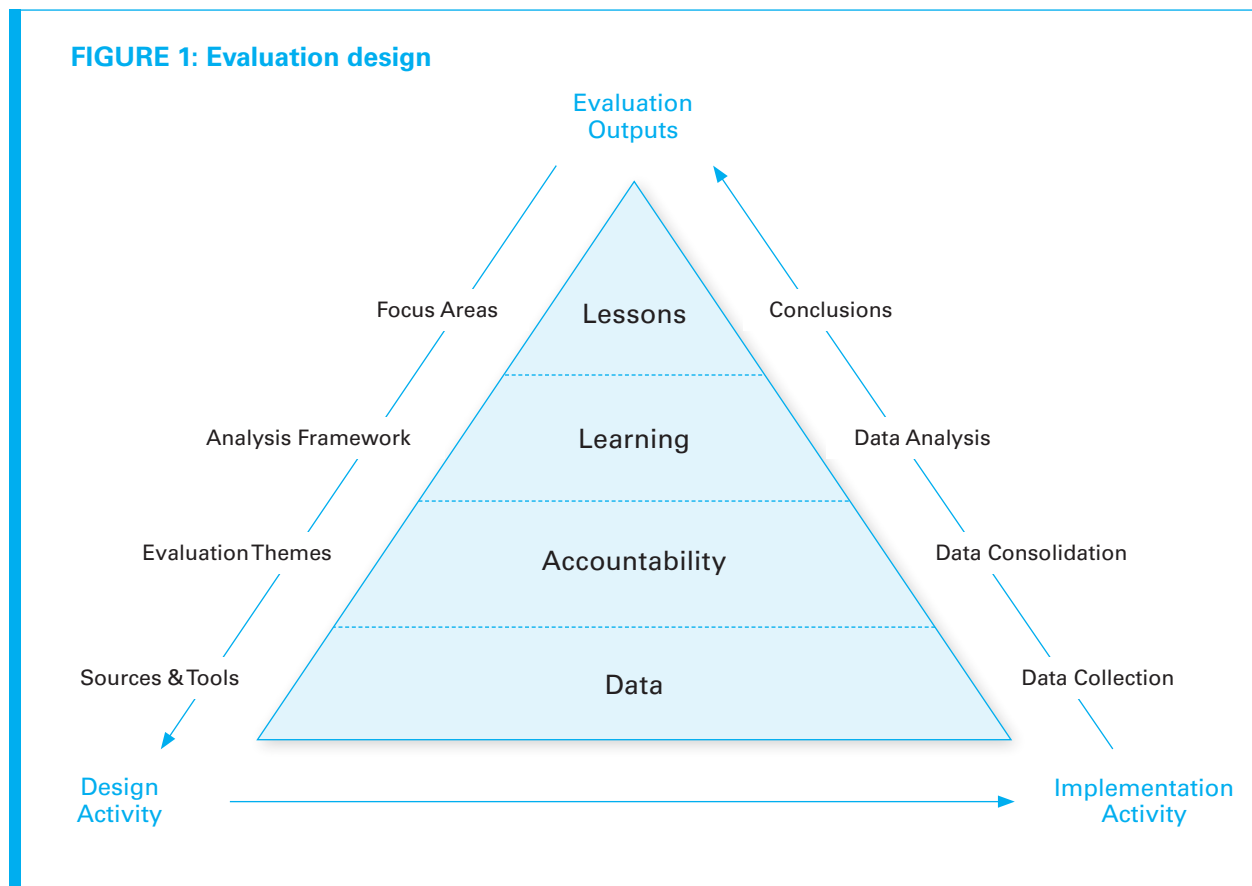
Figure 1 provides an overview of how the methodology for the evaluation has been designed and implemented. The main challenge of the research has been to manage data collection across the wide programmatic, geographic and temporal scope of UNICEF's response to the Syria crisis, in such a way that it can be reliably (i) **consolidated** to meet the evaluations accountability function; (ii) **analysed** to address the 56 evaluation questions from the core themes; and (iii) **compared** to provide inputs for the learning function.

DATA ANALYSIS FRAMEWORK

The data analysis framework is designed to consolidate data collected from multiple sources and to provide evidence-based answers to the evaluation theme questions.

The framework consists of five focus areas that were identified by UNICEF senior managers as the main operational outcomes for the evaluation to assess.

The evaluation questions included in the programme and advocacy section of the evaluation ToR¹⁵ were mapped against these focus areas to produce the detailed lines of enquiry.



¹⁵ See Appendix 1 for the evaluation TOR, p. 5.

The data analysis framework used OECD-DAC¹⁶ criteria to evaluate the UNICEF Syria response, which were selected based on ALNAP guidance for applying these for evaluating humanitarian action.¹⁷

An overview of the data analysis framework is shown in Figure 2. Appendix 3 provides a more detailed explanation on how the criteria were used to evaluate the UNICEF Syria response.

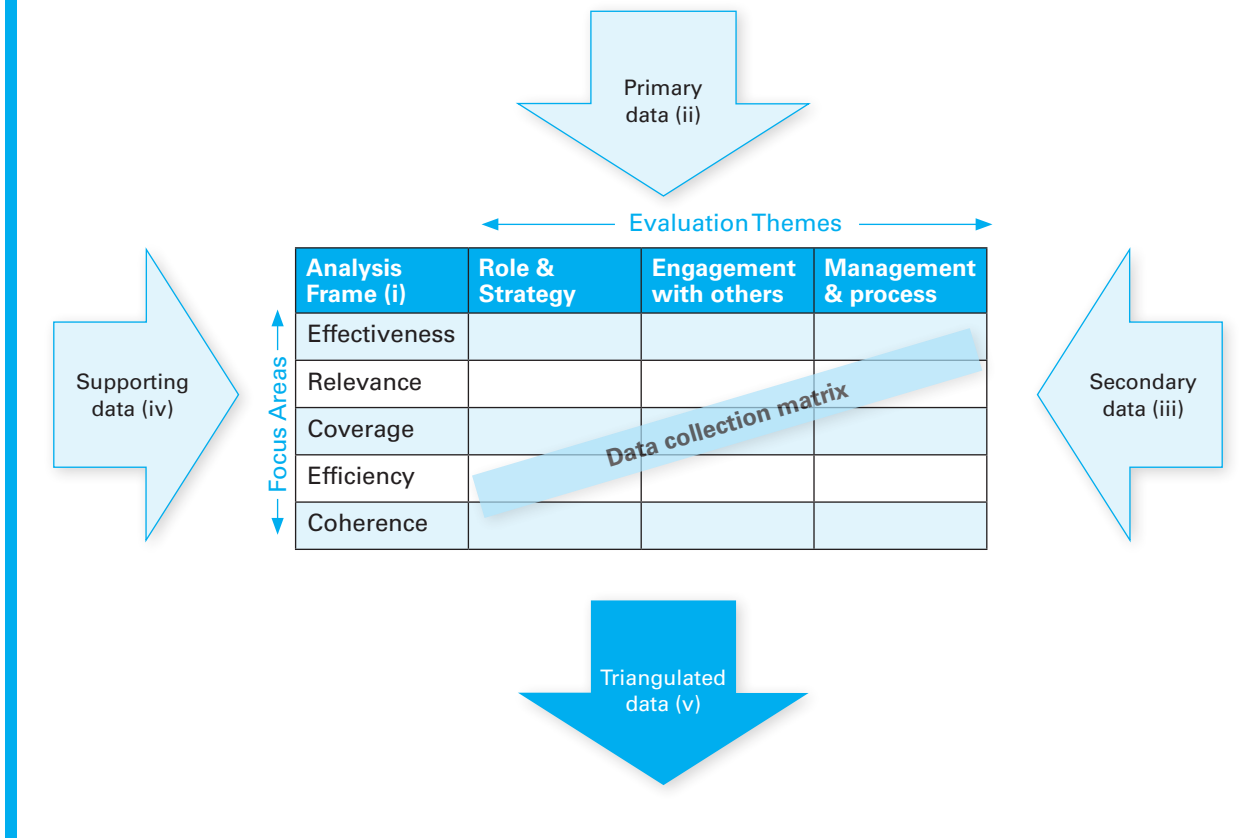
FIGURE 2: Data analysis framework

Ser	Focus areas	Line of enquiry	Criteria	Indicators	Evidence
A1	How well did UNICEF deliver assistance?	What assistance did UNICEF plan?	Effectiveness measures the extent to which an activity achieves its purpose, or whether this can be expected to happen on the basis of the outputs.	The stated objective(s)	Planning documents
		What assistance did UNICEF deliver?		Programme outputs	Progress reports
		What were the results?		Indicative impact*	Stakeholder feedback
A2	Was the UNICEF response appropriate for the environment and needs of the affected population, over time?	Approach and components appropriate?	Relevance is concerned with assessing whether the project is in line with local needs and priorities.	Proportionate to needs and timely	Context analysis and assessment
		Informed by detailed monitoring (vulnerable groups)?		Frequency & quality of monitoring	Monitoring reports
		Programmes adjusted to situation?		Link between assessment & programme	Programme plans
A3	How well was UNICEF able to scale up and meet the assessed needs?	Was the caseload UNICEF assisted proportional to capacity?	Coverage is the ability to reach major population groups facing life-threatening suffering wherever they are.	Proportion assisted (vulnerable groups)	Progress reports
		Did the assistance UNICEF deliver meet its mandate?		Compliance with CCCs	Programme and monitoring and evaluation (M&E) reports
		Were financial resources available to fulfil its obligations?		Proportion of people assisted vs funding	Funding reports
A4	How efficient was the response (speed and cost)?	Timely availability & quality of HR?	Efficiency measures the outputs achieved as a result of inputs.	Identification of posts & speed to fill	HR reports and job profiles
		Timely availability of assets, supplies & services?		Supply gaps	Supply chain and programme reports
		How cost effective were the programmes?		Cost benefit profile of programme outputs	Financial records
A5	Have UNICEF's humanitarian guidance tools been of use and used in the context of the Syria crisis?	What UNICEF humanitarian guidance was applied well?	Coherence is the need to assess and ensure that there is consistency [in approach] and all policies take into account humanitarian and human-rights considerations.	Application of appropriate guidance	Availability of guidance & reports
		What UNICEF humanitarian guidance was not applied well?		Partial / non application of guidance	Interviews
		What UNICEF humanitarian guidance was missing?		Guidance does not exist	Interviews

¹⁶ OECD-DAC established several principles to guide evaluation of development programmes in 1991. These principles were further refined and further adapted in 1999 for complex emergencies into seven criteria: relevance/appropriateness, connectedness, coherence, coverage, efficiency, effectiveness and impact.

¹⁷ Active Learning Network for Accountability and Performance, 'Evaluating humanitarian action using the OECD-DAC criteria: An ALNAP guide for humanitarian agencies', London, ALNAP, March 2006, <www.alnap.org/material/78.aspx>, accessed 26 March 2016.

FIGURE 3: Data collection process



DATA COLLECTION AND MANAGEMENT PROCESS

Data collection tools¹⁸ were based on the focus areas and lines of enquiry to manage the collection of primary, secondary and supporting data, and to populate the data collection matrix shown in Figure 3. These data were solicited from four main stakeholder groups: UNICEF staff, implementing partners (IPs), coordinating partners and the affected population.

Primary data were collected through a combination of interviews, workshops, focus groups, and direct observation during visits to Lebanon, Jordan (Country Office and MENARO/Syria Hub), the Syrian Arab Republic,¹⁹ UNICEF

New York and UNICEF Copenhagen. Some additional remote interviews were conducted with UNICEF Geneva, the CEE/CIS Regional Office for Turkey and UNICEF staff who now work outside of the sub-region.

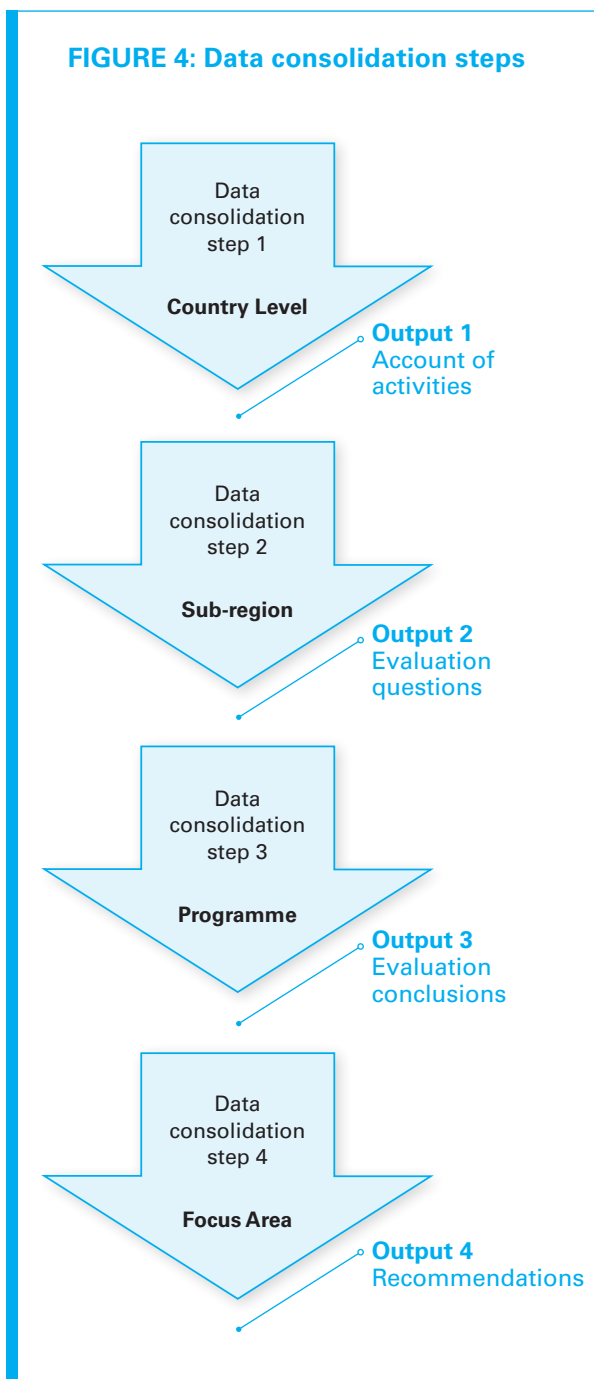
Secondary data were drawn from an extensive literature review conducted in preparation for this evaluation, alongside a number of country and programme specific documents collected during the data collection phase. Information on UNICEF’s activities in Turkey is drawn from the evaluation of the UNICEF Turkey response to the Syria refugee crisis, which was carried out concurrently by a separate evaluation team.

¹⁸ For more information on data collection approach and tools, see ‘Evaluation of UNICEF’s humanitarian response to the Syria crisis, Inception Report’, 8 May 2015.

¹⁹ UNICEF Syrian Arab Republic stakeholders were interviewed in person or remotely from Lebanon.

The main source of **supporting data** was a web-based survey, used to triangulate with the primary and secondary data to produce triangulated data for analysis.

Appendix 4 includes a stakeholder analysis, data collection sources and ethical considerations taken into account during data collection.



DATA ANALYSIS

Data were consolidated via four main steps to produce the evaluation outputs:

STEP 1

Data consolidation at country level, disaggregated by programme area, and organized by stakeholder group, line of enquiry and focus area. The analysis matrix was used to identify strengths and weaknesses, enablers and inhibitors.

These results were used to produce the first accountability output: an account of UNICEF's activities.

STEP 2

Country and stakeholder data consolidation across the sub-region by lines of enquiry to show common results and any divergences. These results are disaggregated by programme area, and organized by line of enquiry and focus area.

These results were used to produce the second accountability output: answers to the 56 evaluation questions across the three main themes.

STEP 3

Data consolidation across focus areas, stakeholder groups and lines of enquiry to identify common findings and divergences. These results are disaggregated by UNICEF programme.

These results were used to produce the evaluation conclusions, including major strengths and weaknesses and the underlying causes.

STEP 4

Data consolidation of each programme to identify common findings and divergences across all evaluated variables.

Evaluation conclusions are used to produce the evaluation recommendations for the Syrian Arab Republic and the sub-region, and UNICEF globally.

At each stage of consolidation, the outcomes were cross-referenced with supporting data and analysed by the relevant technical expert from the evaluation team.

Information was validated and feedback from relevant technical, field and managerial UNICEF staff members and the internal Reference Group was incorporated at each stage.

LIMITATIONS AND ADVANTAGES

Limitations and advantages of the evaluation scope and methodology

The **main limitation** of the approach is that while results are robust and reliable across the sub-region, country and programmatic variances are captured in a limited manner. Other limitations are highlighted in Figure 5.

FIGURE 5: Limitations of the methodology

- Limitations of **primary data collection** in the Syrian Arab Republic (due to access restrictions) and for Turkey (based on the report of a concurrently conducted evaluation)
- Contextual limitations for data collection methods such as workshops, leading to **reliance on individual interviews**
- Over-representation of UNICEF staff during **key informant interviews** with less information collected from government representatives, affected population and donors
- Limited access to stakeholders involved in the **early stages** of the evaluation
- **Inconsistent availability of data sources** across time and countries²⁰
- **Reliability and consistency of data sources**, including UNICEF documents, requiring validation of data (by UNICEF)
- **Limited results** for specific stakeholder groups and individual sectors or countries
- Limited **sample size and granularity of data** to provide disaggregated results with statistical significance

The **main strength** of the approach is the ability to consolidate data collected from different sources, which allows identification of findings across all evaluation components. Other advantages of the methodology are highlighted in Figure 6.

FIGURE 6: Advantages of the methodology

- **Practicality of the process.** This was required to meet the short period of time to conduct a complex evaluation with limited resources
- **Systematic coverage** of the evaluation questions
- **Clarity and utility** of the findings
- **Robustness**²¹ of outputs, particularly at a consolidated level
- Ability to identify **findings that are applicable** across geographic, temporal, programme sector and stakeholder groups
- Ability to identify **discrepancies in findings** that are applicable across geographic, temporal, programme sector and stakeholder groups

Data limitations

Secondary data analysis referenced in this report used data extracted from internal UNICEF dashboard datasets between 2013 and 2014, which were verified and validated by UNICEF country offices and the Syria Hub.

A set of 10 common indicators covering the four programme sectors were used because these are among a set of common indicators used in UNICEF regional dashboard data and because they were used most consistently across years, programmes and countries in the region.

²⁰ This was partially mitigated by considering the same set of documents for the end of each year.

²¹ A characteristic describing a methodology's ability to effectively perform while its variables or assumptions are altered. A robust concept can operate without failure under a variety of conditions (Source: <www.investopedia.com>).

Certain common indicators were not used in all countries, namely:

- Number of emergency-affected people accessing safe water (in Turkey)
- Number of affected people periodically provided with hygiene promotion messages (in Turkey)
- Number of emergency-affected people supported to access basic health services (in Jordan and Turkey)
- Number of children and adolescents with access to alternative and non-formal education opportunities (in Turkey)
- Number of children supported in basic education (in the Syrian Arab Republic)
- Number of children receiving specialized services from qualified front-line workers (in the Syrian Arab Republic)

Inconsistencies in data and indicators were noted between internal and external UNICEF data sources and between different agencies. For example, the number of children receiving essential education materials in the Syrian Arab Republic in 2013 according to the UNICEF Syria crisis 2013 annual situation report and SHARP²² was reported to be 1.5 million,²³ internal 2013 UNICEF dashboard data reported a figure of 9,400²⁴ and UNICEF Syrian Arab Republic reported a figure of 999,680.²⁵

The number of emergency-affected people accessing safe water in the Syrian Arab Republic in 2013 according to the UNICEF Syria crisis 2013 annual situation report was reported as 3,239,746²⁶, and internal 2013 UNICEF dashboard data reported a figure of 38,700.²⁷

²² '2014 Syrian Arab Republic Humanitarian Assistance Response Plan (SHARP)', OCHA, 15 December 2013, <https://docs.unocha.org/sites/dms/CAP/2014_Syria_SHARP.pdf>, accessed 27 February 2016.

²³ United Nations Children's Fund, 'Syria crisis bi-weekly humanitarian situation report', UNICEF, 12 December 2013–9 January 2014, <<http://childrenofsyria.info/wp-content/uploads/2014/01/UNICEF-Syria-Regional-Crisis-Humanitarian-SitRep-Syria-Jordan-Lebanon-Iraq-Turkey-Egypt-9Jan20142.pdf>>, accessed 27 February 2016.

²⁴ UNICEF Excel file provided by the Syria Hub: File Jan 14 (2013 FINAL) _SRC – Dashboard – All countries and regional overview.xls (UNICEF internal document).

²⁵ Ibid.

²⁶ United Nations Children's Fund, 'Syria crisis bi-weekly humanitarian situation report', UNICEF, 12 December 2013–9 January 2014, <<http://childrenofsyria.info/wp-content/uploads/2014/01/UNICEF-Syria-Regional-Crisis-Humanitarian-SitRep-Syria-Jordan-Lebanon-Iraq-Turkey-Egypt-9Jan20142.pdf>>, accessed 27 February 2016.

²⁷ UNICEF Excel file provided by the Syria Hub: File Jan 14 (2013 FINAL) _SRC – Dashboard – All countries and regional overview.xls (UNICEF internal document).

APPENDIX 6: DATA COLLECTION SOURCES AND TOOLS

TABLE 1: Common regional indicators for each programme sector

Method	Unit	UNICEF	Implementing partners	Coordinating partners	Affected population	Total
Interviews	People	120	11	24	7	162
Workshops	Events	2	5	2		9
	People	18	6	24		48
Focus groups	Events				5	5
	People				66	66
Observation	Site visits	4				4
	Meeting	1				1
Web survey	People	75	30	23		128

Notes of stakeholder groups:

- UNICEF: UNICEF staff across HQ, regional and country offices
- Implementing partners: Local and international organizations that implement programmes on behalf of UNICEF
- Coordinating partners: governments, donors, United Nations agencies and humanitarian agencies that UNICEF works alongside.
- Affected population: Refugees, internally displaced people and host communities

The survey was developed to generate quantitative data for triangulation with complementary data sources. Response rates were 43.4 per cent for internal audiences (75 of 173 invitees) and 20.7 per cent for external audiences (53 of 256 invitees). Stakeholders of UNICEF Turkey were not included in the survey as data would not be complimented with other sources, would provide stand-alone quantitative information and could not be included in the same process.

ETHICAL CONSIDERATIONS

Based on the team’s careful examination of the ToR for this evaluation, the ‘UNICEF Adapted UNEG Evaluation Report Standards (July 2010)’, and commonly referenced guidance,²⁸ human subjects protection protocols were applicable as the evaluators interacted with beneficiaries, including children, and other conflict-affected populations and interviewed them. Informed consent was sought for all one-on-one and group interviews or field focus groups and workshops with such participants, confidentiality has been stressed and participation was clearly optional. Evaluation team members collecting data in the field were experienced in working with vulnerable populations in conflict and fragile situations.

The evaluators take seriously the responsibility to uphold the highest ethical standards, including the protection of confidentiality. All interviews began with a statement of confidentiality.

²⁸ United States Department of Health and Human Services, ‘Code of Federal Regulations’, Title 45 Public Welfare, Part 46, Protection of Human Subjects, <www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html#46.101>, accessed 26 March 2016.

All data gathered through interviews has been treated as non-attributable (to named individual sources) in reports shared beyond the evaluation team. Names of individual interviewees have been hidden to ensure minimized bias in analysis, while retaining organizational, geographic and other characteristics for data disaggregation by groups.

The contracted evaluation consultancy will store and keep data in a secure manner for two years to enable the team to respond to questions regarding the chain of evidence for its findings and conclusions. After five years, attributable data will be destroyed through secure shredding of paper files and industry standard electronic overwriting of data.

PEOPLE CONSULTED

Inception phase: UNICEF staff consulted

I = interview
W = workshop

Ser	Name		Title (related to Syria operation)	Method
	First	Last		
1	Youssouf	Abdel-Jelil	Former Representative, Syrian Arab Republic	I
2	John Paul	Anderson	Surge Capacity Specialist, Division of Human Resources (DHR)	I
3	Lori	Bell	M&E Regional Advisor, CEE/CIS	I
4	Sherazade	Boualia	Former Country Representative, Syrian Arab Republic	I
5	Luciano	Calestini	Deputy Representative, Lebanon	I
6	Maria	Calivis	Regional Director, MENA	I
7	Silvia	Danailov	Chief, Humanitarian Field Support Section (HFSS), EMOPS	I
8	Catherine	Dickehage	Director of Fundraising	I
9	Paloma	Escudero	Director of Communication	I
10	Yasmin	Haque	Deputy Director, EMOPS	I
11	Dominique	Hyde	Deputy Director, Public Partnerships Division (PPD)	I
12	Jess	Meeus	Senior Emergency Supply Manager	I
13	Abdulkadir	Musse	Senior Emergency Specialist	I
14	Marie-Pierre	Poirier	Regional Director, CEE/CIS	I
15	Hamida	Ramadhani	Deputy Representative, Syrian Arab Republic	I
16	Christian	Salazar	Deputy Director, PD	I
17	Michele	Servadei	Deputy Representative, Jordan	I
18	Hanaa	Singer	Country Representative, Syrian Arab Republic	I
19	Frederic	Sizaret	Human Resource Manager, DHR	I
20	Hannan	Suliman	Deputy Regional Director, MENA	I
21	Betel	Tassew	Chief, HR in Emergencies, DHR	I
22	Geoff	Wiffin	Syria Emergency Crisis Coordinator, Syria Hub	I
23	Lana	Wreikat	Emergency Specialist (cross-border operations)	I
24	Mirna	Yacoub	Senior Emergency Specialist, Syria Hub	I
25	Hamish	Young	Chief, Humanitarian Action and Transition (HATIS), PD	I

Data-collection phase: people consulted

I = interview
W = workshop

Jordan

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
UNICEF staff					
1	Buthayna	Al Khatir	UNICEF	Programme Officer, Health	I
2	Ahmad	AlTarawnah	UNICEF	WASH Officer in camp	I
3	Mohammed	Amiri	UNICEF	Programme Officer, Health	I
4	Maha	Homsy	UNICEF	Chief, Child Protection	I
5	Rob	Jenkins	UNICEF	Representative	I
6	Silene	Martino Almeras	UNICEF	Donor Relations	I
7	Miraj	Pradhan	UNICEF	Communications Specialist	I
8	Muhammad	Rafiq Khan	UNICEF	Child Protection Specialist and Child Protection Working Group-Coordinator	I
9	Midori	Sato	UNICEF	Chief, Health and Nutrition	I
10	Michele	Servadei	UNICEF	Deputy Representative	I
11	Jamal	Shah	UNICEF	WASH Cluster Coordinator	I
External stakeholders					
12	Job	Arts	European Union	Programme Manager for Education and Youth	I
13	Ahmad	Bawaneh	International Medical Corps	Mental Health and Psychosocial Programs Director	I
14	Denis	Brown	World Vision	Operations Manager	I
15	Pakula	Byron	Agency for Technical Cooperation and Development	Director	I
16	Iyad	Dahiyat	Ministry of Water and Irrigation	Programme Management Unit Director	I
17	Mustafa	Hassan	International Rescue Committee	Child Protection Coordinator	W
18	Naima	Iqbal Chohan	Save the Children International	Child Protection Advisor	
19	Hamida	Jahamah	Save the Children International	Child Protection Programme Officer	I
20	Beate	Richter	KfW Development Bank	Director, Amman Office	I
	Abeer	Ziadeh	Save the Children Jordan	Programmes Director	I
21			Action Against Hunger	Staff Member	W

Jordan

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
22			International Medical Corps	Staff member	W
23			Terre des Hommes	Staff member	W
24			Relief International	Staff member	W

I = interview
W = workshop

Lebanon

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
UNICEF staff					
1	Abdulsalam	Alsouhigi	UNICEF	Admin and Finance Specialist	I
2	Zeroul	Azzeddine	UNICEF	Chief, Health	I
3	Antje	Becker	UNICEF	Chief, Human Resources	I
4	Soha	Boustani	UNICEF	Chief, Communications	I
5	Gianluca	Buono	UNICEF	Humanitarian Affairs Coordinator	I
6	Luciano	Calestini	UNICEF	Officer-in-Charge, Representative	I
7	Mieille	Khoury	UNICEF	Budget Officer	I
8	Jihane	Latrous	UNICEF	Sexual and Gender-Based Violence Specialist	I
9	Anthony	MacDonald	UNICEF	Chief, Child Protection	I
10	Hussien	Moursel	UNICEF	Officer-in-Charge, Chief of Supply	I
11	Jonathan	Mutebi	UNICEF	Programme Budget Officer	I
12	Mette	Nordstrand	UNICEF	Chief, Education	I
13	Lawrence	Oundo	UNICEF	Chief, Operations	I
14	Dominique	Reinecke	UNICEF	Child Protection Specialist sub-office	I
15	Henry	Sebuliba	UNICEF	Nutrition Specialist	I
16	Badrul	Sohel	UNICEF	Immunization Specialist	I
17	Olivier	Thonet	UNICEF	Chief, WASH	I
18	Luca	Travagnin	UNICEF	MRM Specialist	I
19	Berta	Travieso	UNICEF	Head of Field Office, Zahlé	I
20	Hrayr	Wannis	UNICEF	M&E Specialist	I
21	Violet	Warney	UNICEF	Chief, Field Operations	I

Lebanon

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
External stakeholders					
22	Maria	Assi	Beyond Association	Chief Executive Officer	W
23	Davide	Asta	AVSI	Programme Manager	W
24	Joe	Awad	Beyond Association	General Manager	W
25	Ivano	Bruno	War Child	Emergency Programme Manager	W
26	Mirella	Chercrallah	Caritas	Education manager	W
27	Gerard	Cheyne	Bureau of Population, Refugees, and Migration (BPRM)	BPRM	I
28	Michael	Griffith	Bureau of Population, Refugees, and Migration (BPRM)	Political Officer	I
29	Lady	Habchy	The United Nations Human Settlements Programme	Project Support Officer	W
30	Randa	Hamdah	Ministry of Public Health	Representative Ministry of Public Health	I
31	Fehmi	Karami	Ministry of Social Affairs	Senior Child Protection expert/ Ministry of Social Affairs consultant	I
32	Amina	Kleit	An Iqra	General Coordinator	W
33	Sarah	Lee	Concern	Education Project Manager	W
34	Eleanora	Lotti	AVSI	M&E Project Manager	W
35	Wendy	McClinchy	United Nations Resident Coordinator's Office	Head of Office	I
36	Lynne	Miller	United Nations High Commissioner for Refugees (UNHCR)	UNHCR Deputy Representative	I
37	Alan	Mosley	International Rescue Committee	Head of Programme	W
38	Pamela	Mrad	World Health Organization (WHO)	Health Officer	W
39	Rima	Mussalam	An Iqra	Programme Director	W
40	Abel	Piqueres Candela	European Union	European Union Education Officer	I
41	Bruno	Rotival	European Commission's Humanitarian Aid and Civil Protection Department (ECHO)	Head of Office	I

Lebanon

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
42	Thomas	Russell	Department for International Development (DFID)	Humanitarian Affairs Officer	I
43	Hussein	Salem	Ministry of Social Affairs	Bekaa Regional Coordinator	I
44	Mayor	Talaabeya	Government of Lebanon	Mayor	I
45	Raymond	Tarabay	German Embassy	Humanitarian Aid and Economic Cooperation	I
46	Mark	Todd	Ministry of Social Affairs	Education Officer	I
47	Deirdre	Watson	DFID	Senior Education Advisor – Syria Crisis UNIT	I

I = interview
W = workshop

Syrian Arab Republic

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
UNICEF staff					
1	Youssouf	Abdel-Jalil	UNICEF	Former Representative	I
2	Barbara	Atherly	UNICEF	Chief, Education	I, W
3	Ahmedou	Bahah	UNICEF	WASH Specialist	I
4	Dr. Iman	Bahnasi	UNICEF	Officer, Child Survival/Health	I, W
5	Maddalena	Bertolotti	UNICEF	Manager, Resource Mobilization Unit	I
6	Mark	Choonoo	UNICEF	Former Emergency Specialist	I
7	Begna	Edo	UNICEF	WASH Sector Coordinator	I
8	Ibrahim	Farah	UNICEF	Education Officer	I
9	Ettie	Higgins	UNICEF	Former Deputy Representative	I
10	Ismail	Kamil	UNICEF	Former Chief of Operations	I
11	Mohamad	Kanawati	UNICEF	Officer for Adolescent Programme	I, W
12	Sandra	Lattouf	UNICEF	Emergency Specialist (surge and Syria Hub)	I
13	Haydar	Nasser	UNICEF	Chief, Health and Nutrition	I
14	Opiyo	Nixon	UNICEF	Chief of Field Office, Tartous	I
15	Insaf	Nizam	UNICEF	Former Child Protection Specialist	I
16	Benjamin	Omoluyi	UNICEF	HR Specialist	I, W

Syrian Arab Republic

Ser	Name		Organization	Title (related to Syria operation)	Method
	First	Last			
17	Lina	Omran	UNICEF	Child Protection Officer	I, W
18	Hamida	Ramadhani	UNICEF	Deputy Representative	I
19	Wafaa	Saeed	UNICEF	Chief, Field Operations	I
20	Amson	Simbolon	UNICEF	Education Cluster Coordinator	I
21	Hanaa	Singer	UNICEF	Representative	I
22	Luis	Soares	UNICEF	Chief, Operations	I
23	Monaf	Yosef	UNICEF	WASH Officer	I, W
External stakeholders					
24	Marwan	Abdullah	Syrian Arab Red Crescent	Director	I
25	Antranig	Ayvazian	Armenian Charity	Head	I
26	Svetlana	Kapustian	Action Against Hunger Spain	Country Director	I
27	Raya	Ramadan	Syrian Arab Red Crescent	Deputy Director	I
28	Wafaa	Sadek	Syrian Islamic Front	Former Director	I
29	Sebastien	Trives	Office for the Coordination of Humanitarian Affairs (OCHA)	Head of Office, Syrian Arab Republic	I

I = interview
W = workshop

Regional Office/Syria Hub, MENA

Ser	Name		Organization	Title (related to Syria Operation)	Method
	First	Last			
UNICEF staff					
1	Francesco	Calcagno	UNICEF	Education Specialist	I, W
2	Maria	Calivis	UNICEF	Former Regional Director	I
3	Laurent	Chapuis	UNICEF	Regional Advisor	I
4	Dina	Craissati	UNICEF	Regional Advisor Education	I, W
5	Aida	Dajani	UNICEF	Programme Budget Officer	W
6	Pierre	Foucassie	UNICEF	WASH Specialist	I
7	Samuel	Frederick	UNICEF	Senior Human Resources Manager	I

Regional Office/Syria Hub, MENA

Ser	Name		Organization	Title (related to Syria Operation)	Method
	First	Last			
8	Roumiana	Gantcheva	UNICEF	Regional Chief of Monitoring and Evaluation	W
9	Moise	Halafu	UNICEF	Regional Chief of Operations	I
10	Dr. SM Moazzem	Houssian	UNICEF	Regional Health Advisor	I
11	Liv Elin	Indreiten	UNICEF	Youth and Adolescent Development Specialist	W
12	Ilona	Milner	UNICEF	Fundraising Specialist	I
13	Paul	Molinaro	UNICEF	Regional Chief of Supply	I, W
14	Iain	Murray	UNICEF	Monitoring Specialist	I, W
15	Geetanjali	Narayan	UNICEF	Regional Advisor for Planning and Programming	I, W
16	Christine	Nylander	UNICEF	Regional Chief of Human Resources	I
17	Renatha	Rugarabamu	UNICEF	Head of Common Services Unit (CSU)	I
18	Peter	Salama	UNICEF	Regional Director	I
19	Laura	Siegrist	UNICEF	Supply and Logistics Specialist	I, W
20	Hannan	Sulieman	UNICEF	Deputy Regional Director	I
21	Juliette	Touma	UNICEF	Communication Specialist	I, W
22	Bastien	Vigneau	UNICEF	Regional Chief Emergency	I
23	Geoffrey	Wiffin	UNICEF	Syria Emergency Coordinator	I
24	Mirna	Yacoub	UNICEF	Senior Emergency Specialist	I, W
External stakeholders					
25	Nada	Al Ward	WHO	Coordinator, Emergency Support Team	W
26	Rob	Drouen	Action Against Hunger	Regional representative for Action Against Hunger in the Middle East	W
27	Rasmus	Egental	World Food Programme (WFP)	Deputy Regional Emergency Coordinator Syria and Neighbouring Countries	I
28	Ben	Farell	UNHCR	Senior External Relations Officer	I, W
29	Helena	Fraser	OCHA	Head, OCHA Regional Office for the Syria Crisis	I
30	Faten	Kamel	WHO	Medical officer polio eradication programme	I, W
31	Erik	Kastlander	OCHA	Head, Information and Analysis Unit	W

Regional Office/Syria Hub, MENA

Ser	Name		Organization	Title (related to Syria Operation)	Method
	First	Last			
32	Mariam	Klait	Syrian American Medical Society	Grants Manager	W
33	Amparo	Laiseca Garcia	ECHO	Health Expert	I
34	Robin	Lloyd	ECHO	WASH and Shelter Expert	I
35	Francois	Reybet-Degat	UNHCR	Deputy Director, Deputy Regional Refugee Coordinator	I
36	Mathieu	Rouquette	Syria INGO Regional Forum	Syria INGO Regional Forum Representative	W
37	Philippe	Royan	DFID	Regional Humanitarian Advisor, Syria Crisis	I

I = interview
W = workshop

UNICEF Headquarters

Ser	Name		Title (related to Syria Operation)
	First	Last	
1	Susan	Bissell	Chief, Child Protection, PD
2	Jo	Bourne	Chief, Education, PD
3	Genevieve	Boutin	Chief, Humanitarian Policy Section, EMOPS
4	Ted	Chaiban	Director, PD
5	Silvia	Danailov	Chief, HFSS, EMOPS
6	Shanelle	Hall	Director, Supply Division
7	Afshan	Khan	Director, EMOPS
8	Colin	Kirk	Director, Office of Evaluation
9	Gwyn	Lewis	Inter-Cluster Manager
10	Heather	Papowitz	Senior Advisor, Health-Emergencies
11	Frederic	Sizaret	Human Resource Manager
12	Betel	Tassew	Chief HR in Emergencies
13	Sanjay	Wijesekera	Chief, WASH, PD
14	Hamish	Young	Chief, HATIS, PD

DATA COLLECTION TOOLS

The overview below lists the six main data-collection tools that will be used for the evaluation, including a brief description of each.

Ser	Method	Description
1	DESK RESEARCH	The desk research will be based on documents provided by UNICEF's Evaluation Office and additional evaluation team research or documentation requested. Initial desk research has been used for guidance on the development of field data collection tools. All desk research will systematically collect data on key lines of enquiry from documentation such as programme reports, M&E data, other performance reports, academic literature and financial records. Data gathered will be recorded in a central database organized by programme, by country and phase (Phase L2/Phase L3).
2	FOCUS GROUP DISCUSSION	During the field visits at country level, where possible, focus group discussions will be held with the affected population. This will involve internally displaced people, refugees and host communities.
3	KEY INFORMANT INTERVIEWS	Structured and semi-structured interviews will be held at country, regional and HQ levels. Interview and consultation guides will be used to answer lines of enquiry based on the relevance of stakeholder types to the focus areas.
4	DIRECT OBSERVATION	Structured and unstructured direct observation techniques at country level will include – where possible – UNICEF programme activities, UNICEF meetings and meetings with implementing and/or coordinating partners. Direct observation data sheets with both a checklist format (structured) and open question format (unstructured) will be used to record information for triangulation of data from key informant interviews and any follow up on key observable indicators.
5	PARTICIPATORY WORKSHOPS	Workshops will be held as and when feasible with internal and external stakeholders. The makeup of the groups will be discussed and agreed with the UNICEF offices and will depend on the country context. These sessions will provide a participatory opportunity to further answer evaluation lines of enquiry.
6	WEB-BASED SURVEY (2 versions: 1) internal audiences, 2) external audiences)	An online questionnaire will be used to ensure that the high number of stakeholders involved in the the Syrian Arab Republic and sub-region response have the opportunity to provide feedback within the timeframe for the evaluation. This web-based survey will function to collect quantitative data on key themes identified in designing the methodology and through initial document review.

Data collection toolkit: outline of tools

This document presents the outline of the six key data collection tools that will be used for the evaluation. These tools will support three types of data-collection:

Desk research:

1 DESK RESEARCH PROTOCOL

- Overview and process steps
- Workbook coding guide

Field mission:

2 FOCUS GROUP PROTOCOL

3 KEY INFORMANT INTERVIEW GUIDE

(to be customized for the following categories of participant):

- Overall (i.e. regional, hub, country office (CO) senior leaders)
- WASH
- Education
- Health
- Child protection

4 DIRECT OBSERVATION PROTOCOL

5 PARTICIPATORY WORKSHOP PROTOCOL

Remote data collection:

6 WEB SURVEY

(two versions to be used: one internal, one external) The draft versions of the web surveys are provided as separate documents, as they have been set up in Survey Monkey and are downloaded as a pdf file.

Data collection toolkit:

1 DESK RESEARCH PROTOCOL

Desk research goal:

1. Extract relevant data from the documents provided by UNICEF and found through research
2. Record the data within a framework that facilitates two levels of analysis:
 - a. Per programme area²⁹ in each country and time period
 - b. An overall analysis of all programmes in all three countries

Deliverables:

Key themes for the evaluation to inform the inception report, the methodology development, field research data collection tools and preliminary findings report, to include:

- a. Six summary guide worksheets for each programme area (three countries x phase L2/phase L3)
- b. Questions and input to develop interview/focus group guides and survey questions

Process steps – Stage 1:

1. Review all pre-sorted documents for the specific programme area in Dropbox
2. Complete data workbook using the guide and rubric for your programme area (i.e. health, child protection, education, WASH). This review should include all relevant data, but be sure to include the focus area noted in the terms of reference (i.e. vaccination for health, etc.)
3. Plan Skype call with the Senior Evaluator for second day of literature review to discuss process, coding and resolve any questions.

4. Email the Junior Evaluator of any missing sources or other documents you believe could be helpful; he will be the single point of contact for locating, coding and importing documents into the Dropbox.

Process steps – Stage 2:

1. Complete summary reports: Filter data workbook by time and country and summarize findings into the 'summary guide' worksheets in the desk research workbook. (Note: if no data were available/found for the relevant cells leave them blank to help identify missing data.)
2. Field research data collection tools: Identify key gaps in the data, unanswered questions, findings to confirm and broad findings we need to understand in greater detail.

Key quotes:

Key quotes from documents can be very helpful for reports and as summary statements, so please copy/paste any key quotes into appropriate findings cells and highlight the cell in yellow.

Open codes:

Assigning an open code, which is a descriptive word or short phrase to a block of qualitative data is a helpful way to summarize (i.e. Sphere standards, CFS (for 'child friendly space'), delayed supplies, management structure etc.). In the workbook you are asked to provide open codes to each category of data to help condense the data and identify themes. Reviewing these codes will be an important aspect of developing the summary charts.

You can use anything you want for your codes, but try to balance three factors:

1. Use the same code for the same constructs so you can easily identify themes

²⁹ In the preliminary desk research for the inception phase, focus was placed on the countries. For the data-collection and analysis phases the regional focus has been added.

2. Use variations in codes to retain important differences in data (i.e. underperformed 10 per cent, underperformed 30 per cent, extreme partner weakness, moderate partner weakness, etc.)
3. Make your codes interpretable by others; we will compile all four workbooks to identify themes

Administration:

1. Save your work in the relevant files in the Dropbox with your initials then 'LITREVIEW', then the programme, then the last date updated in European format, i.e. 'XX-LITREVIEW-WASH-23032015'.
2. Some documents will reference programme activities, others might have explanatory factors and some might include both. If they are both in the same document, record them on the same row. Record information from different documents on a separate line.
3. You must enter the core codes (i.e. finding number, source reference number, time and country) for each finding as well as category/open codes for the data you find. However, you do not have to fill every cell; if you do not find relevant data then leave the cells for that section blank.
4. Copy/paste core codes and enter multiple rows if you find multiple findings in the same document.

Data workbook guide (use with coding rubric):

1. Column A: These are pre-coded for each programme area, but if you need to add more just code each row of findings with one letter for your programme area (W, H, E or C), the letter 'F' (for findings), and then number sequentially.
2. Column B: Record the 'AVXX' code found at the beginning of each filename in Dropbox.
3. Column C: Select appropriate 'time' code:
Phase L2 (2011–2012)
Phase L3 (January 2013–December 2014)
Overall – programme or strategy covering both periods
4. Column D: Select appropriate 'country' code:
Syrian Arab Republic/Jordan/Lebanon (strategy/programme limited to country borders)
Overall (regional or multi-country strategy/program)
5. Column E: Select appropriate response domain per coding rubric sheet.
6. Column F: Enter the planned outputs/outcomes found in the document.
7. Column G: Enter the actual outputs/outcomes found in the document.
8. Column H: Enter your 'open code' summary of the programme activity data just entered.
9. Column I: Enter any explanatory factors related to programme activity found in the document.
10. Column J: Select the appropriate explanatory domain per the coding rubric.
11. Column K: Select the appropriate explanatory category per the coding rubric. Note: the options for this category will be available after the explanatory domain is selected.
12. Column L: Enter your 'open code' summary of the explanatory factor just entered.
13. Column M: Enter the recommendation related to ongoing Syria operations found in the document.
14. Column N: Enter the recommendation related to future/similar operations found in the document.
15. Column O: Enter your 'open code' summary of the recommendations just entered.

Data collection toolkit:

2 FOCUS GROUP PROTOCOL

Note: Customize this protocol as appropriate for participants and context.

Remember to:

- Ensure that you have informed consent and meet in a private location where the population groups can speak freely without being overheard or people passing by.
- Work to ensure that all voices in the group are heard.
- Do not promise anything on behalf of UNICEF/IP or agree to pass on requests, etc.; refer them to the UNICEF/IP contact.
- Ensure you know what assistance UNICEF is delivering for the participants involved in the focus group discussion: participants may not be aware what programmes are delivered by UNICEF (or others).

Overall introduction (five minutes):

- Thank everyone for participating in the focus group.
- UNICEF has commissioned this evaluation to provide a comprehensive assessment of its overall humanitarian response to the Syria crisis. This evaluation will generate evidence, conclusions and key lessons as well as make recommendations for UNICEF's future humanitarian responses both in the sub-region and elsewhere.
- The evaluation is due to be complete by the end of August.

- The focus group is planned to take about 90 minutes (we will adapt as needed).
- It is voluntary to participate in this discussion; you do not have to. This is an opportunity for us to hear your opinions on programmes you, your family and friends participate in. This information will help UNICEF to improve their services or to continue with services that you find useful.
- Data and information collected in the focus group is strictly confidential and will be consolidated to an integrated overall report. No personal quotes or reflections will be linked to participants so please be frank and open in answering.
- When answering the questions, please be ready to support your views and opinions with examples of the point you are making, where possible.
- Do we have your permission to begin? Does anyone have any questions for us before we begin?

Group introductions (10 minutes):

- Name
- Amount of time they have been dealing with the hardships of the crisis³⁰

Key questions (65 minutes):

1. Please describe the support and/or service UNICEF provides for you/your children? (10 minutes)

³⁰ Note to evaluator: Establish a rough timeline at this stage with the participants in line with phase L2 (2012) and phase L3 (2013 – 2014) and clarify the timeframe when participants give answers for disaggregation

2. How well has the support and/or services met the needs of you, your children, or families you know?³¹ (20 minutes)
(additional prompts if needed:)
 - Did UNICEF provide the items and services you needed (most)?
 - Were the items and services provided fit for the context?
 - Did UNICEF's support start soon after your needs started?
 - Was UNICEF's support (relief items and services) easy to access?
 - Did UNICEF's support meet the needs of women, men, children, people with disabilities, the same or differently?
3. Please describe any opportunities you have had to provide feedback to UNICEF? (prompt: before this focus group, such as any monitoring activities?)
If so, did you see the feedback being taken into account? (10 minutes)
4. Please describe any changes to the support and/or services over time and if they have better met your needs. (10 minutes)
5. Based on your answers above, what would you say has been done well and what can be improved? Why? (15 minutes)

Exit question (10 minutes):

6. If you could make just one change to UNICEF's crisis response, what would it be?³²

Comments for closure:

- Thank you again for your participation.
- The data collected will be used to inform the preliminary findings report that is due by 12 June. The final evaluation report is due on 28 August.
- Please feel free to contact us should you have any further questions.

³¹ Note for evaluator: if possible, seek to collect examples/evidence of responses to these questions.

³² Note for evaluator: seek to identify also recommendations specifically for women, men, children, youth, people with a disability.

Data collection toolkit:

3 KEY INFORMANT INTERVIEW GUIDE a) UNICEF and implementing partners

Note for evaluators - remember to:

- Focus on collecting data per the guide below and not offer your own opinions.
- Ensure confidentiality by not attributing information gathered in another interview.
- Don't make promises such as including more people on the interview list or sending any documents – thank them for suggestions and refer them to the Field Team Leader.
- Customize the interview guide as appropriate for participant's role and area of focus.

Introduction:

- Thank you for agreeing to participate in the interview.
- UNICEF commissioned this evaluation to provide a comprehensive assessment of its overall humanitarian response to the Syria crisis. The evidence this evaluation gathers will inform recommendations for UNICEF's humanitarian responses in the sub-region and elsewhere.
- The evaluation is due to be complete by the end of August.
- The interview consists of eight main questions and will last about one hour (adapt length as needed for participant's schedule).

- Information provided in this interview is strictly confidential and will be consolidated to an integrated overall report. No personal quotes or reflections will be linked to interviewees so we are asking all participants to be frank and open in answering.
- When answering the questions, please be ready to support your views and opinions with examples of the point you are making, where possible.
- Do you have any questions for us before we begin?

Questions:

1. To be able to place the information you give us in context, can you please (i) tell us about your role in/towards UNICEF related to the Syria crisis response and (ii) indicate how long you have been involved?
2. Could you please summarize the assistance UNICEF provides to the affected population?^{33,34} Has this changed during the period of the assistance (2011–2015), how and what was the difference in the L2 phase (2011–2012) and L3 phase (2013–present)? Was this in line what UNICEF planned to do?
3. How does the actual response compare to what was planned (objectives)?
4. What are the concrete results for the population being assisted?
5. Was UNICEF's response appropriate for the environment and needs of affected population, over time?

³³ Note for evaluators: for UNICEF programme staff, focus on their area of expertise. Remember that advocacy is part of programmes.

³⁴ Note for evaluators: please ensure that information collected is compared to the preliminary desk research.

- a. How relevant were UNICEF's approach to programme delivery and components of response (supply and services linked to needs)?
 - b. How relevant was UNICEF's approach for vulnerable groups (i.e. women, children, people with disabilities) and for camp and non-camp³⁵ settings?
 - c. Was the response informed by detailed assessment and monitoring, including on vulnerable groups (i.e. women, children, people with disabilities)?
 - d. Were programmes adapted to changing situation, over time?
6. How well was UNICEF able to scale up and meet the assessed needs?
- a. Was the number of affected population assisted proportional to UNICEF's overall capacity?
 - b. Did the assistance UNICEF deliver meet its mandate (Core Commitments for Children)?
 - c. Were financial resources available to fulfil UNICEF's obligations?
7. How efficient was UNICEF's response?
- a. Were human resources for the operations deployed in a timely manner?
 - b. Was the profile of staff deployed for the response appropriate for the context?
 - c. Were assets,³⁶ supplies and services timely available?
 - d. How cost-effective was the response?
8. Have UNICEF's humanitarian guidance tools been used and of use in the context of the Syria crisis?
- a. What UNICEF humanitarian guidance was applied?*
 - b. Which guidance was applied well?
 - c. Which guidance was useful?
 - d. What new humanitarian guidance is needed?
- *(Prompts: only to be used after question 11.a (first unaided response) - guidance on non-state actors, guidance on the MRM, guidance on gender, guidance on human rights, SSOPs)
- If time allows:**
9. What were the primary factors that contributed to results?
 10. What were the primary challenges, or factors that inhibited results?
 11. If you could make just one change to UNICEF's crisis response, what would it be?
 12. Is there any other information you feel would be useful for this evaluation?
- Comments for closure:**
- Ask for specific documentation useful for our data collection process
 - Thank you again for your participation.
 - The data collected will be used to inform the preliminary findings report that is due by 12 June. The final evaluation report is due on 28 August.
 - Please feel free to contact us should you have any further questions.

³⁵ Note for evaluators: Lebanon has no official camps. For all countries, please question to understand the living situation - which can be host, rental, informal (tented) settlements, etc. Note other shelter arrangements. Host communities are to be considered for both Lebanon and Jordan.

³⁶ Equipment in support of the response.

Data collection toolkit:

3 KEY INFORMANT INTERVIEW GUIDE

b) External

Note for evaluators - remember to:

- Focus on collecting data per the guide below and not offer your own opinions.
- Ensure confidentiality by not attributing information gathered in another interview.
- Don't make promises such as including more people on the interview list or sending any documents - thank them for suggestions and refer them to the Field Team Leader.
- Customize the interview guide as appropriate for participant's role and area of focus.
- Ensure you know what assistance UNICEF is delivering to the affected population; not all interviewees may be aware what programmes are delivered by UNICEF (or others).

Introduction:

- Thank you for agreeing to participate in the interview.
- UNICEF commissioned this evaluation to provide a comprehensive assessment of its overall humanitarian response to the Syria crisis. The evidence this evaluation gathers will inform recommendations for UNICEF's humanitarian responses in the sub-region and elsewhere.
- The evaluation is due to be complete by end of August.

- The interview consists of eight main questions and will last around one hour (adapt length as needed for participant's schedule).
- Information provided in this interview is strictly confidential and will be consolidated into an integrated overall report. No personal quotes or reflections will be linked to interviewees so we are asking all participants to be frank and open in answering.
- When answering the questions, please be ready to support your views and opinions with examples of the point you are making, where possible.
- Do you have any questions for us before we begin?

Questions:

1. To be able to place the information you give us in context, can you please tell us about (i) your role related to UNICEF's Syria crisis response and (ii) indicate how long you have been involved in the response?
2. Could you please summarize the assistance UNICEF provides to the affected population^{37,38} Has this changed during the period of the assistance (2011-2015), how and what was the difference in the L2 Phase (2011-2012) and L3 Phase (2013 to now)? Was this in line what UNICEF planned to do?
3. What were the results of the UNICEF response for the populations being assisted?

³⁷ Note for evaluators: for programme people, focus on their area of expertise. Remember that advocacy is part of programmes.

³⁸ Note for evaluators: please ensure that information collected is compared to the preliminary desk research.

4. Was UNICEF's response appropriate for the environment and needs of affected population, over time?
 - a. How relevant were UNICEF's approach to programme delivery and components of response (supply and services linked to needs)?
 - b. How relevant was UNICEF's approach for vulnerable groups (i.e. women, children, people with disabilities) and for camp and non-camp³⁹ settings?
 - c. Was the response informed by detailed assessment and monitoring, including on vulnerable groups (i.e. women, children, people with disabilities)?
 - d. Were programmes adapted to changing situation, over time?
5. How well was UNICEF able to scale up and meet the assessed needs?
 - a. Was the number of affected population assisted proportional to UNICEF's overall capacity?
 - b. Did the assistance UNICEF deliver meet its mandate?⁴⁰
6. How efficient was UNICEF's response?
 - a. Were human resources for the operations deployed in a timely manner?
 - b. Was the profile of staff deployed for the response appropriate for the context?
 - c. Were assets,⁴¹ supplies and services timely available?
7. Have UNICEF's humanitarian guidance tools been used and of use in the context of the Syria crisis?
 - a. What UNICEF humanitarian guidance was applied?*
 - b. Which guidance was applied well?
 - c. Which guidance was useful?

*(Prompts: only to be used after question 11.a (first unaided response) - guidance on non-state actors, guidance on the MRM, guidance on gender, guidance on human rights, SSOPs)
8. How effective was UNICEF's engagement with external partners?

If time allows:

 9. What were the primary factors that contributed to results?
 10. What were the primary challenges, or factors that inhibited results?
 11. If you could make just one change to UNICEF's crisis response, what would it be?
 12. Is there any other information you feel would be useful for this evaluation?

Comments for closure:

 - Thank you again for your participation.
 - The data collected will be used to inform the preliminary findings report that is due by 12 June. The final evaluation report is due on 28 August.
 - Please feel free to contact us should you have any further questions.

³⁹ Note for evaluators: Lebanon has no official camps. For all countries, please question to disaggregate non-camp into the following categories: host, rental and ITS. Note other shelter arrangements. Host communities are to be considered for both Lebanon and Jordan.

⁴⁰ Note for evaluators: Please keep in mind that this question links to UNICEF's Core Commitments to Children, though these may not be known by external stakeholders.

⁴¹ Equipment in support of the response.

Data collection toolkit:

3 KEY INFORMANT INTERVIEW GUIDE

c) Affected population community leaders

Note for evaluators – remember to:

- Seek informed consent
- Focus on collecting data per the guide below and do not offer your own opinions.
- Ensure confidentiality by not attributing information gathered in another interview.
- Don't make promises such as including more people on the interview list or sending any documents – thank them for suggestions and refer them to the Field Team Leader.
- Customize the interview guide as appropriate for the participant's role and area of focus.
- Ensure you know what assistance UNICEF is delivering to the affected population; not all interviewees may be aware what programmes are delivered by UNICEF (or others).

Introduction:

- Thank you for agreeing to participate in the interview.
- UNICEF commissioned this evaluation to provide a comprehensive assessment of its overall humanitarian response to the Syria crisis. The evidence this evaluation gathers will inform recommendations for UNICEF's humanitarian responses in the sub-region and elsewhere.

- The evaluation is due to be complete by the end of August.
- The interview consists of six main questions and will last about one hour (adapt length as needed for participant's schedule).
- Information provided in this interview is strictly confidential and will be consolidated into an integrated overall report. No personal quotes or reflections will be linked to interviewees so we are asking all participants to be frank and open in answering.
- When answering the questions, please be ready to support your views and opinions with examples of the point you are making, where possible.
- Do we have your permission to begin? Do you have any questions for us before we begin?

1. Please describe the support and/or service UNICEF provides for your community? How long has the support and/or service been provided?⁴²
2. How well has this programme met the needs of your community?⁴³ (additional prompts if needed:)
 - Did UNICEF provide the items and services your community needed (most)?
 - Were the items and services provided fit for the context?
 - Did UNICEF's support start soon after your community needs started?

⁴² Note to evaluator: Establish a rough timeline at this stage with the participants in line with phase L2 and phase L3 and clarify the timeframe when participants give answers for disaggregation.

⁴³ Note for evaluator: If possible, seek to collect examples/evidence of responses to these questions.

- Was UNICEF's support (relief items and services) easy to access?
 - Did UNICEF's support meet the needs of women, men, children, people with disabilities, the same or differently?
3. Please describe any opportunities you have had to provide feedback to UNICEF? (prompt: such as any monitoring activities?)
If so, did you see the feedback being taken into account?
 4. Please describe any changes to the support and/or service over time and if they have better met your community needs.
 5. Based on your answers above, what would you say has been done well and what can be improved? Why? (15 minutes)
 6. If you could make just one change to UNICEF's crisis response, what would it be?⁴⁴

Comments for closure:

- Thank you again for your participation.
- The data collected will be used to inform the preliminary findings report that is due by 12 June. The final evaluation report is due on 28 August.
- Please feel free to contact us should you have any further questions.

⁴⁴ Note for evaluator: seek to identify also recommendations specifically for women, men, children, youth, people with a disability.

Data collection toolkit:

4 DIRECT OBSERVATION PROTOCOL

Purpose:

This template is to be used by evaluation team members to record their direct observations during field data-collection visits. It should be used when team members witness or hear something pertinent to the lines of enquiry of the evaluation and indicators, not directly prompted by a question posed by the evaluation team.

Note to evaluator: notes should clearly identify which programmes the observations relate to. Remember to look for things that are there and also not there. Although the guide below is split into two focus areas, be mindful there can be an overlap of observation. Please use the rubric developed when recording the data.

Basic Information		
Type of observation*	1. Site visit 2. Office visit 3. CO programme meeting/planning 4. Country-level working group 5. Cluster/AoR meeting	<input type="checkbox"/> CO interaction with partners <input type="checkbox"/> Regional or crisis hub meeting <input type="checkbox"/> Other _____
Brief description	Write the observation, the significance of the observation and if there are any follow up questions as a result of the observation.	
Date of observation		
Start time of observation		AM/PM ⁴⁵
End time of observation		AM/PM
Location	City _____ Governorate _____ Country _____	<input type="checkbox"/> Global <input type="checkbox"/> Regional <input type="checkbox"/> National <input type="checkbox"/> Sub-national
Programme or general	<input type="checkbox"/> Child Protection <input type="checkbox"/> Health <input type="checkbox"/> General <input type="checkbox"/> Education <input type="checkbox"/> WASH	
In case of meeting: Number and type of participants	Type of participants	Number
	<input type="checkbox"/> UNICEF management	
	<input type="checkbox"/> UNICEF support (HR, Supply, Finance, Comms, Donor Relations, Admin)	
	<input type="checkbox"/> UNICEF programmes	
	<input type="checkbox"/> Implementing partners	
	<input type="checkbox"/> Other UN organisations	
	<input type="checkbox"/> INGOs	
	<input type="checkbox"/> NGOs	
	<input type="checkbox"/> Donors	
<input type="checkbox"/> Government		
<input type="checkbox"/> Others:		

⁴⁵ Circle the correct indicator

Field site focus areas

1. Note any evidence of appropriate response or needs that are being met (information, education and communication materials on flagship programmes, access to facilities such as schools, health centres, WASH facilities, child-friendly spaces, boys and girls look alert not traumatized, not malnutrition with brittle nails, teeth and hair)
2. Note any evidence of inappropriate response within UNICEF's mandate (e.g. basic school supplies provided but no teachers, hygiene education but no facilities, WASH facilities without water, etc.)
3. Note any evidence of assessment and monitoring activities observed
4. What is the observed quality of the items/materials/service UNICEF provided (if any)?
5. Note any evidence of child, youth and disability activities/materials (boys and girls in schools, in uniforms/with books, child-friendly spaces, if youth are idling instead of engaged in productive activities, young girls pregnant/with babies or young children, ramps, people with disabilities engaged in productive activities/part of the community/seen in the community)
6. Note any evidence of gender-specific activities/materials (such hygiene items, separate toilet facilities, locks on doors/toilets, location of toilets, adequate lighting if in a camp, health facilities with gender-based violence (GBV) prevention facilities)
7. What was the observed interaction between UNICEF/IP staff and the affected population?

Meetings/offices focus areas:

8. What did you observe of the working relationships between UNICEF and partners (note which type of partner was observed and any differences between groups if observed: NGO, government, IP, coordinating partner)
9. Note any evidence of appropriate or inappropriate scale-up of programmes (i.e. 'appropriate' based on observed staffing levels, quantity of relief supplies, adequacy of programme spaces for numbers served, etc.)
10. Note any evidence of financial limitations
11. Note any indications of efficient use of resources
12. Note any indications of inefficient use of resources
13. Note any application of UNICEF's humanitarian guidance

Data collection toolkit:

5 PARTICIPATORY WORKSHOP PROTOCOL

a) Internal stakeholders

Note for evaluators - remember to:

- Open the meeting by clearly stating the objective, purpose and method of the workshop.
- Focus on collecting data per the guide below and don't offer your own opinions.
- Ensure confidentiality by not attributing information gathered through other inter-personal data-collection methods.

Introduction and purpose

Introduction:

UNICEF has commissioned this evaluation to provide a comprehensive assessment of its overall humanitarian response to the Syria crisis. This evaluation will generate evidence, conclusions and key lessons as well as make recommendations for UNICEF's future humanitarian responses both in the sub-region and elsewhere. The evaluation is due to be completed by the end of August.

Purpose and objectives:

The workshop provides a participatory opportunity to explore and answer evaluation lines of enquiry.

Introductions (10 minutes):

Methodology: Participatory discussion (PowerPoint)

- Welcome
- Purpose and objective of the workshop
- The workshop is planned to take about two hours (we will adapt as needed)

- Confidentiality brief (data and information collected in the workshop are strictly confidential and will be consolidated to an integrated overall report. No personal quotes or reflections will be linked to participants so please be frank and open in answering)
- Introduction of participants (name, role related to UNICEF's Syria crisis response, amount of time involved in the crisis response (include other roles/organizations if appropriate))

UNICEF humanitarian response: Group work (30 minutes):

Methodology: Introduction of group work with clear instructions followed by participatory discussion in groups. Two or three groups each discussing two questions.

The five questions are:

1. What was the assistance provided by UNICEF?
 - What assistance did UNICEF deliver (phase L2 and phase L3) – brief summary?
 - Was this assistance according to plan – brief summary?
 - What were the results for the affected population?
 - How effective was the process that UNICEF used in supporting the delivery of assistance to the affected population?
2. Was the UNICEF response appropriate for the environment and needs of the affected population over time?
 - How relevant were UNICEF's approach to programme delivery and components of response (supply and services); including for women, children, people with disabilities and camp/non camp settings?

- Was the response informed by detailed assessment and monitoring?
 - Were programmes adapted to the changing situation over time (o.a. phase L2 and phase L3, but also based on changing needs)?
3. How efficient was the response?
- Were human resources for the operations deployed in a timely manner?
 - Was the profile of staff deployed for the response appropriate for the context?
 - Timely availability of assets, supplies and services?
 - How cost-effective was the response/ were the programmes?
4. How well was UNICEF able to scale up and meet the assessed needs?
- Was the assistance UNICEF delivered according to its mandate?
 - Was the number of the affected population UNICEF assisted according to its capacity (proportionate)?
 - Were financial resources available to fulfil the obligations?
5. Have UNICEF's humanitarian guidance tools been used and of use in the context of the Syria crisis?
- Guidance on non-state actors
 - Guidance on MRM
 - Guidance on gender issues
 - Guidance on human rights
 - SSOPs

Response findings: Plenary discussion (50 minutes)

Methodology: Facilitated discussion on group work.

Influencing factors: Group work (15 minutes):

Methodology: Based on the discussion of group work part 1, the groups⁴⁶ will discuss the following questions:

1. What were the primary factors that contributed to results?
2. What were the primary challenges, or factors that inhibited results?

Influencing factors: Plenary discussion (15 minutes)

Methodology: Facilitated discussion on group work.

If time allows: Plenary closing question (10 minutes)

If you could make just one change to UNICEF's crisis response, what would it be?

Comments for closure (5 minutes):

- Thank you for participating.
- The data collected will be used to inform the preliminary findings report that is due by 12 June. The final evaluation report is due on 28 August.
- Please feel free to contact us with any other questions or feedback that could help this evaluation.

⁴⁶ Groups may change depending on group dynamics and those present.

Data collection toolkit:

5 PARTICIPATORY WORKSHOP PROTOCOL

b) External stakeholders

Note for evaluators – remember to:

- Open the meeting by clearly stating the objective, purpose and method of the workshop.
- Focus on collecting data per the guide below and don't offer your own opinions.
- Ensure confidentiality by not attributing information gathered through other inter-personal data-collection methods.
- Ensure you know what assistance UNICEF is delivering: participants may not all be aware of what programmes are delivered by UNICEF (or others).

Introduction and purpose

Introduction:

UNICEF has commissioned this evaluation to provide a comprehensive assessment of its overall humanitarian response to the Syria crisis. This evaluation will generate evidence, conclusions and key lessons as well as make recommendations for UNICEF's future humanitarian responses both in the sub-region and elsewhere. The evaluation is due to be completed by the end of August.

Purpose and objectives:

The workshop provides a participatory opportunity to explore and answer evaluation lines of enquiry.

Introductions (25 minutes):

Methodology: PowerPoint and participatory discussion

- Welcome

- Purpose and objective of the workshop.
- The workshop is planned to take about two hours (we will adapt as needed).
- Confidentiality brief (data and information collected in the workshop are strictly confidential and will be consolidated into an integrated overall report. No personal quotes or reflections will be linked to participants so please be frank and open in answering).
- Introduction of participants (name, role related to UNICEF's Syria crisis response, amount of time involved in the crisis response (include other roles/organizations if appropriate)).

Response findings: Group work (30 minutes):

Methodology: Introduction of group work with clear instructions followed by participatory discussion in two or three groups, each discussing two questions.

The questions are:

1. What was the assistance provided by UNICEF?
 - What assistance did UNICEF deliver (phase L2 (2011–2012) and phase L3 (2013–present) – brief summary?
 - Has this changed during the period of the assistance (2011–2015) – brief summary?
 - How and what was the difference in the L2 phase and L3 phase?
 - In your view, was this in line what UNICEF planned to do?
2. Was the UNICEF response appropriate for the environment and needs of the affected population over time?
 - How relevant were the approach to programme delivery and components of response (including women, children, people with disabilities and camp/non camp)?

- Was the response informed by detailed assessment and monitoring?
 - Programmes adapted to the changing situation, over time (o.a. phase L2 and phase L3, but also based on changing needs)
3. How well was UNICEF able to scale up and meet the assessed needs?
- Was the assistance UNICEF delivered according to its mandate?
 - Was the number of affected population UNICEF assisted according to its capacity? (proportionate)
4. Have UNICEF's humanitarian guidance tools been used and of use in the context of the Syria crisis?
- Guidance on non-state actors
 - Guidance on MRM
 - Guidance on gender issues
 - Guidance on human rights
5. How well did UNICEF engage with others?
- Were efforts integrated? (complementary)
 - Was the response coordinated? (avoid duplications and gaps)
 - Did UNICEF take a lead role?

Response findings: Plenary discussion (50 minutes)

Methodology: Facilitated discussion on group work.

Influencing factors: Group work (15 minutes):

Methodology: Based on the discussion of group work part I, the groups⁴⁷ will discuss the following questions:

3. What were the primary factors that contributed to results?
4. What were the primary challenges, or factors that inhibited results?

Influencing factors: Plenary discussion (15 minutes)

Methodology: Facilitated discussion on group work.

If time allows: Plenary closing question (10 minutes)

If you could make just one change to UNICEF's crisis response, what would it be?

Comments for closure (5 minutes):

- Thank you for participating.
- The data collected will be used to inform the preliminary findings report that is due by 12 June. The final evaluation report is due on 28 August.
- Please feel free to contact us with any other questions or feedback that could help this evaluation.

⁴⁷ Groups may change depending on group dynamics and those present.

Data collection toolkit:

6 ONLINE SURVEY

a) Internal audiences

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

This survey is part of the on-going evaluation of UNICEF's humanitarian response in Syria and the sub-region. The evaluation has been commissioned by UNICEF's Evaluation Office and is being conducted by an independent team from Avenir Analytics.

As part of the humanitarian assistance, UNICEF has mounted a complex and large-scale response operation across the sub-region. Programmes focused on meeting the needs of crisis-affected children in Syria are currently supported by six country offices and two regional offices.

The objective of this evaluation is to provide an independent and robust assessment of UNICEF's emergency response under three main headers: (i) UNICEF's strategy and key programme interventions, (ii) UNICEF's engagement with other actors and (iii) UNICEF's management structure and operational processes.

You, as part of the internal stakeholder groups involved in the response to the humanitarian crisis in Syria and the sub-region, are a vital source of information on what UNICEF has been doing well and what could be improved. Your contribution is therefore essential to ensure quality and comprehensiveness of the evaluation results.

Your responses to this survey will remain confidential and anonymous, and will not be directly attributable to you in any way by the evaluation team. Completing the survey should take approximately 25 minutes of your time. Should you have any questions or comments, please do not hesitate to contact evaluation team member Ryan Delafosse (Ryan.Delafosse@aveniranalytics.com).

Thank you for your willingness to participate in the survey. On behalf of UNICEF and the evaluation team, we sincerely thank you for sharing your insights with us.

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

About you and your role in the humanitarian response in Syria and the Sub-R...

1. How many years have you worked in humanitarian response [in any role]?

- Less than 1 year 2 to 4 years 10 to 14 years
 1 to 2 years 5 to 9 years 15 years or more

2. Please select the option that best describes the scope of your involvement in the humanitarian response for Syria or the Sub-Region? [Please keep this 'lens' in mind when answering the survey questions]

- Regional Jordan Lebanon Syria

3. Which organisational level best describes your position during your role in the Syria response?

- Global Regional Country Sub-national

4. What is the functional area you were/are involved with during the Syria crisis response? [Please answer the survey based on the option you choose here. i.e: WASH answers questions for WASH. If you choose a non specific programme function, please only answer where you have an informed opinion]

- Advocacy Human Resources Planning
 Child Protection Information Management WASH
 Communications Management (General) Resource Mobilisation
 Coordination Monitoring and Evaluation Supply
 Education Nutrition
 Health Operations

Other (please specify)

5. Please identify the period of your involvement in the Syria crisis response [in any role] by ticking all the boxes that apply to you.

- 2011: January – June 2012: July - December 2014: January – June
 2011: July - December 2013: January – June 2014: July - December
 2012: January – June 2013: July - December 2015: January – June

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Effectiveness of UNICEF's Syria Response

GUIDANCE: For the questions below, please select the best option in the drop down menu for the Syria crisis phase L2 [2011 - 2012], phase L3 [2013 - 2014] or both [if applicable]. Please answer only those questions you have an informed opinion on, for the programmes that are within your scope of work. Blank answers will be considered as topics you do not have an opinion on.

The "overall response" option refers to the combination of WASH, Health, Education and Child Protection programmes including advocacy, communication for development and supply.

6. To what extent do you agree with the following statement: 'The planned UNICEF response to the humanitarian crisis in Syria was realistic'

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

7. Please rate the effectiveness of how UNICEF has delivered programmes for provision of assistance to the affected population

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

8. To what extent do you agree to the following statement: 'The UNICEF response provided results for the affected population'

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Relevance and Appropriateness of UNICEF's Syria response

9. Was UNICEF's humanitarian response based on detailed assessments of the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

10. Did assessments sufficiently consider the specific needs of children age 14 and under?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

11. Did assessments sufficiently consider the specific needs of youth age 15 to 24?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

12. Did assessments sufficiently consider the specific needs of women and girls?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

13. Did assessments sufficiently consider the specific needs of people with disabilities?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

14. Did assessments sufficiently consider the specific needs of the affected population in camp locations? [Please disregard this question if there are no camps in your country]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

15. Did assessments sufficiently consider the specific needs of the affected population in non-camp locations? [Please consider host, rental, informal tented settlements, IDP shelters and other non camp living situation as part of this]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

16. Was UNICEF's humanitarian response appropriate for the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

17. Was UNICEF's humanitarian response appropriate for the specific needs of children age 14 and under?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

18. Was UNICEF's humanitarian response appropriate for the specific needs of youth age 15-24?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

19. Was UNICEF's humanitarian response appropriate for the specific needs of women and girls?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

20. Was UNICEF's humanitarian response appropriate for the specific needs of people with disabilities?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

21. Was UNICEF's humanitarian response appropriate for the specific needs of the affected population in camp locations? [Please disregard this question if there are no camps in your country]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

22. Was UNICEF's humanitarian response appropriate for the specific needs of the affected population in non-camp locations? [Please consider host, rental, informal tented settlements, IDP shelters and other non-camp living situation as part of this]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

23. Was UNICEF's humanitarian response adjusted to the changing needs of the affected population over time?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

24. Were UNICEF's advocacy efforts appropriate for the context?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Coverage of UNICEF's Syria response

25. Was the number of affected people UNICEF assisted in proportion to its organisational capacity?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

26. To what extent was UNICEF's humanitarian response aligned with its mandate?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

27. Was UNICEF's humanitarian response in proportion to the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

28. Did UNICEF have sufficient financial resources to fulfil its programme responsibilities?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Efficiency of UNICEF's Syria response

29. How timely was UNICEF's assistance to the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

30. How cost efficient was UNICEF's humanitarian assistance?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
Wash	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

31. In your view, how timely was staff deployment for UNICEF's humanitarian response?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

32. To what extent was the profile of UNICEF staff engaged in the operation appropriate for the context?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Coherence of UNICEF's Syria response

33. In your view, to what extent has UNICEF applied the main humanitarian guidance for the context of the Syria crisis to their programme interventions? [Please answer for guidance you are familiar with]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Guidance on working with non-state actors	<input type="text"/>	<input type="text"/>
Guidance on gender	<input type="text"/>	<input type="text"/>
Guidance on human rights	<input type="text"/>	<input type="text"/>
Simplified Standard Operating Procedures (SSOPs)	<input type="text"/>	<input type="text"/>
Other guidance (please specify)	<input type="text"/>	

34. Considering the context the Syria crisis, was this guidance applied well? [Please answer for guidance you have an informed opinion on]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Guidance on working with non-state actors	<input type="text"/>	<input type="text"/>
Guidance on gender	<input type="text"/>	<input type="text"/>
Guidance on human rights	<input type="text"/>	<input type="text"/>
Simplified Standard Operating Procedures (SSOPs)	<input type="text"/>	<input type="text"/>
Other humanitarian guidance entered above	<input type="text"/>	<input type="text"/>

35. Please list any guidance that was missing for this response

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Coherence of UNICEF's Syria response

25. In your view, to what extent has UNICEF applied the main humanitarian guidance for the context of the Syria crisis to their programme interventions? [please answer for guidance you are familiar with]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Guidance on gender issues	<input type="text"/>	<input type="text"/>
Guidance on human rights	<input type="text"/>	<input type="text"/>
Other Guidance (please specify)	<input type="text"/>	

26. Considering the context of the Syria crisis, was this guidance applied well? [please answer for guidance you have an informed opinion on]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Guidance on gender issues	<input type="text"/>	<input type="text"/>
Guidance on human rights	<input type="text"/>	<input type="text"/>
Other humanitarian guidance	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your recommendation for UNICEF

36. If you could make just one change to UNICEF's Syria response, what would it be?

RESPONSE

EMAIL INVITATION 1 CLOSED

Overview Recipients Options

OF 100% INVITED

173
Total invitations

- 43.4% responded (75)
- 0.6% opted out (1)
- 1.7% bounced (3)
- 54.3% not responded (94)

OF 100% RESPONDED

75
Total responses

- 76% complete (57)
- 24% partial (18)

MESSAGE HISTORY

[+ Invite More](#) [Send Reminder](#) [Send Thank You](#)

5/24/2015	Draft invitation message started	Delete Resume
5/20/2015	Sent reminder message to 125 contacts	▼
5/13/2015	Sent invitation message to 173 contacts	▼

6 ONLINE SURVEY

b) External audiences

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

This survey is part of the on-going evaluation of UNICEF's humanitarian response in Syria and the sub-region. The evaluation has been commissioned by UNICEF's Evaluation Office and is being conducted by an independent team from Avenir Analytics.

As part of the humanitarian assistance, UNICEF has mounted a complex and large-scale response operation across the sub-region. Programmes focused on meeting the needs of crisis-affected children in Syria are currently supported by six country offices and two regional offices.

The objective of this evaluation is to provide an independent and robust assessment of UNICEF's emergency response under three main headers: (i) UNICEF's strategy and key programme interventions, (ii) UNICEF's engagement with other actors and (iii) UNICEF's management structure and operational processes.

You, as part of the external stakeholder groups involved in the response to the humanitarian crisis in Syria and the sub-region, are a vital source of information on what UNICEF has been doing well and what could be improved. Your contribution is therefore essential to ensure quality and comprehensiveness of the evaluation results.

Your responses to this survey will remain confidential and anonymous, and will not be directly attributable to you in any way by the evaluation team. Completing the survey should take approximately 20 minutes of your time. Should you have any questions or comments, please do not hesitate to contact evaluation team member Ryan Delafosse (Ryan.Delafosse@aveniranalytics.com).

Thank you for your willingness to participate in the survey. On behalf of UNICEF and the evaluation team, we sincerely thank you for sharing your insights with us.

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

About you and your role in the humanitarian response in Syria and the Sub-R...

1. Please identify the type of organisation you work with.

- UN Agency
- National Government Ministry
- National Non-Governmental Organisation
- International Non-Governmental Organisation
- Red Cross/Red Crescent Organisation
- Donor Government Agency
- Commercial/Private Sector
- Other (please specify)

2. Please select the option below if your organization is an implementing partner. (Leave it blank if not):

- Implementing partner

3. How many years have you worked in humanitarian response (in any role)?

- Less than 1 year
- 1 to 2 years
- 2 to 4 years
- 5 to 9 years
- 10 to 14 years
- 15 years or more

4. Please select the option that best describes the scope of your involvement in the humanitarian response Syria and the Sub-Region? [Please keep this 'lens' in mind when answering the survey questions]

- Regional
- Jordan
- Lebanon
- Syria

5. Which organisational level best describes your position during your role in the Syria response?

- Global
- Regional
- Country
- Sub-national

6. What UNICEF programme are you mainly involved with for the Syria response? [Please answer the survey based on the option you choose here. i.e: WASH answers questions for WASH. If you choose more than one programme, please only answer where you have an informed opinion]

- Child Protection
- Education
- Health
- WASH
- More than one programme

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

7. Please identify the period of your involvement in the Syria crisis response (in any role) by ticking all the boxes that apply to you.

- | | | |
|--|--|--|
| <input type="checkbox"/> 2011: January – June | <input type="checkbox"/> 2012: July - December | <input type="checkbox"/> 2014: January – June |
| <input type="checkbox"/> 2011: July - December | <input type="checkbox"/> 2013: January – June | <input type="checkbox"/> 2014: July - December |
| <input type="checkbox"/> 2012: January – June | <input type="checkbox"/> 2013: July - December | <input type="checkbox"/> 2015: January – June |

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Effectiveness of UNICEF's Syria Response

GUIDANCE: For the questions below, please select the best option in the drop down menu for the Syria crisis phase L2 [2011 - 2012], phase L3 [2013 - 2014] or both [if applicable]. Please answer only those questions you have an informed opinion on, for the programmes that are within your scope of work. Blank answers will be considered as topics you do not have an opinion on.

The "overall response" option refers to the combination of WASH, Health, Education and Child Protection programmes including advocacy, communication for development and supply.

8. To what extent do you agree with the following statement: 'The planned UNICEF response to the humanitarian crisis in Syria was realistic'

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

9. Please rate the effectiveness of how UNICEF has delivered programmes for provision of assistance to the affected population

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

10. To what extent do you agree to the following statement: 'The UNICEF response provided results for the affected population'

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Relevance and Appropriateness of UNICEF's Syria response

11. Was UNICEF's humanitarian response appropriate for the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

12. Was UNICEF's humanitarian response appropriate for the specific needs of children age 14 and under?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

13. Was UNICEF's humanitarian response appropriate for the specific needs of youth age 15-24?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

14. Was UNICEF's humanitarian response appropriate for the specific needs of women and girls?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

15. Was UNICEF's humanitarian response appropriate for the specific needs of people with disabilities?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

16. Was UNICEF's humanitarian response appropriate to the specific needs of the affected population in camp locations? [Please disregard this question if there are no camps in your country]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

17. Was UNICEF's humanitarian response appropriate to the specific needs of the affected population in non-camp locations? [Please consider host, rental, informal tented settlements, IDP shelters and other non-camp living situation as part of this]

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>

18. Was UNICEF's humanitarian response adjusted to the changing needs of the affected population over time?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Coverage of UNICEF's Syria response

19. Was the number of affected people UNICEF assisted in proportion to its organisational capacity?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

20. To what extent was UNICEF's humanitarian response aligned with its mandate?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

21. Was UNICEF's humanitarian response in proportion to the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your views on the Efficiency of UNICEF's Syria response

22. In your view, how efficient was UNICEF's humanitarian assistance?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

23. In your view, how timely was UNICEF's assistance to the needs of the affected population?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

24. Did UNICEF support a strong coordination mechanism to ensure an efficient overall sector response?

	phase L2 [2011 - 2012]	phase L3 [2013 - 2014]
Child Protection	<input type="text"/>	<input type="text"/>
Education	<input type="text"/>	<input type="text"/>
Health	<input type="text"/>	<input type="text"/>
WASH	<input type="text"/>	<input type="text"/>
Overall response	<input type="text"/>	<input type="text"/>

Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-

Your recommendation for UNICEF

27. If you could make just one change to UNICEF's Syria response, what would it be?

RESPONSE

EMAIL INVITATION 1 CLOSED

Overview Recipients Options

OF 100% INVITED

256
Total invitations

- 20.7% responded (53)
- 0.4% opted out (1)
- 1.2% bounced (3)
- 77.7% not responded (199)

OF 100% RESPONDED

53
Total responses

- 73.6% complete (39)
- 26.4% partial (14)

MESSAGE HISTORY + Invite More Send Reminder Send Thank You

5/20/2015	Sent reminder message to 222 contacts	▼
5/13/2015	Sent invitation message to 256 contacts	▼

Survey results

Survey Results

Overall Survey Participants	Phase L2										Phase L3										
	Phase L2					Phase L3					Phase L2					Phase L3					
	CP	ED	Health	WASH	Overall	CP	ED	Health	WASH	Overall	CP	ED	Health	WASH	Overall	CP	ED	Health	WASH	Overall	
How well did UNICEF deliver assistance?	A1	A1.1	A1.2	A1.3	A1 Summary	32	33	31	32	27	16	23	25	25	27	15	25	17	7	18	
		The planned response was realistic.	How effectively has UNICEF delivered programmes to assist the affected population?	The response provided results for the affected population		Mostly	Somewhat	N/A	Mostly	Mostly	Somewhat	N/A	Mostly	Mostly	Somewhat	N/A	Mostly	Mostly	Mostly	Mostly	Mostly
						33	31	32	27	16	23	25	25	27	15	25	17	7	18		
						Mostly	Somewhat	N/A	Mostly	Mostly	Somewhat	N/A	Mostly	Mostly	Somewhat	N/A	Mostly	Mostly	Mostly	Mostly	Mostly
Appropriateness of response over time	A2	A2.1	A2.2	A2.3	A2 Summary	27	16	23	25	25	27	15	25	17	7	18					
		Was the response appropriate for the needs of the affected population?	Was the response based on detailed assessments of the needs of the affected population?	Was the response adjusted to the changing needs of the affected population over time?		Somewhat	N/A	Somewhat	Somewhat	Somewhat	N/A	Somewhat	Somewhat	Somewhat	N/A	Somewhat	N/A	Somewhat	N/A	Somewhat	N/A
						32	33	31	32	27	16	23	25	25	27	15	25	17	7	18	
						Mostly	Somewhat	N/A	Mostly	Mostly	Somewhat	N/A	Mostly	Mostly	Somewhat	N/A	Mostly	Mostly	Mostly	Mostly	Mostly
Scale up to meet needs	A3	A3.1	A3.2	A3.3	A3 Summary	25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	
		Was the number of assisted people in proportion to UNICEF's organisational capacity?	Was UNICEF's humanitarian response aligned with its mandate?	Were financial resources available to fulfil its obligations?		Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	Somewhat	
						25	25	25	25	25	25	25	25	25	25	25	25	25	25	25	
						Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	Mostly	
Efficiency of response	A4	A4.1	A4.2	A4.3	A4 Summary	17	7	18													
		Timely availability & quality of HR?	Timely availability of assets, supplies & services?	How cost effective were the programmes?		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
						17	7	18													
						N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Note - no significant results found on coherence and so they are not included

Response options

N/A	Question not asked
No	No agreement across respondents
Not at all	The mode of respondents answers to this question
Somewhat	The mode of respondents answers to this question
Mostly	The mode of respondents answers to this question
Completely	The mode of respondents answers to this question

As part of the data-collection process, a survey was launched with separate versions for internal and external stakeholders. A total of 173 UNICEF staff were invited to participate, of which 75 responded (43.4 per cent), and 256 external stakeholders were invited, of which 53 responded (20.7 per cent).

The overall survey results (across programmes, countries, and internal and external stakeholder groups) present the perception of UNICEF's humanitarian response in terms of effectiveness (A1), relevance (A2), coverage (A3) and efficiency (A4) for phase L2 and phase L3. The results clearly show improved results over time, with health and WASH rated with a 'mostly' across all questions. It seems that child protection has remaining areas for attention across the questions with emphasis on appropriateness of the response.

Survey results have been used to triangulate with data-collection results and have informed Section 2 of this report; 'the results of data collection on the evaluation focus area questions'.

APPENDIX 7: TIMELINE OF POLITICAL, HUMANITARIAN AND UNICEF EVENTS

Political/humanitarian events	DATE	UNICEF events
2011		
'Day of dignity' protests begin across the Syrian Arab Republic	15 Mar	
	24 Mar	UNICEF report on ill treatment
Assad addresses the nation for the first time blaming foreign conspirators for unrest	30 Mar	
Syrian troops backed by tanks begin the siege of Dera'a.	25 Apr	
United States imposes sanctions on President Assad	19 May	
	31 May	UNICEF alarmed about reported violence against children in the Syrian Arab Republic
	11 Jun	First aid psychosocial training and non-food items distribution starts in the Syrian Arab Republic
Syrians start fleeing to Turkey.	12 Jun	
At least 500,000 people protest in the central city of Hama in the largest rally since the uprising began.	29 Jun	
The siege on Homs begins	30 Jun	
Free Syrian Army established	29 Jul	
United Nations Security Council Presidential statement condemns the government crackdown	3 Aug	
	20 Aug	First United Nations humanitarian mission to the Syrian Arab Republic with UNICEF participation

continued: Timeline

Political/humanitarian events	DATE	UNICEF events
Syrian National Council formed in Turkey	23 Aug	
Arab League suspends Syrian Arab Republic membership	12 Nov	
	2 Dec	UNICEF Executive Director statement on human rights situation and Human Rights Council resolution on the Syrian Arab Republic
2012		
First RRP launched	23 Mar	
	31 Mar	Second United Nations humanitarian mission to the Syrian Arab Republic with UNICEF participation
Security Council Resolution 2043 agrees to send observers to oversee six-point peace plan	12 Apr	
SHARP launched	1 Jun	
RRP2 launched	28 Jun	
Za'atari refugee camp opens in Jordan	29 Jul	
SHARP revised; 1.5 million targeted for food assistance	4 Sep	
	6 Sep	UNICEF scales up emergency health and nutrition response to meet increasing needs of children affected by crisis
	19 Sep	UNICEF Executive Director delivers speech at the United Nations Security Council open debate on children and armed conflict
RRP revised	27 Sep	

continued: Timeline

Political/humanitarian events	DATE	UNICEF events
	7 Oct	In Jordan, UNICEF undergoes water delivery and testing operation to meet increasing demands of refugees
United Nations announces 4 million people in the Syrian Arab Republic are affected	3 Dec	
	7 Dec	Polio vaccination campaign in the Syrian Arab Republic
SHARP3/RRP4; appeals for over US\$1.5 billion	19 Dec	
2013		
	4 Jan	UNICEF declares the Syrian Arab Republic a Level 3 emergency
Number of Syrian refugees exceeds 700,000	29 Jan	
	30 Jan	UNICEF takes part in first-ever cross-line operation to opposition areas
Donors pledge US\$1.5 billion in Kuwait conference to help Syrians	1 Feb	UNICEF participates in Kuwait international pledging conference
	4 Feb	UNICEF begins the delivery of water treatment supplies for 10 million people in the Syrian Arab Republic
	19 Feb	UNICEF at the Syria Humanitarian Forum in Geneva
Number of Syrian refugees reaches 1 million	6 Mar	
	12 Mar	UNICEF releases a two-year report: <i>Syria's children: A lost generation?</i>
	15 Mar	UNICEF opens second school in Za'atari camp

continued: Timeline

Political/humanitarian events	DATE	UNICEF events
United Nations announces that number of people affected in the Syrian Arab Republic is 6.8 million	1 Apr	
	11 Apr	UNICEF Executive Director renews Level 3 designation for three months
Number of Syrian refugees reaches 1.4 million	24 Apr	
	19 July	UNICEF Executive Director renews Level 3 designation for six months
The Assad regime is accused of using chemical weapons in the Damascus suburbs to kill hundreds of civilians	Aug	
	19 July	UNICEF launches the No Lost Generation Initiative
2014		
	Jan	UNICEF Executive Director renews Level 3 designation for eight months
United Nations convenes the first round of peace talks involving the Government of the Syrian Arab Republic and the Syrian National Council in Geneva	1 Jan	
	Feb	UNICEF releases a joint nutrition assessment on the situation of Syrian refugees in Lebanon, revealing malnutrition as a silent, emerging threat
A second round of Geneva talks is held	Feb	
The United Nations Security Council approves Resolution 2139 to ease aid delivery and humanitarian access in the Syrian Arab Republic	Feb	

continued: Timeline

Political/humanitarian events	DATE	UNICEF events
	Mar	UNICEF releases a report on the damage caused to 5.5 million Syrian children living in the Syrian Arab Republic and in neighbouring countries
Lebanon receives its 1-millionth refugee from the Syrian Arab Republic on 3 April 2014	Apr	
The Islamic State refugee crisis begins; 500,000 flee Mosul	Jun	
	Jun	UNICEF, UNHCR, UNESCO and the Centre for Lebanese Studies organized a conference on scaling up quality education provision for Syrian children and children in vulnerable host communities
	Aug	WHO and UNICEF announce completion of the first phase of the biggest polio vaccination campaign ever undertaken in the history of the Middle East. Twenty-five million children under the age of 5 years were reached in seven countries in 37 rounds
The United Nations Security Council approves Resolution 2165 allowing aid convoys to go into rebel-held areas without government approval	July	
	Aug	UNICEF Executive Director renews Level 3 designation for seven months
	Dec	UNICEF airlifted 385 tons of supplies to Qamishli, including nutrition, education, medical care and WASH supplies for at least 100,000 people.
The United Nations Security Council approves Resolution 2191 renewing authorization of aid convoys to go into rebel-held areas without government approval	Dec	

continued: Timeline

Political/humanitarian events	DATE	UNICEF events
2015		
	Jan	UNICEF steps up assistance for Syrian children affected by the bitter winter sweeping through the Middle East
	Jan	UNICEF Executive Director renews Level 3 designation for seven months
	4 Feb	UNICEF received approval to import WASH supplies and non-food items through the Nusaybin/Qamishli crossing
The United Nations Security Council holds emergency consultations on Yarmouk—a Palestinian refugee camp on the outskirts of Damascus—that has been besieged by the Government for two years and was overtaken by the Islamic State in early April.	Apr	
	May	UNICEF publication <i>Curriculum, accreditation and certification for Syrian children in Syria, Lebanon, Turkey, Jordan, Iraq and Egypt</i> released
	Jun	UNICEF unable to send water treatment supplies to Deir ez-Zor and Raqqa Governorates, owing to the difficulty of delivering humanitarian supplies through areas controlled by the Islamic State
The United Nations Security Council receives the briefing that the Syrian Arab Republic “bears unflinching witness to the urgent need to find a political settlement to this ruinous conflict”	Jul	
	Jul	UNICEF releases a report highlighting the increasing number of children pushed into exploitation in the labour market as a consequence of the conflict and humanitarian crisis in the Syrian Arab Republic

APPENDIX 8: UNICEF'S RESPONSE BY COUNTRY

INTRODUCTION

This appendix describes highlights of programme implementation for each of the individual country offices included in the scope of the evaluation, to provide a broad overview of UNICEF's sectoral response to the Syria crisis and how it changed over time.

Ten common indicators (*see Table 1*) covering the four programme sectors with focus on the evaluation flagship areas (psychosocial support, access to education, immunization and water supply) were chosen to highlight programme implementation, because these are among the common indicators included in UNICEF regional dashboard data and were used most consistently across years, programmes and countries in the region. Data were extracted from internal UNICEF dashboard datasets for 2013 and 2014 and a descriptive analysis of trends in these indicators, with supporting examples, is presented in this section. The 2012 regional indicator data were not available for inclusion in the report and 2015 indicators (data up to June 2015) are used in the narrative for descriptive purposes only.

Sectoral funding data for the period from 2012 to 2014 were used for the appendix and the supporting data tables for this are available in Appendix 9. The 2015 funding data is not used in the descriptions, considering the timing of the report.

UNICEF's Syria Hub provided guidance on the correct data to use and validated all data sets before they were included in the report.

Table 1: Common regional indicators for each programme sector

Sector	Indicator
Child protection	% of children (and adolescents) benefitting from psychosocial support services and outreach initiatives
	% of children receiving specialized services from qualified front-line workers
Education	% of children supported in basic education
	% of children receiving essential education materials
	% of children and adolescents with access to alternative and non-formal education opportunities
Health	% of children under 5 years reached with polio vaccine
	% of children under 5 years reached with measles vaccine
	% of emergency-affected people supported to access basic health services
WASH	% of emergency-affected people accessing safe water
	% of affected people periodically provided with hygiene promotion messages

UNICEF Jordan

UNICEF Jordan highlights

UNICEF Jordan received US\$307 million between 2012 and 2014, of which 48.7 per cent was programmed for WASH, 29.0 per cent for education, 17.9 per cent for child protection and 4.1 per cent for health.

Child protection in Jordan was significantly scaled up to reach nearly 240,000 children (and adolescents) with psychosocial support services and outreach initiatives in 2014, which surpassed planning targets. The number of locations where children can access integrated psychosocial support, alternative education and life skills training increased through child-friendly spaces and the Makani/My Space Initiative and recreational activities continue to be provided to refugee children in Za'atari camp.

Education programming was implemented in camp and non-camp settings, supporting nearly 128,000 children with basic education in 2014. More than 129,000 children have already been reached in the first six months of 2015, attaining more than 99 per cent of the target planning figure for the year.

Health priorities focused mainly on polio and measles vaccination campaign activities from 2013 onwards and promotion of infant and young child feeding practices in camp settings.

In **WASH**, a significant scale-up in the number of emergency-affected people accessing safe water was achieved between 2012 and 2015, with about 636,000 people receiving access to safe water between January and June 2015 alone. This exceeds the total number reported for 2014 (558,995). UNICEF and partners are constructing a sustainable water network and waste-water collection system in Za'atari

refugee camp to create a sustainable and cost-efficient water and waste management network.

For **child protection**, in August 2012, UNICEF Jordan began providing child friendly-spaces and recreational activities to refugee children in Za'atari camp and a total of 129,433 children were provided with psychosocial support in 2013. The number of children that received psychosocial support and outreach initiatives increased significantly in 2014 to 239,956, an increase of 85.4 per cent over the previous year (see *Figure 1*). The Makani/My Space Initiative was implemented in Jordan in 2015 (see *Box 2*), which provided integrated service provision that included education, life skills building programmes, psychosocial support services and outreach initiatives

Child protection formed 13.7 per cent of the country appeal in 2012 and averaged 13.4 per cent of the country appeal between 2012 and 2014⁴⁸ (see *Figure 2*). The sector received 123.5 per cent of funds requested between 2012 and 2014. A total of US\$6.4 million in funding was received in 2012 for the sector, which increased to US\$21.1 million in 2013 and US\$27.3 million in 2014.

For **education**, UNICEF Jordan established two new schools and 20 child-friendly spaces in Za'atari refugee camp in Jordan to serve 10,000 new students in August 2012.⁴⁹ Access to basic education services was subsequently scaled up to reach 108,046 children in 2013 and 127,857 children in 2014, representing an increase of 18.3 per cent (see *Figure 1*). More than 129,000 children have already been reached in the first six months of 2015, attaining approximately 99 per cent of the target planning figure for the year. A total of eight schools were operational in Za'atari in August 2015, with a further four existing but

⁴⁸ The proportion of each sector appeal of the total UNICEF country appeal is calculated as an average of the cumulative funding figures between 2012-2014, not of the average of the annual percentages themselves.

⁴⁹ United Nations Children's Fund, *Syria's Children: A lost generation? Crisis report March 2011-March 2013*, <www.unicef.org/files/Syria_2yr_Report.pdf>, accessed 20 March 2016.

not yet operational. Four of the operational schools were built using UNICEF resources.⁵⁰

Education formed 41 per cent of the country appeal in 2012 and averaged 31.3 per cent of the country appeal between 2012 and 2014 (see Figure 2). The sector received 85.6 per cent of funds requested between 2012 and 2014. A total of US\$28.4 million in funding was received in 2012 for the sector, US\$25 million was received in 2013 and US\$35.5 million was received in 2014.

For **health**, an infant and young child feeding programme was launched in Za'atari refugee camp in August 2012 to promote breastfeeding, complementary child feeding and counselling for pregnant and lactating women.⁵¹ Polio and measles immunization were prioritized following outbreaks in the region in 2013. Following an outbreak of measles in 2013, a national measles and rubella vaccination campaign was conducted that covered 3,367,762 children and adolescents aged 6 months to 15 years. Between 2013 and 2015, five national and three sub-national polio campaigns were conducted in Jordan, covering more than 1.2 million children under 5 years.⁵² Jordan did not implement activities to support emergency-affected people to access basic health services in 2013 and 2014, which is why the regional indicator is not reflected in Figure 1.

Health formed 4.3 per cent of the country appeal in 2012 and averaged 6.7 per cent of the country appeal between 2012 and 2014 (see Figure 2). The sector received 57 per cent of funds requested between 2012 and 2014.

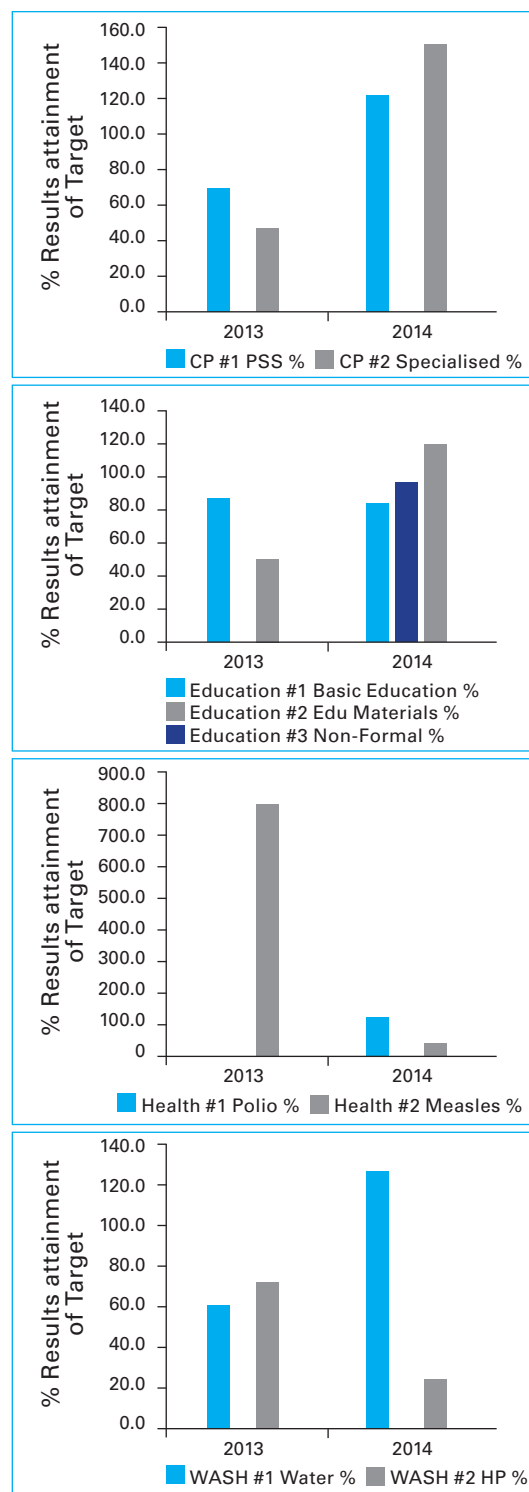
A total of US\$1.2 million in funding was received in 2012 for the sector, US\$8 million was received in 2013 and US\$3.4 million was received in 2014.

⁵⁰ Evaluation feedback notes from UNICEF Jordan.

⁵¹ United Nations Children's Fund, *Syria's Children: A lost generation? Crisis report March 2011-March 2013*, <www.unicef.org/files/Syria_2yr_Report.pdf>, accessed 20 March 2016.

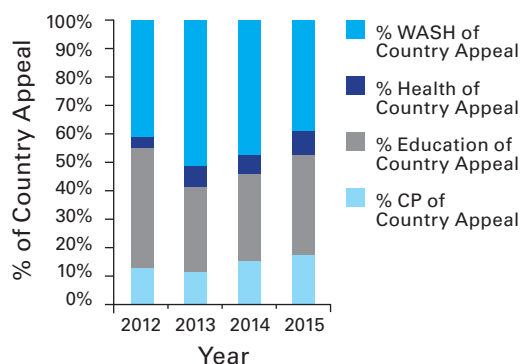
⁵² Evaluation feedback notes from UNICEF Jordan.

FIGURE 1: Jordan: Attainment of targets for select indicators, by sector and year (Syria Crisis Regional Dashboard 2013-2015)



For **WASH**, UNICEF Jordan provided more than 350,000 litres of water to Za’atari camp each day in August 2012 (about 50 litres per person per day). A total of 172,884 people received access to safe water supplies in 2013; this increased by more than three times in 2014, to 558,995 people. A total of 636,122 people received access to safe water between January and June 2015 (see *Figure 1*).

FIGURE 2: Jordan: Country appeal, by sector and year (UNICEF internal data)



UNICEF and partners are currently constructing a sustainable water network and wastewater collection system in Za’atari refugee camp (see *Box 1*), which is expected to be completed in May 2016.

WASH formed 41.1 per cent of the country appeal in 2012 and averaged 48.6 per cent of the country appeal between 2012 and 2014 (see *Figure 2*). The sector received 92.7 per cent of funds requested between 2012 and 2014. A total of US\$19 million in funding was received in 2012 for the sector, US\$79.8 million was received in 2013 and US\$50.6 million was received in 2014.

Box 1: WASH in Za’atari refugee camp⁵³

Za’atari camp water network

Water is currently provided to Za’atari camp using water tankers, which led to concerns over water quality, equal access and cost effectiveness. To address these issues, UNICEF and partners are constructing a water network that is expected to be completed in May 2016.

The cost to provide 1 cubic metre of water will decrease from US\$5.32 using external boreholes to US\$3.73 with camp boreholes to US\$2.36 once the water network is fully operational.

Za’atari camp wastewater collection system

More than 2,200,1,600 cubic metres per day of wastewater were transported 45 kilometres from Za’atari camp through December 2014. The Za’atari Wastewater Treatment Plant was completed in early 2015, and has enabled the processing of much of the waste in Za’atari, significantly reducing the cost and environmental impact of wastewater management.

The cost of managing 1 cubic metre of wastewater in Za’atari camp decreased from US\$3.73 to US\$2.98 with the completion of the plant in early 2015 and is planned to further decrease to US\$1.48 once the wastewater collection system is fully operational.

⁵³ UNICEF Jordan Public and Private Partnerships Division, 2015.

Box 2: Makani/My Space Initiative⁵⁴

The Makani centre offers a comprehensive approach to service provision covering alternative education, life skills building programmes and psychosocial support. Each Makani centre has a community outreach component that is linked with the services being provided at the centre. The centre refers boys and girls to other specialized services such as formal education and case management for child protection and GBV.

Makani supports the engagement of local networks of partners to facilitate best-in-class thinking, practices and applications necessary to enable and expedite systemic, sustainable change. This is done by creating opportunities for children and young people with unique insight into the challenges that affect their communities to team up with local experts to develop creative and innovative solutions to those challenges.

The introduction of this approach in 2015 is based on the lessons learned from child protection and education emergency response supported by UNICEF in Jordan in 2013 and 2014. The sector-based interventions were expensive and poorly coordinated. In several cases, UNICEF had different agreements with the same partner, accentuating the silo approach that was used to deal with children's needs. The Makani comprehensive approach offers well-coordinated and cost-effective multi-sectoral services to vulnerable girls and boys in order for them to reach their full potential.

UNICEF Lebanon

UNICEF Lebanon highlights

UNICEF Lebanon received US\$297 million between 2012 and 2014, of which 31.7 per cent was programmed for education, 24.9 per cent was programmed for WASH, 23.1 per cent was programmed for child protection and 12.9 per cent was programmed for health.

Child protection programming in Lebanon was expanded in 2014 to reach more than 380,000 children (and adolescents) with psychosocial support services and outreach initiatives and surpassed planning targets. Communities with the highest concentration of registered refugees were targeted through community centres, schools, refugee registration centres, children's homes and informal tented settlements (ITS).

Education programming supported more than 61,000 children with basic education in 2014, and significantly expanded to reach more than 113,000 children with basic education in the first six months of 2015.

Health programming supported the Ministry of Health and partners with medical kits and supplies in 2012, and priorities shifted to polio and measles vaccination campaign activities from 2013 onwards with results surpassing planning assumptions in 2014.

WASH programming supported a significant scale-up in the number of emergency-affected people accessing safe water in 2014, with more than 1.5 million people receiving access to safe water. This scale-up was paralleled by a nearly doubling of WASH funding between 2013 and 2014.

⁵⁴ United Nations Children's Fund, 'Makani (My Space) initiative to expand learning opportunities for vulnerable children in Jordan', UNICEF Jordan, Zarqa, 12 March 2015, <www.unicef.org/jordan/media_10093.html>, accessed 20 March 2016.

For **child protection**, UNICEF Lebanon supported 20 child-friendly spaces in 2012 benefitting 3,700 children and 1,800 care-givers. Psychosocial support activities were significantly expanded in 2013 to 182 targeted communities with the highest concentration of registered refugees through community centres, schools, refugee registration centres, children’s homes and ITS. A total of 296,760 children received psychosocial support in 2013; this expanded to 383,669 children in 2014, representing an increase of 29.3 per cent over the previous year (see Figure 3).

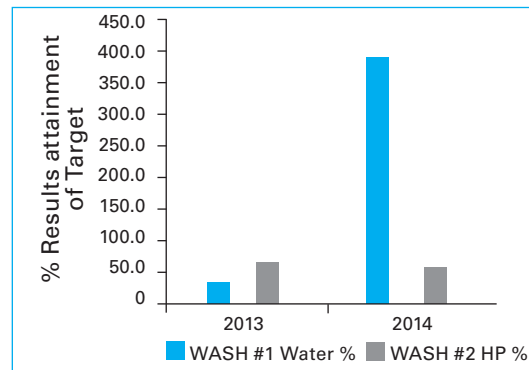
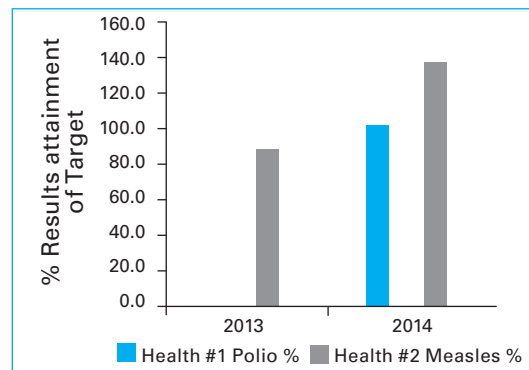
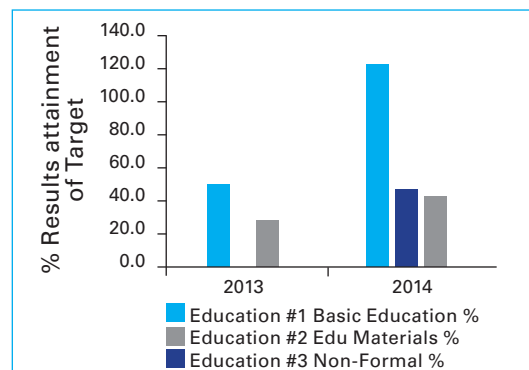
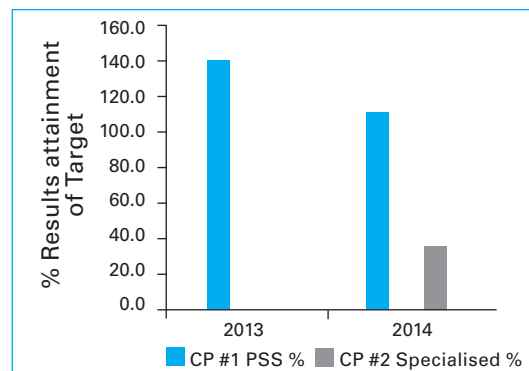
Child protection formed 21.1 per cent of the country appeal in 2012 and averaged 13.3 per cent of the country appeal between 2012 and 2014 (see Figure 4). The sector received 120.9 per cent of funds requested between 2012 and 2014. A total of US\$2.2 million in funding was received in 2012 for the sector, US\$38.5 million was received in 2013 and US\$27.9 million was received in 2014.

For **education**, more than 2,000 children received educational support through UNICEF-supported summer camps and other educational activities in 2012. A total of 66,679 children were provided access to basic education services in 2013, which decreased to 61,490 children in 2014 (see Figure 3).

Education formed 51.5 per cent of the country appeal in 2012 and averaged 41.8 per cent of the country appeal between 2012 and 2014 (see Figure 4). The sector received 52.5 per cent of funds requested between 2012 and 2014. A total of US\$1.9 million in funding was received in 2012 for the sector, US\$35.2 million was received in 2013 and US\$57 million was received in 2014.

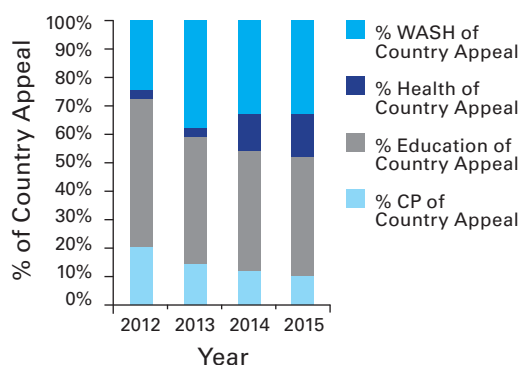
For **health**, in 2012, UNICEF supported the provision of medical kits and supplies to NGO partner clinics. In 2013, health priorities shifted to polio and measles immunization during which time 812,694 children were vaccinated against polio and 711,012 children were vaccinated against measles (see Figure 3).

FIGURE 3: Lebanon: Attainment of targets for select indicators, by sector and year (Syria Crisis Regional Dashboard 2013-2015)



Health formed 2.5 per cent of the country appeal in 2012 and averaged 9.3 per cent of the country appeal between 2012 and 2014 (see Figure 4). The sector received 95.7 per cent of funds requested between 2012 and 2014. A total of US\$680,000 in funding was received in 2012 for the sector, US\$12.7 million was received in 2013 and US\$25 million was received in 2014.

FIGURE 4: Lebanon: Country appeal, by sector and year (UNICEF internal data)



For **WASH**, UNICEF Lebanon provided safe water supplies to 66,303 people in 2013. A significant scale-up of programming provided safe water to more than 1.5 million people in 2014, representing an expansion by a factor of nearly 23 times (see Figure 3). A near doubling of funding for WASH between 2013 and 2014 paralleled this scale-up.

WASH formed 25 per cent of the country appeal in 2012 and averaged 32.8 per cent of the country appeal between 2012 and 2014 (see Figure 4). The sector received 52.6 per cent of funds requested between 2012 and 2014. A total of US\$4.6 million in funding was received in 2012 for the sector, US\$23.6 million was received in 2013 and US\$45.8 million was received in 2014.

UNICEF Syrian Arab Republic

UNICEF Syrian Arab Republic highlights

UNICEF Syrian Arab Republic received US\$297 million between 2012 and 2014, of which 31 per cent was programmed for WASH, 28.3 per cent was programmed for health, 18.4 per cent was programmed for education and 12.2 per cent was programmed for child protection.

Child protection programming in the Syrian Arab Republic has been more limited in scale than in neighbouring countries in the region, with 127,600 children (and adolescents) receiving psychosocial support services and outreach initiatives in 2014. In the first six months of 2015 alone, 214,000 children received psychosocial support.

Education programming in the Syrian Arab Republic supported more than 2.8 million children with access to essential education materials in 2014, which was 98 per cent of the target and nearly three times more than the number of children reached in 2013.

Health programming provided basic health services via fixed centers and mobile health teams to more than 640,000 children in 2014 and more than 450,000 children have been reached in the first six months of 2015 alone. Large-scale polio and measles vaccination campaigns were also supported across the country between 2012 and 2015.

WASH programming supported more than 3.2 million people to access safe water in 2013. Subsequent significant scale-up in programming was achieved with more than 4.7 million people reached in the first six months of 2015 alone.

For **child protection**, UNICEF Syrian Arab Republic supported the provision of psychosocial support services to more than 145,000 children (and adolescents) in 2013 through child-friendly spaces and mobile units. The Syrian Arab Republic did not implement

activities to support children to receive specialized services from qualified front-line workers in 2013 and 2014, so the regional indicator is not recorded in Figure 5.

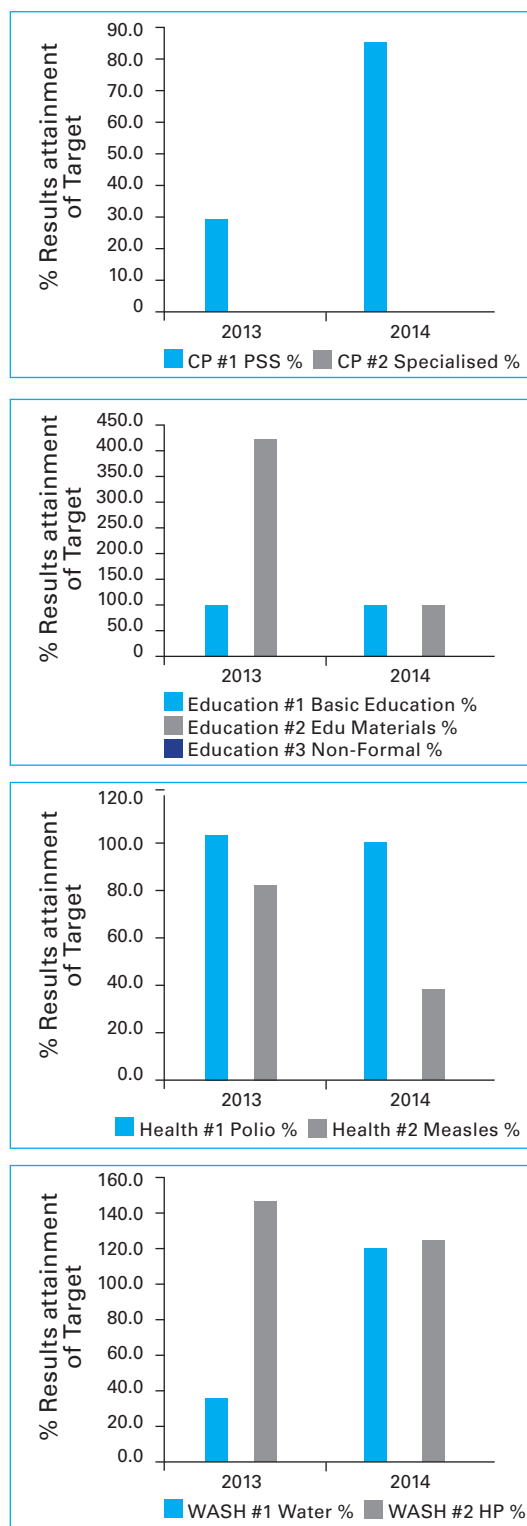
Child protection formed 17.6 per cent of the country appeal in 2012 and averaged 13.2 per cent of the country appeal between 2012 and 2014 (see Figure 6). The sector received 79.2 per cent of funds requested between 2012 and 2014. A total of US\$3.8 million in funding was received in 2012 for the sector, US\$13.5 million was received in 2013 and US\$19 million was received in 2014.⁵⁵

For **education**, nearly 1 million children were provided access to essential education materials in 2013, which increased significantly to more than 2.8 million children in 2014, representing an increase of nearly three times (see Figure 5). The Syrian Arab Republic did not implement activities to support children to access basic education in 2013 and 2014, so the regional indicator is not recorded in Figure 5.

Education formed 22.7 per cent of the country appeal in 2012 and averaged 35.7 per cent of the country appeal between 2012 and 2014 (see Figure 6). The sector received 43.9 per cent of funds requested between 2012 and 2014. A total of US\$1.3 million in funding was received in 2012 for the sector, US\$31.9 million was received in 2013 and US\$21.4 million was received in 2014.

For **health**, UNICEF supported fixed centres and 47 mobile health teams across the Syrian Arab Republic to reach approximately 340,000 children with medical check-ups, treatment and referrals in 2013, while 641,000 children were provided essential medical services in 2014, representing an increase of 88.5 per cent.⁵⁶ Nearly 2.3 million children received polio vaccination in 2013, which increased to more than 2.9 million children in 2014 and 2015 (through June, exceeding the total target for 2015). A total of 1.3 million, 850,000 and 1.62 million children were vaccinated against measles in

FIGURE 5: Syrian Arab Republic: Attainment of targets for select indicators, by sector and year



⁵⁵ In 2013 and 2014, the child protection programme included an output related to non-food items, which received considerable funding.

⁵⁶ UNICEF, Syrian Arab Republic, 2015.

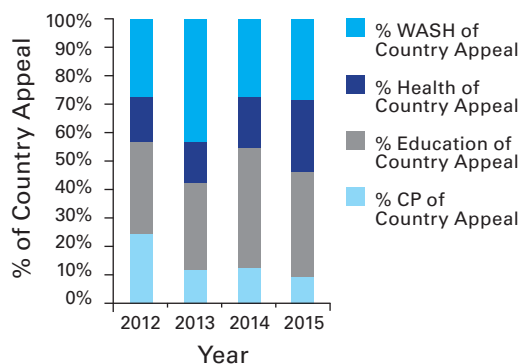
the Syrian Arab Republic in 2013, 2014 and 2015 (June), respectively (see Figure 5).

Health (including nutrition) formed 10.8 per cent of the country appeal in 2012 and averaged 16.2 per cent of the country appeal between 2012 and 2014 (see Figure 6). The sector received 149.1 per cent of funds requested between 2012 and 2014. A total of US\$2.4 million in funding was received in 2012 for the sector, US\$30 million was received in 2013 and US\$51.6 million was received in 2014.

For **WASH**, more than 3.2 million people were provided with access to safe water supplies in 2013, with significant scale-up to reach more than 4.7 million people in the first six months of 2015 alone, surpassing target planning figures for the whole year (see Figure 5). Approximately 15 million people across the Syrian Arab Republic were provided with sodium hypochlorite for disinfection of drinking water in 2014.⁵⁷

WASH formed 19.3 per cent of the country appeal in 2012 and averaged 13.2 per cent of the country appeal between 2012 and 2014 (see Figure 6). The sector received 86.1 per cent of funds requested between 2012 and 2014. A total of US\$8.5 million in funding was received in 2012 for the sector, US\$55.5 million in 2013 and US\$28.2 million in 2014.

FIGURE 6: Syrian Arab Republic: Country appeal, by sector and year (UNICEF internal data)



⁵⁷ UNICEF Syrian Arab Republic, 2015.

UNICEF Turkey

UNICEF Turkey highlights

UNICEF Turkey received US\$54.5 million between 2012 and 2014, of which 61.4 per cent was programmed for education, 22.8 per cent was programmed for child protection and 11.7 per cent was programmed for health.

Child protection programming in Turkey has been more limited in scale than other refugee hosting countries, with 37,542 children (and adolescents) receiving psychosocial support services and outreach initiatives in 2014 (approximately 36 per cent of target numbers).

Education programming formed the most significant part of UNICEF funding between 2012 and 2014, with more than 107,000 children receiving access to basic education and about 113,000 children receiving essential education materials (approximately 54 per cent and 57 per cent of respective target numbers) in 2014.

Health programming provided polio vaccination to more than 1.1 million children in 2014 (approximately 74 per cent of the target population) but no results are available for vaccination activities in 2013 or 2015.

For **child protection**, UNICEF Turkey was not granted permission to undertake in-depth needs assessment of child protection services in 2012. In 2013, 19,704 children were provided with psychosocial support, which increased to 37,542 in 2014, representing an increase of 91.1 per cent (see Figure 7).

Child protection formed 50 per cent of the country appeal in 2012 and averaged 29.7 per cent of the country appeal between 2012 and 2014 (see Figure 8). The sector received 39.8 per cent of funds requested between 2012 and 2014. A total of US\$740,000 in funding was received in 2012 for the sector, US\$6.4 million

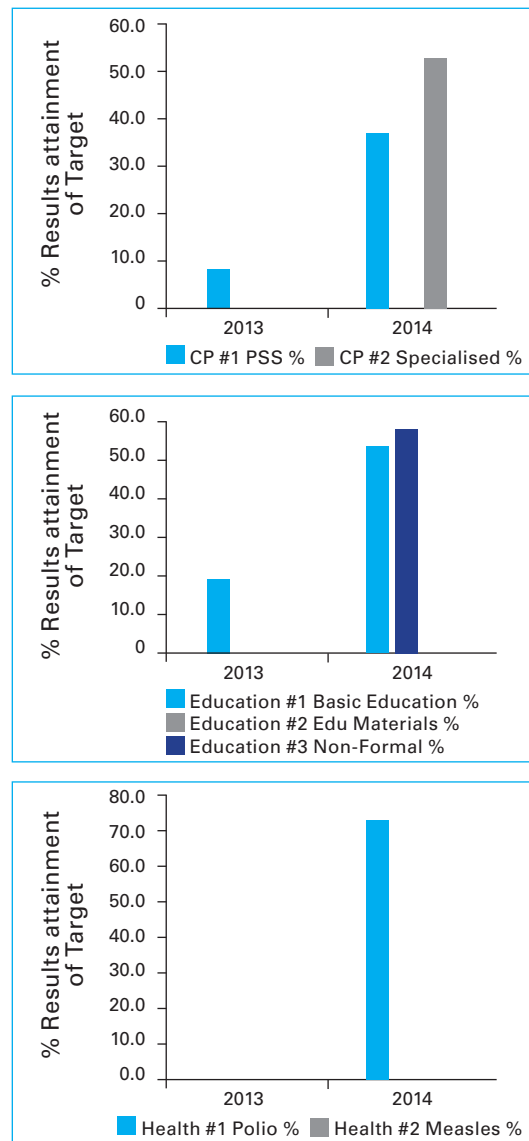
was received in 2013 and US\$5.3 million was received in 2014.

For **education**, in 2012, pre-school, primary and secondary education was provided for more than 4,500 children. In 2013, a Memorandum of Understanding was signed between UNICEF and the Ministry of National Education to implement education activities in camps and in non-camp settings for children. A total of 75,711 children were subsequently provided with basic education services in 2013, increasing to 107,714 in 2014 (see Figure 7). Turkey did not implement activities to support children and adolescents with access to alternative and non-formal education opportunities in 2013 and 2014, so the regional indicator is not recorded in Figure 7.

Education formed 50 per cent of the country appeal in 2012 and averaged 57.9 per cent of the country appeal between 2012 and 2014 (see Figure 8). The sector received 54.9 per cent of funds requested between 2012 and 2014. A total of US\$740,000 in funding was received in 2012 for the sector, US\$10.6 million was received in 2013 and US\$22.1 million was received in 2014.

For **health**, more than 1.1 million children were vaccinated against polio in Turkey in 2014, reaching 73.8 per cent of the target population (see Figure 7). Polio vaccination was not part of the country plan in 2013 or 2015 and measles vaccination was not part of the country plan in 2015.⁵⁸ Turkey did not implement activities to support access of emergency-affected people to basic health services in 2013 and 2014, so the regional indicator is not recorded in Figure 7. No health programming was implemented by UNICEF Turkey in 2015.⁵⁹

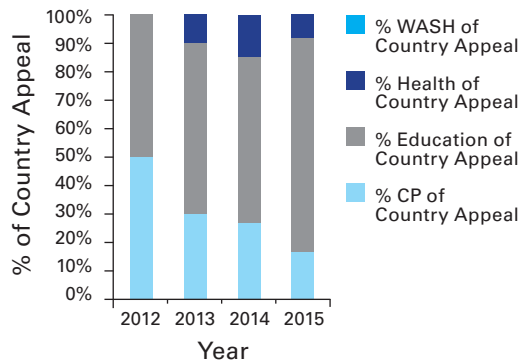
FIGURE 7: Turkey: Attainment of targets for select indicators, by sector and year (Syria Crisis Regional Dashboard 2013-2015)



⁵⁸ UNICEF Turkey, 2015.

⁵⁹ Ibid.

FIGURE 8: Turkey: Country appeal, by sector and year (UNICEF internal data)



Health was not part of the country appeal in 2012 and averaged 12.4 per cent of the country appeal in 2013 and 2014 (see Figure 8). The sector received 48.7 per cent of funds requested in 2013 and 2014. No funding was received in 2012 for the sector, US\$1.4 million was received in 2013 and US\$5 million was received in 2014.

Turkey did not implement WASH activities in 2013 and 2014, which is why no regional WASH indicators are reflected in Figure 7.

APPENDIX 9: DATA TABLES OF UNICEF COUNTRY RESPONSE

FUNDING

Table 1: UNICEF funding received, by country, by year (US\$ Millions)

Country	2012	2013	2014	2015 (June)	Total
Jordan	54.90	135.18	116.87	101.10	408.05
Lebanon	9.39	121.94	165.75	136.52	433.60
Syrian Arab Republic	17.85	154.49	124.81	97.56	394.71
Turkey	0.99	21.07	32.47	10.66	65.19
Total	83.13	432.68	439.90	345.84	1,301.55

Table 2. UNICEF Jordan funding, by sector, by year (US\$)

	2012	2013	2014	2015 (June)	Total
Total UNICEF Appeal	40,000,000	150,880,000	140,720,000	179,510,000	511,110,000
UNICEF Funding Received	54,900,000	135,180,000	116,870,000	101,100,100	408,050,100
CP UNICEF Appeal	5,480,000	16,850,000	22,090,000	24,950,000	69,370,000
CP UNICEF Funding Received	6,400,000	21,140,000	27,320,000	18,050,000	72,910,000
Education UNICEF Appeal	16,380,000	45,020,000	42,460,000	50,790,000	154,650,000
Education UNICEF Funding Received	28,390,000	24,970,000	35,520,000	20,110,000	108,990,000
Health UNICEF Appeal	1,710,000	10,650,000	9,770,000	11,040,000	33,170,000
Health UNICEF Funding Received	1,160,000	8,060,000	3,390,000	3,150,000	15,760,000
WASH UNICEF Appeal	16,420,000	78,440,000	66,410,000	56,030,000	217,300,000
WASH UNICEF Funding Received	18,950,000	79,830,000	50,640,000	40,510,000	189,930,000

Table 3. UNICEF Lebanon funding, by sector, by year (US\$)

	2012	2013	2014	2015 (June)	Total
Total UNICEF Appeal	17,140,000	125,420,000	286,130,000	289,020,000	717,710,000
UNICEF Funding Received	9,390,000	121,940,000	165,750,000	136,520,000	433,600,000
CP UNICEF Appeal	3,610,000	18,225,785	35,000,000	29,157,898	85,993,683
CP UNICEF Funding Received	2,240,000	38,540,000	27,940,000	19,830,000	88,550,000
Education UNICEF Appeal	8,820,000	55,660,000	114,830,000	116,060,000	295,370,000
Education UNICEF Funding Received	1,880,000	35,170,000	57,050,000	50,320,000	144,420,000
Health UNICEF Appeal	430,000	3,450,000	36,190,000	42,860,000	82,930,000
Health UNICEF Funding Received	680,000	12,700,000	24,950,000	13,310,000	51,640,000
WASH UNICEF Appeal	4,280,000	46,370,000	90,100,000	90,850,000	231,600,000
WASH UNICEF Funding Received	4,600,000	23,590,000	45,840,000	38,630,000	112,660,000

Table 4. UNICEF Syrian Arab Republic funding, by sector, by year (US\$)

	2012	2013	2014	2015 (June)	Total
Total UNICEF Appeal	44,090,000	110,460,000	193,790,000	279,270,000	627,610,000
UNICEF Funding Received	17,850,000	154,490,000	124,810,000	97,560,000	394,710,000
CP UNICEF Appeal	7,750,000	13,100,000	25,000,000	22,530,000	68,380,000
CP UNICEF Funding Received	3,750,000	13,520,000	19,030,000	12,640,000	48,940,000
Education UNICEF Appeal	10,000,000	33,440,000	81,020,000	92,040,000	216,500,000
Education UNICEF Funding Received	1,300,000	31,940,000	21,400,000	18,060,000	72,700,000
Health UNICEF Appeal	4,750,000	15,940,000	35,670,000	62,280,000	118,640,000
Health UNICEF Funding Received	2,380,000	30,090,000	51,610,000	18,000,000	102,080,000
WASH UNICEF Appeal	8,500,000	46,490,000	52,100,000	72,020,000	179,110,000
WASH UNICEF Funding Received	8,500,000	55,470,000	28,200,000	29,870,000	122,040,000

Table 5. UNICEF Turkey Funding, by sector, by year (US\$)

	2012	2013	2014	2015 (June)	Total
Total UNICEF Appeal	6,420,000	33,900,000	64,960,000	60,350,000	165,630,000
UNICEF Funding Received	990,000	21,070,000	32,470,000	29,720,000	84,250,000
CP UNICEF Appeal	3,210,000	10,410,000	17,650,000	9,580,000	40,850,000
CP UNICEF Funding Received	740,000	6,390,000	5,320,000	5,480,000	17,930,000
Education UNICEF Appeal	3,210,000	20,490,000	37,250,000	42,000,000	102,950,000
Education UNICEF Funding Received	740,000	10,590,000	22,130,000	16,840,000	50,300,000
Health UNICEF Appeal		3,000,000	10,070,000	5,270,000	18,340,000
Health UNICEF Funding Received		1,350,000	5,020,000	0	6,370,000
WASH UNICEF Appeal					
WASH UNICEF Funding Received					

Table 6. UNICEF Jordan funding received as percentage of appeal, by sector, by year

	2012	2013	2014	2015 (June)	Total
% CP Funded	116.8%	125.5%	123.7%	72.3%	105.1%
% Education Funded	173.3%	55.5%	83.7%	39.6%	70.5%
% Health Funded	67.8%	75.7%	34.7%	28.5%	47.5%
% WASH Funded	115.4%	101.8%	76.3%	72.3%	87.4%
CP as % of UNICEF Appeal Funded	13.7%	11.2%	15.7%	13.9%	13.6%
Education as % of UNICEF Appeal Funded	41.0%	29.8%	30.2%	28.3%	30.3%
Health as % of UNICEF Appeal Funded	4.3%	7.1%	6.9%	6.2%	6.5%
WASH as % of UNICEF Appeal Funded	41.1%	52.0%	47.2%	31.2%	42.5%
% CP Funded of Country Appeal Funded	11.7%	15.6%	23.4%	17.9%	17.9%
% Education Funded of Country Appeal Funded	51.7%	18.5%	30.4%	19.9%	26.7%
% Health Funded of Country Appeal Funded	2.1%	6.0%	2.9%	3.1%	3.9%
% WASH Funded of Country Appeal Funded	34.5%	59.1%	43.3%	40.1%	46.5%

Table 7. UNICEF Lebanon funding received as percentage of appeal, by sector, by year

	2012	2013	2014	2015 (June)	Total
% CP Funded	62.0%	211.5%	79.8%	68.0%	103.0%
% Education Funded	21.3%	63.2%	49.7%	43.4%	48.9%
% Health Funded	158.1%	368.1%	68.9%	31.1%	62.3%
% WASH Funded	107.5%	50.9%	50.9%	42.5%	48.6%
CP as % of UNICEF Appeal Funded	21.1%	14.5%	12.2%	10.1%	12.0%
Education as % of UNICEF Appeal Funded	51.5%	44.4%	40.1%	40.2%	41.2%
Health as % of UNICEF Appeal Funded	2.5%	2.8%	12.6%	14.8%	11.6%
WASH as % of UNICEF Appeal Funded	25.0%	37.0%	31.5%	31.4%	32.3%
% CP Funded of Country Appeal Funded	23.9%	31.6%	16.9%	14.5%	20.4%
% Education Funded of Country Appeal Funded	20.0%	28.8%	34.4%	36.9%	33.3%
% Health Funded of Country Appeal Funded	7.2%	10.4%	15.1%	9.7%	11.9%
% WASH Funded of Country Appeal Funded	49.0%	19.3%	27.7%	28.3%	26.0%

Table 8. UNICEF Syrian Arab Republic funding received as percentage of appeal, by sector, by year

	2012	2013	2014	2015 (June)	Total
% CP Funded	48.4%	103.2%	90.1%	56.1%	71.6%
% Education Funded	13.0%	95.5%	26.4%	19.6%	33.6%
% Health Funded	50.1%	188.8%	144.7%	28.9%	86.0%
% WASH Funded	100.0%	119.3%	54.1%	41.5%	68.1%
CP as % of UNICEF Appeal Funded	17.6%	11.9%	12.9%	8.1%	10.9%
Education as % of UNICEF Appeal Funded	22.7%	30.3%	41.8%	33.0%	34.5%
Health as % of UNICEF Appeal Funded	10.8%	14.4%	18.4%	22.3%	18.9%
WASH as % of UNICEF Appeal Funded	19.3%	42.1%	26.9%	25.8%	28.5%
% CP Funded of Country Appeal Funded	21.0%	8.8%	18.1%	13.0%	12.4%
% Education Funded of Country Appeal Funded	7.3%	20.7%	17.1%	18.5%	18.4%
% Health Funded of Country Appeal Funded	13.3%	19.5%	41.4%	18.5%	25.9%
% WASH Funded of Country Appeal Funded	47.6%	35.9%	22.6%	30.6%	30.9%

Table 9. UNICEF Turkey funding received as percentage of appeal, by sector, by year

	2012	2013	2014	2015 (June)	Total
% CP Funded	23.1%	61.4%	30.1%	57.2%	43.9%
% Education Funded	23.1%	51.7%	59.4%	40.1%	48.9%
% Health Funded	-	45.0%	49.9%	0.0%	34.7%
% WASH Funded	-	-	-	-	-
% CP of Country Appeal	50.0%	30.7%	27.2%	15.9%	24.7%
% Education of Country Appeal	50.0%	60.4%	57.3%	69.6%	62.2%
% Health of Country Appeal	0.0%	8.8%	15.5%	8.7%	11.1%
% WASH of Country Appeal	0.0%	0.0%	0.0%	0.0%	0.0%
% CP Funded of Country Appeal Funded	74.7%	30.3%	16.4%	18.4%	21.3%
% Education Funded of Country Appeal Funded	74.7%	50.3%	68.2%	56.7%	59.7%
% Health Funded of Country Appeal Funded	0.0%	6.4%	15.5%	0.0%	7.6%
% WASH Funded of Country Appeal Funded	0.0%	0.0%	0.0%	0.0%	0.0%

IMPLEMENTING PARTNERS

Table 10. Number of UNICEF implementing partners, by country, by year

Country	2012	2013	2014	2015 (June)
Jordan	27	38	36	27
Lebanon	36	55	68	42
Syrian Arab Republic	29	47	66	49
Turkey		2	5	4
Total	92	142	175	122

INDICATOR RESULTS AND TARGETS

Table 11. UNICEF Jordan common indicator results and targets, by programme area

Indicators	2013	2014	2015 (June)
CP #1 PSS Results	129,433	239,956	11,586
CP #1 PSS Targets	183,280	195,900	203,264
CP #1 PSS %	70.62%	122.49%	5.70%
CP #2 Specialised Results	1593	23,853	3,298
CP #2 Specialised Targets	3,400	15,747	13,785
CP #2 Specialised %	46.85%	151.48%	23.92%
Edu #1 Basic Education Results	108,046	127,857	129,058
Edu #1 Basic Education Targets	120,000	150,000	130,000
Edu #1 Basic Education %	90.04%	85.24%	99.28%
Edu #2 Edu Materials Results		130,000	76,963
Edu #2 Edu Materials Targets		130,000	160,000
Edu #2 Edu Materials %		100.00%	48%
Edu #3 Non-formal Results	4,161	33,553	28,932
Edu #3 Non-formal Targets	8,000	27,600	88,000
Edu #3 Non-Formal %	52.01%	121.57%	32.88%
Health #1 Polio Results		1,223,872	404,394
Health #1 Polio Targets		949,163	248,970
Health #1 Polio %		128.94%	162.43%
Health #2 Measles Results	3,979,101	110,311	14,174
Health #2 Measles Targets	500,000	242,600	34,000
Health #2 Measles %	795.82%	45.47%	41.69%
WASH #1 Water Results	172,884	558,995	636,122
WASH #1 Water Targets	280,000	440,000	1,840,000
WASH #1 Water %	61.74%	127.04%	34.57%
WASH #2 HP Results	201,920	108,995	48,208
WASH #2 HP Targets	280,000	440,000	305,000
WASH #2 HP %	72.11%	24.77%	15.81%

Table 12. UNICEF Lebanon common indicator results and targets, by programme area

Indicators	2013	2014	2015 (June)
CP #1 PSS Results	296,760	383,669	61,589
CP #1 PSS Targets	213,860	366,000	140,000
CP #1 PSS %	138.76%	104.83%	43.99%
CP #2 Specialised Results		2,318	867
CP #2 Specialised Targets		6,000	800
CP #2 Specialised %		38.63%	108.38%
Edu #1 Basic Education Results	66,679	61,490	112,999
Edu #1 Basic Education Targets	133,515	50,000	87,150
Edu #1 Basic Education %	49.94%	122.98%	129.66%
Edu #2 Edu Materials Results		116,526	251,804
Edu #2 Edu Materials Targets		250,000	290,000
Edu #2 Edu Materials %		46.61%	87%
Edu #3 Non-formal Results	36,420	66,778	16,242
Edu #3 Non-formal Targets	133,515	155,000	90,000
Edu #3 Non-Formal %	27.28%	43.08%	18.05%
Health #1 Polio Results	812,694	673,899	806,579
Health #1 Polio Targets		650,000	1,799,982
Health #1 Polio %		103.68%	44.81%
Health #2 Measles Results	711,012	1,165,871	105,652
Health #2 Measles Targets	800,000	840,000	150,000
Health #2 Measles %	88.88%	138.79%	70.43%
Health #3 Services Results		431,855	811,815
Health #3 Services Targets		800,000	792,500
Health #3 Services %		53.98%	102%
WASH #1 Water Results	66,303	1,510,562	283,146
WASH #1 Water Targets	181,000	385,726	592,614
WASH #1 Water %	36.63%	391.62%	47.78%
WASH #2 HP Targets	77,614	395,563	407,285
WASH #2 HP Results	123,975	713,000	773,326
WASH #2 HP %	62.60%	55.48%	52.67%

Table 13. UNICEF Syrian Arab Republic common indicator results and targets, by programme area

Indicator	2013	2014	2015 (June)
CP #1 PSS Results	145,220	127,600	214,000
CP #1 PSS Targets	500,000	150,000	385,000
CP #1 PSS %	29.04%	85.10%	55.58%
Edu #2 Edu Materials Results	999,680	2,842,636	47,477
Edu #2 Edu Materials Targets	1,000,000	2,900,000	3,000,000
Edu #2 Edu Materials %	99.97%	98.02%	1.58%
Edu #3 Non-formal Results	42,403	360,534	219,906
Edu #3 Non-formal Targets	10,000	360,000	1,600,000
Edu #3 Non-Formal %	424.03%	100.15%	13.74%
Health #1 Polio Results	2,248,448	2,953,069	2,989,659
Health #1 Polio Targets	2,000,000	2,910,682	2,900,000
Health #1 Polio %	112.42%	101.46%	103.09%
Health #2 Measles Results	1,299,266	845,443	1,619,630
Health #2 Measles Targets	1,600,000	2,200,000	2,670,937
Health #2 Measles %	81.20%	38.43%	60.64%
Health #3 Services Results	340,000	641,000	452,526
Health #3 Services Targets	800,000	870,000	1,300,000
Health #3 Services %	42.50%	73.68%	35%
WASH #1 Water Results	3,239,746	2,421,727	4,723,122
WASH #1 Water Targets	9,500,000	2,000,000	3,500,000
WASH #1 Water %	34.10%	121.09%	134.95%
WASH #2 HP Results	734,140	887,385	760,686
WASH #2 HP Targets	500,000	700,000	2,340,000
WASH #2 HP %	146.83%	126.77%	32.51%

Table 14. UNICEF Turkey common indicator results and targets, by programme area

Indicator	2013	2014	2015 (June)
CP #1 PSS Results	19,704	37,542	25,570
CP #1 PSS Targets	260,100	103,500	50,000
CP #1 PSS %	7.58%	36.27%	51.14%
CP #2 Specialised Results		2,714	469
CP #2 Specialised Targets		5,175	2,000
CP #2 Specialised %		52.44%	23.45%
Edu #1 Basic Education Results	75,711	107,714	99,766
Edu #1 Basic Education Targets	382,500	198,329	180,000
Education #1 Basic Education %	19.79%	54.31%	55.43%
Edu #2 Edu Materials Results		112,990	65,724
Edu #2 Edu Materials Targets		198,329	180,000
Education #2 Edu Materials %		56.97%	36.51%
Edu #3 Non-formal Results			0
Edu #3 Non-formal Targets			40,000
Education #3 Non-Formal %			0.00%
Health #1 Polio Results		1,106,935	
Health #1 Polio Targets		1,500,000	
Health #1 Polio %		73.80%	
Health #2 Measles Results	0	0	
Health #2 Measles Targets	107,100	192,920	
Health #2 Measles %	0.00%	0.00%	
Health #3 Services Results			
Health #3 Services Targets			
Health #3 Services %			

APPENDIX 10: FUNDING, IMPLEMENTING PARTNERS AND HUMAN RESOURCES FIGURES

FUNDING

FIGURE 1: Total UNICEF appeal by country per year (US\$ millions)

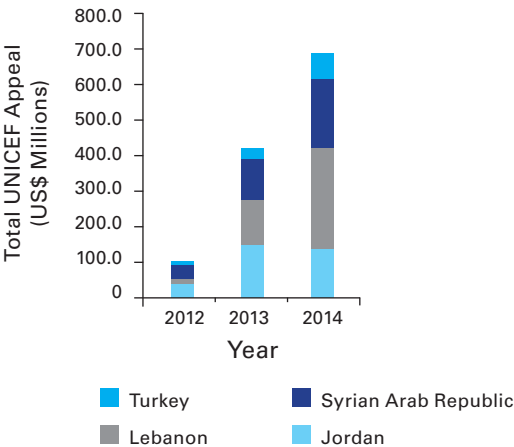


FIGURE 2: Total UNICEF funding received by country per year (US\$ millions)

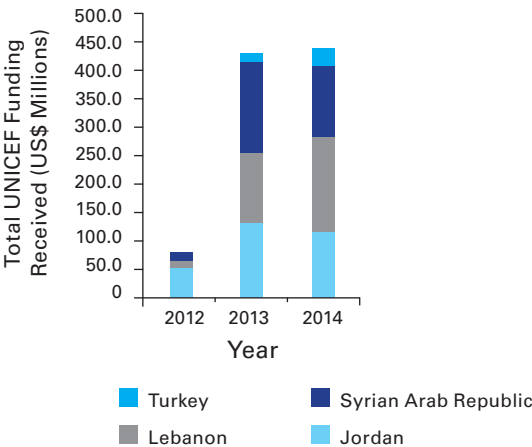


FIGURE 3: Total UNICEF appeal versus funding

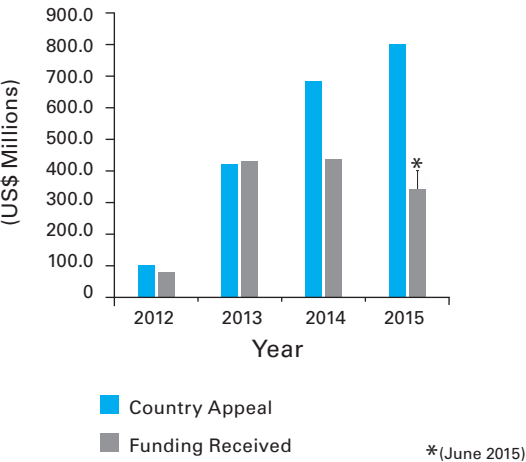
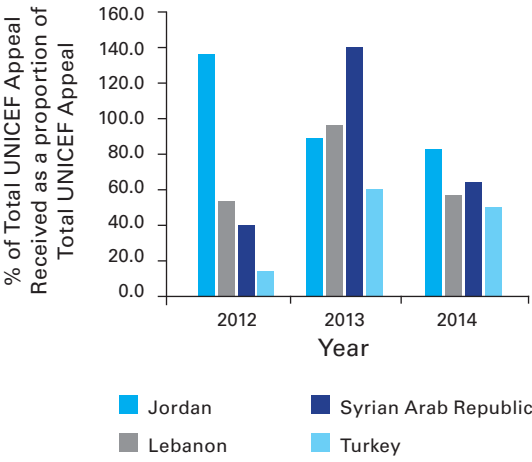


FIGURE 4: Total UNICEF appeal received as a proportion of total UNICEF appeal (%)



IMPLEMENTING PARTNERS

FIGURE 5: Number of implementing partners by country, by year

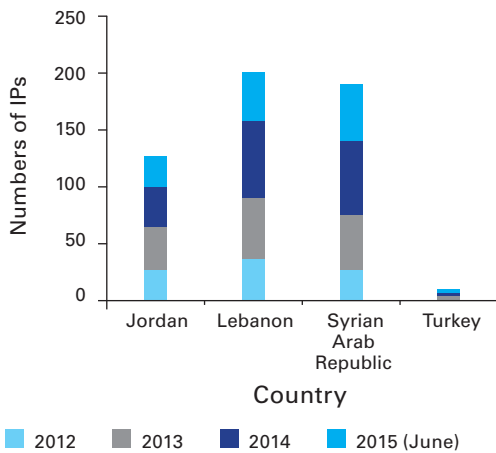
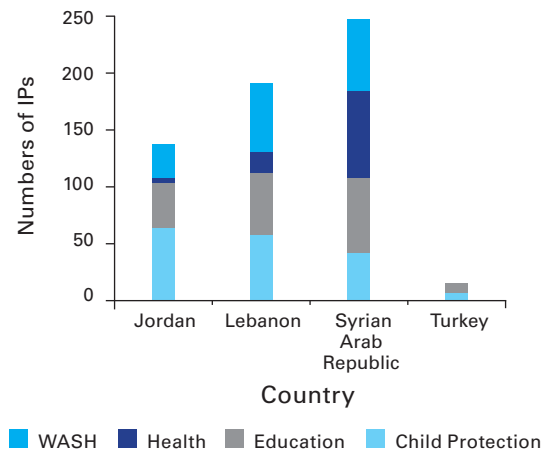


FIGURE 6: Number of implementing partners by country, by programme



FUNDING ALLOCATED TO IMPLEMENTING PARTNERS

FIGURE 7: UNICEF funding allocated to IPs, by country per year (US\$ millions)

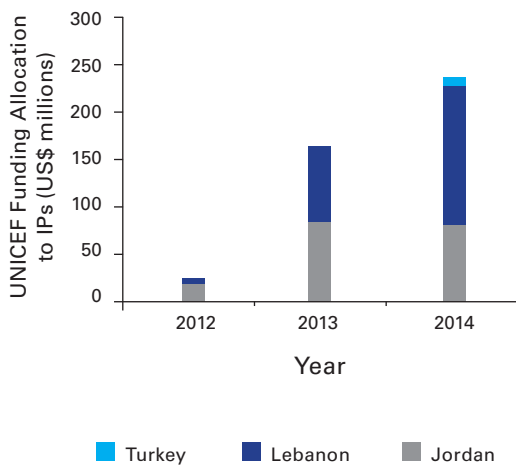
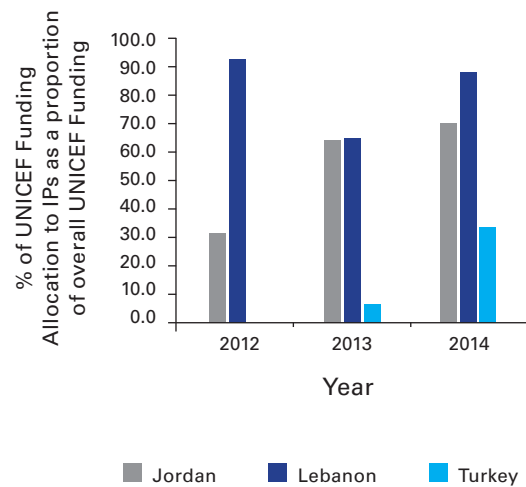


FIGURE 8: UNICEF funding allocated to IPs, by country per year (%)



HUMAN RESOURCES

FIGURE 9: Number of staff deployed by country per year

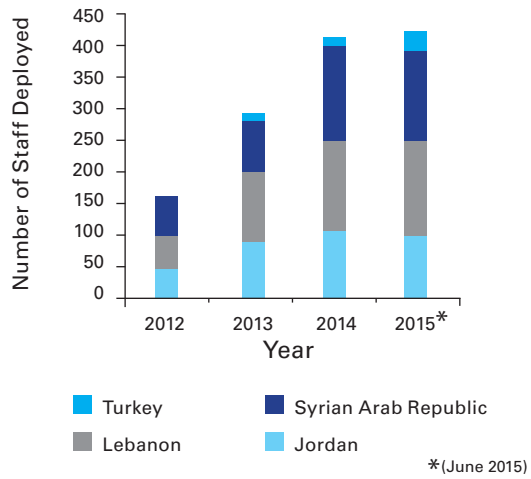
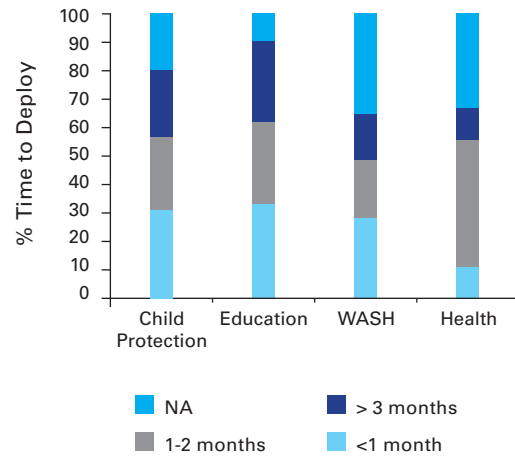


FIGURE 10: Time to fill posts by sector



APPENDIX 11: DETAILED EVALUATION FINDINGS

This appendix presents a summary of data collected for each of the questions included in the terms of reference for the evaluation themes: 1) role and strategy; 2) programme and advocacy response; 3) engagement with others; and 4) internal management and processes. All questions are answered as well as possible, considering the limitations related to the sub-regional scope of the evaluation and the methodology used. This appendix supports the narrative provided in Chapter 4 of the main evaluation report.

UNICEF'S ROLE AND STRATEGY

Did UNICEF establish a relevant and appropriate role?

UNICEF country programmes used the CCCs as a framework for operational planning. Regional management felt that the CCCs needed to be contextualized to the MENA region, considering the number of middle-income settings. Some suggested that it was necessary to produce a document at the start of an emergency operation linking the CCCs, the programming choices and the monitoring mechanism to the particular emergency context.

External informants had mixed views regarding what UNICEF's mandate and role should be. Some suggested that UNICEF should focus more on coordination, management of implementing partners and policy, whereas others requested more hands-on capacity at the field level (mainly implementing partners). Donors emphasised the importance of UNICEF as an 'intermediary', ensuring: 1) coordination to avoid duplication and achieve complementarity; 2) convergence of the humanitarian response; and 3) liaison with the Government.

MRM efforts are being coordinated at the regional level, from Amman, Jordan, with contributions from the country offices. UNICEF staff in the sub-region had differing opinions on the organization's role in the MRM. UNICEF staff working in the Syrian Arab Republic felt

that reporting on grave child rights violations compromised UNICEF's ability to carry out humanitarian programming (implementation) and therefore the organization should reconsider its role. Others, at the sub-regional and Headquarters levels, felt that UNICEF should continue its role in the MRM as part of its human rights and advocacy role. UNICEF management (within the Syrian Arab Republic, MENARO and Headquarters) also emphasised that other United Nations agencies should take on a stronger role as it is a collective (mandated) responsibility with success depending on joint efforts, and that UNICEF should place more focus on developing and implementing action plans to prevent and respond to grave child rights violations.

Did UNICEF establish a clear intervention strategy?

United Nations organizations jointly undertook an extensive strategy development process. UNICEF contributed substantially to the Humanitarian Needs Overview (April 2013) process and subsequent SHARP (since 2012), the Comprehensive Regional Strategic Framework (May 2014) and RRP/Regional Refugee and Resilience Plan (3RP) (since 2012) for refugee hosting countries.

These processes included situation analysis and strategies for the sector, with UNICEF playing a lead role for child protection, education, health and WASH. Country offices developed operational programme response

plans that included a cover page with a synopsis of key response actions by sector and information on programme delivery.

In April/May 2013, MENARO, supported by EMOPS, led an exercise across country offices in which risks were identified for a worsening scenario, as were mitigating actions. Developments were monitored between May and August of 2013 using a contingency checklist.

The CCCs were used as a framework for operational programming, but needed to be contextualized as not all of the commitments are applicable for the sub-region or even specific countries. This is due to the fact that the CCCs were designed for traditional emergencies (mostly sudden-onset crises in sub-Saharan Africa and South Asia) and not for a protracted crisis in middle-income countries with a focus on human rights issues.

Box 1: No Lost Generation Initiative

The No Lost Generation initiative was launched in October 2013 and backed by numerous partners from the United Nations, international agencies, governments, NGOs and donors.

The initiative is cross sector and aims to ensure that a generation of Syrian children – whether living inside the country or abroad as refugees – are provided with the protective environment and learning opportunities they need to reclaim their childhoods.

No Lost Generation targets some 6 million children across the sub-region. Through formal and informal programmes, schools and learning spaces, and with a guarantee that the education they obtain will be recognized when they return home, partners are seeking to reverse the large number of out of school children

For more information, see <http://nolostgeneration.org/about>.

There was, however, little evidence of a clear UNICEF-specific rationale (strategy) linking overall sector strategies with UNICEF operational plans and UNICEF sector responses with each other (with the exception of the No Lost Generation initiative), defining the overall context, needs, priorities, which CCCs UNICEF programming would cover, why these were covered and how CCC mandates not covered by UNICEF would be fulfilled and monitored. For example, CCC Commitment 3 on health is to ensure that children, adolescents and women have equitable access to essential health services with sustained coverage of high-impact preventive and curative interventions, which includes ensuring that at least one basic emergency obstetric care facility is provided per 100,000 people (Benchmark 3). Although UNICEF Jordan indicated that the responsibility to fulfil this benchmark was “delegated” to WHO and the United Nations Population Fund (UNFPA), no monitoring was established to determine whether the benchmark and commitment were achieved or not.

The initial emergency response focused on short-term solutions to meet immediate needs rather than long-term planning and strategy, and on supplies rather than services. This was in part due to the delayed response and the related urgency of needs and lack of skilled resources.

“At the start of an emergency you need a twin engine; one to focus on meeting the needs and one to do the strategic thinking. It is hard to balance this when there is lack of time and resources.” –UNICEF Manager

UNICEF management indicated there is a need to develop strategic thinking beyond the CCCs, for example on how to transition from emergency response to resilience programming. Programme decision-making was mostly captured in notes from internal consultations rather than in strategies defined in a theory of change.

How responsive was the UNICEF strategy over time to changes in the external environment?

Despite the initial 'organizational inertia'⁶⁰ (through mid-2012) and the time required to establish country office capacity (by mid-2013), there is evidence that programmes adjusted over time and became more appropriate and relevant. Much of the programming development seems to be informed through 'learning by doing', rather than by systematic situation analysis and strategic decision-making, which is reflected in anecdotal evidence and the lack of documentation found.

UNICEF'S PROGRAMME AND ADVOCACY RESPONSE

Was the UNICEF response appropriate?

Consistent assessment of programme performance across interventions and time periods has proven difficult. This is caused by the lack of: 1) a consistent UNICEF strategy outlining the rationale of the response and the intended outcomes; stated targets vary between different documents and between years; 2) baseline and other data to measure progress against; and 3) consistent programme monitoring against objectives and therefore the irregular and incomplete documentary record. In addition, programmes evolved according to context and available resources and indicators mostly focused on tracking the number of the affected population reached rather than the modalities used or the quality of programming.

UNICEF staff broadly reported that at the beginning of the crisis, emergency preparedness measures were not sufficient or appropriate for dealing with the evolving

situation. The initial expectation was that the Syria crisis would be resolved quickly, without considering 'what if' scenarios on how to respond if the scale or nature of the crisis unfolded in a different manner.

No clear documentation or rationale was found that linked assessed needs to the UNICEF programme decisions made (the why), nor a comprehensive impact analysis of the response. There is general consensus across the stakeholders consulted that, although UNICEF was late to respond, programming was adjusted to the changing situation and needs based on learning by doing and used different interventions and modalities to deliver results in different country contexts. For example, cross-border operations⁶¹ and border polio vaccination was used in the Syrian Arab Republic; electronic monitoring systems were employed in Jordan; mobile units and health clinics for ITS were established in Lebanon (*see Box 2*); Yobis⁶² was implemented in Turkey and Equitrack⁶³ is currently being rolled out across the region for the management of PCAs with implementing partners.

In Jordan, UNICEF supported the development of water supply and water management networks in Za'atari refugee camp (*see Appendix 8*) to meet the increased demand, with a shift in emphasis to resilience-oriented interventions.

Several CCC benchmarks were not monitored at country or regional levels, which made it difficult to determine whether the CCCs were being fulfilled.

Although the role of governments differed between countries (*see Box 3*), advocacy efforts were key to UNICEF's ability to influence national plans, priorities and legislation and provide appropriate assistance to affected

⁶⁰ Additional data and analysis would be required to define what caused the organizational inertia. It is expected, however, that lack of emergency response experience, a mixed sense of urgency and staff shortages contributed to this.

⁶¹ Up through May 2015, cross-border activities represented 2 per cent of the budget for the entire emergency response, according to the UNICEF Syria Hub.

⁶² UNICEF and the Ministry of Education jointly developed an education management information system at the end of 2014 to monitor Syrian students, teachers and classrooms. Source: '3RPTurkey Monthly Update – January/February', 2015.

⁶³ Equitrack, developed by UNICEF Lebanon, enables UNICEF to have all partnership-related information in one repository, to map partnerships and to aggregate planned results, progress and budgets. Available at: <www.unicef.org/innovation/innovation_73201.html>, accessed 11 March 2016.

Box 2: Mobile gender-based violence units in Lebanon

The child protection response in Lebanon is transitioning from a volume-based to a quality-centred approach, based on evolving needs.

The original GBV package targeted women leaders and focused on empowerment through psychosocial support, emotional support and life skills, using theatre and activities that can be carried out in the ITS.

Although the programme successfully reached a vast number of women, emerging needs related to a) a dispersed population that is migratory; b) new protection risks for women venturing outside of the home; and c) the difficulties of privacy and confidentiality when reporting GBV in an ITS, have changed how GBV interventions need to be approached.

UNICEF and the International Rescue Committee are piloting new approaches with mobile GBV units in the ITS. This new pilot project seeks to uphold confidentiality and GBV reporting and allow women to face and deal with evolving protection risks.

Source: Interviews

populations across the region. These efforts are rarely documented, though anecdotal evidence underlines that much attention was given to advocacy across the countries as the crisis evolved. Examples are the WASH coordination workshop organized by UNICEF Syrian Arab Republic, inviting the Government of the Syrian Arab Republic and NGOs to Beirut in 2013, and advocacy conducted with the governments of the Syrian Arab Republic and Turkey regarding the inclusion of psychosocial support and child protection in the response.

Box 3: The role of governments

The **Government of Jordan** did not officially recognize the growing refugee crisis until 2012, when increased fighting saw an average of 1,000 people crossing the border every day.⁶⁴ The Ministry of Planning and International Cooperation provided leadership for the crisis response and established the Host Communities Support Platform in September 2013. The Platform is a body comprised of government line ministries, donors, United Nations agencies and international NGOs that facilitates the participatory formulation of sector strategies to respond to the crisis.⁶⁵

The **Government of Lebanon** maintained a principle of non-intervention in Syrian affairs in the initial stages of the crisis to avoid spill over of the conflict. By the end of 2012, the number of refugees in the country had surpassed 100,000 and the Government acknowledged the crisis, requesting the support of the international community and engaging with the 2013 RRP. Unlike Jordan, Iraq and Turkey, there are no refugee camps in Lebanon. Instead, approximately half of the refugees live in rented housing, while the other half reside in nomadic camps (ITS) or are hosted by families or local communities.⁶⁶

The **Government of Turkey** asserted strong ownership and leadership over the refugee response from the beginning of the crisis. In 2011, the Government indicated that it had sufficient capacity to deal with the influx, but by April 2012, the number of refugees had risen significantly, and the Government accepted support from international organizations for the Syrian refugees inside and outside of camps. The Government has, however, resisted most calls for needs assessment by international agencies. The emergency response has been relatively centralized

⁶⁴ Syrian Refugees – a snapshot of the crisis in the Middle East and Europe, 'Jordan', <http://syrianrefugees.eu/?page_id=87>, accessed 13 March 2016.

⁶⁵ The Jordan Response Platform for the Syria Crisis, <www.jrpsc.org/>, accessed 13 March 2016.

⁶⁶ Syrian Refugees – a snapshot of the crisis in the Middle East and Europe, 'Jordan', <http://syrianrefugees.eu/?page_id=87>, accessed 13 March 2016.

continued: Box 3

under the leadership of the Disaster and Emergency Management Authority. This has created a clear focus for leadership and coordination.⁶⁷

From the beginning of the crisis, the **Government of the Syrian Arab Republic** maintained a policy of limiting the number of international agencies operating in the country and controlling humanitarian aid. United Nations agencies were permitted to scale up, but few national and international NGOs were granted registration and permission to operate. In May 2012, an agreement was made between the Government and United Nations agencies that allowed the operation of eight United Nations agencies (including UNICEF) and potentially nine international NGOs. This agreement also confirmed that the SARC would be the official government liaison and operational partner for all humanitarian agencies⁶⁸ (see Box 5 for further information on access inside the Syrian Arab Republic).

Was the UNICEF response proportionate⁶⁹ to capacity?

Considering the large number of people affected in the sub-region, it was deemed unrealistic to measure UNICEF's performance against the assistance needs for the whole crisis, as meeting these needs was not considered possible for any humanitarian organization.

Instead, the evaluation sought to assess whether UNICEF's humanitarian response was proportional to its capacity; in other words, did UNICEF do what it reasonably

could (be expected to) do, considering the contextual aspects?

**“UNICEF did all that could be done, considering the circumstances”
(view across target audiences)**

No evidence was found in regards to whether the emergency response was proportional to UNICEF capacity. This is in part due to: 1) a lack of emergency preparedness at the country office level, which caused a gap in understanding of the overall capacity of UNICEF and its (possible) implementing partners; and 2) a lack of evidence that UNICEF defined its organizational capacity and strategic prioritization of emergency response activities to inform planning, taking into account the contextual aspects and limitations (strategy). A consequence of the latter was that certain programme targets were aspirational and beyond what UNICEF, or any other humanitarian organization, could reasonably achieve.

In interviews, informants across stakeholder groups consistently indicated their perception that the response became proportional to UNICEF's capacity over time, accounting for external factors and the context in which the organization had to operate (including security, access and political factors).

Triggered by the L3 declaration in 2013, significant programming scale up took place in 2014, as indicated by the numbers of people reached, particularly in the WASH and child protection sectors.

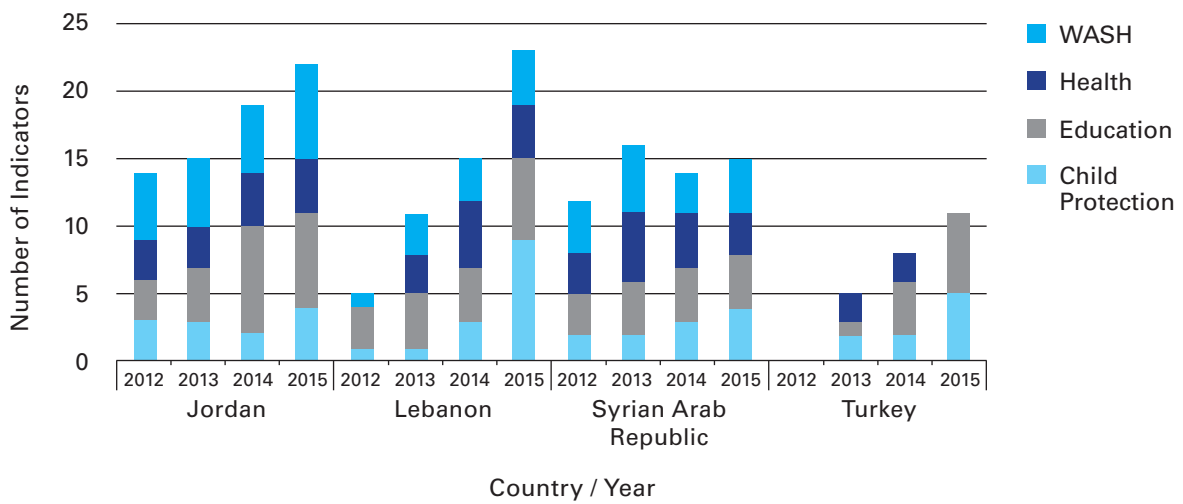
Different types and numbers of indicators were used within countries across different years, and between country and regional levels (see Figure 1). Even if the same type of indicator was used (for example, children vaccinated for measles) a different numerator may be

⁶⁷ United Nations Children's Fund, 'An independent evaluation of UNICEF's response to the Syrian refugee crisis in Turkey, 2012–2015', UNICEF, New York, November 2015.

⁶⁸ Slim, Hugo and Lorenzo Trombetta, 'Syria Crisis Common Context Analysis', OCHA, New York, May 2014. Available at <www.alnap.org/resource/12718.aspx>, accessed 28 February 2016.

⁶⁹ The term proportionate refers to “the ratio of one quantity to another, especially of a part compared to a whole” (source: Wikipedia).

FIGURE 1: Number of indicators by country, 2012 - 2015*



*(June 2015)

used within the same country in a different year and between countries. This can make it difficult for countries to consistently and accurately monitor and evaluate programming trends across years.

For example, in 2014, Jordan and Turkey reported the number of children aged 6 months to 15 years vaccinated for measles, while Lebanon reported the number of children aged 1 to 15 years and the Syrian Arab Republic reported the number of children vaccinated for measles, mumps and rubella (with no age group specified). In 2013, Lebanon and Turkey used a different numerator for this measles vaccination indicator and reported the number of children aged 9 months to 18 years vaccinated against measles. Jordan and the Syrian Arab Republic did not specify the age group in their reporting of measles vaccination in 2013.

A total of 10 common indicators were measured at the regional level, which did enable comparisons to be made over time and between programme sectors and countries (see Table 1). These 10 common indicators

were selected for inclusion in this report (see Chapter 4 and Appendix 8) because these were among a set of common indicators used in UNICEF regional dashboard data and because they were used most consistently across years, programmes and countries in the region.

Several CCC benchmarks were not monitored at the country or regional levels, which made it difficult to determine whether the CCCs were being fulfilled. For example, it was not monitored whether stock-outs of antibiotics (a tracer for health) or iron/folic acid (a tracer for antenatal care) took place in health centres in affected areas, which is part of Benchmark 3 of CCC Commitment 3 on health (to ensure that children, adolescents and women have equitable access to essential health services with sustained coverage of high-impact preventive and curative interventions).

Regional indicators also did not disaggregate by location (camp or non-camp setting), status (refugee or host community) or by gender, meaning the equity of programming could not be ascertained.

Table 1: Common regional indicators

Sector	Indicator
Child protection	<p>% of children (and adolescents) benefitting from psychosocial support services and outreach initiatives</p> <p>% of children receiving specialized services from qualified frontline workers</p>
Education	<p>% of children supported in basic education</p> <p>% of children receiving essential education materials</p> <p>% of children and adolescents with access to alternative and non-formal education opportunities</p>
Health	<p>% of children under 5 reached with polio vaccine</p> <p>% of children under 5 reached with measles vaccine</p> <p>% of emergency-affected people supported to access basic health services</p>
WASH	<p>% of emergency-affected people accessing safe water</p> <p>% of affected people periodically provided with hygiene promotion messages</p>

Was the UNICEF response timely?

It took time to establish the emergency response due to the delayed acknowledgement of the crisis by governments (*see Box 3, specifically on Lebanon*), a lengthy decision-making process (between country offices, MENARO and Headquarters), the lack of a clear understanding of what to do in a humanitarian crisis with a strong protection dimension, limited preparedness, and the time required to implement the decisions made.

“Offices faced challenges in quickly shifting gears from business as usual to business unusual” –UNICEF informant

A lack of existing country office emergency experience and preparedness slowed down the initial emergency response as it took time to plan the response, ensure significant funding, recruit staff, establish partnerships and procure supplies. Although some decisions, such as the establishment of the Syria Hub and the sub-regional prioritization of WASH, were taken by mid-2012, it reportedly took up to the end of 2012/early 2013 to implement these decisions due to lack of funding. The first RRP was initiated by mid-2012, but it was between mid-2013 and early 2014 that country offices scaled-up their response capacity and ability to deliver assistance.

Were UNICEF programmes informed by situation analysis, assessments and monitoring?

Despite the several assessment and monitoring efforts (including inter-agency) that were undertaken,⁷⁰ data limitations have been a feature of this crisis. Security and access issues, government restrictions, the fluid and changing nature of the crisis and the availability of appropriate capacity limited the options for conducting systematic assessment and monitoring.

An inter-agency contingency plan (October 2012–March 2013) was created, including a situation analysis, continuity planning and sector response plans for possible scenarios⁷¹ and a regional strategic framework for a meeting with the Emergency Directors and donors in November 2013.⁷² The draft states: “this provides an analytical starting point for a comprehensive regional strategy, but due to data limitations is only partially complete”

However, there was limited evidence that programming was informed by systematic situation analysis, needs and vulnerability assessment (except in Lebanon) or adjusted based on monitoring mechanisms with common well-defined indicators.

⁷⁰ See the summarized overview of the assessment catalogue in Appendix 14.

⁷¹ Inter-Agency Contingency Plan Syrian Arab Republic, October 2012-March 2013, coordinated by OCHA and UNHCR (June - November 2012).

⁷² Office for the Coordination of Humanitarian Affairs, Towards a Comprehensive Regional Strategy, Dealing with the effects of the Syria Crisis (draft working document), OCHA, 4 November 2013.

This led to an over-reliance on secondary data, limited systematic monitoring and reporting on implementing partner performance and feedback from affected populations, particularly in the Syrian Arab Republic.

Box 4: Third-party facilitators in the Syrian Arab Republic⁷³

Facilitators are people with specific expertise, credibility and a broad network. They carry out a range of duties to support UNICEF's work in project monitoring and programmes in areas that are not accessible to UNICEF staff. Facilitators have a solid knowledge of the area in which they operate and are able to liaise with different partners.

Up to July 2015, 67 facilitators had been deployed in 13 of the 14 governorates in the Syrian Arab Republic. Their main responsibilities are:

- 1) Situation monitoring (in specific areas for specific requests), to assess the overall situation and any unmet needs, particularly of women and children.
- 2) Field visits to monitor projects and programmes, focusing on: a) assessing implementation according to the PCA or small-scale funding agreement; b) verification of supplies delivered and identification of delays and bottlenecks; c) post-distribution monitoring of supplies to assess beneficiaries' opinions in terms of the quality, timeliness and relevance of supplies delivered.
- 3) Monitoring and reporting on the overall performance of project and programme implementation, and validation of progress reports prepared by implementing partners.
- 4) If needed, coordination with implementing partners in consultation with the respective UNICEF chief of field office or his/her delegate.

Box 5: Humanitarian access in the Syrian Arab Republic

The report *Failing Syria: Assessing the impact of UN Security Council resolutions in protecting and assisting civilians in Syria*,⁷⁴ published in 2015, states that **humanitarian access to large parts of the Syrian Arab Republic has diminished** and more people are being killed, displaced and are in need of help than ever before in the sub-region. This is despite three Security Council resolutions adopted in 2014 that demanded action to secure protection and assistance for civilians.

- **People are not protected:** 2014 has seen reports of 76,000 people killed in the conflict out of a total of at least 220,000 deaths over four years.
- **Aid access has not improved:** 4.8 million people reside in areas defined by the United Nations as hard-to-reach, 2.3 million more than in 2013.
- **Humanitarian needs have increased:** 5.6 million children are in need of aid, a 31 per cent increase since 2013.
- **Humanitarian funding has decreased compared with the needs:** In 2013, 71 per cent of the funds needed to support civilians inside the Syrian Arab Republic and refugees in neighbouring countries were provided. In 2014, this had declined to 57 per cent.
- **Fewer people were reached via inter-agency convoys from Damascus in 2014 compared with 2013** (1.1 million compared with 2.9 million), and less than half of the requests were accepted by the Government of the Syrian Arab Republic.
- Some assistance has been entering across the borders from neighbouring countries, **but out of the country's 34 border crossings, five are currently open for humanitarian convoys, nine are restricted and the remainder are closed.**

⁷³ UNICEF Syrian Arab Republic.

⁷⁴ Norwegian Refugee Council/Internal Displacement Monitoring Centre, *Failing Syria: Assessing the impact of UN Security Council resolutions in protecting and assisting civilians in Syria*, NRC/IDMC, 12 March 2015, <www.refworld.org/docid/5502c8e24.html>, accessed 28 February 2016.

Box 6: UNICEF Lebanon's equity principle and practice⁷⁵

Lebanon had high levels of inequality between the richest and poorest households even before the Syrian crisis. UNICEF Lebanon therefore adopted an equity approach, with a focus on the needs of all vulnerable children, irrespective of their status. Given the scale of the crisis and the limited resources available, programing was prioritized in the most vulnerable localities.

A vulnerability map was developed in 2013 to identify priorities, in collaboration with the Prime Minister's Office. At that time, the mapping indicated 182 vulnerable localities. When the mapping was revised in 2014, 225 vulnerable locations were identified out of more than 1,500, mainly due to the increase and wider distribution of Syrian refugees in Lebanon. In 2015, the mapping was revised with the Ministry of Social Affairs to include a multi-dimensional perspective on vulnerability in Lebanon.

These localities contain 86 per cent of the registered Syrian refugees, 80 per cent of Palestinian refugees, and more than 66 per cent of the population of poor Lebanese (living on less than US\$4 per day).

The relatively small geographic focus enabled programmes to achieve significant coverage of the most vulnerable populations in the country.

Alternative means of assessment and monitoring were utilized, including third-party monitors in Lebanon and the Syrian Arab Republic and third-party facilitators in the Syrian Arab Republic. It is unclear how objective or representative this method has been. In the Syrian Arab Republic, using community members with specific expertise provides a

livelihood to those involved (contributing to resilience) and ensures that UNICEF can reach communities where staff cannot go.

Besides government restrictions, opportunity-based programming impacted UNICEF's ability to deliver results in terms of equity. For example, most assistance to refugees has been provided in camps and ITS, which has been seen as a more 'realistic' option for needs identification and the delivery of assistance; the targeting of refugees in host communities is more complex in terms of the identification of vulnerabilities and location.

In 2013, UNICEF Lebanon initiated an equity-based approach based on vulnerability mapping (*see Box 6*).

Since 2013, United Nations agencies in Lebanon jointly conduct the Vulnerability Assessment of Syrian Refugees (*see Box 7*). A limitation of the Assessment is that it only addresses refugee needs and not those of host communities.

Box 7: Vulnerability Assessment of Syrian Refugees in Lebanon⁷⁶

First conducted in May 2013, the Assessment aimed to gain knowledge of the living conditions of Syrian refugees in Lebanon and inform decision-making on programmatic activities. It is a joint UNHCR, UNICEF and WFP multi-sectorial household survey conducted with the registered and awaiting-registration Syrian refugee population in Lebanon.

The assessment is designed to provide accurate, multi-sectorial vulnerability criteria for the refugee population to support the implementation of humanitarian assistance and enable humanitarian stakeholders to improve their programming and target assistance for the most vulnerable.

⁷⁵ United Nations Children's Fund, 'Lebanon Crisis Response Scale-up 2011-2014' (internal document), 27 February 2015.

⁷⁶ United Nations High Commissioner for Refugees, *Syrian Refugee Response: Vulnerability Assessment of Syrian Refugees in Lebanon*, UNHCR, Beirut, 8 August 2014.

United Nations organizations in the Syrian Arab Republic have intended to conduct a multi-sector needs assessment since 2013, but this has not yet been approved by the Government.

How cost-efficient was the UNICEF response?

There was a limited systematic approach to determining the overall cost-effectiveness of programming over time. Cost-effectiveness of interventions could not be determined because programme monitoring focused on numbers of affected people reached and not on assistance modalities or impact. Available cost figures by child (e.g. child protection cost by child) could not be used to compare, as these were not linked to a specific modality.

Since 2014, cost-effectiveness has been discussed as part of the inter-agency Comprehensive Regional Strategic Framework, and process efficiency has been discussed at the country level for individual programmes. These process efficiency efforts helped to change programme modalities, for example from water trucking to piped network and on-site water treatment in Za'atari refugee camp (see Appendix 8, Box 1); local procurement of school furniture and jerry-cans in the Syrian Arab Republic (UNICEF bought 100,000 jerry-cans for Aleppo in Aleppo); establishment of long-term agreements with international and local suppliers; planning for the local production of sodium hypochlorite; and engagement of local implementing partners (localization).

Another example is the procurement of clothing: UNICEF established a long-term agreement with Chinese suppliers for winter clothing kits, which resulted in cost efficiencies for country offices that had funding available to order supplies early and take into account

the longer Chinese manufacturing and shipping times. UNICEF Lebanon took advantage of this for winter 2014, which led to substantial cost savings.

Box 8: Makani/My Space initiative⁷⁷

In Jordan, the Makani centre offers a comprehensive approach to service provision that covers alternative education, life-skills building programmes and psychosocial support. Each Makani centre has a community outreach component that is linked with the services being provided at the centre. The centre refers boys and girls to other specialized services such as formal education and case management for child protection and GBV.

Makani supports the engagement of local networks of partners to facilitate the best-in-class thinking, practices and applications necessary to enable and expedite systemic, sustainable change. This is done by creating opportunities for children and young people with unique insight into the challenges that affect their communities to team up with local experts to develop creative and innovative solutions to those challenges.

The introduction of this approach in 2015 was based on the lessons learned from child protection and education emergency response supported by UNICEF in Jordan in 2013 and 2014. The sector-based interventions were expensive and poorly coordinated. In several cases, UNICEF had different agreements with the same partner, accentuating the silo approach that was used to deal with children's needs. The Makani comprehensive approach offers well-coordinated and cost-effective multi-sectoral services to vulnerable girls and boys to support them to reach their full potential.

⁷⁷ United Nations Children's Fund Jordan, 'Makani (My Space) initiative to expand learning opportunities for vulnerable children in Jordan', UNICEF, Zarqa, 12 March 2015, <www.unicef.org/jordan/media_10093.html>, accessed 16 March 2016.

How convergent was the UNICEF response?

UNICEF staff reported a lack of collaboration and coordination across units, programmes, countries and between country offices, MENARO and Headquarters, resulting in limited convergence of the response. There was no systematic forum for the country representatives and deputy representatives to discuss, the Emergency Management Team (EMT) did not meet frequently and there was limited joint planning or collaboration within country offices.

Some cross-sector initiatives such as No Lost Generation (*see Box 1*) and Makani/My Space (*see Box 8*) were developed. These initiatives provided synergies between programmes, strong advocacy messages, broader impact of interventions and resource mobilization around common approaches.

How well did UNICEF combine emergency relief and service delivery with resilience-based approaches?

The initial operational focus on volume and supply began to transition to service-oriented, more sustainable approaches following the L3 declaration in January 2013. In 2014, focus shifted to integrated approaches based on vulnerability rather than status to take into account both Syrians and host communities, localization of activities through local partners and cost-effectiveness. There is consensus among interviewees and the literature reviewed that the situation will persist for the medium to long-term and programming is also shifting to a resilience-based approach. In 2015, UNICEF committed to participating in the Whole of Syria (WoS) approach (*see Box 10*) and the 3RP, which are intended to ensure convergence across agencies.⁷⁸

Box 9: Resilience – RRP definition⁷⁹

Resilience is defined as the ability of individuals, households and communities to anticipate, withstand, recover and transform from shocks and crisis. In a crisis situation, people require interventions that bolster their ability to overcome the worst impacts of the crisis and return to a path of sustainable prosperity. Therefore, a resilience-based development approach to the Syria crisis is different from humanitarian relief.

Creating resilience involves investing in the capacities and resource abilities of those communities and institutions most affected by a crisis so that they can eventually deal with their immediate and long-term needs. The resilience approach recognizes people in need as active and creative agents and empowers them towards greater ownership of their own lives through rapid employment generation, life skills training and inclusive governance.

Thus, the primary objective of resilience-based development is to **create a viable path away from the need for direct assistance and toward self-sufficiency and sustainable human development** for all affected communities.

UNICEF'S ENGAGEMENT WITH OTHERS

Was UNICEF's choice of partners appropriate and based on adequate assessment of capacity?

The process of implementing partner mapping, selection, coordination and monitoring varied according to programme sector and country office. Across the sub-region, no evidence was found of a prior existing or early-completed

⁷⁸ The 3RP is a country-driven, regionally coherent plan to address refugee protection and needs while building the resilience of vulnerable people and impacted communities and strengthening the capacity of national delivery systems. See <www.3rpsyriacrisis.org/wp-content/uploads/2015/01/3RP-Report-Overview.pdf> accessed 31 March 2016.

⁷⁹ Ibid.

comprehensive implementing partner mapping on capacity and quality even though this is part of UNICEF Early Warning Early Action (EWEA) guidance.

All country offices built their own implementing partner management system over time and the current roll out of EquiTrack supports the harmonization of PCA contracting and monitoring across the sub-region. Implementing partner capacity to deliver programming reflected ultimately on UNICEF's overall ability to scale-up and deliver targets. Government restrictions on using international implementing partners (in the Syrian Arab Republic) and limited availability and capacity of local implementing partners had a bigger impact on child protection and education programmes for the Syrian Arab Republic, specifically.

At the time of data collection, UNICEF country offices were in the process of rationalizing the number, type and quality of their implementing partners. Table 10 in Appendix 9 shows that the number of implementing partners across the countries decreased from 175 to 122 between 2014 and 2015.

How effectively did UNICEF and its partners engage with affected populations?

Across programmes, little evidence was found of systematic engagement with and feedback from affected populations.

For various reasons, including security challenges, it was not possible to directly interview several of the affected population groups for this evaluation. Affected populations indicated in focus group discussion and interviews that there has been limited awareness of what assistance is provided by UNICEF, that they are not informed of feedback mechanisms and that there is little to no interaction in regards to the assistance provided by UNICEF.

It was noted that it will be hard for the affected population to recognize what assistance is provided by which organization. However, in 2011, the IASC Principals endorsed five commitments on accountability to affected populations.⁸⁰ The commitment on participation reads: "Leaders of humanitarian organizations will undertake to enable affected populations to play an active role in the decision-making processes that affect them through the establishment of clear guidelines and practices to engage them appropriately and ensure that the most marginalized and affected are represented and have influence." To enhance the relevance of the operation and align with the commitments on accountability to affected populations, it will be important to systematically include engagement with the affected population in UNICEF's programme activities.

Did UNICEF establish appropriate working relations with key partners?

Governments

Existing UNICEF relations with governments facilitated dialogue (including on the resilience agenda) and implementation of programmes, and broader advocacy efforts have further supported UNICEF's influence on national plans, priorities and legislation. For example, in Jordan, UNICEF advocated successfully to change the juvenile law, allowing for more child-friendly community-based programmes.

In Lebanon, continued collaboration with the Government, such as support for the development of two national plans in 2014 and the endorsement of the Reaching All Children with Education in Lebanon Plan, contributed to the official signing of 2015 sector work plans at the ministerial level.

In Turkey, UNICEF's relationships with the Ministry of Family and Social Policy and the Ministry of National Education have been somewhat challenged by the appointment

⁸⁰ Inter-Agency Standing Committee, 'Task Force on Accountability to Affected People', <<http://interagencystandingcommittee.org/accountability-affected-people>>, accessed 13 March 2016.

of the Disaster and Emergency Management Authority as the institutional entity in charge of the response overall. UNICEF has made efforts throughout the crisis to keep the ministries among its main interlocutors. An example is the two-year rolling work-plan (2014–2015) with the Child Services Directorate General of the Ministry of Family and Social Policy, which includes a component related to Syrian children and families. UNICEF has also played an important role in supporting the Government of Turkey to undertake an overall leadership role on child protection coordination at both the national and local levels.

UNICEF Syrian Arab Republic has made huge efforts to develop relationships with key government leaders and create an enabling environment for its humanitarian response. For example, UNICEF strongly and successfully advocated for protection to be included as a key element of the response (instead of under livelihoods), which facilitated the provision of psychosocial support to children. Senior staff (professional level 5) were recruited to assume the role of section head and engage with government counterparts in a manner suited to an environment where tact, diplomacy and negotiation skills are required.

Capacity building and cooperation with governments is highlighted as part of UNICEF's mandate for all programmes, though no clear strategy was identified on how this partnership should be developed or maintained. Organizational inertia and focus on business as usual meant that limited UNICEF emergency programming was initially planned with the governments of Lebanon and the Syrian Arab Republic which, combined with the governments' own strong interests and regulations, impacted the humanitarian operating space⁸¹ for UNICEF.

Non-state entities

There was a lack of understanding among UNICEF staff at all levels (country offices, MENARO and Headquarters) in regards to

engagement with non-state entities in the Syrian Arab Republic on what can be done and how to practically operationalize guidance. This was partly due to limited experience in similar highly political and sensitive environments and reluctance to make mistakes due to the possible impact. UNICEF therefore did not work directly with non-state entities but established a solution, in line with government guidance, by working through the SARC and local implementing partners to increase access to hard-to-reach areas and facilitate coverage of the response.

Donors

UNICEF maintains strong working relationships with donors in the sub-region. Donors requested more feedback and justification on the 'why' of programme decisions in different contexts and to be better informed of the impact and quality of UNICEF's work.

For Lebanon, some donors indicated that direct relationships with NGOs were already established and funding was committed by the time UNICEF had its response plans ready. They felt that there was no value in adding an additional layer (and cost), given that the established structure worked well in this case. The value of UNICEF's 'middle-man' role was articulated as: 1) to support the coordination of humanitarian actors and the coherence of the response; and 2) to act as a liaison with the Government.

Coordinating partners

In the initial phases of the response, country office staff and implementing partners reported that the complex sub-regional inter-agency structure, with its unclear division of roles between United Nations agencies in some countries (mainly between UNHCR, OCHA, UNICEF and the United Nations Development Programme (UNDP) and specifically in Lebanon and Turkey) negatively impacted effective coordination and overall humanitarian assistance. This remains a challenge, in part due to the complexity of the

⁸¹ Humanitarian space indicates UNICEF's ability to operate freely and meet humanitarian needs in line with the principles of humanitarian action.

emergency, which involves assistance to refugees and host communities and emergency and resilience components.

Sub-regional coordination between humanitarian organizations on cross-border activities and development of the RRP/3RP and WoS plans enhanced collaboration and contributed to the clarification of roles. Specifically, MENARO staff reported that the regional collaboration with WFP and UNHCR that led to common messages and joint interaction with donors is key.

Implementing partners

A total of 65.6 per cent of UNICEF funding received for the period 2012-2014 in Jordan, Lebanon and Turkey was disbursed to implementing partners (see Figures 5 and 6 in Appendix 10). The average proportion of funding allocated to implementing partners varied by country. Implementing partners felt the PCA funding cycle was too short and that UNICEF did not consistently provide a coherent and long-term strategy for programme delivery. This had consequences in terms of the ability of implementing partners to ensure efficiency, appropriateness, cost-effectiveness and sustainability, which in turn reflected on UNICEF's ability to deliver. In addition, the limited capacity of various implementing partners to implement projects in this particular crisis context reflected on UNICEF's ability to deliver.

The process of establishing, managing and evaluating PCAs significantly limited the efficiency and quality of UNICEF's response. This included the time taken to identify implementing partners, establish PCAs and monitor implementing partner performance and lack of financial management.

Operational level programme collaboration with implementing partners is in general effective. Lack of communication with implementing partners on the use of the SSOPs has led to some misunderstandings and perceived lack of transparency in regards to selection processes.

Leadership of relevant working groups

UNICEF acts as the lead for child protection, education and WASH in the sub-region. UNICEF's coordination role was consistently perceived as effective and timely in regards to the allocation of dedicated and quality staff. UNICEF coordination of WASH partners was often highlighted as a strength.

In early 2015, UNICEF agreed to specific coordination roles for the WoS approach (see Box 10) on condition that funding was secured by OCHA. UNICEF management voiced a concern about the expected increased cost of coordination for an emergency situation, especially with increased needs and inadequate funding to meet all programme requirements.

UNICEF country office and implementing partner staff indicated that there is a need to clarify roles and responsibilities of leads, co-leads and partners, and to specify how national and sub-national working groups communicate in order to avoid confusion and effectively focus time and effort.

Box 10: Whole of Syria approach⁸²

Since the onset of the emergency, humanitarian operations have been led from several hubs: the country operation within the Syrian Arab Republic, the Syria Hub in MENARO and cross-border assistance from Turkey and Jordan. In September 2014, the WoS approach was adopted as a consequence of United Nations Security Council Resolution 2165, bringing the separate operations together into a single framework, in order to maximize efficiency, reduce duplication and ensure greater accountability, effectiveness and reach of humanitarian programming.

A Humanitarian Needs Overview and a Strategic Response Plan for 2015 were completed, bringing together more than 100 humanitarian actors from across the three main hubs. Coordination structures and processes in support of the Syria response have been aligned with the WoS approach.

⁸² Humanitarian Response, 'Whole of Syria', <www.humanitarianresponse.info/en/operations/whole-of-syria>, accessed 7 March 2016.

INTERNAL UNICEF MANAGEMENT AND PROCESS

Were UNICEF's management arrangements for the sub-regional crisis response appropriate and effective?

Roles and accountabilities

The respective roles of UNICEF HQ units, MENARO, the Syria Hub and country offices were unclear and seem to be misaligned. Although there is a terms of reference for the Syria Hub,⁸³ its unique role needed to be more widely communicated and more clearly defined (where does accountability start and stop), including how interaction with Headquarters, MENARO and country offices should be structured.

Headquarters and regional level staff reported that internal coordination and communication across programmes, units, functions and organization levels was limited, leading to lack of clarity on the overall response. For example, the EMT did not meet as planned and meeting minutes were only found for 2013. A major cause of limited communication was reportedly the sensitivity and confidential aspects of the operation. It was said that the organization should find ways to avoid this.

Headquarters staff indicated that the appointment of two global emergency coordinators (GECs) led to unclear decision-making processes and tension between Headquarters and MENARO/Syria Hub staff, despite the initial outline of the division of responsibilities for both GECs.⁸⁴ These staff members felt that many decisions that were made as situations arose were taken on a sub-regional level.

UNICEF Turkey falls within the CEE/CIS region. As the MENA Regional Director was appointed as one of the GECs, the response had to be coordinated between two regional offices

(MENARO and the CEE/CIS Regional Office), with some attendant complications.

How efficient and effective was the Syria Crisis Hub Mechanism?

In early 2012, the decision was taken to establish the Syria Hub to support the sub-regional response. Although it began with a small contribution of UNICEF emergency programme funds, the Syria Hub was only fully staffed in 2013 when UNICEF received un-earmarked thematic funds from its National Committees.

The Syria Hub assumed an essential role in the sub-regional United Nations approach, in terms of cross-country activities and support to country offices for planning, information management, advice on performance management reporting and resource mobilization.⁸⁵ Weekly calls were held with the country offices during 2012 and early 2013. By late 2013 and 2014, these were reduced to monthly due to workload pressure.

Both UNICEF Headquarters and country office staff expressed concern that the Syria Hub presented an added layer of decision-making and duplicated Headquarters roles, for example the approval of staff for deployments, or the assumption of activities that should have been covered by MENARO. It was felt that this impacted the speed of response as every step for approval required time. Country office staff also indicated that MENARO and the Syria Hub could have provided earlier guidance on the application and harmonization of indicators across the region to ease the process for the country offices.

The evaluators are of the opinion that an entity such as the Syria Hub provides a clear added value, but should be planned and in place to be activated when needed. It should have clear tasks and not duplicate the roles/tasks of other parts of the organization or delay activities.

⁸³ See Appendix 13 for the MENARO Terms of Reference for L3 Coordination, April 2013.

⁸⁴ UNICEF Executive Director Memo for the Activation of Level 3 Corporate Emergency Procedure for Syria and affected neighboring countries (January–March 2013), (UNICEF internal document), 4 January 2013.

⁸⁵ Based on interviews and the UNICEF Lebanon Crisis Response Scale-up 2011-2014, 27 February 2015.

How well was the human resources function performed?

At the start of the operation, the main experience of existing country office staff was with middle-income country operations. The original MENARO staff also did not have the correct profile, experience or knowledge to manage the emergency response in the initial phase of the crisis.⁸⁶

This knowledge gap, combined with limited available senior management leadership and decision-making, delayed the understanding of staffing needs (profiles and numbers) and the establishment of appropriate recruitment plans and structures. UNICEF staff broadly highlighted that country office staff initially hesitated to accept the scale and nature of the crisis, which affected the timeliness of response. Throughout 2013, and continuing in 2014, country offices recruited staff with the appropriate skills, leading to an incremental scale up of emergency response capacity.

“2013 was a year to set up country office capacity, in order to scale the response up properly.” –UNICEF staff member

As shown in Figure 9 of Appendix 10, UNICEF staff in the sub-region increased from 164 persons in 2012 to 423 in 2015, representing a 258 per cent increase. Temporary staffing solutions were provided through surge, IRT, Emergency Response Team and stand-by deployments. Although the technical profile of the staff deployed was appropriate for the most part, the need for soft skills, including partnership management, language (Arabic) and advocacy skills/diplomacy, was initially underestimated. The short-term nature of deployments also challenged the continuity and sustainability of programming, as well as relations with national authorities. This was especially true for the child protection and education programmes, as they tend to require multi-year approaches and longer-term relationships with

government entities. Engagement of temporary staff required repeated investments in induction, training and building of contextual and programme understanding, as well as trust with partners.

Internal UNICEF documents indicated that:

- Extended reliance on surge deployments was not cost-effective and did not ensure continuity, but rather over-stretched the global surge infrastructure at a time of multiple concurrent L3 emergencies.
- When the L3 crisis was declared, the average deployment was not quick enough given the magnitude of the emergency response and the limited organizational capacity, particularly in the areas of WASH, education in emergencies, communication and information management.
- Deploying an IRT member took an average of 10 days.
- The gradual approach (rolling programme budget review) did not encourage country offices to undertake comprehensive assessment of their office capacities at the outset of the emergency and contributed to extended reliance on short-term surge deployments.

For the Syrian Arab Republic, government-related restrictions on nationalities and obtaining visas formed an obstacle. In addition, engagement of UNICEF staff for what is broadly perceived as a ‘less-attractive’ location (the Syrian Arab Republic) and competition for international resources with other UNICEF L3 operations (‘institutional stretch’) played a role. It took more time to recruit national staff than to deploy international staff and it was hard to retain national staff, due to competition between organizations and the limited competitiveness of local UNICEF salaries.

At the same time, international staff had a high frequency of rotation due to the demanding

⁸⁶ United Nations Children’s Fund Division of Human Resources, ‘Draft human resources strategy for the Syria crisis affected countries; 2014-2016’, (UNICEF internal document), December 2013.

context and roles, and the pull for resources for other emergencies. An influencing factor is that UNICEF staff in the countries outside of the Syrian Arab Republic do not get compensation for the highly demanding job environment (working long days, including meetings on weekends, with potential for burn out).

How well was the supply function performed?

An initial shortage of logistics capacity in the sub-region (i.e. staff and knowledge) created delays in the provision of supplies due to a lack of internal planning, the limited use of SSOPs and the use of international procurement. Improvements were implemented in 2013 and 2014 with the recruitment of local staff, the establishment of long-term agreements, local procurement and production processes, predictive planning, risk analysis for 'big supplies' and the handover of supply responsibilities to country offices. Examples of localization in the Syrian Arab Republic include exploring options for procuring locally produced sodium hypochlorite for WASH purposes, office furniture and education and hygiene materials (as manufacturers are returning to the Syrian Arab Republic).

Parallel systems in MENARO and country offices, international procurement with related costs for logistics (e.g. items flown in from Copenhagen or India), and the high unit costs of some products (e.g. hygiene kits) reduced the cost-effectiveness of programmes in the early phases.

In addition, a lack of predictive planning seems to have contributed to prolonged storage and warehousing costs for items, which increased programme costs. Other examples of limited predictive planning included short notice staff travel and late planning of communication campaigns for polio vaccination.

Were the relevant SSOPs applied with respect to human resources, operational and contractual processes?

The L3 SSOPs⁸⁷ were broadly reported as not having been applied consistently across all country offices. Some offices maintained a 'risk-averse' approach to the establishment of PCAs, procurement and recruitment.

Implementing partners mentioned that the L3 fast-track procedure worked well at the start of the emergency, but led to a lack of transparency in UNICEF partner selection over the longer-term.

MENARO staff also noted that the use and application of the SSOPs needed to be considered against the requirement of the specific response over time, including when to go back to using the normal standard operating procedures (trade-off between speed and quality across the business sectors). UNICEF staff and implementing partners questioned whether the existing SSOPs remained appropriate when a crisis became protracted – especially those for human resources, PCAs and procurement – given that organizational capacity is developed over time.

The evaluators are of the opinion that country offices should apply the L3 SSOPs at the start of a crisis for the speed and flexibility they offer, but that the procedures do not remain appropriate in a protracted situation and in such cases should be adjusted and contextualized.

In 2015, EMOPS produced an updated version of the Corporate Emergency Activation Procedure for L3 emergencies and L3 SSOPs, for both slow and sudden onset crises based on previous lessons learned. References to preparedness were included. Work on how to address 'chronic L3s' is currently ongoing.

⁸⁷ United Nations Children's Fund, 'Simplified Standard Operating Procedures (SSOPs) for Corporate Emergency Activation Procedures in Level 3 emergencies', UNICEF, 1 March 2012, <www.unicef.org/cholera/Chapter_10_UNICEF/01_SSOPs_L3_emergencies_complete.pdf>, accessed 13 March 2016.

To what extent did funding sources constrain or support UNICEF's efficiency and effectiveness?

UNICEF emergency programme funds were utilized in 2012, 2013 and 2014. Tables 1, 2, 3 and 4 in Appendix 10 provide more details on funding appealed for and received for each year and each country.

Interviewees were of the opinion that, supported by UNICEF's strong fundraising capability, the funding secured was sufficient to meet programming needs across the region between 2011 and 2013, though they did not always match sector and country-specific needs. A total of 77.2 per cent of the UNICEF appeal was received in 2012, which increased to 102.9 per cent in 2013 and decreased to 64.2 per cent in 2014 due to a 63 per cent increase in the appeal. Jordan received 92.6 per cent of funding requested between 2012 and 2014, compared with 69.3 per cent for Lebanon, 85.3 per cent for the Syrian Arab Republic and 51.8 per cent for Turkey. Up through June 2015, nearly US\$346 million had been received of the US\$808 million appealed for (42.8 per cent). Across the region, child protection received 87.4 per cent of funds requested between 2012 and 2014, compared with 58.7 per cent for education, 85.1 per cent for health and 67.6 per cent for WASH.

It is expected that global attention on the Syria crisis is waning and, though the needs are likely to increase further, fundraising will likely become more difficult. This is one reason why a closer link between humanitarian response and resilience (development funding) is sought.

Humanitarian funding cycles generally have a short-term character. The funding appeals for the Syrian Arab Republic and the sub-region were for six months in 2012 and 2013

and 12 months in 2014. These short-term funding cycles, which led to short-term PCAs with implementing partners and short-term contracts for staff, were raised as a major concern in terms of the continuity of response.⁸⁸ Country office management indicated that moving forward, focus would need to be on longer-term, multi-year funding.

Integrated programming and advocacy initiatives across the region, such as the No Lost Generation initiative (largely defined at the Headquarters level) have facilitated increased resource mobilization (for education, youth and child protection programming). Country offices also undertook advocacy to raise awareness among donors of priorities across sectors and in different contexts.

In Jordan, Lebanon and Turkey, less funding was allocated as a proportion of the overall budget for health (3.9 per cent, 11.8 per cent and 8.6 per cent, respectively) that, combined with the high needs for polio vaccination, limited the scope of work and the ability to deliver programming.

Some UNICEF staff in Jordan felt that this was due to lack of appropriate staffing and the marginalization of health as a priority by senior management. Health programming was well represented in the Syrian Arab Republic, where 26.7 per cent of overall funding received was allocated to health.

Earmarking of funds by donors created challenges for the prioritization of programming in line with identified priorities, for example to fund the WASH responsibility in camps in Jordan or fund interventions in non-government controlled areas in the Syrian Arab Republic.

Funding for scale up of common support services such as security, transport, communications and office support, was a challenge

⁸⁸ Challenges in humanitarian funding, especially for protracted crisis, are commonly recognized. For example, humanitarian funding is considered as one of the main discussion points within the theme of humanitarian effectiveness for the 2016 World Humanitarian Summit.

as the institutional budget⁸⁹ allocated through Headquarters is not linked to the size of the operation and did not increase over time. Country offices could only allocate a small additional proportion of emergency funds to this, as donors normally do not fund this. The institutional budget was particularly a concern in the region as the 'stay and deliver'⁹⁰ policy did impact the security risks and therefore funding requirements.

How well were central emergency response funds managed?

A review conducted by a UNICEF consultant showed that between 2011 and 2013, US\$28,266,022⁹¹ was allocated to the Syria response from the CERF, in 24 distinct grants, for the Syrian Arab Republic (13) and three neighbouring countries (Iraq (3), Jordan (4) and Lebanon (4)). CERF grants contributed 8.2 per cent of all emergency funding received for the sub-regional response.

The timeliness of sub-grant disbursement was an issue. Although out of 35 sub-grants, 16 contributed to already ongoing activities, 12 experienced delays of at least one month before activities started, with four beginning as late as five months after the CERF funds were received by UNICEF.

Syrian Arab Republic CERF funding was mostly used for procuring supplies (61 per cent of total expenditure). Some supplies arrived in country after as little as two months, though there are records of first supplies arriving more than one year after UNICEF received the CERF grant.

Box 11: Central Emergency Response Fund⁹²

The CERF receives voluntary contributions throughout the year to provide immediate funding for humanitarian action. These contributions come from donors – mainly governments but also foundations, companies, charities and individuals – into a single fund with a US\$450 million annual target. This money is set aside for immediate use at the onset of emergencies, in rapidly deteriorating situations and in protracted crises that fail to attract sufficient resources.

Humanitarian organizations apply jointly for funding and funds are immediately released if these proposals meet CERF criteria (i.e. the needs are urgent and the proposed activities will save lives). CERF allocations are designed to complement other humanitarian funding sources, such as country-based pooled funds and bilateral funding.

Since 2006, more than US\$4 billion has been allocated to help millions of people in 93 countries and territories across the world. This includes US\$122.5 million provided to the Syria crisis response.

UNICEF performed well in three out of four countries (i.e. 50 per cent of the CERF value received) in terms of when activities started in relation to when CERF funds were received. However, the bottleneck to CERF performance was in when supplies arrived in the affected areas.

⁸⁹ Institutional budget is development effectiveness, United Nations development coordination activities, management activities, and special purpose activities. Country office administrative costs (including security) are paid from this budget. See United Nations Children's Fund, 'UNICEF institutional budget for 2012-2013', Executive Board second regular session 2011, Item 8 of the provisional agenda, New York, 5 August 2011, <www.unicef.org/about/execboard/files/2011-ABL3-Report_of_the_ACABQ-LK-SS-Final_sent_to_UN_5_August_11.pdf>, accessed 13 March 2016.

⁹⁰ 'Stay and deliver' refers to the commitment of UNICEF (and other United Nations agencies) to stay and deliver humanitarian aid in the Syrian Arab Republic despite insecurity and lack of access. See Anthony Lake, 'Executive Board Meeting New York, NY September 3, 2013', <<http://papersmart.unmeetings.org/media2/81843/unicef-executive-director-speech-september.pdf>>, accessed 13 March 2016.

⁹¹ No Central Emergency Response Fund grants were allocated to UNICEF's response to the Syria crisis in 2014. See Office for the Coordination of Humanitarian Affairs, 'United Nations CERF: 2015 Allocations by Agency', OCHA, <www.unocha.org/cerf/cerf-worldwide/funding-agency/funding-agency-2015>, accessed 13 March 2016.

⁹² Office for the Coordination of Humanitarian Affairs, 'United Nations CERF: Who we are', OCHA, <www.unocha.org/cerf/about-us/who-we-are>, accessed 13 March 2016.

Country office management indicated that although CERF represented a limited part of overall funding, the Fund helped a number of programmes, such as WASH and refugee cash assistance programming in Jordan.

Challenges reported in the CERF process included the limitations of funding amounts (e.g. for US\$500,000 for the Syrian Arab Republic), heavy reporting structures and delayed receipt of the funds. Internal UNICEF

constraints included the ability to quickly disburse funds and to have access to partners with sufficient capacity.

The table on the following page provides an overview of all of the main findings by evaluation theme. As requested in the terms of reference, data were collected on the humanitarian guidance available, whether this was used and whether it was of use. A summary is included in Appendix 16.

Overview of main findings by evaluation theme

Themes	Sub-themes	Main findings (based on data collected)
UNICEF's programme and advocacy response	Appropriateness	Programming was not initially appropriate because of a slow transition from a development to emergency context, but UNICEF was able to adapt to changing needs based on learning by doing.
	Proportional to capacity	Organizational capacity was not defined, but informants felt the response became incrementally proportionate to capacity; "UNICEF did what it could do considering the circumstances".
	Timeliness	UNICEF, like other actors in the region, was slow to start, but country offices assumed full capacity between mid-2013 and early 2014, and programming significantly scaled up during 2014.
	Informed by assessments and monitoring	Although many data collection efforts were undertaken, limited evidence was found that programming was informed by systematic situation analysis, comprehensive (needs and vulnerability) assessment or adjusted based on monitoring.
	Cost-efficient	A limited systematic approach was found to determine the cost-effectiveness of programming. Improvements were gradually introduced (e.g. local supply, integrated programming) and the focus on cost increased in 2014.
	Convergence	There was inadequate collaboration and coordination across units, programmes, countries and organizational levels (HQ, RO, CO). UNICEF increased its focus on convergence beginning in 2014.
	Combination of emergency relief, service delivery and resilience-based approaches	In 2012, the response focused on volume (supply). In 2013, after the L3 declaration, this transitioned to service-oriented and more systematic approaches. In 2014, focus shifted to integrated approaches (refugees and host communities) and resilience.

continued: Overview of main findings by evaluation theme

Themes	Sub-themes	Main findings (based on data collected)	
Role and strategy	Relevant and appropriate role	UNICEF's mandate ensured a clear understanding of its role in the sector. UNICEF's role was consistently considered as relevant, though opinions varied on what it actually should be. UNICEF's role in MRM posed some challenges, exacerbated by sub-regional contextual elements	
	Clear intervention strategy	There was a lack of a clear rationale that linked which programmes and CCCs UNICEF would cover, accounting for the organization's capacity, why these were covered and how CCC mandates not covered by UNICEF would be fulfilled and monitored.	
	Responsive to the external environment	UNICEF programmes were adjusted to the external environment through learning by doing.	
Engagement with others	Appropriate choice of partners	No prior implementing partner mapping of capacity and quality was found. Country offices incrementally expanded the network of implementing partners and are now in the process of rationalizing the number, type and quality of implementing partners.	
	Effective engagement with affected populations	Little systematic engagement was found with the affected population and no clear feedback mechanisms were identified.	
	Appropriate working relations with key partners	Government	Strong existing relationships with governments facilitated dialogue and the implementation of programmes, supported by UNICEF advocacy efforts. Government agendas and restrictions limited UNICEF's response.
		Non-state entities	UNICEF staff at all levels were unclear on how to operationalize engagement with non-state entities. UNICEF Syrian Arab Republic sought alternative solutions (e.g. working through SARC) to cover non-government controlled and hard-to-reach areas.
		Donors	UNICEF maintained strong relationships with donors in the region, though donors requested more information on the rationale (why) of programme decisions and on impact and quality.
		Coordinating partners	Sub-regional coordination (specifically with WFP and WHO) enhanced collaboration and was key for the response. Complex and heavy inter-agency structures, with unclear division of responsibilities between United Nations agencies, negatively impacted the initial response in some countries.
		Implementing partners	Implementing partners are part of UNICEF's programme delivery and therefore quality. Implementing partner engagement was hindered by a short-term funding cycle and UNICEF's internal processes. Working relations were mostly effective.
(Co-)lead of working groups	UNICEF's role in coordination was consistently seen as strong.		

continued: Overview of main findings by evaluation theme

Themes	Sub-themes	Main findings (based on data collected)
Internal management and process	Roles and accountabilities	Roles of Headquarters units, MENARO, the Syria Hub and country offices were unclear and seem to have been misaligned. Internal communication and coordination was limited due in part to the sensitive nature of the crisis, which led to an unclear understanding of the overall approach. Headquarters staff indicated that the appointment of two GECs caused issues in decision-making (who decides what) and work focus was often concentrated on part of the response (work in silos).
	Effectiveness and efficiency Syria Crisis Hub	The Syria Hub was instrumental in 1) supporting country offices in planning, information management, performance management and resource mobilization; and 2) sub-regional coordination and planning. However, an additional entity created challenges in terms of speed, accountability and clarity of roles and responsibilities.
	Performance of human resource function	Before the crisis, country offices managed operations focused on building the institutional capacity of governments. Staff had limited to no emergency response experience and knowledge and capacity had to be built. While initially necessary, country offices relied heavily on short-term surge deployments and stand-by partners for prolonged periods. This posed challenges for programme continuity, costs and repeated investment in training
	Performance of supply function	Initial lack of supply staff and knowledge created delays in the provision of supplies. Improvements such as long-term agreements, local procurement and production were incrementally implemented, resulting in a largely well-performing sub-regional supply function.
	Application of relevant SSOPs (human resources, operations, contracts)	L3 SSOPs were applied, but not consistently across all country offices. It was questioned if existing SSOPs remained effective when the crisis is protracted and the organizational capacity has been developed. This is a reoccurring finding and UNICEF has addressed this issue and developed revised SSOPs in 2015.
	Funding	Overall funding levels across the region were sufficient for 2012 and 2013. In 2014, 64 per cent of the appeal funding was secured. Funding challenges were related to 1) short-term funding cycles; 2) earmarking; 3) limited funding for support services (institutional budget).
	Management of CERF funds	CERF grants contributed 8.2 per cent of all emergency funds received and have helped in a number of programmes. Challenges included limitations in funding amount, heavy reporting structures, delayed receipt of funds and UNICEF's ability to disburse funds quickly.

APPENDIX 12: EVALUATION FINDINGS BY PROGRAMME

CHILD PROTECTION

How well did UNICEF deliver assistance?

Prior to the declaration of the L3 emergency, country offices were doing upstream work, focusing on working with governments to establish better institutional systems for child protection. In fact, child protection was often part of another UNICEF section. In 2011 and early 2012, there were no specific emergency plans in place, instead activities had a reactive (opportunity-based) character, using existing mechanisms and structures. In 2012, although there was a realization that plans would need to be made to respond, it took time, as there was not a clear understanding of what to do in what was being deemed as a crisis with a strong protection element. Planning constraints were also linked to views and choices made by governments. Initial child protection efforts were focused on emergency psychosocial support and registering unaccompanied and separated children.

Once the L3 was declared in 2013, attempts were made to further understand and address the situation. Areas for support were identified and operational plans were created and linked to the CCCs. Choices made considered opportunities with, in some cases, constraints linked to the need for government involvement in accepting interventions. UNICEF heavily relied on what local child protection implementing partners were doing, while advocating with governments and building the capacities of stakeholders. Initially there was a focus on volume and 'supply' (e.g. for setting up child-friendly spaces). Key child protection areas of focus across the countries were emergency psychosocial support, case management and advocacy with governments (e.g. to ensure access (the Syrian Arab Republic), develop policies/changing laws and develop gender-based violence and child protection-related standard operating procedures (Jordan and Lebanon)).

Beginning in 2015, there was a growing awareness of the need to incrementally add focus on supporting institutions that provide services and ensure greater quality of service delivery. Over time, the operational planning approach grew from setting up sectoral systematic approaches to including initiatives across sectors, including providing support to social development centres (Lebanon) that provide a wide array of services, and introducing the one-stop Makani approach (Jordan) to service delivery.

Following the visit of the Special Representative of the Secretary-General for Children and Armed Conflict in 2012, the MRM staff was put in place with some initial management challenges. Staff were deployed in the Syrian Arab Republic and regionally (nine staff in total), with action plans being developed.

There is a lack of clear information related to the rationale for choices made with regard to the CCCs. However, emergency psychosocial support was the main intervention put into place, initially largely focused on providing children and their families with information about available services and being trained in life skills. In the early stages of the crisis, the rationale for these programmes was mostly captured in notes of internal consultations rather than in clearly defined strategies based on a theory of change.

While anecdotal evidence suggests that some partners are taking on some of the protection concerns, there does not seem to be a clear map of how and by whom the wide array of protection concerns – including some of the negative coping strategies such as early marriage, child labour and sexual exploitation and abuse – are being addressed or monitored. In Lebanon, UNICEF has been leading on child marriage issues for the sector.

Agreements between UNICEF and their implementing partners are captured in the PCA documents and linked to UNICEF indicators. Field research indicates that assistance has mostly been provided in the camps and ITS through mobile units and child and adolescent-friendly spaces. According to coordination partners, the approach of using mobile units to reach dispersed populations and monitoring through partners has been considered an innovative approach.

The use of mobile units has provided UNICEF with a means to show that the organization is reaching a high number of affected people and assisting them to effectively fundraise. Evaluation field visits in Lebanon have, however, raised questions about the effectiveness and sustainability of this approach. Efforts are being made to strengthen referral to the mobile units and institutions that UNICEF was supporting, including primary health care centres and social development centres. Although Jordan child and adolescent-friendly spaces have been set up in camps, these same services seem to not be available outside of camps. In the Syrian Arab Republic, the provision of life skills has been a relevant approach and there is some anecdotal evidence that suggests that youth involvement has helped to deter some from joining fighting forces.

As UNICEF and partners are now moving to supporting services, it will be critical to ensure that these vulnerable populations can access these services without discrimination and financial barriers.

Appropriateness of the response over time

In the pre-L3 stages, choices made for the response were opportunity driven rather than based on assessments or a well thought out response strategy. UNICEF's focus was initially on the affected Syrian population in the various countries, with less of a focus on vulnerable host communities. The organization was largely responding to the moving populations in camps, registration centres and ITS.

Once the L3 was declared, although some efforts were made to carry out assessments, there were a lot of challenges resulting in anecdotal evidence rather than comprehensive and rigorously carried out assessments. For example, the extent to which separated and unaccompanied children and levels of child recruitment has been understood with a clear situational analysis that would inform programming and advocacy is unclear. As the population has gotten more dispersed and coping strategies have further weakened, more regular evidence-based assessments were required. Monitoring is done through local communities, third-party facilitators and implementing partners, especially in hard-to-reach areas that UNICEF staff cannot access or can only access to a limited extent. The quality of child protection programming, such as psychosocial support was not consistently measured.

Child protection programming initially focused on reaching high numbers of affected Syrians through a sectoral approach, which was considered somewhat ad hoc by some implementing partners. This ad hoc approach resulted in a lack of a clear strategy/theory of change and clear outputs to measure effectiveness and impact. Over time, this has evolved and UNICEF and implementing partners have become more successful in meeting changing needs. UNICEF also moved to using vulnerability-based approaches, which are more comprehensive as they address the needs of internally displaced persons, host communities and refugees. Resilience is being explored by working closely with governments and host communities supporting existing structures such as community centres, schools and other institutions.

One approach that has been seen as cost-effective and adaptable to changing needs is the Makani approach, which aims to provide an array of services in one centre.

UNICEF and partners' ability to respond, with programming limitations, strongly relies on the capacities of partners, the security situation and the role of the government and

UNHCR. Partners view UNICEF as the organization that should take on a stronger advocacy role for child's rights. There was concern about UNICEF's attention to high numbers (especially at the early stages) with perceived little focus on quality, programme improvements and recommendations for change. With UNICEF's current commitment to shift towards more attention to quality and sustainable solutions, these areas are expected to improve in the future.

Scale up to meet needs

Prior to the L3 declaration (Phase L2), funding and lack of appropriate staff made it challenging for UNICEF to scale up to meet needs. There was criticism by some internally that UNICEF did not scale up quickly enough given the rapidly changing situation.

In the post-L3 phase beginning in early 2013, the overall impression of UNICEF staff was that while the response was slow to start, it has been proportional to UNICEF's capacity, considering the (access, political, contextual) restrictions the offices have had to deal with. The CCCs were used to plan and monitor the operational response programmes. There was a heavy emphasis on showing high numbers, which may have compromised quality. From late 2014 and beyond, there has appeared to be a commitment to focusing on quality moving forward.

Although funding was an issue at the start, advocating for child protection and education through the No Lost Generation approach has substantially increased the available resources. Implementing partners have raised concerns about short-term funding cycles and that the child protection sector would benefit from longer funding cycles to help address some challenges related to quality.

Efficiency of the response

Prior to the L3 declaration (Phase L2), the response was considered slow given the lack of appropriate staff in place.

In the post-L3 phase, UNICEF considered itself relatively efficient in terms of costs, but less so in terms of scaling up of staff, especially in the initial stages. Staff deployment was not considered timely (and was considered too temporary) though staff profiles have been strong across the board. The initial MRM staff in the Syrian Arab Republic may not have been the most appropriate for the position, which caused some concerns with the Government. There was the concern that PCAs took a long time as SSOPs were used to a limited extent and internal processes were slow. As child protection is not a supply-driven sector, generally speaking, the lateness of supplies was not a major issue except in the beginning stages when child-friendly spaces were being set up where hardware needed to be used. The lack of emergency experience among UNICEF staff in these offices has also challenged the speed of the response.

Overall, it was perceived that the approaches used were cost-effective and flexible, using a service delivery approach (more software than hardware), and work was done through local implementing partners, many of whom were working with volunteers and community members. Third-party monitoring has been set up, especially in hard-to-reach areas, as was field monitoring by UNICEF and its partners.

In the Syrian Arab Republic, there has been some concern in regards to the lack of capacity of national partners in protection and the lack of many international NGO child protection partners in the Syrian Arab Republic. As a result, UNICEF has had to put significant time into building the capacities of partners before they were in a good position to respond adequately.

Use of guidance tools

Child protection and other related humanitarian guidance exists and is relevant for the various contexts. There is clear evidence that guidance on GBV case management, referral mechanisms and psychosocial programming is being used and significant efforts have been

made to adapt this guidance in the various working groups to varying degrees across the region. In Lebanon, a national child protection system mapping and assessment was conducted with the government prior to the Syria crisis. This has provided a road map during the period of transition and resilience building (2014–2015), leading to the development of a National Plan for the Protection of Children and Women in 2014.

MRM guidance is being used with training and discussion carried out for relevant staff and partners. There is some work being carried out by the MRM team in Lebanon that demonstrates that they are following MRM guidance. The team has developed a work plan that includes a project providing psychosocial counselling to former child soldiers and their caregivers.

Despite these gains, there remains a clear need for more training and awareness raising with partners around humanitarian principles, human rights-based programming, and protection issues more generally; and guidance exists for all of these areas. On broader issues of working cross border, dealing with non-state entities and effectively working remotely, there is little evidence that has been sought out or used.

EDUCATION

How well did UNICEF deliver assistance?

Although UNICEF was able to meet its targets, the organization was slow to adapt to the changing situation and reflect the education needs of refugee children. The primary problem is the quality of the services delivered, both in terms of adequately measuring and shifting the programme towards achieving quality results.

Prior to the L3 declaration, while UNICEF was doing upstream work and was working on building the capacities of governments, there was no strategic approach or long-term systematic vision. In Jordan, programming was focused on camp-setting formal education.

Over time, UNICEF modified its targets and took the co-lead of the education sector in close coordination with the national ministries of education.

UNICEF has advocated for and facilitated the enrolment of students into schools (regular and double shifting) and certification. UNICEF also supported the setting up of non-formal education services in camps and host communities/informal settlements and scaled up support to adolescent programming (focused on vocational training and life skills).

With limited funding and guidance, the adolescent programme in the Syrian Arab Republic was able to expand its outreach from primarily focusing on adolescents in United Nations Relief and Works Agency camps, to a programme that is serving the larger population of Syrian adolescents with vocational training and life skills, as two main components.

Severe overcrowding and condensed school days limited the quality of the education services provided, in addition to the fact that substantial numbers of refugee children remain unserved.

Appropriateness of the response over time

The education response is broadly considered appropriate to the context and demonstrates adaptability across country responses (i.e. integrating new technology, moving toward longer-term approaches). Although the response was seen as late to scale up, the programme was able to adapt to the situation and used different interventions and modalities to deliver planned results.

The implementation process was described as ‘learning by doing’ and UNICEF’s relationships with governments were perceived as having impacted the appropriateness and objectiveness of programming. These relationships enabled UNICEF to reach its targets and meet the needs of affected refugee children, but also hindered the organization’s ability to provide services for children in hard-to-reach areas (the Syrian Arab Republic), outside of

governments' own plans or to implement beyond the national curriculum. UNICEF was able to scale up its Adolescent Development and Participation programme, and work on issues that have a longer-term response, such as the self-learning curriculum and certification (still in discussion and in the initial development phases).

Assessment and monitoring in the Syrian Arab Republic was slow to start, largely due to governmental constraints that affected UNICEF's understanding of the situation and identification of vulnerable groups. The organization enhanced its understanding of needs by working through various stakeholders (third-party monitoring/facilitators in hard-to-reach areas), but this also inhibited the quality assurance of delivered services. A Syrian Arab Republic remote assessment was conducted in late 2012. In Lebanon, a first education rapid needs assessment was conducted in the first half of 2012. In the Za'atari camp in Jordan, the first joint education needs assessment was conducted in early 2013.

Scale up to meet needs

Education advocacy in the sub-region allowed programming to gain momentum and to draw attention to education in emergencies. The No Lost Generation initiative facilitated a primary financial contribution and enabled UNICEF to scale up and meet its mandate under the CCCs.

Large numbers of refugee children, including adolescents, are still without any educational system (formal or non/in-formal). Questions remain in regards to the quality of programming, proper monitoring and reporting (especially to donors) and it is unknown whether UNICEF could increase its capacity further to meet all of the needs of affected refugee children. Adolescent programming is currently not a priority issue within education or child protection, and this could be the next 'lost generation'.

Efficiency of the response

The response became more efficient and cost-effective over time. Despite the activation of the L3 designation and the implementation of the L3 SSOPs, internal processes remained slow and not very cost efficient.

The recruitment process, and the organization's ability to obtain the right staff profiles, is an ongoing issue that affects programme delivery and harms relationships with government counterparts. A lack of Arabic speakers with relevant qualifications and the use of short-term surge capacity with little understanding of the cultural context are key concerns.

Procurement of supplies and the processing of agreements was slow. The use of supplies (kits) is unclear.

Use of guidance tools

Operational education programming was generally guided by the CCCs and education-specific guidance, including for education in emergencies, the Inter-Agency network for Education in Emergencies (INEE), standards for remedial education, setting up school clubs and implementing activities in child/adolescent friendly centres. Contextualization of this guidance and capacity building of staff and partners was initially missing, but the INEE standards were contextualized in Lebanon in 2014 and in Jordan in the first quarter of 2015. There is a need to develop international/national policies on rights to education and the maintenance of a home curriculum for refugee children.

HEALTH

How well did UNICEF deliver assistance?

Before the crisis, health sections were small in terms of staffing and programming. The crisis came without country offices having prepared or planned for how to respond, and

the regional and Headquarters health response was not guided by effective emergency leadership or strategic direction. Evidence was found in some country offices that senior management had marginalized health (e.g. Jordan).

Annual work plans were developed in some countries (e.g. Lebanon), but were not developed consistently across the region. The focus and prioritization of polio vaccination was made across the region from 2013, but no clear documentation was carried out on how strategic programming decisions were found or how other health programming was prioritized. For example, basic health services were supported in Lebanon and the Syrian Arab Republic, but not in Jordan and Turkey.

The CCCs were used to support UNICEF operational programming in countries at varying levels (not consistently), and implemented to a varying extent. For example, Commitment 3 is to ensure that children, adolescents and women have equitable access to essential health services with sustained coverage of high-impact preventive and curative interventions, which includes ensuring that at least one basic emergency obstetric care facility is provided per 100,000 people (Benchmark 3). UNICEF Jordan reported that the responsibility to fulfil this benchmark was “delegated” to WHO and UNFPA, but no monitoring was put in place to determine whether the benchmark and commitment were achieved or not.

Programming support for immunization was focused on the cold chain, warehousing and logistics. The communications plan for polio was well done: awareness of polio vaccination programming was high.

Affected populations had no clear understanding of UNICEF health programme priorities outside of vaccination.

A results-based approach was used for polio campaigns, to determine where coverage was lacking and the prioritization needed for future rounds.

Implementing partners supported polio immunization and the delivery of primary health care services.

Appropriateness of the response over time

No clear understanding of the appropriateness of the response among the affected population was found nor were mechanisms by which the affected population could provide feedback regarding health services.

Innovative approaches were used in polio to access hard-to-reach areas (e.g. polio vaccination at borders, monthly immunization in ITS via mobile units). Some other examples of how programmes were adjusted to meet the needs were highlighted (e.g. hygiene kits moved to a voucher system).

UNICEF worked closely with ministries of health and local partners. There was no complete description or evidence of a full understanding of the situation, scope and scale of the needs and strategic and programming approaches required for health in the region. Vaccination campaigns in response to outbreaks occurred, but no other strategic insights were provided for other health programmes.

Implementation and technical recommendations provided by the health section were not always acted upon (e.g. in Jordan, the use of infant formula milk at the northern border).

It was difficult to conduct systematic assessment and monitoring for varying reasons depending on context, including government consent and access issues (the Syrian Arab Republic). Dynamic use of third-party monitors (Lebanon) and facilitators (the Syrian Arab Republic) using local partners to confirm vaccination status and the status of health facilities seems to be working well. Opposition areas in the Syrian Arab Republic are not well monitored and overall, assessments are weak in these areas.

There is limited integration of humanitarian health programming and longer-term health system strengthening across the region (e.g. there is no link between primary health care services for refugees in ITS and the national health system in Lebanon). Jordan is exploring offering an insurance scheme and solutions for health financing.

Scale up to meet needs

The mandate for polio vaccination was met, but there is limited understanding of the scope of the other health programming needed. There are serious unmet needs/problems perceived by affected populations in camp settings.

Capacity building and cooperation with ministries of health was ongoing but no strategy or programming was discussed in regards to how these partnerships were being developed and maintained. Structures were not in place for effective management and programme delivery (e.g. field level staff in Lebanon were underutilized and centralized health staff had limited leadership and delegation responsibilities).

An overall lower proportion of country funding was allocated for health compared with other sectors. Immunization was prioritized for the majority of funds and resources.

Health sections were limited in terms of scope of work and ability to deliver programming, due to funding constraints and limited priority for health within senior management. There was limited focus on cost-effectiveness and the quality of programme delivery.

Efficiency of the response

Health staff were described as being the correct profile. Recruitment took time and it was difficult to get people with the appropriate skills, including language. Constraints were discussed in regards to the short nature of funding and the inability to plan human resources needs for the long-term. The chief

of health was the only person in Lebanon until November 2013, and a chief of health was only recruited for Jordan in September 2014.

Supplies were delivered efficiently, with other agencies and NGOs supporting, where necessary. Vaccinations were clearly available. Cost effectiveness was not always achieved (e.g. vaccines were flown in from Copenhagen and planning and procurement of polio communications was completed at the last minute).

Use of guidance tools

Polio guidance was applied well and WHO/ UNICEF worked closely together. Sphere standards were referenced, but no examples, documentation or evidence were provided for this. Guidance needs to be more contextualized to the region.

WATER, SANITATION AND HYGIENE

How well did UNICEF deliver assistance?

In the later stages of the L3, UNICEF has delivered assistance using an equitable approach based on vulnerability and by working closely with partners (the governments in all countries and the SARC in the Syrian Arab Republic). Although a decision was made at a 2012 regional-level meeting to prioritize WASH, UNICEF Syrian Arab Republic did not prioritize this and it took UNICEF Lebanon time to scale up. UNICEF Syrian Arab Republic prioritized water supply, UNICEF Jordan prioritized WASH in camps and UNICEF Lebanon moved to two streams of work: humanitarian and infrastructure. All three country offices are looking at infrastructure projects, which is unusual for UNICEF.

Implementing partners mentioned that plans were good but implementation was slow. Water is now being provided in a sustainable way.

Coordinating partners feel that UNICEF has done a good job in terms of bringing parties together. Specifically for Jordan, partners feel

that UNICEF did a better job in camps than in non-camp situations. The finding is weak on an overall level as the evaluation was not able to collect information for the Syrian Arab Republic, and was only able to collect very little information for Jordan.

In terms of affected populations, the findings are context specific and split between camp settings and ITS. Water supply (pumping and trucking) is not enough to meet the needs and the affected population is finding alternative ways of supplementing water needs (i.e. buying it) or building their own toilets. Sewage/drainage is not working in camp settings. The overall feeling is that delivery is expensive and not sustainable.

On an overall level, stakeholders mention that UNICEF's impact on WASH is very positive (i.e. given the absence of disease/no outbreaks in camps).

There is a mix of opinions in regards to what UNICEF's mandate and role is or should be. Some (government, donors and some implementing partners) want UNICEF to focus on coordination and policy setting only and (even) less on implementation; whereas others (mainly implementing partners) want to see more technical hands-on capacity at the field level. The same mixed opinions exist with regards to UNICEF only targeting refugees and/or camps and/or only humanitarian/emergency programmes.

The overall impression is that UNICEF managed to provide a relevant, effective and appropriate response given the environment in which the organization was working.

Appropriateness of the response over time

For UNICEF, working with governments despite sensitivities has been relevant over time. Assessment and monitoring was weak in Lebanon and the Syrian Arab Republic due to the lack of data or access, which made it difficult to assess whether the programmes are based on actual, disaggregated needs. Assessment and monitoring also suffered

from overreliance on information from governments and other partners. Assessment and monitoring has been relatively easier in Jordan (especially in camps), but much harder in Lebanon and especially in the Syrian Arab Republic. All country offices worked with governments and ministries to deliver assistance using an approach that was not just about status. There are different aspects to take into account for each country (water scarcity in Jordan, security in the Syrian Arab Republic and non-permanent ITS in Lebanon).

Implementing partners are of the opinion that overall, UNICEF delivered an appropriate and relevant response over time and that programmes adjusted to the operating environment, including with special focus on vulnerable groups for Jordan but not the Syrian Arab Republic (no implementing partner WASH information for Lebanon). Evidence-based decision making has taken place in some countries, more than in others, which used 'learning by doing'. In the Syrian Arab Republic, UNICEF relies on third-party monitoring using facilitators engaged through a local institution that deploys and manages them.

In terms of coordinating partners, the overall findings were limited, country specific and mixed. The findings indicate that overall assessments are either not needed (WASH needs for all are found to be obvious), or 'non-traditional' ways of doing assessments (specific to the Syrian Arab Republic) be identified. Coordinating partners in Jordan felt that UNICEF should not be involved in infrastructure projects, rather focus on leadership and coordination (not implementation). They feel that UNICEF can do more in terms of the prioritization of activities. However, it was found that programmes are being adjusted to the operating environment.

In regards to affected populations, the findings are by context (camp and ITS). The overall view was that the needs are clear and assistance is relevant to the needs but the approach is more geared towards pleasing governments

than meeting the needs. Specifically for camps, there is no good feedback mechanism in place and populations are being intimidated by local gangs. Proximity to water sources is key to access.

For ITS in Lebanon, the Government requires that solutions are (or appear) temporary: each household has access to toilets, although of temporary nature.

WASH (minimum standards, CCCs, standard operating procedures) are relatively well defined and applied (without the need for extensive assessments). However, needs assessment and monitoring are still required to identify and address the context-specific issues and the geographical spread/prioritization of where vulnerable groups are located.

Scale up to meet needs

Scale up was initially slow, but with increased staffing, UNICEF met targets proportional to its capacity over time. Although UNICEF is meeting the CCCs to a certain extent, the needs are many, and access is a constraint (cross line for the Syrian Arab Republic and dispersed locations of ITS for Lebanon).

Although funding has not been a problem to date, the earmarking of funds by donors does not allow interventions to be responsive (no data for Jordan).

In terms of implementing partners, the findings were inconclusive in regards to whether the response is proportional to capacity. UNICEF is meeting its mandate where possible but there is not enough information from implementing partners to come to a firm conclusion. Delayed payment to implementing partners due to PCA issues has meant delayed interventions aimed at meeting obligations. Donor earmarking of funds impacts the ability to be responsive to needs.

For coordinating partners, there is limited information except in the area of finance. Funding was been made available for camps

and not for non-camp situations (governments indicate that UNICEF is hiding behind a funding shortfall). Some donor funding can only be used for short-term projects (water trucking) and not for longer-term infrastructure projects.

The PCA process and the short duration of PCAs have impacted partners' responses (i.e. in terms of timeliness, sustainability, appropriateness, efficiency, etc.) and as such, UNICEF's ability to scale up.

Efficiency of the response

For UNICEF, the L2 declaration was about recruiting staff (inconclusive data). From the L3 declaration onwards, the response was not cost efficient at the start due to procurement issues/delays, partially related to lack of staff in the country offices or lack of WASH expertise on supply teams. It took time to set up the structure to support programme interventions (i.e. staff deployment was slow, and the PCA process was slow given that SSOPs were not being used). Since mid-2014, deliberate efforts have been taken towards cost efficiency, including local procurement, establishment of long-term agreements, local production (chlorine/water supply network), risk analysis on 'big supplies', and more predictive planning.

In terms of implementing partners, there were mixed findings on efficiency. Costs and staff profiles are sufficient, but implementation and staff deployment are slow. Implementing partners say that the response is cost efficient, that cost efficiency is built into the PCA as this has to be approved and they are audited regularly. The pace is not efficient (PCAs take time and implementing partners mitigate by doing their own procurement) (no data for Lebanon).

In regards to coordinating partners in Jordan, staff recruitment and the process of getting technical profiles in has been slow. Processes of establishing contracts to get work done have also been slow and UNICEF has relatively high overhead.

The overall understanding is that the WASH response was costly, however not much can be said about cost-effectiveness. For several (contextual) reasons – outside the sphere of UNICEF influence – the response could not transform from emergency/short-term to longer-term/sustainable/efficient.

GUIDANCE

Use of guidance tools

The CCCs have been applied and response plans have been framed based on the CCCs, but are not all relevant to the crisis. Civil society partnership guidance was used in the selection of implementing partners.

A variety of guidance has been applied, albeit not systematically across the region (e.g. IASC guidance, EWEA platform, Sphere standards, non-state actors guidance, humanitarian performance monitoring guidance).

Challenges include the underestimation of the MRM and what it takes to implement well without impacting UNICEF's mandate. Guidance was insufficient on streamlining PCAs and the contract process, including justification of why partners are selected (including private versus NGOs) when using the L3 SSOPs. The SSOPs are not as effectively used as they could be.

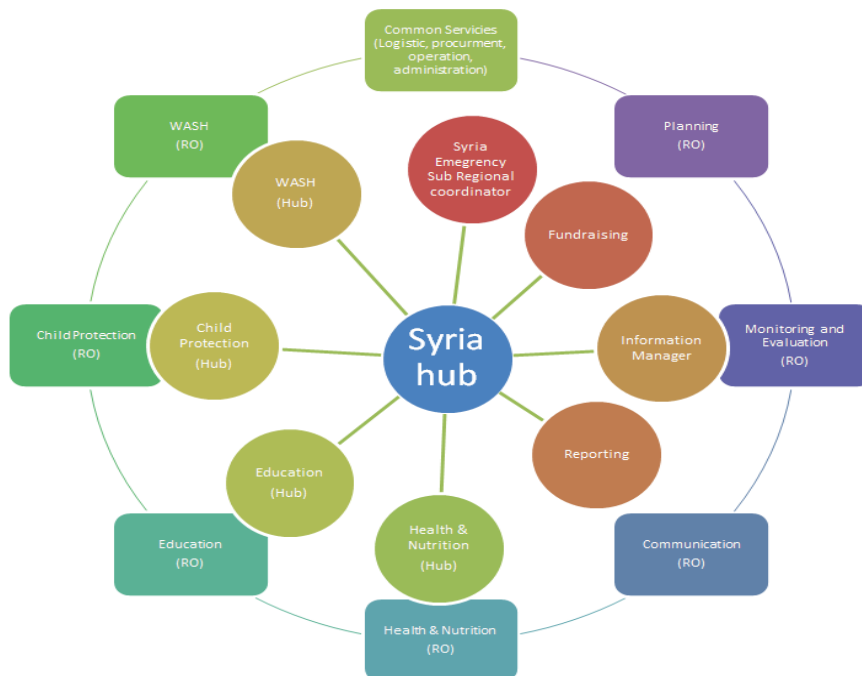
Gaps include the lack of organizational knowledge on international humanitarian law, human rights approach and non-state actor guidance. Much more best practice guidance should be shared, as well as lessons learned.

APPENDIX 13: TERMS OF REFERENCE AND ROLES AND RESPONSIBILITIES

Coordination forum on Syria crisis response

(Version April 2013)¹

HQ/RO/CO	Fortnightly	EMT	The EMT will serve as a 'light and strategic core team' under the RD/ED to ensure effective, coordinated and speedy corporate support to the response
HQ	Fortnightly	T – EMT	Coordinate the Divisions' technical engagement with and support to the response to the Syria crisis
RO	Monthly	CMT	The CMT will serve as a core team under the RD to provide strategic directives at each phase of the emergency, take stock and decide on key issues related to L3
RO	Weekly	CMT core team	The core team under the RD will serve to arbitrate key immediate bottleneck red flags and determine weekly priorities for each pillars to speed corporate support to the response
RO	Weekly	Syria Hub	The Hub, led by the Syria Emergency Sub Regional Coordinator, will operationalize strategic directions, help address bottlenecks at field level requiring support, and identify issues for the CMT
RO/CO	Fortnightly / weekly	Conference call with CO	The weekly conference call with COs will debrief on past activities and progress against plans, provide updates, and identify bottlenecks to be referred to appropriate forums for support
CO	Frequency led by CO	Crises management team	The CMT will serve as a 'light and strategic core team' under the Rep to ensure effective, coordinated and speedy corporate support to the response
CO	Frequency led by CO	CMT – CO	The CMT in the country office will serve as a core team under the Representative to provide strategic directives at each phase of the emergency, take stock and make decision on key issues



<p>overall corporate response and performance in respect to the Syria crisis and mobilising global level support for the response. The team leader is also the primary liaison with the MENARO Syria Emergency Coordinator.</p>	
<p>2. EMOPS Syria focal point provides support/deputizes the HQ Syria Task Force and EMOPS Syria task team leader with a specific lead on corralling and coordinating requests from other Divisions and EMOPS Sections in particular on:</p> <ul style="list-style-type: none"> - Programmatic strategies (with PD/HATIS) - Resource mobilization (private and public donors) (with PARMO and PFP) - Human resources, surge, etc (DHR) - Supply and logistics (SD) - Communications (DOC) - Other operational issues (PCAs, VISION, etc...) <p>The focal point works closely with the Humanitarian Policy team on the development of the advocacy strategy and risk management approach.</p>	<p>Francois (100%).</p> <ul style="list-style-type: none"> - Portfolio on ESARO to be fully taken over by June under Jalpa's supervision. - Other MENA countries in particular Sudan, Yemen and OPT: under Jalpa's supervision with James Hedges/PD support.
<p>3. Information Management (filing, classifying, scanning external information, pulling together information products, internal information sharing)</p> <ul style="list-style-type: none"> - Produce mapping to inform planning, advocacy and fundraising (GIS, info graphics, etc) - Establish and maintain data and information database on shared drive. - Produce regular OPSCEN Briefing notes on Syria crisis drawing from external sources of information. - Create/update fact sheets per country. 	<p>1 OPSCEN-ER in NY (approximately 50%),</p>
<p>4. Writing and Reports (meeting minutes, tracking of decisions and actions, support briefing notes writing speeches, support/guide RO on reports, etc...), in particular</p> <ul style="list-style-type: none"> - Preparing requests for information from OED, DO, Divisions, ROs, COs - BNs (EDMs, P-level IASC, OED) and regularly update generic key messages 	<p>Tsedeye Girma (80%)</p>
<p>5. Inter-agency post-crisis planning and programming – engagement with the IATF. Secondment to DPA.</p>	<p>Michele Ferenz (50%)</p>
<p>6. Advocacy and humanitarian policy advice, coverage of inter-governmental discussions (SC, GA, summits, etc...), risk management strategy, remote programming and management, strategy for engaging with NSEs, programme criticality.</p> <ul style="list-style-type: none"> - To review SCO current risk management strategy, remote programming and management framework and provide advice on ways to strengthen the approaches based on LL 	<p>Gary Risser (80%) (Nurten to support the annual CAAC Report, and need to hire Maia on a P2 TA to work with GB on CAAC).</p>

11 January 2013 - DRAFT

(Somalia, Iraq). - Contact with NSEs: review UNICEF's strategy for engaging with NSEs, liaison with OCHA Policy Section to contribute to IA approaches. - To support the finalisation of programme criticality exercise in Syria. - Possible surge support missions to Damascus/Amman to assist with implementation.	
7. Partnership management and inter-agency liaison in Geneva , including with IASC, UNHCR (LoU development), WFP, liaison with NGO consortia, as well as key donors. Back-up on short deadlines with the time zone difference (on writing, reporting, etc.)	Annette (30%)

The following specific additional functions will continue to be given priority focus and support by EMOPS sections during the duration of the Syria L-3 emergencies

Humanitarian Performance Monitoring System - To review systems in place and strengthen where needed in Syria, Lebanon, Jordan, and then Turkey and Iraq. - To regularly inform the EMT and technical EMT and EMOPS Syria team on progress.	HPS
Knowledge management, documenting Syria timeline, inputting lessons learnt	HPS
SSOP Level 3 guidance and compliance monitoring, follow up with DHR on IRT matters related to Syria	HPS
Support to cluster coordination matters.	GCCU
Support to strategic engagement with the IASC members, UN agencies, NGOs, donors and surge support.	IAHP
Contingency and preparedness planning	PDRR

EMOPS Director:

Will focus his time on Syria L3 and L2 responses (i.e.Mali plus), but will continue to chair EMOPS standing meetings, and will remain engaged in particularly on: Sri Lanka, EDM meetings, MTSP Steering Committee, Programme Criticality, L2 and L3 SSOP review, Policy and Procedures on Clusters, HCR partnership issues, EMOPS OMP preparation oversight.

Of the committees he normally covers, these will be delegated according to the below.

- Publication Committee (EMOPS not to attend)
- Standing Committee on Research and KM (HPS to cover)
- Global Evaluation Committee (AI)
- Efficiency and Effectiveness Steering Committee (AI)

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- MORES Steering Committee (AI with HPS)
- Peer Review Group on RBM in MTSP (HPS)
- Strategic Programme Advisory Group of the PB & Education Programme (AI with PRS)
- PGMT (AI with HPS)

Role of the Deputy Directors:

The Deputy Directors need to be in copy of all information about Syria so they can step in for the Director if this is required. However to simplify workflow, there will not be a formal quality assurance/clearance role for the DDs with regards to Syria (e.g. BNS).

Deputy Directors will oversee all the “other work” of EMOPS that will still be on-going but after a clear prioritization process to drop some of it, and continue the quality assurance on L2s and other emergencies as well as other EMOPS work. Since the Director will focus on the L3/L2 responses and a few other priorities, responsibility will be delegated for oversight of files as follows:

- Direct oversight of HFSS work on non L3/L2 responses (e.g. DRC, CAR)
- High threat environments (except PC): AI
- Transformative Agenda: DC
- All other IASC: DC
- Knowledge Management: AI
- CAAC, POC, etc.: AI
- Country Support: AI
- DRR, Resilience: DC
- Gender, HR, disabilities, CD, cash/innovations: AI (this work will possibly be put on hold)
- MoRES: AI
- Integration, PB, CivCap: AI
- NGO Partnership: DC
- Attending ITFs at D level: AI
- Preparedness, EWEA: DC
- Stand-by partnerships: DC

In addition, it is requested that each EMOPS section reflect on which tasks are to be maintained, and which tasks if any should be suspended for three months, which tasks require additional support from another section or delegation to another section and any foreseeable additional tasks. The following is an example of this for the HFSS section.

Prioritisation of immediate tasks within EMOPS (for HFSS)

Tasks to be maintained	Tasks to be suspended for 3 months	Tasks requiring additional support or delegation to another section	Foreseeable Additional Tasks
HFSS			
<ul style="list-style-type: none"> - Mali L2 - EAPRO, ROSA support - WCARO, TACRO support - ESARO, CEE CIS support 	<ul style="list-style-type: none"> - Evaluations (with rob McCouch) 	<ul style="list-style-type: none"> - EWEA approach (finalisation lead by PDRR) - HR in 	<ul style="list-style-type: none"> - Preparation for Exec Board (BNS,

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<ul style="list-style-type: none">- MENARO support (Sudan, OPT, Yemen, Other countries)- First-port-of call approach as a contribution to OMP development- Finalisation of rolling HAC (with DO/Rafael's increased assistance)- EPF and CERF management- Humanitarian Advocacy strategies (with HPS)- CAP MYR- CERF UFE second round (Lead agency)- Humanitarian financing (CERF primarily and TA related)- Funding updates to PARMO and HR fast track list.- Cost effectiveness and efficiency Divisions functions review(Reuben and Naomi to assist)	-	emergencies	presentations, etc.)
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Terms of Reference for the Crisis Management Team on Syria crisis response

The sub-regional nature of the crisis requires a coordinated approach across the 6 countries to deliver against CCCs in an efficient, effective, and timely way. As the humanitarian response covers several sectors, the approach has to be integrated, coordinated.

Objective of Crisis Management Team (CMT): The CMT will provide strategic directives at each phase of the emergency take stock of the situation and decide on key issues and funding allocations.

Expected results: Syria, Jordan, Lebanon, Iraq, Turkey, Egypt Country Offices receive timely and effective support from RO sections, for the implementation and scale-up of high quality emergency response actions.

Frequency: Monthly. When there is critical new information in the emergency, the Syria Emergency Sub Regional Coordinator, on behalf of the RD, will send out an email alert to CMT members with the latest information.

CMT accountabilities

1. Define a common vision for the response and agree on analysis of how the crisis will develop.
2. Provide strategic directives at each phase of the emergency, take stock of progress against plans, and make decisions on key operational and programme issues.
3. Review the implementation of UNICEF's scale up plans against targets on flagship programs
4. Provide specialist guidance to the RD on key programme and operation areas.
5. Coordinate advocacy efforts at RO & NY level in support to CO strategies

Core CMT: MENARO RD (chair); DRD; Chief of Operations; Regional Chief of Emergency; Syria Emergency Sub Regional Coordinator - *Note: Security, Communication, Child Protection and HR will be invited depending on the agenda (pillars drivers)*

Members of the Expanded CMT : MENARO RD (chair) ; DRD ; RO Chief of Operations ; Regional Chief of Emergency ; Chief of Coms and Media ; Chief of HR ; Security Advisor ; All concerned RO Advisors ; Syria Emergency Sub Regional Coordinator

End.

Terms of Reference on the Syria Emergency Sub Regional Hub

The Syria crisis is affecting six countries. The sub-regional nature of this crisis requires a coordinated regional approach for planning; monitoring; reporting, communications; sharing HR resources; fundraising not only for programmes but including also for the areas of supply, human resources and financial transactions. For this purpose a sub-regional "hub" dedicated to the Syria crisis was set up. This has allowed a more rational use of resources and improved coordination

The RD, as chair of the CMT, will provide strategic leadership to the overall response, oversight of progress and management of the response, and will task the Syria hub to implement the key decisions of the CMT.

Expected results: Strategic decisions are implemented and bottlenecks in providing assistance for vulnerable women and children are identified and resolved.

Frequency: each Monday at 10h00

Syria Hub main Tasks and Responsibilities:

- Maintain an up-to-date overall picture of the humanitarian situation;
- Provide analysis of developing humanitarian issues and priorities for children, including recommendations for action and advocacy, in close collaboration with field colleagues and MENA Regional advisors;
- Ensure provision of support to CO on programmatic and operational issues as requested, including support to ensure leadership and participation in assigned sectors/clusters¹;
- Support remote programming interventions (supply/logistics, PCAs, third party monitoring, trainings) in close collaboration with Syria, Jordan, Lebanon, Turkey, Egypt and Iraq COs;
- Keep the RD and the Crisis Management Team (CMT) regularly informed on all progress, developments, key issues; Raise "red flag" to RD on a weekly basis
- Ensure the effectiveness of humanitarian response through improved interagency regional level coordination;
- Contribute to the development of overall humanitarian strategies, in close collaboration with CO, RO, HQ within UNICEF and with humanitarian actors and aligned with CCCs;

The Syrian Sub Regional Hub set up will be structured as follows for 2013 drawing from a combination of full time dedicated staff (Core Team) and staff with part-time responsibilities in addition to other duties (focal points):

a) Full time on Syria crisis²- Core team

- Syria Emergency Sub Regional Coordinator (L5/D1) ; Information Management Specialist (L3) ; Reporting Specialist (L3) ; Fundraising Specialist (L3/4) ; Operation Specialist (L3/4) ; Procurement Specialist (L3/4) ; Logistics Specialist (L4) ; Human Resources Specialist (L3) ; Emergency WASH Support (L4) ; Emergency Child Protection Support (L3/4) ; Emergency Education Support (L3/4) – TBC

b) Partial time on Syria crisis - The Focal points will be composed of the following members:

Program emergency focal point	Operation emergency focal point	Emergency regional cluster
<ul style="list-style-type: none"> ▪ Education; Nutrition; Health; WASH ; Child Protection ; Communication ; C4D ; Youth ; M&E ▪ Planning - Post-crisis planning and programming 	<ul style="list-style-type: none"> ▪ Logistic assistant – Procurement assistant ▪ Human resource assistant 	<ul style="list-style-type: none"> ▪ REA ▪ Emergency Specialist –Programme assistant –

The Syria Hub, will be chaired by the Syria Emergency Sub Regional coordinator, and include Programme/Operation focal points.

Reporting lines: Syria Emergency Coordinator will report to RD on a regular, daily basis and keep close contact with REA, CO Representatives and Deputy Representatives. Other members will be reporting to their respective RO clusters, except for IM, Reporting and fundraising staff who will report to Syria Emergency Sub Regional Coordinator

¹ In case of worst case scenario if there is a massive influx or large scale CB activities; IRT will be requested to support

² Addition humane resource will be add depending on the needs

³

Terms of Reference - Pillars Working Group

The operating context in which the Syria Hub is working is constantly evolving and becoming more challenging with the L3 declaration. To improve the consistency and quality of support provided to the COs, the CMT recognized the need for rapid implementation of 7 specific strategic priorities with priority actions identified to ensure concerted efforts to make UNICEF's response more effective, and to ensure greater accountability. Each Pillar will have a "Driver" and an alternate. The PWGs would meet weekly to support to the RD on the improvement and implementation of key strategic elements of the humanitarian response, specifically:

1. **Programme Performance Monitoring** – Support CO to ensure quality programme planning, delivery and provide support to the implementation of Level 3 Humanitarian MoRES (humanitarian performance monitoring) including SitReps with at minimum monthly monitoring and reporting.
2. **Human Resources** - overview short term Surge needs (OSM), with medium and longer term organogram changes and staffing requirements.
3. **Supply & Logistics** : overview the Supply Plans (RRP/SHARP Supply Plans and Contingency Plan Supplies) tracking what is ordered, procured, received and delivered to the partners within specified time frames (1 weeks, 4 weeks, 8 weeks);
4. **Resource Mobilization**: quality, flexible resources are mobilized in a timely manner to meet the rights and needs of children and women.
5. **Advocacy priorities** defined and coordination of an approach to advocacy, including regularly updating key messages and preparing for specific events/opportunities.
6. **Communication**: accurate information about the impact of the situation on children and women is rapidly provided to CMT and the general public through local and international media. Humanitarian needs and the actions taken to address them are communicated in a timely and credible manner to advocate for child-friendly solutions, increase support for the response and, where necessary, assist with fundraising
7. **Security**: Security risks that could affect staff and assets, and subsequently the emergency response, are identified, assessed and managed.

For all, outline key areas for decision making at higher levels (e.g. Director-level EMT, ED, IASC Principals, ERC) in support to programme and operations;

Expected results: Coordinated support from RO at technical-level is streamlined and comprehensive, enabling programmatic and operational scale-up, with a system to raise alerts and red flag to the Syria Emergency Sub Regional Coordinator, Regional Director and CMT.

Frequency: monthly with RD and weekly during the Syria hub meeting

Interaction and Accountabilities between Pillars, Syria Hub and CMT

On a day-to-day basis, Drivers for each pillar are expected to move forward priority tasks under their responsibility with their respective teams, keeping the Syria Emergency Sub Regional Coordinator informed. When necessary, Drivers for the individual pillars should bring to the attention of the Syria Emergency Sub Regional Coordinator, Regional Director and CMT any bottlenecks, red flags or aspects requiring RD/CMT/SEC decision. Accountabilities between Pillars, the Syria Hub and the CMT shall therefore be articulated as follows

- **Pillars Working Groups:** technical teams work on advancing tasks identified (see below). The teams are comprised of the already identified Syria focal points and the Pillar Drivers (+ alternates).
- **Syria Hub Task Force:** Group gathering Syria Focal Points and/or Drivers (depending on sector/pillar) to share information /CO follow up and identify next steps or bottlenecks for resolution (as per current Syria Hub ToRs).
- **CMT:** Pillar Drivers report to the RD on progress on a monthly basis, and when necessary bring red flags and bottlenecks to RD/SEC's attention for decision/resolution.

OVERVIEW OF PRIORITIES - WITH WEEKLY FOLLOW-UP BY SYRIA HUB AND REGULAR FEEDBACK FROM SYRIA COORDINATOR TO REGIONAL DIRECTOR AND CORE CMT TEAM						
Security	Program performance	Human Resources	Resource Mobilization - Contribution Management	Operations Supply/ logistic	Communications	Advocacy
Driver: Stuart	Driver: Mima ad interim	Driver: Christine/Betel ad interim	Driver: Mima ad interim	Driver: Sonja	Driver: Simon	Driver: Jean-Nicolas
PRIORITIES	PRIORITIES	PRIORITIES	PRIORITIES	PRIORITIES	PRIORITIES	PRIORITIES
1	Support CO on programmatic or operational issues	HR strategy for all countries with organograms, including costing of all the structures	Weekly update with income received ; utilization ; unutilized; unallocated ;	Supply update to be shared on a weekly basis with key indicators - Orders Raised - Stock Levels and Rotation - Supplies delivered - BCP updated monthly All updates to be made against targets in applicable supply 'logistic plans; all updates to include clear identification of bottlenecks requiring solving.	Op-Ed by ED a fortnight ahead of two-year mark of start of the protests	SG Report on CAAC - MRM
2	Track progress and performance - Update the red flag for each country to the attention of the RD	Clear and comprehensive update to the OSM including red flag on end of contract dates 6 weeks before end of contract).	Monthly update with EPF reimbursement.	Cost of doing business / costing of the full operation to be done with all Cos	Log-book of Regional Director comms engagement. -	Log book of Regional Director engagement with key players (JSE, JSR, Lamani, LAS, OHCHR) - to be done with RD Front Office
3	Provide analysis of humanitarian issues and priorities for children	Monitor that all new staff receive an inductions - & ensure that the -RD clear all P4 and P5 recruitments, and upon request clears P3 recruitments.	Support ("quality control") on finalization of reports due and proposals / regional fund-raising documents		Weekly update Key Messages, Q&A	

TOR of the weekly meeting with the country office: allow debriefing on past activities and new updates, to gather information and to identify bottlenecks to refer to appropriate forums/decision-makers for support (maximum 45 minutes). The weekly CO meeting is chaired by the Syria Emergency Coordinator, and includes the emergency cluster team, Deputy Representatives, Operation managers, and Emergency Coordinators from COs on technical aspects. When the RD participates, every 3 weeks (depending on need), the Representatives are also invited.

Annexes:

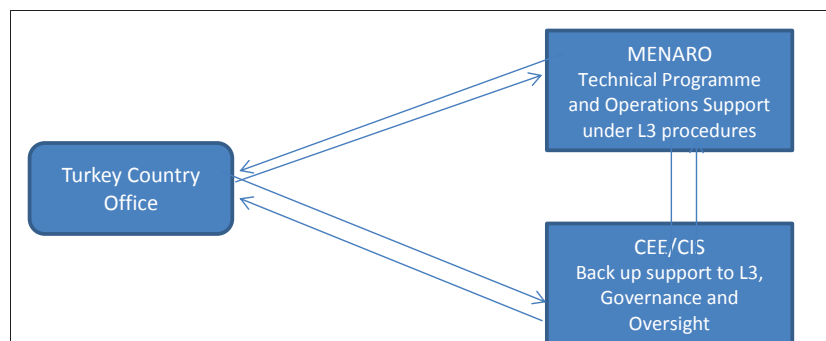
- c) Weekly internal meeting Schedule
- d) Who is who in Syria Hub
- e) Contact list for the region (UNICEF, Donors, and NGO/UN)

Enhanced Technical Level Coordination between UNICEF in Turkey, CEE/CIS and MENARO

The Turkey Country Office has already been actively coordinating with and benefiting from MENARO's support since the declaration of the corporate Level 2 UNICEF Emergency Procedures in August 2012. This support has been coordinated between the two regional offices. With the activation of Level 3 Emergency Procedures for UNICEF in January 2013, under the leadership of the MENARO Regional Director, there is a need to streamline the technical and operations support provided to UNICEF in Turkey in support of its response to the Syrian refugee crisis. In this regard, in order to increase the cooperation and ensure strengthened coordination, enhanced efficiency and avoid duplication of the work, the following workflow is proposed to add value to the existing collaboration.

Proposed Coordination Structure:

The diagram below reflects the proposed workflow to ensure the maximum efficiency in supporting the Turkey Country Office with implementation and scale-up of high quality emergency response actions. The workflow follows 2 major principles at technical level: 1) MENARO coordinates the response under the L3 Corporate Emergency SSOPs and 2) CEE/CIS, through Regional Emergency Advisor, is kept informed, participates, and provides backstop support on governance and oversight of processes as required.



MENARO hub will be the first port of call to provide:

- Overall coordination for the Syria response including technical support to the implementation and management of the response by the Turkey Country Office
- Review of sitreps through weekly conference calls and performance monitoring
- Resource mobilisation, allocation and donor reporting
- Media communications
- Human Resources (identification of emergency related staff required to enhance TCO's response)
- Operations support including procurement of supplies
- Technical missions in relation to the Syrian humanitarian response

As part of the Syria Emergency Sub Regional Coordination Structure, UNICEF in Turkey will be responsible to produce/input to the following deliverables in line with the 7 specific priorities:

- Situation Reports (currently frequency bi-weekly)
- Participate in conference calls led by MENARO (a) weekly general conference calls chaired by the Emergency Sub Regional Coordinator with the participation on CEE/CIS Emergency Chief and b) sector specific calls with relevant Advisors as required)
- Dashboard -Performance monitoring and information management of UNICEF's response based upon identified indicators
- Response planning (to be updated as scenarios evolve)
- Advocacy and Monitoring and Reporting in accordance SG report on Children Affected by Armed Conflict
- Supply forecasting, ordering, distribution and end user monitoring
- Communication materials (Q&A and human interest stories, etc.)
- Identifying and tracking HR requirements
- Participate in sub regional financial resource mobilisation (joint appeals, EPFs, etc.)

The relevant CEE/CIS Advisor will be engaged under the L3 emergency response based upon advice from MENARO. In addition, the CEE/CIS Regional Chief of Emergency will participate in weekly calls led by MENARO to review the status of the response. Issues of political/strategic importance will be brought to the attention of the CEE/CIS Regional Director by MENARO.

¹ For further information contact Mirna Yacoub – myacoub@unicef.org

EMOPS Syria L-3 Internal Management Arrangements

As a follow-up to the UNICEF’s corporate emergency activation procedure for Syria and countries affected by the Syria refugee outflow (4th January 2013), an EMT has been established at Director level. In addition, a UNICEF HQ level technical EMT is being established. This is in effect an inter-Divisional task force at working level and its aim is to coordinate the Divisions’ technical engagement with and support to the response to the Syria crisis, in particular follow-up on the implementation of the Directors level EMT’s recommendations and action points.

An extremely important component of this technical EMT or task force is the team of EMOPS staff working on the Syria crisis. In this context and in order to ensure adequate support the EMOPS Director’s co-lead in fulfilling his responsibilities under the UNICEF corporate emergency activation procedure for the crisis, an internal EMOPS Syria team is established for an initial period of 3 months. This team will work under a designated EMOPS Syria team leader (see below).

Designated EMOPS task team members will work on Syria as a priority – estimated between 30% to 100% of their time (see below). For the daily management of their work and quality assurance of their contributions, they will report to the EMOPS Syria team leader, under the overall strategic guidance and leadership of the EMOPS Director. It should be noted that the EMOPS Syria team leader is also the chair/leader of the technical EMT (inter-Divisional task force).

The members of the EMOPS team working on Syria keep their supervisors/section chiefs informed and up-to-date on ongoing discussions. It is crucial that the team members draw upon the expertise and advice of their section chiefs’ expertise as well as that of other EMOPS staff. However the EMOPS Syria team leader will be able to directly task or request team members with Syria related work in their respective areas.

The EMOPS Director will keep all section chiefs abreast of key developments and involve them in consultations for decision-making as appropriate through the regular section chiefs meetings, a regular internal EMOPS meeting on the Syria crisis and through the weekly Director-level EMT meetings that Section Chiefs may attend. Section Chiefs and other EMOPS staff (depending on the topics to be covered) will also be invited to the technical level EMT meetings.

The EMOPS staff working on Syria will seek to keep to a minimum the number of communication requests and channels with the RO and CO. They will communicate with their technical counterparts at RO and CO as well as UNICEF HQ Divisions and external stakeholders after agreement and in consultation with the task team leader. They will keep the team leader and EMOPS Syria focal point systematically informed on information requests and ongoing action in their respective area.

Key EMOPS Syria Team functions	Responsibilities
<p>1. Technical EMT chair and EMOPS Syria team leader chairs the weekly technical EMTs, coordinates their work and manages the EMOPS Syria team to ensure that all EMT decisions are followed-up in a timely manner.</p> <p>The team leader provides strategic advice and overall support to the EMOPS Director on monitoring and assessing the</p>	<p>Silvia (80% on the crisis)</p> <p>Jalpa as HFSS Chief alternate for some of the relevant non-Syria related functions. Silvia remains involved on some of the ongoing work in particular on OMP, L-2 emergencies, staff recruitments.</p>

APPENDIX 14: ASSESSMENTS

Based on the UNICEF (MENA) Assessment Catalogue for all country offices in 2014, the below matrix provides an overview of assessments by country, by sector and by year:

Country	Year	Sector	Title
Region	2012	Education	Rapid Education Assessment Report
	2013	Education	Education Needs Assessments in Syria, Lebanon, Jordan and Iraq
	2014	Cross-sectoral	UNICEF RealTime Evaluation
	2014	Cross-sectoral	Assessment of UNICEF Information Management Platforms
	2014	Education	Syria opposition revised curriculum compared to Syrian official curriculum
	2014	Education	Learning for Syrian children in Lebanon and Jordan
	2014	Education	Curriculum, accreditation and certification for displaced Syrian children in Syria, Lebanon, Jordan, Turkey, Egypt and Iraq
Jordan	2012	Child protection	National Youth Survey
	2012	Cross-sectoral	Assessment of the National Plan of Action (NPA) 2004-2013
	2012	Cross-sectoral	Rapid MUAC Assessment (Za'atari Camp)
	2012	Education	Study to assess the situation of out of school children
	2012	Education	Post assessment of the function of SCs and PTAs in Jordanian Schools
	2012	Child protection	Study on child marriages in Jordan
	2012	Education	Evaluation of the Emergency Education Programme
	2012	Health	Study on causes of neonatal mortality in Jordan
	2012	Cross-sectoral	Findings of the Key Informants and Household Assessments of Syrian Refugees in Host Communities
	2012	Child protection	Study on the knowledge and practices of breastfeeding among mothers in Jordan
	2012	Education	Summer Schools Programme Rapid Evaluation Report
	2012	Nutrition	Nutrition assessment Syrian refugees Host Population and Za'atari
	2012	Health	Rapid Mental Health and Psychosocial Support Assessment
	2013	Cross-sectoral	Shattered Lives
	2013	Cross-sectoral	Assessments desk review on the situation of Syrian refugee children living in Jordan
	2013	Child protection	Early marriage
	2013	Education	Comprehensive Outreach Assessment on Education Needs of Syrians in Ghor and Irbid
2013	Education	Rapid education assessment report	

continued

Country	Year	Sector	Title
Jordan	2013	Education	Joint Education Needs Assessment: Za'atari Refugee Camp, Jordan
	2013	Education	Za'atari Camp Accessibility Assessment - HI - Nov 2012
	2013	Mental Health and Psychosocial Support	Mental Health/Psychosocial and Child Protection for Syrian refugee adolescents in Za'atari
	2013	Nutrition	SMART Nutrition and Food security survey in host communities
	2013	Multi-sector	Informal tented Settlements in Jordan
	2013	WASH	WASH in host communities in Jordan
	2013	WASH	WASH Emergency Assistance in Jordan Schools
	2014	Education	Analytical mapping of informal education
	2014	Multi-sector	Evaluating the Effect of the Syrian Refugee Crisis on Stability and Resilience in Jordanian Host Communities
Lebanon	2012	Nutrition	SMART Nutrition and Food security survey
	2012	Education	Education Rapid Needs Assessment for Displaced Syrian Children
	2012	WASH	WASH Assessment (Bekaa Valley Eastern of Lebanon)
	2012	Cross-sectoral	The Palestinian Refugees from Syria to Lebanon: Great Legal and Humanitarian Challenges, Limited Chances for Assistance
	2012	WASH	WASH Assessment in North Lebanon
	2013	Cross-sectoral	Vulnerability Assessment of Syrian Refugees in Lebanon
	2013	Education	Joint Needs Assessment for Displaced Syrian children in schools, community and safe spaces
	2013	Cross-sectoral	Informal Tented Settlements - Vulnerability Assessment
	2014	WASH	Risk of water shortages this summer
	2014	Nutrition	Joint Nutrition Assessment of Syrian Refugees
Syria	2012	WASH	WASH Baseline Assessment
	2012	WASH	Rapid WASH Needs Assessment in Syria
	2013	Education	Partner Needs Consultation (Most Governorates)
	2013	Education	Syria Mission report
	2013	Education	Education - First line response in Syria
	2013	WASH	Partner Needs Consultation (Most Governorates)
	2012	WASH	WASH Baseline Assessment
Turkey	2013	Education	Education in Syrian camps in Turkey

APPENDIX 15: EVALUATION FINDINGS MAPPED AGAINST OECD/DAC CRITERIA

IDENTIFIED STRENGTHS

		Identified strengths	OECD/DAC Criteria				
			Effectiveness	Relevance	Coverage	Efficiency	Coherence
Role and Strategy	1	Clarity and strength of UNICEF's organizational mandate and role	✓				
	2	UNICEF's programming capacity	✓				
	3	Advocacy towards governments	✓				
	4	Introduction of cross-sector and/or multi organization programme initiatives			✓		
	5	Ability to learn by doing, and adjust programming accordingly		✓			
	6	Ability to incrementally adapt to changing need		✓			
	7	Strong UNICEF donor communication and fundraising capacity			✓		
	8	Role in MRM	✓				
	9	Ability to shift to more sustainable solutions based on vulnerability		✓			
	10	Adoption of new approaches and systems			✓		
	11	Resourceful in identifying alternative assessment and monitoring solutions	✓	✓	✓		
	12	Pro-active in (inter-agency) data collection	✓	✓	✓		
	13	Availability of CCC framework					✓
Engagement with others	14	Strong existing relationships with governments	✓				
	15	Identification of alternative solutions in lieu of working with NSE (Syrian Arab Republic)			✓		
	16	Strong relations with donors			✓		

		Identified strengths	OECD/DAC Criteria				
			Effectiveness	Relevance	Coverage	Efficiency	Coherence
Engagement with others	17	Strong coordination with other organizations (incl. working groups)					
	18	UNICEF's sub-regional coordination and planning role (Syria Hub)				✓	
	19	Working relations with IPs at operational level	✓				
	20	Work with local IPs	✓	✓	✓		
Internal management and process	21	Syria Hub support to COs				✓	
	22	Syria Hub role in sub-regional coordination and planning				✓	
	23	Ability to deploy/recruit appropriate UNICEF staff				✓	
	24	Availability of surge capacity				✓	
	25	Creation/scale-up of local supply functions				✓	
	26	Resourcefulness of supply solutions				✓	
	27	Availability of L3 SSOPs to increase initial speed of response				✓	
	28	UNICEF resource mobilization efforts (also through Syria Hub)				✓	
	29	Overall funding level (up to 2014)				✓	
	30	Incremental increased focus on cost, specifically since 2014				✓	
	31	Incremental introduction of cost improvements				✓	
	32	Ability to scale-up, once minimum preconditions were in place				✓	
	33	Introduction of inter-action platform across countries (e.g. consultations)				✓	
	34	Availability of critical guidance material					✓

IDENTIFIED POINTS FOR IMPROVEMENT

		Identified points for improvement	OECD/DAC Criteria				
			Effectiveness	Relevance	Coverage	Efficiency	Coherence
Role and Strategy	1	Availability of a clear programme intervention strategy informed by full situation analysis (context, risk)	✓	✓			
	2	Availability of systematic needs, vulnerability and impact analysis	✓	✓			
	3	Implications of UNICEF's role in MRM linked to government relations (mainly in the Syrian Arab Republic)	✓				
	4	Contextualization of the CCCs					✓
	5	Oversight on 'delegated CCC responsibilities' to other organizations	✓				
	6	Initial focus on short-term solutions		✓			
	7	Systematic monitoring activities	✓	✓			
	8	Initial focus on volume of the response (supply), rather than on quality of service		✓			
	9	Definition of UNICEF capacity (what can be achieved) for the response	✓				
	10	Programme priorities and objectives defined against UNICEF capacity	✓				
	11	Understanding on how to respond to a humanitarian crisis with strong protection elements	✓				✓
Engagement with others	12	Comprehensive IP mapping for emergency preparedness (based on capacity, cost, coverage etc)			✓	✓	
	13	Government restrictions and agendas	✓				
	14	Governments' approach to the crisis (e.g. when accepting humanitarian assistance)	✓				
	15	Engagement with affected population		✓			

		Identified points for improvement	OECD/DAC Criteria				
			Effectiveness	Relevance	Coverage	Efficiency	Coherence
Engagement with others	16	Operational guidance on working with NSE			✓		✓
	17	Information on the rationale (why) of programme decisions and on impact/ quality to donors			✓		
	18	Clarity of UN organization's role and responsibilities in a mixed crisis (outside of UNICEF's influence)			✓	✓	
Internal management and process	19	Clarity of roles and responsibilities of UNICEF units, linked to emergency phases				✓	
	21	Broad communication on UNICEF units' roles and responsibilities				✓	
	22	Length of decision-making processes (incl. delays due to additional actor - Syria Hub)				✓	
	23	Initial mixed sense of urgency		✓	✓	✓	
	24	Initial lack of emergency and sr management experience/ skills of existing staff		✓	✓	✓	
	25	Short-term nature of deployments impacting continuity and cost effectiveness				✓	
	26	Internal UNICEF competition for emergency resources, limiting availability of staff				✓	
	27	Challenges in recruiting national staff (competition, low competitiveness UNICEF rates)				✓	
	28	No compensation for staff in countries outside of the Syrian Arab Republic				✓	
	29	Lack of supply knowledge and staff at the start		✓	✓	✓	
	30	Appropriateness of L3 SSOPs for protracted crisis				✓	
	31	Application of L3 SSOPs across countries				✓	
	32	Short term funding cycles (outside of UNICEF's influence)				✓	

		Identified points for improvement	OECD/DAC Criteria				
			Effectiveness	Relevance	Coverage	Efficiency	Coherence
Internal management and process	33	Earmarking of funds (outside of UNICEF's influence)			✓	✓	
	34	Unpredictability of funds (outside of UNICEF's influence)				✓	
	35	Limitations to CERF funding: maximum amount, heavy reporting structures, delays in receipt				✓	
	36	UNICEF's ability to disburse CERF funds quickly				✓	
	37	Limited systematic UNICEF approach to determining cost-effectiveness				✓	
	38	Missing platform for knowledge-sharing between key staff at all levels in sub-region					✓
	39	Limited internal coordination and collaboration				✓	
	40	Internal UNICEF processes for IP contracting and management				✓	
	41	Contextualization of guidance to middle-income, humanitarian crisis with strong protection elements					✓

APPENDIX 16: FINDINGS ON UNICEF HUMANITARIAN GUIDANCE

The evaluation collected data on three lines of enquiry related to the use of UNICEF's humanitarian guidance. The lines of enquiry used were:

1. What (UNICEF) humanitarian guidance was applied well?
2. What (UNICEF) humanitarian guidance was not applied well?
3. What (UNICEF) humanitarian guidance was missing?

DATA COLLECTION RESULTS

What (UNICEF) humanitarian guidance was applied well?

UNICEF staff across the region indicated that in general, the CCCs are used to guide operational programming and frame response plans.

It is broadly agreed across stakeholder groups that UNICEF applies guidance for cross-cutting issues such as gender well. In addition, guidance for public-partner collaboration and civil society partnerships has been applied.

Programme-specific guidance is being used and is mostly well applied. This includes

inter-agency working group guidance, education-in-emergency and INEE guidance,⁹³ back-to-school campaigns⁹⁴ and standards for implementing activities in child/adolescent-friendly education.⁹⁵ In addition, guidance on GBV case management, referral management and psychosocial programming⁹⁶ is used and adapted in the various working groups across the region to varying degrees. MRM guidance⁹⁷ is used and was discussed with relevant staff and partners in training sessions (child protection). Joint WHO/UNICEF polio guidance is also being used (health).

A variety of guidance was mentioned, but not consistently across the region. This includes IASC guidance, guidance on the EWEA system⁹⁸ and humanitarian performance monitoring guidance.

What (UNICEF) humanitarian guidance was not applied well?

The CCC document is key to the role that UNICEF assumes in a humanitarian response. The opinions of UNICEF staff vary in terms of how applicable the document is within the context of the Syria response: country offices are mainly of the opinion that it presents a useful framework and a good basis for the creation of operational plans. Regional level

⁹³ International Network for Education in Emergencies, 'INEE Minimum Standards for Education', INEE, <www.ineesite.org/en/minimum-standards>, accessed 23 March 2016.

⁹⁴ United Nations Children's Fund, *UNICEF Back-to-School Guide: Evidence-based strategies to resume education in emergencies and post-crisis transition*, UNICEF, <http://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF_Back_To_School_Guide_2013.pdf>, accessed 23 March 2016.

⁹⁵ Child Protection Working Group. *A Practical Guide for Developing Child Friendly Spaces*, <http://cpwg.net/wp-content/uploads/sites/2/2011/09/A_Practical_Guide_to_Developing_Child_Friendly_Spaces_-_UNICEF_11.pdf>, accessed 23 March 2016.

⁹⁶ United Nations Children's Fund, 'CCC E-Resource: Mental Health and Psychosocial Support in Humanitarian Action', UNICEF, <www.unicef-emergencies.com/downloads/eresource/mhpss.html>, accessed 23 March 2016.

⁹⁷ Office of the Special Representative of the Secretary-General-Children Affected by Armed Conflict, United Nations Children's Fund, United Nations Department of Peacekeeping Operations, Monitoring and Reporting Mechanism Guidelines, OSRSG CAAC, UNICEF, DPKO, March 2012, <www.unicef-emergencies.com/downloads/eresource/docs/2.6%20Child%20Protection/MRM%20Guidelines%20English.pdf>, accessed 23 March 2016.

⁹⁸ Included in UNICEF's EWEA Portal, part of UNICEF's Emergency Preparedness and Response System.

staff more often express concerns about the appropriateness of the CCCs, stating that the document is more suited for crises in sub-Saharan Africa and South Asia and that it needs to be operationalized and contextualized for implementation. National standards are being used to guide the adjustment of the CCC guidance.

UNICEF staff broadly agree that the L3 SSOPs are not always as effectively used as they should be. The concerns mentioned included: risk averse behaviour leading to not applying the SSOPs or ensuring more (instead of less) sign-offs on the process; risk-taking behaviour leading to diminished programme quality or harm done; and lack of communication to implementing partners on the use of the SSOPs, leading to misunderstandings and perceived lack of transparency on selection processes. It is also noted that use and application of the SSOPs needs to be considered against the requirement of the specific response, including when to go back to using the standard operating procedures (trade-off between speed and quality). Not all L3 SSOPs are applicable to a protracted crisis and some do not remain relevant over time.

Application of guidance on implementing the MRM was indicated as an area of concern. This concern is closely related to the (initial lack of) seniority of staff involved and the understanding of the context and political sensitivities related to UNICEF's role in the MRM.

There also seems to be a myriad of UNICEF guidance that some country offices either are not aware of or do not apply. An example of this is the use and application of guidance on the EWEA system⁹⁹ and emergency preparedness activities, including mapping of implementing partners. This was not applied

by all UNICEF country offices before the crisis and impacted the initial effectiveness and efficiency of the response.

What (UNICEF) humanitarian guidance was missing?

It is broadly agreed within UNICEF that little practical organizational knowledge exists on international humanitarian law and that this is a crucial gap in responding to a crisis with many human rights aspects. UNICEF has a range of guidance available, but staff does not seem to be aware of this guidance. This could be an issue of adequate dissemination to relevant staff or lack of understanding of application.

In addition, there is consensus that (existing) guidance on working with non-state entities needs to be more clear and practical, though this is seen as an area for further detailing across the United Nations. Other areas where practical guidance was missed were on cross-border activities, working remotely and advocacy at the regional and country level on how to move from humanitarian interventions to resilience building.

UNICEF staff indicate the need for sharing experiences and best practice guidance across the region and to document lessons learned. In general, it is felt that there is a lot of useful UNICEF humanitarian and technical programme guidance available, though there is a need to contextualize this guidance for it to be applicable in a middle income, humanitarian crisis.

“There is a need to contextualize guidance, for it to be applicable in a middle-income, humanitarian crisis with a strong protection component.” –UNICEF staff member

⁹⁹ Ibid.

Sphere standards were referenced as useful, though also need to be contextualized for the region. For example, “20 litres of water per person per day is not appropriate for one of the driest regions in the world, where the host government has set 35 litres per day (Jordan) as a minimum and the population being assisted is used to much more.”

The translation of key guidance into Arabic is required, specifically for guidance related to (local) implementing partners. It was also highlighted that it is important to raise awareness with implementing partners of humanitarian principles, human rights programming and protection issues and to guide and train implementing partners on how to apply UNICEF guidance to their programmes.

Missing technical programme-specific guidance mainly relates to specific topics such as international/national policies on rights to education and maintenance of home curriculum for refugee children (education) and guidance on child marriage and deportation of children (child protection), etc.

APPENDIX 17: FUTURE OPERATING CONTEXT

THE OPERATING CONTEXT IN THE SYRIAN ARAB REPUBLIC AND THE SUB-REGION

The human costs of the Syria crisis are likely to grow, with **ongoing population displacement and deepening vulnerabilities**. Planning assumptions for 2015 and 2016 are that armed conflict and insecurity will continue inside the Syrian Arab Republic; that an effective overall peace agreement will not yet be achieved and implemented; and that Syrians will continue to flee and seek international protection. It is estimated that an additional 1.2 million Syrians may arrive in neighbouring countries by the end of 2015, bringing the total regional refugee population to some 4.3 million.¹⁰⁰

Although funding provided in 2014 to the Syrian humanitarian response represents the highest level of funding of any humanitarian appeal to date, **only 53 per cent of total funding was received for the SHARP and RRP6 in 2014**.¹⁰¹

The SHARP and 3RP **appealed for significantly more funds in 2015** (US\$2.89 billion and US\$4.53 billion, respectively), reflecting the increasingly ambitious scope of programming beyond emergency response to longer-term development.¹⁰² In June 2015, OCHA's Financial Tracking Service reported 25 per cent and 24 per cent of appeals covered for the SHARP and 3RP, respectively.¹⁰³

Greater emphasis will be made to **support governments in the region** to meet the current needs and to provide a sustainable longer-term response. Strengthening coordination modalities through joint planning, information management and monitoring also underpins both the 3RP and the SHARP.¹⁰⁴

The broader resilience approach will demand the investment of resources beyond humanitarian, including in development activities, social protection and safety net schemes, and insurance mechanisms. In terms of the humanitarian aspect, there will be a greater focus on early action integration with development activities. Early action requires two inputs: scaling up long-term financing for risk and vulnerability and contingency mechanisms for deploying rapid humanitarian assistance where and when it is necessary.¹⁰⁵

The 2015 Syrian Arab Republic 3RP requests almost doubled the amount per person of other humanitarian appeals. This rise (from US\$576 in 2014 to US\$851 in 2015) reflects both the nature and context of the response and the increasingly ambitious scope of the appeal, beyond providing emergency response, to longer-term development dimensions.

Financial requirements are broken down into a 'refugee component' and a 'resilience component' – the latter accounting for 38 per cent of the total amount requested.¹⁰⁶

¹⁰⁰ Regional Refugee and Resilience Plan 2015/2016, <www.3rpsyriacrisis.org/wp-content/uploads/2015/01/3RP-Report-Overview.pdf>, accessed 31 March 2016.

¹⁰¹ Global Humanitarian Assistance, *Global Humanitarian Assistance Report 2015*, <www.globalhumanitarianassistance.org/wp-content/uploads/2015/06/GHA-Report-2015_Online.pdf>, accessed 23 March 2016.

¹⁰² Ibid.

¹⁰³ Office for the Coordination of Humanitarian Affairs, 'Financial Tracking Service', <<https://fts.unocha.org>>, accessed 23 March 2016.

¹⁰⁴ 'Overview: 2015 Syria Response Plan and 2015-2016 Regional Refugee and Resilience Plan', Berlin, 18 December 2014, <<https://data.unhcr.org/syrianrefugees/download.php?id=7908>>, accessed 23 March 2016.

¹⁰⁵ See footnote 101 above.

¹⁰⁶ See footnote 101 above.

THE OPERATING CONTEXT GLOBALLY

The number of people affected by disaster and in need of humanitarian assistance will continue to increase for the foreseeable future.¹⁰⁷ In addition to growing caseloads in the Syrian Arab Republic, Iraq and South Sudan, resources will be required to address an ever increasing spectrum of needs – from disaster risk reduction to protracted response and recovery.¹⁰⁸

The trend for crises to have a regional impact with a spill-over effect into countries that are already fragile will continue. The concurrent L3 emergencies in the Syrian Arab Republic, Iraq, the Central African Republic and South Sudan are all complex crises that have resulted in significant internal displacement due to conflict, leading to ongoing insecurity and the increased need for protection. They have also become regional crises with political, security, development and humanitarian consequences in their respective regions.

There is a growing recognition that international humanitarian assistance alone will not be sufficient or appropriate to address the scale and complexity of future crises or the underlying drivers of instability, poverty and vulnerability.¹⁰⁹ These will have to be tackled through risk reduction and resilience-building initiatives that have integrated humanitarian response elements.¹¹⁰

Although affected governments should and often do take the lead on capacity building, the reality is that national and local resources

and capacities are often most lacking in the places most vulnerable to crisis, especially in conflict-affected contexts.¹¹¹ Governments should be encouraged and supported to lead such initiatives through capacity-building and institutional strengthening.

There is a need to re-examine the relationship between international organizations and local partners. If increasing needs are to be met, the humanitarian intervention model must be broadened to increase local humanitarian capacity building and engagement with local communities.¹¹²

The ability to **measure the achievements of humanitarian response** and progress towards stated objectives needs to be strengthened. Two-way communication between service providers, refugees and local communities plays a vital role and ensures greater accountability to beneficiaries. Feedback mechanisms need to be strengthened to enable access to information.¹¹³

In 2014, US\$19.5 billion was requested for international humanitarian assistance globally, of which US\$12 billion was received. **The shortfall of US\$7.5 billion (38 per cent) is the highest to date.**¹¹⁴ The humanitarian community has long understood it needs to be more **cost effective** and to do more with the available resources. Some efficiency is generated by improvement in response such as increased use of national structures and actors, the provision of more flexible assistance (cash transfer programming) and coordination and consolidation of responding agencies. While these initiatives are laudable, it is likely that

¹⁰⁷ Ibid.

¹⁰⁸ Ibid.

¹⁰⁹ Ibid.

¹¹⁰ Ibid.

¹¹¹ Ibid.

¹¹² Audet, François, 'What future role for local organizations? A reflection on the need for humanitarian capacity building', *International Review of the Red Cross*, vol. 93, no. 9, December 2011, <www.icrc.org/eng/resources/documents/article/review-2011/irrc-884-audet.htm>, accessed 23 March 2016; and Regional Refugee and Resilience Plan 2015/2016, <www.3rpsyriacrisis.org>, accessed 23 March 2016.

¹¹³ See footnote 100 on previous page.

¹¹⁴ Ibid.

significant improvements in humanitarian response will only be realized when it is appropriately **aligned with development activities**.

This will include having the same people on the ground be responsible for operating in both contexts, particularly for protracted crisis, and ensuring consistency across approaches.¹¹⁵

The largest share of international **humanitarian assistance is channelled**, at least at first, **through United Nations agencies** – and this share is growing, with the cluster system being one of the main facilitators of this.

UNICEF STRATEGIC PLAN 2014–2017

The UNICEF Strategic Plan 2014–2017 reaffirms the “fundamental mission of UNICEF is to promote the rights of every child, everywhere, in everything the organization does – in programmes, in advocacy and in operations.”¹¹⁶ In 2014, UNICEF assessed the context, its successes and the challenges in which the humanitarian response element of the Strategic Plan is being implemented.¹¹⁷

The Strategic Plan notes that the caseload for humanitarian action is expected to grow and the operational contexts will become more complex and diverse. New opportunities to further improve humanitarian assistance are seen at the same time, including the growing capabilities of national institutions, the increasing number of humanitarian partners, and the expanding benefits of technology.

UNICEF STRENGTHENING HUMANITARIAN ACTION INITIATIVE

As part of the process to increase its efficiency and effectiveness, UNICEF has implemented the Strengthening Humanitarian Action initiative, which has three key objectives:

- 1) To **adapt humanitarian action to emerging operational contexts** and to develop specific methods and tools to address emergencies in these diverse programme environments.
- 2) To **strengthen and expand humanitarian partnerships** to take fuller advantage of South-South cooperation and a more predictable set of relationships to enhance operational capacity.
- 3) To **enable UNICEF to be an even more predictable, effective and efficient humanitarian organization**

¹¹⁵ Ibid.

¹¹⁶ United Nations Children’s Fund, ‘The UNICEF Strategic Plan, 2014-2017’, UNICEF Executive Board second regular session 2013, Item 4 of the provisional agenda, New York, 11 July 2013, <www.unicef.org/strategicplan/files/2013-21-UNICEF_Strategic_Plan-ODS-English.pdf>, accessed 7 March 2016.

¹¹⁷ United Nations Children’s Fund, ‘Thematic discussion on the work of UNICEF in humanitarian situations’, UNICEF Executive Board first regular session 2014, Item 7 of the provisional agenda, New York, 10 January 2014, <www.unicef.org/about/execboard/files/2014-CRP4_Humanitarian_Action-10Jan14.pdf>, accessed 23 March 2016.

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133	<i>Division of Human Resources, 2013 Annual Report <www.unicef.org/about/annualreport/files/Human_Resources_AR_2013.pdf></i>	UNICEF	2013
134	<i>Guidelines on external staff in emergencies, Standby arrangements <www.unicef.org/cholera/Chapter_6_preparedness/12_UNICEF_Standby_Guidelines.pdf></i>	UNICEF	2006
135	<i>DHR – draft background and context Syria Response – report</i>	UNICEF	2015
136	<i>UNICEF Approach to Emergency Preparedness: emergency risk informed programming, presentation</i>	UNICEF	
137	<i>Report of the Advisory Committee on Administrative and Budgetary Questions</i>	UNICEF	2011

continued: UNICEF strategy

138	<i>Executive Board Meeting New York, Speech Anthony Lake – Executive Director</i>	UNICEF	2013
139	<i>Evaluation of UNICEF's Cluster Lead Agency Role in Humanitarian Action (CLARE)</i>	UNICEF	2013
140	<i>Updated Simplified SOPs L3, Corporate Emergency Activation Procedure in Level 3 Emergencies</i>	UNICEF	2012
141	<i>SSOP L3 Revision Master</i>	UNICEF	2015
142	<i>Summary L2 L3 changes</i>	UNICEF	2015
143	<i>Matrix L3 SSOPs</i>	UNICEF	2012
145	<i>Contingency checklists – worst case scenario (5 documents)</i>	UNICEF	2013
146	<i>Jordan RRP5, Operational and Risk Management Plan</i>	UNICEF	2013
147	<i>Lebanon RRP5, Operational and Risk Management Plan</i>	UNICEF	2013
148	<i>Syria RRP5, Operational and Risk Management Plan</i>	UNICEF	2013
149	<i>Turkey RRP5, Operational and Risk Management Plan</i>	UNICEF	2013

UNICEF regional and country level

150	<i>MENARO ToRs for L3 Coordination Final</i>	UNICEF	2013
151	<i>MENARO Consolidated Schedule of Coordination Meetings L3</i>	UNICEF	2013
152	<i>140914 Assessments Catalogue_All COs</i>	UNICEF	2014
153	<i>LoU between UNHCR & UNICEF & HKJ</i>	UNICEF	2013
154	<i>LoU between UNHCR & UNICEF</i>	UNICEF	2014
155	<i>Annual programme work plans</i>	UNICEF	
156	<i>Guidance note on Makani/My Space Approach</i>	UNICEF	2015
157	<i>Beyond Joint Workplan</i>	UNICEF	2014
158	<i>Child Friendly Communities Initiative Evaluation Report</i>	UNICEF	2011
159	<i>Jordan Country Office Annual Report 2011</i>	UNICEF	2012
160	<i>Jordan Country Office Annual Report 2012</i>	UNICEF	2013
161	<i>Jordan Country Office Annual Report 2013</i>	UNICEF	2014
162	<i>Jordan Country Office Annual Report 2014</i>	UNICEF	2015
163	<i>Jordan Country Office Response Timeline</i>	UNICEF	2012
164	<i>Jordan Country Office, Syrian Refugee Crisis: Jordan Country Office Response Timeline, December 2011-June 2012</i>	UNICEF	2013
165	<i>Jordan Country Office, Syria Refugee Crisis Response Timeline - Additional Recommendations</i>	UNICEF	2013
166	<i>Lebanon Country Office Internal Audit</i>	UNICEF	2014
167	<i>Lebanon Country Office Annual Report 2011</i>	UNICEF	2012

continued: UNICEF regional and country level

168	<i>Lebanon Country Office Annual Report 2012</i>	UNICEF	2013
169	<i>Lebanon Country Office Annual Report 2013</i>	UNICEF	2014
170	<i>Lebanon Country Office Annual Report 2014</i>	UNICEF	2015
171	<i>Syria Country Office Annual Report 2010</i>	UNICEF	2011
172	<i>Syria Country Office Annual Report 2011</i>	UNICEF	2012
173	<i>Syria Country Office Annual Report 2012</i>	UNICEF	2013
174	<i>Syria Country Office Annual Report 2014</i>	UNICEF	2015
175	<i>Syria UNICEF Representative Handover Notes July 2014</i>	UNICEF	2014
176	<i>Advocacy Log - 2012 to May 2014</i>	UNICEF	2014
177	<i>UNICEF HQ Syria Crisis Timeline: A timeline of decisions and actions taken by HQ</i>	UNICEF	2014
178	<i>UNICEF Simplified Timeline</i>	UNICEF	2014
179	<i>Syria Crisis 2014 Annual Situation Report</i>	UNICEF	2014
180	<i>Vulnerability Assessment of Syrian Refugees in Lebanon</i>	WFP, UNICEF and UNHCR	2013
181	<i>MENARO Assessments Catalogues (5 documents)</i>	UNICEF	2014
182	<i>Country and regional needs assessments (33 documents)</i>	UNICEF	2013 - 2014
183	<i>Engaging and Advocating for Children in the complex context of the conflict in Syria: A Covering Explanatory Note</i>	UNICEF	2014
184	<i>Ministry of Water & Irrigation and UNICEF launch cost efficient wastewater treatment units in Za'atari refugee camp</i>	ChildrenofSyria	2015

Evaluation guidance			
185	<i>UNICEF Evaluation Office, Terms of Reference, Evaluation of UNICEF's Humanitarian Response in Syria and the Sub-Region</i>	UNICEF	2014
186	<i>American Evaluation Association guiding principles for evaluators</i>	American Evaluation Association	2004
187	<i>Evaluating Humanitarian Action Using the OECD/DAC Criteria: An ALNAP Guide for Humanitarian Agencies.</i>	ALNAP	2006
188	<i>The success case method: Find out quickly what's working and what's not.</i>	Brinkerhoff, R. Berrett-Koehler Publishers.	2003
189	<i>Evaluating Strategy. New Directions for Evaluation, 2010 (128)</i>	Patrizi, P. A., Patton, M.Q. (Eds.)	2010
190	<i>Utilization-focused evaluation</i>	Patton, M.Q. Sage Publications	2008
191	<i>Outcome harvesting</i>	Wilson-Grau, R., & Britt, H. Ford Foundation	2012

