Evaluation of UNICEF's humanitarian response to the Syria crisis

Volume 1: Main Report

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EVALUATION OF UNICEF'S HUMANITARIAN RESPONSE TO THE SYRIA CRISIS

Final Report

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PREFACE

Over the past five years, the world has witnessed the Syrian Arab Republic fall into a lethal spiral of violence and conflict that has triggered a massive humanitarian crisis. By the end of 2015, an estimated 13.5 million people, including 6 million children, were in need of humanitarian assistance. Of the people affected, some 7.6 million were within the Syrian Arab Republic and of these, 60 per cent were located in besieged and hard-to-reach areas. In 2015 alone, more than 1.4 million people were displaced inside the country, many for the second or third time. An additional 4.6 million Syrian refugees were registered in neighbouring countries, with approximately 3.5 million hosted in Jordan, Lebanon and Turkey. These figures, provided by the Office for the Coordination of Humanitarian Affairs (OCHA), indicate a catastrophic level of human suffering.

As the crisis began to deepen, the United Nations Children's Fund (UNICEF) joined the international effort to reach affected populations with humanitarian assistance by mounting complex, large-scale operations across the sub-region. Six UNICEF country offices (COs) supported the delivery of programmes designed to meet the needs of crisis-affected children inside the Syrian Arab Republic and in neighbouring countries. Between 2012 and 2015, UNICEF appealed for more than US$2.2 billion to cover programming needs in the country and the sub-region. By end of 2015, more than US$1.5 billion was received, allowing UNICEF and partners to assist millions of children and families affected by the crisis.

Humanitarian action is being undertaken in a very complex environment and, in the Syrian Arab Republic, within an active war zone. Many humanitarian personnel have lost their lives. Nevertheless, humanitarian workers continue to deliver assistance under often dangerous and extremely constrained circumstances, across the region.

Given the intensity and extent of the emergency, and the challenges that UNICEF has faced in scaling up its work in the sub-region, it has been important to document UNICEF's work and assess how far and how well the organization has been able to respond to the crisis. This independent evaluation was commissioned to provide a comprehensive assessment of UNICEF's overall response to the Syrian humanitarian crisis. The evaluation is intended to support accountability and learning by providing an assessment of UNICEF's sub-regional response against the organization's own mandate, standards and stated objectives. The evaluation is part of the evaluative work being undertaken in the region, and includes the evaluation of UNICEF's response to the Syrian refugee crisis in Turkey, the synthesis report of the sub-regional and Turkey evaluations and two evaluations of UNICEF Education and psychosocial support in Jordan. Using standard evaluation criteria, the evaluation has generated evidence, conclusions and lessons from its findings, as well as recommendations concerning UNICEF's humanitarian response in the sub-region and more broadly.

The evaluation indicates that to a large extent, despite facing extremely complex operational challenges, UNICEF was able to deliver on its core objectives. Working with partners, UNICEF was generally effective in delivering programmes for children and women. However, the evaluation also notes – perhaps unsurprisingly under such extreme circumstances – that there are major challenges to be addressed in regards to the protection of the rights of the most vulnerable women and children and efforts to safeguard their survival, livelihoods and well-being. Although the Syria crisis is particularly severe, it is expected that the insights, evidence and recommendations of this evaluation will be relevant to UNICEF's work in other countries facing protracted conflict and population displacement, where children's lives and well-being are in jeopardy.

The evaluation was implemented by Avenir Analytics, which assembled a team of nine consultants led by Hetty van Doorn, with close support from Brian Majewski, who provided quality assurance. I would like to thank the team for their commitment to this demanding evaluation. The Evaluation Office commissioned and managed the evaluation and I am grateful to Koorosh Raffii and Jane Mwangi for their management of the process. The evaluation benefitted from substantive contributions from UNICEF colleagues in 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 (RO), as well as in UNICEF Headquarters (HQ). Colleagues in UNICEF country offices across the sub-region also gave generously of their time.

I would also like to thank the Reference Group for the Syria sub-regional humanitarian evaluation, which supported the evaluation process and offered advice and information. The membership of the Reference Group changed over time but included Roumiana Gantcheva, Lori Bell, Ashley Wax, Hamish Young, Kate Alley, Genevieve Boutin and Karin Sorensen. The Evaluation Office would like to extend special thanks to Roumiana Gantcheva, who facilitated the evaluators' work and their interaction with relevant colleagues in the region.

On behalf of the Evaluation Office, I would like to extend thanks to everyone who was involved in the evaluation at various times. We hope that the evaluation contributes to recording and documenting the efforts made by UNICEF and partner organization colleagues in the Syrian Arab Republic and neighbouring countries to address the needs of the millions of children caught up in the crisis.

Colin Kirk
Director, Evaluation Office
UNICEF

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ACRONYMS

3RP	Regional Refugee and Resilience Plan
ALNAP	Active Learning Network for Accountability and Performance
CCCs	Core Commitments for Children in Humanitarian Action
CEAP	Corporate Emergency Activation Procedure
CEE/CIS	Central and Eastern Europe and the Commonwealth of Independent States
CERF	Central Emergency Response Fund
CFS	Child-friendly schools
CMT	Crisis Management Team
CO	Country office
CP	Child protection
DAC	Development Assistance Committee
DED	Deputy Executive Director
DFID	Department for International Development
DHR	Division of Human Resources (UNICEF)
ECHO	European Commission's Humanitarian Aid and Civil Protection department
ED	Executive Director
EMOPS	Office of Emergency Programmes (UNICEF)
EMT	Emergency Management Team
EO	Evaluation Office
EWEA	Early Warning Early Action
FAO	Food and Agriculture Organization
GBV	Gender-based violence
GEC	Global Emergency Coordinator
HFSS	Humanitarian Field Support Section (UNICEF)
HQ	Headquarters
HR	Human resources
IASC	Inter Agency Standing Committee
IDP	Internally displaced person
INEE	Inter-Agency Network for Education in Emergencies
IP	Implementing partner
IRT	Immediate Response Team
ITS	Informal tented settlement
L2	Level 2 emergency

L3	Level 3 emergency
M&E	Monitoring and evaluation
MENA	Middle East and North Africa
MENARO	Middle East and North Africa Regional Office
MRM	Monitoring and Reporting Mechanism
NGO	Non-governmental organization
NSE	Non-state entity
OCHA	Office for the Coordination of Humanitarian Affairs
OECD	Organisation for Economic Co-operation and Development
OHCHR	Office of the United Nations High Commissioner for Human Rights
PCA	Programme cooperation agreement
PD	Programme Division (UNICEF)
PPD	Public Partnerships Division (UNICEF)
RD	Regional Director
RO	Regional office
RRP	Regional Response Plan
SARC	Syrian Arab Red Crescent
SHA	Strengthening Humanitarian Action
SHARP	Syrian Arab Republic Humanitarian Response Plan
SSOPs	Simplified Standard Operating Procedures
ToR	Terms of reference
UN	United Nations
UNDP	United Nations Development Programme
UNEG	United Nations Evaluation Group
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UN-Habitat	United Nations Human Settlements Programme
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
WASH	Water, sanitation and hygiene
WFP	World Food Programme
WHO	World Health Organization
WoS	Whole of Syria

EXECUTIVE SUMMARY

INTRODUCTION

Civil unrest in the Syrian Arab Republic began in March 2011 and marked the advent of one of the largest humanitarian crises ever recorded. Since then, the situation has continued to deteriorate.

As summarized in a joint United Nations High Commissioner for Refugees (UNHCR)/OCHA briefing note from 2014, the main characteristics of the emergency can be described as: "a complex regional crisis that combines massive refugee and internal displacements, further complicated by competing and divided international, regional and national interests, and faced with challenges of dual mandates for coordination between [United Nations] agencies".[1]

The numbers of conflict-affected people in the Syrian Arab Republic have increased 12-fold since the beginning of the crisis. In June 2015, children made up nearly half of the estimated 12 million people currently in need of humanitarian assistance. An estimated 7.6 million of these are affected within the Syrian Arab Republic, with approximately 60 per cent located in hard-to-reach areas. A further 4 million Syrian refugees are registered in neighbouring countries, with approximately 3.5 million being hosted in Jordan, Lebanon and Turkey.[2]

As part of its international assistance, UNICEF has mounted a complex large-scale response operation across the sub-region. Six country offices are supporting the delivery of programmes focused on meeting the needs of crisis-affected children in the Syrian Arab Republic and its neighbouring countries.

Evaluation purpose and objective

While there have been numerous assessments and reviews considering discrete parts of UNICEF's response to the Syria crisis,[3] this is the first comprehensive region-wide evaluation. The terms of reference states that the purpose of the evaluation is "to provide a comprehensive assessment of UNICEF's overall response to the Syria crisis."

The evaluation is intended to serve the dual purpose of accountability and learning.

1) **An accountability function**, by providing a comprehensive assessment of the response against UNICEF's own mandate and standards, its stated objectives and standard evaluation criteria.
2) **A learning function**, by generating evidence, conclusions and key lessons, and providing recommendations concerning UNICEF's future humanitarian responses, both in the sub-region and elsewhere.

Evaluation scope

The evaluation covers the evaluation themes across UNICEF's operational activities in the Syria response,[4] specifically across its four main 'flagship' programmes of child protection, education, health and water, sanitation

Note: Executive Summary in Arabic is available at http://www.unicef.org/evaldatabase/index_91062.html

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[1] United Nations High Commissioner for Refugees and the Office for the Coordination of Humanitarian Affairs, Joint UNHCR / OCHA Note on Mixed Situations: Coordination in Practice, April 2014.

[2] United Nations High Commissioner for Refugees, 'Syria Regional Refugee Response Inter-agency Information Sharing Portal', <http://data.unhcr.org/syrianrefugees/regional.php>, accessed 28 February 2016.

[3] The phrase 'Syria crisis' is meant to refer to the sub-regional humanitarian crisis stemming from the conflict in the Syrian Arab Republic and impacting populations inside the Syrian Arab Republic, as well as in neighbouring countries, including Egypt, Iraq, Jordan, Lebanon and Turkey.

[4] The phrase 'Syria response' is meant to refer to the response to the sub-regional humanitarian crisis stemming from the conflict in the Syrian Arab Republic and impacting populations inside the Syrian Arab Republic, as well as in neighbouring countries, including Egypt, Iraq, Jordan, Lebanon and Turkey.

and hygiene (WASH). These programmes have been evaluated across four countries: the Syrian Arab Republic, Jordan, Lebanon and Turkey.[5]

The time periods covered by the evaluation are 2012 (phase Level 2 (L2)), 2013–2014 (phase Level 3 (L3)) and 2015–2016 (the near future).

METHODOLOGY

The UNICEF Evaluation Office formulated the purpose, objectives, questions, outputs and scope of the evaluation based on a scoping research and consultation exercise.

The evaluation itself was undertaken between March and November 2015 by a specialist consultancy firm. The evaluation was independent of the Syria response. It was managed by the UNICEF Evaluation Office and guided by the Reference Group for the Syria sub-regional humanitarian evaluation.

Evaluation design and data collection

UNICEF's response to the Syria crisis was evaluated using a data analysis framework comprising five focus areas, identified by UNICEF senior managers as the main operational outcomes to assess:

- **Effectiveness:** How well did UNICEF deliver assistance?

- **Relevance:** Was the UNICEF response appropriate for the environment and needs of the affected population, over time?

- **Coverage:** How well was UNICEF able to scale up and meet the assessed needs?

- **Efficiency:** How efficient was the response (speed, cost and quality)?

- **Response:** Have UNICEF's humanitarian guidance tools been used and of use in the context of the Syria crisis?

Guidance from the Organisation for Economic Co-operation and Development (OECD) Development Assistance Committee (DAC) and the Active Learning Network for Accountability and Performance (ALNAP) was applied to identify criteria and design indicators against which the evaluation has been carried out. These criteria are aligned with the focus areas above.

The focus areas informed the design of the data collection tools and primary data were collected from four main stakeholder groups: UNICEF staff (from country, regional and headquarters offices), implementing partners, coordinating partners and the affected population. Secondary data came from an extensive literature review conducted throughout the evaluation period (pre, during and after data collection) and supporting data came from a web-based survey. All data inputs were triangulated during the analysis.

Four analysis steps were used to produce the evaluation findings and at each stage the outcomes were cross-referenced with supporting data and reviewed with relevant technical, field operations and managerial UNICEF staff members and the internal UNICEF Reference Group.

The **main limitation of the evaluation** is that the focus is on providing findings across the sub-region. Although some specific country and programmatic variances have been highlighted, the evaluation is not designed to provide a detailed evaluation for any specific country or programme.

The **main strength** of the approach is the ability to consolidate data collected from different sources for comparison and analysis, and identify findings applicable across all evaluation components.

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[5] Turkey is included based on a review of findings from a report commissioned by UNICEF Turkey, the CEE/CIS Regional Office and the UNICEF Evaluation Office: 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.

CONTEXT

Prior to the Syria crisis, UNICEF country offices in the region focused largely on strengthening the institutional capacity of their counterparts in upper-middle-income countries. Limited emergency preparedness measures were in place and there was a general expectation that the initial events that took place in the Syrian Arab Republic in 2011 were of a short-term nature. Humanitarian organizations did not (and likely could not) anticipate the intensity of humanitarian and protection needs, and their rapid escalation across so much of the population and sub-region at the start of the Syria crisis.

The evolving context demanded that agencies respond simultaneously to millions of people engaged in rapid displacement across the sub-region, and equally to millions of others who were stuck and difficult-to-reach within the Syrian Arab Republic. The conflict within the Syrian Arab Republic and refugee settings in neighbouring countries resulted in very different challenges and approaches. These formidable challenges framed the main strategic test to effective humanitarian operations and the dynamic nature of the conflict in the Syrian Arab Republic repeatedly surpassed planning assumptions.

UNICEF'S RESPONSE

Key focus areas for **child protection** across the countries were emergency psychosocial support; case management and advocacy, for example to ensure access (the Syrian Arab Republic); develop policies, influence laws and establish standard operating procedures (Jordan and Lebanon); and support the Government on undertaking its overall leadership role and child protection coordination, both at national and local levels (Turkey). Emergency psychosocial support was the main intervention implemented by country offices

with an initial focus on providing children and their families with information about available services and life skills training.

As part of its **education** mandate, UNICEF advocated for, and facilitated school enrolment (regular and 'double shifts') and certification in both camp settings and host communities. UNICEF also supported the establishment of non-formal education services in camps, host communities and out-of-camp settlements and scaled up support to adolescent programming with a focus on vocational training and life skills.

After an initial focus on measles vaccination, polio vaccination was prioritized within **health** programming across the region, following the outbreak of poliomyelitis in the Syrian Arab Republic in October 2013, with a focus on vaccine procurement and logistics, cold chain and communications. UNICEF Syrian Arab Republic supported the provision of essential medical supplies to the Ministry of Health and NGO-led clinics in the country. UNICEF Turkey played an important role in the polio vaccination campaigns conducted by the Government in the border areas, in collaboration with the World Health Organization (WHO), following the polio outbreaks in the Syrian Arab Republic in 2013–2014. No clear strategic direction or planning was documented for other health programming and activities.

The **WASH** programme, which was regionally prioritized, delivered assistance in close collaboration with partners. Different country offices prioritized different activities, broadly water supply (Jordan and the Syrian Arab Republic), wastewater management (Jordan) and infrastructure repair and rehabilitation (Jordan, Lebanon and the Syrian Arab Republic). No WASH programming has been implemented in Turkey.

Cross-sector initiatives such as the No Lost Generation[6] initiative, a regional-level strategic framework *(see Box 13)* and the Makani/My

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Space initiative,[7] a country-level integrated programme in Jordan, were also developed.

CONCLUSIONS

The evaluation concluded that examining UNICEF's humanitarian response in the sub-region depends on two interconnected factors: 1) did UNICEF deliver its core objectives? and, 2) is UNICEF delivering the right assistance, in the right places, at the right time?

The conclusions should be considered within the contextual limitations that impacted the humanitarian response in the Syrian Arab Republic and the sub-region, many of which are beyond UNICEF's control. These contextual aspects differ by country, but include:

- The **complex political character** of the crisis, which has led to constantly changing parameters for the response. For example, in terms of the scale and scope of the crisis, and the constant movement of battlefronts and of affected populations.

- The **role of governments**, which has impacted the speed of UNICEF's response and its operating space. This is specifically of influence on the operation in the Syrian Arab Republic, considering the access constraints.

- **Security issues** have led to safety risks for UNICEF and implementing partner staff.

- The **protracted character** of the crisis and the impact this has had on the ability of countries to provide assistance.

Overall conclusion

Despite the described difficulty of the operating environment and the limitations of its approach, **UNICEF was substantially able to deliver on its core objectives**. The response was slow to start (2012), but the evaluation found evidence that the organization invested significantly in implementing its programmes, incrementally built its capacity and improved performance through 2013 and 2014, with significant scale-up and reach of programming achieved from 2014.

It was unclear whether these efforts addressed the priority locations and needs of the affected population within UNICEF's mandate (did UNICEF do the right things?) due to the lack of a clear UNICEF strategy based on needs assessment, scenario analysis and results monitoring.

Role and strategy

The defined (global) UNICEF mandate ensured that partners had a clear understanding of UNICEF's role. There was a division in opinion on what should be the core of UNICEF's role going forward, however, particularly between coordination and policy versus field operations and implementation management. The coordination and policy role is anticipated to become even more important in the future, given the anticipated continued rise in needs and funding requirements, which means that entire sectors will be required to do more with less funding.

UNICEF has invested heavily in the development of regional inter-agency plans (Syrian Arab Republic Humanitarian Response Plan (SHARP), Strategic Response Plan, etc.). Country offices also established operational programme response plans and some sector plans. However, little evidence was found of a clear UNICEF-specific rationale (the 'how' and 'why' of programme decisions) that: 1) connects UNICEF sector responses and informs programming and advocacy choices; and 2) translates the overall sector strategy into a UNICEF-specific strategy that is based on contextual analysis, systematic needs and vulnerability assessment, and definition of UNICEF's organizational capacity. This led to

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[7]   For more information, see <www.unicef.org/jordan/MAKANI_COMPREHENSIVE_Approach-UNICEF2015.pdf>, accessed 30 March 2016.

programme choices that were largely opportunity-based and reactive, with a lack of clear priority-setting and continuous results monitoring. This also meant that UNICEF's mandate and capacity were not fully leveraged to assist all affected populations.

Programme response

Consistent assessment of programme performance across interventions and time periods has proven difficult due to the lack of: 1) consistent UNICEF strategy and targets; 2) baseline and other data to measure progress; and 3) consistent programme monitoring against objectives. In addition, programmes evolved according to the context and available resources.

UNICEF's ability to respond was limited by a lack of preparedness and the absence of a clear UNICEF-specific strategy, as well as an inability to actively inform programmes with situational analysis. As a result, the effectiveness, relevance and coverage of the response were to some extent hampered.

Not all programmes met their objectives in 2012 and 2013. This was in part due to a limited understanding of the required and available emergency response capacity (UNICEF resources and competencies, considering contextual aspects) and resulted in programme targets that were based on UNICEF's mandate and what it 'should' do (aspirational) rather than on what it 'could' do (organizational capacity and context). Planning targets were adjusted in 2014 to become more achievable and proportionate to capacity.

By focusing its programme efforts, UNICEF was able to develop an effective response. For WASH (water supply) and health (immunization), this contributed to the absence of disease, no outbreaks in camps and bringing polio back under control.

Child protection and education were initially a bigger challenge in terms of the speed of the response, the number of children assisted (reach) and service provision (quality).

Between 2012 and 2014, a large scale-up of programming and improvement in performance was achieved across the sub-region and across most UNICEF programmes.

To increase effectiveness and relevance, new programme approaches, modalities and targets incrementally shifted emphasis towards service-oriented, integrated approaches, with a focus on resilience and vulnerability rather than status, localization of activities and implementing partners.

Integrated and cross-sector initiatives such as No Lost Generation and regional polio immunization campaigns provided synergies between programmes, strong advocacy messages, broader impact of interventions and resource mobilization around common approaches, which led to greater effectiveness.

Due to limited evidence on programme modality versus cost and impact, it is not possible to determine how well UNICEF used its overall resources and therefore the efficiency of the response. Since mid-2014, UNICEF has increasingly made efforts to analyse cost data to inform programme decisions.

Engagement with others

Although UNICEF's engagement with others has largely enhanced humanitarian performance in the sub-region, attention is required for the mapping, selection and management of implementing partners, engagement with affected populations and working with non-state entities.

UNICEF's existing working relations with national and local authorities were a significant factor in aiding the effectiveness of the response, while government restrictions severely hindered the response, primarily in the Syrian Arab Republic. Limitations on humanitarian access inside the Syrian Arab Republic made it difficult to assess needs and deliver consistent humanitarian response to all parts of the country. UNICEF has developed new approaches, tools and systems to mitigate the impact of restrictions.

There was limited systematic engagement with the affected population in planning and feedback on the assistance provided, which reduced programme relevance.

At the sub-regional level, UNICEF has taken a key role in coordinating across sectors with other organizations on (sub-) regional plans, approaches, key issues and messages. This has contributed to improving the effectiveness of overall assistance to the affected population, including women and children.

UNICEF's role in (co-) leading sector working groups increased overall sector efficiency. Although the expanded Whole of Syria (WoS) structure (since September 2014) has improved coordination, the approach also means a higher cost for coordination.

Working relations with (local) implementing partners, including joint proposal writing, third-party monitoring and use of information shared, increased the effectiveness, relevance and coverage of programming. Challenges related to implementing partner management, including lack of pre-mapping and selection, duration of programme cooperation agreements (PCAs) and their slow financial process limited the coverage and efficiency of the response.

Relationships with donors were strong, though there is an increasing call for better reporting on UNICEF's strategic choices and operational results to support decision-making. Sustained funding will impact coverage positively, while donor disinterest and lower funding will impact coverage negatively.

No clear strategy was found for how relations would be sustained and developed moving forward.

Internal management and process

The evaluation found that internal management and process issues presented the most areas for improvement.

An initial mixed sense of urgency, combined with a lack of clear understanding of what to do in a humanitarian crisis with a strong protection dimension, extended the decision-making process (between country, regional and headquarters offices) and therefore reduced effectiveness.

The L3 Simplified Standard Operating Procedures (SSOPs) were initially appropriate to context but not consistently applied, which hindered efficiency. As the crisis became protracted, the trade-off between speed (SSOPs) and quality (standard operating procedures) became less suitable and reduced the effectiveness of the response. The appropriateness of the L3 SSOPs for different contexts has been consistently queried in UNICEF lessons learned exercises and evaluations and a revision process is currently ongoing (2015).

The roles and accountabilities of UNICEF Headquarters, MENARO, the Syria Hub and country offices were initially unclear. Internal interaction and communication was limited and this reduced efficiency as it hampered speed and integration.

Later on, the Syria Hub assumed a key role in the sub-regional response and in supporting country offices. The Hub has added great value in terms of planning, information management, reporting and resource mobilization. As the crisis has become protracted and the capacities of country offices have increased, however, it will be important to rationalize the role of the Syrian Hub moving forward.

An initial shortage of staff with emergency and supply capacity in the sub-region contributed to delayed programming and led to an extended period of surge deployments. This has affected the coverage and efficiency of the response.

UNICEF's strong funding capability supported an increase in funding levels to meet programming needs, which improved coverage and efficiency. UNICEF appealed for more than US$1.2 billion between 2012 and 2014 to cover

programming needs in Jordan, Lebanon, the Syrian Arab Republic and Turkey, of which more than US$955 million (79 per cent) was received. The level of funding differed by country and sector. In 2012, the total UNICEF funding appeal for Jordan, Lebanon, the Syrian Arab Republic and Turkey was US$107.7 million, which rose to US$808.2 million in 2015.

The existing process of establishing, managing and evaluating PCAs with implementing partners has presented a range of issues that have directly impeded UNICEF's speed and the quality of service delivery. However, a total of US$431.6 million was disbursed to implementing partners between 2012 and 2014 (excluding the Syrian Arab Republic), representing 65.5 per cent of the funding received by UNICEF (excluding the Syrian Arab Republic) during this period.

Limited focus on cost-effectiveness has impacted the ability to measure and demonstrate efficiency.

In terms of coherence, guidance was available, but was not always applied, widely disseminated or contextualized.

RECOMMENDATIONS

The evaluation recommendations were developed based on careful consideration of the evaluation findings, complement the themes covered in the findings and conclusions sections, and are all of equal importance. The recommendations were formulated to: 1) improve UNICEF's response in the Syrian Arab Republic and the sub-region; and 2) improve UNICEF's global humanitarian response activities for the future, based on lessons learned from the Syria crisis. The recommendations are interconnected and holistic. Therefore, to achieve significant improvement in UNICEF's humanitarian response, all areas need to be addressed.[8]

UNICEF has performed with increasing effectiveness as the Syria crisis has unfolded. The organization has demonstrated that its resources and capacities are appropriate to meeting the future challenges likely to be posed in responding to complex and protracted humanitarian emergencies.

By the end of 2015, many issues for improvement had been addressed and, at the time of writing, further improvements are ongoing or being formulated. As a result, the evaluation found positive trends in UNICEF performance. The evaluation concludes that the efforts behind these areas of improving performance should be continued. In areas where UNICEF is doing less well, additional efforts are required.

Key recommendations:

Recommendation 1: Develop an overarching sub-regional UNICEF strategy, based on comprehensive needs assessment and situation analysis (including risk analysis and conflict analysis) aimed at strengthening the coherence and consistency of the overall response, and linked to UNICEF's global priorities and responsibilities. This should include, for each country office, a long-term, country specific approach.

Recommendation 2: Clarify the future roles and accountabilities of Headquarters, MENARO/Syria Hub and country offices, including lines of communication, and provide appropriate guidance through updated standard operating procedures.

Recommendation 3: Optimize the selection and management of implementing partners.

Recommendation 4: Develop a systematic approach to information sharing, feedback and accountability mechanisms for the affected population and integrate these into country plans, programme proposals and monitoring and evaluation processes.

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[8]   The UNICEF Standard Operating Procedure for Management Response will apply, which includes management discretion to accept or reject each recommendation.

Recommendation 5: Develop UNICEF-specific guidance for measuring the efficiency of programming and operational support that is contextualized for the crisis.

Recommendation 6: At the global level, taking the lessons of the Syria crisis into account, develop key guidance, tools and the knowledge base needed to carry out humanitarian response activities in similar contexts (i.e. complex, multi-country, protracted emergencies, driven by conflict, featuring urban and camp settings and large-scale population displacement). Follow through to make such guidance widely available, accessible, known and understood.

RÉSUMÉ

INTRODUCTION

Les troubles civils en République arabe syrienne ont commencé en mars 2011 et marqué le début de l'une des plus importantes crises humanitaires de l'histoire. Depuis, la situation n'a cessé de se détériorer.

Une note d'information conjointe du Haut-Commissariat des Nations Unies pour les réfugiés (HCR) et du Bureau de la coordination des affaires humanitaires des Nations Unies (OCHA) de 2014 décrit les principales caractéristiques de cette situation d'urgence : une crise régionale complexe générant d'importants déplacements de populations (réfugiés et déplacés internes), compliquée par des intérêts internationaux, régionaux et nationaux antagonistes et conflictuels, et qui se heurte à des difficultés de coordination entre plusieurs organismes des Nations Unies (doubles mandats)[f1].

Le nombre de personnes touchées par le conflit en République arabe syrienne a été multiplié par 12 depuis le début de la crise. En juin 2015, les enfants représentaient près de la moitié des 12 millions de personnes ayant besoin, selon les estimations, d'une assistance humanitaire. Ils seraient 7,6 millions sur le territoire de la République arabe syrienne, et environ 60 % d'entre eux se trouveraient dans des zones difficiles d'accès. On enregistre en outre 4 millions de réfugiés syriens dans les pays voisins, dont environ 3,5 millions en Jordanie, au Liban et en Turquie[f2].

Dans le cadre de son action en faveur de l'aide internationale, l'UNICEF a organisé une intervention complexe et de grande envergure dans toute la sous-région. Six bureaux de pays participent actuellement à la mise en œuvre de programmes visant à répondre aux besoins des enfants touchés par la crise en République arabe syrienne et dans les pays voisins.

Objectif et finalité de l'évaluation

Bien qu'il y ait déjà eu de nombreuses évaluations et analyses portant sur différents éléments de la réponse de l'UNICEF à la crise syrienne[f3], c'est la première fois qu'une évaluation aussi exhaustive est menée à l'échelle de la région. Les termes de référence précisent que cette évaluation a pour objectif de « fournir une analyse complète de l'intervention globale de l'UNICEF en réaction à la crise syrienne ».

Cette évaluation répond à un double objectif de responsabilité et d'enseignement :

1) **rendre des comptes** grâce à une analyse exhaustive de l'intervention fondée sur le mandat et les normes de l'UNICEF, les objectifs poursuivis et les critères d'évaluation habituels ;

2) **tirer des enseignements** grâce à des données factuelles, des conclusions et des leçons à retenir, ainsi que des recommandations concernant les futures interventions humanitaires de l'UNICEF dans la sous-région mais aussi ailleurs dans le monde.

Portée de l'évaluation

Cette évaluation porte sur les différentes thématiques des activités opérationnelles de l'intervention de l'UNICEF en Syrie[f4], et en

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[f1]   HCR/OCHA, Note conjointe HCR – OCHA sur les situations mixtes : Coordination dans la pratique, avril 2014.

[f2]   Haut-Commissariat des Nations Unies pour les réfugiés, Portail interagence de partage de l'information – Réponse régionale à la crise des réfugiés en Syrie, <http://data.unhcr.org/syrianrefugees/regional.php>, consulté le 28 février 2016.

[f3]   L'expression « crise syrienne » se rapporte à la crise humanitaire infrarégionale née du conflit se déroulant en République arabe syrienne, et qui touche les populations de ce pays mais également des pays voisins (notamment l'Égypte, l'Iraq, la Jordanie, le Liban et la Turquie).

[f4]   L'expression « intervention en Syrie » se rapporte à l'intervention mise en place pour répondre à la crise humanitaire infrarégionale née du conflit se déroulant en République arabe syrienne, et qui touche les populations de ce pays mais également des pays voisins (notamment l'Égypte, l'Iraq, la Jordanie, le Liban et la Turquie).

particulier sur ses quatre programmes phares, à savoir la protection de l'enfance, l'éducation, la santé et l'eau, l'assainissement et l'hygiène (WASH). Ces programmes ont été évalués dans quatre pays : la République arabe syrienne, la Jordanie, le Liban et la Turquie[f5].

L'évaluation porte sur l'année 2012 (phase 2), la période 2013-2014 (phase 3) et la période 2015-2016 (avenir proche).

MÉTHODOLOGIE

Le Bureau de l'évaluation de l'UNICEF a défini l'objectif, la finalité, les questions, les résultats attendus et la portée de l'évaluation à partir d'un exercice initial de recherche et de consultation.

L'évaluation proprement dite a été réalisée entre mars et novembre 2015 par un cabinet de conseil spécialisé, indépendamment de l'intervention en Syrie. Elle a été dirigée par le Bureau de l'évaluation de l'UNICEF et supervisée par le Groupe de référence pour l'évaluation de l'intervention humanitaire infrarégionale en Syrie.

Conception de l'évaluation et collecte des données

L'intervention de l'UNICEF en réaction à la crise syrienne a été évaluée à l'aide d'un cadre d'analyse des données comprenant cinq domaines prioritaires, définis par la direction de l'UNICEF comme les principaux objectifs opérationnels à analyser :

- **Efficacité :** dans quelle mesure l'aide apportée par l'UNICEF a-t-elle été profitable ?

- **Pertinence :** l'intervention de l'UNICEF s'est-elle adaptée au fur et à mesure à l'environnement et aux besoins de la population touchée ?

- **Couverture :** dans quelle mesure l'UNICEF a-t-il réussi à élargir son action et à répondre aux besoins analysés ?

- **Efficience :** quel a été le degré d'efficience de l'intervention (rapidité, coût et qualité) ?

- **Intervention :** les outils d'orientation humanitaire de l'UNICEF ont-ils été utilisés et utiles dans le contexte de la crise syrienne ?

Les recommandations du Comité d'aide au développement (CAD) de l'Organisation de coopération et de développement économiques (OCDE) et du Réseau d'apprentissage pour la responsabilisation et l'efficacité en matière d'assistance humanitaire (ALNAP) ont été appliquées afin de déterminer les critères et les indicateurs sur lesquels a porté l'évaluation. Ces critères correspondent aux domaines prioritaires susmentionnés.

Les domaines prioritaires ont servi à élaborer des outils de collecte de données. Les données primaires ont été recueillies auprès de quatre grands groupes d'acteurs : le personnel de l'UNICEF (bureaux de pays, bureaux régionaux et siège), les partenaires d'exécution, les partenaires de coordination et la population touchée. Les données secondaires proviennent d'une étude documentaire approfondie menée tout au long de la période d'évaluation (avant, pendant et après la collecte de données) et des données complémentaires ont été tirées d'une enquête en ligne. Toutes les données utilisées ont été vérifiées par triangulation au cours de l'analyse.

Les observations de l'évaluation reposent sur une analyse en quatre étapes. À chaque étape, les résultats ont été croisés avec des données complémentaires et vérifiés avec l'aide des membres du personnel de l'UNICEF (agents techniques, chargés des opérations sur le terrain et cadres) et du Groupe de référence interne de l'UNICEF.

[f5]   Nous avons inclus la Turquie suite à l'examen des résultats d'un rapport commandé par UNICEF Turquie, le Bureau régional ECO/CEI et le Bureau de l'évaluation de l'UNICEF : Fonds des Nations Unies pour l'enfance, An independent evaluation of UNICEF's response to the Syrian refugee crisis in Turkey, 2012-2015, UNICEF, New York, novembre 2015.

Le **principal inconvénient de l'évaluation** est qu'elle s'attache à formuler des observations pour l'ensemble de la sous-région. Bien que l'on ait pu mettre en évidence des variations entre les pays et les programmes, l'objet n'était pas de fournir une évaluation détaillée pour un pays ou un programme en particulier.

Le **principal avantage** de cette démarche est qu'elle a permis de rassembler des données recueillies auprès de différentes sources à des fins de comparaison et d'analyse, et d'identifier des observations valables pour l'ensemble des composantes de l'évaluation.

CONTEXTE

Avant la crise syrienne, les bureaux de pays de l'UNICEF présents dans la région s'attachaient essentiellement à renforcer les capacités institutionnelles de leurs partenaires dans les pays à revenu intermédiaire de la tranche supérieure. Les mesures de préparation aux situations d'urgence étaient limitées, et il semblait entendu que les événements survenus en République arabe syrienne en 2011 seraient de courte durée. Au début de la crise syrienne, les organisations humanitaires n'ont pas anticipé (et ne pouvaient probablement pas prévoir) l'importance des besoins humanitaires et de protection, ni le fait qu'ils se propageraient si rapidement pour toucher une si grande partie de la population et de la sous-région.

La situation a évolué de telle façon que les organisations ont dû aider à la fois les millions de personnes forcées à un déplacement rapide dans l'ensemble de la sous-région et les millions d'autres bloquées dans des zones difficiles d'accès en République arabe syrienne. Le conflit sur le territoire syrien et l'installation de réfugiés dans les pays voisins ont donné lieu à des difficultés et des stratégies très différentes. Ces défis redoutables ont mis à l'épreuve l'efficacité des opérations humanitaires et le conflit, de par sa nature dynamique, a déjoué les prévisions des programmes à maintes reprises.

L'INTERVENTION DE L'UNICEF

En matière de **protection de l'enfance**, l'intervention dans l'ensemble des pays s'est principalement traduite par les actions suivantes : soutien psychosocial d'urgence ; prise en charge des patients et plaidoyer, notamment pour assurer l'accès aux zones reculées (République arabe syrienne) ; élaboration de politiques, exercice d'une influence sur la législation et mise en place de procédures opérationnelles standard (Jordanie et Liban) ; ou encore soutien au gouvernement pour lui permettre d'assumer son rôle de leadership et de coordination de la protection de l'enfance, à la fois au niveau national et local (Turquie). Le soutien psychosocial d'urgence a été la principale intervention mise en œuvre par les bureaux de pays, qui se sont d'abord attachés à informer les enfants et leurs familles sur les services disponibles et à les doter des compétences nécessaires à la vie courante par le biais d'une formation.

En vertu de son mandat en faveur de l'**éducation**, l'UNICEF a encouragé et favorisé la scolarisation (école classique ou classes alternées) et la délivrance de diplômes, à la fois dans les camps et dans les communautés d'accueil. L'organisation a également appuyé la mise en place de services éducatifs informels dans les camps, les communautés d'accueil et les installations en dehors des camps, et intensifié son soutien aux programmes de formation professionnelle et de formation aux compétences nécessaires à la vie courante destinés aux adolescents.

Les programmes de **santé**, initialement axés sur la vaccination contre la rougeole, ont privilégié la vaccination antipolio dans l'ensemble de la région suite à l'épidémie de poliomyélite survenue en République arabe syrienne en octobre 2013, en se concentrant plus particulièrement sur l'approvisionnement en vaccins, la logistique, la chaîne du froid et la communication. UNICEF République arabe syrienne a contribué à la distribution de fournitures médicales essentielles dans les cliniques du pays gérées par le Ministère de la santé et par des

ONG. UNICEF Turquie a joué un rôle important dans les campagnes de vaccination antipolio menées par le gouvernement en collaboration avec l'OMS dans les zones frontalières suite aux épidémies de polio en République arabe syrienne en 2013-2014. Les autres activités et programmes menés dans le domaine de la santé ne reposaient sur aucune orientation stratégique ou planification clairement consignée par écrit.

Le programme **WASH**, prioritaire au niveau régional, a été mené en étroite collaboration avec plusieurs partenaires. Chaque bureau de pays a privilégié des activités différentes, qu'il s'agisse de l'approvisionnement en eau (Jordanie et République arabe syrienne), de la gestion des eaux usées (Jordanie) ou de la réparation et rénovation des infrastructures (Jordanie, Liban et République arabe syrienne). Aucun programme WASH n'a été mis en œuvre en Turquie.

Des **initiatives intersectorielles** ont également été mises en place, notamment le projet *No Lost Generation* (« Non à une génération perdue »)[f6], un cadre stratégique à l'échelle régionale (voir l'encadré 9), et l'initiative *Makani* (« Mon espace », en arabe)[f7], un programme national intégré en Jordanie.

CONCLUSIONS

L'évaluation a conclu que l'analyse de l'intervention humanitaire de l'UNICEF dans la sous-région dépendait de deux facteurs interdépendants : 1) l'UNICEF a-t-il atteint ses objectifs principaux ? ; et 2) l'UNICEF apporte-t-il l'aide qu'il faut, où il faut et quand il faut ?

Les conclusions doivent être examinées en tenant compte des contraintes contextuelles qui ont pesé sur l'intervention humanitaire de l'UNICEF en République arabe syrienne et dans la sous-région, et qui pour beaucoup échappent au contrôle de l'UNICEF. Ces aspects contextuels, variables d'un pays à l'autre, sont notamment :

- le **caractère politique complexe** de la crise, qui a entraîné des modifications incessantes des paramètres de l'intervention, notamment en ce qui concerne l'ampleur et la portée de la crise, ainsi que le déplacement perpétuel des fronts de bataille et des populations touchées ;

- le **rôle des États**, qui a eu une incidence sur la rapidité et l'espace d'intervention de l'UNICEF (en particulier concernant les opérations menées en République arabe syrienne, compte tenu des difficultés d'accès) ;

- les **problèmes de sécurité**, qui ont mis en danger le personnel de l'UNICEF et de ses partenaires d'exécution ;

- la **durée prolongée** de la crise et ses répercussions sur la capacité des pays à apporter leur aide.

Conclusion générale

Malgré les difficultés liées à l'environnement opérationnel que nous venons de décrire et les inconvénients de sa méthode, **l'UNICEF a globalement réussi à atteindre ses objectifs principaux**. Si l'intervention a mis du temps à se mettre en place (2012), l'évaluation a révélé que l'organisation s'était considérablement investie dans la mise en œuvre de ses programmes et qu'elle avait peu à peu renforcé ses capacités et amélioré ses performances en 2013 et 2014, pour atteindre à partir de 2014 un déploiement et une portée significatifs.

Toutefois, il était difficile de déterminer si ces efforts ciblaient les zones prioritaires et les besoins les plus urgents de la population touchée dans le cadre du mandat de l'UNICEF (et donc si l'UNICEF prenait les bonnes décisions) car ce dernier ne disposait pas d'une

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[f6] Pour plus d'informations, consulter <http://nolostgeneration.org/about>, consulté le 30 mars 2016.

[f7] Pour plus d'informations, consulter <www.unicef.org/jordan/MAKANI_COMPREHENSIVE_Approach-UNICEF2015.pdf>, consulté le 30 mars 2016.

stratégie claire fondée sur une évaluation des besoins, une analyse de scénarios et un suivi des résultats.

Rôle et stratégie

Le mandat clairement défini de l'UNICEF (au niveau mondial) a permis aux partenaires de bien comprendre le rôle de l'organisation. L'opinion était toutefois divisée sur la question du rôle majeur que celle-ci devait jouer par la suite : un rôle de coordination et de stratégie ou un rôle de gestion de l'exécution et des opérations sur le terrain ? Le rôle de coordination et de stratégie de l'UNICEF devrait en effet s'accentuer à l'avenir, car on s'attend à ce que les besoins des populations et les besoins de financement continuent de s'intensifier, ce qui signifie que des secteurs entiers devront en faire plus avec moins de moyens.

L'UNICEF s'est considérablement investi dans l'élaboration de plans régionaux interorganisations (Plan d'aide humanitaire pour la Syrie, ou SHARP, Plan d'intervention stratégique, etc.). Les bureaux de pays ont également mis en place des plans d'intervention opérationnelle et quelques plans sectoriels. La motivation et l'objectif des décisions prises dans ce cadre n'apparaissent toutefois pas clairement. Une logique bien définie au niveau de l'organisation aurait pourtant permis 1) de faire le lien entre les différentes interventions sectorielles de l'UNICEF et d'orienter les choix en matière de programmation et de plaidoyer, et 2) de transposer la stratégie globale du secteur en une stratégie propre à l'institution, fondée sur une analyse contextuelle, une évaluation systématique des besoins et des vulnérabilités et une définition des capacités organisationnelles de l'UNICEF. Les programmes ont donc souvent été décidés en réaction à des opportunités, sans définition claire des priorités ni suivi régulier des résultats. Cela signifie également que l'UNICEF n'a pas exploité au maximum son mandat et ses capacités pour venir en aide à toutes les populations touchées.

Programmes d'intervention

Il s'est avéré difficile d'évaluer de façon identique les performances des programmes pour les différentes interventions et les différentes périodes, en raison, 1) du manque d'homogénéité de la stratégie et des objectifs de l'UNICEF, 2) de l'absence de données de référence et autres données permettant de mesurer les progrès réalisés et 3) d'un manque de régularité dans le suivi des objectifs des programmes. Les programmes ont par ailleurs évolué en fonction du contexte et des ressources disponibles.

Les capacités d'intervention de l'UNICEF se sont vues limitées par un manque de préparation et par l'absence de stratégie institutionnelle claire, mais également par une incapacité à renseigner activement les programmes à partir d'analyses de situation, ce qui a quelque peu affecté l'efficacité, la pertinence et la couverture de l'intervention.

Tous les programmes n'ont pas atteint leurs objectifs en 2012 et 2013, en partie à cause d'une mauvaise appréciation des capacités d'intervention d'urgence requises et disponibles (ressources et compétences de l'UNICEF, compte tenu du contexte). Les objectifs des programmes se sont par conséquent fondés sur le mandat de l'UNICEF et sur « ce qu'il fallait faire » (ambition) plutôt que sur « ce qu'il était possible de faire » (capacités organisationnelles et contexte). Les objectifs de planification ont été ajustés en 2014 afin d'être plus réalistes et plus en adéquation avec les capacités.

La concentration de ses efforts programmatiques a permis à l'UNICEF de mettre en place des mesures efficaces. Les actions dans le secteur WASH (approvisionnement en eau) et le secteur de la santé (vaccination) ont permis d'éviter les maladies et les épidémies dans les camps et de reprendre le contrôle de la situation concernant la polio.

La protection de l'enfance et l'éducation ont d'abord représenté un défi plus important en termes de rapidité d'intervention, de portée (nombre d'enfants aidés) et de

qualité (services proposés). Entre 2012 et 2014, l'UNICEF a réussi à intensifier considérablement son action et à améliorer ses performances dans l'ensemble de la sous-région et pour la plupart de ses programmes.

Afin d'améliorer l'efficacité et la pertinence, les stratégies, modalités et objectifs des programmes se sont peu à peu orientés vers des initiatives intégrées et axées sur les services, centrées sur la résilience et la vulnérabilité plutôt que sur le statut, la localisation des activités et les partenaires d'exécution.

Les initiatives intégrées et intersectorielles telles que le projet *No Lost Generation* et les campagnes régionales de vaccination antipolio ont permis de créer des synergies entre les programmes, d'assurer un plaidoyer convaincant, de renforcer l'impact des interventions et de mobiliser des ressources en vue de démarches communes, et donc d'améliorer l'efficacité.

Faute d'éléments sur les modalités des programmes, leur coût et leur impact, il n'est pas possible d'apprécier dans quelle mesure l'UNICEF a utilisé à bon escient ses ressources globales, et donc de déterminer l'efficience de l'intervention. Depuis le milieu de l'année 2014, l'UNICEF s'attache de plus en plus à analyser les données relatives au coût de façon à prendre des décisions éclairées concernant les programmes.

Coopération avec les autres acteurs

Bien que la coopération de l'UNICEF avec d'autres acteurs ait en grande partie renforcé l'efficacité de l'intervention humanitaire dans la sous-région, il convient de prêter une attention particulière au recensement, à la sélection et à la gestion des partenaires d'exécution, à la coopération avec les populations touchées et à la collaboration avec les entités non étatiques.

Les relations de travail déjà établies entre l'UNICEF et les autorités nationales et locales ont nettement contribué à l'efficacité de l'intervention, tandis que les restrictions gouvernementales l'ont sérieusement

compromise, principalement en République arabe syrienne. Compte tenu des restrictions d'accès visant l'aide humanitaire en Syrie, il a été difficile d'évaluer les besoins et d'assurer une intervention homogène dans toutes les régions du pays. L'UNICEF a élaboré de nouvelles stratégies et mis en place de nouveaux outils et systèmes afin d'atténuer l'impact de ces restrictions.

La population touchée n'a pas été systématiquement associée à la planification ni invitée à donner son avis sur l'assistance fournie, ce qui a diminué la pertinence des programmes.

Au niveau de la sous-région, l'UNICEF a joué un rôle majeur en coordonnant les plans (infra) régionaux, les stratégies, les questions clés et les messages des différentes organisations dans l'ensemble des secteurs. Cela a contribué à améliorer l'efficacité de l'aide globale apportée à la population touchée, notamment aux femmes et aux enfants.

L'UNICEF a également (co)dirigé des groupes de travail sectoriels, ce qui a renforcé l'efficience globale des secteurs concernés. Le développement (depuis septembre 2014) de la structure *Whole of Syria* a permis d'améliorer la coordination, mais pour un coût plus élevé.

L'efficacité, la pertinence et la couverture des programmes ont été renforcées par les relations de travail avec les partenaires d'exécution (locaux) : rédaction de propositions conjointes, suivi par une tierce partie et utilisation d'informations partagées. En revanche, la couverture et l'efficience des mesures ont été limitées par les difficultés relatives à la gestion des partenaires d'exécution, notamment l'absence de recensement et de sélection préalables, la durée des Accords de coopération au titre des programmes (PCA) et la lenteur du processus financier.

On constate par ailleurs de solides relations avec les donateurs, qui cependant appellent de plus en plus à une meilleure communication sur les choix stratégiques et les résultats opérationnels de l'UNICEF de façon à faciliter les processus de décision. La poursuite des

financements aura une incidence positive sur la couverture, tandis qu'un désintérêt des donateurs et une baisse des financements auront des répercussions négatives.

Il ne semble exister aucune stratégie précise concernant la poursuite des relations et leur évolution à l'avenir.

Gestion et processus internes

L'évaluation a révélé que la gestion et les processus internes pouvaient particulièrement être améliorés.

Un sentiment initial d'urgence, combiné à une mauvaise appréciation des mesures à prendre en cas de crise humanitaire comportant une importante dimension de protection, ont prolongé le processus de décision (entre les bureaux de pays, les bureaux régionaux et le siège) et donc réduit l'efficacité.

Au début, les procédures opérationnelles standard simplifiées (POSS) de niveau 3 étaient adaptées au contexte, mais pas appliquées de façon homogène, ce qui a compromis l'efficience. Avec le prolongement de la crise, l'arbitrage entre la vitesse (POSS) et la qualité (procédures opérationnelles standard) a perdu sa pertinence et réduit l'efficacité de l'intervention. L'adéquation des POSS de niveau 3 à différents contextes a été constamment remise en cause lors des retours d'expérience et des évaluations de l'UNICEF, et ces procédures font actuellement l'objet d'une révision (2015).

Au début de la crise, les responsabilités et le rôle respectif du siège de l'UNICEF, du Bureau régional pour le Moyen-Orient et l'Afrique du Nord, du pôle Syrie et des bureaux de pays étaient mal définis. Le manque d'interaction et de communication internes a compromis la rapidité et la coordination, ce qui a affecté l'efficience.

Par la suite, le pôle Syrie a joué un rôle majeur dans l'intervention infrarégionale et l'aide aux bureaux de pays. Il a apporté une grande valeur ajoutée en termes de planification, de gestion de l'information, d'établissement de rapports et de mobilisation des ressources. Compte tenu du prolongement de la crise et du renforcement des capacités des bureaux de pays, son rôle devra toutefois être rationalisé dans les mois à venir.

Les programmes ont également été retardés par le manque initial de personnel formé aux interventions d'urgence et à l'approvisionnement dans la sous-région. Les déploiements de renforts prolongés mis en place en conséquence ont affecté la couverture et l'efficience de l'intervention.

L'importante capacité financière de l'UNICEF a permis d'augmenter les niveaux de financement de façon à faire face aux besoins des programmes, ce qui a amélioré la couverture et l'efficience. Entre 2012 et 2014, l'UNICEF a sollicité plus de 1,2 milliard de dollars US afin de couvrir les besoins programmatiques en Jordanie, au Liban, en République arabe syrienne et en Turquie, et a reçu plus de 955 millions de dollars US (79 %), avec un niveau de financement variable selon les pays et les secteurs. Le montant total sollicité pour ces quatre pays est passé de 107,7 millions de dollars US en 2012 à 808,2 millions en 2015.

La procédure existante de mise en place, de gestion et d'évaluation des PCA avec les partenaires d'exécution a posé divers problèmes qui ont directement compromis la rapidité et la qualité des services fournis par l'UNICEF. Néanmoins, l'organisation a versé au total 431,6 millions de dollars US à ses partenaires d'exécution entre 2012 et 2014 (à l'exception de la République arabe syrienne), soit 65,5 % des financements reçus au cours de cette période (à l'exception de la République arabe syrienne).

La question de la rentabilité ayant été mal prise en compte, l'efficience a été difficile à mesurer et à démontrer.

En ce qui concerne la cohérence, les directives disponibles n'ont pas toujours été appliquées, diffusées au plus grand nombre ou contextualisées.

RECOMMANDATIONS

Les recommandations ont été formulées suite à un examen attentif des observations de l'évaluation. Elles complètent les thèmes abordés dans les sections « Observations » et « Conclusions », et sont toutes d'égale importance. Elles ont été formulées en vue 1) d'améliorer l'intervention de l'UNICEF en République arabe syrienne et dans la sous-région, et 2) d'améliorer les futures interventions humanitaires de l'organisation dans le monde entier grâce aux leçons tirées de la crise syrienne. Ces recommandations sont interdépendantes et globales, ce qui signifie que pour améliorer sensiblement l'intervention humanitaire de l'UNICEF, tous les domaines doivent être pris en compte[f8].

L'UNICEF a fait preuve d'une efficacité croissante au fur et à mesure de l'évolution de la crise syrienne. L'organisation a démontré qu'elle disposait des ressources et des capacités suffisantes pour répondre aux futurs défis susceptibles de se présenter face à des situations d'urgence humanitaire complexes et de longue durée.

Fin 2015, l'UNICEF avait déjà travaillé sur de nombreux points d'amélioration, et à l'heure où nous rédigeons ce document, d'autres solutions sont en cours de mise en place ou d'élaboration. L'évaluation a donc révélé une évolution positive des résultats de l'UNICEF. Elle conclut à la nécessité de poursuivre les efforts engagés dans les domaines ayant enregistré des améliorations, et de redoubler d'efforts dans ceux où l'UNICEF est moins performant.

Principales recommandations :

Recommandation n⁰ 1 : Élaborer une stratégie infrarégionale globale, fondée sur une évaluation exhaustive des besoins et une analyse de la situation (analyse des risques et des conflits), visant à renforcer la cohérence et l'homogénéité de l'intervention globale, et en lien avec les priorités et les responsabilités de l'organisation au niveau mondial. Cette stratégie devra inclure, pour chaque bureau de pays, une stratégie à long terme adaptée au pays en question.

Recommandation n⁰ 2 : Définir clairement le rôle et les responsabilités du siège, du Bureau régional pour le Moyen-Orient et l'Afrique du Nord/pôle Syrie et des bureaux de pays à l'avenir, notamment les voies de communication, et mettre à jour les procédures opérationnelles standard de façon à fournir des directives adaptées.

Recommandation n⁰ 3 : Optimiser la sélection et la gestion des partenaires d'exécution.

Recommandation no 4 : Adopter une démarche systématique de partage et de retour d'information et des mécanismes de responsabilité vis-à-vis de la population touchée, et intégrer ces démarches dans les plans nationaux, les propositions de programmes et les processus de suivi et d'évaluation.

Recommandation n⁰ 5 : Élaborer un document d'orientation propre à l'UNICEF pour mesurer l'efficience des programmes et apporter un soutien opérationnel adapté au contexte de crise.

Recommandation n⁰ 6 : Au niveau mondial, tenir compte des enseignements tirés de la crise syrienne et mettre en place les principaux outils, directives et bases de connaissances nécessaires pour mener des interventions humanitaires dans des contextes similaires (situations complexes d'urgence prolongée, impliquant plusieurs pays, engendrées par le conflit, en zone urbaine et dans des camps, et donnant lieu à d'importants déplacements de population). Diffuser ensuite ces outils afin qu'ils soient disponibles, accessibles, connus et compris par le plus grand nombre.

[f8]   Les procédures opérationnelles standard de l'UNICEF s'appliqueront en matière de réponse de la direction ; cette dernière sera donc libre d'accepter ou de rejeter chacune des recommandations.

CHAPTER 1
INTRODUCTION

The Syria crisis represents one of the most complex humanitarian emergencies of recent times. Its scale and breadth have required an unprecedented humanitarian response from UNICEF, alongside other actors.

This report presents the findings, analysis and recommendations of a regional evaluation of UNICEF's response, conducted between March and November 2015. The report is organized into six chapters that cover the dual purpose of accountability and learning. The context for UNICEF's humanitarian response described in Chapter 3 and the overview of significant findings provided in Chapter 4 inform the accountability function of the evaluation. Chapter 5, which provides conclusions on the strengths and weaknesses of the UNICEF response, and Chapter 6, which outlines recommendations, support the learning function.

This chapter is composed of three sections. Section 1.1 defines the purpose of the evaluation and its intended audience; Section 1.2 describes the primary objectives and outputs of the evaluation; and Section 1.3 outlines the scope of the evaluation.

1.1 EVALUATION PURPOSE

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".[9] In addition, "the evaluation is intended to serve both an accountability function (historical/summative) and a learning function (forward-looking and formative)".[10]

The main intended users of the information and outputs of the evaluation are "managers and staff in MENARO, the CEE/CIS Regional Office and in country offices in the sub-region; senior managers, policy makers and advisors at UNICEF Headquarters; and others in UNICEF for whom the Syria response holds relevant lessons".[11]

1.2 OBJECTIVE AND OUTPUTS

The three core themes covered by the evaluation are UNICEF's role and strategy, the organization's engagement with others and the internal management and processes. These themes are reflected in the main objectives of the evaluation *(see Figure 1)*, which are addressed through 56 evaluation questions[12] *(see Appendix 1)*.

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9   See Appendix 1, Evaluation Terms of Reference, p. 3, paragraph 2.2.
10   Ibid., p. 3, paragraph 2.1.
11   Ibid., p. 3, paragraph 2.4.
12   Ibid., pp. 5–7, paragraphs 4.1–4.4.

The main objective is to provide an **independent**[14] **and robust evaluation of UNICEF's emergency response** under three core themes:

1. UNICEF **strategy and key programme interventions**, programme choices and related operations, including attributable results.

2. UNICEF **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.

3. UNICEF **management structures and operational processes**, including its L2 and L3 procedures, in relation to its Syria crisis response and performance.

1.3 EVALUATION SCOPE

The evaluation covers the core evaluation themes across all of UNICEF's operational activities in the Syria response, specifically across its four main 'flagship' programmes: child protection, education, health and WASH.[15] These programmes have been evaluated across four countries: the Syrian Arab Republic, Jordan, Lebanon and Turkey.[16]

The evaluation addresses UNICEF's response to the emergency across the sub-region and does not separately evaluate each country programme response. Examples from country programmes are considered for the light they shed on the core themes of the evaluation. Given the sub-regional scope of the evaluation, it is not possible to examine all topics in detail across the different countries, contexts and programmes, and there will be some situations that differ from the findings of this report.

The time period covered by the evaluation is 2012 (phase L2, 2013–2014 (phase L3 and 2015–2016 (the near future).

The evaluation should be read considering the complex and dynamic country contexts that present limitations for the humanitarian response in the Syrian Arab Republic and the sub-region. These contextual aspects, which have affected the entire humanitarian sector, include:

- The complex political character of the crisis;

- The role of governments;

- The magnitude and protracted character of the crisis (multi-country, multi-year);

- Access constraints in the Syrian Arab Republic;

- Security and safety risks.

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[13] Ibid., p. 3, paragraph 2.3.

[14] In UNICEF's approach to evaluations, 'independent' means that the evaluation is conducted in collaboration with the UNICEF Evaluation Office and so is essentially internal to UNICEF as an organization, but independent of the UNICEF Syria response (to mitigate conflicts of interest during the evaluation).

[15] See Appendix 1, Evaluation Terms of Reference, p. 5, paragraph 3.3. With specific focus on psychosocial support and the Monitoring and Reporting Mechanism (child protection), access to education (education), immunization (health) and water supply (WASH).

[16] See Appendix 1, Evaluation Terms of Reference, p. 4, paragraph 3.2. "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 UNICEF Turkey."

CHAPTER 2
METHODOLOGY

This chapter is composed of two sections. Section 2.1 summarizes the overall design and approach to the evaluation, data analysis and the data collection process, including quality assurance. Appendix 5 provides a more detailed description of the methodology. Section 2.2 describes the limitations and advantages of the methodology employed.

2.1 DESIGN AND APPROACH

The UNICEF Evaluation Office formulated the purpose, objectives, questions, outputs and scope of the evaluation based on a six-month scoping, research and consultation exercise.

The evaluation itself was undertaken between March and November 2015 by a specialist consultancy firm. The evaluation was independent of the Syria response. The UNICEF Evaluation Office managed the evaluation and the Reference Group for the Syria sub-regional humanitarian evaluation guided the process.

The main research challenge has been managing data collection across the wide programmatic, geographic and temporal scope of UNICEF's Syria response in such a way that the data can be reliably: 1) **consolidated** to meet the evaluation's accountability function; 2) **analysed** to address the 56 evaluation questions from the core themes; and 3) **compared** to provide inputs for the learning function.

The UNICEF response to the Syria crisis was evaluated using a data analysis framework comprising five focus areas identified by UNICEF senior managers as the main operational outcomes, to assess:

- **Effectiveness:** How well did UNICEF deliver assistance?

- **Relevance:** Was the UNICEF response appropriate for the environment and needs of the affected population, over time?

- **Coverage:** How well was UNICEF able to scale up and meet the assessed needs?

- **Efficiency:** How efficient was the response (speed, cost and quality)?

- **Coherence:** Have UNICEF's humanitarian guidance tools been used and of use in the context of the Syria crisis?

Guidance from OECD/DAC and the ALNAP was applied to identify criteria and design indicators against which the evaluation has been carried out. These criteria are aligned with the focus areas above.

The focus areas informed the design of the data collection tools and primary data were collected from four main stakeholder groups: UNICEF staff (from country, regional and headquarters offices), implementing partners, coordinating partners and the affected population. Secondary data came from an extensive literature review conducted throughout the evaluation period (before, during and after data collection) and supporting data came from a web-based survey. All data inputs were triangulated during the analysis.

Four analysis steps were used to produce the evaluation findings and at each stage the outcomes were cross-referenced with supporting data and reviewed with relevant technical, field operations and managerial UNICEF staff members and the internal Reference Group for the Syria sub-regional humanitarian evaluation.

2.2 LIMITATIONS AND ADVANTAGES

Limitations and advantages of the evaluation scope and methodology

The main limitation of the approach was that although results are robust and reliable across the sub-region, country and programmatic variances are only captured to a limited extent. Figure 2 highlights additional limitations.

The main strength of the approach was the ability to consolidate data collected from different sources, which allowed for the identification of findings across all evaluation components. Figure 3 highlights additional advantages of the methodology.

**BOX 2: Limitations
of the methodology**

- **Limitations in primary data** collection due to access restrictions in the Syrian Arab Republic and based on the report of a concurrently conducted evaluation in Turkey

- 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 populations and donors

- Limited access to stakeholders involved in the **early stages of the operation**

- **Inconsistent availability of data** sources across time and countries

- **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** for providing disaggregated results with statistical significance

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**BOX 3: Advantages
of the methodology**

- **Practicality of the process.** This was required for conducting a complex evaluation with limited resources and in a short period of time.

- **Systematic coverage** of the evaluation questions

- **Clarity and utility** of the findings

- **Robustness**[17] 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

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Data limitations

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

A set of 10 common indicators covering the four programme sectors were chosen *(see Chapter 4, Table 1)* because they are among a set of common indicators used in UNICEF

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[17] 'Robustness' describes 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: Investopedia.com).

regional dashboard data and were used most consistently across years, programmes and countries in the region. The following common regional indicators were not used in all countries:

- Number of emergency-affected people accessing safe water (in Turkey)

- Number of emergency-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 among the different agencies. For example, the number of children receiving essential education materials in the Syrian Arab Republic in 2013 was reported as 1.5 million in the 'UNICEF Syria crisis bi-weekly humanitarian situation report'[18] and SHARP;[19] 9,400 in internal 2013 UNICEF dashboard data;[20] and 999,680 by UNICEF Syrian Arab Republic. [21]

Similar discrepancies appear elsewhere. For example, the number of emergency-affected people accessing safe water in the Syrian Arab Republic in 2013 was reported as 3,239,746 in the 'UNICEF Syria crisis bi-weekly humanitarian situation report'[22] and 38,700 in internal 2013 UNICEF dashboard data.[23]

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18   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.

19   '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.

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

21   Ibid.

22   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.

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

CHAPTER 3
OBJECT OF THE EVALUATION

This chapter is composed of four sections. Section 3.1 describes the Syria crisis context and background in which UNICEF has been operating and a chronology of events that took place between 2011 and 2015. Appendix 7 provides additional information in this regard, including a timeline of political and humanitarian events versus UNICEF events. Section 3.2 provides brief descriptions of the characteristics of the four countries within the scope of the evaluation. Section 3.3 describes the UNICEF response to the Syria crisis in the sub-region by programme sector, and Section 3.4 describes the organizational structure and tools employed by UNICEF during the response.

BOX 4: Syria crisis context

The Syria crisis is characterized by the disintegration of a middle-income country into an armed conflict, with extensive violations of human rights and international humanitarian law, and an extremely challenging context for the deployment of humanitarian operations. Humanitarian access to large parts of the Syrian Arab Republic has steadily diminished since the start of the crisis in 2011, with a corresponding 12-fold increase in humanitarian and protection needs. There are 12.2 million people in need of humanitarian assistance, including 7.6 million internally displaced and hard-to-reach persons, and more than 5.6 million children across the sub-region (of which some 5.4 million are located in the sub-region within the scope of the evaluation).

The Syria crisis has placed immense strain on the neighbouring countries of Jordan, Lebanon and Turkey, all of which host large numbers of refugees. Although these countries are middle-income level, with significant government capabilities and growing civil societies, the crisis is severely straining public services and the coping abilities of host communities. Many refugees are living in areas that were already poor, with limited livelihood opportunities and stretched housing and social services, which has exacerbated vulnerabilities among the local populations. Since the start of the crisis, the number of Syrian refugees in neighbouring countries has surged, with major increases in September 2011, July and August 2012, July 2013 and September 2014. The dynamic nature of the crisis in the Syrian Arab Republic and the sub-region has continued to surpass planning assumptions and the number of Syrian refugees across the sub-region is expected to rise to more than 4 million by the end of 2015.

The intensity of the humanitarian and protection needs and the rapid escalation of these needs across so much of the population and the sub-region are significant characteristics of the Syria crisis context. When the crisis began in 2011, humanitarian organizations did not (and likely could not) anticipate the development of the conflict, the scale of the needs and the protracted nature of the situation. Although humanitarian operations have been greatly enhanced by positive cooperation from governments hosting refugees, these efforts have also been severely hindered by limitations in humanitarian access inside the Syrian Arab Republic, which has made it difficult to assess needs and deliver a consistent humanitarian response in all parts of the country. This context has demanded that agencies respond simultaneously to millions of people engaged in rapid displacement across the sub-region, as well as to millions of others who were displaced and difficult to reach within the Syrian Arab Republic. These challenges have framed the main strategic test of effective humanitarian operations.

3.1 CONTEXT

The rest of this section provides a chronology of the political and humanitarian events that have taken place in the Syrian Arab Republic and neighbouring countries since the start of the conflict *(see also the timeline in Appendix 7)*.

The crisis in the Syrian Arab Republic was prompted by the 'day of dignity' protests in **mid-March 2011** that called for the release of political prisoners.[24] The United Nations Human Rights Council Independent International Commission of Inquiry on the Syrian Arab Republic described a pattern of violations against civilians that characterized the initial phase of violence in 2011.[25] Excessive use of force and extrajudicial executions were deployed early on, including indiscriminate shootings during the suppression of demonstrations or 'shoot-to-kill' operations targeting

opposition activists. Sexual violence against women, men, boys and girls also became a feature of the crisis from its early days. In April 2011, Syrian troops backed by tanks began to besiege the town of Deraa and in May 2011 the United Nations imposed sanctions on President Assad.

From **late 2011 onwards**, the crisis moved from violent repression to military conflict with direct attacks on civilians and civilian areas. This has continued as a main feature of the war, with attacks on civilians conducted largely by government forces but also by some opposition forces. Bombardment has been carried out using modern weapons and cluster munitions.[26] On 8 November 2011, the Office of the United Nations High Commissioner for Human Rights (OHCHR) estimated that Syrian State forces had killed 3,500 civilians since March 2011. The Arab League suspended the country's membership in November 2011.

FIGURE 1: Syrian refugees registered

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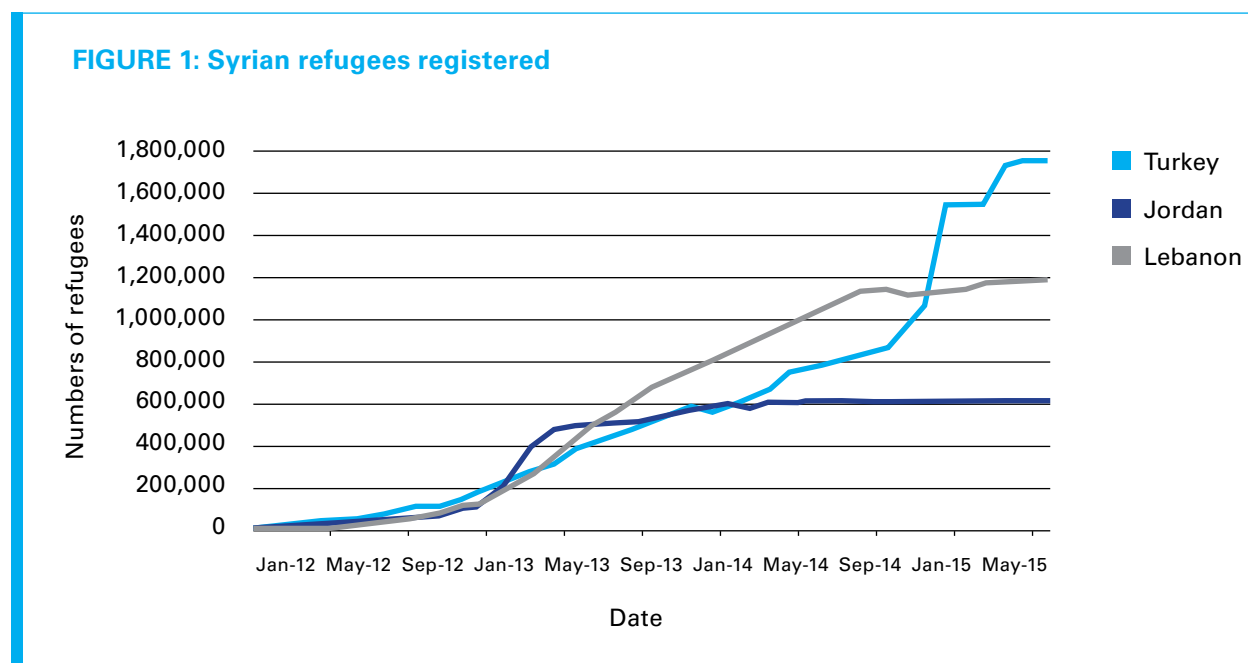
[24] International Coalition for the Responsibility to Protect, 'The Crisis in Syria', ICRtoP, <www.responsibilitytoprotect.org/index.php/crises/crisis-in-syria>, accessed 28 February 2016.

[25] Office of the United Nations High Commissioner for Human Rights, 'Independent International Commission of Inquiry on the Syrian Arab Republic', OHCHR, <www.ohchr.org/EN/HRBodies/HRC/IICISyria/Pages/IndependentInternationalCommission.aspx>, accessed 28 February 2016.

[26] 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.

Early 2012 saw a significant escalation of the conflict, with disproportionate use of force against the civilian population. This was characterized by indiscriminate bombardment by artillery and air forces, followed by infantry clearance operations to root out opposition forces. The siege of Homs was one such example that received media coverage and thus increased public awareness of the situation in the Syrian Arab Republic. On **14 July 2012**, the International Committee of the Red Cross declared the Syria crisis to be a non-international armed conflict subject to international humanitarian law.[27]

In the crisis that ensued, an estimated 40,000 people fled from the Syrian Arab Republic to the neighbouring countries of Iraq, Jordan, Lebanon and Turkey by **March 2012**. The majority of the refugees were hosted in Jordan and Lebanon, either with host families or in rented accommodations. In Turkey, the Government hosted refugees in nine locations, including tented camps and a container city. The humanitarian community revised the Regional Response Plan in **June of 2012** as planning assumptions from March were surpassed. Refugees were crossing border points at a rate of 500 per day, bringing the number of Syrian refugees in the region to more than 90,000.[28]

Another surge in Syrian refugee numbers to neighbouring countries took place in **July 2012** due to the escalating violence in Aleppo.[29] This corresponded with the opening of Za'atari refugee camp in Jordan and additional camps in Iraq and Turkey to enable

neighbouring countries to manage the large refugee influxes.

In the Syrian Arab Republic, as many as 2.5 million people were directly or indirectly affected by the events, including an estimated 1.2 million people who left their homes.[30]

Deterioration in the security situation inside the Syrian Arab Republic through **September 2012** led to a further dramatic exodus of refugees, more than doubling refugee displacement numbers in the region. More than 280,000 people were registered or in need of humanitarian assistance and protection by the end of September 2012.[31] Refugee numbers further increased at a rate of as much as several thousand per day into Iraq, Jordan, Lebanon and Turkey through **December 2012**, when more than 525,000 Syrian refugees were registered as displaced across the region.[32]

Medical humanitarian aid became intensely politically contested within the Syrian Arab Republic from **early 2013 onwards** due to the high rates of combatant injury. The Government increasingly imposed restrictions on medical supplies entering opposition areas and opposition forces raided or hijacked humanitarian convoys. Combatant and civilian injuries began to place increasing demands on health systems and humanitarian aid.[33]

Appendix 7 provides a detailed timeline of political, humanitarian and UNICEF events.

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[27] Nebehay, Stephanie, 'Exclusive: Red Cross ruling raises questions of Syrian war crimes', Reuters, Geneva, 14 July 2012, <www.reuters.com/article/2012/07/14/us-syria-crisis-icrc-idUSBRE86D09H20120714>, accessed 28 February 2016.

[28] United Nations, 'Revised Syria Regional Response Plan', UNHCR, June 2012, <www.unhcr.org/4fec681e9.html>, accessed 288 February 2016.

[29] Harding, Luke et al., 'Syrian siege of Homs is genocidal, say trapped residents', The Guardian, 7 February 2012, <www.theguardian.com/world/2012/feb/07/syrian-homs-siege-genocidal-say-residents>, accessed 28 February 2016.

[30] Government of the Syrian Arab Republic, 'Humanitarian Assistance Response Plan', September 2012. Available at <https://docs.unocha.org/sites/dms/CAP/SHARP_September_2012.pdf>, 28 February 2016.

[31] United Nations, 'Second Revision Syria Regional Response Plan', UNHCR, September 2012, <www.unhcr.org/5062c7429.html>, accessed 28 February 2016.
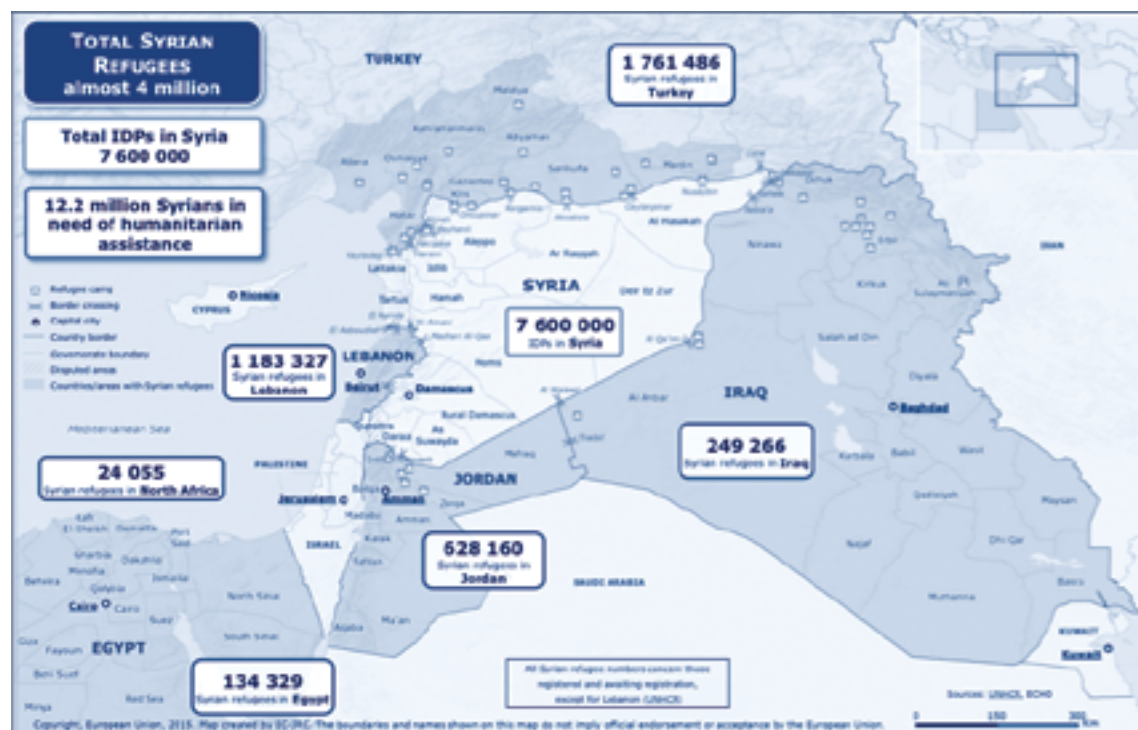
[32] United Nations, 'Syria Regional Response Plan', UNHCR, January–June 2013, <www.unhcr.org/50d192fd9.html>, accessed 28 February 2016.

[33] 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.

By **June 2013**, an additional 1 million Syrians had become refugees in Jordan, Lebanon and Turkey, creating an increasingly complex and challenging regional humanitarian crisis that was beyond the capacity of individual governments in the region to manage on their own.[34] The steepest growth in the numbers of internally displaced persons within the Syrian Arab Republic also occurred in 2013. The numbers more than doubled in nine months, from 2 million people in January 2013 to 4.2 million by **September 2013**.[35]

Throughout 2012 and 2013, the provision of health services was severely degraded within the Syrian Arab Republic and medical staff were targeted and killed.[36] Inside the Syrian Arab Republic, humanitarian needs continued to grow with further internal population displacement. An estimated 6.5 million people were internally displaced and a total of 9.3 million people were in need of humanitarian assistance in **December 2013**, nearly half of whom were children.[37] In January 2014, more than 1.5 million Syrian refugees were hosted in five countries, each of which had distinct sets of domestic priorities and concerns.

FIGURE 2: Number of internally displaced persons and refugees as of 9 June 2015

34 United Nations, 'Syria Regional Response Plan', UNHCR, June 2013, <http://unhcr.org/51b0a56d6.html>, accessed 31 March 2016.

35 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.

36 International Committee of the Red Cross, *Health Care in Danger January 2012 to December 2013*, ICRC, Geneva, 2014, <www.icrc.org/eng/assets/files/publications/icrc-002-4196.pdf>, accessed 28 February 2016.

37 'Revised Syria Humanitarian Assistance Response Plan (SHARP)', OCHA, January–December 2013, <https://docs.unocha.org/sites/dms/CAP/Revision_2013_Syria_HARP.pdf>, accessed 28 February 2016.

By **January 2014**, more than 2 million people had fled the Syrian Arab Republic since the beginning of the conflict, making the crisis one of the largest refugee exoduses in recent history.[38] In July 2014, an estimated 4.7 million Syrians in need of humanitarian assistance were located in hard-to-reach areas and besieged cities.[39]

Ar-Raqqa and Deir ez-Zor governorates in the north-east of the country were particularly difficult to access given the newly established presence of the so-called Islamic State in Iraq and the Levant (now named the Islamic State). The United Nations convened the first round of peace talks involving the Government of the Syrian Arab Republic and the Syria National Council in Geneva in January 2014 and a second round took place in February 2014.

By **March 2014**, an estimated 60 per cent of Syrian hospitals had been destroyed and only one third of public ambulances and health centres were functioning. Vaccination coverage was breaking down and polio began infecting children again in government and opposition areas.[40] The total number of violent deaths was estimated at 150,000 in March 2014 and UNICEF estimated that 10,000 children had met with violent deaths.[41]

The patterns of violence and destruction have deeply affected Syrian children. UNICEF estimated that 5.5 million children within the Syrian Arab Republic were directly affected by the crisis and needed humanitarian assistance by March 2014 (more than half of all children living inside the Syrian Arab Republic).[42] By

May 2014, the Syrian Arab Republic confirmed 36 cases of wild poliovirus for the first time since 1999.

By **November 2014**, 10.9 million Syrians were displaced within and outside of the Syrian Arab Republic, including more than 2.9 million refugees across Jordan, Lebanon and Turkey. More than half of the refugee population displaced outside of the Syrian Arab Republic were children.[43] As the conflict entered its **fifth year in 2015**, a political solution was yet to be found and the crisis showed no signs of abating. Humanitarian needs inside the Syrian Arab Republic have increased significantly since the beginning of the crisis, with 12.2 million people in need of humanitarian assistance, including more than 5.6 million children across the region.[44]

More than 220,000 people have been killed and more than 1 million injured since 2011. An estimated 4.8 million people are in need of humanitarian assistance in hard-to-reach areas and besieged locations inside the Syrian Arab Republic. More than half of the country's hospitals have been destroyed or badly damaged and the water supply has decreased to less than 50 per cent of its pre-crisis levels. An estimated 9.8 million people inside the Syrian Arab Republic are considered food insecure and many more are living in poverty.[45]

Many Syrians have been forced to leave their homes, making the situation the largest displacement crisis in the world. As of **June 2015**, nearly 630,000 refugees were registered in Jordan, including approximately 326,000

[38] '2014 Syria Regional Response Plan', UNHCR, June 2013, <http://unhcr.org/cgi-bin/texis/vtx/home/opendocPDFViewer.html?docid=52b170e49>, accessed 31 March 2016.

[39] Ibid.

[40] United Nations Children's Fund, *Under Siege: The devastating impact on children of three years of conflict in Syria*, UNICEF, March 2014, <www.unicef.org/publications/files/Under_Siege_March_2014.pdf>, accessed 27 February 2016.

[41] Ibid.

[42] 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.

[43] United Nations High Commissioner for Refugees, 'Syria Regional Refugee Response Inter-agency Information Sharing Portal', <http://data.unhcr.org/syrianrefugees/regional.php>, accessed 28 February 2016.

[44] United Nations Humanitarian Country Team, '2015 Strategic Response Plan Syrian Arab Republic', UNCT, December 2014, <www.humanitarianresponse.info/en/system/files/documents/files/2015_SRP_Syria_EN_AdvanceCopy_171214.pdf>, accessed 28 February 2016.

[45] Humanitarian Response, 'Syria', <www.humanitarianresponse.info/en/operations/syria>, accessed 28 February 2016.

boys and girls (106,000 of whom were children under 5 years);[46] more than 1.1 million refugees were hosted in Lebanon; and nearly 1.8 million Syrian refugees were residing in Turkey.[47] The number of Syrian refugees across the sub-region is expected to rise to 4.27 million by the end of 2015.[48]

3.2 COUNTRY PROFILES

The Syrian Arab Republic
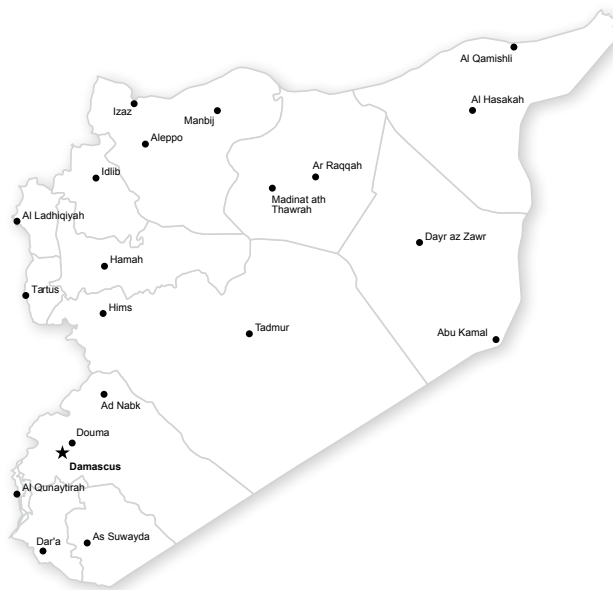
In early 2011, the Syrian Arab Republic was recognized as a middle-income country with strong economic growth, high levels of fiscal stability and many positive development indicators. Between 2001 and 2010, the country averaged annual gross domestic product growth of 4.5 per cent. Approximately 91 per cent of the population owned their own homes

and 85 per cent of households were using high-quality public water systems.[49] Education levels were consistently good, though less so for females. Health indicators were relatively high, with a strong presence of medical professionals, and 70 per cent of drugs were locally produced. Vaccination coverage was 91 per cent in 2010, and child mortality was down from 38 per 1,000 live births in 1990 to 15 per 1,000 live births in 2011.[50]

Despite its outward appearance as an upper middle-income country, the Syria Common Context Analysis notes that before the crisis in 2011, the Syrian Arab Republic was already vulnerable. This was due to unsustainable authoritarian governance and economic decline that generated significant internal pressures across the country's extremely localized society. The Syrian Arab Republic had many different local and sectarian alliances with competing regional and international powers, which made it likely that any conflict within the country would soon become internationalized and protracted.[51]

Over the past five years, the Syrian Arab Republic has plummeted from being a middle-income country to a country where four out of every five people live in poverty, and two out of every three live in extreme poverty. Humanitarian needs in the Syrian Arab Republic have increased 12-fold since the beginning of the crisis: by 2015, 12.2 million people were in need of humanitarian assistance, including 7.6 million internally displaced persons, of which 4.8 million were in hard-to-reach locations and more than 4.3 million children were in need of assistance.[52]

46   United Nations High Commissioner for Refugees, 'Syria Regional Refugee Response Inter-agency Information Sharing Portal', <http://data.unhcr.org/syrianrefugees/regional.php>, accessed 28 February 2016.

47   Ibid.

48   United Nations Children's Fund, 'Syria Crisis 2014 annual situation report', UNICEF, January–December 2014, <www.unicef.org/appeals/files/UNICEF_Syria__Annual_Regional_Crisis_Situation_Report_2014_.pdf>, 28 February 2016.

49   Nasser, Rabie, Zaki Mehchy and Khalid Abu Ismail, *Socioeconomic Roots and Impact of the Syrian Crisis*, the Syrian Centre for Policy Research, Damascus, January 2013, p. 18.

50   Save the Children, *A Devastating Toll: The impact of three years of war on the health of Syria's children*, Save the Children, London, 2014, pp. 8-9. Available at <http://reliefweb.int/sites/reliefweb.int/files/resources/SAVE_THE_CHILDREN_A_DEVASTATING_TOLL.PDF>, accessed 28 February 2016.

51   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.

52   United Nations High Commissioner for Refugees, 'Syria Regional Refugee Response Inter-agency Information Sharing Portal', <http://data.unhcr.org/syrianrefugees/regional.php>, accessed 28 February 2016.

An estimated 11.6 million people are in urgent need of access to clean water and sanitation. More than half of all Syrian hospitals have been destroyed or badly damaged, and approximately one quarter of Syrian schools have been damaged, destroyed or used as collective shelters and for purposes other than education. Those in hard-to-reach areas continue to live without sustained access to food or medical care. The Islamic State has imposed strict limitations of movement on the female population living under its control, and reports indicate that the overall situation of women and girls is increasingly dire.[53]

Humanitarian operations have been severely hindered by limitations on humanitarian access inside the Syrian Arab Republic, which has made it difficult to assess needs and deliver consistent humanitarian response to all parts of the country. Access to some parts of the country has continued to be impeded by a combination of factors, including insecurity and shifting conflict lines, restrictions on access and administrative procedures that constrain the effective and efficient delivery of assistance.

The 2015 report, *Failing Syria: Assessing the impact of UN Security Council resolutions in protecting and assisting civilians in Syria*, stated that humanitarian access to large parts of the country has diminished and more people are being killed and displaced and are in need of help than ever before in the sub-region *(see Box 5)*. This is despite three Security Council resolutions adopted in 2014 that demanded action to secure protection and assistance for civilians. A total of 74 humanitarian workers have been reported killed since the beginning of the conflict and humanitarian premises have continued to be targeted by all warring parties in the Syrian Arab Republic. In areas controlled by the Islamic State, access has become increasingly limited.

From the start of the crisis, the Government of the Syrian Arab Republic has limited the number of international agencies operating inside the country. All assistance has been channelled through the Syrian Arab Red Crescent (SARC), which has strained SARC resources and required quick capacity building. SARC has had to build trust with the international community on upholding principles of neutrality due to their auxiliary status vis-à-vis the Government.[54]

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*,[55] 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.

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53 Ibid.

54 'Syrian Red Crescent fighting perceptions of partiality', Irin News, Dubai, 29 March 2012, <www.irinnews.org/report/95204/analysis-syrian-red-crescent-fighting-perceptions-of-partiality>, 28 February 2016.

55 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>, 28 February 2016.

- **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.**

This has caused delays in working with SARC, which does have access to many areas within the Syrian Arab Republic. United Nations agencies were permitted to scale up operations, but few national and international NGOs were granted registration and permission to operate. On 29 May 2012, an agreement was made that allowed for the operation of eight United Nations agencies with the potential for nine international NGOs.[56]

The problem of humanitarian access has been a major focus of humanitarian diplomacy across the United Nations system from 2012 onwards within the Syrian Arab Republic. In February 2014, the United Nations Security Council demanded that all parties to the conflict allow humanitarian access across conflict lines. Concerns were soon raised over the effectiveness and reach of these cross-line operations, however, as opposition forces controlled more areas inside the country. Cross-border operations into the Syrian Arab Republic from neighbouring countries had started in 2013 into non-government controlled areas but there was uncertainty about the legality of these operations under

BOX 6: A crisis in a middle-income context[57]

The context in the Syrian Arab Republic that humanitarian agencies faced from early 2012 was extremely challenging by the standard of any recent humanitarian operation in armed conflict. The Syrian context involved the disintegration of a middle-income country into an armed conflict that used modern weapons indiscriminately in urban areas, and involved extensive violations of human rights and international humanitarian law. The relative middle-income wealth across some sections of Syrian society meant that many people had more assets and higher-value social and economic networks to draw from in order to survive. But the extremely high levels of infrastructure destruction, displacement and economic devastation involved dramatic impoverishment across the society as a whole.

international law, particularly among Western donor governments and United Nations agencies.[58] In September 2014, the WoS approach was adopted as a result of United Nations Security Council Resolution 2165, bringing these separate operations together into a single framework, in order to maximize efficiency, reduce duplication and ensure greater accountability, effectiveness and reach of humanitarian programming.

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

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56   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.

57   Ibid.

58   Ibid.

Countries hosting Syrian refugees

Jordan

The World Bank classifies Jordan as an upper-middle-income country. The economy has grown at an average rate of 4.3 per cent per annum since 2005. Approximately 13 per cent of the population lives on less than US$3 per day. Primary school enrolment is 98 per cent[60] and Jordan is seen as one of the safest countries in the Middle East. Jordan's economy is among the smallest in the Middle East, with insufficient supplies of water, oil and other natural resources underlying the Government's heavy reliance on foreign assistance. Other economic challenges for the Government include chronic high rates of poverty, unemployment, inflation and a large budget deficit and resulting government debt.[61] In August 2012, to correct budgetary imbalances and balance of payments imbalances, Jordan entered into a US$2.1 billion, three year International Monetary Fund stand-by arrangement. In 2014, fiscal reform measures enacted during the previous few years continued to boost government revenue and reduce the budget deficit even as the influx of Syrian refugees since 2011 put additional pressure on expenditures.[62]

Providing for the needs of refugees in Jordan has heavily impacted public finances, increasing government expenditure on public services and security. Access to public services in some governorates has fuelled local tensions and threatened to spark wider social conflict. The Government's response to the crisis has been backed by national and international agencies, but there is a growing acknowledgment that current (as of 2015) life-saving humanitarian funding and programming are neither sustainable nor sufficient, and should be complemented by a more development-oriented approach to build national resilience and sustain the level and quality of the services provided.[63]

59   '2015 Strategic Response Plan Syrian Arab Republic', December 2014, <www.humanitarianresponse.info/system/files/documents/files/2015_SRP_Syria_EN_AdvanceCopy_171214.pdf>, accessed 31 March 2016.

60   The World Bank, 'Jordan', <http://data.worldbank.org/country/jordan>, 28 February 2016.

61   Ibid.

62   Ibid.

63   3RP Regional Refugee and Resilience Plan 2015–2016, <www.3rpsyriacrisis.org/wp-content/uploads/2015/12/3RP-Regional-Overview-2016-2017.pdf>, accessed 31 March 2016.

The Ministry of Planning and International Cooperation provides leadership for the crisis response and established the Host Communities Support Platform in September 2013. The Ministry leads the Jordan Response Plan, which seeks to bridge the divide between resilience and humanitarian systems, and to reconcile programming objectives and funding mechanisms while addressing longer-term systemic and institutional considerations.[64]

Jordan was already host to a large number of Palestinian and Iraqi refugees before welcoming Syrians in 2011. Although not a signatory to the 1951 Refugee Convention, Jordan provides a favourable protection environment for refugees. As of late 2014, Jordan was hosting at least 620,000 refugees from the Syrian Arab Republic, equivalent to nearly 10 per cent of its pre-crisis population. Approximately 80 per cent of Syrian refugees in Jordan live in urban areas in the northern part of the country, while the remaining 20 per cent live primarily in the Za'atari (nearly 80,000) and al-Azraq (nearly 26,000) camps, as well as smaller sites such as King Abdullah Park, Cyber City and the Emirati Jordanian Camp, which house nearly 10,000 people.[65]

A needs assessment review carried out in October 2014 confirmed that 74 per cent of refugees are extremely or very vulnerable, with the highest level of need in the northern and central governorates. Refugee families, particularly those living in non-camp set-tings, report increased debt and dependency on humanitarian assistance or reliance on negative coping strategies. An estimated 70,000 children have no access to education. Growing pressure on essential public services has necessitated a substantial increase in public spending, which the Government has attempted to finance through foreign grants.[66]

Lebanon

The World Bank classifies Lebanon as an upper middle-income country with a population of just over 4.57 million people. The Government of Lebanon is based on 'confessionalism', a unique unwritten arrangement in which the Parliament is divided among sectarian lines: the President is a Maronite Christian, the Prime Minister is a Sunni Muslim and the Speaker of Parliament is a Shia Muslim. No census has taken place since 1932, which both maintains this delicate balance of power and also makes assessments within the country difficult.[67] In addition, there are historic political ties with the Syrian Arab Republic (Syrian mili-tary forces were in Lebanon until 2005) that influence decisions within the Government of Lebanon.[68] The Government officially rec-ognized the refugee crisis and its role in the response in a cabinet vote in January 2013.

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64   Jordan Response Platform for the Syria Crisis, <www.jrpsc.org>, accessed 28 February 2016.
65   Syrian Refugees, 'Jordan', <http://syrianrefugees.eu/?page_id=87>, accessed 28 February 2016.
66   3RP Regional Refugee and Resilience Plan 2015–2016, <www.3rpsyriacrisis.org/wp-content/uploads/2015/12/3RP-Regional-Overview-2016-2017.pdf>, accessed 31 March 2016.
67   'Lebanon country profile', 12 November 2015, <www.bbc.com/news/world-middle-east-14647308>, accessed 28 February 2016.
68   Ibid.

Four years before the Syria crisis began, the economy of Lebanon was growing at an average rate of 8 per cent per year. The rate of growth slowed to 1–2 per cent in 2011–2013. With the economy operating below capacity, inflation sharply decelerated in 2014 to 1.2 per cent. The fiscal deficit narrowed in 2014 but solely due to one-off factors. Public finances remain structurally weak and worsening and in urgent need of reforms.[69]

Lebanon received more than 1.2 million registered refugees from the Syrian Arab Republic between 2011 and the end of 2014.[70] Despite its recent history of political and military conflict, and the pressures on its infrastructure, Lebanon has kept its borders open and is now the highest per capita host of refugees in the world. These factors have tested the economic, political and social resilience of the country and have strained public spending.

The Lebanon Crisis Response Plan is an integrated, joint Government of Lebanon-United Nations plan that ensures that the response to the Syria crisis benefits Lebanon and helps to stabilize the country. The Plan continues the necessary work of delivering humanitarian assistance to people displaced from the Syrian Arab Republic, while expanding plans to invest in Lebanese services, economies and institutions to reach nearly 3 million vulnerable people in the poorest and most at-risk municipalities.[71]

Unlike Jordan and Turkey, Lebanon has not established camps for Syrians. This decision was based on past experience with Palestinian refugees (400,000 hosted by Lebanon) who have been residing in camps for the past half century. Syrian refugees therefore live in informal tented settlements, rented spaces (homes, rooms, garages) or with host families and communities.

According to a 2014 report co-published by UNHCR and the United Nations Human Settlements Programme (UN-Habitat), 41 per cent of Syrians in Lebanon have inadequate long-term shelter, with overcrowding and limited access to water, sanitation and urban services.[72] It is estimated that as a result of the Syrian crisis, some 170,000 additional Lebanese were pushed into poverty (in addition to the current 1 million) by the end of 2014 and an estimated additional 220,000–320,000 Lebanese citizens, most of them unskilled youth, have become unemployed.[73]

Refugee children have been encouraged to attend Lebanese schools, which has swelled school numbers. However, cost, language differences and government caps on refugee attendance mean that only one quarter of refugee children are able to attend school and many have been out of school for two years.[74]

It is projected that the Syrian refugee population in Lebanon will reach 1.5 million by the end of 2015.[75]

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[69]   The World Bank, 'Lebanon: Overview', 16 September 2015, <www.worldbank.org/en/country/lebanon/overview>, accessed 28 February 2016.

[70]   United Nations High Commissioner for Refugees, 'Syrian Regional Refugee Response: Inter-agency Information Sharing Portal', <http://data.unhcr.org/syrianrefugees/regional.php>, accessed 19 February 2016.

[71]   3RP Regional Refugee and Resilience Plan 2015–2016, <www.3rpsyriacrisis.org/wp-content/uploads/2015/12/3RP-Regional-Overview-2016-2017.pdf>, accessed 31 March 2016.

[72]   United Nations High Commissioner for Refugees, United Nations Human Settlements Programme and the European Union, *Housing, Land & Property Issues in Lebanon: Implications of the Syrian Refugee Crisis*, UNHCR and UN-Habitat, August 2014, <http://reliefweb.int/report/lebanon/housing-land-property-issues-lebanon-implications-syrian-refugee-crisis-august-2014>, accessed 28 February 2016.

[73]   The World Bank, 'Lebanon: Overview', 16 September 2015, <www.worldbank.org/en/country/lebanon/overview>, accessed 28 February 2016.

[74]   Azar, Miriam, 'Bringing learning to Syrian refugee children in Lebanon', UNICEF, Beirut, 10 January 2014, <www.unicef.org/infobycountry/lebanon_71753.html>, accessed 28 February 2016.

[75]   3RP Regional Refugee and Resilience Plan 2015–2016, <www.3rpsyriacrisis.org/wp-content/uploads/2015/12/3RP-Regional-Overview-2016-2017.pdf>, accessed 31 March 2016.

Turkey is an upper-middle-income country approaching high-income status. At the end of 2014, the population of Turkey was approximately 77 million. Turkey is an OECD member and currently (as of 2015) chairs the Group of 20, wielding considerable influence internationally. The size of the country's economy contrasts with most other refugee-receiving countries in the region and Turkey has invested heavily in the response. Wealth and development are unevenly shared across Turkey, however, and most refugees are living in the relatively poorer south-east part of the country. While the overall ratio of refugees to Turkish citizens is low compared with Lebanon and Jordan, the concentration of refugees in particular areas has resulted in ratios approaching 1:1, for example in Kilis in the south-east. This is creating considerable social, political and economic stress.[76]

Turkey has been generous in terms of welcoming and making provisions for refugees. From a protection perspective, this has included maintaining an open border policy and granting temporary protected status to Syrian refugees, which has now been formalized into law. This includes access to essential services and to work and has created significant pressures on locally available services and job markets. Thus, while not optimal from a legal perspective, the overall protection and assistance afforded to Syrian refugees is stronger in practice than what other countries in the sub-region are able to offer.[77]

In 2014, Turkey hosted an estimated 1.6 million Syrians, including 1 million Syrians registered as refugees, who are spread across urban areas and 22 camps. Approximately 20 per cent of the refugee population is accommodated in the camps that were initially described as "the best refugee camps ever seen", but which are under increasing strain due to the prolonged nature of the crisis.[78]

The number of Syrians in Turkey is expected to grow to 1.7 million by the end of 2015. Although the Government of Turkey has asserted strong leadership over the refugee

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[76] 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.

[77] Ibid.

[78] International Crisis Group, *Blurring the Borders: Syrian Spillover Risks for Turkey*, Europe Report N°225, International Crisis Group, Brussels, 30 April 2013, <www.crisisgroup.org/~/media/Files/europe/turkey-cyprus/turkey/225-blurring-the-borders-syrian-spillover-risks-for-turkey.ashx>, accessed 28 February 2016.

response, backed by funding, from the beginning of the crisis, the country has struggled to halt the spread of vulnerabilities in the education and health sectors. An estimated 70 per cent of the 550,000 Syrian children hosted in Turkey are out of school, and health clinics have reported a 30-40 per cent increase in the patient load. Although responding to the refugee influx has entailed a public spending increase of several billion dollars, the Government has only received US$265 million in donor support through previous response plans.[79]

> **Appendix 8** provides an overview of UNICEF's response by country.

3.3 UNICEF'S SUB-REGIONAL RESPONSE

This section briefly introduces the sub-regional programme response. Appendix 8 provides an overview of UNICEF's response by country.

In 2011, prior to the advent of the Syria crisis, UNICEF country offices in the region were largely focused on strengthening institutional systems and building the capacity of governments. Limited emergency preparedness or planning measures were in place and there was a general expectation that the situation in the Syrian Arab Republic would be of short duration, based on other country experiences at the time (e.g. Egypt, Libya and Tunisia).[80]

UNICEF first reported an incident of ill-treatment of children in the Syrian Arab Republic on **24 March 2011**.[81] A more extensive statement was released from UNICEF Headquarters in New York in **May 2011**, calling for immediate efforts by all parties to reduce the death toll in the Syrian Arab Republic.[82] The UNICEF Executive Director released a statement on the Human Rights Council Resolution S-17/1[83] and the human rights situation in the Syrian Arab Republic in **December 2011**, calling on the Government to abide by its commitments to uphold the rights of children, and in particular to protect them from arbitrary arrest, detention, torture or sexual violence.[84]

In **early 2012**, UNICEF country offices in the region became aware that the situation in the Syrian Arab Republic would become protracted in nature and that a longer-term, more systematic approach should be undertaken.

The L3[85] emergency was declared for the Syrian Arab Republic in **January 2013**; areas of assistance were identified and response plans were developed. Response plans considered the opportunities for reaching the affected population, as well as constraints related to government acceptance of these interventions.

The following sections outline responses to the Syria crisis across the sub-region by programme area.

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79   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.

80   UNICEF Lebanon reported: "After the 2006 crisis, UNICEF Lebanon had completely scaled down and did not have any emergency measures in place". Source: UNICEF Lebanon, 'Crisis Response Scale-up 2011-2014', (internal document), 27 February 2015.

81   'Statement by Shahida Azfar, UNICEF Regional Director for the Middle East and North Africa, on unrest in the region', UNICEF, Amman, 24 March 2011, <www.unicef.org/media/media_58036.html>, accessed 28 February 2016.

82   'UNICEF alarmed about reported extreme violence against children in Syria', UNICEF, New York, 31 May 2011, <www.unicef.org/media/media_58707.html>, accessed 28 February 2016.

83   Resolution adopted by the Human Rights Council at its seventeenth special session S-17/1 on the situation of human rights in the Syrian Arab Republic. Available at <www.ohchr.org/Documents/HRBodies/HRCouncil/ColSyria/ResS17_1.pdf>, accessed 31 March 2016.

84   'Statement by UNICEF Executive Director Anthony Lake in Bangkok on the Human Rights Council Resolution on the human rights situation in Syria', UNICEF, Geneva, 2 December 2011, <www.unicef.org/media/media_60788.html>, accessed 28 February 2016.

85   An L3 emergency is declared on the basis of: scale, urgency, complexity, capacity and reputational risk to UNICEF and/or the United Nations.

BOX 8: Middle East polio outbreak response[86]

In October 2013, polio returned to the Middle East. By June 2015, a total of 36 cases had been reported in the Syrian Arab Republic and two cases had been reported in Iraq. Fifty-six targeted vaccination campaigns that provided more than 142 million doses of oral polio vaccine have taken place since October 2013, reaching approximately 27.7 million children across the sub-region.

UNICEF, WHO and partners across the Middle East have bolstered efforts to contain the polio outbreak since late 2013. The outbreak has been successfully contained to date and this success can be attributed to several key factors, including evidence that successful measures were taken to reach high-risk populations, tailor interventions to reach missed children, engage with private sector physicians, mobilize social media, and facilitate the role of community leaders in supporting polio eradication activities.

In October 2014, it was estimated that 200,000 children would not be reached through the polio campaign in the Syrian Arab Republic because they live in hard-to-reach areas affected by the ongoing conflict.

Major threats remain in the region and it is possible that transmission will continue undetected or that the virus will be re-imported. Inconsistencies also remain in the quality of immunization activities and surveillance across the region, where conflict makes access a significant challenge.

Assistance delivered

Across countries, key focus areas for **child protection** included emergency psychosocial support, risk reduction, family tracing and reunification of separated and unaccompanied children, and advocacy. Advocacy efforts aimed to ensure access (Syrian Arab Republic); to develop policies, influence laws and establish standard operating procedures (Jordan, Lebanon and the Syrian Arab Republic); and to support the Government on undertaking its overall leadership role and child protection coordination both at national and local levels (Turkey). Emergency psychosocial support was the main intervention implemented by country offices with an initial focus on providing children and their families with information about available services and life-skills training.

As part of its **education** mandate, UNICEF advocated for, and facilitated school enrolment (regular and 'double shifts') and certification. UNICEF also supported the establishment of

non-formal education services in camps, host communities and out-of-camp settlements and scaled up support to adolescent programming with a focus on vocational training and life skills.

After an initial focus on measles vaccination, polio vaccination was prioritized within **health** programming across the region following the outbreak of poliomyelitis in the Syrian Arab Republic in October 2013. Polio vaccination efforts focused on vaccine procurement and logistics, cold chain and communications. UNICEF Syrian Arab Republic supported the provision of essential medical supplies to the Ministry of Health and NGO-led clinics in the country. UNICEF Turkey played an important role in the polio vaccination campaigns conducted by the Government in the border areas, in collaboration with WHO, following the polio outbreaks in the Syrian Arab Republic in 2013–2014.[87] No clear strategic direction or planning was documented for other health programming and activities.

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[86] See <www.polioeradication.org/Portals/0/Document/Aboutus/Governance/IMB/10IMBMeeting/10.2_10IMB.pdf>, accessed 31 March 2016.

[87] 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.

The **WASH** programme, which was regionally prioritized, delivered assistance in close collaboration with partners. Different country offices prioritized different WASH activities, such as: water supply (Jordan and the Syrian Arab Republic), wastewater management (Jordan) and infrastructure repair and rehabilitation (Jordan, Lebanon and the Syrian Arab Republic). UNICEF has not implemented WASH programming in Turkey.

Cross-sector initiatives such as No Lost Generation, a regional-level strategic framework *(see Box 13)*, and Makani/My Space, a country-level integrated programme in Jordan,[88] were also developed and implemented.

3.4 UNICEF'S SUPPORT STRUCTURE AND TOOLS

This section introduces the UNICEF structures and tools related to the L3 activation that are relevant for the evaluation and provide context for the findings.

Structure

Global emergency coordinator

Following any L3 declaration, the UNICEF Executive Director appoints a global emergency coordinator (GEC) for the crisis. Traditionally this has been the Director of the Office of Emergency Programmes (EMOPS) for an initial period of six to eight weeks and the Regional Director (RD) for any required extensions.[89]

For the Syria response, two GECs were appointed: the RD-MENA (Amman) and the EMOPS Director (New York), with both reporting to the UNICEF Executive Director. Responsibilities were defined for both GECs.[90]

Emergency management team

For all L3 crises, an emergency management team (EMT) is established that is comprised of the key country office staff, relevant RD(s), and Headquarters division directors or delegated representatives. The GEC generally chairs the EMT to ensure effective implementation of standard operating procedures and a fully coordinated and speedy response.[91]

An EMT for the Syria crisis was established to coordinate the response across all affected countries, including support from units across the organization. The EMT was intended to meet once every week, chaired alternately by the RD-MENA and the EMOPS Director, and once every month, chaired by the Deputy Executive Director-External Relations. Its aim was to ensure oversight of the response, mobilize support and identify any issues or bottlenecks that needed to be overcome.[92]

In addition, a Headquarters-level technical EMT was established. This was an inter-divisional task force convened at the working level that aimed to coordinate the divisions' technical engagement with and support to the response to the Syria crisis, particularly follow-up on the implementation of the directors-level EMT recommendations and action points.[93]

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88 United Nations Children's Fund Jordan, 'Innovating for children', UNICEF Jordan, <www.unicef.org/jordan/overview_10143.html>, accessed 29 February 2016.

89 See: UNICEF's Corporate Emergency Activation Procedure (CEAP) CF/EXD/2011-001, 21 March 2011; UNICEF Executive Director CEAP Addendum, 22 December 2015; UNICEF Office of Emergency Programmes, Simplified Standard Operating Procedures (SSOP) for Level 3 Emergencies, October 2015, <www.unicefinemergencies.com/procedures/level-3.html>, accessed 29 February 2016.

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

91 See Footnote 89 above.

92 See Appendix 12, Coordination forum on Syria crisis response, April 2013.

93 Terms of reference for UNICEF HQ Technical level EMT, January 2013.

Crisis management team

At the regional level, a crisis management team (CMT) was established to provide strategic directives at each phase of the emergency, take stock of the situation and decide on key issues and funding allocations.[94] The CMT consisted of the RD-MENA, the Deputy Regional Director, the Chief of Operations, the Regional Chief of Emergencies and the Emergency Sub-Regional Coordinator. In case of an extended CMT, the Chief of Communications and Media, the Chief of Human Resources, the Security Advisor and all concerned regional office advisors were added.

Syria Hub

The sub-regional nature of the crisis required a coordinated sub-regional approach. A sub-regional hub dedicated to the Syria crisis was therefore established to coordinate planning, monitoring, reporting, commu-nications, sharing of human resources, fundraising (for programmes, supply and human resources) and financial transactions. The Syria Hub was planned as a 'core team' (11 staff) drawing from staff with part-time responsibilities in addition to other duties (focal points). The RD-MENA tasked the Syria Hub to implement key decisions.[95]

Tools

Simplified standard operating procedures for Level 3 emergencies

SSOPs for L3 emergencies are used to simplify, streamline and clarify UNICEF emergency procedures and enable an effec-tive response to major emergencies. The L3

SSOPs apply to all situations in which the UNICEF Executive Director has declared an L3 emergency and activated the Corporate Emergency Activation Procedure.[96]

As applied in chronic and protracted L3 crises, the SSOPs require that after 12 months, an adapted mechanism, procedures and timelines should be used to transition from an acute L3 emergency to a chronic L3. There will be a continued role for a GEC, and human resources fast track procedures, operational (finance, administration, travel) and PCA simplifications will remain.[97]

> **BOX 9: UNICEF simplified standard operating procedures**
>
> The SSOPs include the following **12 UNICEF business sectors:**
>
> 1. GEC
> 2. Cluster coordinator
> 3. Planning, performance monitoring and evaluation
> 4. Human resources
> 5. Supply and logistics
> 6. Operations
> 7. PCAs and partnerships with NGOs
> 8. Resource mobilization
> 9. Communications
> 10. Humanitarian advocacy
> 11. Information and communication technology
> 12. Security/Operations Centre

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[94] See Appendix 13, Terms of reference for the Crisis Management Team on Syria crisis response, UNICEF MENARO, April 2013.

[95] See Appendix 13, Terms of reference on the Syria Emergency Sub-Regional Hub, UNICEF MENARO, April 2013.

[96] United Nations Children's Fund 'UNICEF Simplified Procedures in Emergencies', UNICEF, <www.unicefinemergencies. com/procedures/level-3.html>, accessed 29 February 2016.

[97] Ibid.

Human resources tools

Immediate response team

The GEC names an immediate response team (IRT), which is deployed on a 'no regrets' basis within 48 hours. The minimum composition of the IRT includes a team coordinator and focal points for communication, supply, logistics, human resources, operations and planning/performance monitoring. Relevant programme staff will be deployed depending on the nature of the emergency. The IRT's role is to support the country representative and country team in the response.[98] For the Syria crisis, no complete IRT was deployed, but it was made possible to draw from IRT membership for surge deployments.[99]

Surge deployments

Surge deployments are short-term measures designed to fill vital human resource gaps.

- **UNICEF surge roster:** Emergency deployments of UNICEF personnel from a surge roster that is managed by the UNICEF Division of Human Resources (DHR).[100]

- **Stand-by partner deployments:**[101] Standby partners are organizations that, upon signing an agreement with UNICEF, maintain a roster of emergency surge capacity personnel that can be deployed upon request to enhance UNICEF's response to humanitarian crises. The group of stand-by partners, which are based in several countries, comprises NGOs, governmental agencies and private companies. The value added of the stand-by arrangement system is that it enables UNICEF to deploy skilled and experienced professionals rapidly and with only limited effort from the requesting office.

Emergency Response Team

The Emergency Response Team is a dedicated team of professionals managed by EMOPS that supports emergencies at the field level.[102]

Use of human resources tools for the Syria response[103]

Country offices relied heavily on short-term surge deployments and stand-by partners for prolonged periods of the Syrian crisis response. From February 2012 to September 2013, UNICEF deployed 400 staff (internal and external stand-by partners) on surge assignments. The normal surge period of three to four months was extended substantially, with MENARO still using surge staff in June 2015. The last mission of surge staff left Lebanon in April 2015.

MENARO established the sub-regional Syria Hub to provide support and guidance to country offices including on human resources. In the last quarter of 2012, a number of key posts were established to support the humanitarian response in Jordan, Lebanon, the Syrian Arab Republic and the Syria Hub. MENARO decided to introduce a rolling programme and budget review to allow offices to establish posts based on the emerging needs.

[98] See Footnote 89 above.

[99] UNICEF Executive Director Memo L3 Activation of Level 3 Corporate Emergency Procedure for Syria and affected neighboring countries (January–March 2013), (UNICEF internal document), 4 January 2013.

[100] United Nations Children's Fund Division of Human Resources, '2013 Annual Report', <www.unicef.org/about/annualreport/files/Human_Resources_AR_2013.pdf>, accessed 29 February 2016.

[101] United Nations Children's Fund, 'Guidelines on external staff in emergencies: Standby arrangements', UNICEF, 2006, <www.unicef.org/cholera/Chapter_6_preparedness/12_UNICEF_Standby_Guidelines.pdf>, accessed 29 February 2016.

[102] United Nations Children's Fund, 'Humanitarian Action for Children 2012: Global support for UNICEF', UNICEF, <www.unicef.org/hac2012/hac_global.html>, accessed 29 February 2016.

[103] 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.

A combination of factors continue to impede humanitarian access in some parts of the Syrian Arab Republic. These include **insecurity and shifting conflict lines, restrictions on access and administrative procedures** that constrain the effective delivery of assistance. Large areas of the north-eastern Syrian Arab Republic, Rural Damascus, and multiple locations in northern, central and southern Damascus remain highly restricted or blocked. An estimated 4.8 million Syrians continue to live without sustained access to food or medical care inside hard-to-reach or besieged areas.

In the absence of a viable peace process, the parties to the conflict have continued to seek **territorial expansion** over the course of 2015. There has been an escalation of fighting along key access routes and densely populated centres, particularly in Idleb, Dar'a, Hama, Rural Damascus, Aleppo and Hasakeh governorates.

The operating environment for humanitarian organizations is becoming more **insecure**. Four humanitarian workers were killed in April 2015, bringing the total number reported killed since the beginning of the conflict to 74. Humanitarian premises and facilities have also continued to be targeted by all warring parties in the Syrian Arab Republic.

In Islamic State-controlled areas, **access has become increasingly limited**. the Islamic State has imposed strict limitations of movement for the female population living under its control, and the overall situation of women and girls is reportedly increasingly dire.

In April 2015, armed opposition seized Nasib, the last remaining government-controlled official **border crossing** between Jordan and the Syrian Arab Republic, causing its **closure** to commercial traffic until further notice. As a result, re-supply lines for United Nations agencies that had been using this crossing were suspended. In Dar'a, non-state armed groups have continued to allow access to humanitarian actors in areas under their control.

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[104] Office for the Coordination of Humanitarian Affairs, 'Humanitarian Bulletin Syria', Issue 01, OCHA, 7 May 2015, <www.humanitarianresponse.info/en/system/files/documents/files/whole-of-syria_humanitarian_bulletin_issue_1.pdf>, accessed 29 February 2016.

CHAPTER 4
FINDINGS BY THEMATIC AREA

This chapter is composed of five sections. Section 4.1 describes the most significant evaluation findings for UNICEF's role and strategy; Section 4.2 describes the overall programme and advocacy response; Section 4.3 describes engagement with others; Section 4.4 describes internal management and processes; and Section 4.5 presents identified trends for the future operating environment as an important consideration for the generation and uptake of the recommendations laid out in Chapter 6.

> **Appendix 11** provides detailed evaluation findings; Appendix 8 provides information on the programme response by country; **Appendix 12** presents evaluation findings by programme; and **Appendix 17** elaborates on the future operating context.

Following data collection, the evaluation team analysed the data gathered from global, regional and country office interviews, focus groups, workshops, documents reviewed and surveys for each evaluation theme. The results of this analysis were compared and contrasted across country cases and programmes to identify patterns in the triangulated data. The following sections describe the most frequent and significant patterns and trends identified. Time indications provided in the findings are indicative across the region, as these differ for each country, depending on country-specific aspects.

4.1 UNICEF'S ROLE AND STRATEGY

This section describes findings and reflections on UNICEF's role and strategy.

UNICEF maintains an important role for children in the sub-region by providing refugee, displaced and host-community populations with assistance in the areas of child protection, education, health and nutrition and WASH. During the scoping phase of the evaluation, it

was determined that these were UNICEF 'flagship programmes' that utilized the majority of country office resources. These programmes are part of an approach that envisions improved positive impact through coordinated and integrated implementation.

UNICEF's well-defined (global) mandate ensured that partners had a clear understanding of UNICEF's role. As cluster lead agency, the organization works with multiple partners bilaterally and at multiple levels in the sub-region. Going forward, donors and implementing partners have called for UNICEF to strengthen its position as an intermediary for its core sectors, to ensure coverage and coherence of the humanitarian response by facilitating coordination and managing implementing partners and policies. This role is expected to become even more relevant given the anticipated continued increase in needs and the ever limited funding.

UNICEF regional and country offices coordinated by the Syria Hub contributed heavily to the development of regional inter-agency plans and sector strategies (including situation analyses), which followed the principle of 'country-driven/specific but regionally coherent'.

Since 2013, country offices have also developed operational programme response plans, using the Core Commitments for Children in Humanitarian Action (CCCs) as a framework supported by the tacit knowledge derived

from the sub-regional planning process. The operational country office plans included response actions by sector and information on programme delivery.

Limited information was found on whether these plans were regularly updated or used for budget allocation.

Little evidence was found of a clear UNICEF-specific rationale that: 1) translates overall sub-regional plans and sector strategies into a UNICEF-specific sub-regional and country office strategy; 2) connects UNICEF sector responses; and 3) informs programming and advocacy choices. This is likely due to a combination of factors including a lack of awareness on the need for an overall strategy rather than plans *(see Box 11)*, lack of time and resources, lack of senior staff, knowledge and experience, and a day-to-day sector driven approach and focus. This limited UNICEF's ability to base country and programme plans on strategic management decisions, leaving programmes to evolve based on opportunities, operating

space and resources (an opportunity-based approach).

In April 2013, MENARO, supported by EMOPS, led a risk management exercise across the region. Subsequent risk monitoring was conducted on a monthly basis from May to September of 2013. As this was not mentioned in interviews and only documentary evidence was collected on the risk exercise, no meaningful findings can be provided on its functioning and impact.

Assessment and monitoring options were limited due to security and access issues, government restrictions and availability of appropriate capacity. Despite these limitations, several UNICEF and inter-agency situation analyses, assessments and monitoring efforts were undertaken, including the employment of alternative means such as the use of third-party monitors and facilitators (in Lebanon and the Syrian Arab Republic) *(see Box 12)*, and facilitators, and use of information received from implementing partners.

UNICEF programming was adjusted in response to the changing context and character of the crisis and in regards to the increasing and changing needs of the affected population, through 'learning by doing', meaning that UNICEF provided assistance and in the process learned about how to improve programming and delivery. Programming shifted from emergency response addressing volume and supply (immediate needs) in 2012/early 2013 to more systematic, service-oriented and sustainable approaches following the L3 declaration in January 2013. These shifts were mostly reactive, based on external triggers, such as the L3 declaration and government requests, and therefore somewhat delayed. The L3 declaration provided additional resources and allowed UNICEF to shift programming based on actual needs and requests, making programmes eventually mostly appropriate in character for

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[105] Infinity Concepts, 'The difference between a plan and a strategy', 19 September 2011, <http://infinityconcepts.net/2011/09/the-difference-between-a-plan-and-a-strategy/>, accessed 7 March 2016.

the emergency phase. However, the reactive approach did not base programme choices on priority needs or locations and neither did it anticipate future requirements. As of 2013, UNICEF undertook a number of efforts to put in place a more systematic approach but it took about a year (2013) to set up country office capacity in order to scale up properly.

Programme focus shifted again in 2014, as the situation became protracted, to an integrated long-term approach based on vulnerability rather than status (Syrians and host communities), localization of activities through local partners, resilience and cost-effectiveness. Country offices developed and used different interventions and modalities to increase reach and become more appropriate according to their country contexts. This included cross-border operations, border polio vaccination, and the use of electronic monitoring and mobile health clinics.

UNICEF's sectoral response was found to be broadly relevant within the sub-region. The specific relevance of UNICEF's response to the (evolving) needs of women and children could not be systematically determined. This was due to the fact that from a strategic perspective, as outlined above, programming was opportunity-based in nature and no clear UNICEF strategy was found that linked systematic situation analysis, needs and vulnerability assessment to the UNICEF programme decisions made (the 'why'). From a programming perspective, a comprehensive monitoring mechanism, with common well-defined indicators or impact analysis of the response, was not in place. It was not possible to directly interview several affected population groups to confirm the relevance of the assistance due to lack of access and time.

Regional indicators did not provide disaggregated information, for example on the delivery of assistance by gender, camp and non-camp settings or related to vulnerability, which prevented the evaluation from determining

the relevance of programming from these perspectives. *(See Section 5.2 for key conclusions on UNICEF's role and strategy)*.

> ## BOX 12: Third-party facilitators in the Syrian Arab Republic[106]
>
> 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.

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[106] UNICEF Syrian Arab Republic.

4.2 UNICEF'S PROGRAMME AND ADVOCACY RESPONSE

This section describes findings and reflections on UNICEF programming, operations and results in response to the Syria crisis, while acknowledging the challenges of delivering effective humanitarian operations to millions of people engaged in displacement across the sub-region, and equally to millions of others who were displaced and difficult to reach within the Syrian Arab Republic *(see Chapter 3)*. The dynamic context (e.g. the scale and scope of the crisis, the constant movement of battle fronts and of affected populations and security and access restrictions) and the increasing number of people in need of support limited the overall humanitarian sector's ability to systematically plan and deliver assistance.

Although UNICEF was initially late to respond, triggered by the deteriorating situation and the L3 declaration of January 2013, the organization incrementally developed capacity and improved performance throughout 2013, with significant scale-up and reach of programming achieved, beginning in 2014. Factors that affected the speed of the initial response included: the delayed acknowledgement of the crisis by governments; a lengthy UNICEF decision-making process between country offices, MENARO and UNICEF Headquarters; a lack of clear organizational understanding of what to do in a humanitarian crisis with a strong protection dimension; the limited preparedness of UNICEF country offices; and the time required to implement the decisions made.

The evaluation found that the limited emergency preparedness of MENARO and country offices meant that some key elements of the response had to be developed while the crisis was ongoing. This included developing an understanding of required staff competencies and capacity, comparing this to the existing human resources situation, building knowledge of the UNICEF support structure and tools and how to use these, and identifying the required implementing partner capacity, as

well as appropriate partnerships. This limited the understanding of available organizational emergency response capacity in 2012 and 2013, and of what response capacity was required to deliver programming in the context of the sub-regional Syria crisis prior to 2014 (what could UNICEF reasonably do), which hampered UNICEF's ability to make informed decisions on programme targets and priorities.

As a result, up through 2013, some programme targets were set at an aspirational level based on UNICEF's mandate and what it 'should' do rather than on what it 'could' do, considering the context and limitations, and the capacity of the organization and its implementing partners. UNICEF did not meet all of its programme targets in 2012 and 2013 *(see below on programme results)*, partly due to an underestimation of required and available emergency response capacity. In addition, the dynamic context, the evolving nature of the conflict and the ever-increasing numbers of people needing support limited the overall humanitarian sector's ability to systematically plan and deliver assistance. Indicator targets were subsequently lowered in 2014 to become more realistic and more achievable.

For example, in **WASH**, the Syrian Arab Republic achieved 34.1 per cent of its target for emergency-affected people accessing safe water in 2013 (3.2 million reached of 9.5 million targeted). In 2014, WASH targets in the Syrian Arab Republic were dramatically reduced from 9.5 million to 2 million and 121.1 per cent of the target was subsequently achieved (2.4 million people reached).

In **education**, less than 20 per cent of the target (75,711 out of 382,500 targeted) for access to education was attained in Turkey in 2013 and less than half of the target was attained in Lebanon (66,679 out of 133,515 targeted). These targets were subsequently halved in both countries in 2014 (198,329 and 50,000 targeted in Turkey and Lebanon, respectively).

In **child protection**, less than 10 per cent of the target for children and adolescents benefitting from psychosocial support services and

outreach initiatives was achieved in Turkey in 2013 (19,704 out of 260,100 targeted). This target was subsequently more than halved in 2014 to 103,500. Less than 30 per cent of the target for children and adolescents benefitting from psychosocial support services and outreach initiatives was achieved in the Syrian Arab Republic in 2013 (145,220 out of 500,000 targeted) and this target was subsequently reduced by more than one third in 2014 to 150,000. A more detailed overview on results is presented in the section on programme results.

Since 2014, more emphasis has been placed on identifying linkages and convergence between programmes, for example by delivering both child protection and education programme elements in the established child-friendly spaces.

Consistent assessment of programme performance across interventions and time periods proved to be difficult. This is due to 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; 3) consistent programme monitoring against objectives and therefore an irregular and incomplete documentary record; and 4) evaluation effort during the given period. In addition, programmes evolved according to context and available resources. With the support of the Syria Hub, data tracking and consistency have improved since 2013, but require further strengthening to increase oversight and support decision-making.

Different types and numbers of indicators were used within countries across different years, and between country and regional levels. Even if the same type of indicator was used (for example, children vaccinated for measles) a different denominator may be 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 *(see examples in Appendix 11)*.

Regional indicators did not disaggregate by location (camp or non-camp settings), status (refugee or host community) or gender, meaning that the equity of programming could not be ascertained. Evidence collected in interviews indicates that most assistance was provided in camps and informal tented settlements, as this was seen as the more 'realistic' option for assistance.

Advocacy efforts towards governments were key to UNICEF's ability to influence national plans, priorities and legislation and provide appropriate assistance to affected 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 of effective efforts are advocacy for the inclusion of child protection

BOX 13: No Lost Generation initiative[107]

The No Lost Generation initiative was launched in October 2013 and backed by numerous partners from United Nations and 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.

The No Lost Generation initiative targets some 6 million children across the 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 will seek to reverse the large number of out-of-school children.

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

elements and psychosocial support in the response (the Syrian Arab Republic and Turkey); for changing the juvenile law to allow for more child-friendly community-based programmes (Jordan); for immunization of (all) children (Jordan, Lebanon and the Syrian Arab Republic); for collaboration with a wider group of WASH organizations (the Syrian Arab Republic); and for adding a 'second shift' in schools (Jordan and Lebanon).

In the Syrian Arab Republic, the pre-crisis relationship between the country office and the Government was limited and there was a need to build bridges, including with the Ministry of Foreign Affairs and Expatriates and technical ministries, including the Ministry of Social Affairs and Labor. In June 2012, UNICEF met with the Minister of Foreign Affairs and Expatriates to advocate for the protection of children by all parties and offered UNICEF's support for increased capacity, procurement of commodities and assets, and expanded partnerships inside the Syrian Arab Republic, including with SARC and civil society organizations. Advocacy efforts have been consistently undertaken ever since, leading to an increase in the operating space in the Syrian Arab Republic and the further support of the Syrian authorities, for example in obtaining staff visas and securing permission for an enhanced complement of armoured vehicles.[108]

As not much detail on advocacy efforts and their impact is documented, further in-depth assessment would be required to formulate meaningful detailed findings and conclusions on what did or did not work.

Programme results

Sub-regional programme successes in terms of advocacy and resource mobilization included the No Lost Generation initiative, polio immunization campaigns and the prioritization of WASH programming. These integrated initiatives provided synergies

between programmes, strong advocacy messages and broader impact of interventions, which together also increased the results of resource mobilization efforts. Considering the successes achieved, sub-regional, multi-programme and multi-agency approaches seem to provide opportunities for greater effectiveness in the future.

BOX 14: Sub-regional successes in regard to advocacy and resource mobilization

1. **No Lost Generation initiative,** by bringing together child protection, education, adolescent development and youth programmes and fundraising for these sectors *(see Box 13)*

2. **Polio immunization campaigns**, in which UNICEF led coordination, vaccine supply and communications *(see Box 8)*

3. **WASH programming**, supported by a regional strategic priority that was determined in early 2012

Ten common indicators were selected for secondary data review for this evaluation that would represent results for the four programmes, focusing on the flagship areas included in the scope of the evaluation:[109] psychosocial support, access to education, immunization and water supply *(see Table 1)*.

These indicators were chosen because they are among the common indicators included in UNICEF's regional dashboard data used by the Syria Hub from 2013 onwards and were used most consistently across years, programmes and countries in the region.

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108   UNICEF Syrian Arab Republic Representative hand-over notes.
109   See Appendix 1, Evaluation Terms of Reference.

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 emergency-affected people periodically provided with hygiene promotion messages

A descriptive analysis of trends in these indicators in 2013 and 2014 is presented below. Regional indicator data for 2012 were not available and, considering the timing of the report, 2015 indicators are used in the narrative for explanatory purposes only. Country and programme funding data between 2012 and 2014 are presented in the appendices. More detail on country results is provided in the country profiles in Appendix 8, and Appendix 9 provides evaluation findings by programme.

Child protection

Child protection received 17.9 per cent of country funding in Jordan, 23.1 per cent in Lebanon, 13.4 per cent in the Syrian Arab Republic and 22.8 per cent in Turkey between 2012 and 2014.

In **Jordan**, child protection was significantly scaled up in 2014 and even 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.

Child protection programming in **Lebanon** was also expanded in 2014 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.

In the **Syrian Arab Republic**, child protection programming reached 85.1 per cent (127,600) of the target number of children and adolescents with psychosocial support services and outreach initiatives in 2014. In the first six months of 2015 alone, 214,000 children received psychosocial support.

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

Education

Education received 29 per cent of country funding in Jordan, 31.7 per cent in Lebanon, 18.4 per cent in the Syrian Arab Republic and 61.4 per cent in Turkey between 2012 and 2014.

Education programming in **Jordan** is implemented in camp and non-camp settings and supported nearly 128,000 children with basic education in 2014. More than 129,000 children were reached in the first six months of 2015, attaining approximately 99 per cent of the target planning figure for the year.

In **Lebanon**, education programming significantly expanded to reach nearly 113,000 children with basic education in the first six months of 2015, surpassing the target planning

figure for the whole year and almost doubling the number of children reached in all of 2014 (61,000).

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 the number of children reached in 2013.

In **Turkey**, education programming formed the most significant part of UNICEF funding between 2012 and 2014 (61.4 per cent), supporting more than 107,000 children with access to basic education and more than 112,000 children with essential education materials in 2014 (approximately 54 per cent and 57 per cent of respective target numbers).

Health

Health received 4.1 per cent of country funding in Jordan, 12.9 per cent in Lebanon, 28.3 per cent in the Syrian Arab Republic and 11.7 per cent in Turkey between 2012 and 2014.

In **Jordan**, polio and measles vaccination campaign activities were prioritized from 2013 onwards, as was nutrition, specifically with the promotion of infant and young child feeding practices in camp settings. In 2013, nearly 4 million children were vaccinated against measles. In 2014, this number decreased to 110,311 children, because in that year, 1.2 million children were vaccinated against polio.

Health programming in **Lebanon** 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.

In the **Syrian Arab Republic**, health programming provided basic health services via fixed centres and mobile health teams to more than 640,000 children in 2014. More than 450,000 children were 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.

Health programming in Turkey also focused on polio vaccination, reaching more than 1.1 million children in 2014 (approximately 74 per cent of the target population). Polio vaccination was not part of the Turkey programme in 2013 and no health programming is being delivered in 2015.

WASH

WASH received 48.7 per cent of country funding in Jordan, 24.9 per cent in Lebanon and 31 per cent in the Syrian Arab Republic. No WASH programming was implemented in Turkey between 2012 and 2014.

UNICEF **Jordan** and partners are constructing a water network and wastewater collection system in Za'atari refugee camp to create a sustainable and cost-efficient solution to WASH needs. A significant scale-up in the number of emergency-affected people accessing safe water was achieved between 2012 and 2015, with more than 636,00 people receiving access to safe water between January and June 2015 alone, compared with 558,995 in 2014.

WASH programming in **Lebanon** 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. In parallel with this scale-up, funding for WASH nearly doubled from 2013 to 2014.

In the **Syrian Arab Republic**, 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, surpassing the target planning figures for the entire year.

Turkey did not implement WASH activities between 2012 and June 2015.

Key conclusions on UNICEF's programme and advocacy response are presented in Section 5.3

4.3 UNICEF'S ENGAGEMENT WITH OTHERS

This section describes the findings and reflections on UNICEF's collaborations with key stakeholders, including governments, other United Nations agencies, the affected population and implementing partners. It also reflects on UNICEF's role in sector coordination.

Operational level collaboration with implementing partners is generally functional and effective. Areas for improvement were identified, however, and outlined below.

In the initial phases of the response (2012–2013), the complex and heavy sector-wide, inter-agency structure reduced the effectiveness and efficiency of coordination in some countries, specifically Lebanon and Turkey, and therefore overall humanitarian assistance. This was due to the unclear division of mandates, lead coordination roles and responsibilities between United Nations agencies (mainly between OCHA, UNHCR, UNICEF and the United Nations Development Programme (UNDP)). This is expected to remain a challenge, in part due to the complexity of the emergency and distinct organizational mandates which involve assistance to refugees and host communities, as well as emergency and resilience elements.

Across the region, UNICEF's overall organizational performance in terms of working with stakeholders in the humanitarian response has been strong. Significant efforts have been made to collaborate with government partners, United Nations agencies, NGOs, donors and implementing partners on a bilateral level and to fulfil UNICEF's mandated cluster-lead roles

for child protection, education and WASH. A notable collaboration has been the role that UNICEF has taken vis-à-vis WASH assistance in refugee camps, which would traditionally fall under UNHCR's mandate.

BOX 15: Whole of Syria approach[110]

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.

At the sub-regional level, UNICEF took on a key role coordinating with other organizations on sub-regional plans (including RRPs/3RP and WoS), approaches and key issues (e.g. cross-border activities) and messages. This improved assistance to the affected population, including women and children, through optimized use of organizations' strengths and capacity, and also minimized duplication of efforts.

Existing UNICEF relations with government and broader advocacy efforts facilitated programme implementation, but also posed a challenge in terms of balancing government plans and restrictions with the priority needs of affected populations and UNICEF's mandate.

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

For example, in Lebanon, the Government only acknowledged the crisis at the end of 2012 when hundreds of thousands of refugees in the country were already in need of support.

The protracted nature of the crisis requires the further localization of the assistance, as the current international humanitarian assistance alone will not be sufficient or appropriate for addressing the scale and complexity of the crisis or the underlying drivers of instability, conflict, poverty and vulnerability. These will have to be tackled through risk reduction and resilience-building initiatives, social protection and safety net schemes and insurance mechanisms. Although governments should ideally lead such initiatives through capacity building and institutional strengthening, capacity for such efforts is limited. In addition, local humanitarian capacity building and engagement with local communities will be key to meeting the needs of the increasing number of affected people. This will require UNICEF to place further emphasis on supporting governments. However, the evaluation did not find a clear strategy in place that defines how this partnership, including government capacity, should be developed or maintained.

In 2011, the Inter-Agency Standing Committee (IASC) Principals, including UNICEF, endorsed five commitments on accountability to affected populations, including one commitment on participation to enable affected populations to play an active role. The evaluation identified little systematic UNICEF engagement with affected populations in terms of seeking feedback on the relevance and quality of the response. Some end-user supply monitoring was conducted through implementing partners, field monitors and third-party monitoring, but most of these efforts focused on 'if assistance was delivered (numbers)'

rather than on quality or outcomes. In addition, the restrictions on monitoring inside the Syrian Arab Republic *(see Section 4.1)* limited UNICEF's options for engaging with the affected population. Going forward, it will be important to systematically include engagement with the affected population in UNICEF programme activities to enhance the relevance of the operation and align with the commitments on accountability to affected populations.[111]

UNICEF maintained effective working relations with donors in the region. For sustained future funding, the following points will need particular attention: donors request to receive information from UNICEF on strategic prioritization and justification in regards to programming choices (what, why and where) and to be structurally informed of the impact and quality of programming for the affected population. This finding is closely linked to the identified lack of UNICEF strategy and consistent programme monitoring, as described in Section 4.1.

Based on staff interviews, it was determined that staff at various levels did not have a coherent view on how to engage with non-state entities in the Syrian Arab Republic, in terms of what can be done and how to operationalize available UNICEF guidance.[112] This was partly due to limited emergency experience relevant to the Syria crisis, namely in highly political and highly sensitive environments; and reluctance to make mistakes considering the possible impact. Therefore, UNICEF worked through the SARC and other local implementing partners to increase access to hard-to-reach areas and coverage of the response. UNICEF staff indicated that practical United Nations-wide guidance on working with non-state entities is still required.

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[111] For further information, please refer to: Core Humanitarian Standard, 'Frequently Asked Questions', <www.corehumanitarianstandard.org/resources/faqs>, accessed 7 March 2016; and Inter-Agency Standing Committee, 'IASC Task Team on Accountability to Affected Populations and Prevention of Sexual Exploitation and Abuse (AAP/PSEA)', <https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse>, accessed 7 March 2016.

[112] United Nations Children's Fund, 'Programme guidance note on engaging with non-state entities in humanitarian action', UNICEF, 2011.

In 2012, UNICEF worked with a total of 92 implementing partners; this increased to 142 in 2013 and 175 in 2014. As of June 2015, UNICEF was working with 122 implementing partners. Most implementing partners work in the Syrian Arab Republic and Lebanon (49 and 42 implementing partners in 2015, respectively) and in the sectors of child protection and education (39 and 40 implementing partners in 2015, respectively).[113]

The process of implementing partner mapping, selection, coordination and monitoring varied across programme sectors and country offices in the sub-region and presented a range of issues that have directly impeded the speed and the quality of UNICEF service delivery. These issues include:

- The lack of an existing (or completed early in the response) comprehensive implementing partner mapping on capacity and quality slowed the initial speed of the response;

- The (slow) process of establishing PCAs;

- The short duration of PCAs linked to short-term funding hampered longer-term planning and necessitated a continuous flow of administrative activities;

- Bottlenecks in the supporting financial process;

- The limited competency of UNICEF staff in establishing and managing PCAs, including conducting the supporting administrative and financial activities, within an L3 emergency context;

- The limited evaluation of implementing partner performance;

- Misunderstandings and perceived lack of transparency on UNICEF selection processes due to lack of communication on the use of the SSOPs. This was mainly relevant when the emergency became protracted (2014 onwards).

The limited number, capacity and competency of local implementing partners to deliver programming and Syrian Government restrictions on working with international implementing partners reduced UNICEF's overall ability to scale-up and deliver on targets.

Due to the significant scope and scale of the sub-regional crisis, collaboration with implementing partners was key to delivering assistance to a substantial number of affected people. In the Syrian Arab Republic, working with local implementing partners provided access to affected populations in hard-to-reach areas.

Key conclusions on UNICEF's engagement with others are presented in Section 5.4

4.4 INTERNAL UNICEF MANAGEMENT AND PROCESS

This section provides findings and reflections on UNICEF's management structures *(see Section 3.4)* and operational processes in relation to the Syria crisis response and performance.

The need for an increase in the staff capacity required to respond, combined with the initially limited relevant emergency competence and experience in the country offices and MENARO, resulted in the need to augment the number of experienced staff in the region. The evaluation found that in 2012 and 2013, human resources needs were identified on a piece-meal basis instead of through comprehensive assessment of the human resources capacity gaps of the affected offices. Recruitment was slow, due to several issues, including challenges related to identifying appropriate candidates, the overstretched global UNICEF surge infrastructure and the absence of an operational Regional Rapid Response Mechanism. The delay in moving to the mid-term and long-term staffing requirement contributed to a heavy reliance on short-term

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113 Figure 5 and 6 in Appendix 10 provide supporting data on engagement with implementing partners.

surge deployment. This resulted in high staff turnover, causing discontinuity of external relations, including with government, and high transitional costs.[114] Emergency experience in the sub-region has been built during the crisis and it seems important to maintain this skill set in the sub-region for the future.

The number of staff working in the region increased significantly between 2012 and 2014. In Jordan, staff numbers more than doubled, from 48 staff in 2012 to 104 in 2014. In Lebanon, staffing numbers nearly tripled from 50 in 2012 to 140 in 2014. In the Syrian Arab Republic, staff numbers more than doubled from 66 in 2012 to 152 in 2014. No staffing figures were available for Turkey in 2012 and 17 staff were working in UNICEF Turkey in 2014. This led to a continuous process of staff recruitment and briefing.

The L3 SSOP for human resources indicates that all posts should be filled within one month. Data available from 2013 indicated that only 30 per cent of posts were filled within one month, 25 per cent were filled between one and three months and 21 per cent of posts took more than three months to fill. The remaining 24 per cent of posts had no information on time to deployment available.[115]

An initial shortage of local logistics capacity in 2012 and the first half of 2013 (in terms of staff and knowledge) delayed the provision of supplies, reduced the quality of programme delivery and led to a lack of predictive planning. The latter contributed to prolonged warehousing, which increased costs and decreased the cost-effectiveness of programming. Recruitment of country office-level logistics staff (2013), localized procurement and production solutions and long-term agreements improved supply chain efficiency (2013 onwards).

The respective specific roles and responsibilities of UNICEF Headquarters, MENARO, the Syria Crisis Hub and country offices were described after the L3 declaration in 2013[116] *(see Table 2)*, but were in practice unclear and internal coordination and communication across programmes, units and functions only took place to a limited extent. Initially (2012–2013) this led to some tension between Headquarters and MENARO/Syria Hub staff, which latterly transferred to being between MENARO/Syria Hub and country offices (2014–2015) when country offices had scaled up and were able to deal with the emergency.

The Syria Hub assumed a key role in the sub-regional response for planning, information management, reporting and resource mobilization, as well as supporting country offices, specifically in 2013–2014. The establishment of the Syria Hub ensured the availability of additional staff (22 in 2014) and specific expertise, experience and resources. This was of great value as the standing capacity of MENARO was limited and this allowed for focused attention for both the emergency (Syria Hub) and ongoing programming (MENARO) requirements. Given that the crisis has become protracted and the capacity of country offices has increased, it will be important to rationalize the role of the Syria Hub moving forward.

L3 SSOPs were not applied consistently across all country offices and some offices used a 'risk-averse' approach, for example by using more authorization levels than needed for contracting and procurement activities to be 'covered' in case of any audit issue. Staff at the regional level indicated that for future crises, there is a need to work with country offices from the outset to ensure that they feel supported in applying the L3 SSOPs.

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[114] 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.

[115] See Appendix 10, Figure 9 and Figure 10 for supporting data on staff deployment.

[116] See appendix 13 for terms of reference and descriptions of the roles of the different UNICEF units.

TABLE 2: UNICEF forums for the Syria crisis response[117]

Level	Forum	Role
HQ/ RO/ CO	EMT	The EMT will serve as a 'light and strategic core team' under the Resident Coordinator (RC)/Executive Director (ED) to ensure coordinated and speedy corporate support to the response
HQ	T-EMT	The technical EMT will coordinate the divisions' technical engagement with and support to the Syria crisis
RO	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 the L3
RO	CMT core team	The core team under the RD will serve to arbitrate key immediate bottlenecks, red flags and determine weekly priorities for speedy corporate support to the response
RO	Syria Hub	The Syria Hub, led by the Syria Emergency Sub-Regional Coordinator, will operationalize strategic directions, help address bottlenecks at field level that require support and identify issues for the CMT
RO/ CO	Conference call with CO	The weekly call with country offices will be used to debrief on past activities and progress against plans, provide updates and identify bottlenecks to be referred to appropriate forums for support
CO	CMT	The CMT will serve as a 'light and strategic core team' under the Representative to ensure effective, coordinated and speedy corporate support to the response
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 decisions on key issues

As the crisis became protracted, L3 SSOPs created challenges in terms of quality and transparency, especially in regard to SSOPs for human resources, PCAs and procurement. For example, implementing partners mentioned that the L3 fast-track procedure works well at the start of an emergency to ensure speed, but led to a lack of transparency in partner selection in the longer term, with a some-times related level of dissatisfaction. Human resources staff emphasized the importance of using the SSOPs to accelerate the recruitment process to scale up at the start of the crisis, after which focus should return to identifying the right staffing profile when resources are at scale to ensure the quality of the work.

Based on a consistent finding across previous lessons learned, 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. Work on how to address 'chronic L3s' was ongoing at the time that this report was written (2015).

Between 2012 and 2014, UNICEF appealed for more than US$1.2 billion in funding to cover programming needs in Jordan, Lebanon, the Syrian Arab Republic and Turkey, of which more than US$955 million (78.7 per cent) was received.

In 2012, the total UNICEF funding appeal for the sub-region was US$107.7 million, which rose to US$808.2 million in 2015. Flexibility of funding was limited due to earmarking by donors, for example to programme sectors or countries. Restrictive funding cycles also limited the way that funds could be used over

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[117] See Appendix 13 for the MENARO Terms of Reference for L3 Coordination, April 2013.

certain time periods. Some donors reported that UNICEF did not articulate priorities to help them understand why certain programming choices were needed or prioritized.

Supported by UNICEF's strong fundraising capability, funding levels in 2012 and 2013 were sufficient to meet programming needs across the region, 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 has been received of the US$808 million appealed for (42.8 per cent).

Across the region, child protection received 103.5 per cent of funds requested between 2012 and 2014, compared with 57.9 per cent for education, 107.4 per cent for health and 77.1 per cent for WASH.[118]

Although the needs associated with the Syria crisis are likely to further increase, fundraising is still going to be inadequate to cover all pro-gramme needs, given competing priorities for humanitarian funding. This is one reason why a closer link between humanitarian response and resilience (development funding) is being sought by UNICEF and other organizations, as found through interviews and desk research on the future operating context.

Short-term funding cycles (in 2012–2013, six-month cycles; in 2014, 12-month cycles) led to short-term PCAs with implementing partners and contracts with staff, which negatively affected the continuity of the response. In

addition, donor earmarking of funds created challenges related to programme prioritization.

Between 2011 and 2013, the Syria response was allocated 24 distinct grants from the Central Emergency Response Fund, contrib-uting 8.2 per cent of all emergency funding received for the sub-regional response. The Central Emergency Response Fund has helped a number of programmes, such as WASH and refugee cash assistance programing in Jordan. Challenges were identified in terms of the heavy reporting structure, limitations of funding amounts, late receipt of funds and UNICEF's ability to quickly utilize funds.

A total of US$431.6 million was disbursed to implementing partners between 2012 and 2014 in Jordan, Lebanon and Turkey (the Syrian Arab Republic implementing partner funding figures were not available), representing 65.5 per cent of the US$658.6 million funding UNICEF received for these countries for this period. The average proportion of funding allocated to implementing partners varied by country between 2012 and 2014 (60.5 per cent in Jordan, 78.7 per cent in Lebanon and 22.5 per cent in Turkey).[119]

Combined with the expectation of continued reliance on implementing partners for service delivery in hard-to-reach areas, UNICEF's implementing partner management compe-tency has incrementally become more crucial for successful programme performance. It is therefore important, moving forward, to ensure sufficient implementing partner management competency, establish a robust network of implementing partners using a rig-orous selection system and support partners with appropriate capacity building.

The evaluation found that no systematic UNICEF methodology was used to measure

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118 The proportion of sector funding received out of the total sector appeal is calculated as an average of the cumulative funding figures between 2012-2014, not of the average of annual percentages themselves. Figures 1, 2, 3 and 4 in Appendix 10 provide supporting data on funding appealed for and received.

119 The proportion of implementing partner funding provided by each country out of overall funding received between 2012-2014 is calculated as an average of the cumulative implementing partner funding figures between 2012-2014, not of the average of annual percentages themselves. Figures 7 and 8 in Appendix 10 provide supporting data on funding allocated to implementing partners.

the overall efficiency of programmes during the response. Available cost figures per child (for example child protection unit cost per child) could not be used to compare, as these were not linked to a specific intervention. Cost figures alone are insufficient for assessing efficiency.

The evaluation recognizes that over time, various efforts were made to improve operations efficiency, for example:

- The employment of middle and long-term staffing solutions (temporary appointment contracts/fixed-term appointment contracts) instead of surge capacity;

- The introduction of different programme modalities such as moving from water trucking to a piped network and onsite water treatment in Za'atari refugee camp in Jordan *(see Appendix 8, Box 1)*;

- The use of local procurement, such as for school furniture and jerry-cans in the Syrian Arab Republic, instead of international procurement;

- The establishment of long-term agreements with international and local suppliers, for example with Chinese suppliers for winter clothing kits, and appropriate planning for a prolonged delivery time (cost-efficient);

- Improvements in supply chain planning;

- The development of plans for local production, for example of hypochlorite;

- The use of local partners to increase coverage and minimize costs.

Since the second half of 2014, UNICEF has considered cost-effectiveness for individual programmes as a key point of attention. No systematic approach has been employed to set targets, benchmarks or measure cost performance, and moving forward, it will be important to develop a (sub-)regional costing methodology allowing for systematic cost calculation and measurement of cost-effectiveness, to make informed decisions regarding the optimal use of available funding. This

becomes particularly important when linked with the finding that fundraising will potentially become more difficult while assistance needs are likely to further increase.

Guidance to support quality programming is generally available but most staff interviewed were either not aware of the guidance or did not know how to apply it. In addition, guidance was not contextualized for the MENA region (middle-income country, humanitarian crisis with a strong protection component, Arabic language). The need for contextualization also applied to the use of the CCCs and SSOPs. Other areas where limited understanding of how to apply guidance hampered the response included international humantiarian law and working with non-state entities. Key conclusions on UNICEF's internal management and process are presented in Section 5.5.

4.5 FUTURE OPERATING CONTEXT

Additional desk research was carried out to gain insight into the anticipated future developments that will impact the Syrian Arab Republic, global operating contexts and UNICEF directions. Key statements from the reviewed documentation are included in Appendix 17 and summarized below. This analysis was taken into account in formulating the evaluation conclusions and recommendations.

The operating context in the Syrian Arab Republic

The key contextual factors that are expected to affect the delivery of UNICEF's humanitarian assistance in the Syrian Arab Republic and the sub-region in the future are:

- **Increasing caseload** and breadth of services, with more focus on protection;

- **Inadequate levels of funding** for all programme needs, with greater emphasis on coordination;

- Greater **emphasis on cost-effectiveness** and programme and financial accountability;

- Integration of **response and resilience initiatives;**

- Increased engagement with **affected communities;**

- Greater emphasis on **system strengthening with local authorities;**

- Greater reliance on **implementing partners** and for delivery in hard-to-reach areas.

The global operating context

The key contextual factors that are expected to affect the delivery of UNICEF's global humanitarian assistance in the future are:

- The **number of people** in need of humanitarian assistance will continue to increase;

- The **regional impact** of humanitarian crises is likely to continue;

- Humanitarian assistance alone will not be sufficient or appropriate for addressing **the scale and complexity** of future needs;

- The need to increase **local capacity building** and engagement with local communities;

- The ability to **measure progress towards stated objectives/results** needs to be strengthened;

- The increased need for cost-effectiveness and **financial accountability;**

- The requirement to **integrate development and humanitarian response.**

The UNICEF Strategic Plan 2014–2017

The recommendations of the evaluation are also guided by the key tenets of the UNICEF Strategic Plan 2014–2017[120] and take into account the organization's Strengthening

Humanitarian Action (SHA) initiative. The SHA led to the establishment of the L2/L3 SSOPs and 11 major actions that include topics such as: continuous update of the SSOPs; dissemination of guidance on cluster accountabilities; and clarification of resilience and its linkages to preparedness. The implementation of SHA must take the organization's mandate into account.[121]

Key points that will guide the delivery of UNICEF's global humanitarian assistance in the future include:

- Humanitarian action comprises emergency preparedness, humanitarian response, early recovery and a focus on resilience;

- Humanitarian action is a cross-cutting activity with specific and measurable performance targets to save lives and systematically reduce vulnerability to disasters and conflicts;

- The interventions should be guided by the CCCs aiming for faster scale-up and better results in major humanitarian crises, including early identification of priorities and strategies, rapid deployment of qualified staff and clear accountabilities;

- UNICEF will support national systems and capacities for humanitarian action and support the integration of national preparedness into development plans and systems;

- UNICEF is committed to reducing vulnerability to disaster and conflicts and building resilience through risk-informed country programmes;

- Humanitarian action serves as an entry point for structural and systemic changes.

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120 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.

121 For additional information on SHA, see: United Nations Children's Fund, 'Update on strengthening humanitarian action', UNICEF Executive Board first regular session 2015, Item 7(a) of the provisional agenda, New York, 8 December 2014, <https://papersmart.unmeetings.org/media2/4655927/2015-crp4-humanitarian-action-8dec2014.pdf>, accessed 7 March 2016.

CHAPTER 5
CONCLUSIONS

This chapter is composed of five sections and is based on the identified elements of the UNICEF response that worked well or did not work well across the sub-region, as described in the findings outlined in Chapter 4 (and the detailed findings outlined in Appendix 11).

These findings were mapped against the OECD/DAC evaluation criteria to assess how they positively or negatively affected UNICEF's humanitarian response *(see Appendix 15)* and to formulate conclusions that inform focused recommendations. The information presented in this section is a synthesis of the UNICEF response across the four countries evaluated.

Section 5.1 provides a reflection on the evaluation findings; Section 5.2 outlines overall conclusions in regards to UNICEF's role and strategy; Section 5.3 outlines overall conclusions for UNICEF's programme and advocacy response; Section 5.4 outlines overall conclusions for UNICEF's engagement with others; and Section 5.5 outlines overall conclusions for UNICEF's internal management and process. The output of these sections, along with the information on the future operating context included in Section 4.5, informs the recommendations presented in Chapter 6.

5.1 OVERVIEW

BOX 16: Contextual limitations impacting the humanitarian response

Based on the findings of the evaluation, the team concluded that examining UNICEF's humanitarian response in the sub-region depends on two interconnected factors: 1) did UNICEF achieve its core objectives? and 2) is UNICEF delivering the right assistance in the right places and at the right time?

The conclusions should be considered within the contextual limitations impacting the humanitarian response in the Syrian Arab Republic and the sub-region, many of which are beyond UNICEF's control. These contextual aspects differ by country, but include:

- The **complex political nature** of the crisis, which led to constantly changing parameters for the response (e.g. in terms of the scale and scope of the crisis and the constant movement of battle-fronts and affected populations).

- The **role of governments**, which impacted the speed of UNICEF's response and its operating space. This is specifically influential in regards to the operation inside the Syrian Arab Republic, considering the access constraints.

- **Security issues** leading to safety risks for UNICEF and implementing partner staff.

- The **protracted nature of the crisis** and the impact that this has had on countries' abilities to provide assistance.

Despite the difficult operating environment and the limitations on its approach, **UNICEF was substantially able to deliver on its core objectives**. The response was slow to start (in 2012), but the evaluation found evidence that the organization invested significantly in implementing its programmes, incrementally building its capacity and improving its performance in 2013 and 2014, with significant scale-up and reach of programming achieved from 2014. However, it was unclear whether these efforts addressed the priority locations and needs of the affected population within UNICEF's mandate (did UNICEF do the right things?). The assessment of relevance was constrained by the lack of a clear UNICEF strategy based on needs assessment and systematic impact monitoring.

BOX 17: Assessment of UNICEF's response by key evaluation criteria

1. UNICEF programme delivery incrementally became **largely effective**.[122] Some sectoral interventions were mutually reinforcing, providing examples of good practice.

2. Programme design and implementation was not adequately informed by situational analysis or needs assessment and monitoring but **became incrementally more relevant** through 'learning by doing'.

3. **Coverage of the response was significant**, but programme interventions were not systematically linked to overall needs and vulnerability, or to UNICEF capacity. In addition, it took time to scale up (significant scale up took place between 2013 and 2014) and not all programmes met their objectives and coverage targets.

4. Due to limited evidence on the cost and impact of the response and cost data related to impact, it is not possible to rigorously determine how well UNICEF used its resources and therefore the **efficiency** of the response. Aspects of UNICEF's internal management and processes limited operational efficiency.

5. **Guidance was available** but was not always applied, widely disseminated or contextualized, **somewhat limiting the coherence** of the response.

5.2 ROLE AND STRATEGY

UNICEF's sectoral response was broadly relevant within the sub-region. However, in addition to contextual factors that were beyond the organization's control, UNICEF's ability to respond was limited by a lack of preparedness and of a clear UNICEF-specific rationale (strategy), as well as an inability to actively inform programmes with situational analysis. As a result, the effectiveness, relevance and coverage of the response were hampered to some extent.

UNICEF invested heavily in the development of regional inter-agency strategies and plans. Country offices also established operational programme response plans and some sector plans. However, little evidence was found of a clear UNICEF-specific rationale (the 'how' and 'why' of programme decisions) that translates overall sector strategy into a UNICEF-specific strategy based on contextual analysis and UNICEF capacity, which connects UNICEF sector responses and informs programming and advocacy choices.

Programme choices were found to be opportunity-based and reactive, rather than based on systematic situation analysis, needs and vulnerability assessment, definition of UNICEF's organizational capacity, priority-setting and continuous monitoring. This also meant that UNICEF's mandate and capacity were not fully leveraged to assist all affected populations.

The defined (global) UNICEF mandate ensured that partners had a clear understanding of UNICEF's role. However, there was a division in opinion in regards to what should be the core of UNICEF's role, particularly between coordination and policy versus field operations and implementation management.

The coordination and policy role is anticipated to become even more important in the future given the expectation that needs will continue to increase and levels of funding for all programme needs will remain inadequate. This means that the entire sector will be required to do 'more' with limited funding.

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[122] This assessment takes into account that initial targets were based on UNICEF's mandate and what it should do, rather than on what it could do considering the contextual aspects and limitations and the organization's capacity.

5.3 PROGRAMME AND ADVOCACY RESPONSE

Though UNICEF was slow to start (2012), capacity was incrementally built and performance improved through learning by doing in 2013 and 2014, with significant scale-up and coverage of programming achieved from 2014.

By focusing its programme efforts on flagship areas, UNICEF was able to develop an effective response. For WASH (water supply) and health (immunization), this contributed to the absence of disease and outbreaks in camps. Child protection and education were initially bigger challenges in terms of the speed of the response, the number of children assisted (reached) and service provision (quality).

Not all programmes met their objectives in 2012 and 2013. This was due in part to limited understanding of the required and available emergency response capacity (UNICEF resources and competencies in the particular context) and resulted in programme targets that were based on UNICEF's mandate and what management perceived 'should' be UNICEF's responsibility (aspirational) rather than on what the organization 'could' do in practical terms. Planning targets were adjusted in 2014 to become more achievable and proportionate to capacity.

Consistent assessment of programme performance across interventions and time periods has proven to be difficult due to a lack of: 1) a consistent UNICEF strategy and targets; 2) baseline and other data to measure progress; 3) consistent programme monitoring against objectives; and 4) evaluation. In addition, programmes evolved according to context and available resources.

To increase effectiveness and relevance, programme approaches, modalities and targets incrementally shifted emphasis towards service-oriented, integrated approaches, with a focus on resilience, vulnerability rather than status, localization of activities and implementing partners, and cost-effectiveness (as of late 2014).

Integrated and cross-sector initiatives such as No Lost Generation, Makani and regional polio immunization campaigns provided synergies between programmes, strong advocacy messages, broader impact of interventions and resource mobilization around common approaches leading to greater effectiveness.

Due to limited evidence on programme modality versus cost and impact, it is not possible to determine how well UNICEF used its resources and therefore the overall efficiency of the response. Since mid-2014, UNICEF has increasingly recorded and analysed cost data to inform programme decisions (e.g. for WASH).

The delivery of UNICEF programmes was found to be incrementally more effective, but it was unclear if these efforts addressed the priority locations and needs of the affected population within UNICEF's mandate (did UNICEF do the right things?) due to the lack of a clear UNICEF strategy based on needs assessment and impact monitoring.

5.4 ENGAGEMENT WITH OTHERS

UNICEF's engagement with others has largely enhanced humanitarian performance in the sub-region, but attention is required for: 1) mapping, selection and management of implementing partners; 2) engagement with affected populations; and 3) working with non-state entities.

UNICEF's existing working relationships with national and local authorities significantly aided the effectiveness of the response. At the same time, government restrictions limited the response, primarily in the Syrian Arab Republic; UNICEF developed approaches, tools and systems to mitigate the impact of such restrictions.

There was limited systematic engagement with the affected population in terms of planning and feedback on the assistance provided, which significantly impacted programme relevance.

At the sub-regional level, UNICEF took on a key coordination role across sectors with other organizations on (sub-)regional plans,

approaches, key issues and messages. This contributed to improving the effectiveness of the overall assistance provided to the affected population, including women and children.

UNICEF's role in (co-)leading sector working groups increased overall sector efficiency. Since September 2014, the expanded WoS coordination structure has presented increased coordination costs. However, the approach brings potential for gains in efficiency, effectiveness, management and results for children.

Working relations with (local) implementing partners, including joint proposal writing, third-party monitoring and use of shared information, increased the effectiveness, relevance and coverage of UNICEF programming. Challenges in regards to implementing partner management, including lack of pre-mapping and selection, the duration of PCAs and the time it took to process financial transactions, limited the coverage and efficiency of the response.

Relationships with donors were strong, though there is an increasing call for better reporting to support decision-making. Sustained funding will impact coverage.

No clear strategy was identified for how relations with donors would be sustained and developed moving forward.

5.5 INTERNAL MANAGEMENT AND PROCESS

The internal management and process section of the evaluation presented the most areas for improvement, particularly related to coverage, process efficiency and coherence.

An initial sense of urgency, combined with a lack of understanding of what to do in a humanitarian crisis with a strong protection dimension, extended the decision-making process (between country offices, MENARO and Headquarters) and therefore reduced effectiveness.

Although the L3 SSOPs were initially appropriate, they were not consistently applied or fully suited to the context, which reduced efficiency. As the crisis became protracted, the

trade-off between speed (SSOPs) and quality (standard operating procedures) became less appropriate and impacted the effectiveness of the response. The SSOPs should be considered in terms of possible types of emergencies, adjusted and contextualized. The need to adapt the L3 SSOPs for different contexts has been consistently identified in UNICEF lessons learned exercises and evaluations. The SSOPs are being revised in 2015.

The Syria Hub assumed a key role in the sub-regional response and in support to country offices. The evaluation found that the Syria Hub has added great value, but that as the crisis has become protracted and the capacity of country offices has increased, it will be important to rationalize its role moving forward.

The roles and accountabilities of country offices, MENARO, the Syria Hub and Headquarters were often unclear. Internal interaction and communication has been limited. This reduced overall efficiency, particularly in terms of speed and integration.

An initial shortage of staff with emergency and supply-related skills in the sub-region contributed to delaying programming and led to an extended period of surge deployments. This affected the coverage and efficiency of the response.

UNICEF's strong fundraising capability ensured an increase in funding levels to meet programming needs, which improved coverage and efficiency. The level of funding differed by country and sector. Given the high profile of the Syria crisis, it will still be possible to mobilize funding for the region in the near future. However, the funding may not adequately cover all programme needs, as the humanitarian situation in the Syrian Arab Republic and the condition of refugees in neighbouring countries continue to deteriorate.

Limited focus on cost-effectiveness has impacted the organization's ability to measure and demonstrate efficiency.

In terms of coherence, guidance was generally available but was not always applied, widely disseminated or contextualized.

CHAPTER 6
RECOMMENDATIONS

6.1 INTRODUCTION

This final chapter provides UNICEF with recommendations for how to further improve its sub-regional humanitarian response, as the Syria crisis continues. Recommendation number six is directed to UNICEF Headquarters, and proposes actions to apply at the global level through EMOPS, based on lessons learned from the Syria crisis.

UNICEF has performed with increasing effectiveness as the Syria crisis has unfolded. The organization has demonstrated that it has the resources and capacities necessary to meet the future challenges likely to arise in responses to complex and protracted humanitarian emergencies.

Based on the evaluation conclusions, which are informed by the future operational context review, the recommendations are categorized by evaluation theme, but are interconnected. All areas will need to be addressed to achieve significant improvement.[123] Each recommendation comprises two elements: what the recommendation intends to achieve and what recommended actions UNICEF could undertake.[124]

However, the following operational challenges will need to be faced in the implementation of these recommendations:

- Responsibilities split across many departments;

- Limited overall senior management ownership, as well as follow-through risks;

- Recommendations not being translated into clear and accountable plans for execution;

- Difficulty in balancing decentralized authority with required global consistency; and

- Inertia caused in part by competing priorities.

It is therefore proposed that the following three specific actions are taken to support the successful implementation of the evaluation recommendations:

1. Engage senior leadership across UNICEF. This includes fully briefing Headquarters, MENARO and country office staff and involving relevant staff in the process of developing a management response.

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[123] The UNICEF Standard Operating Procedure for Management Response will apply, which includes management discretion to accept or reject each recommendation.

[124] These findings and recommendations resonate with those found in other documents including: 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; documents related to the SHA initiative; United Nations Children's Fund, 'Real-time evaluation of UNICEF's humanitarian response to Typhoon Haiyan in the Philippines', UNICEF, New York, July 2014; and United Nations Children's Fund, 'Evaluation of UNICEF's cluster lead agency role in humanitarian action' UNICEF, New York, December 2013.

2. Implement the recommendations as a package within an overall plan. Implementing one or a few of the recommendations is unlikely to have a significant overall positive effect on UNICEF's humanitarian response performance.

3. Engage key partners (specifically implementing partners and donors) in developing sub-regional and country strategies for the future, and engaging them in keeping these updated and relevant.

6.2 RECOMMENDATIONS

By the end of 2015, many issues for improvement had been addressed and further improvements were ongoing or being formulated. As a result, the evaluation found positive trends in UNICEF performance. The evaluation concludes that the efforts behind these areas of improving performance should be continued. In areas where UNICEF is not doing as well, additional efforts are required.

The recommendations below were developed based on careful consideration of the evaluation findings, complement the themes covered in the findings and conclusions of this report and are all of equal importance.

BOX 18: Evaluation recommendations

Recommendation 1: Develop an overarching sub-regional UNICEF strategy, based on comprehensive needs assessment and situation analysis (including risk analysis and conflict analysis) aimed at strengthening the coherence and consistency of the overall response, and linked to UNICEF's global priorities and responsibilities. This should include, for each country office, a long-term, country specific approach.

Recommendation 2: Clarify the future roles and accountabilities of Headquarters, MENARO/Syria Hub and country offices, including lines of communication, and provide appropriate guidance through updated standard operating procedures.

Recommendation 3: Optimize the selection and management of implementing partners.

Recommendation 4: Develop a systematic approach to information sharing, feedback and accountability mechanisms for the affected population and integrate these into country plans, programme proposals and monitoring and evaluation processes.

Recommendation 5: Develop UNICEF-specific guidance for measuring the efficiency of programming and operational support that is contextualized for the crisis.

Recommendation 6: At the global level, taking the lessons of the Syria crisis into account, develop key guidance, tools and the knowledge base needed to carry out humanitarian response activities in similar contexts (i.e. complex, multi-country, protracted emergencies, driven by conflict, featuring urban and camp settings and large-scale population displacement). Follow through to make such guidance widely available, accessible, known and understood.

Recommendation 1: Develop an overarching sub-regional UNICEF strategy, based on comprehensive needs assessment and situation analysis (including risk analysis and conflict analysis) aimed at strengthening the coherence and consistency of the overall response, and linked to UNICEF's global priorities and responsibilities. This should include, for each country office, a long-term, country specific approach.

This recommendation is intended to address the identified need to base the design and implementation of response plans on situation analysis, for clear response plans, performance measurement and in line with the requirement to integrate response and resilience activities.

Recommended actions:

1.1 Develop an overarching strategy for the sub-region, including situation analysis, scenario assessment, risk analysis, conflict sensitive planning and contextualization of the UNICEF CCCs and customized elements of the UNICEF Strategic Plan 2014–2017. The strategy should consider the regional inter-agency strategy and UNICEF capacity, and should be used to guide and inform country office programme prioritization and target setting. It can then be used as a basis to review the consolidated country office plans, set operational and funding priorities across the region, measure progress and communicate results. Due to the evolving nature of the crisis, it is evident that periodic reviews and updates of the strategy and country office plans are needed, with periodicity to be determined by the GEC, in consultation with EMOPS.

1.2 Develop a comprehensive long-term approach for each individual country office, considering contextual aspects linked to UNICEF capacity, and

complementary to sector-specific strategies. Such approaches will help to ensure that:

• Programming and targets are guided by the UNICEF regional operations strategy;

• Plans take into account, coordinate and support activities of key partners to ensure coverage;

• Plans are conflict sensitive; and

• Plans have relevant and measurable indicators that are used to regularly track progress towards set results (at outcome and impact levels). Based on periodic reviews, programmes and targets may be adjusted where necessary.

Recommendation 2: Clarify the future roles and accountabilities of Headquarters, MENARO/Syria Hub[125] and country offices, including lines of communication, and provide appropriate guidance through updated standard operating procedures.

This recommendation is intended to address the identified need for system strengthening, clear organization structures and convergence of the response, given the changing humanitarian environment.

Recommended actions:

2.1 Taking into consideration the expanded capabilities and capacities in country offices, clarify the future roles and accountabilities of Headquarters, MENARO/Syria Hub and country offices that can be included in the standard operating procedures.

2.2 Review the role of the Syria Hub for it to remain relevant as the crisis becomes further protracted. Consider whether the Syria Hub, or a modified unit replacing

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[125] It is noted that as of 2016, the Syria Hub may be replaced by a unit called 'Humanitarian Team'. Where relevant, the recommendation may apply to the Humanitarian Team.

it, could lead on the development and implementation of a sub-regional strategy and the establishment of a 'disaster-ready' concept (i.e. human resources strategy, funding strategy), while remaining flexible in providing support to specific emergencies (remotely and through deployments).

Recommendation 3: Optimize the selection and management of implementing partners.

This recommendation is intended to address the identified need to maintain consistent delivery of programmes (performance) and achieve greater coverage of hard-to-reach areas. It therefore addresses challenges of sustaining and increasing coverage and maintaining quality while working through intermediary organizations.[126]

Recommended actions:

3.1 Identify and implement improved implementing partner selection processes in emergency situations.

3.2 Complete/update assessment and mapping of implementing partners (in terms of capacity and geographic location and coverage) for each programme sector and keep this up to date.

3.3 Establish formal multi-year partnerships with appropriate national authorities and NGOs with a view to improving the consistency and coverage of response. These formal partnerships may be supported by tripartite agreements with donors or co-funding by development actors.

3.4 Develop and disseminate appropriate guidance to all implementing partners in appropriate formats and languages

and ensure consistent application and capacity.

Recommendation 4: Develop a systematic approach to information sharing, feedback and accountability mechanisms for the affected population and integrate these into country plans, programme proposals and monitoring and evaluation processes.

This recommendation is intended to address the identified need to ensure and monitor the relevance of the response over time.

Recommended actions:

4.1 Familiarize relevant staff with methodologies for engaging affected populations at all stages of programming, design, monitoring and evaluation, as per IASC[127] and Core Humanitarian Standard[128] guidelines. Where a UNICEF-specific systematic approach is developed, staff should be familiarized with the adapted approaches.

4.2 Ensure that feedback from affected populations informs how programmes are developed and implemented, and the type of assistance being delivered.

Recommendation 5: Develop UNICEF-specific guidance for measuring the efficiency of programming and operational support that is contextualized for the crisis.

This recommendation is intended to enable country offices and MENARO to assess the efficiency of programmes and to support UNICEF to implement programmes efficiently. This will be vital to securing future funding, as well as being able to serve a bigger caseload with fewer resources.

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126 Existing procedures and guidance on this subject matter (such as the harmonized approach to cash transfers, civil society organizations procedure guidance and PCA guidelines) may need to be enforced as part of this recommendation.

127 For additional information, see: Inter-Agency Standing Committee, 'IASC Task Team on Accountability to Affected Populations and Prevention of Sexual Exploitation and Abuse (AAP/PSEA)', <https://interagencystandingcommittee.org/accountability-affected-populations-including-protection-sexual-exploitation-and-abuse>, accessed 7 March 2016.

128 For additional information, see: Core Humanitarian Standard, 'Frequently Asked Questions', <www.corehumanitarianstandard.org/resources/faqs>, accessed 7 March 2016.

Recommended actions:

5.1   Develop a UNICEF-specific methodology to measure the efficiency of programme delivery and operational support (MENARO/Syria Hub).

5.2   Conduct a full efficiency analysis of programmes and of the support structure to establish a baseline, then initiate regular monitoring and evaluation of the dimensions of efficiency (at MENARO/Syria Hub and country office level), generating information to make incremental changes in efficiency in real time.

Recommendation 6: At the global level, taking the lessons of the Syria crisis into account, develop key guidance, tools and the knowledge base needed to carry out humanitarian response activities in similar contexts (i.e. complex, multi-country, protracted emergencies, driven by conflict, featuring urban and camp settings and large-scale population displacement). Follow through to make such guidance widely available, accessible, known and understood.

This recommendation intends to help UNICEF, at the global level, develop the tools it needs to respond to humanitarian emergencies effectively and efficiently in similar contexts.

Recommended actions:

6.1   Review the current global UNICEF suite of humanitarian response tools, in collaboration with the Regional Office, and establish if these are fit for purpose, given the requirements of humanitarian work in complex emergencies.

6.2   Set up a mechanism to support and maintain oversight of the use of existing preparedness tools (i.e. Early Warning Early Action system) by country offices, as well as the relevant humanitarian response tools. As part of support and maintenance, the tools need to be modified to adapt to the context in which they are being used, in this case the Syria crisis (i.e. complex, multi-country, protracted emergencies, driven by conflict, featuring urban and camp settings and large-scale population displacement).

6.3   Disseminate critical guidance to UNICEF staff as well as to implementing partners in appropriate formats and languages, and undertake appropriate training exercises so that the guidance is well understood and applied.