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Independent Evaluation of the Aktion Deutschland Hilft (ADH) joint appeal to the Syrian refugee crisis

Evaluation Report

Prepared by Key Aid Consulting for ADH

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June 2021

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Acknowledgements

This independent evaluation was commissioned by Aktion Deutschland Hilft e. V. (ADH) and carried out by Hélène Juillard, Natascha Minnitt and Mohamad AlAshmar of Key Aid Consulting.

The evaluation team wishes to express its thanks and deep appreciation to all organisations and individuals who spent their valuable time to share with us their experiences and views on the response. Without their accounts, we would not have been able to undertake this review or produce this report.

The content and findings of the report represent the evaluation team's point of view, and are not necessarily shared by ADH, its member agencies, and their partners.

Citation

This report should be cited as: Juillard H., Minnitt N. (2021). Independent Evaluation of the Aktion Deutschland Hilft joint appeal to the "Syrian refugee crisis". Bonn: ADH.

Executive summary

Introduction

In 2012, Aktion Deutschland Hilft e.V. (ADH) launched a joint appeal to support the crisis-affected population of Syria. Since then, humanitarian organisations have become increasingly concerned about the continuity of their aid to all affected persons in Syria.¹ This concern is not limited to Syria itself, but also neighbouring states.² Syria is one of four countries in the world with extreme access constraints for humanitarian assistance to reach crisis-affected populations. During the 2016 negotiations at the United Nations Security Council (UNSC), Resolution 2533 secured a border crossing into Idlib for humanitarian purposes. This resolution is set to end in July 2021. Its termination presents an imminent threat to humanitarian assistance, which depends on cross-border access.³ Neighbouring country Lebanon is also considered to have high access constraints.

The purpose of this evaluation, commissioned by ADH, was to determine the extent to which limited or no direct access to target groups at the local level has affected project and programme strategies in the Syria refugee crisis response. This evaluation focused on nine projects implemented in Syria and Lebanon by nine ADH-funded member organisations (MOs) and their implementing partners (IPs). Each project provided people affected by the Syrian refugee crisis with essential humanitarian aid, including WASH and medical services, shelter and vocational training. Without evaluating the activities and outcomes of the programmes themselves, this evaluation is entirely focused on drawing lessons learned based on each MO and IP's unique experiences on remote humanitarian management.

Methodology

The evaluation used a participatory and user-oriented approach to increase the likelihood that MOs and their IPs will take the resulting lessons learnt and recommendations forward to improve their programming. The evaluation objectives have been met through a qualitative and quantitative participatory approach, including an extensive desk review, semi-structured interviews with 26 key informants, 12 focus group discussions and an online survey with 22 respondents. All data was coded using a coding matrix in Excel.

Findings

The evaluation findings revolve around the two key evaluation questions: 1. What approaches, methods and strategies have been used by ADH MOs to expand or preserve access to target groups? 2. Given the access constraints, to what extent have ADH MOs been able to operate, across the project cycle, in an accountable and effective manner?

Approaches to expand or preserve access

Policies, programmes and processes

Being part of a **coordination group** is the most common strategy to gain humanitarian access through persuasion. Being part of a coordination group can help build trust among organisations, which in some instances resulted in organisations being able to help each other in gaining access to crisis-affected households. There was no consensus on the effectiveness of the Access Working Group (AWG).

¹ UNOCHA, "Syrian Arab Republic: Recent Developments in Northwest Syria Situation", June 2020, available [here](#).

² German Federal Foreign Office, "Humanitarian assistance for people in Syria and neighbouring countries", June 2020, available [here](#).

³ Alhaji, F. & Al-Lama, F., "The Dilemma of Humanitarian Aid in North-West Syria", June 2020, available [here](#).

Engaging with local authorities is a must when it comes to gaining access and authorisation to intervene. Depending on the areas of implementation, these authorities are more or less formal or internationally recognised. Yet all IPs mentioned actively coordinating with them to gain access. One of the reasons for the success of such engagement is the longevity of the relationships between the organisations and the local authorities. In two instances, key informants reported having to change implementation areas after refusing to favourably meet local authorities or camp management requests vis-à-vis targeting or bribes.

To negotiate with those who control access, being in a position to explain the **humanitarian principles** to which one adheres is pivotal. All focus groups were able to demonstrate how these principles should translate through programme design (e.g., transparency of targeting, targeting those in needs, etc.). Explaining and standing by these principles has successfully been used by MOs to refuse paying bribes to the local authorities. This is highlighted as the most sustainable approach by several organisations.

Building acceptance among community members was both a way to gain access and a way to mitigate security risks and therefore preserve access. Building acceptance among community members is also used by organisations to gain recognition. The strategies used by IPs to achieve this mostly stem from quality work and relevant interventions aimed at responding to households' needs.

Sharing roles and responsibilities is a popular strategy to gain or expand access. MOs relied on their IPs to receive approvals from local authorities. IPs have been active on the ground since before the ADH-funded response and as such have pre-existing relationships and anchorage that can be leveraged for the ADH project. IPs had decision-making power in various communication forums. This power gave IPs more confidence to communicate with their MOs as communication was structured around discussions, rather than relaying of information. Both MOs and IPs felt to have shared a common risk management approach. Organisations shared **staff recruitment strategies**, related to staff origin, language, gender and religion as a way to gain better access. The most effective trait is reportedly to come from the community itself, which stands true both in Lebanon and in Syria, and goes with language skills be it Arabic or Kurdish. Recruiting female staff was cited by most organisations to gain access to female household members.

The **effectiveness of targeting** is one of the strategies that raised the higher degree of disagreement between IPs and MOs. During KIs and FGD, challenges were highlighted as to the influence local authorities sometimes try to have on geographical targeting and even on household level targeting.

The **COVID-19 pandemic** added an extra layer to an already access-constrained environment. MOs and IPs already operating in an access constrained environment were well prepared to continue and adjust activities in time of COVID-19. For the most part, IPs could continue to access the affected population during the pandemic.

Innovative approaches

Technologies have been used to preserve access in time of COVID-19 and to adapt project management processes to remote settings. Projects have demonstrated agility to adjust to the changing contexts because of the (COVID-19) pandemic. The examples shared were however mostly limited to the digitalisation of MEAL activities. Although only mentioned once as a method to gain access, the use of cash and voucher assistance (CVA), as a modality for project delivery, can also be an option to gain or preserve access in volatile contexts.

Ability to operate in an accountable and effective manner

Adapting project management processes

MOs regularly monitored the evolution of the context using a variety of sources. **MOs were also agile enough to react and modify their working methods on the basis of changing access.** Adjustments were, however, mostly reactive (i.e., responding to the changes as they occurred) as opposed to preventive (i.e., anticipating changes in the context). Preventative adjustments could be supported by the use of social media and live maps. These sources, however, provide fragmented information. As such, it is always necessary to consult the security team, other humanitarian organisations and other sources of information to interpret the trends on social media and devise an appropriate preventative response.

MOs and IPs reported that the decisions are mostly made by those who are going to be affected by it, however, **localised decision-making appears to be more common in Syria.** Further, MOs, compared with IPs, perceived localised decision-making to be more common. MOs and their IPs feel that they share a common approach towards risk management and the partnership is viewed as collaborative by both parties. MOs and their partners have clear context-related triggers indicating when it is more effective and efficient to operate completely remotely. **In engaging in a dual implementation modality, some MOs have found that their capacity to monitor and respond to risks has increased (directly through the organization team and indirectly through the IP).** Flexibility of MOs and donors considering changes in the context is a crucial component to maintain access.

Capacity strengthening was not a priority or individual outcome in the projects under evaluation – this was because the IPs were well established organisations and there was limited funding available for capacity strengthening. That said, MOs aimed to strengthen IPs' capacity through various trainings and workshops, or through a role matching model (where staff in the MO office were matched with IP staff occupying the same position). The latter was considered more effective as it allowed MOs and IPs to develop a collaborative and open relationship, thus moving closer to a localisation strategy. Two training gaps: data protection and safeguarding training, and remote management training.

Risk mitigation measures

MOs used a range of comprehensive M&E tools and procedures to monitor the quality and effectiveness of their activities. All projects were monitored by the IP and MO, and a few projects included an additional layer of third-party monitoring. For some projects, third-party monitoring replaced MO field visits because of COVID-19 related access constraints. MOs and IPs were able to implement necessary changes in response to their monitoring data. There was a correlation between effective communication and the length of partnership, with some organisations enjoying multiple years of collaboration and understanding. That said, MOs and IPs are not comfortable with openly sharing project-related failures. MOs did not feel that the quality of their monitoring processes was impeded by access constraints, rather their methods to measure the quality of services required adjustment. Considering these adjustments, the evaluation found that the projects were consistently monitored and evaluated through a comprehensive set of procedures.

Strategies to deliver accountable assistance

While all IPs engaged with affected communities to conduct needs assessments or receive feedback, only a few IPs involved affected populations in the decision-making process. All projects used several entry points for complaints and feedback, including anonymous mechanisms. The success of a CFM was largely dependent on the length of time that these mechanisms have been available to the affected population, such that longer established mechanisms reported higher utilisation. This was mediated by the communities' level of trust with the organisation.

Conclusion

MOs and their IPs have been agile enough to navigate access barriers and creative in the strategies implemented to gain or preserve access. Working in an already constrained environment made MOs and their IPs better prepared to operate in the context of COVID-19 and ensure business continuity. The level of co-construction for projects and risk management strategies is noticeable. Yet, sporadic lack of trust around sharing failures or fear of losing control culminated during the evaluation.

Lessons learnt

Partnership with local organisations is an effective way to mitigate access constraints. The value of an indirect implementation model (i.e., partnership with a local NGO), compared with a direct implementation model, as a method to gain and expand access was a consistent theme throughout the evaluation. Donor flexibility and understanding the dynamics of the changing context was a key component to access. Therefore, when operating in a volatile context, funding agility is a must.

All projects required engagement with the local authorities. There should be clear rules of engagement with local authorities and strict principled projects are effective to sustainably gain access.

Although the humanitarian response is well coordinated, greater emphasis should be placed on the localisation of the response through indirect implementation models. As such, response localisation should not be perceived solely to gain access. Adopting a low stance attitude could be a way to mitigate risks of opportunistic targeting.

Recommendations

Operational recommendations for ADH MOs and IPs	
1.	Measure the level of community acceptance to better inform the acceptance building process (e.g., MOs and IPs could consider implementing perception surveys).
2.	Engage in regular refresher training on principled humanitarian action , especially as these principles may contradict one another in certain contexts, and it is important to know them well to be able to make acceptable trade-offs or identify red lines.
3.	Have clear rules of engagement with warring parties as conflict contexts often require civil-military coordination to gain and preserve access.
4.	Co-design clear red lines on acceptable levels of risk and monitor them.
5.	Invest in data protection and safeguarding to ensure that processes are clear and adhered to when it comes to data anonymisation and transfer.
6.	Make sure as many resources go into communicating with stakeholders locally as with donors and the public in Germany.
7.	Explore how technologies can be leveraged not only as part of M&E to collect data but also as an integral part of programming.
8.	Strengthen further remote management , which could explore opportunities for community-level actors to be included in the decision-making process.
Strategic recommendations for ADH MOs and IPs	
9.	Shift from an implementing partner mindset to a partnership mindset and finally to a network mindset.
10.	Build on the knowledge gained in operating in constrained environments to implement good practices during the COVID-19 pandemic (e.g., the use and value of an indirect implementation model).
11.	Explore the full potential of using cash as a mean to deliver assistance in an access constrained environment. Asking the question: “why not cash and if not when?” could be an additional way to explore access as well as work towards Grand Bargain commitments.
12.	Leverage the collective and ADH membership as an opportunity for horizontal learning; this could be to meet on an ad hoc basis to discuss either a specific theme or project cycle step.
13.	Advocate with donors for clear compliance requirements when it comes to engaging with warring parties.
Recommendations for ADH	
14.	Facilitate the conversation on the use of ADH-visibility across MOs. This discussion could serve to design an ADH checklist to support consistent and coordinated decision-making among MOs and IPs.
15.	Call for ADH lessons learned workshops , and it should be clear that the content shared will have no impact on funding.

ملخص تنفيذي

مقدمة

في عام ٢٠١٢ أطلقت (ADH) Aktion Deutschland Hilft e.V. نداءً مشتركًا لدعم السكان المتضررين من الأزمة في سوريا، ومنذ ذلك الحين أصبحت المنظمات الإنسانية قلقة بشكل متزايد بشأن استمرار تقديم مساعداتها لجميع المتضررين في سوريا.^١ لا يقتصر هذا القلق على سوريا نفسها، بل على دول الجوار أيضًا.^٢ سوريا هي واحدة من أربع دول في العالم تعاني من قيود شديدة على وصول المساعدات الإنسانية إلى السكان المتضررين من الأزمة، وقد قام القرار ٢٥٣٣ خلال مفاوضات عام ٢٠١٦ في مجلس الأمن بتأمين معبر حدودي إلى إدلب للأغراض الإنسانية، ومن المقرر أن ينتهي هذا القرار في يوليو/تموز ٢٠٢١ ويمثل إنهاء تهديدًا وشيخًا للمساعدات الإنسانية والتي تعتمد على الوصول عبر الحدود،^٣ كما يعتبر البلد المجاور لبنان من الدول التي بها قيود شديدة على الوصول.

كان الغرض من هذا التقييم بتكليف من ADH هو تحديد مدى تأثير استراتيجيات المشاريع والبرامج في الاستجابة لأزمة اللاجئين السوريين بالوصول المحدود أو بعدم الوصول المباشر إلى الفئات المستهدفة على المستوى المحلي، وقد قام هذا التقييم بالتركيز على تسعة مشاريع تم تنفيذها من قبل تسع منظمات أعضاء مموله من ADH وشركائهم المنفذين. كل مشروع قام بتزويد السكان المتضررين من أزمة اللاجئين السوريين بالمساعدات الإنسانية الأساسية، بما في ذلك المياه والصرف الصحي والنظافة الصحية والخدمات الطبية والمأوى والتدريب المهني، ويركز هذا التقييم بالكامل على استخلاص الدروس المستفادة بناءً على التجارب الفريدة لكل منظمة عضو وشريك منفذ في الإدارة الإنسانية عن بُعد، وذلك بدون تقييم أنشطة ونتائج البرامج نفسها.

المنهجية

استخدم التقييم نهجًا تشاركيًا وموجهًا للمستخدم لزيادة احتمالية أن تأخذ المنظمات الأعضاء وشركاؤها المنفذون الدروس المستفادة والتوصيات الناتجة لتحسين برامجهم، وقد تم تحقيق أهداف التقييم من خلال نهج تشاركي نوعي وكمي شمل مراجعة مكتبية واسعة، ومقابلات شخصية شبه منظمة مع ٢٦ مصدر معلومات رئيسي، و١٢ مناقشة جماعية مركزية، واستطلاعًا عبر الإنترنت مع ٢٢ مستجيب. وقد تم ترميز جميع البيانات باستخدام مصفوفة ترميز في برنامج إكسل (Excel).

النتائج

تدور نتائج التقييم حول سؤالين أساسيين للتقييم: ١. ما هي الأساليب والطرق والاستراتيجيات التي استخدمتها المنظمات الأعضاء في ADH لتوسيع الوصول إلى المجموعات المستهدفة أو المحافظة عليه؟ ٢. بالنظر إلى قيود الوصول، إلى أي مدى تمكنت المنظمات الأعضاء في ADH من العمل طوال دورة المشروع بطريقة فعالة وخاضعة للمساءلة؟

أساليب توسيع الوصول أو المحافظة عليه

السياسات والبرامج والعمليات

أن تكون جزءًا من مجموعة تنسيق هي الاستراتيجية الأكثر شيوعًا للوصول الإنساني من خلال الإقناع، ويمكن أن يساعد كونك جزءًا من مجموعة التنسيق في بناء الثقة بين المنظمات مما أدى في بعض الحالات إلى قدرة المنظمات على مساعدة بعضها البعض في الوصول إلى الأسر المتضررة من الأزمة، ولم يكن هناك توافق في الآراء بشأن فعالية مجموعة العمل الخاصة بالوصول.

ويعد التعامل مع السلطات المحلية أمرًا ضروريًا عندما يتعلق الأمر بالوصول والإذن بالتدخل. واعتمادًا على مناطق التنفيذ تكون هذه السلطات رسمية إلى حد ما أو معترف بها دوليًا، ومع ذلك ذكر جميع الشركاء المنفذون التنسيق

^١ مكتب الأمم المتحدة لتنسيق الشؤون الإنسانية، "التطورات الأخيرة للوضع في شمال غرب سوريا"، يونيو/حزيران ٢٠٢٠، متوفر على هذا [الرابط](#).

^٢ وزارة الخارجية الألمانية، "المساعدات الإنسانية للسكان في سوريا والدول المجاورة"، يونيو/حزيران ٢٠٢٠، متوفر على هذا [الرابط](#).

^٣ فاطمة الحاجي وفرح اللمع، "معضلة المساعدات الإنسانية في شمال غرب سوريا"، أكتوبر/تشرين الأول ٢٠٢٠، متوفر على هذا [الرابط](#).

النشط مع تلك السلطات كوسيلة للحصول على قابلية الوصول، وأحد أسباب نجاح هذا الارتباط هو طول عمر العلاقات بين المنظمات والسلطات المحلية، وفي حالتين أفادت مصادر المعلومات الرئيسية باضطرابهم لتغيير مناطق التنفيذ بعد رفض التعاطي بشكل إيجابي مع طلبات السلطات المحلية أو إدارة المخيم فيما يتعلق بالاستهداف أو الرشاوى.

للتفاوض مع أولئك الذين يتحكمون في الوصول يعتبر أمراً محورياً كون الشخص في وضع يمكنه من شرح المبادئ الإنسانية التي يلتزم بها، تمكنت جميع المناقشات الجماعية المركزة من إظهار كيف ينبغي ترجمة هذه المبادئ خلال تصميم البرنامج (على سبيل المثال: شفافية الاستهداف، واستهداف ذوي الحاجة وما إلى ذلك). وقد قامت المنظمات الأعضاء بشكل ناجح باستخدام شرح هذه المبادئ والالتزام بها لرفض دفع رشاوى للسلطات المحلية، وقد تم إبراز ذلك باعتباره النهج الأكثر استدامة من قبل العديد من المنظمات.

كان بناء القبول بين أفراد المجتمع وسيلة للوصول وكذلك طريقة للتخفيف من المخاطر الأمنية وبالتالي الحفاظ على قابلية الوصول. وتستخدم المنظمات أيضًا بناء القبول بين أفراد المجتمع للحصول على الاعتراف. الاستراتيجيات التي يستخدمها الشركاء المنفذون لتحقيق ذلك تتبع في الغالب من جودة العمل والتدخلات ذات الصلة التي تهدف إلى الاستجابة لاحتياجات الأسر.

تعد مشاركة الأدوار والمسؤوليات استراتيجية شائعة لكسب الوصول أو توسيعه، وقد اعتمدت المنظمات الأعضاء على شركائهم المنفذون لتلقي الموافقات من السلطات المحلية حيث كان الشركاء المنفذون نشطين على الأرض منذ ما قبل الاستجابة الممولة من ADH وبالتالي لديهم علاقات قائمة مسبقًا ورسو على الأرض يمكن الاستفادة منه لمشروع ADH. ويتمتع الشركاء المنفذون بسلطة اتخاذ القرار في مختلف منبديات الاتصال، وأعطت هذه القوة الشركاء المنفذون مزيدًا من الثقة في التواصل مع المنظمات الأعضاء حيث تم هيكلة الاتصال حول النقاش بدلاً من نقل المعلومات، وقد شعر كل من المنظمات الأعضاء والشركاء المنفذون أن لديهم نهجًا مشتركًا لإدارة المخاطر. وقد شاركت المنظمات استراتيجيات توظيف الموظفين المتعلقة بأصل الموظفين ولغتهم وجنسهم ودينهم كوسيلة للوصول بشكل أفضل، ومما ذكر أن السمة الأكثر فاعلية هي أن تأتي من المجتمع نفسه، وهو ما ينطبق على كل من لبنان وسوريا، ويتمشى مع المهارات اللغوية سواء كانت عربية أو كردية. وقد استشهدت معظم المنظمات بتعيين الموظفين الإناث كوسيلة للوصول إلى أفراد الأسرة الإناث.

تعد فعالية الاستهداف إحدى الاستراتيجيات التي أثارت درجة أعلى من الخلاف بين الشركاء المنفذون والمنظمات الأعضاء خلال المقابلات مع مصادر المعلومات الرئيسية والمناقشات الجماعية المركزة. وقد تم تسليط الضوء على التحديات فيما يتعلق بالتأثير الذي تحاول السلطات المحلية أن تمارسه أحيانًا على الاستهداف الجغرافي وحتى على الاستهداف على مستوى الأسرة.

أضافت جائحة كوفيد-19 طبقة إضافية إلى بيئة محدودة الوصول أصلاً. وقد كانت المنظمات الأعضاء والشركاء المنفذون الذين يعملون أصلاً في بيئة محدودة الوصول على استعداد جيد لمواصلة وتعديل الأنشطة في وقت جائحة كوفيد-19، وبالنسبة للأغلب تمكن الشركاء التنفيذيين من الاستمرار في الوصول إلى السكان المتضررين أثناء الجائحة.

مناهج مبتكرة

تم استخدام التقنيات التكنولوجية للحفاظ على الوصول في وقت جائحة كوفيد-19 ولتكييف عمليات إدارة المشروع مع وضع العمل عن بُعد. وقد أظهرت المشاريع مرونة في التكيف مع السياقات المتغيرة بسبب جائحة كوفيد-19، ومع ذلك اقتصرتم الأمثلة التي تمت مشاركتها في الغالب على رقمنة أنشطة المراقبة والتقييم. وعلى الرغم من ذكره مرة واحدة فقط كطريقة للوصول، فإن استخدام المساعدة النقدية والقسائم كطريقة لتسليم المشروع يمكن أن يكون أيضًا خيارًا لكسب الوصول أو الحفاظ عليه في سياقات متقلبة.

القدرة على العمل بطريقة فعالة وخاضعة للمساءلة

تكييف عمليات إدارة المشروع

رصدت المنظمات الأعضاء بانتظام تطور السياق باستخدام مجموعة متنوعة من المصادر، وقد كانت المنظمات الأعضاء أيضًا مرنة بما يكفي للرد وتعديل أساليب عملها على أساس تغيير قابلية الوصول. ومع ذلك كانت التعديلات تفاعلية في الغالب (أي الاستجابة للتغيرات عند حدوثها) بدلاً من الوقائية (أي توقع التغيرات في السياق)، ويمكن دعم التعديلات الوقائية من خلال استخدام وسائل التواصل الاجتماعي والخرائط الحية. ومع ذلك فإن هذه المصادر توفر معلومات مجزأة، وعلى هذا الأساس من الضروري دائمًا استشارة الفريق الأمني والمنظمات الإنسانية الأخرى ومصادر المعلومات الأخرى لتفسير الاتجاهات على وسائل التواصل الاجتماعي وابتكار استجابة وقائية مناسبة.

ذكرت المنظمات الأعضاء والشركاء المنفذون أن القرارات يتخذها في الغالب أولئك الذين سيتأثرون بها، ومع ذلك يبدو أن اتخاذ القرار على المستوى المحلي أكثر شيوعًا في سوريا. وعلاوة على ذلك، فإن المنظمات الأعضاء مقارنة مع

الشركاء المنفذين اعتبروا أن اتخاذ القرار المحلي أكثر شيوعًا. تشعر المنظمات الأعضاء والشركاء المنفذون التابعين لها أنهم يتشاركون في نهج مشترك تجاه إدارة المخاطر وأن الشراكة ينظر إليها على أنها تعاونية من قبل الطرفين. ولدى المنظمات وشركائها محددات واضحة متعلقة بالسياق تشير إلى متى يكون العمل عن بُعد أكثر فعالية وكفاءة. وقد وجدت بعض المنظمات الأعضاء أن قدرتها على رصد المخاطر والاستجابة لها قد ازدادت عند الانخراط في طريقة تنفيذ مزدوجة (مباشرة من خلال فريق المنظمة وغير مباشرة من خلال الشريك المنفذ). وتعد مرونة المنظمات الأعضاء والجهات المانحة التي تأخذ بعين الاعتبار التغييرات الحاصلة في السياق مكونًا حاسمًا للحفاظ على الوصول.

لم يكن تعزيز القدرات أولوية أو نتيجة فردية في المشاريع قيد التقييم - وذلك لأن الشركاء المنفذين كانوا منظمات راسخة وكان هناك تمويل محدود متاح لتعزيز القدرات. ومع ذلك، تهدف المنظمات الأعضاء إلى تعزيز قدرات الشركاء المنفذين من خلال العديد من الدورات التدريبية وورش العمل أو من خلال نموذج لمطابقة الوظائف (حيث تتم مطابقة الموظفين في مكتب المنظمات الأعضاء مع موظفي الشركاء المنفذين الذين يشغلون نفس المنصب)، وقد اعتبر نموذج مطابقة الوظائف أكثر فاعلية لأنه سمح للمنظمات الأعضاء والشركاء المنفذين بتطوير علاقة تعاونية ومفتوحة، وبالتالي الاقتراب من استراتيجية توطين العمل الإنساني، وقد تم التعرف على ثغرتين في التدريب: التدريب على حماية البيانات والصون، والتدريب على الإدارة عن بعد.

تدابير تخفيف المخاطر

استخدمت المنظمات الأعضاء مجموعة من أدوات وإجراءات الرصد والتقييم الشاملة لرصد جودة وفعالية أنشطتها. حيث تمت مراقبة جميع المشاريع من قبل الشركاء المنفذين والمنظمات الأعضاء، وتضمنت بعض المشاريع طبقة إضافية من مراقبة طرف ثالث، وبالنسبة لبعض المشاريع حلت المراقبة من طرف ثالث محل الزيارات الميدانية للمنظمات الأعضاء بسبب قيود الوصول المتعلقة بكوفيد-19. وقد تمكنت المنظمات الأعضاء والشركاء المنفذين من تنفيذ التغييرات الضرورية استجابةً لبيانات الرصد الخاصة بهم. وقد كان هناك ارتباط بين الاتصال الفعال وطول مدة الشراكة حيث تمتعت بعض المنظمات بسنوات متعددة من التعاون والتفاهم. ومع ذلك فإن المنظمات الأعضاء والشركاء المنفذين غير مرتاحين للمشاركة العلنية لحالات الفشل المتعلقة بالمشروع، ولم تشعر المنظمات الأعضاء أن جودة عمليات الرصد الخاصة بها قد أعاقتها قيود الوصول، بل كانت أساليبها لقياس جودة الخدمات هي التي تتطلب التعديل. وبالنظر إلى هذه التعديلات وجدّ التقييم أن المشاريع تم رصدها وتقييمها باستمرار من خلال مجموعة شاملة من الإجراءات.

استراتيجيات لتقديم مساعدة خاضعة للمساءلة

وبينما انخرط جميع الشركاء المنفذين مع المجتمعات المتأثرة لإجراء تقييمات للاحتياجات أو تلقي التعليقات، لم يُشرك سوى عدد قليل من الشركاء المنفذين السكان المتضررين في عملية صنع القرار. وقد استخدمت جميع المشاريع عدة مداخل للشكاوى وردود الفعل بما في ذلك الآليات ذات الطابع "مجهول المصدر"، وكان نجاح آليات تقديم الشكاوى والتعليقات يعتمد إلى حد كبير على طول الفترة الزمنية التي كانت فيها هذه الآليات متاحة للسكان المتضررين، حيث أظهرت الآليات المعمول بها لفترة أطول معدل استخدام أعلى. وقد عزز ذلك أيضاً مستوى ثقة المجتمعات بالمنظمة.

الاستنتاج

لقد كانت المنظمات الأعضاء وشركائهم المنفذين مرنين بما يكفي للتغلب على حواجز الوصول والإبداع في الاستراتيجيات المنفذة للحصول على قابلية الوصول أو الحفاظ عليها، وقد أدى العمل في بيئة محدودة الوصول أصلاً إلى جعل المنظمات الأعضاء وشركائهم المنفذين أكثر استعدادًا للعمل في سياق جائحة كوفيد-19 أو ضمان استمرارية مشاريعهم. ويمكن ملاحظة مستوى البناء المشترك للمشاريع واستراتيجيات إدارة المخاطر. ولكن، كان هناك مستوى من انعدام الثقة حول مشاركة الإخفاقات أو الخوف من فقدان السيطرة والتي كانت واضحة بشكل كبير أثناء التقييم.

الدروس المستفادة

الشراكة مع المنظمات المحلية هي وسيلة فعالة لتخفيف قيود الوصول. وكانت قيمة أسلوب التنفيذ غير المباشر (أي الشراكة مع منظمة غير حكومية محلية) مقارنة بأسلوب التنفيذ المباشر كطريقة للحصول على قابلية الوصول وتوسيعه سمةً ثابتةً طوال التقييم. وقد كانت مرونة المانحين وفهم ديناميكيات السياق المتغير مكونًا رئيسيًا لقابلية الوصول، لذلك عند العمل في سياق متقلب فإن مرونة التمويل أمر لا بد منه.

تطلبت جميع المشاريع التعامل مع السلطات المحلية. ويجب أن تكون هناك قواعد واضحة للتعامل مع السلطات المحلية وأن تكون المشاريع صارمة القواعد وفعالة للحصول على قابلية الوصول بشكل مستدام.

على الرغم من تنسيق الاستجابة الإنسانية بشكل جيد، إلا أنه ينبغي التركيز بشكل أكبر على توطين الاستجابة من خلال نماذج وأساليب التنفيذ غير المباشرة. على هذا النحو لا ينبغي النظر فقط إلى توطين الاستجابة للحصول على قابلية الوصول، فقد يكون تبني موقف منخفض الظهور وسيلة للتخفيف من مخاطر الاستهداف الانتهازي.

التوصيات التشغيلية للمنظمات الأعضاء في ADH والشركاء المنفذون	
١	قياس مستوى قبول المجتمع لإخبار عملية بناء القبول بشكل أفضل (على سبيل المثال يمكن أن تنظر المنظمات الأعضاء والشركاء المنفذين في تنفيذ استطلاعات معرفة التصور).
٢	الانخراط في تدريب تنشيطي منتظم حول العمل الإنساني القائم على المبادئ، خاصة وأن هذه المبادئ قد تتعارض مع بعضها البعض في سياقات معينة، ومن المهم معرفتها جيدًا حتى تتمكن من إجراء مقابضات مقبولة أو تحديد الخطوط الحمراء.
٣	امتلاك قواعد اشتباك واضحة مع الأطراف المتحاربة حيث تتطلب سياقات الصراع في كثير من الأحيان تنسيقًا مدنيًا عسكريًا لكسب قابلية الوصول والحفاظ عليها.
٤	المشاركة في تصميم خطوط حمراء واضحة بشأن المستويات المقبولة للمخاطر ومراقبتها.
٥	الاستثمار في حماية البيانات والصون لضمان وضوح العمليات والالتزام بها عندما يتعلق الأمر بإخفاء هوية البيانات ونقلها.
٦	التأكد من تخصيص الكثير من الموارد للتواصل مع أصحاب المصلحة محليًا كما هو الحال مع المانحين والجمهور في ألمانيا.
٧	استكشاف كيف يمكن الاستفادة من التقنيات ليس فقط كجزء من الرصد والتقييم لجمع البيانات، ولكن أيضًا كجزء لا يتجزأ من عمل البرامج.
٨	تعزيز المزيد من الإدارة عن بعد والتي يمكن أن تستكشف الفرص للجهات الفاعلة على مستوى المجتمع المحلي لإدراجها في عملية صنع القرار.
التوصيات الاستراتيجية للمنظمات الأعضاء في ADH والشركاء المنفذون	
٩	التحول من عقلية الشريك المنفذ إلى عقلية الشراكة وأخيرًا إلى عقلية الشبكة.
١٠	البناء على المعرفة المكتسبة في العمل في بيئات مقيدة لتنفيذ الممارسات الجيدة أثناء جائحة كوفيد-١٩(على سبيل المثال استخدام وقيمة نموذج التنفيذ غير المباشر).
١١	استكشاف الإمكانيات الكاملة لاستخدام النقد كوسيلة لتقديم المساعدة في بيئة محدودة الوصول. طرح السؤال: "لماذا ليس نقدًا وإذا لم يكن كذلك فمتى؟" يمكن أن تكون طريقة إضافية لاستكشاف الوصول وكذلك العمل على تحقيق التزامات اتفاقية الجراندي بارغن (Grand Bargain).
١٢	الاستفادة من العضوية الجماعية وعضوية ADH كفرصة للتعلم الأفقي، يمكن أن يكون ذلك بالاجتماع على أساس مخصص لمناقشة إما موضوع معين أو إحدى خطوات دورة المشروع.
١٣	دعوة الجهات المانحة للحصول على متطلبات امتثال واضحة عندما يتعلق الأمر بالتعامل مع الأطراف المتحاربة.
توصيات لـ ADH	
١٤	تسهيل المحادثة حول استخدام الوضوح الدعائي لـ ADH عبر المنظمات الأعضاء، يمكن أن تفيد هذه المناقشة في تصميم قائمة تحقق لـ ADH لدعم اتخاذ القرار المتسق والمنسق بين المنظمات الأعضاء والشركاء المنفذين.
١٥	الدعوة إلى ورش عمل للدروس المستفادة لـ ADH، ويجب أن يكون واضحًا أن المحتوى الذي تتم مشاركته لن يكون له أي تأثير على التمويل.

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List of acronyms

ACT	action medeor
ADH	Aktion Deutschland Hilft e.V.
ANO	arche noVa – Initiative für Menschen
AWG	Access Working Group
AWO	Arbeiterwohlfahrt International
Care	CARE Deutschland
CB	Capacity Building
CFM	Complaint and Feedback Mechanisms
CHS	Core Humanitarian Standard on Quality and Accountability
CVA	Cash and Voucher Assistance
DSV	Deutsch-Syrischer Verein
EPDC	St. Ephrem Patriarchal Development Committee
FAM	Feedback and Complaint Mechanism
FGD	Focus Group Discussions
GDPR	General Data Protection Regulation
GFFO	German Federal Foreign Office
GIS	Geographic Information Systems
GoS	Government of Syria
HD	Centre for Humanitarian Dialogue
Help	Help – Hilfe zur Selbsthilfe
HIHFAD	Hand in Hand for Aid and Development
IDP	Internally Displaced Persons
IP	Implementing Partner / Subgrantee
IRD	Islamic Relief Deutschland e.V.
IYD	Uluslararası İnsani Yardım Derneği/ Humanitarian Relief Association
JUH	Johanniter-Unfall-Hilfe e.V.
KAC	Key Aid Consulting
KEQ	Key Evaluation Question
KI	Key Informant
KII	Key Informant Interview
MAL	Malteser International
MF	Maram Foundation
MO	Member Organisation
NES	Northeast Syria
NWS	Northwest Syria
OCA	Organisational Capacity Assessment
OCHA	Office for the Coordination of Humanitarian Affairs
SOP	Standard Operating Procedures
ToR	Terms of Reference
TPM	Third Party Monitoring
UNSC	United Nations Security Council
WASH	Water, Sanitation and Hygiene
WVD	World Vision Deutschland e.V.

I. Introduction

I.1. The Syrian crisis

Context and needs

With the Syrian crisis entering its eleventh year, 5.5 million people have fled Syria, finding refuge in neighbouring countries, mostly in Turkey (3.6 million), Lebanon (800,000), Jordan (600,000) and Iraq (240,000).⁴ The protracted conflict has led to a myriad of challenges for people living in Syria and the bordering states. The current socio-economic situation, however, presents some of the most challenging humanitarian conditions experienced since the start of the conflict, with nearly 90% of the Syrian population in need of humanitarian assistance.⁵ Lebanon is also facing a severe economic crisis, with an estimated 1.6 million people facing multiple deprivations.⁶

In light of the COVID-19 pandemic (and the Beirut explosion on 4 August 2020), Syria and Lebanon have experienced a severe economic downturn, which has profoundly impacted the well-being of a significant proportion of the population (e.g., erosion of economic opportunities, shortage of goods and services, high levels of inflation, and a deterioration of household coping mechanisms).⁷ In 2020, food prices increased by 251% in Syria and by 300% in Lebanon.⁸ This led to a serious deterioration of key household food security indicators and a dramatic decline in the purchasing power of Syrian and Lebanese households.⁹

In 2020, the volume of humanitarian assistance directed to Syria had reduced for the second year in a row, decreasing by USD 182 million to USD 2.3 billion, i.e., a 7% drop. This meant that, for the first time since the start of the Syrian crisis, the country was no longer the largest recipient of international humanitarian assistance and yet, despite coming second, the Syria crisis remains underfunded, with only 31% of humanitarian needs and 22% of COVID-19 related needs met in 2020. Similarly, humanitarian assistance did not meet the level of need in Lebanon, with only 11% of humanitarian needs and 10% of COVID-19 related needs met in 2020.¹⁰ Humanitarian assistance received in Syria and Lebanon, during the COVID-19 pandemic, did not match the level of commitment pledged by the international humanitarian community, largely due to access constraints.¹¹

Humanitarian access constraints

Humanitarian organisations are concerned about the continuity of their aid to all affected persons in Syria.¹² This concern is not limited to Syria itself, but to neighbouring states as well.¹³ Syria is one of four countries in the world with **extreme access constraints** for humanitarian assistance to reach crisis-affected populations.

⁴ 3RP Syria Crisis, "Regional Strategic Overview 2021 – 2022", December 2020.

⁵ OCHA, "Global Humanitarian Overview 2021 - Syria", February 2021.

⁶ UNICEF, "Lebanon Situation Report 2021", March 2021, available [here](#).

⁷ OCHA & WFP, "Syrian Arab Republic: Covid-19", April 2021.

⁸ UNICEF, "Lebanon Situation Report 2021", March 2021, available [here](#); WFP, "Syria Country Brief – December 2020".

⁹ WFP, "Syria Country Brief – December 2020".

¹⁰ Development Initiatives, "Global Humanitarian Assistance Report", 2020, available [here](#).

¹¹ UNOCHA, "Syrian Arab Republic: Recent Developments in Northwest Syria Situation", June 2020, available [here](#).

¹² UNOCHA, "Syrian Arab Republic: Recent Developments in Northwest Syria Situation", June 2020, available [here](#).

¹³ German Federal Foreign Office, "Humanitarian assistance for people in Syria and neighbouring countries", June 2020, available [here](#).

These constraints are mainly due to a denial of the existence of humanitarian needs, restriction of movement within Syria (e.g., checkpoints belonging to different armed groups), interference with humanitarian activities (i.e., bureaucratic and logistical constraints), violence against personnel, facilities, and assets, and ongoing insecurity and physical constraints in the environment. Some government-held areas in northwest (NWS) and northeast Syria (NES) remain completely inaccessible to humanitarian organisations.¹⁴

As the first case of COVID-19 was confirmed in Syria in March 2020, the UN Security Council voted to close a critical crossing point for humanitarian aid between Turkey and Syria in an effort to contain the spread of the virus. As a result of the pandemic, by the third quarter of 2020, 31,000 refugees had spontaneously returned to Syria.¹⁵ In a recent press release from February 2021, more than thirteen humanitarian organisations stressed that reduced humanitarian access as a result of the COVID-19 pandemic has impeded their humanitarian response and led to a shortage of aid.¹⁶

Lebanon is also considered to have **high access constraints** for humanitarian assistance to reach crisis-affected populations, mainly due to the presence of landmines, improvised explosive devices, explosive remnants of war, and unexploded ordnance. Since May 2015, the government of Lebanon has suspended new registrations of Syrian refugees, and as a result, undocumented refugees have received limited humanitarian assistance and faced additional barriers as a result of their lack of registration.¹⁷ Humanitarian organisations operating in Lebanon also experienced operation impediments due to logistic constraints related to the COVID-19 pandemic (such as restricted travel) and the economic crisis. The economic crisis has led to a depreciation of the Lebanese pound (be it with regards to Cash and Voucher Assistance (CVA) or not) and this depreciation in turn has led to an erosion of cash recipients' purchasing power when receiving assistance in local currency (as some organisations distribute assistance in USD).¹⁸

Areas of control

To understand the humanitarian access constraints in Syria, it is necessary to identify the areas of control (see Figure 1: Areas of control in Syria and Lebanon). Syria is divided into three distinct areas of control: the government-controlled area (in red); NWS where Turkish-backed rebel forces are present (green); and NES controlled by Kurdish forces (in yellow). Recent years have seen an escalation of the conflict in northern Syria, namely Idlib (in darker green).¹⁹ In Lebanon, there is a large variance in operations across camps (e.g., Palestinian camps and Syrian camps) and between the Hezbollah-controlled area in the South (in striped red) and the Lebanese-controlled area, which similarly imposes varying access constraints.

¹⁴ ACAPS, "Humanitarian Access Overview", December 2020.

¹⁵ World Population Review, "Syria Population 2021", February 2021.

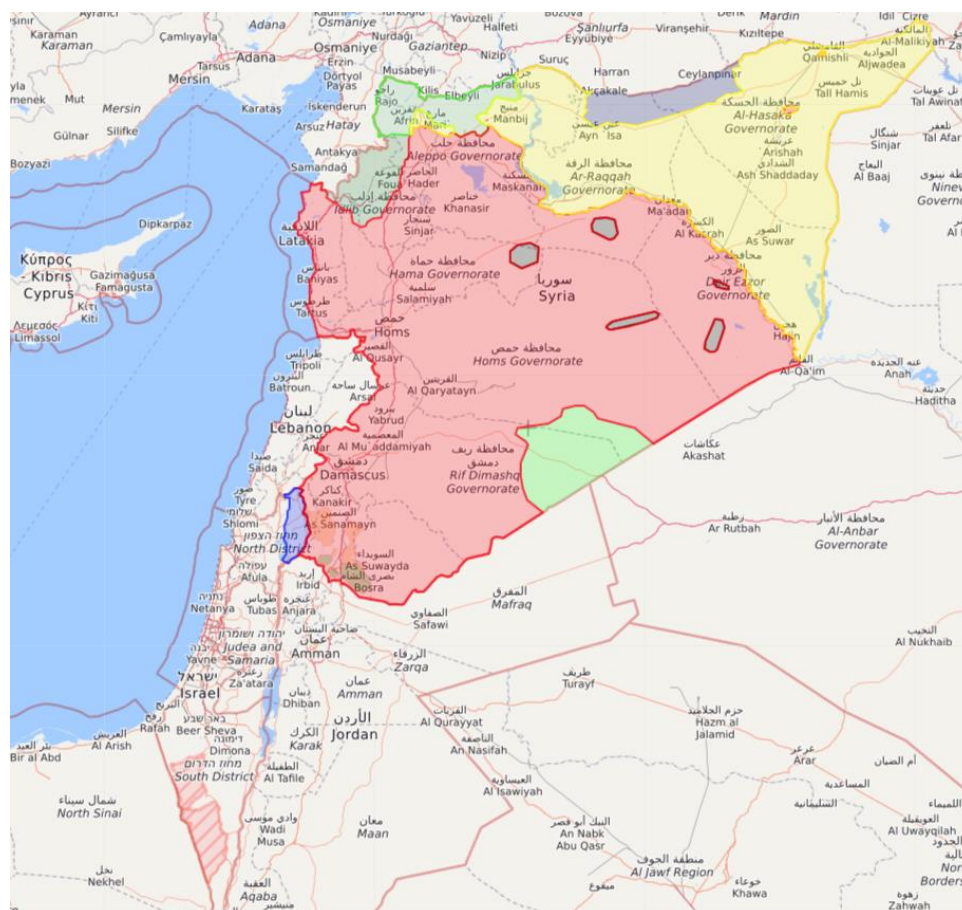
¹⁶ CARE Deutschland et al., "NGOs warn: Reduced humanitarian access impedes response to rising cases of COVID-19 and the harsh effects of winter in Northern Syria amid shortages of humanitarian aid", January 2021, available [here](#).

¹⁷ ACAPS, "Humanitarian Access Overview", December 2020.

¹⁸ ACAPS, "Humanitarian Access Overview", December 2020.

¹⁹ Alhaji, F. & Al-Lama, F., "The Dilemma of Humanitarian Aid in North-West Syria", June 2020, available [here](#).

Figure 1: Areas of control in Syria and Lebanon²⁰



As a result of the 2016 negotiations at the United Nations Security Council (UNSC), **Resolution 2533** secured a border crossing into Idlib for humanitarian purposes. This resolution is set to end in July 2021. The termination of the latter presents an imminent threat to humanitarian assistance, which depends on cross-border access.²¹

1.2. Joint appeal to the “Syrian Refugee Crisis”

In 2012 Aktion Deutschland Hilft e.V. (ADH) launched a joint appeal to support the crisis-affected population of Syria. Since then, over € 18 million have been raised for the appeal’s humanitarian response. This evaluation engaged with nine ADH member organisations (MOs)²² who work hand-in-hand with 11 local implementing partners (IPs)²³ to support internally displaced persons (IDP) in Syria and refugees in neighbouring countries.²⁴

²⁰ Liveumaps on 22 May 2021, available [here](#).

²¹ Alhaji, F. & Al-Lama, F, “The Dilemma of Humanitarian Aid in North-West Syria”, June 2020, available [here](#).

²² action medeor (ACT), arche noVa – Initiative für Menschen (ANO), Arbeiterwohlfahrt International (AWO), CARE Deutschland (CAR), Help – Hilfe zur Selbsthilfe (HEL), Islamic Relief Deutschland e.V. (IRD), Johanniter-Unfall-Hilfe e.V. (JUH), Malteser International (MAL), and World Vision Deutschland e.V. (WVD).

²³ Orient for Human Relief, Bonyon (Orient), Mousawat, Violet, Shafak, St. Ephrem Patriarchal Development Committee (EPCD), Deutsch-Syrischer Verein (DSV), Naba’a, Hand in Hand for Aid and Development (HIHFAD), Maram Foundation for Relief and Development (MF), and Uluslararası İnsani Yardım Derneği/ Humanitarian Relief Association (IYD).

²⁴ ADH, “Terms of Reference Syria Joint Response”, February 2021.

In Syria, MOs provide crisis-affected households with basic goods and services, rebuild basic health stations, distribute medication, train children and adults in health, safety and shelter issues. In bordering states (Jordan, Lebanon, and Iraq), MOs provide Syrian families with safe housing, supply packages with essential goods, care and educational facilities for children and young people, trauma support, and training for medical staff.²⁵

II. Evaluation purpose and objectives

ADH contracted Key Aid Consulting (KAC) to evaluate the extent to which **limited or no direct access to target groups** at the local level has affected project and programme strategies in the Syria refugee crisis response. The remote evaluation has identified successful approaches, lessons learnt and best remote management practices to address the most critical needs of vulnerable people in Syria. The evaluation furthermore drew recommendations to better support the planning of future programmes and projects.

The evaluation addressed two Key Evaluation Questions (KEQs) centred on effectiveness and efficiency of approaches:

- KEQ 1: What **approaches, methods and strategies** have been used by ADH MOs to expand or preserve access to target groups?
- KEQ 2: Given the access constraints, to what extent have ADH MOs been able to **operate, across the project cycle**, in an accountable and effective manner?

The evaluation matrix was structured around these two KEQs and their respective sub-questions. The evaluation questions are informed by indicators (i.e., hypothesis to verify) (see Annex 1: Evaluation Matrix). The evaluation selected nine MOs and looked at one project per MO involved in the ADH-funded joint appeal (see a list of all participating MOs under Annex 2: Participating ADH Member Organisations).

The evaluation did not aim to evaluate each project individually but rather to identify common trends, challenges as well as to display innovative practices and approaches that could be replicated in contexts where access is constrained. The scope of the evaluation focused on the programme providing support to Syrian crisis-affected households implemented in Syria and in Lebanon for the period running from January 2020 to March 2021.

III. Methodology

The evaluation used a participatory and user-oriented approach to increase the likelihood that ADH and its MOs will take the resulting recommendations forward to improve programming. This remote evaluation began on with a briefing call with the evaluation review committee and KAC, followed by an in-depth briefing with the evaluation review committee, KAC and the nine participating MOs.

²⁵ ADH, "Emergency aid Syria", Available [here](#).

Next, the evaluation team developed an inception report including a draft evaluation matrix that was informed by the KEQs and literature on access constraints in the humanitarian sector.²⁶ The evaluation review committee provided feedback on said report that was integrated into its final version.

While the Core Humanitarian Standard on Quality and Accountability (CHS) and OECD DAC criterion were used to conceptualise and construct the evaluation matrix, the peculiarity of the evaluation subject (e.g., effectiveness of a programme is understood across the board whereas effectiveness of access can mean various things) favoured a tailored evaluation matrix. As such, the evaluators designed specific evaluation questions and indicators to best fit the KEQs.

The evaluation objectives were met through a qualitative and participatory approach relying on a variety of primary and secondary sources, including a structured desk review, remote key informant interviews (KIIs) with MOs and remote Focus Group Discussions (FGD) with IPs. The key informants (KIs) for the KIIs and the FGD were selected using purposive sampling to include those who were well positioned to provide relevant data and representation of the projects' activities and implementation process.

The analysis was disaggregated by country and by type of stakeholder (MO/IP) when relevant. As none of the evaluated projects were implemented in the government-controlled area of Syria, and as NWS and NES present similar access constraints (based on this criterion, constraints are neither homogenous nor distinct), they have not been consistently examined separately. The methodology steps are summarised below. The detailed methodology can be found in Annex 3: Detailed Methodology.

²⁶ The working hypothesis as to what strategies can be implemented to gain or sustain access are inspired from Rohwerder B. (2015) Restrictions on humanitarian access. GSDRC (available [here](#)) and the 2012 evaluation and review of humanitarian access strategies in DG ECHO funded interventions reports.

Table 1: Methodology

Inception Phase & Desk Review	Iterative Desk Review	Inception Report	
	Review of project related documents including proposals, SOPs, monitoring processes, risk assessment reports, partnership agreements, guidance documents etc.	Briefing with the evaluation management team A final inception report was produced including the methodology, timeframe and the evaluation matrix.	
Data Collection	Key Informant Interviews	Focus Group Discussion	Survey
	<ul style="list-style-type: none"> • ACT (1) • ANO (2) • AWO (1) • Care (3) • Help (1) • IRD (2) • JUH (1) • MAL (2) • WVD (4) 	<ul style="list-style-type: none"> • EPDC • MF • HIHFAD • IYD • Mousawat • Orient for Human Relief <ul style="list-style-type: none"> • Violet • Shafak • NABAA • CBRA • Bonyan • DSV 	<p>22 respondents:</p> <ul style="list-style-type: none"> • Syria (16) Lebanon (6) • MO (15) IP (7) • Female (8) Male (13)
	Total: 17 KIIs (including 26 informants), 12 FGDs, 22 survey respondents		
Final Report	<ul style="list-style-type: none"> • Data coding and analysis • First draft of the report: 28 May 2021 • Validation workshop: 16 June 2021 • Final report: 25 June 2021 		

Limitations

Availability of KIIs. Primary data collection overlapped with the month of Ramadan and as such, some KII and FGD participants were less responsive to the email invitations. As a result, data collection ran 10 days longer than expected to ensure that all MOs and their IPs had the opportunity to participate in the evaluation.

Subject sensitivity. The subject of the evaluation is considerably sensitive as local IPs might have engaged in precarious activities while carrying out their humanitarian activities (e.g., negotiating access with armed groups). It may be difficult for IPs to be fully transparent about the measures taken to gain, maintain or expand access. In addition, the evaluation took place remotely, which makes it challenging to build rapport with the KIIs. Given this, the strategies presented may lack granularity.

Relevance of evaluation questions. One of the projects under question ended before the COVID-19 pandemic, i.e., Islamic Relief Germany's project "Maintenance of the Health Care System in northern Syria" (04/2017 – 03/2020) and another as the pandemic was unfolding in Syria, i.e., HELP's "Humanitarian emergency aid through distribution of hygiene packages for the families in the IDP and Refugee camps in Ain Issa, Newroz, Roj, Mabrouka and Areesha in NES" (11/2018 – 06/2020). This impacted the evaluation as

the access barriers and mitigation strategies linked to the COVID-19 pandemic had, therefore, not been fully investigated for these 2 projects.

Consultation with crisis-affected households. The evaluation did not consult crisis-affected households, as a result, discussion around adequate services to beneficiaries is only reflected indirectly.²⁷

IV. Findings

The evaluation findings comprise two parts: 1. Approaches to expand or preserve access and 2. Ability to operate in an accountable and effective manner.

IV.1. Approaches to expand or preserve access

The following section, comprising two parts, focuses on KEQ 1: **What approaches, methods and strategies have been used by MOs and their IPs to expand or preserve access to target groups?** First, this section discusses the [strategies and approaches MOs and their IPs have implemented to expand and preserve access in Syria and Lebanon](#). Second, this section sheds light on the extent to which MOs and their IPs have been able to [leverage innovations and technologies to ensure access](#).

IV.1.1. Policies, programmes and processes²⁸

There is no single solution to gain or expand access that works across contexts. Constraints are different, as are stakeholders. It is however possible to articulate approaches to expand or preserve access around two main themes:²⁹ a) addressing access constraints at the source by persuading those who control said access to allow humanitarian activities in a given area and b) reduce security risks to be able to continue to provide assistance. These approaches are not mutually exclusive, on the contrary they are best used combined. Their relative degree of importance will not only depend on the context but also on the type of organisations involved. Based on the evaluation survey results, Figure 2 and Figure 3 below show the level of adherence towards different strategies to gain or preserve access in Syria and Lebanon. Similarly, Figure 4 and Figure 5 show the level of adherence for MOs and for IPs.

²⁷ As outlined in the ToR, the evaluation was strictly remote based. Consequently, it was not feasible to sample and engage with crisis-affected household without introducing sampling biases (i.e., include households with access to digital technologies).

²⁸ The working hypothesis as to what strategies can be implemented to gain or sustain access are inspired from Rohwerder B. (2015) Restrictions on humanitarian access. GSDRC <https://gsdrc.org/wp-content/uploads/2015/11/HDQ1297.pdf>.

²⁹ Steets J., Reichhold U. and Sagmeister E., 2012, Evaluation and review of humanitarian access strategies in DG ECHO funded interventions. Brussels: ECHO.

Figure 2: Strategies to gain access in Syria

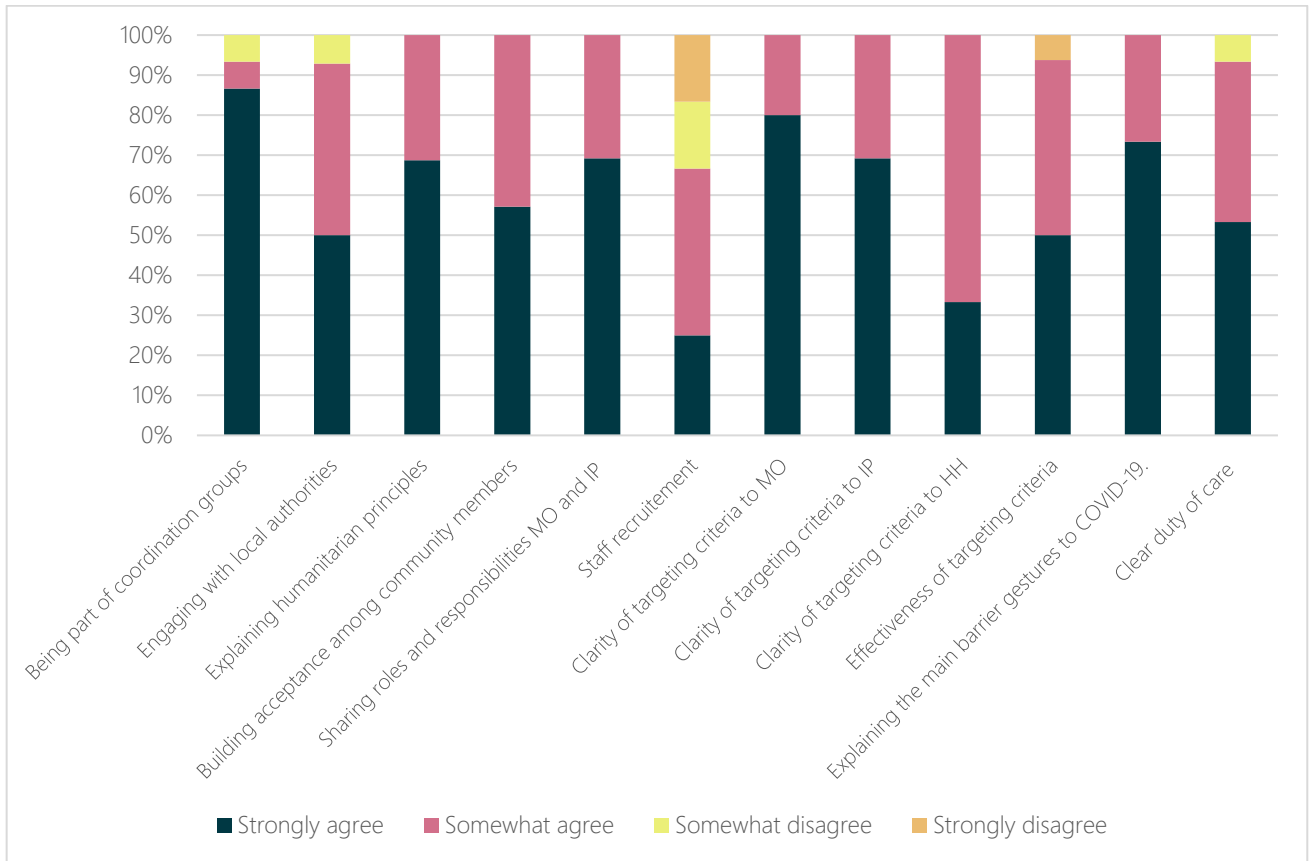
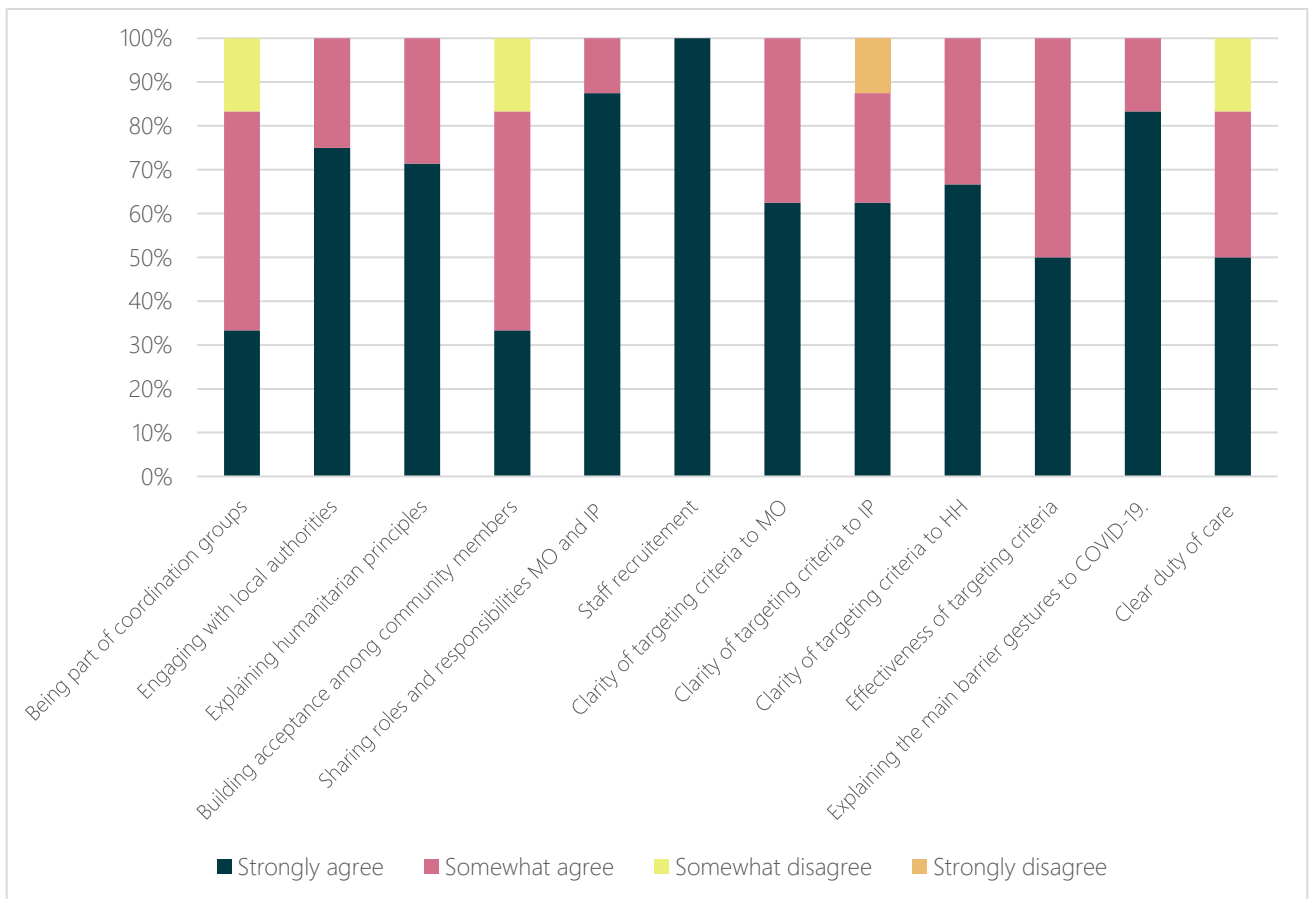


Figure 3: Strategies to gain access in Lebanon



What is interesting to note are the context-related differences, especially when it comes to being part of coordination groups, which 87% of respondents in Syria strongly agree upon as a strategy used to gain access against only 33% in Lebanon. Similarly, and quite counter intuitively, respondents in Syria seem to be less in agreement with the fact that their organisation recruit staff based on the potential access they can gain to a given area.

The distinction is however stronger comparing the perceptions of MO and IP staff as to which strategies are used to gain access. MO staff seems to have a more optimistic view of the overall effectiveness of targeting than IP staff. Unsurprisingly, recruitment strategies are rather used within IPs than MOs to gain or preserve access.

Figure 4: Strategies to gain access MO

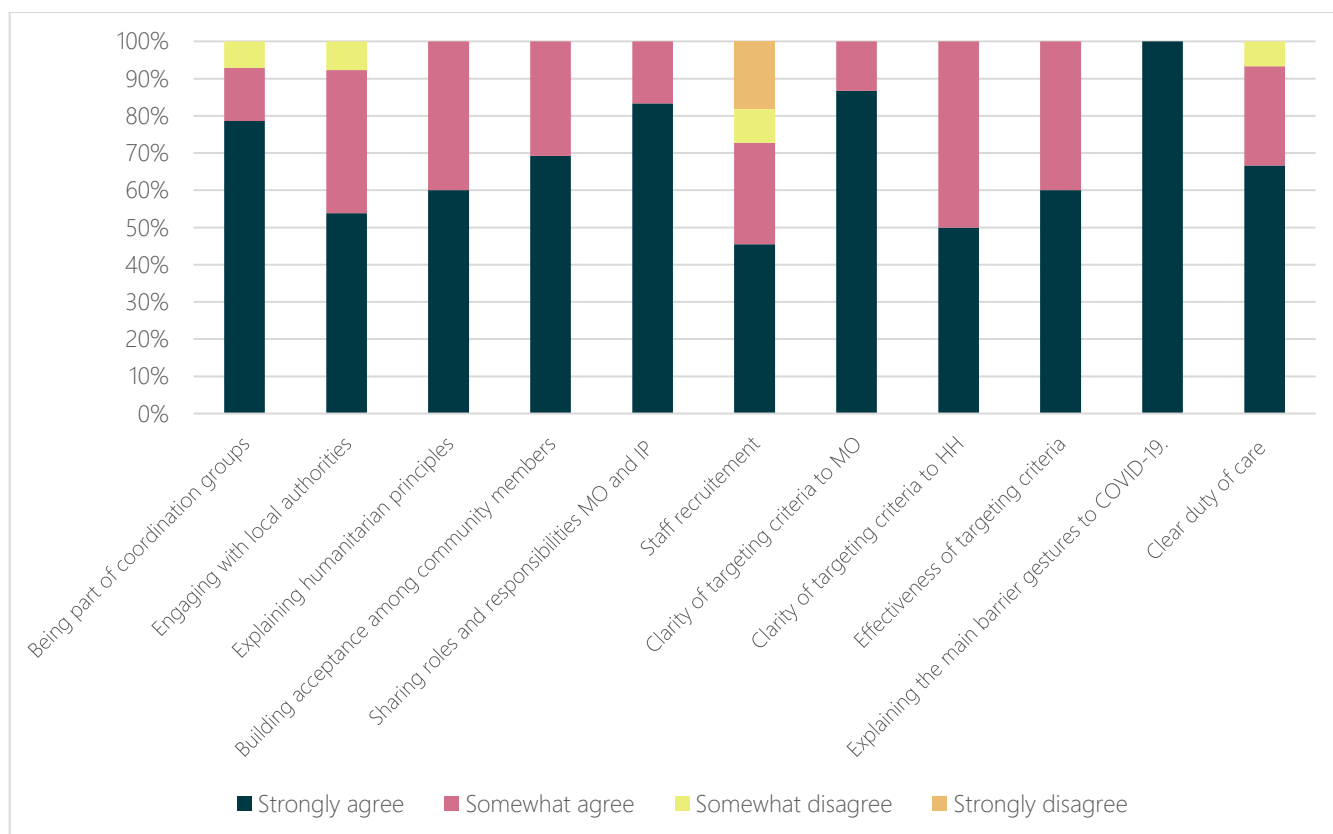
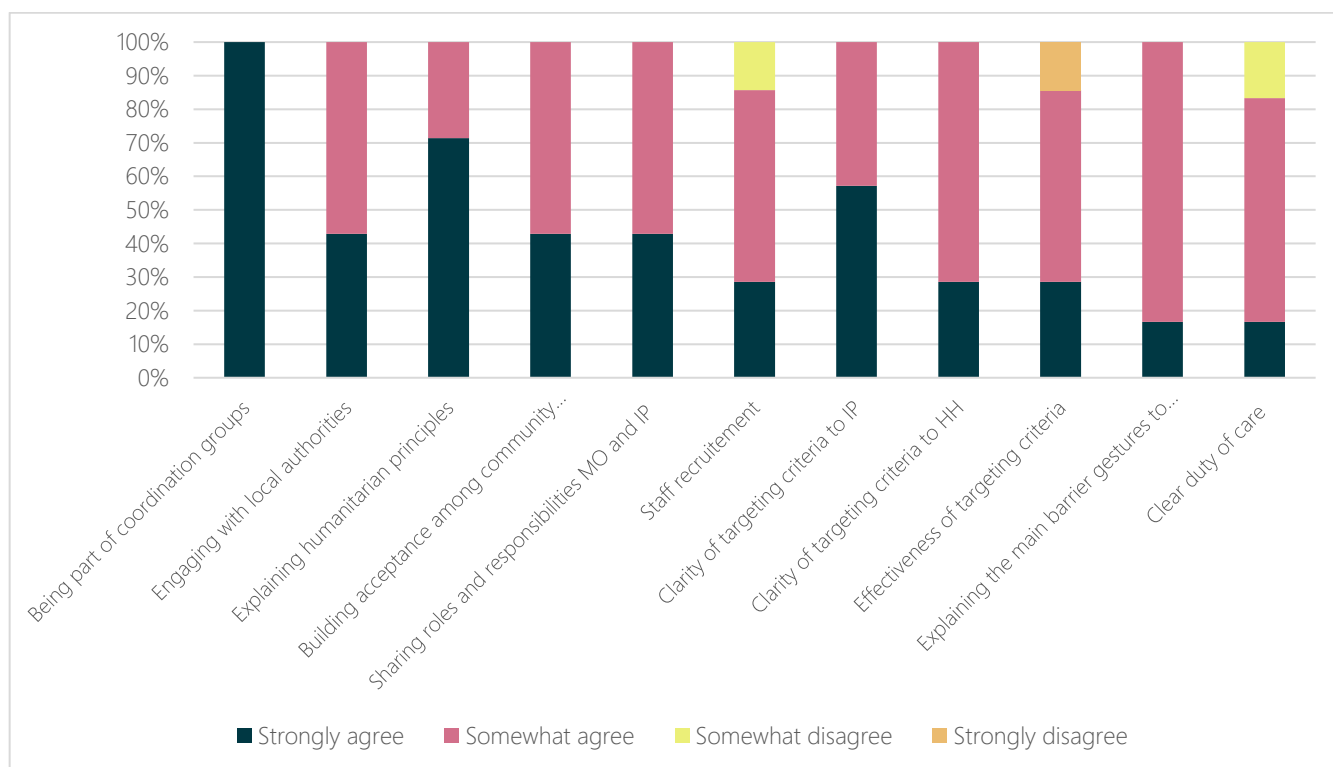


Figure 5: Strategies to gain access IP



Each of these strategies is examined in turn in the below subsection. The level of adherence is broken-down into four quarters: low degree of adherence (0 – 25%), medium degree of adherence (26 – 50%), high degree of adherence (51 – 75%) and very high degree of adherence (76 – 100%). The scales represent the percentage of survey respondents who strongly agree with the practice: where the difference is inconsistent MOs and IPs are represented separately, otherwise as a collated result.

IV.1.1.1. Persuading those who control access

Being part of coordination groups



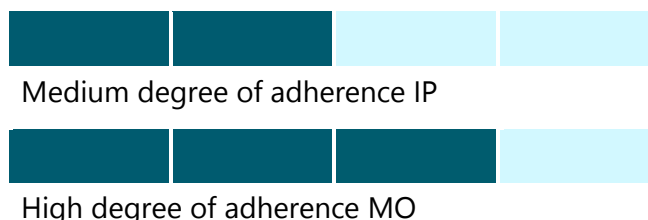
Country-level coordination for Lebanon operations takes place in Beirut while for Syria it is spread over three different coordination hubs: in Damascus, Amman and Gaziantep. Being part of coordination groups is the most adhered to strategy and the high level of adherence is consistent across Lebanon and Syria.³⁰ The effectiveness of this strategy is however debated by KIs.

Sectoral coordination groups such as the Water, Sanitation and Hygiene (WASH) or Health Clusters have consistently been highlighted as relevant places to share information, mostly about needs and gaps. They can however also be useful to share access-related information. Information shared in these clusters was more descriptive of access constraints than of the strategies implemented to gain such access. Being part of the same coordination group can also help build trust among organisations, which in some instances resulted in organisations being able to help each other gain access to crisis-affected households. For example, one MO reported being able to delegate some distributions to another MO in the Abu Khashab camp following an increase in access challenges to the camp.

³⁰ 87% and 83% of survey respondents respectively in Syria and Lebanon mentioned that they strongly agree with the statement: Your organisation is an active member of coordination groups.

In Gaziantep, UNOCHA, as per its mandate to facilitate humanitarian access, be it through public or private advocacy efforts,³¹ is chairing an Access Working Group (AGW). All interviewed MOs with a team in Gaziantep and operations in NWS are part of the AWG. However, perceptions about its effectiveness were quite mixed between informants. Two highlighted and praised the coordinated efforts undertaken by the AWG, the successes met in negotiating access as well as the usefulness of the information shared. On the other hand, two others highlighted the ineffectiveness of the group's efforts and even questioned the extent to which it was safe to share information within the group.

Engaging with local authorities



The figure shows medium level of adherence to this strategy for IPs. Ultimately when asked more broadly about frequency of engagement with those controlling access, 71% of IPs and 83% of MOs reported engaging frequently or very frequently. During interviews, two MOs flagged that engagement with local authorities was mostly undertaken by their IPs.³²

Engaging with local authorities is a must when it comes to gaining access and authorisation to intervene. Depending on the areas of implementation, these authorities are more or less formal or internationally recognised. Yet all IPs mentioned actively coordinating with them to gain access. One MO mentioned not being able to engage with local authorities - and specifically local councils - as a result of donor-imposed restrictions.

One of the reasons for the success of such engagement is the longevity of the relationships between the organisations and the local authorities. The Syria crisis is now entering its 11th year; hence crisis has become the norm. Both IPs and MOs have been working in the area for so long, they know who to engage with and how. As mentioned during a Focus Group: *"after ten years of war, things are clear and known to all NGOs and actors"*. Rules of engagement are formalised within some MOs. For example, one MOs' operational instruction 'International Safety and Security guidelines' specify that: *"Following only humanitarian principles, all interaction needs to be limited to enabling assistance and ensuring the security of team members and beneficiaries"*.

Informants however are not naïve and know that albeit the rules of engagement being known, this does not guarantee that they will be fair. Informants reported temporary barriers to access as a result of unmet requests for bribes, recruitment of authorities' relatives or disagreement on which areas to target. In two instances, KIs reported having to change implementation areas after refusing to favourably meet local authorities' or camp management's requests vis-à-vis targeting or bribes.

The type of engagement with local authorities also depends at which level they sit. In the Northeast for example, there are 3 layers of authorities: Kurdish administration at central level, Civil Councils at local level, and those holding ad hoc check points. As mentioned by a KI: *"The more you go local the more you have to deal with individual emotions."* This granular and tailored approach seem to be well navigated by IPs. This is however resource- and time-intensive as a result of the diversity and clustering of stakeholders. Negotiations can go as local as negotiating access to a given land with individual landowners to set up latrines.

³¹ UN, General Assembly Resolution 46/182.

³² The fact that, in the survey, MOs reported a higher degree of engagement with those controlling access can therefore seem surprising. It however does not change the fact that this strategy is largely implemented.

Two MOs highlighted that their IP signed a Memorandum of Understanding (MoU) with local authorities as well as camp management authorities, while others seem to coordinate more informally. The frequency of interaction also varied greatly depending on who controls access, with some IPs reporting that they engaged daily.

Cross-border operations require a high degree of engagement with local authorities in the implementation areas, as discussed above, but also in Turkey with the Turkish authorities. The degree of formality of the engagement fluctuates between bringing in supplies or personnel international staff are required to obtain a formal travel permit issued by the Turkish authorities, while sometimes supplies can be shipped in through the cluster. Cross-border operations were however strongly affected because of border closure in the aftermath of the COVID-19 pandemic. The upcoming expiration of the UN resolution on cross-border humanitarian assistance, in July 2021, could also have important effects on cross-border operations.

Engaging with local authorities also allowed organisations to gain access in time of COVID-19 induced lockdowns. This was for example the case for one IP, in Lebanon, who was able to get special permission from the Ministry to distribute hygiene kits.

Explaining humanitarian principles



High degree of adherence

To negotiate with those who control access, being in a position to explain the humanitarian principles to which one adheres is pivotal. The humanitarian principles of humanity, neutrality, and impartiality underpin acceptance and provide the basis for those who control access to tolerate the presence of humanitarian organisations.³³

One MO has, for example, formalised the fact that communications with all stakeholders should be “transparent to ensure [its] status as impartial, neutral and independent.” Another MO reported changing its implementation areas to a non-governmental controlled area to be able to adhere to the principle of impartiality.

There is a sense among MOs that there was a steep learning curve within IPs to get familiar with and operationalise the humanitarian principles, and two MOs mentioned that they delivered related training to their IPs on that topic.

While 100% of survey respondents from IP organisations were confident that their staff were capable of explaining the humanitarian principles they adhere to, when prompted about these during FGD, a few individuals only were able to formally articulate them. However, all focus groups were able to demonstrate how these principles should translate through programme design (e.g., transparency of targeting, targeting those in needs, etc.). These are the practical arguments IP use with local authorities as opposed to the principles themselves. MOs are holding their IP accountable vis-à-vis the adherence to these principles. For example, one MO integrates compliance to humanitarian principles as part of its monitoring.

Explaining and standing by these principles has also successfully been used by MOs to refuse paying bribes to the local authorities. This is highlighted as the most sustainable approach by several organisations.

³³ Egeland, J., Harmer, A., Stoddard, A. (2011). To Stay and Deliver: Good practice for humanitarians in complex security environments. UN OCHA, February.

IV.1.1.2. Mitigating risks

Building acceptance among community members



High degree of adherence MO



Medium degree of adherence IP

Building acceptance among community members is both a way to gain access and a way to mitigate security risks and therefore preserve access. As per the report of the Secretary General on the protection of civilians in armed conflict, it remains *“the best way to gain safe and sustained access to people in need”*.³⁴ As one MO explicitly states, community acceptance is a risk mitigation strategy.

IPs’ strategies to build acceptance mostly stem from quality work and relevant interventions meeting households needs. As one informant puts it: *“We work to build acceptance through quality implementation and by covering basic needs and meeting and responding to people’s needs and gaps”*. It is also a result of close communication with communities and community dialogue played a crucial role in building community acceptance. For one MO, effective information provision is formalised as a mean to build acceptance among community members. Another MO is sharing information and collecting feedback about its programme on social media as an effective way to build acceptance by being transparent and accountable.

Building acceptance among community members is also used by organisations to gain recognition and therefore access at community level to activities that may at first be perceived as culturally inappropriate such as sexual and reproductive health awareness-raising sessions. In Lebanon, a project headed workshops with authorities and parents before running activities targeting young women.

Sharing roles and responsibilities MO and IP



Very high degree of adherence MO



Medium degree of adherence IP

Sharing roles and responsibilities is a popular strategy to gain or expand access. This is notably the case when it comes to gaining access through approval from local authorities and acceptance from the local communities. MOs both in Lebanon and in Syria have highlighted relying on their IP to do so. This is demonstrated above with the very high degree of adherence to this strategy by MO respondents. That stand true both in Lebanon and Syria. MOs in Lebanon face restrictions to access Palestinian camps and therefore rely on their IPs to help get access approvals.

MOs have various degrees of involvement with their IP, some MOs retaining teams on the ground, while others oversee the project from Germany. All MOs have implemented at least one project activity indirectly (i.e., through a partnership model). Indirect implementation is clearly one of the main strategies used by MOs to gain consistent and sustainable access and support to the project areas. This is because IP staff are generally from the project area and are therefore less likely to be evacuated. One MO mentioned the possibility of “hybrid localisation”, i.e., seconding staff from the MO to the IP team.

³⁴ UN. (2012). Report of the Secretary-General on the protection of civilians in armed conflict. UN Security Council.

IPs have been active on the ground since before the ADH-funded response and as such have pre-existing relationships and anchorage that can be leveraged for the ADH project. For example, one IP has been working in the ADH project implementation area for more than 8 years. Furthermore, some MOs have chosen a low-profile approach and putting the work of their IP forward as a way to gain acceptance within the local community.

Staff recruitment



To navigate some of the bureaucratic obstacles to humanitarian access, such as visas or entry restrictions, MOs and IPs have both engaged in strategic reflexions as to how staff recruitment can serve to mitigate these obstacles. Staff recruitment is a sensitive topic as strategies to recruit team members with better access due to origin, religion or gender may be seen as conflicting with the principles of fair and transparent recruitment. Nevertheless, organisations have shared strategies based on staff origin, language, gender and religion as a way to gain better access.

The most effective trait is reportedly to come from the community itself, which stands true both in Lebanon and in Syria, and goes with language skills, be it Arabic or Kurdish. It increases acceptance, hence reduces risks but also limits the administrative burden to get travel authorisations or visas. This was cited by almost all organisations having teams on the ground.

Gender was an interesting staff characteristic. Quite traditionally, recruiting female staff was cited by most organisations as a way to gain access to female household members. But recruiting female managers was also mentioned as a way to limit the risks of corruption, not because women would be more upright than their male colleagues but simply because they would be less invited for tea, hence less exposed to inappropriate requests. Also, in both North and East Syria, male staff movements were restricted because of the risks of compulsory conscription. Recruiting female staff and male staff over 40 was adopted as a risk mitigation strategy.

Finally, belonging to a religious group was cited once, as a way to gain access. The Christian community reportedly has a good reputation over all of Syria, which in turn has helped its representatives gain access in all areas.

Clarity of targeting criteria to MO



Clarity of targeting criteria to IP



Clarity of targeting criteria to HH



Effectiveness of targeting criteria

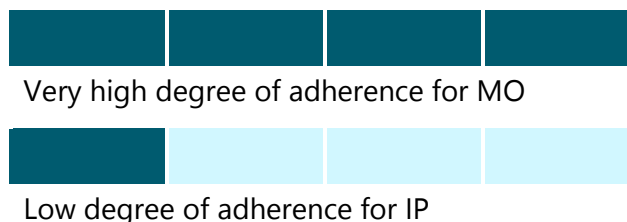


Most organisations reported using a variety of targeting methods (e.g., community-based, score cards) in their ADH-funded projects. Some organisations make their targeting criteria public as a way to ensure transparency. As displayed above, effectiveness of targeting is one of the strategies that raised the higher degree of disagreement between IPs and MOs. During KIIs and FGD, challenges were highlighted as to the influence local authorities sometimes try to have on geographical targeting and even on household level targeting. It therefore seems that at local level households who need it the most are the ones being targeted, but when it comes to geographical targeting, access will be a primary determinant.

IV.1.1.3. COVID-19 related measures

The COVID-19 pandemic added an extra layer to an already access-constrained environment. And while the previous access constraints touched upon accessing a given geographical area, the COVID-19 related ones touched upon interacting with others. Interactions between IPs and MOs were disrupted as a result of the pandemic but so were interactions with local authorities, other organisations as well as targeted households. The measures to preserve access in time of COVID-19 are obviously very different from the ones related to preserving access as a result of a volatile situation. Yet, as described in [Section IV.2](#), MOs and IPs already operating in an access constrained environment were definitely better prepared than others to continue and adjust activities in such a time.

Explaining COVID-19 main barrier gestures



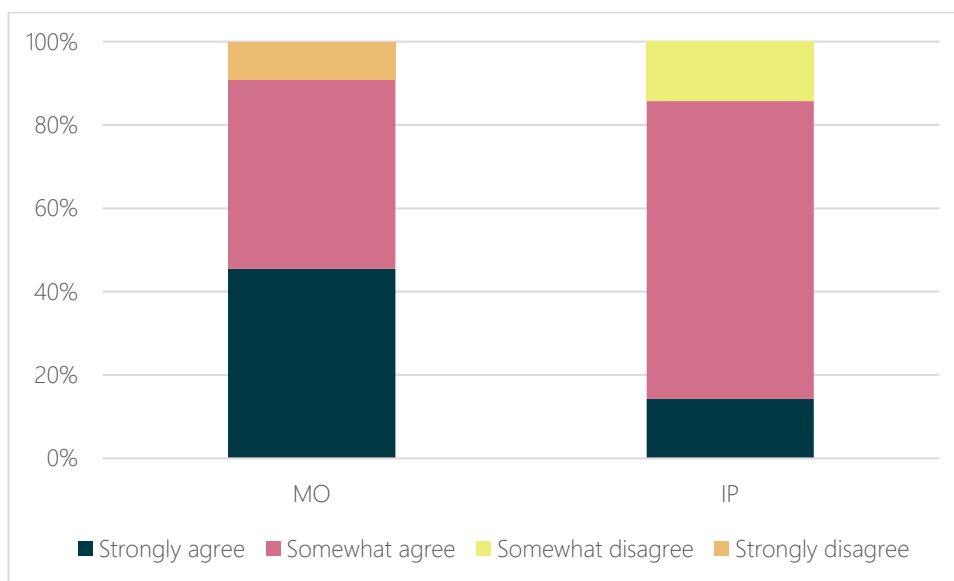
This strategy is the one that shows the greatest discrepancy between IPs and MOs. The high degree of adherence from MOs clearly came out in the interviewees and FGD where organisations explained having global guidelines on how to behave in time of COVID-19, notably adjusting procedures by increasing the number of distributions to avoid important gatherings. All 12 organisations responding to the survey furthermore mentioned having COVID-19 protocols in place.

IV.2. Innovative approaches

Technologies have been used to preserve access in time of COVID-19 and to adapt project management processes to remote settings. Technologies have also been used, albeit to a lesser extent, to preserve access in volatile contexts. Projects have demonstrated agility to adjust to the changing contexts as a result of the COVID-19 pandemic. The examples shared were however mostly limited to the digitalisation of MEAL activities.

When it comes to programming in access constrained environments, most organisations interviewed reported making use of technologies to support monitoring as well as complaints and feedback mechanisms. Feedback mechanisms were set using WhatsApp or Facebook. Monitoring was done using online surveys and Management Information Systems platforms. However, only one MO mentioned reinforcing the safety of its data management system as a result of working remotely. Capacity development initiatives have also migrated online, with remote and online trainings being used.

Figure 6: Your organisation makes use of technologies to expand or preserve access



Organisations have also been able to adjust their activities to constrained access in time of COVID. Messages in regard to hygiene promotion activities were shared through SMS both in Syria and in Lebanon. Furthermore, psychotherapists from one project were able to conduct online sessions and provide video sessions during the lockdown as a way to ensure the continuity of services.

The use of CVA, as a modality for project delivery, can also be an option to gain or preserve access in volatile contexts. CVA and more specifically the use of digital payment can equally serve to reduce crowding at distribution centres and deliver contactless aid. The COVID-19 pandemic has therefore seen, globally, an unprecedented scale-up of cash response.³⁵ The use of CVA was mentioned by only one MO as an innovative way to continue service delivery during the pandemic.

As per survey respondents, drawing learning from innovations happened regularly. However only a few specific examples, described below, were shared during the interviews. This is unsurprising considering the sensitivity of the topic. On the technical side, a few organisations mentioned the clusters as a platform where learning can be shared, but in a rather unsatisfactory manner as a result of limited time to do so and the multiple objectives of cluster meetings. One MO mentioned being part of the German WASH network and being there in a position to harness horizontal learnings, across organisations. At the start of the COVID-19 pandemic, another MO started an inter-regional exchange platform, which serves as an information-sharing and horizontal learning platform. This MO's IP does not, however, have access to this platform as it is reserved for internal learning and exchange within the MO.

³⁵ The State of the World of Cash, 2020, CaLP.

Figure 7: How often does your organisation document new and innovative approaches to expand or preserve access?

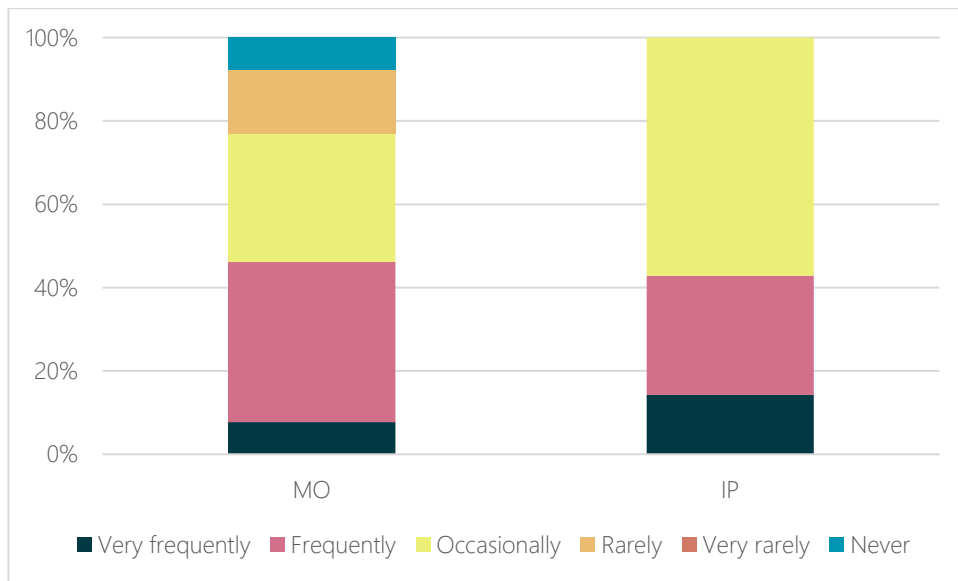
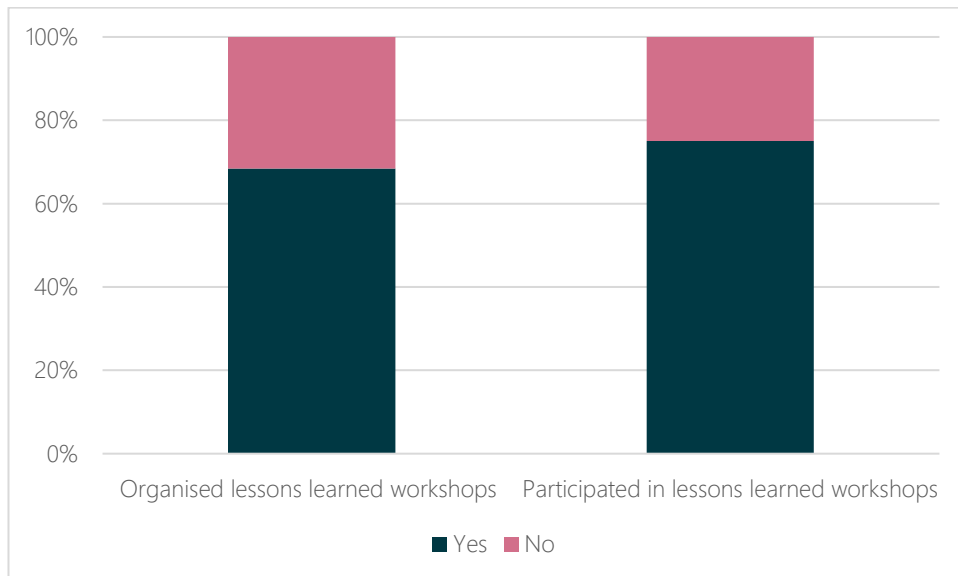


Figure 8: Lessons learned workshops to share innovative practices



IV.3. Ability to operate in an accountable and effective manner

The following section, comprising three parts, focuses on KEQ 2: **Given the access constraints, to what extent have MOs and their IPs been able to operate, across the project cycle, in an accountable and effective manner?** First, this section discusses MOs and their IPs' ability to effectively and efficiently [adapt their project management processes](#). Second, this section discusses the measures taken to [mitigate risks associated with remote management](#). Third, this section discusses the strategies implemented by IPs to [deliver accountable assistance and promote a culture of open collaborative communication](#) with their respective MOs.

IV.3.1. Adapting project management processes

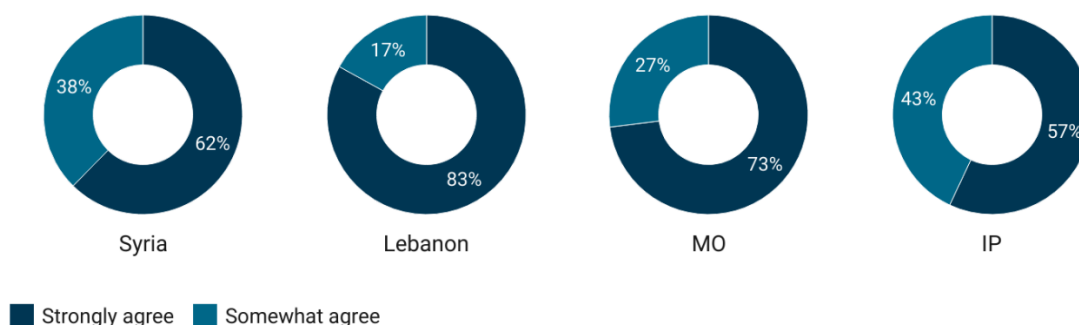
In this evaluation, an organisation's ability to adapt its project management processes effectively and efficiently to situations of constrained access focused on three components: 1. Practices of regularly monitoring the context and the agility to modify working methods on the basis of changing access. 2. The presence of collaborative decision-making between MOs, IPs and donors. This should be coupled with shared risk management approaches with clear triggers indicating when it would be more effective and efficient to suspend or move operations. 3. Training and capacity strengthening of IPs with regards to project management capabilities and adherence to humanitarian standards. Each component is discussed in turn.

IV.3.1.1. Regularly monitoring the evolution of the context

It is an undisputed fact that project contexts are unstable and regularly evolving, which required close monitoring and an ability to adapt project management processes. **All MOs regularly monitored the evolution of the context using a variety of sources. All MOs were also agile enough to react and modify their working methods based on changing access.** Adjustments were, however, mostly reactive (i.e., responding to the changes as they occurred) as opposed to preventive (i.e., anticipating changes in the context). Preventative adjustments could be supported using social media and live maps. These sources, however, provide fragmented information. As such, it is always necessary to consult the security team, other humanitarian organisations and other sources of information to interpret the trends on social media and devise an appropriate preventative response.

All interviewed organisations regularly monitored the evolution of the context, with regards to conflict dynamics (new offensive or outbreak of fighting), significant population movements, humanitarian access (besieged or hard to reach areas), incidence of diseases, and/or natural disaster (such as rapid onset of cold weather, flooding, etc.).

Figure 9: Your organisation regularly monitors the evolution of the program context³⁶



³⁶ Evaluation online survey

Sources of information

The evaluation found that all interviewed organisations consulted a variety of sources to stay informed on the evolution of the project's context. These sources were both internal and external. This allowed MOs to triangulate their sources and ensure that there were no information gaps. None of the KIs mentioned local authorities or communities as a source of information, neither did they mention newspapers or radio.

Internal sources

- **IP field team:** MOs largely depended on their IPs to provide regular information on changes in the context and to monitor the situation from the ground (e.g., movement of IDP). MOs found that these 'on-the-ground' sources provided a different view and often identified unique issues. One MO explained that the IP field team shared any rumours they heard in the camps. While most of the rumours were indeed just rumours, these helped to form a better understanding of the beneficiaries' beliefs. For example, the beneficiaries' comprehension and fears related to the COVID-19 pandemic, which helped steer the messaging of the hygiene promotion sessions.
- **MO security team:** MOs mentioned a designated internal focal point for security and management, who was responsible for conducting security assessments.

External sources: Humanitarian forums

- **Clusters:** Project activities were coordinated with the respective clusters (e.g., WASH, Shelter clusters). While these sectoral clusters do not have a specific mandate regarding access, any information about changes in the overall working/political conditions, which could impact the implementation of project activities (e.g., security, new military operations, evictions, duplication of activities etc.) were discussed, when necessary, with cluster members. While the AWG – managed by the Office for the Coordination of Humanitarian Affairs (OCHA) – has a specific mandate related to access, this group served as an information sharing body and did not provide specific project-related recommendations in response to access changes.
- **Security alerts:** The International NGO Security Organisation (INSO) provided flash alerts on the occurrence, or anticipation, of an incident requiring operational response, via e-mail, SMS or VHF on the exact time, place, and anticipated nature of the incident in Syria. This was also accompanied by a recommended response plan, and an "all clear" notice once the threat was no longer imminent.
- **Situation reports:** Throughout the projects, MOs reviewed OCHA situation reports to monitor the changing contexts, mainly changes in needs of the target population. OCHA also provided Geographic Information Systems (GIS) maps identifying locations in Syria that are hard-to-reach or besieged, which one MO found useful to anticipate access challenges and implement appropriate mitigation measures.³⁷ INSO also provided weekly situation reports and weekly safety meetings with NGOs, which served as an information sharing and coordination discussion.³⁸ One MO mentioned that despite using INSOs services actively, the value of these weekly reports decreases as the dynamics of the context increase, such that a weekly update is often not timely enough.
- **Forums and committees:** MOs and IPs in Syria are also connected to the NWS NGO Forum, the NES Forum (managed by Mercy Corps), and the Syrian NGO Alliance (based in Gaziantep for NGOs working in the NWS and Turkey). Five organisations (Islamic Relief Turkey, Care, MAL, WVD and HIHFAD) are active members of these forums and coalitions, which were considered key platforms for information exchange and coordination between actors operating in both NWS and NES. Further, through these platforms, IPs were able to gain access and increase their reachability, as well

³⁷ OCHA, "Syrian Arab Republic: Overview of hard-to-reach and besieged locations", October 2018, available [here](#).

³⁸ INSO, "INSO services", available [here](#).

as to share lessons and exchange best practices amongst each other. In Lebanon MOs and IPs were also connected to non-governmental forums and committees, and networks working together and exchanging information on camps and Syrian refugees, such as the Lebanon Humanitarian INGO Forum.

External sources: social media and collaborative platforms

- **Social media:** For one MO, Twitter was an effective method to monitor evolutions in the context, as many individuals use social media to provide fragmented pieces of information. This MO found Twitter useful in anticipating the 2018 Turkish invasion inside Syria, as they saw several videos and pictures of concrete blocks being removed at the border walls, which was interpreted as a green light for armed vehicles to pass through.
- **Liveuamap:** Recent advancements in GIS³⁹ technology include open-source tools, such as Live Universal Awareness Map (Liveuamap), a global news and information sharing site that uses a map-centric approach to collect information from various sources (e.g., Facebook, Telegram, Twitter) on a given geography. Liveuamap covers 30 contexts including [Syria](#) and [Lebanon](#). The use of Liveuamap was only mentioned by one MO, however this tool has been used by other humanitarian organisations inside Syria. For instance, the Centre for Humanitarian Dialogue (HD) used Liveuamap to monitor the respect of the ceasefire agreements in Eastern Ghouta.⁴⁰ While this tool has a lot of potential and could be adopted by MOs, it should be used alongside other sources of information as the accuracy of the information and geolocation can vary significantly.⁴¹

Changes in project contexts

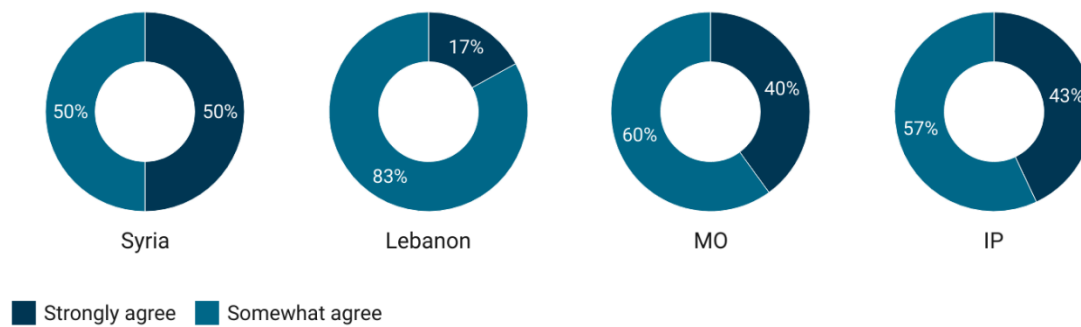
In response to the monitored evolutions, MOs and their IPs frequently adapted their project activities. Two contextual evolutions were identified across most of the projects as main triggers for change: changes in the security situation in NWS and the COVID-19 pandemic. Both changes required a tailored response to which the projects were flexible enough to adapt. In some cases, these changes affected the nature, timing, and geographic location of the project activities. Each geographic location presents unique evolutions and therefore unique challenges for humanitarian programming. Thus it is necessary, when considering access constraints, to acknowledge the geographic variance not only between Syria and Lebanon but also within these nations (see Figure 1: Areas of control in Syria and Lebanon).

³⁹ GIS use digital tools that store, analyse and visualise information using a map format.

⁴⁰ "Liveuamap is a credible source of information to maintain an overview of developments. Information of interest is then verified by HD's network of contacts. For example, when HD was working on ceasefire agreements for eastern Ghouta, it used Liveuamap to monitor the implementation of the ceasefire and to assess the feasibility of humanitarian corridors. HD also uses the tool to contribute to ensuring the security of its staff when travelling to Syria UN DPPA and HD, "Digital technologies and mediation in armed conflict", 2019, available [here](#).

⁴¹ UN DPPA and HD, "Digital technologies and mediation in armed conflict", 2019, available [here](#).

Figure 10: Your organisation is agile enough to modify its working methods based on the changing context⁴²



Adapting to the security situation in NWS

During the evaluation, geographic variance was particularly relevant when discussing the evolving security situation in NWS. On 19 December 2019 Turkish-backed opposition groups clashed with Russian-backed pro-government forces in NWS. Between December 2019 and March 2020, a devastating offensive by the Government of Syria (GoS) in the northern governorate of Idlib led to 960,000 new displacements. On 5 March 2020, Turkey and Russia agreed to a ceasefire under which they agreed to cease military action along their contact line in the Idlib de-escalation zone, and to create a security corridor.⁴³

The deteriorating security situation posed several challenges for humanitarian programming. First, IPs could no longer operate in areas occupied by the GoS, which meant that beneficiaries in these areas were inaccessible. Second, physical access became increasingly risky as frontlines changed. As a KI explained, *"the team faced access challenges to different health facilities as the roads leading to these health facilities are very risky and in some cases health facilities moved their operations following the advancement of GoS forces."* Physical access was also constrained by damaged infrastructure (e.g., roads, bridges, etc.). Third, the movement of IDP led to rapidly changing humanitarian needs and target demographics, as a KI stressed *"it was challenging to verify the number of beneficiaries and therefore measure the level of need on a given day."*

The projects needed an adapted response according to the changing needs. In some cases, the projects secured a top-up from the donor and the field teams were able to follow the IDP as they moved to ensure that they received continued assistance. For example, the health facilities that a project serves were relocated to safer areas close to the border.

The COVID-19 pandemic

The COVID-19 pandemic was mentioned as an evolution in the context, however, not necessarily as a major access constraint, considering the previous constraints faced by the projects. To curb the spread of the COVID-19 virus, borders were closed between Syria and Turkey (the main access point for Syria-based projects), and between Jordan and Lebanon (the main access point for Lebanon-based projects). In some scenarios, these closures led to procurement delays, however for the most part, project activities were not significantly impacted by these closures. As the projects were already managed remotely, MOs were better prepared to face the COVID-19 related constraints as they did not need to drastically adapt their project management processes. Further, organisations were familiar with finding solutions to access constraints.

⁴² Evaluation online survey.

⁴³ IDMC, "Syria overview", available [here](#).

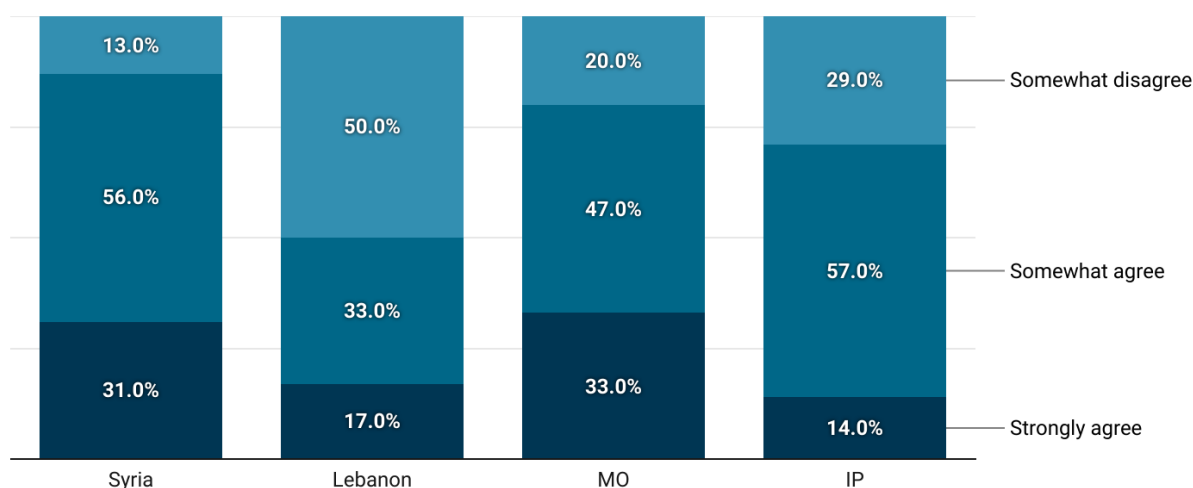
Regarding implementation, two types of project modifications were necessary: adaption of existing programme processes and activities (e.g., increase the number of distribution points to avoid crowding) and incorporating a COVID-19 related response (e.g., the addition of hygiene items to WASH Non-food Items (NFI) distributions, COVID-19 related prevention messages). Project modifications in response to the COVID-19 pandemic were largely dependent on the type of humanitarian assistance (e.g., protection, shelter, WASH etc.). As one MO explained, *"the COVID-19 pandemic wasn't a constraint, we just modified our activities, for example, if we are no longer able to use distribution points, we could shift our delivery process to hand-to-hand household deliveries."*

IV.3.1.2. Collaborative decision-making and risk mitigation

Decision-making should be collaborative and adopt a localisation approach (i.e., allow decision implementers to be the decision-makers) to increase the uptake and acceptance of these decisions. MOs and IPs reported that the decisions are mostly made by those who are going to implement them, however, **localised decision-making appears to be more common in Syria**. Further, MOs, compared with IPs, perceived localised decision-making to be more common. MOs and their IPs feel that they share a common approach towards risk management and the partnership is viewed as collaborative by both parties. MOs and their partners have clear context-related triggers indicating when it is more effective and efficient to operate completely remotely and to withdraw operations. For example, a clear trigger is if GoS forces advance into the project location, as this would require engagement and collaboration with these forces to continue project activities. **In engaging in a dual implementation modality (i.e., direct and indirect implementation of project activities), some MOs have found that their capacity to monitor and respond to risks has increased.** Flexibility of MOs and donors considering changes in the context is a crucial component to maintaining access.

The survey results found that on average 27% of the survey respondents strongly agreed and 50% somewhat agreed that project management decisions are mostly made by those who are going to be implementing these decisions. Based on Figure 11 below, the survey respondents perceived decision-making to be more localised in Syria (31%) than in Lebanon (17%). Further, MOs perceived higher levels of localised decision-making (33%) than IPs (14%). These numbers, higher in Syria than in Lebanon, could be explained by the duration of the response in Syria, such that the local NGOs in Syria were considered better established and equipped than NGOs in Lebanon to make project-related decisions. This could also be explained by the fact that MOs were largely dependent on local NGOs to gain access and inform project design, implementation, and M&E, which was especially the case for Syria-based projects. In a similar vein, however, IPs could feel dependent on their MOs to garner international funding, and in turn, feel that MOs hold the decision-making power. Survey respondents explained that beyond beneficiary needs, the main factors that informed project management decision-making included security and access, as well as donors.

Figure 11: Project management decisions are mostly made by those who are going to be implementing these decisions⁴⁴



The field team played a role in identifying changes in the context and inefficiencies in the project activities. In so doing, the field team not only notified the MOs of these changes but also proposed solutions. An IP explained that *"90% of the decisions are taken jointly and we also exchange with them our suggestions and views about any modifications, based on the needs and trends."* While IPs were involved in the decision-making and were given a lot of free range to make decisions, approvals were always needed from their MOs on project-related decisions, especially financial ones.

The partnership between MOs and their IPs was considered collaborative by both parties. The majority of MOs stressed that their IPs are more than project implementers, rather they are **strategic partners**. IPs experienced their respective MOs as flexible and the partnership as equal. One IP mentioned that their MO was *"always flexible about any amendments, modifications and developments. For instance, they were very responsive, cooperative, and quickly reactive to COVID-related activities and assistance (awareness sessions, safety kits etc.), as well as in the aftermath of the Beirut Blast."*

Donor flexibility

While many decisions are discussed and resolved between MOs and IPs and between field and country office teams within the same organisation, **some decisions required donor consultation**, e.g., changing implementation areas based on changes in camp locations. When the donor was involved, it was usually for transparency and information-sharing purposes (e.g., German Federal Foreign Office (GFFO) allows a certain degree of budget flexibility but needs to be consulted beyond a certain threshold, usually expressed as a % of funding reallocation). One MO recalled a situation where the GFFO was required to intervene on an issue related to border crossing, another explained that when it comes to a security situation and a health facility needs to be relocated, then the GFFO is the decision maker. Most MOs experienced the GFFO as being flexible, one MO mentioned that *"the relationship with the donor [GFFO] is bilateral, transparent, everyone is a real humanitarian, it's a collaborative relationship and there is a lot of talking. They're also an advisory body for us."*

⁴⁴ Evaluation online survey

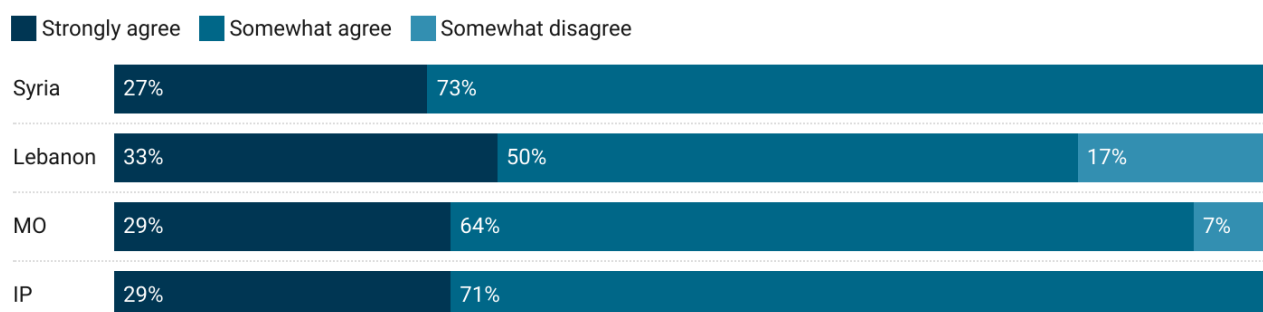
MOs also regularly mentioned that **lack of communication and understanding with the donor, particularly regarding risk mitigation considering access constraints could be a major roadblock in projects**. One MO mentioned that in the past donors have tried to reduce or mitigate risks by drawing red lines, however, they found this to be counterproductive. They stressed that risk mitigation flexibility was crucial, and this was facilitated through regular and open communication with the donor. Another MO elaborated, *"The donors vary a lot, I've experienced donors who are very strict and very flexible. They will take away the funding if you don't follow the strict commitment. The funding from the ADH network is very flexible. Flexibility goes a long way in gaining better access and adapting to situation changes."*

Risk management approaches

Collaborative decision-making should be coupled with shared risk management approaches with clear triggers indicating when it would be more effective and efficient to suspend or move operations. The survey results found that 93% of MOs felt that they shared a common risk management approach with their IPs, and 100% of the participating IPs felt that they shared a common risk management approach with their respective MOs.

MOs and IPs engaged in joint risk assessments at the start of the project and developed an agreed-on risk management template. It was particularly important to have mutual agreement on the risk management processes as most of the risks were on the IPs' shoulders (e.g., security risks). MOs' risks included, for example, project funding and sustainability. In all security-related cases, the team gathered to discuss a response. One MO mentioned that donors tend to enforce multiple red lines, however in reality the context is difficult to anticipate, and red lines do not allow for the level of granularity that is necessary. As such, risk mitigation measures are always supported by a collaborative discussion on a way forward, which stresses the importance of a mutual MO, IP and donor relationship that is built on trust and democratic values.

Figure 12: Your organisation has clear trigger in place indicating when it is more effective and efficient to operate completely remotely and to withdraw operations⁴⁵



Two interviewees stressed the value of **preparedness planning**, which allowed them to better anticipate and respond to emergencies. One interviewee explained that their performance was much better when they conducted pre-scenarios (e.g., evacuation drills for expected security incidents). Another interviewee explained that they had preparedness plans for the GoS advance and in anticipating this, they engaged with the donor to discuss an expected displacement of up to 1 million people. They elaborated: *"we were prepared for this change in context and ready to provide immediate humanitarian assistance. Our donors were very flexible and cooperative – they offered top-ups and flexible funding. Our main responsibility was to transport the people that didn't have the capacity to move."*

⁴⁵ Evaluation online survey

Another important component of risk management is to have a clear security protocol that is well understood by all stakeholders. To facilitate this, one MO translated their security plan into Arabic to ensure that there could be no misunderstanding among native Arabic speaking staff.

Dual implementation modality

Some MOs engaged in both an indirect implementation modality in the Turkish-controlled areas of NWS where access was limited for INGOs and a direct implementation modality in NES where access was feasible. These MOs stressed the value of engaging in both modalities as a method to improve their capacity as project implementers and project managers, which, in turn, would improve the effectiveness of their response. One MO captures the value of the dual modality approach: *"Sometimes when you just get reports from the partners you do not go through the details because the IP doesn't want to report about the failures. They want to make it look like everything is fine. When you implement yourself, you see a lot of the challenges and details. In the partnership modalities some issues are not reported to you so you cannot be aware and design solutions. It also helps to build the capacities of our organisation to know what to look for. We will be better managers of the partners and then we can understand the pressures they face e.g., from the local authorities for some benefits."*

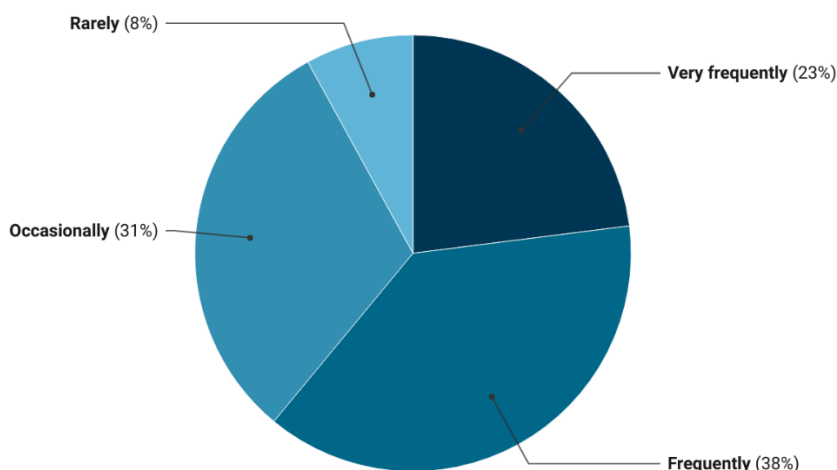
IV.3.1.3. Training and capacity strengthening

Localisation of the humanitarian response was moved to centre stage in 2016 when the Charter 4 Change called for all humanitarian responses to be "locally led". The call encourages INGOs to provide robust organisation support and capacity strengthening.⁴⁶ A localisation modality is particularly attractive for INGOs in response to the Syrian refugee crisis as the local NGOs have a better understanding of the context and have higher levels of community acceptance. As such, they have a competitive advantage over INGOs. In addition, **given the protracted nature of the conflict, local NGOs are no longer diaspora organisations, rather they have developed the necessary capacities to respond to the Syria crisis.** As one MO stressed, *"in the last three years, the international community has witnessed impressive growth at the Syrian NGO level in terms of operational efficiency, technical expertise, and general professionalism. This progress can partly be attributed to the efforts of international NGOs in terms of capacity building (CB), but it is first and foremost the result of Syrian NGO dedication and commitment to the Syrian people."*

Over the years, all IPs under evaluation have worked with several INGOs, beyond ADH MOs, which have each contributed, when feasible, to strengthen their capacity. Capacity strengthening was not a priority or individual outcome in the projects under evaluation – this was because the IPs were well established organisations and there was limited funding available for capacity strengthening. That said, MOs aimed to strengthen IPs' capacity through various trainings and workshops, or through a role matching model. The role matching model was considered more effective as it allowed MOs and IPs to develop a collaborative and open relationship, thus moving closer to a localisation strategy.

⁴⁶ Charter 4 Change, "We need localisation", 2016. Available [here](#).

Figure 13: MOs investing in the trainings and capacity building of its IPs⁴⁷



MOs approach to capacity development falls under two categories:

Organisation Capacity Assessment

Some MOs conducted an Organisational Capacity Assessment (OCA) for their IPs and developed a participatory capacity development plan, including a range of approaches such as on-the-job coaching, mentoring, secondment, training and workshops (i.e., identify a need and design a training around this). Other MOs provided ad-hoc training based on requests (e.g., a remote training on report writing).

Trainings were held on procurement; humanitarian principles and standards (Sphere training); sexual exploitation and abuse; emergency preparedness; infection prevention and control; malnutrition; warehouse and pharmacy management. Challenges associated with this format of capacity strengthening included: cross-board access to trainings (i.e., challenges with crossing the border from Syria to the trainings in Turkey); language barriers as some trainings were provided in English; uptake by IP staff members (e.g., staff who refused to attend the online trainings or did not accept or apply the knowledge). Further, some of these trainings might have been redundant and failed to appreciate the capacity of the IPs. During the interviews with MOs, most of the interviewees stressed their confidence in their IPs' adherence to the humanitarian principles and knowledge of these principles, yet several MOs provided trainings on this topic.

The evaluation identified **two training gaps: data protection and safeguarding training, and remote management training**. Some MOs had data protection and safeguarding policies, which were shared with their IPs. Yet comprehension and practice of data protection norms in line with, for example, the standards of the General Data Protection Regulation (GDPR), were almost non-existent. Similarly, some MOs had remote management policies that were shared with their IPs. However, IPs did not receive any specific training on remote management, deemed unnecessary as IPs were able to maintain access to the project sites.

Role-matching

Some MOs used a role-matching model as a capacity strengthening approach, where staff in the MO country office were matched with IP staff occupying the same position (e.g., technical engineers, MEAL officers, finance staff). These MOs found this model to be an effective approach to capacity strengthening as the country office staff members were better able to recognise gaps in their IPs' capacity, and mentor

⁴⁷ Evaluation online survey

these staff members with best practice solutions. This model allowed for regular communication and engagement, which improved their humanitarian response. It was often during on-the-fly conversations that MOs were able to identify gaps in the capacity or challenges that their IPs were facing. This model also allowed MOs and IPs to develop a more collaborative and open relationship, thus moving closer to a localisation strategy that empowers the local communities to be able to respond to their challenges. As one MO explained: *"This is how we are able to influence what's happening with the IP and it helps us build trust – our team is not there with a mandate to control but they're there to form a partnership and be part of a team."*

Strategic targeting

One MO mentioned that their capacity strengthening approach is to specifically target female staff to take over tasks traditionally exclusive to male staff members (e.g., supervising parcel trucks, getting approvals, team management during distributions). This can be explained by a decrease in the number of males in the region following 10 years of conflict. The MO goes on to explain that *"training and empowerment of female aid workers can have a sustainable effect. By strengthening the female work force, you strengthen organisational, community and individual resilience."*

IV.3.2. Risk mitigation measures

As a result of access constraints, all evaluated projects had to consider remote management (i.e., MO remote management of IPs, or the remote management of field staff by country office staff within the same organisation, as country office teams were often in a neighbouring country). The following section discusses the measures that were taken by MOs to mitigate risks associated with remote management. First, this section looks at the [M&E procedures](#) that MOs used, how these procedures were adapted in light of limited access, and whether MOs were able to [adapt their project activities based on the M&E results](#). This section also discusses the [data protection](#) and safeguarding policies that MOs have in place and the nature of [communications between MOs and their IPs](#).

IV.3.2.1. Comprehensive M&E procedures

MOs used a range of comprehensive M&E tools and procedures to monitor the quality and effectiveness of their activities, including:

- **IP monitoring:** IPs engaged with the MOs on a daily/weekly basis to provide updates on project activities (discussed under Communication between MOs and IPs). IPs also provided monthly reports about the project details and progress, including recommendations, learned lessons and challenges, photos and illustrations, figures on the project activities, beneficiaries and feedback.
- **MO monitoring:** MO MEAL staff undertook regular (usually weekly) visits to the project/distribution sites to monitor the quantity and quality of the work implemented by the IPs. MO technical teams also conducted regular field visits to monitor the quality of activity implementation and provide technical input to the IPs, as needed.
- As a technician explained *"I go to Syria on a weekly basis where I visit the campsite, meet with the council and with the beneficiaries. This is crucial as when you work remotely you don't get the full picture but when you go in there you can get a better idea, and you can tailor the response better by clearly identifying the needs and taking changes in the context into consideration."* Often MOs mentioned that while they trusted their IPs implicitly, there is a lot of value in observing the project activities themselves in person.

- **Third Party Monitoring (TPM):** Some MOs engaged independent third parties to conduct verification and triangulation of the information generated through partner-based mechanisms. TPM was particularly valuable as these real-time monitoring and verification activities were sub-contracted to independent organisations that form part of a strong network within Syria, maintain access to project implementation areas and beneficiaries, and have a proven track record in independent research and methodological rigor.

All projects were monitored by the IP and MO, and a few projects included an additional layer of third-party monitoring. Information collected by IPs was systematically triangulated with MO monitoring or TPM, and various sources of information (as described under IV.3.1.1). However, MOs did not mention the use of any additional innovative techniques (e.g., satellite imagery, mobile data, GPS points).

For some projects, TPM replaced MO field visits as a result of COVID-19 related access constraints. In addition, to reduce contact with beneficiaries, some MOs modified their M&E sample size calculation from a 5% confidence interval to a 10% confidence interval. MOs did not feel that the quality of their monitoring processes was impeded by access constraints, rather their methods to measure the quality of services required adjustment. In light of these adjustments, the evaluation found that the projects were consistently monitored and evaluated through a comprehensive set of procedures.

Decisions on the basis of monitoring outputs

MOs and IPs were able to implement necessary changes in response to their monitoring data. For example, through beneficiary feedback an MO learned that they were not meeting the basic hygiene needs for families of 6-7 members, as the parcels were designed for 5-member households, and they would only give a second parcel to families with more than 8 members. Based on this beneficiary feedback, the parcel sizes were adjusted to more accurately meet the needs of varying household sizes.

Another example was the adjustment of emergency prefabricated latrines meant for women and girls. Through monitoring activities, an MO learned that a supplier was installing the sink on the outside of the latrine. This could result in women and girls not being able to completely enjoy their privacy. The required adjustments were communicated to the IPs and the design was adjusted accordingly.

IV.3.2.2. Data Protection

When engaging with beneficiaries, MOs and IPs follow various data protection and ethics protocols, i.e., receiving informed consent and ensuring anonymity. Further, when sharing data files, MOs and IPs block any identifying information from the dataset. Some KIs mentioned that in certain areas the authorities try to find out about house locations and details, so it is critical to ensure that beneficiaries cannot be identified with the available data.

Some MOs had data protection and safeguarding policies, which were shared with their IPs. Yet comprehension and practice of data protection norms in line with, for example, the standards of the GDPR, were almost non-existent. In fact, one KI mentioned that their data protection policies are *"dependent on the project location and the project itself"*, which suggests that this organisation is not implementing a standard and rigorous approach to said data protection. Another KI explained: *"We don't have any safeguarding policies on data safety. These policies are challenging in NWS – as you cannot use high-technology. We mostly use Excel. The infrastructure is not available."* This explanation portrays a limited understanding and appreciation for data protection regulations.

IV.3.2.3. Communication between MOs and IPs

Fluid and regular communication between MOs and their IPs was a critical component to the effectiveness of remote management processes. MOs found that regular communication led to effective project coordination and ensured that the projects were proactive to any changes in the context. This was particularly the case as MOs were largely dependent on IPs for information on the evolution of the context. MOs and IPs communicated through weekly fixed meetings and ad-hoc informal communication using various online platforms or in-person meetings during weekly site visits. Most MOs mentioned that fluid and regular communication was also supported by the presence of clear policies, standards about each team member's roles and responsibilities.

Informal communication

One MO mentioned that regular informal conversations with their IP allowed them to identify any gaps in the monthly reports produced by the IPs. They explained that *"there is nothing more useful than an informal talk especially with the IP – when they write a report, they consider some things more important than you do. Some things are normal and boring, and they don't feel the need to report. You don't get this information through regular reporting; you only get this information through high-frequency regular talks."* Consequently, several MOs found the shift to a completely remote work method, in light of the COVID-19 restrictions, to be challenging, as they were no longer able to engage in informal conversations with the IP field staff. Instead, communication was based around formal meetings and became more goal-oriented. Others argued that by migrating online, decision-making became much more efficient as communication was simply a matter of *"hopping on a call"* rather than traveling to location sites and organising physical meetings.

Decision-making in communication

There was a correlation between effective communication and the length of partnership, with some organisations enjoying multiple years of collaboration and understanding. Several MOs and IPs reported their relationship to be on an equal footing, with one MO going as far to call their IP their "family". IPs experienced the communication as regular and characterised by flexibility and trust. This was especially determined by the fact that IPs had decision-making power in the various communication forums. This power gave IPs more confidence to communicate with their MOs as communication was structured around discussions, rather than relaying of information. More importantly, this gave IPs a sense of ownership over the projects and shifted the relationship from an implementation partnership to a strategic one. Such a relationship opened opportunities to discuss access constraints and develop an appropriate response.

Figure 14: The effect of clear and fluid communication between MOs and IPs



Sharing project management success and failures

When asked whether IPs had shared project management successes and failures openly, some MOs mentioned that while IPs informed them on the context and challenges, they did not feel comfortable sharing project-related 'failures' that could be attributed to their competencies. As an MO explained, *"Partners always want to report about good things, they want to solve the problem themselves and not involve the donor. Once, we had a partner who went to distribute hygiene kits, but they didn't coordinate with the*

local authority, so they were asked to evacuate the area. Our monitoring team found out that the distribution didn't happen and then they had to approach the partners and ask why. When they make mistakes, they don't want to report them because they think this will affect their reputation."

IPs' practice of sharing project-related failures is contingent on the nature of the relationship with their MO. MOs boasted about the equal nature of their partnership, however, funding comes through the MO, which introduces a power imbalance. While the communication between MOs and IPs was experienced as fluid and regular, it is likely that IPs were reluctant to share their project-related 'failures' with their MO for fear that future funding would be cut.

The level of competition between local NGOs responding to the Syrian refugee crisis should also be acknowledged. IPs might be reluctant to share project-related failures or gaps in their capacity out of replacement fear.

As such, it is crucial that MOs create a space for reflection, constructive feedback and improvement in which IPs are comfortable to openly share project experiences. One MO learned that during their internal performance evaluation with their IP (every 3 months), they had focused on gaps and challenges without acknowledging the successes and achievements of their IP, which was frustrating for said IP. In learning this, the MO made an effort to acknowledge project-related successes and use any gaps or challenges as an opportunity to strengthen the capacity of the IP.

IPs' reluctance to share project failures should be balanced with MOs' capacity to share their own failures. During the KIIs, MOs were noticeably eager to share their project-related successes but less eager to share their project-related failures, even when framed as a learning opportunity. For example, when MOs were asked what they would do differently in future projects, several MOs had nothing to contribute.

IV.3.3. Strategies to deliver accountable assistance

This final section discusses the extent to which IPs implemented strategies to deliver accountable assistance and promote a culture of open collaborative communication. This includes systems to [communicate with affected populations and allow them to participate in project design, implementation and monitoring](#) and [mechanisms to give and receive feedback](#).⁴⁸ While all IPs engaged with affected communities to conduct needs assessments or receive feedback, only a few IPs involved affected populations in the decision-making process. All projects used several entry points for complaints and feedback, including anonymous mechanisms. The success of a complaint and feedback mechanism (CFM) was largely dependent on the length of time that these mechanisms had been available to the affected population, such that longer established mechanisms reported higher utilisation. This was mediated by the communities' level of trust with the organisation.

IV.3.3.1. Engagement with affected populations

At a minimum, IPs communicated with the affected population on project details, selection criteria and targeting mechanisms, and engaged in needs assessments through FGD or surveys. For example, one project extended its satisfaction surveys to more beneficiaries to provide a more accurate picture of the quality of services, developed a real-time response tracker system to directly improve communication between technical project staff and the beneficiaries.

The gold standard was, however, the involvement of affected populations and other stakeholders in any activity and decision that impacts upon them. While all IPs engaged with affected communities to conduct

⁴⁸ The evaluation did not consult crisis affected households, as a result, discussion around adequate services to beneficiaries is only reflected indirectly.

needs assessments or receive feedback, only a few IPs involved affected populations in decision-making. Ensuring that activities were in line with affected populations needs helped to create ownership and played an important role in empowering people to take control of their lives. For example, one project consulted its beneficiaries, including women, elderly beneficiaries and people with disabilities on the design and location of latrines to identify their unique needs and ensure access. Beneficiaries influenced decisions on whether to have family or sex-segregated latrines, the structure of the building, and their safety and security concerns. Women were consulted in a culturally appropriate way to gain a better understanding of their menstrual hygiene practices. Cultural considerations are particularly important when engaging the affected community, for example, women beneficiaries would only engage with women field staff to discuss their preferences and provide feedback.

The deteriorating security situation meant that IPs could no longer operate in areas occupied by the GoS, and therefore beneficiaries in these areas were inaccessible. In light of the COVID-19 pandemic, some projects modified their M&E sample size calculation from a 5% confidence interval to a 10% confidence interval to reduce contact. For the most part, IPs could continue to access the affected population during the pandemic.

IV.3.3.2. Mechanisms to give and receive feedback from affected populations

All projects used several entry points for complaints and feedback. The most common are indicated in Table 2 below, including their respective advantages and areas of caution as described in the projects' documentation. In addition to several entry points, all projects' CFM offered the possibility to raise complaints confidentially. Some organisations engaged with community members in the design of their CFM, which included discussions around raising sensitive concerns. Engagement with community members could be considered the gold standard in participatory programme design, provided those who participate are representative of vulnerable groups (it was unclear from the documentation if this was the case).

Table 2: Complaints and Feedback mechanisms available for affected populations

Mechanism	Advantage	Caution
Focus Group Discussions	Opportunity to build community trust and give a voice to vulnerable groups through specific targeting.	Requires appropriate facilitators (e.g., female staff facilitating female groups); not feasible for sensitive complaints.
Home visits	Accessible to vulnerable groups, particularly persons living with disabilities or the elderly.	Requires appropriate facilitators; human resource intensive.
Complaints/ suggestion box	Sensitive complaints can be handled with confidentiality.	Location requires careful planning; could be inaccessible for persons living with disabilities or individuals with low literacy levels.
Phone number, SMS, email address, social media	Sensitive complaints can be handled with confidentiality; accessible to vulnerable groups, particularly persons living with disabilities.	Requires internet access/ cellular reception and high literacy levels.
Community complaints committee	Helps to build community capacities and confidence.	Requires a high level of commitment and motivation from the committee members; not feasible for sensitive complaints.

Apart from considering literacy levels and technical access to different means of communication, it is crucial to also assess the social and power dynamics before deciding on communication channels. Few projects reported on the cultural sensitivity in raising complaints. For example, one project received 176 feedback and complaints, of which 10% were from women, and 90% were from men. This imbalance highlights the inaccessibility of this particular CFM for women beneficiaries. An example of a culturally sensitive CFM is described by this IP: *"the main success of the mechanism is related to the fact that the project team is not the same team who is receiving the complaints, while the investigation team is different from both. The daily communication of beneficiaries with the team is considered a good tool where refugees including women, girls, youth, children, etc. are able to communicate their complaint directly to any staff member that they trust."*

It appears that the success of a CFM (i.e., willingness of beneficiaries to use these tools) was largely dependent on the length of time that these mechanisms had been available to the affected population, such that longer established mechanisms reported higher utilisation. This was mediated by the communities' level of trust with the organisation (i.e., trust that their complaints would be handled anonymously, and action would be taken). For example, *"Physicians supported under this project are instructed to report GBV cases to outreach workers to better manage/refer the cases ensuring their correct handling. 10 cases were registered and referred during 2019. Previously there were zero cases reported. Now communities are getting aware on the referral pathways and how to report them and seek help. So, this number is gradually increasing."* Therefore, an increase in complaints over time did not necessarily represent weaknesses in the project, but rather a more accessible CFM.

V. Conclusion

Securing access is a fundamental pre-requisite to the delivery of aid. Interpretation as to what securing access means varies based on the urgency of the needs to be covered, as well as the risk aversion of each organisation. For MOs and IPs, building community acceptance is a main strategy for securing access. Building community acceptance is a process rather an activity, requiring dedicated resources and sustained engagement with stakeholders along clear lines. Acceptance building was integrated into all the evaluated projects, yet the institutionalisation as well as the clarity of rules of engagement was lacking in most organisations. Further, the use of deterrent measures did not emerge as a strategy to maintain access.

MOs and their IPs have been agile enough to navigate access barriers and been creative in the strategies implemented to gain or preserve access. The effectiveness of such strategies varies from one organisation to the next and from one context to another. As a result, MOs have been more or less successful in their ability to access a given area or to obtain authorisation to work in a given zone. However, the differences between contexts and between organisations of the strategies adopted evidenced the tailored efforts vis-à-vis gaining access and risks management. MOs and IPs have also avoided the "bunkerisation"⁴⁹ of aid by providing localised and de-westernised project staff.

Working in an already constrained environment made MOs and their IPs better prepared to operate in the context of COVID-19 and ensure business continuity. Their ability to operate in a constrained environment is undeniable, more than 10 years into the Syrian crisis and they have developed the main tools and processes to do so. COVID-19 has been a catalyser for further digitalisation of aid, and MOs and their IPs will need to keep abreast of the latest innovations, leveraging knowledge from other contexts.

⁴⁹ Bunkerisation illustrates the idea of a humanitarian team in a compound with a very high wall, who are not in touch with the implementation area. Egeland, J., Harmer, A., Stoddard, A. "To Stay and Deliver: Good practice for humanitarians in complex security environments". UN OCHA, February 2011

Networks and partnerships also seem the way to go, especially in a humanitarian sector that struggles to meet the Grand Bargain commitment around localisation. The level of co-construction for projects and risk management strategies is noticeable. Yet, sporadic lack of trust around sharing failures or fear of losing control bubbled up during the evaluation. Some MOs also opted out of partnerships for direct delivery, despite the additional access constraints they may face as an international organisation. Partnership brokering is to be pursued and could be facilitated by ADH.

VI. Lessons learnt

Lesson 1: Partnership with local organisations is an effective way to mitigate access constraints

The value of an indirect implementation model (i.e., partnership with a local NGO), compared with a direct implementation model, as a method to gain and expand access, was a consistent theme throughout the evaluation. As IP staff members often come from the communities they serve, they are more familiar with the structures in the regions, which led to high acceptance among the beneficiaries themselves and local authorities, and in turn, increased accessibility. Second, the high mobility and flexibility of the IPs allowed the MOs to rapidly react to often changing project locations. More than once, IPs' willingness to take more risks than MOs was valued by the MOs to gain access. Third, a major benefit of indirect implementation is that local NGOs will be able to maintain access to project sites and beneficiaries irrespective of the outcome of the expiration of the **UN resolution on cross-border humanitarian assistance** in July 2021. Fourth, MOs' acceptance was also enhanced through affiliation with their respective IP as IPs have a sustained presence in the area and are trusted by crisis affected households.

The combination of indirect and direct implementation allowed MOs to identify their own gaps and challenges in programme implementation, which they might not have been able to identify through their IPs.

Lesson 2: Clear rules of engagement with local authorities and strict principled projects are effective to sustainably gain access

All projects required **engagement with the local authorities**. For the most part, the authorities were dedicated to serving their communities – to the point where authorities would hold local NGOs accountable if there were any delays in the project (i.e., withhold future access requests based on past delays). Coordination with local and national authorities was flexible and always facilitated by different means and approaches. While some engagements with local authorities involved favour requests, clear policies and a reputation of adherence to the humanitarian principles was a valuable method to decline these requests and have access requests approved. The **security protocol**, which includes rules on engagement based on the humanitarian principles, should be very clear and well understood by all stakeholders. One MO translated their security plan into Arabic to ensure that there is no misunderstanding among native Arabic speaking staff.

Lesson 3: Response localisation should not be perceived solely as a way to gain access

Although the humanitarian response is well coordinated, greater emphasis should be placed on the localisation of the response through indirect implementation models. Following 10 years of conflict, donor fatigue in response to the Syrian refugee crisis is becoming more likely. For example, in 2020, the volume of humanitarian assistance directed to Syria had reduced for the second year in a row, decreasing by USD

182 million to USD 2.3 billion, a 7% drop.⁵⁰ To mitigate the risk that Syrian communities are unable to rebuild themselves in the absence of international humanitarian assistance, it is necessary to increase the uptake of localisation. Trust is a key component of localisation and of remote management. As such, donors should be cautious that while promoting localisation they do not encourage strict control of INGOs over local NGOs.

Community-Based Structures (including Protection Focal Points / Committees / Networks) act as intermediaries between organisation and response, and the community. Community-Based structures played a key role in monitoring the quality and inclusivity of programs and providing feedback.

Lesson 4: When operating in a volatile context, funding agility is a must

Donor flexibility and understanding of the dynamics of the changing context was a key component to access. When the donor was flexible, projects were able to adapt to the changing context in a timely manner and therefore maintain access to their beneficiaries. The GFFO was considered a flexible and responsive donor, appreciated by the MOs. Donors can, however, be more flexible when selecting a location for intervention (i.e., instead of listing the target locations on the community levels it would be better to list locations on the district level, this could be followed by a needs assessment once the grant has been approved).

Lesson 5: Adopting a low stance attitude could be a way to mitigate risks of opportunistic targeting

Decisions on visibility are based on the security situation, i.e., who is controlling the area. A low-profile attitude is a way to mitigate the risks of opportunistic targeting by warring parties or petty criminals. It can also be a way to gain acceptance. For example, even though all the staff members of one MO in Syria are Muslim, they could not be visible in Idlib because the MO is originally a Christian organisation. As such, the MO used an indirect implementation model. Visibility should be explicitly discussed with the donor at the start of the project to ensure no pushback during the project, whereby donors want to make themselves visible.

VII. Recommendations

Based on the evaluation findings, the evaluation team drew the following recommendations. These are targeted at ADH MO and IP as well as ADH.

VII.1. Operational recommendations for ADH MOs and IPs

Considering the diversity of the operational model used between ADH MO and IP, the below can be taken onboard either by MOs or IPs.

Recommendation 1: Measure the level of community acceptance

Building acceptance has been a key approach for MOs and IPs to be able to gain and sustain access as well as mitigate risks. As mentioned, this is a process more than an ad hoc activity. As such, it requires time and resources. To be in a position to better inform acceptance building processes, MOs and IPs could consider

⁵⁰ Development Initiatives, "Global Humanitarian Assistance Report", 2020, available [here](#).

implementing perception surveys. This has been successfully implemented in other contexts such as Afghanistan.⁵¹

Recommendation 2: Engage in regular refresher training on principled humanitarian action

While all interviewed staff both from MOs and IPs were able to state how humanitarian principles translate through programme design (e.g., transparency of targeting, targeting those in needs, etc.), only a few of them articulated the principles of humanity, neutrality, and impartiality. It is important that all staff engaged in access constrained environments are able to explain these principles clearly to the different stakeholders as they are a window into building acceptance. Equally important, these principles may contradict one another in certain contexts, and it is important to know them well to be able to make acceptable trade-offs or identify red lines.

Recommendation 3: Have clear rules of engagement with warring parties

While it was the case with some MOs, not all have formalised or accessible rules on how to engage with warring parties. In conflict contexts, civil-military coordination is essential to gain and preserve access, so it is key that these rules are formalised and known as well as available in the language in which the activities are implemented. Individuals should be clear as to whom they can engage with and for which purpose. The recommended localisation of security-related decision-making will only be possible if these rules of engagement are clear.

Recommendation 4: Co-design clear red lines and monitor them

In line with the recommendation on risk-sharing (9.2), each organisation should explicitly define its set of thresholds as to when to shift to remote delivery and when to entirely pull out. The level of acceptable risk and risks appetite of IPs should be discussed with MOs to ensure that it is not biased by funding opportunities and that proper duty-of-care can be implemented.

Recommendation 5: Invest in data protection and safeguarding

Syria, and to a lesser degree Lebanon, represent contexts where data collected by humanitarian actors can be more than sensitive. Remote delivery is an extra layer of risk because of the need to share and transfer data. The evaluation did not specifically enquire about data protection, yet this was only mentioned once during data collection.

MOs and IPs should make sure their staff have a high level of data protection literacy, that their systems are strong when it comes to storing data, that their processes are clear and adhere to sectoral regulations when it comes to data anonymisation and transfer as well as minimising personal data collection to reduce risk exposure. In addition, organisations should not underestimate the sensitivity of big data.

Recommendation 6: Make sure as many resources go into communicating with stakeholders locally as with donors and the public in Germany

Considering how important acceptance building is to maintain access and mitigate risks, IPs and MOs should make sure to dedicate enough resources to outreach and communication with these local stakeholders. A good benchmark could be to dedicate as many resources, people, as much time and money to local rather than international communication. The content communicated as well as the medium to do so would of course be different.

With an access lens, communication objectives will be to disclose MO and/or IP adherence to humanitarian principles as well as the project's progress, successes and to a certain degree its failures, as honesty can be a way to further build acceptance.

⁵¹ Egeland, J., Harmer, A., Stoddard, A. "To Stay and Deliver: Good practice for humanitarians in complex security environments". UN OCHA, February 2011

Recommendation 7: Explore how technologies can be leveraged not only as part of M&E to collect data but also as an integral part of programming

MOs and IPs are already using social media and online platforms to implement monitoring activities. They have also migrated a portion of their activities online, for instance hygiene messages sent via SMS or online consultations. In line with the latest examples, ADH MOs and IPs could join forces to consider how the digitalisation of aid could present opportunities to maintain access to certain areas in Syria and Lebanon. Using mobile money, consulting crisis-affected households via mobile phone to design the project, etc. can be ideas to explore. This would however only be possible if data protection is ensured throughout the data cycle.

Recommendation 8: Strengthen further remote management

While remote management is inevitable in some circumstances, field offices already provide a high level of localised action. Remote management could however be further strengthened. MOs and IPs could explore opportunities for community-level actors to be included in the decision-making.

As regards recruitment, staff members could be engaged in consultation with their communities, diaspora members could also be a resource to be further used.

The recommendation on recruitment may already be implemented by some MOs and IPs but this was not investigated to that level of detail considering the sensitivity of the topic.

VII.2. Strategic recommendations for ADH MOs and IPs

Recommendation 9: Shift from an IP mindset to a partnership mindset and then to a network mindset

Localised humanitarian action is a clear trend within the sector. Some of the ADH-funded projects in Syria have forced localisation due to a lack of access to certain areas. This forced localisation could now be optimised and the mindset and attitude vis-à-vis localised humanitarian action brought to other contexts. How and when this is to happen will depend on each organisation.

As far as Syria and Lebanon-funded projects are concerned, the following could be envisioned as first steps:

1. Change the narrative and stop using the terminology "Implementing Partner". A couple of KIs already described their IP as their strategic partner, so this should facilitate the shift.
2. Review risk management and risk framework to make sure the approach is one of risk-sharing as opposed to risk transfer. This should be true especially when it comes to funding eligibility.
3. Ensure the decentralisation of decision-making related to security and securing access.

Recommendation 10: Build on the knowledge gained in operating in constrained environments to implement good practices during the COVID-19 pandemic

As the COVID-19 pandemic enters its second year, it will likely become endemic.⁵² Operating for multiple years in access constrained environments has equipped both MOs and IPs with a comparative advantage when it comes to their capability to operate and ensure business continuity as well as to the tools and processes, they have to do so. MOs and IPs operating in Syria have successfully passed the proof-of-concept phase of operating in difficult contexts. The lessons learned from these projects (e.g., the value of an indirect implementation model) could serve globally to adapt to the access constraints induced by COVID-19.

⁵² Torjesen, I., "Covid-19 will become endemic but with decreased potency over time, scientists believe", 2021, available [here](#).

Recommendation 11: Explore the full potential of using cash as a mean to deliver assistance in an access constrained environment

Modality for aid delivery was not the main focus of the evaluation, yet, globally, CVA has successfully been used as a way to maintain delivery of aid in access constrained environments. Cash assistance will not be feasible in every context and its appropriateness should be verified against political and community acceptance, market functionality, availability of reliable payment agents and protection risks. However, considering most of the ADH-funded projects included the distribution of items or services, asking the question of cash feasibility could be an additional way to explore access as well as work towards Grand Bargain commitments.

Recommendation 12: Leverage the collective and ADH membership as an opportunity for horizontal learning

Being part of ADH creates a certain degree of trust among its members that could be capitalised on to learn from others what strategies have been successful to gain or preserve access. There could also be clear value to engage on learning around technologies and innovations and the risks and opportunities they present to operate in an access constrained environment.

Being conscious of the burdens placed on the teams, an option could be to meet on an ad hoc basis to discuss either a specific theme or project cycle step. This learning workshop should be a safe space where partners can learn from each other but also share failures and challenges.

Recommendation 13: Advocate with donors for clear compliance requirements when it comes to engaging with warring parties

The evaluation found that some MOs do not engage with certain stakeholders as they believe this goes against donor policies. Previous studies have found that stated or implied donor policies to prohibit contact with entities they designated as terrorist “undermined opportunities for humanitarian actors to negotiate access for aid to civilians”.⁵³ To avoid blurred lines and allow MOs and IPs to have clear rules of engagement with warring parties, they should engage with donor organisations to make sure that the requirements vis-à-vis the rules of engagement with stakeholders and civil-military coordination are clear and known by all members and partners.

VII.3. Recommendations for ADH

Recommendation 14: Facilitate a conversation on the use of ADH-visibility across MOs

The adoption of a low visibility strategy should remain the decision of the organisation implementing the project on the ground. Yet, as far as ADH visibility is concerned, ADH should facilitate discussion among its members as to what criteria are taken into consideration to decide to adopt a low stance approach.

This discussion could serve to design an ADH checklist to support consistent and coordinated decision-making among MOs and IPs. This checklist could be used beyond Syria and Lebanon.

Recommendation 15: Call for ADH lessons learned workshops

As mentioned, being part of ADH creates a certain degree of trust and familiarity among MOs. This could be further built upon by calling virtual or in-person workshops. It should be clear that the content will have no impact on funding so that organisations feel comfortable sharing sensitive information and possible failures.

⁵³ Egeland, J., Harmer, A., Stoddard, A. “To Stay and Deliver: Good practice for humanitarians in complex security environments”. UN OCHA, February 2011

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IX. Annex 1: Evaluation Matrix

Sub Questions	Indicators/how judgment will be formed	Source of information
I. What approaches, methods and strategies have been used by MOs and their IPs to expand or preserve access to target groups?		
1.1 To what extent have MOs and their IPs put in place policies, programmes and processes for which the primary purpose was to expand or preserve access to affected populations? ⁵⁴	1.1.1 MOs and their IPs are active members of coordination groups 1.1.2 MOs and their IPs regularly meet with local authorities and traditional leaders 1.1.3 MOs and their IPs have consistently approached those who control access 1.1.4 MOs and their IPs are able to explain the humanitarian principles they adhere to 1.1.5 There are strategies in place to build acceptance for the projects implemented by MOs and their IPs among communities 1.1.6 MOs and their IPs have considered how sharing of roles and responsibilities across the project cycle and their respective recruitment strategies ⁵⁵ can be a way to gain access 1.1.7 Targeting criteria are clear to MOs, their IP and the affected HH and allow to target those who have been the most affected 1.1.8 MOs and their IPs have COVID-19 protocols in place 1.1.9 MOs and their partners are able to explain the main barrier gestures to COVID-19 and know about duty of care responsibilities	Online survey KIIs FGD Desk review: COVID protocols, duty of care manual
1.2 How have innovative approaches and new technologies been used to expand or preserve access?	1.2.1 MOs and their IPs report using technologies to expand or preserve access (e.g., zero contact distribution method, touchless cash) 1.2.2 MOs and their IPs have (documented) new and innovative approaches used to expand or preserve access 1.2.3 MOs and their IPs have organised lessons learned workshops to share these practices	KII FGD Desk review: workshops agenda and minutes, case study documents

⁵⁴ The working hypothesis as to what strategies can be implemented to gain or sustain access are inspired from Rohwerder B. (2015) Restrictions on humanitarian access. GSDRC <https://gsdrc.org/wp-content/uploads/2015/11/HDQ1297.pdf>

⁵⁵ The 2012 evaluation and review of humanitarian access strategies in DG ECHO funded interventions reports that “a clear trend emerges among the most successful organisations to de-Westernize their staff and recruit members of Diaspora communities or experienced locals for management positions”

II. Given the access constraints, to what extent have MOs and their IPs been able to operate, across the project cycle, in an accountable and effective manner?			
<p>2.3 Were MOs able to effectively and efficiently adapt their project management processes to situations of constrained access?</p>	<p>2.3.1 MOs regularly monitor the evolution of the context and are agile enough to modify their ways of working on the basis of changing access</p> <p>2.3.2 MOs have invested in the training and CB (face to face and remotely) of their IPs specifically with regards to project management capabilities and adherence to humanitarian standards</p> <p>2.3.3 MOs and their partners report that the decisions are mostly made by those who are going to be affected by it</p> <p>2.3.4 MOs and their IPs feel that they share a common approach towards risk management</p> <p>2.3.5 MOs and their partners have clear context related triggers indicating when it is more effective and efficient to operate completely remotely and to withdraw operations</p>	<p>Online survey</p> <p>KIIs</p> <p>FGD</p> <p>Desk review: Context monitoring reports, trainings strategies & curricula, training reports, partnership agreement, risk assessment matrix</p>	
<p>2.4 What measures were taken to mitigate the risks associated with remote management?</p>	<p>2.4.1 MOs have comprehensive monitoring and evaluation procedures in place that are being consistently used</p> <p>2.4.2 Information collected by IPs is systematically triangulated including using innovative techniques (e.g., satellite imagery, mobile data, GPS points)</p> <p>2.4.3 MOs have documented and reported practices of directly engaging the target groups (e.g., remote monitoring processes, using third party monitoring)</p> <p>2.4.4 MOs and their IPs are able to make decision on the basis of monitoring and evaluation outputs</p> <p>2.4.5 MOs have initiated training on remote management in HQs and with their IPs</p> <p>2.4.6 MOs and their IPs have clear and comprehensive policies on data protection and safeguarding of personal data, including electronic registration and distribution systems</p> <p>2.4.7 There is regular communication between field and remote office staff</p> <p>2.4.8 Communication between field and remote office staff is deemed fluid and effective by both parties</p>	<p>Online survey</p> <p>KIIs</p> <p>FGD</p> <p>Desk review: M&E guidelines, third party monitoring agreements, minutes meeting between field and remote office staff</p>	
<p>2.5 To what extent have IPs put in place strategies to deliver accountable assistance and promote a culture of open collaborative communication?</p>	<p>2.5.1 IPs have established systems for affected populations' participation in project design, implementation and monitoring</p> <p>2.5.2 Tools used to communicate with affected populations are adjusted to the access constraints</p> <p>2.5.3 IPs have established functional and accessible mechanisms to receive and give feedback to affected populations</p> <p>2.5.4 IPs have shared project management successes and failures openly with MOs to promote a system-wide culture of openness and accountability</p>	<p>Online survey</p> <p>KIIs</p> <p>FGD</p> <p>Desk review: lessons learned report, CRM guidelines and log in data bases</p>	

X. Annex 2: Participating ADH Member Organisations

Following ADH Member Organisations were part of this evaluation:

- action medeor
- arche noVa – Initiative für Menschen e.V.
- Arbeiterwohlfahrt International (AWO)
- CARE Deutschland
- Help – Hilfe zur Selbsthilfe
- Islamic Relief Deutschland e.V.
- Johanniter-Unfall-Hilfe e.V.
- Malteser International
- World Vision Deutschland e.V

XI. Annex 3: Detailed Methodology

XI.1. Inception phase and desk review

The consultancy began with a **briefing call** on 12 April 2021, which served to familiarise KAC on ADH (central office vis-à-vis its MOs), explaining its regulations, quality assurance, management and procedures, human resources, the launch of joint appeals, procedures during an appeal, joint evaluations and its procedures.

On 13 April 2021, a remote **kick-off workshop** was held with representatives from each of the MOs participating in the evaluation (see Annex 2: Participating ADH Member Organisations), the ADH central office, and the KAC evaluation team. MO representatives briefly presented the projects implemented as part of the joint appeal, and KAC presented the evaluation methodology, planned timeframe, and the evaluation matrix including the evaluation questions. The workshop participants discussed and agreed upon important dates/milestones for the evaluation, the timeframe for the fieldwork and deliverables, and MOs were informed on which documents to upload for the **desk review**.

A first draft of the **inception report** was produced on 16 April 2021. Comments from ADH were integrated and a final inception report was produced on 23 April 2021, including a finalised methodology and timeframe, an evaluation matrix (see Annex 1: Evaluation Matrix), primary data collection tools, and a list of KIs to be interviewed.

XI.2. Quantitative data collection

Using Kobo, an online survey was created for MO staff (9) and IP staff (15) to answer close-ended questions about the strategies deployed to expand or preserve access to affected populations and the ones implemented to mitigate access challenges (see Online Survey). The online survey was administered in English and Arabic and open for a duration of 2 weeks between 26 April to 7 May 2021. The survey was disseminated by each MO representative to any staff (past or present) who took part in the implementation of the projects being evaluated.

XI.3. Qualitative data collection

Primary data collection methods included KIIs and FGD. The evaluation team conducted **17 KIIs with 26 KIs**. Seven KIIs were conducted using paired interviews with KIs from the same organisation. The emphasis of the paired interview is to create a dynamic in which the participants interact with each other.⁵⁶ The semi-structured KIIs were conducted remotely (using Skype, Zoom or any other free means of communication) and in English. KI participants were selected using purposive sampling to include people who are best placed to provide valuable information that is representative of the various operational locations.

⁵⁶ A paired interview is a method of collecting information from two people at the same time who represent the target audience. The paired interview is not two interviews being conducted simultaneously.

The evaluation team conducted **12 FGDs** with a range of stakeholders, each with different level of engagement vis a vis the projects. The team paid attention to ensure that a variety of organisations operating at different levels (international/local) and locations will be represented. The team also paid attention to gender considerations and made sure to consult men and women in equal proportion, as much as possible. FGDs were conducted remotely with 3-4 participants per group. Each FGD lasted about one hour. FGDs were conducted primarily in Arabic. FGD were segregated by the type of project activity and location of activity.

XI.4. Data analysis and reporting

XI.4.1. Data Analysis

Disaggregated data was collected and coded to analyse information by evaluation question. Data was analysed using a coding matrix in Excel, with answers coded by themes related to the working questions (i.e., international/national organisations, programme location Lebanon/Syria, and for Syria-based programmes the three areas of control). The analysis was done iteratively throughout data collection, both to adjust the data collection tools and explore more in-depth some of the trends and unexpected findings. Data was triangulated across different sources to increase accuracy and strengthen recommendations from the analysis.

The evaluation team produced this first draft evaluation report showing the key findings, lessons learned, and best practices, and recommending actions to take in ongoing implementation and to make in the design and implementation of future projects. The draft report was submitted to ADH central office on 28 May 2021. ADH central office will share it with the participating MOs for review.

XI.4.2. Debriefing workshop

The draft report will be presented by the KAC team in a remote debriefing workshop on 16 June 2021. The purpose of the workshop is to validate the findings and discuss recommendations with MO representatives and ADH central office. The feedback will be collected and used to finalise the evaluation report.

XI.4.3. Final Report

This final version of the evaluation report will take into account the feedback of the participating MOs and the discussions at the debriefing workshop. The final report will be developed in English and proofread by a native English speaker.

Individual recommendations: For some of the participating MOs individual recommendations will be submitted bilaterally to the relevant MO. This one pager will not be new content but rather a caption of recommendations existing in the final evaluation report and specifically relevant for a participating MO.

XII. Annex 4: Survey Results

1.1 To what extent have MOs and their IPs put in place policies, programmes and processes for which the primary purpose was to expand or preserve access to affected populations

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree
Your organisation is an active member of coordination groups.	18	2	1	0
Syria	13	1	1	0
Lebanon	5	1	0	0
MO	11	2	1	0
IP	7	0	0	0
Your organisation regularly meets with local authorities and traditional leaders.	10	9	1	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	7	5	1	0
IP	3	4	0	0
Staff of your organisation are able to explain the humanitarian principles they adhere to.	14	8	0	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	9	6	0	0
IP	5	2	0	0
There are strategies in place to build acceptance among community members for the projects implemented by your organisation.	12	8	0	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	9	4	0	0
IP	3	4	0	0

The way roles and responsibilities are shared between member organisations and implementing partners is a way to overcome access challenges.	13	6	0	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	10	2	0	0
IP	3	4	0	0
Your organisation recruit staff on the basis of their potential access to a given area.	7	7	2	2
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	5	3	1	2
IP	2	4	0	0
Targeting criteria are clear to member organisation staff members.	16	5	0	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	13	2	0	0
IP	3	3	0	0
Targeting criteria are clear to implementing partner staff members.	15	4	0	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	11	1	0	0
IP	4	3	0	0
Targeting criteria are clear to the affected households.	9	12	0	0
Syria	5	10	0	0
Lebanon	4	2	0	0
MO	7	7	0	0
IP	2	5	0	0
Targeting criteria allow to target those who have been the most affected.	11	10	0	1

Syria	0	0	0	0
Lebanon	0	0	0	0
MO	9	6	0	0
IP	2	4	0	0
Staff in your organisation are able to explain the main barrier gestures/preventative behaviour to COVID-19.	16	5	0	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	15	0	0	0
IP	1	5	0	0
Your organisation has a clear duty of care responsibilities policies related to the risks COVID-19 may pose to its staff.	11	8	2	0
Syria	0	0	0	0
Lebanon	0	0	0	0
MO	10	4	1	0
IP	1	4	1	0

	Very frequently	Frequently	Occasionally	Rarely	Very rarely
How often does your organisation engage with all those who control access?	3	12	3	0	1
Syria	3	6	3	0	1
Lebanon	0	6	0	0	0
MO	2	8	1	0	1
IP	1	0	0	0	0

	Yes	No
Your organisation has COVID-19 protocols in place.	21	0
Syria	15	0

Lebanon	6	0
MO	15	0
IP	6	0

1.2 How have innovative approaches and new technologies been used to expand or preserve access?

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree
Your organisation makes use of technologies to expand or preserve access.	6	10	1	1
Syria	4	6	1	1
Lebanon	2	4	0	0
MO	5	5	0	1
IP	1	5	1	0

	Very frequently	Frequently	Occasionally	Rarely	Very rarely	Never
How often does your organisation document new and innovative approaches to expand or preserve access?	2	7	8	2	0	1
Syria	0	6	5	2	0	1
Lebanon	2	1	3	0	0	0
MO	1	5	4	2	0	1
IP	1	2	4	0	0	0

	Yes	No
Your organisation has organised lessons learned workshops to share innovative practices.	13	6
Syria	9	4
Lebanon	4	2

MO	8	4
IP	5	2
Your organisation has taken part in lessons learned workshops to share innovative practices.	12	4
Syria	8	3
Lebanon	4	1
MO	7	3
IP	5	1

2.1 Were MOs able to effectively and efficiently adapt their project management processes to situations of constrained access?

	Strongly agree	Somewhat agree	Somewhat disagree	Strongly disagree
Your organisation regularly monitors the evolution of the program context.	15	7	0	0
Syria	10	6	0	0
Lebanon	5	1	0	0
MO	11	4	0	0
IP	4	3	0	0
Your organisation is agile enough to modify its ways of working on the basis of the changing context.	9	13	0	0
Syria	8	8	0	0
Lebanon	1	5	0	0
MO	6	9	0	0
IP	3	4	0	0
Project management decisions are mostly made by those who are going to be implementing these decisions.	6	11	5	0
Syria	5	9	2	0
Lebanon	1	2	3	0

MO	5	7	3	0
IP	1	4	2	0
Your organisation has clear trigger in place indicating when it is more effective and efficient to operate completely remotely and to withdraw operations.	6	14	1	0
Syria	4	11	0	0
Lebanon	2	3	1	0
MO	4	9	1	0
IP	2	5	0	0

XIII. Annex 5: Data collection tools

XIII.1. Online Survey

Key Aid Consulting was commissioned to review MOs' ADH-funded joint appeal to the Syrian refugee crisis, and the extent to which limited or no direct access to target groups at the local level has affected project and programme strategies.

Specifically, we are looking at 1. What approaches, methods and strategies have been used by MOs to preserve access to target groups? and 2. Given the access constraints, to what extent have MOs been able to operate, across the project cycle, in an accountable and effective manner?

The survey will take about 20 minutes. Your answers will help inform the report, but your answers will remain anonymous. If a question is not applicable to your role or your organisation, if you do not know an answer or are not comfortable to say, please answer "not applicable".

Do you agree to take part in this survey?

- Yes
- No

Introduction

Which organisation do you work for? [Single response] *list of all MOs, IPs or Other*

What gender do you identify with? [Single response] *Male, Female, Nonbinary, Prefer not to say*

Which country is your work primarily focusing on? [Single response] *Lebanon, Syria or Other*

NB: If your work support projects in both Lebanon and Syria, can you take the survey twice, once for each country?

If other => End of the questionnaire

KEQ 1: What approaches, methods and strategies have been used by MOs and their IPs to expand or preserve access to target groups?

SQ 1.1 To what extent have MOs and their IPs put in place policies, programmes and processes for which the primary purpose was to expand or preserve access to affected populations?

1.1.1 Your organisation is an active member of coordination groups.
[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

1.1.2 Your organisation regularly meets with local authorities and traditional leaders.
[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*
How would you rate the nature of this engagement?
[display logic for strongly agree and agree, rating scale] 1 = negative to 5 = positive

1.1.3 How often does your organisation engage with all those who control access?
[Likert scale] *Very frequently (i.e., daily), frequently, occasionally, rarely, very rarely, never, NA*

1.1.4 Staff of your organisation are able to explain the humanitarian principles they adhere to

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

- 1.1.5 There are strategies in place to build acceptance among community members for the projects implemented by your organisation.

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

- 1.1.6 The way roles and responsibilities are shared between MOs and IP is a way to overcome access challenges

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

Your organisation recruit staff on the basis of their potential access to a given area

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

- 1.1.7 Targeting criteria are clear to MOs staff members

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

Targeting criteria are clear to IP staff members

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

Targeting criteria are clear to the affected HH

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

Targeting criteria allow to target those who have been the most affected

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

How could your organisation improve its targeting methods?

[display logic for disagree and strongly disagree, written response]

- 1.1.8 Your organisation has COVID-19 protocols in place

[dichotomous scale] *Yes, No, NA*

- 1.1.9 Staff in your organisation are able to explain the main barrier gestures to COVID-19

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

- 1.1.10 Your organisation has a clear duty of care responsibilities policies vis a vis the risks COVID-19 may pose to its staff

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

SQ 1.2 How have innovative approaches and new technologies been used to expand or preserve access?

- 1.2.1 Your organisation makes use of technologies to expand or preserve access

[Likert scale] *Strongly agree, agree, neutral, disagree, strongly disagree, NA*

Please give examples of the technologies used.

[display logic for agree and strongly agree, written response]

Please give examples of the technologies that your organisation could use.

[display logic for disagree and strongly disagree, written response]

1.2.2 How often does your organisation document new and innovative approaches to expand or preserve access?

[Likert scale] *Very frequently, frequently, occasionally, rarely, very rarely, never, NA*

1.2.3 Your organisation has organised lessons learned workshops to share innovative practices.

[dichotomous scale] *Yes, No, NA*

Your organisation has taken part in lessons learned workshops to share innovative practices.

[dichotomous scale] *Yes, No, NA*

KEQ 2: Given the access constraints, to what extent have MOs and their IPs been able to operate, across the project cycle, in an accountable and effective manner?

SQ 2.1 Were MOs able to effectively and efficiently adapt their project management processes to situations of constrained access?

2.1.1 Your organisation regularly monitors the evolution of the program context.

[Likert scale] *Strongly agree, agree, neutral, disagree, strongly disagree, NA*

Your organisation is agile enough to modify its ways of working on the basis of the changing context.

[display logic for agree and strongly agree, Likert scale] *Strongly agree, agree, neutral, disagree, strongly disagree, NA*

2.1.2 How frequently has your organisation invested in the trainings and CB (face-to-face or remotely) of its IPs, specifically with regard to project management capabilities and adherence to the humanitarian standards?

[display logic if MO] *Very frequently, frequently, occasionally, rarely, very rarely, never, NA*

How frequently has your organisation received trainings and CB (face-to-face or remotely) from its MO, specifically with regard to project management capabilities and adherence to the humanitarian standards?

[display logic if IP] *Very frequently, frequently, occasionally, rarely, very rarely, never, NA*

How would you rate the quality of the training and CB that your organisation has received?

[display logic if IP and very frequently, occasionally, rarely or very rarely, Likert scale] *Very good, good, acceptable, poor, very poor, NA*

Do you have any recommendations on how to improve the training and CB?

[display logic if IP and acceptable, poor, very poor, written response]

2.1.3 Project management decisions are mostly made by those who are going to be implementing these decisions

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

What is the main factor/s that inform project management decision making?

[display logic if disagree, strongly disagree, written response]

2.1.4 Do you feel that your organisation shares a common risk management approach with its IPs?

[display logic if MO] *Yes, unsure, no, NA*

Do you feel that your organisation shares a common risk management approach with its MO?

[display logic if IP] *Yes, unsure, no, NA*

2.1.5 Your organisation has clear trigger in place indicating when it is more effective and efficient to operate completely remotely and to withdraw operations

[Likert scale] *Strongly agree, agree, disagree, strongly disagree, NA*

XIII.2. Key Informant Interviews

Key Aid Consulting was commissioned to review MOs’ ADH-funded joint appeal to the Syrian refugee crisis, and the extent to which limited or no direct access to target groups at the local level has affected project and programme strategies.

Specifically, we are looking at 1. What approaches, methods and strategies have been used by MOs to preserve access to target groups, and 2. Given the access constraints, to what extent have MOs been able to operate, across the project cycle, in an accountable and effective manner?

The information you communicate will be anonymised and the final report will only make references to organisations if the data provided by them is public. Please also be aware that you have the right to amend or delete the data you communicated after this interview. Do you agree to take part in this interview? In compliance with the European Union’s GDPR, if you wish to delete your information afterwards, please send an email to info@keyaidconsulting.com.

The interview will last about 45 to 50 minutes. Your answers will help inform the report, but your answers will remain anonymous.

NB: the below questionnaire presents a long list of questions the exact questions to ask will be based on the position of the person being interviewed and the stage of the data collection (i.e., if data saturation has been reached, a question will not be asked anymore)

Do you agree to take part in this interview?

- Yes
- No

General information

Name:	
Organisation:	
Position:	
Email address:	

Introduction

What was your role in project implementation?

KEQ 1: What approaches, methods and strategies have been used by MOs and their IPs to expand or preserve access to target groups?

SQ 1.1 To what extent have MOs and their IPs put in place policies, programmes and processes for which the primary purpose was to expand or preserve access to affected populations?

- 1.1.1 How being part of certain coordination fora has helped or not to expand or preserve access?
- 1.1.2 [for IPs] How often does your organisation meet with local authorities and traditional leaders? What is the nature of this engagement? To what extent has it helped or not to expand or preserve access?
- 1.1.3 [for IPs] How would you describe the engagement between your organisation and those who control access? How consistent is this engagement? What factors enable successful engagement?
- 1.1.4 Have you already used humanitarian principles your organisation adheres to as a way to gain access? If so how? If not, why?
- 1.1.5 [for IPs] What strategies has your organisation put in place to increase acceptance among community members towards your organisation's projects? What, in your opinion, are the key factors for community acceptance?
- 1.1.6 How have you shared roles and responsibilities between MOs and IP? To what extent has it helped or not to expand or preserve access?
Do you think your team composition is crafted to expand or preserve access (e.g., recruiting diaspora members, people from the affected areas)? Why?
- 1.1.8 What are the main barriers brought by the COVID-19 pandemic? What are your duty of care responsibilities?

SQ 1.2 How have innovative approaches and new technologies been used to expand or preserve access?

- 1.2.1 What technologies has your organisation used to expand or preserve access (e.g., zero contact distribution methods, touchless cash)?
- 1.2.2 Has your organisation implemented new and innovative approaches to expand or preserve access to target groups? If yes, please give examples.
- 1.2.3 Has your organisation organised lessons learned workshops to share these practices? If yes, how often and who was involved in the workshops?

KEQ 2: Given the access constraints, to what extent have MOs and their IPs been able to operate, across the project cycle, in an accountable and effective manner?

SQ 2.1 Were MOs able to effectively and efficiently adapt their project management processes to situations of constrained access?

- 2.1.1 How often does your organisation monitor changes in the project context? In your opinion, is your organisation agile enough to respond to the changes it observes (i.e., changes in the ways of working)?
- 2.1.2 [For MOs] Has your organisation invested in the training and CB of its IPs, specifically related to their project management capabilities and adherence to humanitarian standards?
[For IPs] Has your organisation received training and CB from its ADH MO, specifically related to their project management capabilities and adherence to humanitarian standards?
- 2.1.3 To what extent are decisions made by those who are going to operationalise them?
- 2.1.4 How are risks managed in your organisation?
Does it align well with how the MO/IP is managing risks?

2.1.5 Do you know how your organisation would decide to shift to operating completely remotely and to withdraw operations?

SQ 2.2 What measures were taken to mitigate the risks associated with remote management?

2.2.1 Please explain the M&E procedures that your organisation has in place. Are these procedures used consistently?

2.2.2 [For MOs] Is the information collected by IPs systematically triangulated with, among other, innovative techniques (e.g., satellite imagery, mobile data, GPS points)?

2.2.3 [for MOs] How do you directly engage with the target groups (e.g., remote monitoring processes, using third party monitoring)?

2.2.4 To what extent is your organisation able/flexible to make project management decisions based on M&E outputs? Can you give me an example of such a decision?

2.2.5 [For MOs] Has your organisation initiated training on remote management at HQ and with your IPs?

2.2.6 Does your organisation have clear and comprehensive policies on data protection and safeguarding of personal data, including electronic registration and distribution systems?

2.2.7 Is there regular communication between your field and remote office staff?

2.2.8 If yes, do you consider this communication to be fluid and effective?

SQ 2.3 To what extent have IPs put in place strategies to deliver accountable assistance and promote a culture of open collaborative communication?

2.3.1. [for IPs] has your organisation established systems for affected populations to participate in project design, implementation and monitoring? If yes, can you describe these systems?

2.3.2. How have tools used to communicate with affected populations been adjusted in light of access constraints?

2.3.3. [For IPs] What mechanisms have been established to receive and give feedback to affected populations?

2.3.4. [For IPs] Has you're your organisation shared project management successes and failures openly with MOs? If yes, what was the outcome of this sharing?

2.3.5. [or MOs] Have your IPs shared project management successes and failures openly with your organisation? If yes, what was the outcome of this sharing?

Recommendations

If you were to start again your project what would you do differently to gain better access?

If you were to start again your project what would you do differently to work in an access constrained situation?

Is there anything else we have not talked about, and you feel is important to mention?

XIII.3. Focus Group Discussions

Key Aid Consulting was commissioned to review *MOs'* ADH-funded joint appeal to the Syrian refugee crisis, and the extent to which limited or no direct access to target groups at the local level has affected project and programme strategies.

Specifically, we are looking at 1. What approaches, methods and strategies have been used by MOs to preserve access to target groups, and 2. Given the access constraints, to what extent have MOs been able to operate, across the project cycle, in an accountable and effective manner?

The purpose of this discussion is to gather your feedback on your experience as a MO implementing project with ADH MO. Your answers are completely anonymous and are important to help collect lessons and inform future programming. Participating or not participating in this interview will not be used to determine whether you will be considered for employment in the future or on the future partnership with ADH MO. The group discussion will last about 60 minutes.

Is everyone okay to participate? If not, there is no problem if you wish to leave now, or at any time during the discussion. You do not have to answer any question that you do not wish to answer.

When you organise the FGD be conscious of the time you are going to ask people to contribute. Be well prepared, know your questionnaire well and try to keep your group to a manageable size.

Data collection date				
Interviewer(s)				
Interviewees	#	Organisation	Position	Additional

Introduction

What activities took place as part of the joint appeal to the Syrian refugee crisis?

KEQ 1: What approaches, methods and strategies have been used by MOs and their IPs to expand or preserve access to target groups?

SQ 1.1 To what extent have MOs and their IPs put in place policies, programmes and processes for which the primary purpose was to expand or preserve access to affected populations?

1.1.1 How often does your organisation meet with local authorities and traditional leaders? What is the nature of this engagement? To what extent has it helped or not to expand or preserve access?

1.1.4 Have you already used humanitarian principles your organisation adheres to as a way to gain access? If so how? If not, why?

1.1.5 What strategies has your organisation put in place to increase acceptance among community members towards your organisation’s projects? What, in your opinion, are the key factors for community acceptance?

1.1.6 How have you shared roles and responsibilities between MOs and IP? To what extent has it helped or not to expand or preserve access?

Do you think your team composition is crafted to expand or preserve access (e.g., recruiting diaspora members, people from the affected areas)? Why?

1.1.7 How has your organisation ensured that it targets the ‘most vulnerable’ or ‘most appropriate’ target groups for its program? How has your organisation ensured the humanitarian principles of, for example, humanity, neutrality, and impartiality?



1.1.9 What are the main barrier gestures to COVID-19 you use while implementing the activities?

KEQ 2: Given the access constraints, to what extent have MOs and their IPs been able to operate, across the project cycle, in an accountable and effective manner?

SQ 2.1 Were MOs able to effectively and efficiently adapt their project management processes to situations of constrained access?

2.1.2 Has your organisation received training and CB from its ADH MO, specifically related to their project management capabilities and adherence to humanitarian standards?

2.1.3 To what extent are decisions made by those who are going to operationalise them?

SQ 2.2 What measures were taken to mitigate the risks associated with remote management?

2.2.7 Is there regular communication between your field and remote office staff?

2.2.8 If yes, do you consider this communication to be fluid and effective?

SQ 2.3 To what extent have IPs put in place strategies to deliver accountable assistance and promote a culture of open collaborative communication?

2.3.1. Has your organisation established systems for affected populations to participate in project design, implementation and monitoring? If yes, can you describe these systems?

2.3.2. How have tools used to communicate with affected populations been adjusted in light of access constraints?

2.3.3. What mechanisms have been established to receive and give feedback to affected populations?

2.3.4. Did you have the opportunity to share project management successes and failures openly with your MO? If yes, what was the outcome of this sharing?

Recommendations

If you were to start again your project what would you do differently to gain better access?

If you were to start again your project what would you do differently to work in an access constrained situation?

Is there anything else we have not talked about, and you feel is important to mention?

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