unicef
for every child

# Evaluation of UNICEF's Response to the Rohingya Refugee Crisis in Bangladesh

VOLUME ONE

**EVALUATION OFFICE**

unicef

for every child

# Evaluation of UNICEF's Response to the Rohingya Refugee Crisis in Bangladesh

VOLUME ONE

# Evaluation of UNICEF's Response to the Rohingya Refugee Crisis in Bangladesh

# CONTENTS

# ACRONYMS

| | |
|---|---|
| ACF | Action contre la Faim |
| C4D | Communication for Development |
| CCC | Core Commitments for Children in Humanitarian Action |
| CRC | Convention on the Rights of the Child |
| CwC | Communicating with Communities |
| EMOPS | Office of Emergency Programmes (UNICEF) |
| EPF | Emergency Programme Fund |
| FD | Foreign Donation |
| FSM | Faecal sludge management |
| HAC | Humanitarian Action for Children |
| HRP | Humanitarian Response Plan |
| JRP | Joint Response Plan |
| IASC | Inter-Agency Standing Committee |
| IOM | International Organization for Migration |
| ISCG | Inter Sector Coordination Group |
| IYCF | Infant and young child feeding |
| LCFA | Learning Competency Framework Approach |
| NGO | Non-governmental organization |
| REACH | Renewed Efforts Against Child Hunger and Undernutrition |
| ROSA | Regional Office for South Asia (UNICEF) |
| RUTF | Ready-to-use therapeutic food |
| SAM | Severe acute malnutrition |
| SMART | Standardized Monitoring and Assessment of Relief and Transition |
| UNDP | United Nations Development Programme |
| UNFPA | United Nations Population Fund |
| UNHCR | United Nations High Commissioner for Refugees |
| WASH | Water, sanitation and hygiene |
| WFP | World Food Programme |
| WHO | World Health Organization |

# PREFACE

Beginning in August 2017, hundreds of thousands of Rohingya men, women and children fleeing violence, the destruction of their homes and persecution in Myanmar, arrived on the beaches and paddy fields of Cox's Bazar in southern Bangladesh. The scale and speed of the refugee influx was overwhelming and in a matter of months it had created one of the largest and most densely populated refugee camps in the world. As described in this report, UNICEF immediately scaled up its response, providing life-saving services that reached many Rohingya children and their families in Bangladesh. In September 2017, the crisis was declared a Level 3 emergency by the UNICEF Executive Director.

In line with the UNICEF Evaluation Policy, which requires the UNICEF Evaluation Office to evaluate all of the organization's responses to Level 3 emergencies, the Evaluation Office undertook this independent evaluation of UNICEF's work in Cox's Bazar. This report contains lessons to improve the ongoing response, many of which have already been acted upon. It also contains lessons for the organization, as well as the wider humanitarian community, about responding to situations of rapid mass displacement and settlement. I am confident that it will contribute to improving UNICEF's work to serve children in Cox's Bazar and around the world.

This evaluation piloted 'Real-Time Evaluations Plus', an innovative approach in which the standard evaluation stages are compressed, an Evaluation Office staff member is embedded in the team and a more participatory approach is taken. This approach aims to produce evidence quickly enough to enable timely decision-making and to enhance the utility of the evaluation.

The Evaluation Office assembled a specialized team of independent consultants to conduct this work. I am grateful to Ed Schenkenberg, the team leader, for his dedication, professionalism and wisdom. I am also grateful to the team members, Richard Luff, Anne Bush, Francesca Ballarin and Sahjabin Kabir, for their excellent work. This evaluation would not have been possible without the support of UNICEF staff at all levels of the organization, including Jean Gough, Edouard Beigbeder, Sheema Sen Gupta, Shairose Mawji, Carlos Acosta and Jean Metenier. I would also like to thank Koorosh Raffii, who managed this exercise, Sam Bickel, who provided exceptional technical support and Laura Olsen for her contribution as an embedded team member. Finally, I would like to thank Celeste Lebowitz, Geeta Dey and Dalma Rivero who provided administrative support.

**George Laryea-Adjei**
Director of Evaluation
UNICEF

A student attends a class at a UNICEF-supported learning centre at the Balukhali makeshift settlement in Ukhia, Cox's Bazar, Bangladesh.

# EXECUTIVE SUMMARY

The magnitude and extreme speed of the latest influx of Rohingya refugees into Bangladesh, which began on 25 August 2017, is reminiscent of the Rwandans in Tanzania and (then) Zaire in 1994 and the Kosovars in Albania and Macedonia in 1999. At an average of 20,000 refugees per day in September 2017, the 700,000 Rohingya fled to one small stretch of land and created the world's largest and most densely populated refugee camp. Against this backdrop, local, national and international responders provided relief to the Rohingya, who had been victims of the most egregious human rights abuses in their native country, Myanmar. UNICEF responded to the newly arrived refugees with vital services, helping children and their families to survive. Committed to continually improving its work, UNICEF's Global Emergency Coordinator for the Rohingya crisis requested an evaluation of the organization's response.

This evaluation, which was commissioned and managed by the UNICEF Evaluation Office in New York, was conducted between March and October 2018 by five independent consultants with expertise in all programme areas under assessment, and with the support and direct involvement of staff from the Evaluation Office. Its primary purpose was to generate lessons to improve the ongoing response. The secondary purposes were to strengthen UNICEF's accountability and to assist UNICEF and the broader international humanitarian community to better understand how to respond in situations of rapid mass and forced displacement and settlement. The team used Real-Time Evaluation Plus, a new approach that the Evaluation Office is developing that combines elements of retrospective and formative evaluations with those of a real-time evaluation in order to deliver well-evidenced findings and conclusions in a short timeframe. The primary audience is UNICEF staff at headquarters, regional, country and field office levels, and this report may also be of use to the Government of Bangladesh, donor governments, other United Nations agencies and international, national and local partners.

The analytical framework used for the evaluation combined qualitative and quantitative evidence organized around the evaluation matrix that was developed during the inception phase. The evaluation criteria included appropriateness/relevance, timeliness, coverage, effectiveness, equity, gender and human rights. The data collection phase consisted of a) documentary review; b) key informant interviews with current and former UNICEF staff, implementing partners, sister United Nations agencies, government stakeholders and donors; c) focus group discussions with affected populations and community volunteers; and d) two online surveys for UNICEF's sector and implementing partners. It included a mission to Cox's Bazar, Dhaka and Kathmandu in April 2018. The team leader returned to Dhaka in June 2018 for a workshop with staff from the regional, country and field offices to discuss the preliminary findings, conclusions and recommendations.

The evaluation looks at UNICEF's response to the Rohingya refugee crisis in Bangladesh from the end of August 2017 to the end of April, when data collection ended. The analysis of how prepared UNICEF was for this influx, however, naturally looks at an earlier period. The evaluation covers UNICEF's preparedness, scale-up, advocacy, strategy and leadership of the sectors it is responsible for. It also assesses the strategy and implementation in all sectors in which UNICEF is working, including nutrition, health, water, sanitation and hygiene (WASH), child protection and education. The evaluation chose to look at Communication for Development (C4D), another UNICEF priority, in the context of the agency's work in the other five sectors, not as a standalone programme area. The evaluation also covers human resources, supply and funding functions, cross-cutting issues such as gender and inter-sectorality, as well as the quality and use of information to guide the response. It should be noted that although UNICEF's response to the Rohingya crisis extends beyond the borders of Bangladesh to Myanmar, as per the terms of reference, the focus of this evaluation was limited to evaluating the Level 3 response, which was only declared in Bangladesh.

# Findings

Overall, the evaluation team found that, despite the enormous challenges posed by this crisis, UNICEF rose to the challenge. The organization's services reached many Rohingya children and their families, which, undoubtedly, addressed their plight. The evaluation notes a range of impressive achievements in areas such as scaling up, advocacy, sector leadership, and, of course, service delivery. However, the evaluation also found critical challenges and identified several areas in need of improvement. The team understands that many of these improvements were set in motion in the weeks and months following the data collection phase, but these actions fall outside the timeframe under examination. In terms of the evaluation's task to generate lessons, it has produced a number of specific findings.

The evaluation found that UNICEF was somewhat under-prepared for the influx of refugees. This, however, must be understood in context: UNICEF had almost no information on which to base its preparedness actions. The lack of access to northern Rakhine State meant that UNICEF Myanmar, along with other United Nations agencies and non-governmental organizations (NGOs) in the country, had no intelligence about the situation. Despite and, in part, because of this under-preparedness, UNICEF's scale-up efforts were extremely impressive. UNICEF made significant progress in terms of increasing the number of staff in the field office; scaling up the programme responses as part of the sectors; taking on sector leadership responsibilities; and, most of all, bringing essential assistance and protection services to the Rohingya and host communities. The experience of and the approach taken by the leadership of UNICEF Bangladesh contributed to this, as did the existence of the Cox's Bazar field office and the well-established relationships with various governmental departments.

To assess UNICEF's advocacy, the evaluation team looked at UNICEF's work to improve the three most challenging aspects of the response: the ad hoc inter-agency coordination mechanism that has hindered response; the extreme congestion and lack of suitable land to host large numbers of refugees; and the absence of a protection framework that secures the rights of the Rohingya in Bangladesh. The evaluation found that UNICEF raised strong concerns about the coordination structure and was entirely right to do so. Whereas coordination should facilitate the delivery of services, the evaluation found that the lack of a clear structure that ensures accountability hampered the response. UNICEF's leadership raised its voice about this, though it should have raised these issues more formally at the level of the Inter-Agency Standing Committee (IASC). The evaluation also found significant evidence that UNICEF advocated for the need for more land in inter-agency meetings and meetings with donor representatives, either in Bangladesh or at the international level, which raised awareness on the issue. However, UNICEF did not document the impact of the congestion, which would have allowed for more evidenced-based advocacy. Finally, advocacy for the protection of the rights of Rohingya children was an integral part of UNICEF's work from the start, though the evaluation found its messages could have been more robust.

The evaluation found that UNICEF's **overall strategy** was missing key elements. First, the evaluation found little evidence that UNICEF adapted its strategy in light of the context, particularly the three major obstacles in the response (listed in the prior paragraph). Second, the evaluation found that UNICEF committed to a range of activities, but given the scale of the needs and the challenging context, some areas of work fell behind. Better and more explicit prioritization and sequencing might have alleviated this. Third, the overall strategy should have better articulated inter-sectorality, a term that signifies strong links across programme areas that enable programmes to work together to combine their services. Fourth, there were gaps identified in the overall strategy, namely, how UNICEF would address the protection risks to children and their families, such as abuse, exploitation, trafficking and gender-based violence. While these are now prioritized, they did not receive the attention they deserved at the outset. Similarly, gender was lacking in the initial overall strategy, which is concerning given the extremely gendered dimensions of this crisis. Finally, it should be noted that although UNICEF's strategy could be discerned from a collection of various materials, the evaluation team did not find a document that articulated UNICEF's overall strategic

Mustakima, 25, holds her son as he has his upper arm measured, indicating that he is suffering from Severe Acute Malnutrition (SAM) at an Outreach Therapeutic Center (OTP) in Balukhali makeshift camp, Cox's Bazar District, Bangladesh.

© UNICEF/UN015413/BROWN

vision, its main plans in service delivery, its advocacy and communications work, intersectoral approach, the technical support it might need from the regional office and Headquarters and the technical support it would provide to partners. The Humanitarian Action for Children (HAC) appeal and UNICEF's response plans appear to be more a collection of sector-specific work plans and their corresponding funding gaps than a strategy.

In terms of **programme strategies,** the child protection strategy was highly relevant, though it could have been informed by a better context analysis. Positive progressive adjustments were made to address emerging and evolving risks, such as child marriage, child labour, sexual exploitation and trafficking. The education strategy, inferred from various documents, shows that UNICEF decided to work with the authorities to put together a

condensed basic three-level bilingual learning package, while developing an ad hoc learning package to respond to the educational needs of children aged 5 to 14. This was sensible in that it paves the way for longer-term achievements, including the recognition and accreditation of education for Rohingya. However, UNICEF's failure to integrate the critical life-saving aspects of an education-in emergencies approach into its response represents a significant missed opportunity, as does its inadequate attention to adolescent education.

The health strategic and programmatic choices were appropriate and relevant to the requirements set by the prevailing context. The addition of social mobilization and community engagement (in collaboration with the C4D section) and supporting inter-agency coordination in the health sector in November 2017 also appropriately

Friends at a UNICEF-supported child-firnedly sapce in the expansion zone of the Kutupalong makeshift settlement in Ukhia, Cox's Bazar, Bangladesh.

© UNICEF/UN015610/SUJAN

reflected the evolving situation. Likewise, in nutrition, the programmatic choices were appropriate and relevant to the needs of the population, as evidenced by the results of the emergency Standardized Monitoring and Assessment of Relief and Transition (SMART) surveys conducted between October and November 2017. Similarly, the WASH strategy was relevant and appropriate. However, the faecal sludge management (FSM) strategy was somewhat vague and underestimated the complexity of this area of work in the Rohingya context.

Regarding the **effectiveness, timeliness and quality of programming**, the evaluation found that UNICEF reached many of the programme targets and stated objectives in each of the five sectors. This is to be commended. However, some areas of programming have fallen behind. UNICEF's response in the first months was aimed at the rapid delivery of life-saving services focusing on high coverage. This approach was appropriate to reaching the affected populations. But with quantity, quality must

follow suit, which did not happen in all programmes. Some of the reasons for this were outside of UNICEF's control, for example, the extreme congestion, the speed of the influx and the almost non-existent infrastructure. Other factors included gaps or delays in recruiting key staff positions, lack of implementing partner capacities and some inter-agency competition. Effectiveness could have been better ensured had inter-sectorality been better addressed. Quality could also have been improved with a more robust rights-based approach. Indeed, the quality aspects of the Core Commitments for Children in Humanitarian Action (CCCs) and the Sphere Minimum Humanitarian Standards and companion standards derive from the fact that they are rights-based. Finally, UNICEF needs to strengthen services that address protection, gender and gender-based violence.

Although the clusters have not been formally activated, UNICEF leads or co-leads several of the sectors or sub-sectors, which are similar to the cluster model.

EXECUTIVE SUMMARY

Sector partners, including the Government, donor representatives, United Nations agencies and international and national NGOs, reported that UNICEF has performed well in **leading the sectors** by providing a platform for coordination. They also see progress towards developing strategic priorities, standards and technical guidance. The factors that could contribute to better sector leadership in Cox's Bazar vary from sector to sector. The evaluation found problems in nutrition related to the lack of continued staffing; in child protection and education related to the lack of an integrated, inter-sectoral approach; and in education related to the lack of a partnership approach in which UNICEF contributes to, but does not dominate, the sector.

The evaluation also looked at several **cross-cutting issues**. As noted, with some exceptions, gender mainstreaming aspects were insufficiently considered and implemented in the first several months. Overlooking or ignoring gender mainstreaming in the implementation of emergency services is reminiscent of the failures of the humanitarian sector in the past. Programming to address gender-based violence was critically delayed, in part because UNICEF was not the lead agency in this area of work. While plans were eventually made to address this, the evaluation found clear evidence that the implementation of gender-based-violence-related services was lacking until at least February 2018. In UNICEF, gender-based violence falls under the auspices of child protection, which, in a crisis such as this, risks that it does not receive the strategic importance it requires. In terms of C4D, while the evaluation did not cover a review of C4D in this response, it has seen a number of positive examples of the engagement of C4D with the sectors. The evaluation found that UNICEF recognized the need to step up its work for host communities and did so appropriately.

Compared with other emergency situations, there has been no lack of **data**. Yet the evaluation found that data collection is too focused on coverage and the number of people reached and not enough on quality. Different data collection systems (those used by the sector and those used by UNICEF) are running in parallel and do not easily allow for data analysis. Finally, advice from consultants and visiting staff was not always adequately absorbed.

UNICEF partners primarily with national NGOs, in line with the Government's preference and the localization agenda. However, UNICEF's partners were not equipped to keep pace with the work required. Despite UNICEF's extensive efforts to build capacities, it has not been able to provide adequate training, though NGO partners reported they felt supported. The evaluation team identified an opportunity for building the capacities of UNICEF's national and local partners around the normative framework for refugee response. On the process side, contracting was smooth and funding arrived on time. Partners found the reporting requirements were burdensome early in the response, with noted improvements over time.

The evaluation also looked at the performance of supporting functions, such as **human resources, funding and supply**. UNICEF deployed a significant number of staff from the Dhaka office, other Bangladesh field offices and from its surge capacity, in a timely manner. Overall, this is to be commended, though there were some gaps in staffing and, as in all emergencies, staff turnover was a challenge. In general, the evaluation team observed an over-burdened field office and a growing disconnect between the Dhaka office and the field office. Funding was a challenge only in the early days of the response, which UNICEF overcame, in part due to Emergency Programme Fund (EPF) loans. While the supply function has been stretched, and could have benefited from additional surge capacity, especially in the early part of the response, overall, it worked well.

The evaluation found that UNICEF took the 2018 monsoon preparedness very seriously and did what it could to put plans in place. In several ways, monsoon preparedness has helped accelerate key actions that have contributed to an improved response overall.

## Recommendations

The recommendations presented below follow from the evaluation's findings and conclusions. They outline the main priorities for improving UNICEF's response to this crisis and, where relevant, UNICEF's response to emergencies more generally.

1.  INFORMATION AND ANALYSIS FOR PREPAREDNESS

The evaluation recommends that UNICEF invest in collecting better political, social and economic intelligence for forecasting to inform its preparedness actions. The intelligence should be cross-border (and, where necessary, cross-regional), include local context and, where possible, be shared with other agencies. It is also recommended that the intelligence be translated into risk analysis and preparedness plans. [*For action by: UNICEF Regional Offices under the leadership of UNICEF Headquarters*]

2.  COORDINATION

    a.  Raise the findings from this evaluation with the Senior Executive Group and the ISCG. Linked to other initiatives to strengthen coordination, UNICEF should work with the resident coordinator and the head of the ISCG to clarify lines of accountability and relationships, including the roles of sector leads with their home agencies and with the inter-agency coordination structures. [*For action by: UNICEF Bangladesh and the Cox's Bazar field office*]

    b.  Share the relevant findings from this evaluation about coordination with the IASC and promote the inclusion of the future of the refugee coordination model on the IASC agenda. In this process, review accountability issues in this model and make use of the cluster approach experiences. [*For action by: Office of Emergency Programmes (EMOPS)*]

3.  CONTEXT ANALYSIS FOR PLANNING AND ADVOCACY

The evaluation recommends that UNICEF document the specific ways in which the congestion has impacted its ability to deliver and has ultimately denied Rohingya children and their families their rights. This work should inform UNICEF's future strategies to respond to this crisis, be used to support UNICEF's continued advocacy in this area, by providing a stronger position grounded in evidence. [*For action by: UNICEF Bangladesh with support from the Regional Office for South Asia (ROSA)*]

4.  STRATEGY

    a.  Review UNICEF's strategy for 2019 and beyond. Ensure it includes an analysis of the context (in line with recommendation 3), identifies existing and potential issues and obstacles and explains how the strategy will address these. Be explicit about prioritizing and sequencing activities. [*For action by: EMOPS, the Programme Division, ROSA and UNICEF Bangladesh*]

    b.  Review how strategies for Level 3 emergencies are informed, developed and adjusted throughout a response. [*For action by: EMOPS*]

5.  RIGHTS, PROTECTION, GENDER AND GENDER-BASED VIOLENCE

    a.  Review UNICEF's guidance on advocacy in emergencies. The review should consider UNICEF's comparative advantage as an advocate for children in crisis contexts, how to maximize the relationship between operational response and advocacy, and UNICEF's advocacy position in relation to other actors. [*For action by: EMOPS*]

    b.  Strengthen efforts to address protection risks, including gender-based violence. In so doing, it is recommended that the relevant offices strengthen and deepen inter-sectoral work among all programme sections and ensure attention to psychosocial support, children with disabilities and similar other risks and vulnerabilities. [*For action by: UNICEF Bangladesh with the support of ROSA and the Programme Division*]

    c.  Strengthen efforts to mainstream gender in all aspects of UNICEF's response. Ensure gender is integrated across all sectors (and that all of the actions from the ISCG Gender Matrix have been implemented). [*For action by: UNICEF Bangladesh with the support of ROSA and the Programme Division*]

    d.  Develop a position on the relocation of Rohingya children to Bhasan Char island and their return to Myanmar from a normative perspective and ensure that this position is framed in a set of advocacy messages in coordination with other United Nations agencies. [*For action by: UNICEF Bangladesh with the support of ROSA and EMOPS*]

6.  POSITIONING OF C4D

Review the extent to which C4D fits (better) within the humanitarian community's work on engaging with

Rohingya refugee attends a class at a UNICEF-supported learning centre at the Balukhali makeshift settlement for Rohingya refugees in Ukhia, Cox's Bazar, Bangladesh.

communities in emergency situations and assess the nature of investments needed. [*For action by: EMOPS and the Programme Division*]

### 7. INNOVATION, OUT-OF-THE-BOX THINKING AND NEXT STEPS

a. Experiment with innovative ways of building the capacities of its partners, for example, by seconding staff members for financial management, peering and mentoring rather than training. This should include capacity building on protection and rights issues. [*For action by: UNICEF Bangladesh with the support of ROSA and the relevant HQ Divisions*].

b. Due to the layout of and congestion in the camps, the densely-populated space in the highly rural environment, and the initial lack of design for pit emptying, the issue of FSM is extremely complex. Working with the sector, UNICEF and other key stakeholders should experiment with new ways of addressing this issue by engaging the private sector and universities. [*For action by: the Programme Division, the Supply Division, ROSA and UNICEF Bangladesh*]

### 8. INTEGRATED PROGRAMMING AND WORKING ARRANGEMENTS

a. The evaluation recommends that UNICEF undertake a light management review that would consider the reallocation of roles and responsibilities between the Dhaka and Cox's Bazar offices and promote staff work across programmes. This review should also examine how an education-in-emergencies approach can forge closer programmes linkages through the education programme. [*For action by: UNICEF Bangladesh*]

b. Ensure that the revision of the CCCs looks at strengthening inter-sectorality and builds links between UNICEF programme areas. [*For action by: EMOPS*]

### 9. KNOWLEDGE MANAGEMENT AND DATA

a. Further invest in knowledge management. This could include developing a standard format for reports made by visiting advisers and setting up a system for monitoring the implementation of their recommendations or adapting the Emergency Management Team's Action Tracker system. [*For action by: the Emergency Management Team and UNICEF Bangladesh with the support of ROSA*]

b. Review the commonalities and differences of the information and data needed at the programme level and the sector level and ensure that these datasets are compatible from the onset of data collection. [*For action by: UNICEF Bangladesh with support from ROSA*]

In Bangladesh, a Rohingya refugee carrying a large bundle of kindling, makes the long walk back to her family's shelter in a Balukhali makeshift settlement in Cox's Bazar district. She chopped the firewood in a jungle area located quite a distance from the camp.

# PART ONE:
# INTRODUCTION AND CONTEXT

# 1.1 Introduction

Cox's Bazar District, one of the poorest areas of Bangladesh, has been the scene of several mass influxes of the Rohingya Muslim minority from Myanmar, including in the late 1970s and early 1990s. Since mid-August 2017, a record number of more than 700,000 refugees have arrived. Adding this number to those Rohingya who arrived before August 2017, it is estimated that there are approximately 900,000 refugees in camps and settlements.[1] As the presence of these refugees have put the environment and local residents under huge strain, the United Nations has estimated that 1.3 million people are in need of urgent humanitarian assistance, including critical life-saving interventions.[2] Some 703,000 of them are under 18 years old.[3]

At the request of the Government of Bangladesh, several United Nations agencies, together with their government counterparts, international and national non-governmental organizations (NGOs), local civil society groups and others, began to respond to the urgent needs of the Rohingya and their host communities. UNICEF reacted to the influx immediately, announcing that it would scale up its response, and assumed responsibilities in nutrition, health, water, sanitation and hygiene (WASH), child protection and education. The organization formally activated a Level 3 emergency response on 20 September 2017. It also published a Humanitarian Action for Children (HAC) appeal and a revised response plan in October 2017 to address the immediate and urgent needs of affected Rohingya children, women and adolescents. The HAC appeal outlined how UNICEF would reach 716,000 people with interventions in nutrition, health, WASH, child protection, education and Communication for Development (C4D)/ community engagement and accountability.

UNICEF leads the coordination of the nutrition sector and the child protection sub-sector. It co-leads the education sector with Save the Children and, with Action contre la Faim (ACF), is part of the leadership of the WASH sector in support of the Government of Bangladesh Department for Public Health Engineering. It has also taken a very prominent role in carrying out a number of critical health-related activities, such as vaccinations. Much of UNICEF's work in these sectors aims to provide life-saving assistance and protection, which have been critical to the survival of the Rohingya, one of the most persecuted minorities in the world.

Per UNICEF's revised Evaluation Policy, the UNICEF Evaluation Office in New York is responsible for undertaking an evaluation of UNICEF's responses to all Level 3 emergencies. Commissioned in March 2018, this evaluation takes stock of UNICEF's achievements from the end of August 2017 to April 2018 – the first eight months of the response – and identifies actions to enhance the effectiveness and quality of its response. It contains and combines elements of a retrospective programme evaluation and a formative evaluation, and also has characteristics of a real-time evaluation.

## PURPOSE AND OBJECTIVES

The primary purpose of this evaluation is to generate lessons to improve the ongoing response. The secondary purposes of this evaluation are to strengthen UNICEF's accountability and to assist UNICEF and the broader international humanitarian community to better understand how to respond in situations of rapid mass and forced displacement and settlement. (see Annex 1 for the complete terms of reference).

In line with these overall objectives, the evaluation has worked towards three more specific objectives:

a. To assess the adequacy of the UNICEF response in providing humanitarian assistance to vulnerable people who reside in camp settings and are integrated within Bangladeshi communities and in host communities;

b. To determine how well UNICEF is working with implementing partners, other agencies and the

---

1    Inter Sector Coordination Group, 'ISCG Situation Report: Rohingya refugee crisis, Cox's Bazar', ISCG, 24 May 2018. The United Nations estimate stands at more than 905,000 refugees, while the Government of Bangladesh has counted 878,596 refugees.

2    United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No. 32 (Rohingya influx)', UNICEF, 20 May 2018.

3    United Nations Children's Fund, 'Bangladesh', *Humanitarian Action for Children 2017*, UNICEF, May 2018.

Government, for both the near- and medium/long-term; and

c. To identify actions to improve the response.

The terms of reference further breaks down these objectives into 10 overarching evaluation questions that were slightly modified during the inception phase (*see Annex 2 for a description of these modifications*). This report is organized around the evaluation questions.

The primary audience for this report is UNICEF. This includes UNICEF Headquarters, the UNICEF Regional Office for South Asia, UNICEF Bangladesh and the Cox's Bazar field office. The report will also be available on the public website of the UNICEF Evaluation Office. Thus, the report may be accessed by the Government of Bangladesh, donor governments, United Nations agencies and international and national NGO partners.

## SCOPE

### Programmatic scope

The evaluation covers UNICEF's preparedness, scale-up, advocacy, strategy and leadership of the sectors it is responsible for. It covers all sectors in which UNICEF is working. This includes: nutrition, health, WASH, child protection, education and C4D. However, it should be noted that the team chose to look at C4D in the context of UNICEF's work in the other five sectors, in part because C4D cuts across all sectors. In addition, much of UNICEF's C4D work takes place under the umbrella of Communicating with Communities (CwC), an inter-agency group that is currently being evaluated separately. Finally, there were neither adequate resources nor time to undertake an in-depth analysis of C4D as a standalone sector.

The evaluation also covers cross-cutting issues, such as gender and inter-sectorality, as well as the quality and use of information to guide the response. While this is an evaluation of UNICEF's response, the evaluation team considered UNICEF's response within the broader context as well. As per the terms of reference, however, issues related to repatriation were excluded.

### Operational focus

The evaluation covers supply, funding and human resources. In a deviation from the original terms of reference, the evaluation includes UNICEF's preparation for monsoon season. In another deviation from the terms of reference, it does not investigate whether accountabilities among offices were clear (question 6a in the terms of reference). At the inception phase, this question was dropped with the permission of the Evaluation Office.

### Geographic and population focus

The geographic focus of the evaluation is Cox's Bazar, particularly the makeshift camps and host communities located in Leda, Kutupalong, Shamlapur, Balukhali, Ukhia and Teknaf. This includes Rohingya who have arrived since 2016, those who reside in camp settings, those integrated within Bangladeshi communities and vulnerable host communities in identified locations.

UNICEF's response to the Rohingya crisis extends beyond the borders of Bangladesh to Rakhine State in Myanmar. However, as per the terms of reference, the focus of this evaluation was limited to evaluating the Level 3 emergency response that was declared only in Bangladesh.[4]

### Temporal focus

The evaluation focused primarily on the response from the end of August 2017 when the influx of Rohingya into Cox's Bazar increased dramatically, to the end of April, when the data collection ended. The analysis of how prepared UNICEF was for this influx, however, naturally looks at planning conducted in early 2017.

## METHODOLOGICAL APPROACH

The team used Real-Time Evaluation Plus, a new approach to evaluation that combines elements of a retrospective and formative evaluation with those of a real-time evaluation, with the intention of delivering findings and conclusions in a short timeframe. The basis of this approach, which is new for UNICEF, is informed by some of the Organization for Economic Co-operation and Development-Development Assistance Committee criteria (i.e., relevance, appropriateness, connectedness,

---

4    To get a sense of some issues, however, such as the information exchange at the time of the influx, the evaluation team held Skype calls with UNICEF Myanmar.

coherence, coverage, effectiveness, efficiency and impact), and also borrows from other types of exercises and data collection tools. This new type of evaluation looks at the past to understand the course of events and the history of a response. At the same time, it involves direct observation and consideration of future scenarios and planning.

The analytical framework combines qualitative and quantitative evidence organized around the evaluation matrix (*see Annex 3*), which was approved during the inception phase. The matrix is organized around the 10 evaluation questions described in the terms of reference (*see Annex 1*). Some questions explicitly state the criteria covered, while for others, the criteria were implied. The criteria used include: appropriateness/relevance, timeliness, coverage, effectiveness, equity, gender and human rights. The matrix outlines the standards used to assess the response. UNICEF's Core Commitments for Children in Humanitarian Action (CCCs) played a central role as an analytical framework for the evaluation. The team undertook an extensive review of the way in which the CCCs for nutrition, health, WASH, child protection and education were applied in the response (*see Annex 4*). Where a Commitment did not cover all issues of concern, the team complemented the analysis with other standards, such as the Sphere Minimum Humanitarian Standards, the Inter-Agency Network of Education in Emergencies Minimum Standards and the Minimum Standards for Child Protection in Humanitarian Action.[5]

These standards provide references for what the responses in the various sectors should achieve. They are less suitable to be used as accountability benchmarks to measure performance for two reasons. First, the standards have a collective character. Their realization is dependent on a range of factors, often beyond the control of a single organization. Second, the standards are inter-dependent and should be seen in conjunction with each other. When one standard is not followed, other standards are affected. The standards do, however, serve as excellent benchmarks in terms of advocacy objectives as it is often other factors, such as the context or actions of the Government or donors, which enable or hinder the realization of the standards.

To review coordination, the team made use of the Principles of Partnership and looked at the Cluster Coordination Performance Monitoring tool and related inter-agency guidance materials such as the Humanitarian Programme Cycle. Strictly speaking, the cluster materials were not applicable since the clusters had not been activated. In terms of evaluating UNICEF's strategy and response, the team looked at UNICEF's (revised) response plans, the HAC documents, the Humanitarian Response Plan (HRP) and the Joint Response Plan (JRP). It also looked in detail at the specific programme and sector strategies. It should be noted that developing a theory of change ex-post to evaluate the response was neither appropriate nor feasible.

## Data sources

The team collected documentary evidence, including response plans, guidance, needs assessments, planning documents, terms of reference, relevant emails, meeting minutes, funding data, partnership agreements, human resources data, press releases, advocacy material and supply data, among others. The team also used a timeline to understand the course of events and the actions that UNICEF took in anticipation or in response.

The evaluation team also conducted semi-structured key informant interviews with UNICEF staff at Headquarters, the Regional Office and country and field offices, including staff who played key roles in the first months of the response. Interviews were also conducted with UNICEF partners, including staff from the Government, other United Nations actors and agencies, NGOs and donors. The team used purposive sampling strategy to identify key informants (both expert sampling and snowball sampling). In total, the team interviewed approximately 200 key informants (*see Annex 5 for a list of interviewees*). In several instances, the team noticed that the issues they raised were already under discussion or the programme or sector was already developing plans to address the issue. This is a key feature of a real-time evaluation.

---

5    These latter standards (Inter-Agency Network for Education in Emergencies Minimum Standards and the Minimum Standards for Child Protection in Humanitarian Action) are also Sphere companion standards.

The evaluation team collected data through 13 focus group discussions with affected populations and community volunteers. The focus group discussions were not meant to be representative. Purposive sampling was used in an effort to collect data from different areas of the camps.

Finally, the team conducted two online surveys with UNICEF's sector and implementing partners. The surveys were sent to all sector and implementing partners working in nutrition, health, WASH, child protection and education.

The information and data obtained from the different data sources listed above were regularly triangulated for accuracy so as to strengthen the observations and provide explanations for answering the evaluation questions. *See Annex 6 for more information on the data collection tools used in the evaluation.*

### Utility focus/process

Real-Time Evaluation Plus is a modified approach to evaluation based on a new paradigm introduced by the Director of the Evaluation Office that necessitates a full draft report within four months of the time the evaluation team is contracted. The modified approach includes embedding a UNICEF staff member with a background in evaluation, but who is independent from the response, within the evaluation team. Thus, the evaluation design does not follow a classic evaluation methodology, but draws from several models and evaluation concepts, particularly real-time reviews. As such, the phases of more traditional evaluations have been compressed into three main phases: 1) scoping, inception and preliminary data collection; 2) data collection, analysis and sharing of (preliminary) findings; and verification, 3) report writing, recommendation development and dissemination.

With the goal to capture lessons and make conclusions that will be used to strengthen an ongoing response, the evaluation was designed with a strong utilization focus, with ample interaction between the evaluation team and UNICEF staff. This involved regular exchanges, briefings and workshops that took place at various intervals throughout the process.

In April 2018, the evaluation team undertook a combined inception and data collection mission to Cox's Bazar and Dhaka in Bangladesh and to Kathmandu, Nepal. During the mission, the team prepared and circulated an inception report, and at the end of the mission, the team presented its first impressions and preliminary findings. Three weeks later, in online events, the evaluation team presented draft findings, conclusions and recommendations in relation to UNICEF's overall response and its response in the sectors that were the subject of the evaluation. The findings and conclusions were refined, taking into account the feedback received during the online events. A workshop was held in Dhaka in June with staff from the regional, country and Cox's Bazar field offices to discuss and further develop the recommendations and encourage the uptake and use of the findings. In August, the first fully developed draft of the evaluation report was ready. The evaluation was also guided by the work of a reference group composed of UNICEF staff from across the organization.

### ETHICAL CONSIDERATIONS

All evaluation team members signed the United Nations Evaluation Group Code of Conduct for Evaluation in the United Nations System, which commits signees to independence, impartiality, proper disclosure of conflicts of interest, honesty and integrity, among other principles.[6] Because this evaluation included data collection from vulnerable groups, the inception report and the data collection tools were reviewed and approved by an external review board. This ensured proper protocols were in place for informed consent, data protection, safeguards to protect the rights of vulnerable subjects, etc. *See Annex 7 for the official research ethics approval.*

### OPPORTUNITIES AND LIMITATIONS

As mentioned above, a distinct characteristic of the Real-Time Evaluation Plus is the combination of two types of evaluations: a traditional programme evaluation and a real-time evaluation, with the emphasis on the latter. Such a combination has the benefit of assessing the response in the first months, which has helped the evaluation team understand the level of progress that has been made against planned results. In addition, the real-

---

6    United Nations Evaluation Group, 'UNEG Code of Conduct for Evaluation in the UN System', UNEG, March 2008, <www.unevaluation.org/document/detail/100>, accessed 2 November 2018.

time approach, in which the data collection is done rapidly based on direct observation and key informant interviews, provides instant input on current issues and priorities for an ongoing operation. Changes or course corrections in the response may be triggered or accelerated by the dialogues and exchanges that occur during the evaluation. A Real-Time Evaluation Plus is about process, progress against targets and, to a certain extent, results; and less about proving attribution, causality or impact analysis.

It should be noted that the Real-Time Evaluation Plus approach carries a certain number of challenges, the most significant of which is the need to consider past, present and future issues and activities in parallel and in a relatively short timeframe. The very wide scope also means that the evaluation team has had to balance a number of different types of expectations, ranging from the desire, on behalf of operational line management, to see adequate top-line recommendations, to the need for detailed considerations and advice at the specific programme or sector level.[7] To ensure that the evaluation manages to go both 'wide' and 'deep' in its findings, in addition to this report, the evaluation team also shared their sector-specific internal notes with UNICEF. These provide more detailed findings, conclusions and recommendations.

The team also encountered a few practical challenges. First, while UNICEF Bangladesh has gone to great lengths to provide the evaluation team with all relevant documents, for some programme areas, the materials came late despite multiple requests from the start of the evaluation. Second, as in every humanitarian emergency, staff turnover has been significant. There was also turnover of staff working in organizations that are partners of UNICEF. To mitigate this, the evaluation interviewed nearly all senior UNICEF staff who played leading roles in the overall or programme/sector management from the beginning of the response through May 2018. Third, the evaluation team was made up of experts with profiles to match the areas in which UNICEF has responsibility (*see Annex 8 for the composition of the team*). One team member with

expertise in health and nutrition joined the team after the other team members had already begun collecting data. This interfered with the team's ability to collaborate and constrained feedback sessions with UNICEF staff for the presentation of the inception report and first impressions. To address this, the team held regular virtual meetings.

## STRUCTURE OF THE REPORT

The report starts with an introduction and a description of the context (sections 1.1 and 1.2). Part Two (sections 2.1-2.10) contains the evaluation findings. Section 2.1 analyses UNICEF's preparedness and scale-up; section 2.2 assesses UNICEF's advocacy; section 2.3 examines the appropriateness of UNICEF's overall and sector-specific strategies; section 2.4 assesses the effectiveness, coverage, timeliness and quality of the response; section 2.5 looks at UNICEF's leadership in the four sub-/sectors it co-/leads; section 2.6 contains the findings related to cross-cutting issues such as gender, C4D/accountability to affected populations, inter-sectorality and host communities; section 2.7 assesses the quality and use of information; section 2.8 focuses on partnerships; section 2.9 assesses how well the response was supported by operations and management; section 2.10 looks at monsoon preparedness. Part Three contains sections on the future of the response (section 3.1) and conclusions and recommendations (section 3.2). The recommendations, many of which were discussed at the June workshop in Dhaka, are high-level. The more detailed, sector-specific recommendations are contained in the teams' sectoral notes and were shared with UNICEF.

## 1.2 Context
### AN UNPRECEDENTED INFLUX

The massive influx of refugees into Bangladesh, which started on 25 August 2017, followed a brutal crackdown on ethnic Rohingya villages and areas in northern Rakhine State, Myanmar. This crackdown reportedly came in retaliation for a number of attacks by Rohingya militants on several military and police stations. According to United Nations human rights experts, the retaliation amounts to

---

7    For reasons of clarity, as much as possible, the evaluation uses the term 'programme' to refer to UNICEF's work and the term 'sector' to refer to the coordination structure for the various programmatic areas (i.e., nutrition, health, WASH, child protection and education.

On 19 September 2017, an aerial photograph of Kutupalong makeshift camp for Rohingya refugees in Cox's Bazar district in Bangladesh.

© UNICEF/UN0135715/NYBO

"a textbook example of ethnic cleansing" and "bears the hallmarks of genocide."[8] Examples of the documented atrocities that have taken place in northern Rakhine State since August 2017 include systematic torture and intentional killing; the burning of homes, religious buildings, businesses and crops; widespread rape of women and girls; and the targeting of children.[9]

The sudden-onset influx happened when many staff of international and national organizations were preparing to start their holidays for Eid al-Adha the following week. In the days after 25 August 2017, thousands of Rohingya assembled or were stranded near the border with Bangladesh. International media outlets showed images of long lines of destitute, highly traumatized people, many with fear fresh in their eyes and a number of them with bullet wounds. Several interviewees with long-standing experience in Bangladesh noted that they initially thought

that the events of late August would be similar to those of October 2016, when violence in Rakhine caused 74,000 Rohingya to flee.[10] But this time, the pace and scale were much different. In the three weeks between 25 August and 15 September, nearly 410,000 new arrivals were recorded, including 240,000 children. An average of close to 20,000 refugees arrived daily in a rural area with very few facilities to support them, a daily rate that has rarely been seen anywhere in the world in the past few decades.

In this context, much of the initial (overall) response to the refugee influx – including many of the efforts of Bangladeshi civil society and the refugees themselves – was improvised and spontaneous. With thousands stuck alongside the main roads for days, the military directed many of the refugees to the existing camps of Kutupalong and Nayapara. Others, however, went to the makeshift settlements of Leda or Balukhali. These

---

8    'UN Human Rights Chief Points to 'Textbook Example of Ethnic Cleansing' in Myanmar', *UN News,* 11 September 2018, <https://news.un.org/en/story/2017/09/564622-un-human-rights-chief-points-textbook-example-ethnic-cleansing-myanmar>, accessed 2 November 2018; and 'Myanmar: UN Expert Calls for Accountability Over Violence in Rakhine State', United Nations Human Rights Office of the High Commissioner, Geneva, 12 March 2018, <www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=22793&LangID=E>, accessed 2 November 2018.

9    Human Rights Council, Report of the Special Rapporteur on the Situation of Human Rights in Myanmar, A/HRC/37/70, 9 March 2018, pp. 10-12.

10   United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No. 1', UNICEF, May 2017.

camps were effectively spontaneous self-settlements with refugees jostling to find space and cutting their own terraces into hillsides and erecting bamboo shelters. These efforts were supported by well-meaning but ad hoc interventions from various actors who installed poor-quality wells and latrines and provided low-quality plastic sheeting in an uncontrolled and uncoordinated manner. By early October, when around 510,000 new arrivals had been recorded, refugees were scattered across a dozen sites with some staying with host communities in Cox's Bazar, Ukhia and Teknaf.

Between 25 August 2017 and 10 May 2018, the number of refugees in camps and settlements grew to more than 900,000.[11] The majority of these refugees are staying in what is now generally referred to as the 'mega camp' – a merged site that includes Kutupalong camp and Balukhali settlement, plus extensions, where 623,000 refugees are located. This camp is now Bangladesh's fifth largest city.[12]

## EXTREME URBAN-LIKE CONGESTION IN A HIGHLY RURAL ENVIRONMENT

The speed and scale with which refugees arrived in Bangladesh made it impossible for authorities and agencies to prepare the area. The area south of Cox's Bazar is largely rural, farm and forest land with hills covered by dense woodlands, lush vegetation and trees. Due to the enormous refugee influx and the decision by the authorities to direct most of the refugees to the Kutupalong-Balukhali area, the area has been emptied of its vegetation and denuded of its tree cover. The refugees' need to find space for their shelters and gather firewood further exacerbated the situation. It has been estimated that a forest area the size of three to five football fields is felled every day.[13]

Due to the limits that the Government has put on available land, camp population density is extreme. While 45 square metres is the emergency standard for the average camp area recommended for each person in a situation of a temporary, planned or self-settled camp setting, in the densest parts of the camps the area per person is 8 square metres.[14] As a result of this extreme congestion, many of the standards and indicators that have been carefully crafted since the late 1990s to ensure a minimum level of quality in humanitarian responses, have not been followed or met.[15] Although some roads have been constructed, in most of the camps, there are hardly any roads, which makes it extremely difficult to achieve an even distribution of services. The soil can become very slippery with little rainfall, and most of the shelters are built on steep hills. An estimated 215,000 refugees are at immediate risk of landslides due to the deforestation.[16] Another consequence of deforestation in the area, particularly in the hillsides, is that the elephants, which used this area as a habitat corridor and migration route to find food and shelter, have nowhere to go. There have been some instances of wild elephants going on the rampage and killing refugee children.[17]

## PREVIOUS INFLUXES OF ROHINGYA IN BANGLADESH

The influx that started on 25 August 2017 was not the first time that large numbers of Rohingya have arrived in Bangladesh. In the decades since its independence in 1971, the country has seen waves of Rohingya arrive in the late 1970s (1977–1978) and early 1990s (1991–1992), when 200,000 and 250,000 refugees entered, respectively.[18] Reports of the early 1990s influx refer to episodes of forced returns when the Government decided that it was time for the Rohingya to return in September 1992.[19] Following a large survey of the refugees' level of information, several

11   Inter Sector Coordination Group, 'Situation Report: Rohingya refugee crisis', ISCG, 10 May 2018.

12   World Population Review, 'Populations in Cities in Bangladesh (2018)', <http://worldpopulationreview.com/countries/bangladesh-population/cities/>, accessed 2 November 2018.

13   United Nations Environment Programme, 'A Precarious Environment for the Rohingya Refugees', UNEP, 14 May 2018, <www.unenvironment.org/news-and-stories/story/precarious-environment-rohingya-refugees>, accessed 2 November 2018.

14   See Inter Sector Coordination Group, 'JRP for Rohingya Humanitarian Crisis March-December 2018', ISCG, 2018, p. 13; and United Nations High Commissioner for Refugees, 'Camp Planning Standards (Planned Settlements)', in *Emergency Handbook*, 4th edition, UNHCR, 2015.

15   This applies in particular to the Sphere Minimum Humanitarian Standards in the sectors such as shelter and WASH.

16   Inter Sector Coordination Group, 'Monsoon Preparedness and Response: Cox's Bazar Rohingya refugee crisis', ISCG, 13 June 2018.

17   *Why are Elephants Wrecking a Refugee Camp*, video, BBC News, 4 May 2018, <www.bbc.com/news/av/world-asia-43991691/why-are-elephants-wrecking-a-rohingya-refugee-camp>, accessed 5 November 2018.

18   See, for example, Human Rights Watch, 'Burma/Bangladesh, Burmese Refugees in Bangladesh: Still no durable solution', HRW, vol. 12, no. 3, 2000, p. 8.

19   Ibid.

NGOs working in Cox's Bazar at the time found that the repatriation did not fulfil the criteria of voluntariness. While it has been estimated that by 1997, 230,000 Rohingya had returned, two refugee camps – Kutupalong and Nayapara – remained home to some 30,000 recognized refugees, and hundreds of thousands of Rohingya have been living throughout Bangladesh for years, if not decades.[20]

While later waves of refugees were smaller than the ones seen in the late 1970s and early 1990s, over time, the total number of Rohingya refugees continued to rise. By 2010, the United Nations High Commissioner for Refugees (UNHCR) estimated that 200,000 Rohingya were living outside of the camps.[21] In mid-2015, images of hundreds of Rohingya on boats seeking refuge in Indonesia, Malaysia and Thailand became international headlines.[22] The influx of October 2016 saw 74,000 Rohingya, an estimated 57 per cent of whom were children, entering Bangladesh. By July 2017, an estimated 300,000–500,000 Rohingya were living scattered across the country, the large majority of whom lacked formal legal status.[23]

## THE PROTECTION ENVIRONMENT IN BANGLADESH

In Bangladesh, strategies and activities for improving the protection of people of concern are integral to humanitarian action. For UNICEF, this means framing its activities in line with the Convention of the Rights of the Child (CRC) and achieving better protection outcomes for children and their families. While this is true for all children in Bangladesh, given that the Rohingya are also refugees, international standards and instruments pertaining to refugee law are equally relevant.

While Bangladesh is a signatory to the CRC, it has not signed the 1951 Convention Relating to the Status of Refugees, also known as the 1951 Refugee Convention, and its 1967 Protocol. The protection environment for refugees in Bangladesh is not optimal. The Government of Bangladesh does not wish to refer to the Rohingya as refugees, using the terms 'forcibly displaced Myanmar nationals' or 'undocumented Myanmar nationals' instead. While the Government recognized the Rohingya as *prima facie* refugees during the 1991–1992 influx, in the years and decades that followed, the Government became reluctant to grant that same status to new arrivals.

The lack of recognition of the refugee status of the Rohingya is not the only gap in their protection. Most Rohingya do not have citizenship in Myanmar and are stateless, an issue that has been raised with Myanmar for many years, most recently by the Advisory Commission on Rakhine State, led by former United Nations Secretary-General Kofi Annan and mandated by the State Counsellor of Myanmar.[24]

The term 'undocumented Myanmar nationals' became official in September 2013 when the Cabinet of Bangladesh adopted the 'Strategy Paper on Addressing the Issue of Myanmar Refugees and Undocumented Myanmar Nationals in Bangladesh'. Among other steps, the paper announced the establishment of a national task force chaired by the foreign secretary. In follow up to the paper, which refers to UNICEF, the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA) and the International Organization for Migration (IOM) as the international (United Nations) organizations assisting the Government to maintain international standards and mobilize technical and financial resources, IOM signed a Memorandum of Understanding with the Government to "provide basic humanitarian assistance for Undocumented Myanmar Nationals and vulnerable populations in the district of Cox's Bazaar."[25]

From a humanitarian perspective, the use of the term 'undocumented Myanmar nationals' is troubling, as it suggests a lesser status than refugees. Many, if not all of the Rohingya, have a well-founded fear of persecution,

20  Ibid.

21  Kiragu, Esther, Angela Li Rosi and Tim Morris, 'States of Denial: A review of UNHCR's response to the protracted situation of stateless Rohingya refugees in Bangladesh', UNHCR PDES, 2011, p. 5.

22  See, for example, Hume, Tim, Ivan Watson and Kocha Olarn, 'Migrant Boat Re-enters Malaysian Waters after Refusing to Offer to Land: Thai officials', *CNN,* 17 May 2015, <https://edition.cnn.com/2015/05/15/asia/thailand-malaysia-rohingya-refugees/index.html>, accessed 5 November 2018.

23  See United Nations Children's Fund, 'UNICEF Response Plan for Rohingya Children in Bangladesh, 2017–2018', UNICEF, p. 6.

24  See Advisory Commission on Rakhine State, 'Towards a Peaceful, Fair and Prosperous Future for the People of Rakhine: Final report of the Advisory Commission on Rakhine State', August 2017, <www.rakhinecommission.org/app/uploads/2017/08/FinalReport_Eng.pdf>, accessed 5 November 2018.

25  International Organization for Migration, 'Bangladesh', IOM, issue 1, March 2015.

which is the fundamental criterion for applying the refugee definition. One explanation for why the Government of Bangladesh has been reluctant to use the appropriate terminology is that this designation will become a pull factor for more Rohingya seeking refuge. The efforts of UNHCR to improve the protection of all Rohingya in Bangladesh over the years have been well documented, though many of these efforts have proved futile due to the Government's reluctance to recognize their refugee status.[26]

Words matter. Qualifying the Rohingya as refugees affords them better protection. Parts of the 1951 Refugee Convention are customary law, especially the principle of non-refoulement, which ensures that refugees cannot be returned to a location where their lives would be threatened for the same reasons as why they sought refuge in the first place. This obligation is therefore also binding for the Government of Bangladesh.

Convincing the Government of Bangladesh that the Rohingya are refugees became a priority for the United Nations in September 2017. That month, most United Nations agencies, including UNICEF, switched their reference to Rohingya from 'undocumented Myanmar nationals' to refugees in their global level public communications. On the ground, it was not until October 2017 that IOM and the Inter Sector Coordination Group (ISCG) started to refer to the Rohingya as refugees.

As the Government of Bangladesh feels that it is not bound to use the term refugees, it has insisted on using 'forcibly displaced Myanmar nationals', a term that is also used in the Memorandum of Understanding concluded with UNHCR on 13 April 2018. This Memorandum covers the principle of voluntary repatriation and recognizes that refugee children born in Bangladesh should be registered. The Memorandum therefore includes important protection guarantees, even if its language is not perfect.

The use of the appropriate terminology is still not common to all agencies and sectors.[27] At least in one sector, the terminology in the strategy documents refers to "displaced people coming from Rakhine state of Myanmar".[28] Similar to the Government of Bangladesh-UNHCR Memorandum of Understanding, the relevant sector could have opted to use the Government's preferred wording only in combination with the appropriate (legal) wording as used by the United Nations. It's a United Nations agency's duty (i.e., UNICEF and all other organizations in the United Nations family) to ensure that it promotes the highest standards of protection, especially when the protection space is narrow. Promoting high(er) standards does not allow for trade-offs between different fundamental rights.

## HUMANITARIAN ACTION IN BANGLADESH

In the weeks before, during and immediately after 25 August, humanitarian agencies working in Bangladesh devoted much of their attention to responding to the country's worst floods in decades, which affected 6 million people in 31 districts.[29] Indeed, UNICEF's press statement of 31 August 2017, which announced its scale up in response to the Rohingya refugee crisis, also referred to its response to the floods.[30] Bangladesh has a long history of natural disasters and the country has developed extensive experience and capacity in disaster risk reduction, prevention and preparedness. At the Country Office level, since 2012, there has been a formal national cluster system for natural disaster response, in which line ministries or similar government institutions chair a range of clusters, often in collaboration with a United Nations agency. This national cluster system is only relevant and mandated to work in the case of natural disasters, just like the Humanitarian Coordination Task Team, which functions under the Local Consultative Group-Disaster Emergency Response, the Government's policy body for emergencies.[31]

26  Kiragu, Rossi and Morris, 'States of Denial'.

27  See for example, International Organization for Migration, 'Emergencies and Stabilization', IOM, <https://bangladesh.iom.int/emergencies-and-stabilization>, accessed 21 November 2018.

28  E.g., some education documents that needed agreement from the Government.

29  See United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report (Monsoon Floods)', UNICEF, 1 September 2017.

30  United Nations Children's Fund, 'UNICEF Scaling Up its Emergency Response in Bangladesh', UNICEF, Dhaka, 31 August 2017, <www.unicef.org/media/media_100718.html>, accessed 5 November 2018.

31  For this description, see Musyoki, Andrew and Anuradha Narayan, 'Bangladesh Nutrition Cluster: A case in preparedness', ENN, <www.ennonline.net/fex/52/bangladeshnutritioncluster>, accessed 5 November 2018.

In contrast, there is much less experience in Bangladesh with humanitarian action in situations in which principles and rights are under pressure. Until the 25 August 2017 influx, few local agencies and Bangladeshi staff had worked with refugees. As part of their restrictive approach to Rohingya refugees, the Government had also given only limited authorizations to work in the camps to those international agencies willing and able to respond. The small group of organizations that initially worked with the Rohingya included UNICEF, IOM, the World Food Programme (WFP) and NGOs such as ACF, Handicap International, Solidarités International, Muslim Aid, Médecins Sans Frontières and NGO Forum, a local NGO focused on health and WASH. This group grew over time, especially with several Bangladeshi NGOs, such as BRAC, Community Development Centre and Mukti.

Several government entities are also involved in the refugee response. In Dhaka, the Office of the Prime Minister and the Ministry of Foreign Affairs play key roles in the political aspects. The Ministry of Foreign Affairs also coordinates the work of the United Nations agencies, and the Ministry of Disaster Management and Relief manages the Government's operational response. The Refugee Relief and Rehabilitation Commission represents the Ministry of Disaster Management and Relief in Cox's Bazar, ensuring that government officials, especially the Camp in Charge officers, are in place in the camps.

## HUMANITARIAN COORDINATION SYSTEM

The ISCG, which was created by IOM as an ad hoc mechanism in Dhaka and Cox's Bazar in response to the October 2016 refugee influx, serves as the coordination mechanism for the response to the refugees (including the so-called 'undocumented Myanmar nationals'). This structure, which according to UNICEF is "underpinned by the principles of the cluster approach",[32] only exists in the context of the Rohingya response. While the international system had foreseen that, based on the refugee mandate, UNHCR would lead the coordination of the refugee responses, the Government decided that UNHCR could only lead the protection response for the 32,000 Rohingya recognized as refugees and not extend these protection services to the more than 300,000 additional Rohingya, referred to as 'undocumented Myanmar nationals', who had arrived in the influx beginning in October 2016.

When the circumstances changed in August 2017, the question quickly emerged as to whether the ISCG, with IOM in the lead, was still the appropriate structure. As explained in section 2.2, inter-agency coordination and the appropriate mechanism became the subject of a heated debate in the Rohingya response.

In terms of developing an inter-agency strategy and planning for this response, the ISCG developed two principal documents: the Humanitarian Response Plan, released on 3 October 2017 for a six-month period; and the Joint Response Plan, published on 16 March, which runs until December 2018. Operational and inter-sector coordination in Cox's Bazar continued through two main forums: the ISCG and the Heads of Sub-Office Group. The ISCG is the forum for operational coordination across thematic sectors and the Heads of Sub-Office Group is the forum for strategic and policy discussions in Cox's Bazar.

To make matters more complicated, the Government has its own mechanisms in place, with the Ministry of Disaster Management and Relief and the Refugee Relief and Rehabilitation Commission leading operations in Cox's Bazar. Some of the sectors, such as health and WASH, are co-chaired with Government bodies, which helps to overcome the difficulties of having two parallel systems.

## UNICEF'S ROLE: ASSISTANCE AND PROTECTION TO PREVENT AND RESPOND

UNICEF has been working in Bangladesh for more than 60 years in collaboration with the Government, partners, donors, civil society organizations and local people. During that time, its strategic objectives have remained to: reduce preventable child deaths; get more boys and girls into primary education; reduce gender inequality in schools; and ensure that more people have access to safe WASH and nutritious food. In the context of the 2016 influx, UNICEF took responsibility for leading

---

32   United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report (Rohingya influx)', UNICEF, 5 September 2017.

and coordinating child-centred care (now referred to as child protection), nutrition and education.[33] Its education and child protection services were not only provided to refugees,[34] but also to host communities. As described in section 2.1 on preparedness, the organization formally opened a field office in Cox's Bazar in May 2017. On 31 August 2017, UNICEF stated its intentions to scale up its interventions in response to the new influx.[35]

Globally, in terms of its humanitarian assistance and protection activities, UNICEF has assumed responsibilities in child protection, education, nutrition and WASH.[36] UNICEF's focus on child protection is framed within the CRC. Article 45 (a), in particular, confers upon the organization the function of serving as a source of expert assistance and advice[37] and its mission statement makes reference to the CRC, stating "UNICEF is guided by the Convention on the Rights of the Child and strives to establish children's rights as enduring ethical principles and international standards of behaviour towards children."[38] CRC Article 22 is particularly relevant as it covers refugee children. Further to this, UNICEF's CCCs are a global framework for humanitarian action for children undertaken by UNICEF and its partners. Because the CCCs are based on the CRC, several of the commitments address child protection risks, such as trafficking, or refer to exploitation and abuse of children. Another UNICEF responsibility that is relevant in this response is its commitment to and mandate on gender equality. This commitment is grounded not only in the CRC, but also in other human rights instruments. In UNICEF's own words, "advancing gender equality and the rights of women and girls is essential to realizing the rights of all children."[39]

© UNICEF/UN0139612/LEMOYNE

A Rohingya refugee child receives a dose of a UNICEF-provided oral cholera vaccine at an outreach point at a makeshift refugee settlement by the Tambru canal near Tambru Bazar in Ghumdhum, Bangladesh.

As announced in its 31 August 2017 statement on scaling up its response to the refugee crisis, UNICEF has assumed responsibilities for nutrition, health, WASH, child protection and education. The HAC appeal and its response plans (as part of the United Nations' overall plans) set the direction and provided the detail for the activities that would be carried out for refugee children and their families in camps, makeshift settlements and host communities, as well as those host communities.[40] As stated in the introduction, UNICEF is leading the child protection and nutrition sectors; co-leading education (with Save the Children); and is involved in the leadership of the WASH sector with ACF, under the chairmanship of the Department for Public Health Engineering. UNICEF has also taken an active role in the CwC Working Group.

---

33　See United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report 1', UNICEF, May 2017.

34　UNICEF also referred to the non-recognized Rohingya refugees as 'undocumented Myanmar nationals' at the time.

35　 'UNICEF Scaling Up Its Emergency Response in Bangladesh'.

36　See, for example, United Nations Children's Fund, 'Evaluation of UNICEF's Cluster Lead Agency Role in Humanitarian Action', UNICEF, December 2013, <www.unicef.org/evaldatabase/files/UNICEF_CLARE_Final_Report_FINAL.pdf>, accessed 5 November 2018.

37　Office of the United Nations High Commissioner for Human Rights, 'Convention on the Rights of the Child', OHCHR, <www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx>, accessed 5 November 2018.

38　United Nations Children's Fund, 'UNICEF's Mission Statement', UNICEF, 25 April 2003, <www.unicef.org/about/who/index_mission.html>, accessed 5 November 2018.

39　See United Nations Children's Fund, 'UNICEF Gender Action Plan, 2018–2021', UNICEF Executive Board Second Regular Session 2017, E/ICEF/2017/16, 12-15 September 2017, paragraph 2, <www.unicef.org/gender/files/2018-2021-Gender_Action_Plan-Rev.1.pdf>, accessed 5 November 2018.

40　United Nations Children's Fund, 'Bangladesh: Rohingya influx', *Humanitarian Action for Children,* 21 October 2017; and United Nations Children's Fund, 'UNICEF Bangladesh Response Plan', UNICEF, October 2017.

Rohingya refugee fills a water pot with a hand pump at the Bormapara makeshift refugee settlement in Ukhiya, Cox's Bazar District, Bangladesh.

© UNICEF/UN0156605/SUJAN

# PART TWO:
# EVALUATION FINDINGS

# 2.1 Preparedness and scale-up

## PREPAREDNESS BEFORE 25 AUGUST 2017

Cox's Bazar District is one of the worst-performing districts in Bangladesh in terms of nutrition, health, WASH, child protection and education indicators.[41] The area has therefore had UNICEF's attention since at least 2012. However, it was the October 2016 refugee influx that prompted the organization to establish a field office in Cox's Bazar. The field office was expected to play a pivotal role in implementing UNICEF's two-year strategy for Rohingya children. Education and child protection were the main programme areas of focus, with other areas such as WASH and nutrition taking a supporting role.

Having a field office in Cox's Bazar not only meant that UNICEF was active on the ground before August 2017, but also that that the organization might have been better prepared for new refugee influxes. Given the history of the Rohingya, further refugee arrivals were predictable, albeit not at the scale and speed at which they occurred on 25 August 25 2017 and in the following weeks. UNICEF's March 2017 two-year strategy does not refer to scenarios or contingency plans for new influxes – a clear gap. In fact, the strategy hardly refers to any preparedness activities at all. As some key informant interviewees noted, with the benefit of hindsight, the October 2016 refugee influx was a test for the Government of Bangladesh and humanitarian organizations in terms of their capacity to cover a large influx.

Recognizing that few (if any) preparedness and response systems would be equipped to receive hundreds of thousands of refugees in a few months, it should be noted that when the August 2017 refugee influx began, few systems, if any, were in place to respond in an adequate manner. UNICEF's established preparedness plan had been developed for a 12-month period (June 2017–May 2018). The plan, which was last updated on 13 August 2017, two weeks prior to the influx, refers to a scenario of 100,000 new arrivals, a number that corresponds with

## ▶ SUMMARY

**How prepared was UNICEF for the influx of refugees?**

Prior to the influx, UNICEF had a preparedness plan that referred to potential cyclone and refugee scenarios. The preparedness plan's refugee scenario underestimated the size and speed of the influx of refugees in August 2017 and the impact a new influx would have on the situation. UNICEF was not alone in underestimating the potential crisis; the complete lack of information about the situation in northern Rakhine State, Myanmar, meant that the entire international community was caught off guard.

**Since September 2017, what has been UNICEF's ability to meet its commitments, compared with the calculated need [coverage]? What factors contributed to or hindered UNICEF's ability to grow its response alongside the increased caseloads?**

Although UNICEF was among those caught off guard and several external factors made rapid scale-up difficult, the organization's efforts to scale up in many programme areas were impressive. Strong and experienced leadership, some appetite for risk and smooth contracting processes are among the factors that contributed to the achievements. However, limited partner capacity was one of the factors that hindered UNICEF's ability to keep pace with the needs of refugees.

the figures used by some organizations that had a long-standing presence in the Cox's Bazar camps.[42] The plan considers the "possible" likelihood of a new influx and estimates that the impact would be "moderate".[43] While UNICEF is required to prepare only for a proportion of an anticipated response, the estimation that the impact of the new influx would be moderate stands in contrast to the prevailing circumstances at the time. In June 2017, the ISCG noted the need to do site planning to ensure "the

---

41   United Nations Children's Fund, 'UNICEF Response Plan for Rohingya Children in Bangladesh 2017-2018', UNICEF, p. 5.

42   Confirmed in key informant interviews with two of these organizations.

43   UNICEF, Emergency Preparedness and Response Plan, Cox's Bazar, June 2017 – May 2018, p. 7.

efficient utilization of the limited land available," indicating a shortage of available land for the refugees.[44] Taking the impact of the land shortage into account, describing the humanitarian impact of another 100,000 refugees as "moderate" was an underestimation.

UNICEF's preparedness plan also refers to a cyclone scenario affecting the District, but the programme response plans provided do not distinguish between the two different types of emergencies, except in the case of the child protection sector response, which focuses on the refugee influx scenario. The child protection plan could have better recognized the refugee rights dimension – an oversight given the less than optimal protection environment for Rohingya in Bangladesh.

In terms of preparedness on the ground, in the days prior to 25 August 2017, the atmosphere in Cox's Bazar did not anticipate more refugees. At the time, the Government was focused on Rohingya returns. On 23 and 24 August, the National Taskforce on Implementation of National Strategy on Myanmar Refugees and Undocumented Myanmar Nationals visited some of the (makeshift) camps in Cox's Bazar. The Taskforce, which involves a wide range of ministries, held a meeting with United Nations agencies and other organizations, including UNICEF, on 24 August to discuss refugee repatriation. The crisis that unfolded in the following days appeared to be unthinkable, as it exceeded the worst-case scenario of 100,000 new arrivals by several fold.

With the clear warning signs from previous Rohingya exoduses, the question is what information did UNICEF have in hand to predict potential new refugee outflows from Myanmar. Forecasting information may come from various sides, but with the presence of the UNICEF Country Office in Myanmar, it makes sense to look in that direction. In asking this question, the evaluation learned of a dearth of information and intelligence coming from the other side of the border on possible outfluxes of Rohingya.[45] Clearly, the prolonged lack

of humanitarian access had limited UNICEF's ability to develop a complete picture of the situation on the ground in northern Rakhine State. The main sources of information for UNICEF Myanmar were the reports of a partner child protection NGO, but none of the reports pointed to the scale of retaliation from the army and security forces on Rohingya villages and the scale of the subsequent exodus.[46] According to key informant interviews, satellite data, which could be used to track burning villages, was monitored by some, but this did not provide any direct information that could have helped to predict the scale and speed of the influx.

In the response to the refugee influx, UNICEF Bangladesh assumed responsibility and took on major commitments in six programme areas, meaning it had to dramatically increase the size of its presence and operations in Cox's Bazar. The Country Office achieved this in the context described here, in which UNICEF and other humanitarian actors were caught off guard.

## UNICEF'S SCALE-UP

Given the circumstances, the scale-up for such a massive and fast influx of refugees was an enormous challenge. Regarding the question of UNICEF's ability to address the needs of the increasing numbers of refugees, the evaluation found that the organization made significant progress, notably in terms of: increasing the staffing of the Cox's Bazar field office; scaling up of the sector programme responses; taking on sector leadership responsibilities; and, most of all, providing much-needed emergency assistance and protection services to the Rohingya and host communities. Much of this is detailed in this report[47] and described in UNICEF's situation reports of September and October 2017 and thereafter.

To summarize here: Prior to 25 August, the Cox's Bazar field office had just two fixed-term and nine temporary positions in place. By 13 September, the Cox's Bazar field office had added 27 staff members from UNICEF Bangladesh and other UNICEF field offices in Bangladesh. In its initial

---

44    Inter Sector Coordination Group, 'Bangladesh: Rohingya situation in Cox's Bazar – Situation report 1-30 June 2017', ISCG, June 2017.

45    UNICEF key informant interviews.

46    UNICEF Myanmar key informant interviews.

47    Particularly in chapter 6, in relation to the timeliness of the response.

Rohingya refugee child walks from Myanmar into Bangladesh through paddy fields and flooded land into Cox's Bazar district.

© UNICEF/UN0135716/NYBO

response, UNICEF focused on providing several services essential to human survival. In the first weeks of the crisis, UNICEF deployed its Rapid Response Mechanism – a multi-sectoral capacity that provides a combination of various services – to assist people who were stranded along the main road through the provision of basic supplies, such as water and non-food items. UNICEF was also heavily involved in emergency mass vaccinations services. By mid-September, in a campaign led by the Ministry of Health and Family Welfare and undertaken with the World Health Organization (WHO), UNICEF had reached 133,000 children (aged 6 months to 15 years) with vaccinations against measles, rubella and polio. On 20 September, UNICEF designated the refugee influx as a corporate emergency, and on 5 October, six weeks after the start of the influx, UNICEF issued its (revised) response plan.[48]

## FACTORS THAT CONTRIBUTED TO RAPID SCALE-UP

The evaluation has identified a number of factors that have contributed to UNICEF's successful response scale-up. First of all, the experience and approach of some of the key senior staff at the country level, several of whom have extensive experience in emergency responses in many parts of the world, positively contributed to the scale-up. Related to this, UNICEF Bangladesh took the necessary risks to ensure that UNICEF was able to scale up. For example, despite an initial lack of funding, UNICEF committed to delivering a large response, which showed a strong can do/no regrets attitude. Following an internal meeting on 8 September, staff from UNICEF Bangladesh and other UNICEF field offices in Bangladesh were sent to Cox's Bazar on one-way tickets, implying a directive to staff to get things moving and stay until a replacement

---

48   United Nations Children's Fund, 'Bangladesh Revised Response Plan', UNICEF, October 2017, <https://reliefweb.int/report/bangladesh/unicef-bangladesh-revised-response-plan-rohingya-crisis-october-2017>, accessed 5 November 2018.

became available. This way staff members knew that they would have to focus on setting up and growing the volume of UNICEF's activities for unknown periods of time, at least until a replacement could be deployed.

Second, UNICEF Bangladesh took a number of steps that anticipated the 20 September decision to declare a Level 3 emergency response – the highest level of emergency response for UNICEF. The Level 3 declaration was made in the absence of a system-wide decision, as the Inter-Agency Standing Committee (IASC) did not (formally) meet on the issue. No guideline or policy will tell a country representative how much risk she or he can take or start taking before the formal Level 3 declaration. Therefore, the UNICEF Bangladesh Representative's ability to take risks to assist refugee children before the Level 3 declaration reflects strong leadership.

Third, with the Cox's Bazar field office already opened in May 2017, UNICEF had gained a foot in the door in the area. It had good relationships with several governmental departments, partnerships with a number of NGOs, and had set up programme responses, particularly in education. While finding adequate numbers of NGO partners with capacity has been an issue in this response, the evaluation found that in the large majority of the cases (more than 70 per cent), the NGOs that were contracted by UNICEF received their contractual project documents within eight weeks, with nearly half of them receiving the contract within four weeks.[49]

These success factors become even more evident when they are considered against the backdrop UNICEF's position at the start of the influx. As noted, the organization had a foot in the door, but its activities were not yet commensurate to the prevailing circumstances of the time. UNICEF was still in the process of developing its presence and programmes in Cox's Bazar. On top of this, the organization "was not the partner of choice [for the Government]" at that time, according to a senior UNICEF staff member.[50] As illustrated by the outcome document of a Government meeting that

took place on 14 September 2017, the Government did not allocate roles and responsibilities to UNICEF in the Rohingya response.[51] As a result, in the words of the senior UNICEF staff member, "we had to elbow our way in."[52]

The scale-up of capacities has been less impressive in some sectors than in others. One major factor for this has been the limited capacities of NGOs.[53] As explained later in the report, UNICEF should have anticipated this by scaling up initiatives to strengthen NGO capacities from the start of the response, especially for sectors such as education, for which UNICEF should have known that implementing capacity would be an issue.[54]

## SUB-CONCLUSION

UNICEF was under-prepared for the influx of refugees. However, this must be understood in context: UNICEF had almost no information on which to base its preparedness actions. The lack of access to northern Rakhine State meant that UNICEF Myanmar, along with other United Nations agencies and NGOs in Myanmar, had no intelligence about the situation. Given this, UNICEF Bangladesh cannot be faulted for preparing for an influx of 100,000 refugees. However, its preparedness plans underestimated the impact of such an influx and should have included stronger protection and rights dimensions.

Despite and, in part, because of this under-preparedness, UNICEF's scale-up efforts were extremely impressive. The organization made significant progress in terms of increasing the staffing of the field office; scaling up the programme responses as part of the sectors; taking on sector leadership responsibilities; and, most of all, bringing much needed assistance and protection services to the Rohingya and host communities. The experience and approach of the UNICEF Bangladesh leadership contributed to this, as did the existence of the Cox's Bazar field office and its well-established relationships with various governmental departments.

---

49   Results of a partner survey undertaken by the evaluation.

50   Key informant interviews.

51   Letter from the High Commission for the People's Republic of Bangladesh, 18 September 2017.

52   Key informant interviews.

53   As explained in chapter 10, the experience and capacity of national NGOs in (refugee) emergencies is limited, while international NGOs were restricted in their operations. UNICEF should have been aware of these facts.

54   See chapter 5 for further information about the education strategy and chapter 6 for information on UNICEF's performance.

# 2.2 Advocacy

As soon as this evaluation began, it identified three issues that turned out to be key factors in assessing UNICEF's response. In fact, the evaluation found that the question on UNICEF's (operational) effectiveness cannot be separated from the steps it took to address these three obstacles: an ad hoc inter-agency coordination mechanism; the extreme congestion and lack of land suited to host large numbers of refugees; and the absence of a protection framework that secures the rights of the Rohingya.

As these issues are beyond UNICEF's direct operational remit, the evaluation reviewed UNICEF's advocacy. It looked at the position that the organization took and the messages it formulated and communicated in persuading decision-makers to adjust policies and take actions that promote the rights of Rohingya children and their families.[55]

## ADVOCACY FOR IMPROVED INTER-AGENCY COORDINATION

Having shared or held exclusive leadership for four (sub-) sectors, UNICEF holds major coordination responsibilities in this response. Based on documentation and key informant interviews, the evaluation found that UNICEF was among those who raised their voices in criticism of the established coordination structure – the ISCG led by IOM – as early as September 2017. Much of UNICEF's dissatisfaction with the ISCG stemmed from the absence of a firewall between the ISCG and IOM; UNICEF felt that IOM was using its leading role in the ISCG to its own ends.[56]

Another major reason that UNICEF called for a better inter-agency coordination mechanism was the competition between IOM and UNHCR over which organization would play a leading role in the response. During interviews for this evaluation, many key informants both from UNICEF and from partner entities described the extensive time and energy that this competition took away from operations on the ground. In humanitarian inter-agency coordination, there are two standard, agreed, models: 1) the cluster approach led by the humanitarian coordinator; and 2)

## SUMMARY

**What steps did UNICEF take to advocate for improved coordination, a stronger protection environment and decongestion in the camps?**

This section assesses UNICEF's leading role in advocacy. This role derives from its normative work in relation to the rights of children, its obligation to meet the CCCs and its responsibility to work towards the progressive realization of the various collective quality standards (e.g. the Sphere Standards). Key to realizing rights is ensuring an optimal (rights-respecting) environment, which is why advocacy is an integral part of all humanitarian work.

The evaluation has found that from the start of the crisis, UNICEF has focused on three key issues that became obstacles in the overall humanitarian response: the inter-agency coordination model, the weak overall protection environment and the extreme congestion in the camps. UNICEF was a strong advocate for improved coordination, though it could have done more. Its advocacy for decongestion and the protection environment could also have been stronger.

the lead agency model. The latter model was designed for refugee situations in particular, as UNHCR has the statutory mandate to lead the international response on behalf of refugees. The ISCG – the structure established by IOM in the response to the October 2016 influx – incorporates elements of both models. However, its leadership has been a major issue from the start of the August 2017 crisis.

Pushing for clarity, UNICEF advocated for an effective coordination structure both globally and at the country level.[57] Although some internal communications reveal that the organization vacillated on which model it preferred, UNICEF's bottom line was clear: In early October 2017, during his visit to Bangladesh, the Executive Director of UNICEF noted, "we at UNICEF do not care how we are

---

55   See also United Nations Children's Fund, 'Core Commitments for Children in Humanitarian Action', UNICEF, New York, May 2010, pp. 11-12.

56   Internal email exchanges made available to the evaluation team.

57   Ibid.

coordinated, but we need to be well coordinated."[58] At the global level, senior staff at UNICEF Headquarters participated in a number of calls and meetings between October and December 2017 to discuss the coordination structure. The Executive Director held several talks with government officials and a number of his United Nations counterparts, insisting that this is a refugee response that should be led by UNHCR. Indeed, this latter position is correct: Although the Government of Bangladesh put IOM forward as its partner of choice to lead the response, the United Nations and the humanitarian community is entitled to organize itself according to the mandates that have been established by United Nations Member States and set up the coordination structure that is relevant to the particular crisis.[59]

In December 2017, following the arrival of a new resident coordinator in Dhaka, the emergency relief coordinator / United Nations under-secretary-general for humanitarian affairs announced several adjustments, including the creation of the Senior Executive Group in Dhaka, co-chaired by UNHCR and IOM, together with the resident coordinator. The announcement also involved the creation of a senior coordinator position to lead the ISCG and a triple reporting line to the Senior Executive Group. The resident coordinator has a similar triple reporting line to the emergency relief coordinator, the high commissioner for refugees and the head of IOM at the global level. Some key informants familiar with the coordination discussion noted that this is supposed to be a transitional and temporary structure, not a definitive one. The emergency relief coordinator formally announced this change to the Government, acknowledging the structure, in January 2018.

These complicated reporting lines imply unclear responsibilities and accountabilities. UNHCR is responsible and accountable for refugee protection. Presumably, other assistance-related sectors fall under the resident coordinator (or IOM), but as explained later in the report, assistance and protection are inextricably linked and should not be separated. This is also the case for child protection in relation to overall protection. While the child protection sub-sector should report to the ISCG and the senior coordinator, UNHCR holds responsibility (and accountability) for refugee protection. In other words, in this hybrid coordination structure, reporting and accountability are unclear and diluted. This should continue to be source of concern for UNICEF and other humanitarian actors.

The evaluation has found that as part of its active advocacy for a clear coordination mechanism, UNICEF could have pushed for one additional piece. The IASC – the international body for discussing inter-agency coordination – did not meet formally on the Rohingya crisis in Bangladesh. According to its founding resolution, the IASC is the relevant body for "establishing responsibilities for prompt and coordinated action in the event of emergency."[60] In the case of a large-scale crisis, the IASC is also the mechanism for discussing and deciding on the classification of the emergency response level (i.e., whether the emergency should be designated as Level 2 or Level 3). Given the nature of the IASC mandate, and the role of the Executive Director of UNICEF as a principal of the IASC, UNICEF should have called for a formal IASC meeting, in addition to all the e-mail exchanges, (informal) conference calls and backchannel conversations that took place on the subject.

UNICEF's position on the adjustments remained clear: it did not want to see a structure with multiple reporting lines in which accountability would be diluted or unclear.[61] Following the December 2017 adjustments, several key informants told the evaluation team that the situation in Cox's Bazar has gradually improved. The leadership of the ISCG senior coordinator is seen as having facilitated better relations and the tensions between IOM and UNHCR seem to have reduced. On the face of it, this sounds like progress. Several key informants also noted that with the Government of Bangladesh-UNHCR Memorandum of Understanding in place, the long-term scenario is for UNHCR to take over the United Nations coordination of the Rohingya response.

---

58   Bangladesh Trip Report and Action Points (draft), 9 October 2017.

59   See United Nations, Strengthening of the Coordination of Humanitarian Emergency Assistance of the United Nations, A/RES/46/182, General Assembly, 78th Plenary Meeting, 19 December 1991, paragraph 37.

60   Ibid.

61   Email exchanges between UNICEF management and the Bangladesh country representative, 7 November 2017.

The evaluation has found that UNICEF's continued advocacy within United Nations circles for a clear coordination mechanism was highly relevant. The ISCG ad hoc mechanism has taken away valuable time and energy that otherwise could have been spent on operations. The two standard models are pre-agreed approaches for good reasons. They create predictability and clarity in terms of leadership and accountability. An ad hoc structure such as the ISCG opens up heated debate, delays key decisions and creates confusion. UNICEF was entirely correct in recommending one of the standard mechanisms, namely the UNHCR-led mechanism, as an effective coordination structure.

In examining United Nations coordination, the evaluation also came across a number of issues related to the relationships between UNICEF and its United Nations partners. While the evaluation did not look at these issues in detail, the following observations can be made on how these issues reduced the efficiency and effectiveness of the response. In nutrition, for example, it is standard practice among United Nations agencies to establish agreements that ensure clarity of roles and responsibilities. In October 2017, there was an identified need for a common strategy/plan with WFP on nutrition. As of the writing of this report, this common plan has yet to be finalized. In WASH, due to their significant budgets and capacities, UNICEF, IOM and UNHCR all carry similar funding weight and expectations. This complicates WASH sector coordination and creates tensions between the organizations – tensions that are best dealt with at the sector level. For the UNICEF WASH programme, this means keeping the sector informed of their plans in a timely manner.

## ADVOCACY FOR PROTECTION

Before presenting the evaluation's findings on UNICEF's advocacy on the protection and rights of Rohingya children, two preliminary observations should be made. First, there has been an evolution in the United Nations approach to promoting the protection of the Rohingya (as refugees) and promoting a rights-based agenda in Bangladesh. Protection has been a much stronger pillar of the overall response since the March 2018 JRP, compared with the October 2017 HRP. This has to do with changes in United Nations leadership at the country level and UNHCR's more prominent role. Second, advocacy is not a matter of 'either/or' in terms of following an approach of silent diplomacy or taking a public stance; rather, it is both. Linked to this, ensuring a constructive approach vis-à-vis the government must not be confused with a lenient position that accepts their conditions.[62] Humanitarian standards and principles must remain the reference framework for humanitarian action and leadership is required for setting the terms of engagement with the Government. For many actors in this response, being confronted with a constrained environment and having to consider a more robust approach is a new experience.[63]

Against this background, the evaluation has seen that advocacy on the rights of Rohingya children was an integral part of UNICEF's work from the start. The October 2017 and February 2018 child alerts (titled 'Outcast and Desperate: Rohingya refugee children face a perilous fate' and 'Lives in Limbo: No end in sight to the threats facing Rohingya children', respectively) are publications that note the desperate plight of children in the camps. Some messages could have been more robust, particularly on protection. Several of the UNICEF senior staff interviewed for this evaluation noted that the advocacy messages in relation to protection, particularly those in 'Outcast and Desperate' should have been stronger.[64] This could have been achieved had the advocacy strategy that UNICEF Bangladesh completed in early January 2018 been more robust in defining messages and setting targets. The February 2018 child alert, 'Lives in Limbo', contains stronger messages on the land and protection issues,[65], but both child alerts fall short of reporting on protection violations or disrespect of refugee and human rights.[66]

62   Such as not using the word 'refugee' in the context of the Rohingya.

63   See HERE-Geneva, 'Real-Time Response Review of the Disasters Emergency Committee (DEC) Emergency Appeal for People Fleeing Myanmar: Responding to the needs of refugees and host communities – Review of the DEC phase 1 responses', DEC, UK Aid and HERE-Geneva, March 2018, pp. 32-33.

64   United Nations Children's Fund, 'Outcast and Desperate: Rohingya refugee children face a perilous fate', UNICEF, October 2017.

65   United Nations Children's Fund, 'Lives in Limbo: No end in sight to the threats facing Rohingya children', UNICEF, February 2018.

66   The evaluation also notes that these glossy child alerts are a combination of advocacy messages and a marketing tool as they contain funding needs.

Second, given its responsibility in relation to the CRC, UNICEF's protection focus is on children. CRC Article 22 focuses on the rights of refugee children, a key provision in the context of the Rohingya refugee response. The principle that refugees cannot be sent back to their country of origin against their will, among other refugee rights, is highly relevant. The right of children, including refugee children, to receive education is another basic right that could have been covered more robustly in UNICEF's messaging. As noted, the rights and protection environment for refugees in Bangladesh was less than optimal and in the early months of this response, the United Nations' voice on better protection and respect for the rights of the Rohingya was not strong enough. These are issues that were well known to UNICEF.

Third, to return to protection, with UNHCR becoming more prominent in the response, there is a tendency on the part of UNICEF to leave the formulation of advocacy positions on refugee protection to UNHCR. This applies, for example, to UNICEF's position on the Government's offer to relocate 100,000 refugees to Bhasan Char, an island in the Gulf of Bengal. Putting refugees on an island raises serious rights concerns, including the extent to which the decision to move there was informed and made freely, as well as the freedom of movement and access to livelihoods. While UNHCR's position is said to be applicable for the United Nations as a whole,[67] UNICEF must develop its own messages, if only to complement UNHCR's position, with specific points related to refugee children.

## ADVOCACY FOR DECONGESTION

Among the most critical obstacles in this response is the extreme congestion in the camps. This issue falls entirely within UNICEF's advocacy responsibility as reducing congestion is crucial to realizing better humanitarian outcomes. The evaluation has found significant evidence of how UNICEF has raised the need for more land. Much of this has been done within UNICEF circles, in inter-agency meetings and in meetings with donor representatives either in Bangladesh or at the international level. These efforts have raised awareness on the issue.

That said, UNICEF has been less vocal on the issue in its public reports. In October 2017, 'Outcast and Desperate' hardly raised the issue of congestion. At the UNICEF press briefing on the report in Geneva, a press officer called the situation "hell on earth,"[68] a marked difference in tone. The evaluation did not find evidence that this line was further pursued. In February 2018, 'Lives in Limbo' contained little additional information on the untenable situation in terms of the lack of available new land.[69]

The evaluation has found that in its advocacy for decongestion, UNICEF should have systematically reported on the impact of extreme congestion on the refugees and host communities involved. Specifically, each of UNICEF's programme areas could have made precise estimates of how the lack of space was impacting the delivery and quality of services, as well as the achievement of the Sphere (and other) standards. The fact that UNICEF has not documented the impact of the congestion suggests that it has not grasped the extent of the impact and/or has not felt that speaking out on the matter was its responsibility. Reporting on the impact of the lack of space would have yielded strong evidence, that even in the absence of monsoon rains, do not allow for the dignity of their inhabitants, are untenable, and without significantly more land, this will remain the case. This evidence could have been UNICEF's contribution to raising the land issue in collaboration with the wider humanitarian community.

That said, the evaluation also notes the geo-political reality of refugee protection globally and of this situation specifically. At the launches of both the HRP and the JRP and in other fora, many governments have (rightly) commended Bangladesh for keeping its borders open. The political leverage that these governments have with the Government of Bangladesh may not be enough to convince it to make more land available, as a number of countries apply restrictive policies towards refugees and asylum-seekers at home.

---

67    United Nations High Commissioner for Refugees, 'Relocation of Refugees to Bhasan Char Island', UNHCR, April 2018.

68    'UNICEF: Rohingya children refugees face 'hell on earth'', Associated Press, 20 October 2018, <www.apnews.com/2745fc4515df4228b966dfb851b37bc9>, accessed 5 November 2018.

69    'Lives in Limbo' only calls on the Government for "additional land for decongesting the camps in southern Bangladesh" (p. 13).

Crowds of Rohingya refugees living in makeshift camps in Cox's Bazar district in Bangladesh wait for supplies of food and clothing.

© UNICEF/UN0135710/NYBO

## SUB-CONCLUSION

UNICEF was entirely right to raise strong concerns on the ISCG coordination structure. The 2005 cluster approach and the 2011 Transformative Agenda sought to strengthen the coordination and accountability of the humanitarian system for situations other than refugee responses, which are led by UNHCR. In 2018, the United Nations has come full circle: While there are lines of accountability for humanitarian coordinator-led cluster responses in non-refugee crises, in a classic refugee influx situation such as this, the ISCG (and Senior Executive Group) reporting and accountability lines are insufficient. This mix of a cluster and lead agency model with three actors in the lead (the resident coordinator, IOM and UNHCR) has caused unnecessary delays and undermined more

than a decade of humanitarian system reform. UNICEF should have activated the IASC in Bangladesh. On the global level, there needs to be a fundamental discussion, especially within the IASC, on whether sector coordination responsibilities in future refugee responses should be similar to cluster lead agency responsibilities.

UNICEF has actively advocated for refugee protection and camp decongestion. However, its messages could have been more robust and elaborate. The organization could have delivered stronger (public) messages stressing respect for (refugee) children's rights early in the response, and it should have collected evidence to illustrate the impact of the congestion on the sub-standard services delivered in the camps.

## 2.3 UNICEF's strategy and priorities

The evaluation reviewed UNICEF's overall strategy and programme strategies for nutrition, health, WASH, child protection and education.[70] For UNICEF's overall strategy, the evaluation examined the (revised) response plans[71] and various HAC appeals.[72] It considered: a) the extent to which UNICEF's work took into account the unique context and nature of this crisis; b) UNICEF's prioritization and sequencing of the response; c) how well the sector responses would work together; and d) gaps in the overarching strategy. For the programme strategies, the evaluation looked at each respective strategy, where available.

This review used the CCCs as the benchmark for its assessment, as well as the Sphere Handbook and other relevant humanitarian standards. These standards provide guidance for strategy to different extents. The CCCs set commitments for UNICEF in reaching targets, while the Sphere and other standards provide guidance and should inform programme strategies for the realization of collective goals and objectives. In reviewing whether strategies and plans were appropriate, the evaluation was also influenced by what it saw on the ground in terms of implementation.

### OVERALL STRATEGY

In an emergency of this magnitude, strategy development is an iterative process linked to the (rapidly) evolving context and gradually developing needs analyses. That said, the humanitarian community has a great deal of experience in terms of how to structure a collective refugee response and predict the priority needs that refugees will likely have in a sudden-onset situation, even if there is a general lack of preparedness.[73] This includes an understanding that, in addition to their needs for shelter, health, food (nutrition)

### SUMMARY

**How appropriate were UNICEF's strategic and programmatic choices?**

a.  **How relevant were UNICEF's planned interventions to the needs of the population?**

b.  **Are there gaps in UNICEF's current programming response against the established or projected needs? (past, present and forecasts)**

c.  **If so, what are the reasons for the gaps and what is needed to close them?**

UNICEF's decision to become involved, at scale, in five sectors (nutrition, health, WASH, child protection and education) plus the cross-cutting work of C4D, meant that it assumed significant responsibilities in this response. The evaluation has found that the delivery of UNICEF's work in these areas should have been better strategized and prioritized. In a crisis of this proportion, and with such enormous obstacles, this could have been done through explicit sequencing that stressed what services should come first. Protection, gender and gender-based violence should have underpinned the strategy.

The strategy should also have focused more on the need to strengthen the connections between UNICEF's various programmes and integrate them, especially given the extremely limited space in the camps. At the time of the field mission, the evaluation saw signs of programme strategies being updated but in several instances these updates addressed issues that were (long) overdue.

and WASH, refugees will also need protection.[74] In fact, UNICEF and its partners – not to mention all humanitarian organizations involved in a refugee response – should

---

70   C4D was not reviewed as a sector/programme area, but as part of the other sectors.

71   The evaluation examined the revised response plans dated 18 September 2017 and 2 October 2017. As the exact dates for several of UNICEF's documents are not easy to find, the evaluation recommends that precise dates be put on all documents. In several cases, in the absence of a date on the document, the evaluation has taken the date as found in the document properties.

72   United Nations Children's Fund, 'Bangladesh: Rohingya influx', *Humanitarian Action for Children,* 21 October 2017; United Nations Children's Fund, 'Bangladesh', *Humanitarian Action for Children 2018,* January 2018; and United Nations Children's Fund, 'Bangladesh', *Humanitarian Action for Children,* May 2018.

73   As described in chapter 3 on preparedness.

74   The first edition of the Sphere Handbook (1999), which was developed following the response to the Rwandan refugee crisis (1994-1996), also defined these priorities.

structure their work around (refugee) rights. Rights should underpin all aspects of service delivery.[75]

The evaluation found that UNICEF's overall strategy in response to the Rohingya refugee crisis was the sum of all programme strategies. While articulating the services it would deliver, the strategy did not indicate what advocacy would be needed to promote the creation of an environment conducive to the planned levels of service provision. UNICEF's strategy documents for the response, including the revised response plan, the HAC appeals presented in October 2017 and January 2018, and the humanitarian-development strategies produced for each of the programmes in April 2018, note a range of services under all five sectors in which UNICEF has a leadership role or assumed a significant role in delivery. However, these read more as work plans than as strategy documents. The overall strategy lacked a clear vision for the response and failed to articulate how the response would be structured to fulfil the rights of refugee children and their families. The evaluation did not find one overall document that combined UNICEF's (main) plans for service delivery, advocacy and communications, financial and human resources and technical support – both the support that the Country Office would need from the regional office and Headquarters and the support that UNICEF would provide to partners.

### Context analysis

The evaluation found that UNICEF's strategy developed between September and December 2017 fell short in terms of the extent to which it was adjusted based on context analysis. While there is no time to waste in an emergency of this scale, and the needs in a sudden-onset refugee influx can be predictable, a situation this challenging requires thorough reflection on the implications of the context for programme delivery.

UNICEF identified three major obstacles early on: the extreme congestion in the camps and the lack of available new land; the lack of a sufficient framework for (refugee) protection; and an inadequate inter-agency coordination mechanism. Although UNICEF was well aware of these obstacles, the evaluation did not find much evidence that the organization adjusted its strategy in light of these challenges. It appears that there has been a gradual realization of the impact of the context on the delivery of services. The evaluation team did find signs of this when it was on the ground in March and April 2018 but many of these issues should have been addressed earlier.

### Prioritization and sequencing

Related to the above, the evaluation found insufficient evidence that UNICEF prioritized activities and programme areas in relation to the needs and the context. As one UNICEF key informant noted, "we are rather bad at setting priorities, because we define everything we do as important." This was confirmed in key informant interviews, which revealed different perspectives on what UNICEF's priorities were and qualified the crisis differently.[76] While it is entirely understandable that priorities can change in the early days of an emergency response given the rapidly evolving situation, the evaluation team could not find clear, documented explanations of the changes. In late August, education was identified as UNICEF's priority, while in the revised October 2017 response plan, WASH was labelled as a key priority in addition to a range of other activities that UNICEF would undertake. The October and January HAC appeals refer to a longer list of priories that included acute watery diarrhoea, malnutrition, child protection, education and social protection. While this list indicates signs of prioritization[77] and sequencing in relation to the increased understanding of the needs of the Rohingya, it includes so many major services that it was unclear which activities should be delivered first.

Indeed, the task of prioritizing represented a formidable challenge given the many urgent needs. In this crisis context, however, it was impossible to deliver everything at the same time, which made prioritization even more

---

75  The Sphere Humanitarian Charter, which underpins the standards to ensure quality in humanitarian responses, explicitly refers to the right to seek asylum and the principle of non-refoulement. This is to say that the rights-based approach finds its roots in human rights law, international humanitarian law and refugee law, with the latter source being explicitly relevant to refugees.

76  UNICEF's early statements on scaling up the response referred to education as a priority. See, for example, United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report', 30 August 2018. Qualifications that were used included "public health emergency" and "children's crisis".

77  It looks to the evaluation team as if there was an implied prioritization to a certain degree, as a number of activities were carried out on time and several activities were completed quickly (see section 2.4 on timeliness).

important. Existing facilities were overwhelmed and where there were no existing facilities, infrastructure had to be built in areas unable to receive such large numbers of people.

The evaluation identified four key lessons. First, in October or November 2017, in addition to listing a range of priorities, UNICEF should also have articulated the limitations that it would face in the delivery of these services and indicate that, unless there were changes to the context, it would not be able to reach all of the objectives set out in the HAC appeals and other relevant documents. As time went by, the (overall) strategy should have been adjusted to account for the limitations and explain any deviations. It was only at the time of the April 2018 field mission that the evaluation team observed adjustments in some strategy documents. In future responses, UNICEF needs to be more realistic and frank in its strategy in terms of what it can and cannot achieve.

Second, UNICEF's strategy documents should have been more explicit about the sequencing of activities. UNICEF had several options at its disposal for avoiding or anticipating failures in terms of gaps or delays. As it assumed major responsibilities in sector leadership,[78] it should have been clearer on which activities should have come first within each sector. While many, if not all, activities that are part of humanitarian response are life-saving in nature, fewer activities are essential to human survival in the first several weeks in a context such as this one. International law offers some guidance as to which services can be regarded as such,[79] but much of this is tacit knowledge in the humanitarian community. While the evaluation did not find this distinction spelled out in UNICEF documents, given that health (i.e., vaccinations) and WASH services were given some priority in the documents and in practice, it appears that UNICEF was aware of what activities needed to be undertaken first. This also applies within sectors. Regarding education, for example, insufficient consideration was given to

which activities should be undertaken first.[80] It appears that UNICEF continued its earlier programme, albeit for more beneficiaries, but without sufficiently taking the new context into account.

Third, documenting decisions around prioritization and sequencing provides clarity on what the organization is trying to achieve and by when. Those that have a stake in the organization's mandate (i.e., United Nations Member States, UNICEF staff, partner NGOs and the beneficiary population), will have expectations. UNICEF would have been entirely correct to manage these expectations by sequencing its response activities without infringing on its mandate. Not only would this have benefited UNICEF – as it would have made clear what the organization could realistically achieve – but it also would have benefited the wider humanitarian community. Such sequencing would have helped other agencies set their own priorities, either in support of or complementing UNICEF's approach.

Finally, and related to the above, much of UNICEF's strategy is embedded in documents that also serve a fundraising purpose, such as the HAC and UNICEF response plans. This combination carries a tension: the drive to mobilise funds can be at odds with a strategy describing the challenges or constraints to service delivery. This tension deserves further reflection.

### Inter-sectorality

UNICEF's overall and programme strategies for the Rohingya refugee response should have better emphasized the need for integration among sectors (programmes). The evaluation team understands inter-sectorality as the process and actions involved in working across sectors and combining or integrating various services that belong to different sectors. While the need for inter-sectorality was recognized in internal exchanges and advice, it was not adequately reflected in the strategies. Given that achieving inter-sectorality is not necessarily easy since

---

78  Several key informant interviews invoked the global leadership responsibilities in several sectors (clusters), even though the clusters were not activated.

79  International human rights law and international humanitarian law offer some guidance as to the core of subsistence rights by enumerating those commodities that are essential for survival. These include: essential food and potable water, basic shelter, appropriate clothing, and essential medical services and sanitation. See Kälin, W., 'Guiding Principles on Internal Displacement: Annotations', *Studies in Transnational Legal Policy,* no. 38, American Society of International Law, Washington, D.C., 2008, p. 83-85.

80  As explained in the education sections, an education-in-emergencies approach, which has been missing in this response, automatically links various sectors and includes life-saving activities. Such an approach is specifically designed for emergency situations, refers to quality learning opportunities for children of all ages and provides physical, psychosocial and cognitive protection in situations of duress.

actors generally work within sectors, the strategies should have better articulated the need to combine the activities of various programmes (and sectors), particularly to manage the lack of operating space. It should be noted, however, that the CCCs do not emphasise inter-sectorality and inter-sectorality remains a challenge in many contexts and for many actors.[81]

## Gaps

The evaluation found significant gaps in regard to protection and gender. While the strategic and overarching importance of protection and gender in humanitarian action are well documented,[82] and UNICEF's strategy recognized protection,[83] gender mainstreaming and gender-based violence as major concerns, there was no overarching discussion of the relevance of these issues to UNICEF's work across sectors.

Regarding protection, the response faced several challenges. As noted, the protection environment for the Rohingya in Bangladesh was not optimal, and the October 2017 HRP largely fell short on protection. While UNICEF's advocacy strategy addressed protection to some extent, these messages should have informed the organization's entire response and protection should not have been treated as an advocacy matter only. In a setting such as this one, protection risks to children and their families are easily identifiable: abuse, exploitation, trafficking and gender-based violence are all imminent risks. Though these risks were picked up, to some extent, in the November 2017 child protection strategy, and included in UNICEF's advocacy strategy of January 2018, they did not receive the prominence they deserved.

The evaluation saw similar issues regarding gender. UNICEF's strategy should have articulated that in an emergency of this size and scale, gender equality should be gradually realized, and it should have explained the sequence of actions to ensure that the delivery of services is gender-sensitive. The first step would be to address basic aspects, such as the effective sex-disaggregation of water and sanitation facilities. The evaluation team observed that some of the gender mainstreaming issues that were not initially included or only partially reflected in sectoral strategies were better addressed in later versions.

## PROGRAMME STRATEGIES

### Child protection
**RELEVANCE TO NEEDS AND CONTEXT**

Given its focus on children, and given that children make up the majority of camp populations, the protection strategy is highly relevant to both the needs and the context. The decisions to focus on unaccompanied and separated children and prioritize child-friendly spaces for the provision of psychosocial support and safe environments for children and adolescents were relevant and appropriate. The early focus on adolescents through adolescent clubs and life-skills education was also relevant, particularly for girls, who are more likely to face social restrictions after puberty. The November 2017 child protection strategy also made repeated reference to gender-based violence and noted UNICEF's intention to play a leadership role in this regard.[84]

Over time, the protection strategy became more attuned to the prevailing context, particularly at the sector level. Although some (refugee) protection activities, may not be part of UNICEF's mandate (in fact falling under the mandate of UNHCR), as the organization responsible for leading child protection, UNICEF should consider the entire protection context in its strategy and understand who

---

81    Ever since the roll out of the cluster approach, inter-cluster coordination and collaboration have been identified as bottlenecks. See, for example, Steets, et al., 'Cluster Approach Evaluation 2: Synthesis report', IASC, April 2010.

82    See, for example, International Committee of the Red Cross, *Professional Standards for Protection Work*: *Carried out by humanitarian and human rights actors in armed conflict and other situations of violence*, 3rd edition, ICRC, 2018; or Directorate-General for European Protection and Humanitarian Aid Operations, 'Humanitarian Protection: Improving protection outcomes to reduce risks for people in humanitarian crises', no. 9, European Commission, May 2016. Both documents define protection as overarching to humanitarian work. Inter-Agency Standing Committee, 'Gender Handbook for Humanitarian Action', IASC, March 2018, notes that "Incorporating gender equality in humanitarian action enhances the impact of humanitarian strategies and interventions" (p 16).

83    The evaluation has been unable to determine whether UNICEF has an overall protection strategy. It is referenced in the November after action review, but the document it refers to is the child protection strategy.

84    The evaluation found that there was some confusion regarding whether UNICEF Bangladesh should take a leadership role in the gender-based violence response.

(Back right) Samira Akter, a Bangladeshi teacher and Rohingya refugee children stand in a makeshift classroom at a UNICEF-supported learning centre at the Balukhali makeshift settlement in Ukhia, Cox's Bazar, Bangladesh.

© UNICEF/UN0158132/SUJAN

addresses what protection risks. Furthermore, although supporting the Monitoring and Reporting Mechanism on grave violations against children was not spelled out in the child protection strategy, as an activity unique to the UNICEF mandate, related activities were prioritized and supported in programme implementation.

The evaluation also found that the prioritization of child protection activities was unclear at least until March 2018. In UNICEF's overall response plan (the revised version of October 2017), the child protection strategy included five pillars. In contrast, the November 2017 child protection strategy referred to three strategic objectives that frame the issues differently,[85] with a long list of outputs – a revision that did not improve clarity and suggested that everything can be achieved.

During the period between the November 2017 child protection strategy, the March 2018 child protection strategy, and a document on the strategic way forward produced in late April 2018, the evaluation found that progressive adjustments were made to address emerging and evolving risks, such as child marriage, child labour, sexual exploitation and trafficking.[86] The March 2018 child protection strategy added a fourth strategic objective related to cross-cutting issues, including coordination and partnership support, monitoring and evaluation, including data management, and evidence building.[87] It also stressed the need to mainstream protection into other sectors, including WASH, to ensure women's safe access to water, sanitation and other services. A gender-based violence strategy, embedded in the child protection strategy, has existed since November 2017.

---

85   The October 2017 revised response plan identifies five priorities: 1) identification, documentation, family tracing, reunification and reintegration of unaccompanied and separated children, including the provision of appropriate alternative care services; 2) psychosocial support will be provided to children and caregivers to protect and promote children's well-being and full participation; 3) strengthen the existing child protection mechanisms, including case management system; 4) responding to gender-based violence; and 5) special attention to adolescents and peacebuilding. The November 2017 child protection strategy contains three objectives with a range of outputs: 1) children live in a caring family environment free from abuse or exploitation; 2) children have increased resilience and are protected from violence, abuse, neglect and exploitation; and 3) gender-based violence is addressed through multi-sectoral service provision and risk mitigation.

86   Such protection risks and vulnerabilities can evolve over time as the situation stabilizes. For example, the risk of child labour can increase in host communities with worsening socio-economic conditions tied to the refugee influx. The risk of child marriage can also increase as families employ negative coping mechanisms in the interest of 'protecting' girls in congested camp situations.

87   United Nations Children's Fund, 'Child Protection Strategy: Rohingya response – Cox's Bazar, Bangladesh', UNICEF, March 2018.

## GAPS

One gap in the child protection strategy was its insufficient emphasis on the refugee context. In addition, while the strategy did prioritize gender-based violence, this objective was critically delayed when it came to implementation. Challenges related to the weak capacities of implementing partners were also not sufficiently addressed in the child protection strategy. The November 2017 strategy included some possible operational directions, but these were not followed up on in a timely manner. The capacity development of partners in the areas of child protection and gender-based violence is currently being addressed through an external consulting agency.[88]

## Education

First, it should be noted that UNICEF's education strategy has not been consolidated in a single written document. The strategy referred to in this section has been inferred from the HAC appeals, the HRP, the JRP and the after action review conducted in late 2017,[89] and reconstructed using key informant interviews. This is poor practice. It makes it difficult to ensure staff and partners have a clear understanding of UNICEF's work in the area (especially in an environment with significant staff turnover).

Second, while it is true that these documents provide indications of the decisions and routes that UNICEF pursued in education, which imply strategic choices, the evaluation has found that these choices reflect doing business as usual, rather than adjustments made based on the specific context.

Third, the absence of clear strategic choices weakens accountability by challenging the oversight of strategy implementation. The evaluation learned of some steps that were taken to adjust to the new context, but only after it had concluded the information gathering phase. These sector-wide steps included, for example, the increase in the number of learners per class from 30 to 40 children.

## RELEVANCE TO NEEDS AND CONTEXT

As noted, prior to the crisis, UNICEF was already implementing education activities[90] for Rohingya refugees in makeshift camps and through non-formal education programmes for out-of-school children in host communities (Teknaf and Ukhia upazilas).[91] At the start of the influx, UNICEF envisaged expanding these interventions to support newly arriving refugee children. It also intended to further strengthen its support to host communities beyond the country programme commitments. While these appear to be valid and much needed steps from UNICEF to provide the Rohingya children with education, the Government has established significant restrictions on education for new arrivals.

The evaluation has produced three findings in relation to the new situation. First, using the various but limited sources of evidence, the evaluation identified several steps taken by UNICEF to rethink the contents and modalities of its education activities. In October 2017, the Government's restriction on the use of the instruction languages and its Out of School Children Programme – Ability Based Accelerated Learning,[92] forced UNICEF to rethink its education strategy. The evaluation found that UNICEF adjusted its programme effectively and in a timely manner by putting together a condensed basic three-level bilingual learning package while developing the Learning Competency Framework Approach (LCFA), an ad hoc learning package responding to the education needs of children aged 5 to 14. In line with another key strategic priority, the LCFA was developed by the UNICEF education programme in full consultation with the Ministry of Primary and Mass Education and education technical agencies in Bangladesh and Myanmar. This collaboration has paved the way for longer-term achievements, including the recognition and accreditation of education for Rohingya.

Second, and on a less positive note, developing and implementing the LCFA has been a lengthy and complex process. The significant number of newly arrived refugee

---

88  The consulting agency is Transition International.

89  United Nations Children's Fund Bangladesh, 'Bangladesh Rohingya Crisis: After action review – Summary report', UNICEF, 18 December 2017.

90  Based on the Out of School Children Programme – Ability Based Accelerated Learning.

91  The Government's Out of School Children Programme supported by UNICEF though the Country Programme.

92  Before August 2017, Bangla was in use a teaching language and the ABAL programme was also applied to Rohingya children.

children (some 400,000 children) implied the need for a radical shift, including the acceleration and dramatic expansion of service delivery. Instead, negotiating the LCFA absorbed a significant amount of time, and the evaluation found evidence that the challenges associated with its timely development were anticipated.[93]

Third, adjusting to the new context would have meant implementing an education-in-emergencies approach. An education-in-emergencies approach, which is specifically designed for emergency situations, facilitates education-based entry points for health and nutrition services, such as immunization, feeding programmes and health screening; critical life-saving skills such as hygiene promotion for cholera prevention and other diseases; psychosocial support and child protection services; and programmes for linking up with families and younger siblings. This approach would also have, in part, compensated for the limitations imposed on (formal) education. However, education-in-emergencies programming was missing from the response.

### GAPS

It follows that the evaluation has seen gaps and delays in the development of the education strategy and its roll-out. UNICEF's failure to integrate the critical life-saving aspects of an education-in-emergencies approach into its response represents a significant missed opportunity. Related to this, UNICEF's CCCs covering education spell out clear responsibilities for building links between the education and child protection programmes. Furthermore, due to the complex process of developing and rolling out the LCFA, in April 2018, the evaluation team received strong indications that the framework will not be operational for children (i.e., implemented for all grades) until the beginning of the next school year (January 2019). Despite this, UNICEF did not develop an alternative phased backup plan to improve the quality of learning or implement the life-saving aspects of education-in-emergencies in the interim. Considering the limited quality and scope of the learning package taught in temporary learning centres, the absence of such alternatives represents a major gap in the strategy.

Adolescent education was another major gap. While enrolment in temporary learning centres covers children aged 14 and under, almost all children in temporary learning centres are under the age of 10. Key informants reported that the main reasons for this included: the limitation of the curriculum and its simple learning objectives; and the conservative practices of the Rohingya, including keeping adolescent girls at home to do household chores and having boys work or attend to relief distributions.

### Health

UNICEF's health commitments were specific and supported the sector-wide commitments outlined in the HRP and the JRP. From the outset, prevention through vaccination was identified as a key priority. Starting with a large vaccination campaign, by October 2017, the UNICEF health strategy had distilled three focus areas: 1) a primary focus on preventive services, including providing immunization and antenatal care and supporting the coordinated effort on acute watery diarrhoea; 2) intervention in curative services, setting up static health centres to provide basic essential health services; and 3) continued support to health systems in Cox's Bazar District, including strengthening and expanding referral care services for specialized newborn care and supporting data collection and analysis for the availability of real-time data in the Civil Surgeon's Office.

Building on this, the November 2017 HRP articulated six strategic areas of focus: 1) campaigns and routine immunization; 2) acute watery diarrhoea preparedness and response; 3) primary health care; 4) referral care as part of the district approach; 5) social mobilization and community engagement (in collaboration with the C4D section); and 6) supporting inter-agency coordination in the health sector. Each of these strategic and programmatic choices were appropriate and relevant to the requirements set by the prevailing context. The addition of the latter two areas also appropriately reflected the evolving situation in terms of social mobilization challenges in the immunization response and in sector coordination during the early stages. A further addendum was drawn up to include the response to the diphtheria outbreak.

---

93  See United Nations Children's Fund, Education Scale Up Plan', UNICEF, November 2017 (attached to the After Action Review, 18 December 2018).

The prioritization of immunization was particularly appropriate, relevant and proportional to the risk of disease outbreak, given the aggravating factors (i.e., the low vaccination status of Rohingya refugees and their lack of access to quality health care in Myanmar). Compounding factors included the poor sanitation infrastructure, poor hygiene practices and congestion in the camps. Adopting the two-pronged approach of mass campaigns and routine immunization was appropriate to achieving the rapid and timely increase in coverage while also promoting a sustainable response.

As evidenced in the October 2017 revised response plan, UNICEF worked in close collaboration with the Government, establishing a strong relationship that facilitated the immunization response in particular.

### GAPS

Although primary health care was identified as one of six strategic areas of focus, the implementation of the primary health care plan has been delayed due to external and internal factors, as discussed in section 2.4. The integration of gender-based violence within the health response was clearly articulated at the outset in the October 2017 (revised) response plan, with the focus on counselling and referral through primary health care. However, the overall scale of implementation of the gender-based violence response has been limited due to the slow realization of primary health care commitments. A more significant response to the substantial mental health needs was not considered an area of comparative advantage for UNICEF's health programme, particularly given that UNFPA was understood to be committed to addressing this area.

### Nutrition
### RELEVANCE TO NEEDS AND CONTEXT

In its October 2017 (revised) response plan, UNICEF identified four strategic focus areas for nutrition: 1) treatment of severe acute malnutrition (SAM); 2) counselling to support breastfeeding; 3) micronutrient supplementation; and 4) inter-programme coordination, particularly with WASH. All four areas are appropriate and

relevant to the needs of the population, as evidenced by the results of the emergency Standardized Monitoring and Assessment of Relief and Transition (SMART) surveys conducted between October and November 2017. These surveys in Kutupalong, Extension and Nayapara camps indicated high rates of SAM, stunting (44 per cent), anaemia and morbidity from diarrhoea and acute respiratory infections.[94]

Within these programmatic choices, the 2017 HAC appeal and UNICEF's after action review identified the treatment of SAM using ready-to-use therapeutic foods (RUTF) as the priority programme choice. The prioritization of treatment for SAM was appropriate and relevant to the needs of the population.

### GAPS

While a multi-sectoral approach was part of the strategy, UNICEF's nutrition programme strategy did not frame the interventions within a more integrated overall approach. Such a framing both ensures continuity of care for acute malnutrition and provides a stronger emphasis on supporting appropriate infant and young child feeding (IYCF) practices, given the context and life-saving potential of IYCF. The continuity of care was constrained during the initial phase due to a slower response from WFP to establish targeted supplementary feeding programmes. Once these services were operational, more should have been done sooner to strengthen referral pathways across the continuum of care. Furthermore, the evaluation found that 70 to 80 per cent of SAM admissions are children aged 6 to 23 months,[95] a strong indicator of poor IYCF practices and the need for greater emphasis on IYCF. This was also evident from the results of the SMART nutrition surveys. While IYCF was clearly considered from the outset and included (i.e., in terms of the physical establishment of IYCF spaces and counsellors within nutrition centres), there was insufficient attention/prioritization of the definition, standardization and quality of the IYCF interventions delivered across partners, which in the context of the Rohingya refugee response, required dedicated IYCF leadership and technical support.

---

94   Emergency Nutrition Assessment Final Report, Cox's Bazar, Bangladesh, 22 October to 27 November 2017.
95   Analysis of nutrition sector monthly report outpatient therapeutic feeding programme database, February 2018.

Due to lack of data, the evaluation team was unable to unpack the reasons why IYCF was not adequately prioritized in line with the needs. Comparing budgets and funding for SAM and IYFC, for example, did not provide further insight. Treatment for SAM is a highly visible intervention and the results are easy to measure in terms of numbers treated. IYCF is a softer intervention, with the package of interventions less defined globally, and tangible results are more difficult to measure beyond the number of mothers counselled. Life-saving impact is neither immediately measurable nor well recognized. The evaluation can only speculate on the degree to which these factors played a role in prioritization. What is clear is that at the Cox's Bazar level, the IYCF response was limited by the scale of the needs and the human resource constraints on the nutrition programme and the sector as a whole.

## WASH
### RELEVANCE TO NEEDS AND CONTEXT

The WASH programme strategy was primarily driven by the objective to rapidly deliver services at scale in a race against diarrhoeal outbreaks. The evaluation found that this objective was relevant to the context and that much of the initial work focused on efforts to improve sanitation conditions. This sanitation work focused on quantity, which makes sense in the beginning, but must be followed by quality efforts. The evaluation found that the process of developing the WASH programme and sector strategies moved forward at key moments (i.e., linked to the HRP and the JRP). The impetus for UNICEF's programme strategy also came from the sector, given the size of the other actors delivering WASH services, and the importance that UNICEF be seen as taking a leadership role.

The strategy set targets for the number of services to be delivered in relation to the commitments that UNICEF made (i.e., to address 50 per cent of the WASH needs), which appear as initially justifiable. Although justification for this 50 per cent decision was not apparent in UNICEF policies or guidelines, this approach seems to reflect a rule of thumb based on global practice. Given the magnitude of the needs, the evaluation team felt that the decision was justified at the outset (i.e., the HRP phase), but not clearly justifiable at the JRP phase. A blanket 50 per cent commitment risks that the contributions of other actors will be overlooked. From an appeal perspective, UNICEF had budgeted to cover between 25 to 31 per cent of the needs (i.e., lower than the 50 per cent commitment). This smaller figure may have to do with the fact that in a joint appeal, UNICEF has to negotiate its position in relation to others, in this case IOM and UNHCR. This is not the case for the HAC, however, where UNICEF indicates how many people it intends to reach. In comparing UNICEF's various commitments, the evaluation found variations in the number of people UNICEF WASH intended to reach, ranging between 450,000 and 600,000 – a variation that UNICEF justified retrospectively.

The evaluation found that the UNICEF WASH strategy, which underpinned the October HRP, included a first/acute phase latrine target of 1 for every 100 refugees, later followed by 1 for every 75 refugees (for the first months). This was driven by the scale of task, but it was problematic because it diluted the standards. Had WASH sector actors kept to a 1 for every 50 target and then 1 for every 20 target, the limitations could have been highlighted (i.e., pointing to the consequences of extreme congestion as a higher target was not achievable).

### GAPS

The WASH response faced major challenges in relation to two major activities: faecal sludge management (FSM) and hygiene promotion. These challenges were recognized in the WASH strategy relatively early in the response, though the degree of complexity given the scale and congestion were underestimated, particularly for FSM. The FSM strategy is vague and underdeveloped. It fails to address key issues such as the significant shortages of implementing capacity, sustainability, on-site solutions (where there is little to no space), and criteria for determining which solutions have the potential to be scaled up or eliminated.

The strategy also overlooks gender sensitivities. The focus on quantity drew attention away from the need to incorporate gender issues in the first months of the sector response. Focus group discussions undertaken by this evaluation provided indications that the excreta management needs of many girls and women have not been met. These issues remain major challenges for the programme and the sector.

(Left) Fariduallah, 25, collects water from a community hand pump in the Madhu Chara area of Kutupalong makeshift settlement in Ukhiya Upazila, Cox's Bazar District, Bangladesh.

© UNICEF/UN0152885/NOORANI

## SUB-CONCLUSION

The evaluation observed a range of efforts to define strategies, especially at the programme level.[96] The overall strategy was lacking a broad vision, however. This chapeau should have spelled out UNICEF's priorities vis-à-vis the three dominant obstacles with considerable impact on the overall response. UNICEF's strategy should have anticipated how these constraints would impact service delivery.

There was a lack of exploration of how the context would give rise to major programming constraints. Given the extreme congestion, it was clear early on that certain activities could not be carried out and significant compromises would have to be made.[97] However, the

UNICEF strategy documents did not sufficiently explore these limitations and translate them into adjustments; instead, they put everything forward as a priority. The evaluation acknowledges that this was due in part to the leadership position that the organization found itself in,[98] as well as the scale and magnitude of the crisis.

Many of UNICEF's programme strategies identified priority issues for the response. For some programme areas, such as education, essential aspects, such as an education-in-emergencies approach, were overlooked, as was the issue of insufficient implementing capacity. In addition, some programme strategies, such child protection, could have provided a more thorough context analysis.

---

96   The evaluation could not find a strategy for education (programme or sector).

97   E.g., WASH service delivery, including hygiene promotion, according to the Sphere standards; gender-based violence in relation to child protection; adolescent education, etc.

98   Although already active in Cox's Bazar, UNICEF was not seen as the partner of choice at the outset of the crisis.

# 2.4 Overall effectiveness and other criteria

The evaluation reviewed UNICEF's response in terms of effectiveness, timeliness (coverage) and proportionality, and quality. Other assessment criteria include the following aspects, which should also be taken into account in the delivery and targeting of services: equity, which involves the elements of gender, age, disability and diversity; accountability to affected populations; and efficiency in terms of the availability of alternatives to a chosen service delivery modality.[99]

Before examining the overall and programme responses against these criteria, the evaluation reiterates the three overarching obstacles of: 1) extreme congestion; 2) lack of a sufficient protection framework for refugee children; and 3) the major problems around inter-agency coordination. These three obstacles have impacted this response and UNICEF's work so significantly that all findings in relation to the criteria should be considered with this context in mind.

## OVERALL EFFECTIVENESS, TIMELINESS AND QUALITY

The criteria of effectiveness, timeliness/coverage and quality must be assessed as a whole in humanitarian response as exclusive emphasis on one criteria risks ignoring other critical aspects. That said, the evaluation recognizes that certain criteria may prevail at different times. Timeliness will be a critical factor in the first weeks of a sudden-onset crisis and, therefore, has been covered to some degree in the section on scaling up. This chapter also includes references to timeliness in terms of what has been delivered, and where it notes gaps and delays in delivery, timeliness is obviously an issue. Quality is likely to be emphasized at a later stage, but consideration of quality should be part of the response from the start. Based on the document review, key informant interviews and direct observation, the evaluation has seen marked differences between the initial response and the response in April 2018 when the evaluation team was on the ground. It is encouraging to have witnessed these improvements, but the evaluation

> ## SUMMARY
>
> **To what extent does UNICEF's response in the sectors of nutrition, health, WASH, child protection and education meet the following criteria:**
>
> **a.   Effectiveness (achieving stated objectives)**
>
> **b.   Timeliness and proportionality (in scaling up for adequate coverage) and why**
>
> **c.   Quality (consistent with relevant standards and policies, i.e., the CCCs and Sphere Standards**
>
> **d.   Equity (i.e., delivered for different groups)**
>
> **e.   Accountability to affected populations (in an effective, proactive and culturally respectful way)**
>
> **f.   Efficiency (compared to alternatives)**
>
> UNICEF's response in the first months was aimed at the rapid delivery of life-saving services, focusing on high coverage. This approach is appropriate for the first several weeks to cover target figures of people affected, as UNICEF did. But quality must follow quantity, which did not happen in all programmes.
>
> UNICEF has been part of an initial service-delivery-oriented response that ignored critical and important aspects of humanitarian action, most notably protection, gender and gender-based violence, which distinguish humanitarian work from other service delivery.

also notes a significant amount of wastage, as seen, for example, in the decommissioning of large numbers of latrines. A number of interventions could and should have been implemented differently from the start, including by UNICEF. This puts the efficiency of the entire response, including UNICEF's response, into perspective.[100]

In reviewing quality and effectiveness, the evaluation has used the CCCs and other humanitarian benchmarks, such

---

99   Textboxes provide additional detail on the context of these latter three criteria.

100  The evaluation was asked to look at efficiency and it has done so at several points. Overall, however, the relevance of the efficiency criterion is limited in this response due to contextual factors and the fact that issues poorly addressed in the beginning are still significant factors 6 to 8 months into the response.

as the Sphere Standards and its companion standards (*see Annex 4 for additional details about this analysis)*. To ensure quality, many of these standards are orientated towards processes, in that they guide UNICEF and other agencies to progressively reach them. In the response at hand, however, few of the process aspects of the standards have been followed, let alone met. In part, this is due to the context. It also relates to agencies' underperformance in terms failing to recognize key aspects of the crisis and the (initial) focus on quantity. UNICEF should have signalled this reality, which was apparent early on, and noted that the lack of quality of the overall response carries significant risks not only for UNICEF, but for the reputation of the humanitarian sector as a whole.

The evaluation has found that for a number of its programme activities, UNICEF reached its stated objectives. In the first several months, timeliness and coverage drove the response, especially in the sectors of nutrition, health and WASH. The fact that UNICEF reached many of its programme targets in these sectors on time is no small achievement, given the obstacles. Furthermore, the fact that, to date, there have been no major epidemic outbreaks other than diphtheria in a region where cholera is endemic reflects the positive results achieved, particularly in immunization and WASH.

In terms of quality, whereas compromises between timeliness and quality are acceptable in a life-threatening environment, quantity must be matched by quality over time. For many sectors, this has been an enormous challenge, and an issue that some of the UNICEF programmes recognized. In WASH, for example, well-intended, but initially low-quality, uncontrollable and uncoordinated efforts from a range of actors to establish water pumps and latrines led to the decommissioning of many of these latrines and put efficiency in stark perspective. UNICEF advocated successfully for a government order to stop the construction of shallow latrines and wells. Other services have also seen improvements in quality over time, as explained in the sections on the various programmes (sectors).

## PROGRAMME EFFECTIVENESS

With respect to the various sector programmes, the evaluation produced the following findings.

### Child Protection
**RESULTS: ACHIEVEMENTS AGAINST TARGETS AND TIMELINESS**

In its response to child protection risks at the onset of the emergency, UNICEF correctly prioritized addressing the protection of unaccompanied and separated children; psychosocial distress among affected children; and the monitoring and reporting of grave violations.[101] The evaluation also recognizes the timely and effective implementation of identification, family tracing and reunification/alternative care services for unaccompanied and separated children.[102][103] Despite the initial challenges,[104] UNICEF successfully established an adequate and efficient case management system and alternative care approach, including with the development of cash-based assistance for foster families. This also includes the creation, with partners, of a sector-level standardized case management system for unaccompanied and separated children. Other important quality elements included strong early engagement with the Bangladesh Department of Social Services, including their involvement in developing the case management procedures; the robust and successful advocacy for family-based care; and capacity development efforts with Department of Social Services social workers. In April 2018, these efforts paved the way for expanding case management systems to address other emerging risks and vulnerabilities – both for refugees and host communities – such as trafficking, child marriage and child labour.

In addressing the serious psychosocial distress of Rohingya children and their families, the evaluation has found that

---

101  Although not included within the scope of this evaluation, the Monitoring and Reporting Mechanism is a fundamental child protection measure. The evaluation acknowledges the timeliness and critical relevance of this consistent component of the child protection programme, and the coordinated efforts that UNICEF Bangladesh and UNICEF Myanmar have established in this regard.

102  Including identification, documentation, family tracing, verification, reunification and alternative care.

103  Management of unaccompanied and separated children has been in place since the beginning of the response.

104  In the first weeks of the response, the quality of the case management for unaccompanied and separated children was challenged by the lack of a shared definition of unaccompanied and separated children among relevant actors, including the Bangladesh Department of Social Services. As a result, the target was overestimated.

the focus on child-friendly spaces and adolescent clubs[105] was highly relevant. The number of child-friendly spaces increased from 33 in September 2017 to 133 in early November 2017. Close to 80 per cent of the 2017–2018 target was achieved by February 2018 and nearly 50 per cent of the 2018 target was already achieved by April 2018.[106] While these child-friendly spaces have been key to providing a safe space to children and adolescents amidst the extreme congestion and precarious living conditions, UNICEF's scale up was insufficient to ensure adequate coverage. Although systems have been developed, these systems did not sufficiently address gender-based violence, case management services and community-based child protection committees linked to child-friendly spaces. The limited capacity of NGO partners on the ground and, in the case of gender-based violence, understaffing, are among the factors that have hampered effectiveness. UNICEF is taking steps to make improvements in these areas.

To some extent, the child-friendly spaces compensate for the limitations imposed by the Government of Bangladesh on education activities. An early focus on adolescents through adolescent clubs and life-skills education was also highly relevant, especially for girls, who are more likely to be restricted in their homes after puberty. The adolescent groups, which are an alternative approach, have also been hosted in private shelters and are faced with clear limitations, given the reduced space in which families live. The child-friendly spaces have facilitated the identification of children who were severely affected by the events and in need of focused and specialized psychosocial support. However, the evaluation noted that specialized mental health services that are sensitive to Rohingya beliefs and ways of coping with distress remain a critical gap in the response.

Parallel to the establishment of child-friendly spaces, community-based child protection mechanisms known as community-based child protection committees[107] were established appropriately and in a timely manner.[108] Although no targets are set for the number of community-based child protection committees, the committees that are currently operational do not have adequate capacities to ensure sufficient coverage. In fact, focus group discussions with refugees showed a limited awareness of these committees and their functions.

While UNICEF's child protection strategy does not reference protecting newborns conceived during sexual assaults, UNICEF has played a leading role in advocating for and developing intervention plans for these children in providing them with a future.[109] UNICEF and partners have demonstrated strong awareness and action on this sensitive issue.

The evaluation has appreciated the timely shift in programmatic focus towards case management services for children at risk of exploitation and abuse,[110] which took place in December 2017.[111] As previously noted, protection risks and vulnerabilities evolve over time as the conditions of refugees and host populations stabilize. UNICEF has appropriately refocused on developing case management pathways and training partners on case management.

Nonetheless, a timely vulnerability analysis has been slowed down by the delayed agreement between UNICEF and UNHCR on protection information sharing protocols and systems. While there is a global agreement between UNICEF and UNHCR to share child protection data, this agreement needed to be operationalized in the local context through a specific agreement between the two agencies. While the agreement was close to being signed in November 2017, ultimately, it was only signed

---

105  Adolescent clubs are organized groups of adolescents that meet for recreational, (psycho-)social activities, and life-skills education related to protection.

106  United Nations Children's Fund, 'Bangladesh', *Humanitarian Action for Children 2017*, UNICEF, May 2018.

107  Community-based child protection committees are groups of influential individuals and parents who work to promote and support the protection and well-being of children at the community level in a number of ways.

108  Between 27 October 2017 and 8 December 2017, the number of community-based child protection committees was increased from 38 to 163.

109  UNICEF, 'Understanding and Addressing the Needs of Survivors and their Children Born of Sexual Violence', Inter-Agency Action Meeting Notes, Cox's Bazar, 25 February 2018;

110  Including sexual violence and exploitation, trafficking, child labour, child marriage and violence.

111  Following the joint rapid needs assessment on education and child protection.

in early June 2018. This delay, and the consequent delay in the analysis of the synthesized data is likely to have had a particular impact on the most marginalized children (e.g. children with disabilities and mobility problems, especially girls).

## DELAYS OR GAPS IN THE RESPONSE

As noted above, given the importance of the gender and gender-based violence responses, the gaps in these areas have become dominant features of the overall child protection response.

The evaluation recognizes that a major issue impacting the effectiveness and efficiency of the child protection and gender-based violence responses has been the limited capacities of partners (both national NGOs and the Ministry of Social Welfare) and the high turnover of specialized partner staff. For this reason, UNICEF found itself seriously limited in its ability to scale up and expand the scope of services, including, for example, safe community-based environments for women, gender-based violence case management, focused psychosocial support and specialized mental health and psychosocial support services. UNICEF put out a tender for a consultancy to support capacity development on child protection and gender-based violence. However, while the need for dedicated support to develop partner capacities was identified in November 2017,[112] the terms of reference and request for the international consultancy bid was only put forward by the Cox's Bazar office in February 2018 and approved in May 2018.

## Education
### RESULTS: ACHIEVEMENTS AGAINST TARGETS AND TIMELINESS

Of all of the programmes reviewed, the evaluation found the education response to be among the most challenging,

in large part due to the restrictions imposed by the authorities on the education of new refugee arrivals. As a result, during the period under review,[113] the targets set in the 2017 HAC appeal and the HRP were largely unmet.[114] However, significant efforts are underway to reach the targets set for 2018 by the end of this year.[115]

In fact, strong progress has been made in recent months. Temporary learning centres have contributed significantly to the physical protection and psychosocial support of children and their families. These centres provide safe spaces that allow children to re-establish their daily routines, which has helped to normalize their lives. The education programme's extensive engagement with the Ministry of Primary and Mass Education throughout the response has also been an important strength. Due to the continuous consultations and efforts by UNICEF to keep the Ministry on board despite the limitations imposed on the education of Rohingya children, the LCFA is awaiting formal endorsement from the authorities. The endorsement of the LCFA represents a crucial step towards realizing the right to (formal) education of Rohingya refugee children.

Nonetheless, given the overstretched capacities of partners and the limited progress made to date, achieving the 2018 targets will be difficult.[116] Those Rohingya children who are receiving education services, receive a basic three-level bilingual learning package on working days (only), which includes two-and-a-half hours of basic literacy, numeracy, Burmese language and life-skills education. The children who arrived after 25 August 2017 have not received textbooks, only a few printed learning materials. Many children enrol in traditional Islamic schools, or *madrasas*.

As part of the education programme, UNICEF supports the Ministry of Primary and Mass Education and the

---

112 United Nations Children's Fund, 'Gender-Based Violence in Emergencies Six Month Strategy: Rohingya response – Cox's Bazaar, Bangladesh', UNICEF, November 2017.

113 As a reminder, this evaluation covers the period of the end of August 2017 through the end of April 2018.

114 See United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No.23 (Rohingya influx)', UNICEF, 18 February 2018. Reporting against the HAC through February 2018, shows that only 41 per cent of targeted children aged 4 to 14 were reached with education activities and 38 per cent of targeted teachers were recruited and trained.

115 United Nations Children's Fund, 'Bangladesh', *Humanitarian Action for Children 2017*, UNICEF, May 2018; JRP; United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No.31 (Rohingya influx)', 6 May 2018.

116 The May 2018 revised HAC appeal shows that by the end of April 2018, only 43 per cent of children aged 4 to 14 were enrolled in education activities and 48 per cent of targeted teachers were trained. The target for adolescents remains critically unmet, with 0 per cent of the target reached by the end of April.

Directorate of Primary Education in the Teknaf and Ukhia upazilas. UNICEF's contributions include support to host community schools through the School Excellence (or Effectiveness) Programme, which distributes educational materials. The number of primary schools involved in this programme increased from 36 in 2016 and early 2017 to 50 in 2017 and early 2018. Still, the socio-economic circumstances impacting the retention of local resident children in education need to be further explored and addressed in a joint effort with child protection.

## DELAYS OR GAPS IN THE RESPONSE

The evaluation found two key weaknesses in the implementation of the UNICEF education response. The first – as indicated in section 2.3 on UNICEF's strategy and priorities – is the limited use of an education-in-emergencies approach. Though they are straightforward and highly relevant, the critical life-saving activities inherent in an education-in-emergencies approach were not sufficiently integrated into the education response. When such activities are carried out as part of education programming, they create fundamental links with health, nutrition and child protection programmes. There could also have been increased focus on resilience building, psychosocial support/socio-emotional learning activities, and self-protection life skills.

Second, the targets set for adolescent education remain critically unmet, with 0 per cent of the target reached by the end of April 2018. Government restrictions on programming for adolescent education do not serve as sufficient justification. Education agencies, especially UNICEF, have a responsibility to find (alternative) ways of delivering adolescent education and/or advocating for it. Key informant interviews also revealed a general sense that school enrolment of children older than 10 is low. Possible reasons for this include that learning activities

are too simple, older children are expected to be involved in relief collection or work, and girls approaching puberty are not allowed to leave their homes. While efforts to address these gaps are described in the April 2018 two-year humanitarian-development strategy, innovative strategies to promote inclusive learning, especially for girls after puberty[117] and children with disabilities and mobility challenges, remain lacking. Adolescent clubs, for example, could be used for learning purposes while promoting the adolescent right to education.

A further weakness relates to the delayed implementation of the LCFA. The evaluation acknowledges the comprehensive structure of the LCFA and highly values its long-term importance. The fact that the LCFA provides a systematic pathway for Rohingya children to enjoy quality, protective and relevant learning makes it pertinent to the eventual return and reintegration of Rohingya refugees to Myanmar. The LCFA addresses several of the earlier weaknesses seen in the education roll-out and creates the conditions for a standardized learning assessment that will lead to recognized certification. However, in April 2018, the evaluation team received strong indications that the LCFA will not be fully operational for children until the beginning of 2019.[118] The lack of a phased plan to improve the quality of learning in the meantime – that is, before the LCFA is implemented – is of great concern.[119]

Another issue impacting the effectiveness and efficiency of the response is the limited capacity of partners. First, partner numbers are limited because several of UNICEF's traditional international education partners, such the International Rescue Committee and the Norwegian Refugee Council, struggled to secure their registration in the country and/or receive their government authorization, known as Foreign Donation (FD) 7. As a result, and in line with the plan developed based on the after action

---

117  Including menstrual hygiene management in the temporary learning centres.

118  In April 2018, the roll-out plan was being developed within the education sector. The plan will include important preliminary activities, such as the identification and translation of learning materials; the development and implementation of ad hoc teacher trainings and training of trainers for sector members/UNICEF partners; assessment of learning for placement in different grades; and the development of curriculum for Grade 3 onward; among others. This means that the new curriculum for the first three grades will not be taught in the learning centres before the end of the 2018 school year.

119  As noted, on working days, daily teaching hours remain minimal (2.5 hours); textbooks are not provided; and teachers received a minimum package of training, which included five days of training on basic education (four days for early learning). The minimum package for Burmese language instructors is three days. Both teachers and Burmese language instructors receive monthly follow-up sessions and refreshers. Training packages are not standardized among UNICEF partners or within the education sector. Critical areas such as psychosocial support and life-saving information (e.g. health and hygiene education) are not included in the teacher training.

A health worker inoculates a Rohingya girl in the Unchiprang makeshift refugee camp in Cox's Bazar district during the UNICEF-supported measles vaccination campaign.

review (November 2017),[120] UNICEF increased its number of national partners. However, the evaluation has found that these partners, who are being held to ambitious targets, are experiencing overstretched capacities in general, have limited technical capacities where needed and are struggling to recruit and retain educational staff.[121] The education response has not sufficiently taken these limitations into account,[122] and there is limited evidence of efforts to strengthen partner capacities.

## Health
### RESULTS: ACHIEVEMENTS AGAINST TARGETS AND TIMELINESS

UNICEF health programme evidenced the strongest results among all programme areas. UNICEF took responsibility for a significant amount of work by adopting the two-pronged approach of mass campaigns and routine immunization. Although this has been a collective sector response, UNICEF provided strong support and inputs,

including with its good relationship with the Government, by securing approval for mass campaigns and by ensuring the availability of vaccines. The scale up of immunization coverage has been effective overall and disease outbreaks have been contained. The strong performance of UNICEF in health is also a product of an overall well-performing sector under the strong leadership of WHO and the well-resourced UNICEF health programme team. The UNICEF team includes an experienced leader and strong support in the specific technical areas of immunization and cholera, with additional support from the C4D section.

In a collective sector effort with strong support from UNICEF, the immunization response, including mass campaigns and routine immunization, has been generally effective in achieving stated objectives (i.e., the targets of the October 2017 HAC appeal and the revised HAC appeal of May 2018).[123] Likewise, the target for children vaccinated during the third-round diphtheria campaign (10

---

120  Education partners increased from two national NGOs (Mukti and CODEC) to four national NGOs (Mukti, CODEC, DAM and BRAC) and one international NGO (Save the Children).

121  Recruitment has proven to be difficult due to the lack of qualified teachers in host communities and the lack of Burmese language instructors among the refugees. Precarious teaching conditions, weak gender-sensitive planning, such as the absence of WASH facilities for female teachers, and low salaries lead to a high rate of teacher drop-out, especially among female teachers. Moreover, the fact that Burmese language instructors are not recognized as educational actors is demotivating and impacts their performance.

122  See also section XX on working with partners.

123  For refugee children aged 0 to 11 months who have received pentavalent 3 vaccine.

to 25 March 2018) was met, and disease outbreaks have been contained. The approach has been effective – at least in part – because of UNICEF's good relationship with the Government. This relationship helped UNICEF secure approval for mass vaccination campaigns and secure the availability of vaccines. However, one area where the immunization response was neither timely nor effective was in the use of vaccination record cards – a strong national system that was overlooked in the UNICEF response.

To address initial challenges in the quality and coverage of vaccination campaigns, UNICEF C4D collaborated with the health programme to foster stronger community engagement in vaccination. However, according to the rapid convenience monitoring carried out following the March 2018 diphtheria campaign, up to one third of refugees remained reluctant to be vaccinated. This reluctance reinforces the need for C4D to continue its community engagement efforts and foster learning about vaccination. These efforts, which were found to be particularly effective in improving coverage, include the use of focus group discussions to test and ensure the appropriateness of messages for the targeted population, and the use of house-to-house mobilizers, carried out by implementing partners.The evaluation has found that the UNICEF health section's efforts in acute watery diarrhoea preparedness and response have been appropriate to the needs and, to date, effective as part of the joint collaborative effort led by WHO. Oral cholera vaccination targets have been met. Although vulnerability and risk remain high, morbidity from acute watery diarrhoea is now relatively stable and there have been no outbreaks. An initial lack of in-house capacity at UNICEF was addressed through external consultations to develop a response plan. UNICEF contracted an experienced implementing partner in acute watery diarrhoea response to establish and run diarrhoea treatment centres and conduct training across the sector and implement an oral cholera vaccine effectiveness study. With the support and active involvement of C4D colleagues, UNICEF health section staff actively contributed to the development of the overall WASH and health sector acute watery diarrhoea preparedness plans, which have recently undergone several rounds of revisions to become more robust.

## DELAYS OR GAPS IN THE RESPONSE

In relation to primary health care and acute watery diarrhoea response, the evaluation has found that timeliness, quality and coverage of the response, as carried out through implementing partners, were negatively impacted by challenges establishing fully functional health facilities and diarrhoea treatment centres. These challenges included bottlenecks, such as problems with site identification and construction, which primarily had to do with issues with local contractors and supplies of equipment; and the recruitment and retention of medical staff. Overall, these external bottlenecks have hindered UNICEF's performance in relation to its stated objectives in primary health care. As of February 2018, while targets for measles and rubella, oral cholera vaccine and antenatal care had been met, only 57 per cent of targeted children under 5 were accessing health care. As of April 2018, this figured had increased to 67 per cent with the construction of additional facilities. An important lesson learned has been that while the original preference was to contract with international NGOs for reasons of quality, having national partners with local connections negotiate with local contractors is highly valuable. The evaluation has also seen issues of UNICEF's own making, including supply and procurement challenges for in-kind operational supplies, such as generators, solar panels, water tanks and laptops. This has had a significant impact on the ability of health partners to fully scale up their 24/7 services (as discussed in section 2.9 for more on supply).

Regarding the significant mental health and psychosocial support needs of refugees, in line with the CCCs, UNICEF's response has focused on counselling and case referral through primary health care facilities. However, as primary health care has been delayed, mental health support has also seen less progress than planned.

## Nutrition
### RESULTS: ACHIEVEMENTS AGAINST TARGETS AND TIMELINESS

The UNICEF nutrition programme included nutrition surveys, micronutrient supplementation, emergency IYCF and treatment for SAM. As discussed, the programme has focused on SAM treatment, and the evaluation has

found that UNICEF's rapid scale-up of SAM treatment has been a significant achievement. In 2017, treatment for SAM exceeded the target, and according to data available in May 2018, UNICEF appears on track to reach its target of providing treatment for SAM to 70 per cent of children targeted by the sector. A further achievement is that the quality standards for treatment for SAM have been met, in terms of the cure, death and defaulter rates. However, quality gaps remain, as evidenced in programme monitoring visit reports, including inconsistent adherence to protocols and standards; duplication of services; poor referral mechanisms between stabilization centres, targeted supplementary feeding centres and blanket supplementary feeding programmes; and discrepancies, double counting and late reporting.

Several factors played a role in UNICEF's ability to rapidly scale up its nutrition programming in the Rohingya response. The organization's role in successfully advocating for the approval and importation of ready-to-use therapeutic food through the Institute of Public Health Nutrition was appropriate and timely, particularly given the initial opposition to this method of treatment for SAM. The prompt delivery of these supplies to Cox's Bazar meant that outpatient treatment for SAM could be brought to scale. Furthermore, UNICEF's contributions to Nutrition Action Week, which was conducted in November 2017, helped achieve increase in the SAM treatment caseload by one third through mass screening and referral of children aged 6 to 59 months. Finally, the timely emergency nutrition assessment surveys provided quality data for effective planning for a response of this scale.

Regarding UNICEF's IYCF targets, the organization achieved the 2017 HAC appeal objectives by exceeding its target for pregnant and lactating women reached with counselling on appropriate IYCF (although limitations in the definition of the indicator may mean this number includes recurrences and that some were reached with messages rather than counselling). UNICEF has also provided good support to IYCF pilot initiatives, such as the community management of acute malnutrition in infants programme implemented by Save the Children, which is implemented in other parts of Bangladesh and was extended for use in this response.

## DELAYS OR GAPS IN THE RESPONSE

The overriding weakness in the nutrition response has been the lack of continuity of care for infants and children with acute malnutrition. As with other sectors, this weakness finds its origin in external factors, especially the extreme congestion, lack of site planning and delays in WFP's establishment of targeted supplementary feeding programmes for the treatment of moderate acute malnutrition, as well as factors that were within UNICEF's control.

Beginning with those factors in UNICEF's control, the implementation of nutrition service delivery takes place in line with United Nations agency mandates. Treatment for SAM has been implemented by UNICEF and UNHCR and their partners, and treatment for moderate acute malnutrition has been covered by WFP and its partners. However there has been no clear agreement in place among the three agencies for how to coordinate this work. Such an agreement could have facilitated, for example, the option of co-funding one partner to deliver treatment for both moderate and severe acute malnutrition. To be clear, the fact that the relevant United Nations agencies still do not have such agreements in place to support better coordination and a stronger continuum of care for children with acute malnutrition is a glaring gap in the system.

This internal (United Nations) weakness has been further compounded by the external factors noted above. Due to lack of site planning and extreme congestion, different nutrition services have been installed in different locations and at different times. While UNICEF moved quickly to establish outpatient therapeutic feeding programme centres, these were in standalone sites that were not integrated into existing health posts or stabilization centres. WFP's targeted supplementary feeding programmes did not start until November 2017, by which time UNICEF had an established set of implementing partners and outpatient therapeutic programme sites. Establishing targeted supplementary feeding programmes in close proximity to outpatient therapeutic programmes was no longer possible. However, the physical disconnect between the various services could have been rectified by the establishment of stronger referral mechanisms, such as a mapping and identification of the closest referral

centres and improved coordination at camp level. This issue is only now being addressed.

Weaknesses have also been found in IYCF counselling. Due to stretched capacities and leadership gaps, the focus on SAM has led to a (*de-facto*) de-prioritization of IYCF. According to key informant interviews, IYCF was maintained a priority (on paper), but this was not the case in practice. Overall, there are gaps in the timeliness, quality and coverage of IYCF counselling. The contributions of short-term technical support staff to the sector have been good but there has been limited follow through on initiatives started. Within the programme section, a request for additional dedicated support has yet to be fulfilled and partners' capacities remain limited. Furthermore, while a selected number of spaces for breastfeeding counselling were integrated into outpatient therapeutic programme sites relatively early in the response,[124] the evaluation has found evidence of inadequate and poor delivery of IYCF counselling and a lack of clarity and consistency on the package of IYCF interventions.[125] The focus has been on message dissemination and there is limited evidence of community dialogue on IYCF practices. As of May 2018, the first in-depth assessment of IYCF practices is being planned. The low prioritization of IYCF has also added to the gap in the gender-based violence response, as opportunities to integrate gender-based violence issues into the IYCF counselling package are yet to be maximized.

The evaluation has also noted several other missed opportunities in nutrition. A comprehensive approach to community engagement, which fits with the emphasis placed on communicating with communities and C4D, is crucial to understanding IYCF practices, developing appropriate messages and approaches, and increasing the understanding of refugees on the importance of RUTF for the treatment of SAM. While collaboration with C4D has so far been limited to support for the Nutrition Action Week, likely due to stretched capacities on both sides, UNICEF implementing partners could be supported to better engage with communities within their own programme areas.

## WASH
### RESULTS: ACHIEVEMENTS AGAINST TARGETS AND TIMELINESS

The stakes have been high in UNICEF's WASH response. As noted in section 2.3, the organization decided to deliver 50 per cent of the overall WASH sector needs. In an area where cholera is endemic and latrines were installed with low quality and design deficiencies, all eyes have been on UNICEF's performance. Overall, the evaluation has found impressive achievements for some of UNICEF's WASH activities, such a latrine construction, but limited achievements in other areas, for example hygiene promotion.

Beginning with the positive findings, UNICEF has achieved, or will have achieved by the end of 2018, its stated HAC and JRP targets. Following a steady build up in September to a much-expanded response by the second half of October (into November) 2017, UNICEF's WASH response has been timely, delivering an ambitious and noteworthy scale of services.

UNICEF increased its target for people reached from 450,000 in October 2017 to 600,000 in January 2018. While the 600,000 target was high in relation to other WASH actors (and the implied JRP intent), the additional beneficiary numbers can be helpful in several ways: a higher target can allow UNICEF to serve more of the local residents, it will likely compensate for significant decommissioning requirements, and it may address potential monsoon damage and resulting population relocation. In a sense, these unforeseen factors have retroactively justified the higher target.

UNICEF's decision to enter into a contract with the Ministry of Disaster Management and Relief helped the organization bring the WASH response to scale in terms of the numbers of latrines. This contract for 10,000 latrines has been implemented by contractors supervised by the military. The evaluation has reviewed this decision in detail and found that it was the right thing to do. Latrine provision by the military contractors was

---

124 As of 25 January 2018, there were an estimated 62 functional IYCF areas (corners and spaces) across the response, with the majority of these established in the new spontaneous sites and makeshift areas. Source: programme cooperation agreement documents and direct field observations.

125 UNICEF-implementing partner programme monitoring reports and key informant interviews.

not only cheaper than it would have been if carried out by NGOs, but it also significantly increased the quantity of latrines over a period of six to seven weeks during the final months of the year. One downside has been the quality, as some foreseeable weaknesses were not addressed. The justification for having the military construct an additional 5,000 latrines is less clear to the evaluation. The evaluation understands that this plan changed in May 2018 and that the number was reduced from 5,000 to 1,500.[126] To add a note of caution, the evaluation found evidence that UNICEF could have done a better job of communicating the decision to work with the Ministry of Disaster Management and Relief /military partner to its United Nations sister agencies and NGO partners via the sector forum. This is a sensitive issue, and the time it took to share this information gave rise to unnecessary controversies.

The issues with the quality of the latrines have dominated the WASH response for months.[127] Few humanitarian crises have seen a more troubling rate of latrine and water point decommissioning that in the first year of the Rohingya refugee response. The rate of decommissioning reflects the over-congestion, minimal site planning capacity at the outset and the initial presence of actors who contributed to a chaotic and uncoordinated initial response, which was only brought under control some months later. Many of the latrines installed in the early weeks of the response were of low quality due to their design or location; these have since been decommissioned. The absence of locks on the inside of latrine doors was a serious oversight given the importance of this basic component to providing safety and privacy for women and girls. On the upside, quality is being steadily improved, and while these efforts may be put on hold during the monsoon period, by the end of 2018, the quality of water pumps and latrines should be of a higher standard. The improvements, including making latrines more suitable for women and girls, are less advanced and require continual monitoring and listening to feedback.

## DELAYS OR GAPS IN THE RESPONSE

One WASH issue that has created significant challenges is the desludging of latrines and the management of faecal sludge. Due to the layout and extreme congestion of the camps, the densely-populated spaces in highly rural environments, the initial lack of design for pit emptying, and the lack of off-the-shelf solutions to FSM, this issue has become extremely complex. While the issue has been on the agenda since October, and has been recognized as a major challenge, both the UNICEF WASH programme and the WASH sector have been slow to mobilize the capacity needed to confront the challenges. An FSM technical working group, co-chaired by UNHCR and Oxfam, was first convened in late November. In principle, the working group was intended to meet every two weeks; in practice, the group has met on an intermittent basis. A terms of reference for the working group was produced at the end of December. The WASH sector has included one page on FSM in the draft WASH strategy (March 2018), though this does not provide a strategy or plans for dealing with FSM.[128] A capacity analysis of FSM has been drafted but little other action has been taken. The working group appears to be reactive to FSM needs. It has not considered FSM for women and girls who are using pots within households and then need to dispose of faecal sludge.

Global technical capacity needs to be mobilized to identify solutions. The challenge of FSM in this context of overcrowded camps is so rare that it requires an extraordinary effort. It is likely that there is no single solution, but that a combination of measures is needed. The risk of epidemics due to contamination are enormous and well known, yet solutions still appear out of reach.[129]

The hygiene situation is not much better. The hygiene promotion strategy was developed in late October 2017, but the implementation of it fell behind for several reasons. Key staff positions were left vacant for too long in an already challenging working environment. Hygiene promotion was

126 United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No. 33 (Rohingya influx)', UNICEF, June 2018. The situation report shows that this decision is being revisited with a shift in emphasis to sustainability and decommissioning rather than absolute numbers.
127 Compared to some issues in water quantity and quality, the sanitation part of the WASH response faced many more critical issues. Hence, the emphasis on sanitation.
128 The early June WASH sector FSM meeting may have addressed this.
129 UNHCR and Oxfam led a WASH sector forum on 4-5 June as part of the FSM technical working group to try to address this.

also set back by the delay in UNICEF's knowledge, attitudes, behaviour and practices survey. The survey would have provided relevant information for WASH actors on how to better target and adjust their services. UNICEF and other WASH actors were aware of the poor hygiene practices of Rohingya in Myanmar, and knew that behaviour change would be even more challenging with this population. As one key informant noted, "information from the WASH Cluster in Myanmar was all about what did not work" (in hygiene promotion). The contract conversations for the survey started in late 2017, but the agreement still had not been signed by late April 2018 due to several issues, including supply delays and the range of staff views on the issue. Although UNICEF's WASH implementing partners all included hygiene promotion kits and messaging in their applications in the context of the HRP and the JRP, they too have been slow in making progress.

In early in 2018, efforts to implement the hygiene promotion strategy were strengthened and in April 2018, these efforts were further enhanced with the arrival of a dedicated hygiene promotion sector coordinator.

Overall, accountability to affected populations suffered due to the weakness in hygiene promotion efforts, the delay in the knowledge, attitudes, behaviour and practices survey, and the reservations expressed by key informant interviews on the relevance of hygiene promotion activities undertaken through C4D. Moving forward, it is essential that these issues are addressed. Hygiene promotion must be prioritized, particularly given that it provides the best entry point for hearing the voices of women and girls.

## SUB-CONCLUSION

The evaluation has found that UNICEF reached many of its programme targets in each of the five sectors, and fell behind in some other areas. All programme areas (sectors) show strong performance and progress on certain aspects, but relatively weak results for other activities.

It is evident that by April 2018, the response was behind. This can be attributed to significant external factors that were out of UNICEF's control (i.e. extreme congestion and the speed of the influx), as well as to UNICEF itself,

which did not sufficiently adjust its strategies to the prevailing circumstances and as a result, gave rise to gaps and delays in the implementation of several services. Other reasons for these gaps and delays included the following: key UNICEF senior staff positions were not continuously filled; implementing partners lacked crucial capacities; inter-agency competition; and supply delays.[130] The monsoon preparations, discussed later in this report, pushed the response in the right direction, as did the diphtheria outbreak earlier, though quality remains a major issue.

Quantity prevailed over quality in the first weeks and months of the response. This is understandable to some extent given the extreme speed and scale of the influx, but it became the predominant issue soon thereafter when quality aspects were not addressed in a timely manner. This lack of quality is precisely why many of the CCCs and other humanitarian standards have not been met (*see Annex 4 for a detailed analysis of performance against the CCCs)*. As noted, those standards seek to ensure a (minimum) level of quality in the delivery of services. The quality aspects of the CCCs and Sphere and companion standards derive from the fact that they are rights-based. This rights-based foundation has largely been ignored in this response. Priority was not placed on protection, gender and gender-based violence, but rather on the delivery of material services.

Effectiveness and the other criteria could have been better ensured had inter-sectorality – the inter-connectedness within and among sectors – been better addressed. The combination of services that belong to different programmes would have helped to mitigate the issue of limited space. The evaluation understands that the extreme congestion and under-resourcing of site planning, particularly in the first few months, has made this difficult, but there were a number of obvious linkages that should have been established. The emphasis on working within programmes or sectors is not conducive to maximizing inter-sectorality. The weaknesses seen in the implementation of cross-cutting issues and UNICEF's accountability to affected populations provide further evidence that working in silos is problematic.

---

130 While some of these factors have been noted in this section, they are also further explained in the relevant sections of this report.

# 2.5 UNICEF's sector leadership

UNICEF holds major responsibilities in (co-)leading four sectors: nutrition, WASH, child protection and education.[131] In assessing UNICEF's leadership efforts, the evaluation has looked at the cluster functions.[132] The ISCG sectors are similar to the clusters and many participating agencies see the ISCG sectors as clusters. In this respect, the six cluster functions have only served to guide the evaluation, given that the clusters were not formally activated, the very chaotic picture on the ground, and the serious issues related to the ISCG and the overall leadership of the response. The picture of the sectors' performance is mixed, with some sectors evidencing better leadership than others.

Before going into detail on how UNICEF has fulfilled its sector leadership responsibilities, two preliminary remarks must be made. First, particularly when a sector is co-led, attribution of achievements or failures is rarely straightforward. The results are collective. Second, given the complicated coordination structure, it is unclear which organization had the responsibility or authority to decide on course corrections for a sector, when necessary – UNICEF, the ISCG or the Heads of Sub-Office Group.[133] The sectors report to the ISCG, but UNICEF staff working for the sector have a reporting line to the head of the UNICEF field office in Cox's Bazar, who is part of the Heads of Sub-Office Group.

The evaluation survey on UNICEF's sector leadership, which had responses from 40 sector partners, provides several insights. Sector partners, including the Government, donor representatives, United Nations agencies and international and national NGOs, generally expressed positive to very positive views on the extent to which UNICEF-led sectors provided platforms for coordination. They also reported progress towards developing strategic priorities. Likewise, there is positive feedback on sector efforts to develop

> **SUMMARY**
>
> **How well is UNICEF fulfilling its role as (sub-)sector (co-)lead in the sectors for which it is responsible?**
>
> UNICEF assumed its leadership of the four (sub-)sectors given its global cluster responsibilities in the areas of nutrition, WASH, child protection and education, even though the clusters were not activated in this response.
>
> The evaluation found that UNICEF has contributed to moving the sector forward, such as in WASH, but also notes the lack of progress in certain sectors or regarding sector priorities. A number of sector partners, particularly national NGOs, are appreciative of UNICEF's leadership and contributions to the sector. The factors that impacted sector leadership range from the lack of continuous senior staffing and lack of inter-sectorality, to the overly dominating role of UNICEF for too long.
>
> A significant question remains as to the relationships and accountabilities of sector leads vis-à-vis the ISCG and their 'home' agencies.

standards and technical guidance. Survey respondents were less positive when it came to sector progress on performance monitoring. Likewise, respondents noted a need to step up quality assurance.

## CHILD PROTECTION

Within the protection working group, the leadership of the child protection sub-sector made strong contributions to the HRP and JRP processes. The sub-sector also supported the quality of the response by developing a number of standards,[134] and facilitated a joint education and child protection rapid needs assessment.[135] Guidance and

---

131 With Save the Children for education; and with ACF and the Bangladesh Department for Public Health Engineering in WASH.

132 These are: support to service delivery; informing strategic decision-making; planning and implementing sector/cluster strategies; monitoring and evaluating performance; building national capacity; and supporting advocacy. See Inter-Agency Standing Committee, 'Reference Module for Cluster Coordination at Country Level, IASC, 2015.

133 This issue is certainly not unique to the ISCG or Bangladesh. It is an issue that remains difficult to resolve in the context of the cluster approach.

134 These standards include standards for case management of unaccompanied and separated children and children at risk, standard operating procedures and guidelines for alternative care and case management tools and standards for child-friendly spaces.

135 The joint rapid needs assessment is a very good example of the added value of joint needs assessments, in accordance with global cluster needs assessment guidance, and initiatives to create an inter-sectoral approach.

standard operating procedures for psychosocial support still need to be developed. This has also been confirmed by some respondents to the survey on UNICEF's sector leadership. The sub-sector also needs to expand efforts to ensure the inter-connectedness of child protection and education. While the joint rapid needs assessment with the education sector provided a range of suggestions in this regard, discussions on ways to better integrate child protection into education do not seem to be on the sector's agenda. Finally, the sub-sector is understaffed, which has posed a significant challenge given the complexity of the operating environment and the variety of technical issues that need to be addressed collectively. While much of the technical work is done by UNICEF and sector partners, increased and sustained engagement are needed to support coordination within the sector, information management, facilitation of technical working groups and coordination with the protection working group and other sectors.

## EDUCATION

The evaluation found that UNICEF's leadership of the education sector has steadily improved since the beginning of 2018, though there are additional improvements to make. The sector has contributed to enhancing the quality of the education response by providing technical guidance and standards on temporary learning spaces/centres regarding safe site selection, as well as structures, including water and sanitation facilities, and basic equipment and supplies. This is part of a larger process of standard setting. The sector also supported the development of a standard teacher code of conduct and salary scale. Materials for basic teacher training have been shared with sector members, though a standard teacher training for teachers and Burmese language instructors still needs to be developed. The sector also played a crucial role in monsoon preparedness. The timely arrival of dedicated coordination staff has been a positive factor, as has support from the global level. The Global Education Cluster supported the sector at critical moments, including by facilitating co-leadership; resolving initial, unnecessary

tensions between UNICEF and UNHCR on the leadership of the education sector (UNICEF leads education under the cluster model);[136] organizing and carrying out the joint rapid needs assessment with the Child Protection Area of Responsibility; and developing the education capacity self-assessment.

As noted, steps to further enhance the performance of the sector are underway, including through the consolidation of the information management system. Another issue that seems to have been resolved, but that has impacted the quality and effectiveness of working collectively, is confusion over UNICEF's leadership role. With a sector capacity that is arguably in need of strengthening, it is understandable that UNICEF has sought to take matters into its own hands, particularly given that the co-leadership position (to be filled by Save the Children) has been vacant for six months. UNICEF's efforts to move the sector forward may have created confusion between the organization's sector leadership and its programme work. This confusion may also stem from the fact that 80 per cent of the education response involves UNICEF funds. Other reasons for the confusion include UNICEF's initial, exclusive management of the Education Cannot Wait proposal, its reluctance to recognize Save the Children as a co-lead, and the slow consultative process on the development of the LCFA.[137] The education sector has also been slow to respond to the suggestions made by the Global Education Cluster and the Child Protection Area of Responsibility to strengthen the interconnectedness of the education and child protection responses. While many of these matters have now been addressed, the evaluation found it important to make note of them given their contribution to initial gaps and delays.

## NUTRITION

Under UNICEF's leadership, the nutrition sector has contributed to the development of the sector strategy and fed into the HRP and JRP. Overall, however, nutrition sector coordination has suffered from gaps in (senior) staff deployments and a lack of effective, experienced

---

136 This United Nations agency competition for education sector leadership is unnecessary but also provides further evidence of the consequences of the unclear coordination structure under the ISCG, which resembles the cluster model, and the lack of formal cluster activation.

137 As reported in key informant interviews. Key informants reported that UNICEF's child protection programme staff in the various offices were not consulted in the development of the LCFA.

senior leadership to match the scale and complexity of the context.[138] This has led to a lack of inter-sectorality in programming, which has resulted in poor continuity of care and duplication of services; slow progress in the development and adoption of standards and guidelines; and the discontinuation of certain important coordination mechanisms despite the context (e.g., supply chain task force) – all of which have had a significant impact on the overall quality and timeliness of the response. Advocacy by UNICEF for the importation and use of RUTF, but not ready-to-use supplementary food, was perceived by some partners as UNICEF acting in the interest of its own mandate rather than for the collective sector response. Ultimately, UNICEF made the decision (rightly or wrongly) that advocating for both RUTF and ready-to-use supplementary food would risk jeopardizing the approval of RUTF, which was regarded as the more immediate priority.

## WASH

The WASH sector's leadership arrangements have had a positive impact. The capacities and contributions of UNICEF and ACF – the agencies directly supporting the Department for Public Health Engineering – turned out to be complementary, more by chance than by design. The sector has made significant contributions to the HRP and JRP processes.

An enhanced WASH sector coordination platform at the Cox's Bazar level was established in a timely manner, was well resourced and has worked well. The evaluation found that UNICEF made the right decision by deploying a highly seasoned WASH expert with long-standing experience in WASH coordination as an advisor. A respected and trusted leader recognized as highly competent, this expert became a major factor in enhancing the WASH sector coordination unit. There have also been progressive WASH service improvements, including through the establishment of standards, more robust communication on standards, service upgrades and the identification of facilities in need of decommissioning, though notable gender weaknesses were observed.

However, as noted, many of the tube wells and latrines were poorly constructed in the first months of the response. Until the release of a government instruction to stop the installation of shallow tube wells and latrines, the sector had little means available to control or enforce quality in the WASH response. In addition, the impact of extreme congestion on service provision was not quantified, which meant more robust advocacy positions were not developed. Other serious flaws observed in the programme response include the lack of gender sensitivity, the absence of an FSM strategy and the slow start of hygiene promotion. The Strategic Advisory Group could have been better utilized and technical working groups could have been given greater authority and broader mandates. The evaluation also saw evidence that the UNICEF WASH programme was not fully at the coordination table, particularly in relation to communications on the sensitive issue of latrine construction under military supervision. The UNICEF programme needs to step forward and foster dialogue with partners to identify innovative solutions to improving WASH sector coordination.

## SUB-CONCLUSION

The mixed picture of UNICEF's performance in its (sub-) sector leadership resembles the different levels of progress that the evaluation has observed within and among the programmes. The factors that could contribute to better sector leadership range from ensuring continued senior staffing (nutrition), to pushing for inter-sectorality (child protection and education), and ensuring a collective and genuine partnership approach in which UNICEF contributes, but does not dominate, the sector (education). There will also need to be a discussion at the global level on what sector leadership means in a refugee response coordinated by a lead agency, usually UNHCR, and to what degree these leadership responsibilities compare to the cluster leadership functions.

---

138 This is also confirmed by the survey of UNICEF's sector leadership.

# 2.6 Cross-cutting issues

## GENDER[139]

In relation to gender, the evaluation's primary finding is that in the first months of the overall response, with some exceptions, gender was insufficiently mainstreamed into programming by UNICEF and many other agencies involved. In an emergency of this scale, a gender-sensitive approach, framed in equity, which also looks at aspects such as age, diversity and disabilities, must start with taking the special needs of women and girls into account. This includes both targeted programming, as well as mainstreaming elements to ensure that all sector activities are gender-sensitive.[140] The ISCG highlighted gender aspects by December 2017.[141] Given the Rohingya's conservative social norms, the lack of sufficient female-oriented services has resulted in compromised access to basic services for women and adolescent girls.

In WASH, for example, women and girls are disproportionately affected by the lack of proper sanitation facilities. While there have been some improvements, the sector is still struggling to fully address the needs of women and girls. [142] The evaluation learned of examples of women who were initially defecating in the open and are still using bucket toilets in their shelters because they do not wish to use the latrines.[143] One question is whether refugees, particularly women and girls, would prefer for latrines to be designated by gender or shared among families. Focus group discussion feedback suggests that at least some would prefer the latter, but it is unclear if the programme and sector have given women and girls this choice and sufficiently sought to develop solutions based on their input. Another question on the table is why the special sanitation needs of women and girls were missed in the first place. Simple measures to improve sanitation for women and girls, such as bucket toilets, were missed during the HRP phase. In general, fast-tracked

> ## SUMMARY
>
> **To what extent does UNICEF's response in the sectors of nutrition, health, WASH, child protection and education address the following critical aspects: equity (including gender); inter-sectorality (which impacts efficiency); accountability to affected communities (through C4D and accountability to affected populations); and the needs of host communities?**
>
> The overall effectiveness of the response has been far from optimal as inter-sectorality, the opportunity to combine services and enhance efficiency, and accountability to affected populations show mixed results.
>
> UNICEF's work for host communities, which it stepped up recently, is moving in the right direction.
>
> The evaluation has reviewed a number of critical aspects that are common to all programmes. Given UNICEF's high programme involvement and (co-)/leadership of four (sub-)/sectors, these aspects are also relevant in the sectoral context. These issues are: the consistent omission of gender and gender-based violence in the implementation of the response; the lack of inter-sectorality; and issues related to accountability to affected populations and host communities.

and consolidated learning about women and girls' WASH needs has not been translated into accessible guidance for WASH supplies and service provision.

In health, clinics supported by UNICEF have female consultation departments. UNICEF partners have been strongly encouraged to recruit female doctors, at least for maternal services. In reality, the picture is mixed, as not

---

139  This section is, in part, based on an assessment of UNICEF's efforts against the ICSG gender standards overall and by sector. See Annex 9 for more detail.

140  See also United Nations Children's Fund, 'UNICEF Gender Action Plan 2014-2017', UNICEF Executive Board Annual Session 2014, E/ICEF/2014/CRP.12, 15 April 2014; and Inter Sector Coordination Group, 'Gender in Humanitarian Action Brief No. 2: Rohingya refugee crisis response', ISCG, 31 March 2018.

141  See Inter Sector Coordination Group, 'Gender Profile No. 1: Rohingya refugee crisis response', ISCG, 3 December 2017.

142  This was also confirmed in several focus group discussions undertaken by the evaluation.

143  UNICEF's Gender Action Plan 2014-2017 notes that access to safe drinking water and elimination of open defecation are inherently gendered goals. Throughout the developing world, domestic water supply is predominantly the domain of girls and women: they shoulder the heaviest burden for water collection and use the bulk of a household's water in their gendered tasks of child care, cleaning, cooking and laundering.

all of UNICEF's health partners have significant numbers of female staff. This is due to a lack of qualified staff, not because of the lack of orientation from UNICEF's side.

Unlike other sectors, the nutrition response has and continues to focus on gender-related aspects. Nutrition inherently covers vulnerable groups, including infants, boys and girls under 5 years of age, pregnant and lactating women and adolescent girls. In this response, boys and girls have equal chance of being assessed during screening for acute malnutrition and there is no sex bias in service delivery that prevents equal access of both to nutrition services. Interestingly, nutrition survey results indicate Rohingya boys may be more vulnerable to acute malnutrition than girls, yet sector outpatient therapeutic programme data show that more girls are admitted for treatment of SAM than boys (57 per cent vs. 43 per cent). Pregnant and lactating women are specifically targeted with supplementary feeding programmes and nutrition counselling.

In 2018, there can be no excuses for not addressing the needs of women and girls in programmes/sectors such as WASH from the initial phase of an emergency.[144] As one key informant noted, "this is an old-fashioned response." Indeed, overlooking or ignoring gender mainstreaming in the implementation of emergency services is reminiscent of the failures that the humanitarian sector made in the past. Since the 1990s, the humanitarian community has adopted the rights-based approach through manuals such as the Sphere Handbook and recognized protection, gender and gender-based violence as integral to humanitarian action. The characterization of the response as "old-fashioned" also reflects on UNICEF, given its significant engagement in and commitments made in the context of the Transformative Agenda and the World Humanitarian Summit. While the evaluation recognizes that not everything can be implemented at the same time, to omit significant gender-sensitive aspects – as has happened in this response – represents a serious failure that touches on issues of leadership and questions of responsibility and accountability.

## GENDER-BASED VIOLENCE

The gender-based violence response has been critically delayed, and the challenges are enormous.[145] Large numbers of women and girls experienced gender-based violence during their flight, and the camps are considered high-risk environments, with many female-headed households; child, early and forced marriage; sex for survival; commercial sexual exploitation and trafficking; and high risk of rape due to unsafe conditions for firewood collection; among other risks. While there have been documented plans to address gender-based violence, the evaluation has found that gender-based-violence-related services have not been sufficiently implemented, at least through February 2018. In February 2018,[146] reporting against the HAC appeal shows serious underperformance against the gender-based violence targets, only partially mitigated by exceeded targets in adolescent life-skills programming, which includes information on gender-based violence. Similar underperformance persists in the revised HAC appeal of May 2018, with only 15 per cent of the target for gender-based violence services reached between January and April 2018. Since April 2018, there has been a standalone gender-based violence strategy to address the implementation of gender-based violence services.

A programme area (sector) such as education, for example, could have made a significant contribution to addressing gender-based violence by integrating gender-based violence prevention into adolescent programming or integrating psychosocial support elements into learning activities. Adolescents should be one of the target audiences for awareness raising on gender-based violence and gender-based violence prevention and protection measures. In health, a further complication may be that community health workers do not feel comfortable with sexual- and gender-based violence counselling given local sensitivities.[147] This indicates the need to strengthen support and capacity development in this area.

---

144 Over the past decade, there has been a flurry of UNICEF and inter-agency strategies, policies and standards on gender in humanitarian action. This recently culminated in the updated IASC gender (and age) marker (March 2018) and the IASC Gender Handbook for Humanitarian Action (April 2018).

145 Of the 35 women's safe spaces foreseen in the November 2017 scale-up plan, only two were operational in April 2018 (United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No. 30 (Rohingya influx)', UNICEF, 22 April 2018).

146 United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No. 23 (Rohingya influx)', 18 February 2018.

147 Key informant interviews.

For UNICEF, the gender-based violence response is part of the child protection programme area. The evaluation found evidence in the child protection strategy that initially, UNICEF wanted to take a leading role in the gender-based violence response.[148] In practice, however, UNFPA performed this role.[149] Furthermore, when gender-based violence risks are this size and proportion, one should wonder whether gender-based violence should be put on the same level as other child protection priorities. In such an organizational structure, it may not necessarily get the (strategic) priority it deserves. At a time when the aid sector is (rightly) under severe scrutiny for the actions it is taking to combat (sexual) abuse and exploitation, not addressing key gender-based violence issues – such as violence against women and girls, trafficking of adolescents out of the camps to be sex workers in Cox's Bazar or elsewhere, and the establishment of adequate safeguarding measures – carries high reputational risks.

## INTER-SECTORALITY

A further overall weakness in the implementation of the response is the insufficient degree of inter-connectedness among the programme areas/sectors. As noted in section 2.4, when sectors work together – for example, WASH and health in preparing for AWDs – and seek to exploit the mutually reinforcing character of their activities, this inter-sectorality delivers potentially high returns on investments and can generate significant success stories in relation to the various criteria (i.e. effectiveness, timeliness/coverage and quality). The evaluation has seen several good examples of connecting and building linkages between or among sectors in the implementation of services.

Education and child protection, for example, made a joint request for space for learning centres and child-friendly spaces and undertook the joint education and child protection rapid assessment. The evaluation has also seen some examples of good practices in referring children from temporary learning spaces to child-friendly spaces. Strong inter-sectoral linkages have been made

between nutrition and health, for example, as immunization coverage surveys were included within the methodology of nutrition surveys and nutrition screening and referral is included in the minimum basic health service package.

Some of UNICEF's nutrition partners have managed to provide a number of different services at one site. Save the Children, for example, is delivering treatment for SAM, IYCF, community-based management of acute malnutrition in infants and primary health services in one facility. ACF is providing integrated outpatient therapeutic feeding programmes, IYCF and gender-based violence and mental health services. Both of these examples are extensions of individual agency global pilot initiatives taking place elsewhere in Bangladesh and in other countries that are being supported by UNICEF in the context of the Rohingya refugee response and provide good models of what can be achieved. It is also a positive step that the WASH sector will produce an overview of WASH services in learning, health and nutrition centres, thereby supporting inter-sectorality.

Overall, however, the story on inter-sectorality or inter-connectedness is one of missed opportunities. Much more could have been done. There is no question that the lack of proper site planning due to the size and speed of the refugee influx stood in the way of optimal inter-sectorality, but in a number of cases, UNICEF could have made greater use of the combined services that the evaluation observed.

The evaluation found too many examples in which, given the lack of space and the need to create synergy, the mutually reinforcing character of inter-sectorality could have made a major contribution to effectiveness and efficiency.

In addressing the weak links between child protection and education, for example, the child protection programme should have been more outspoken about the importance of integrating child protection and education approaches. A number of important gaps call for immediate actions to establish stronger synergies, including: establishing

---

148 United Nations Children's Fund, 'Child Protection Strategy: Rohingya response – Cox's Bazaar, Bangladesh', UNICEF, November 2017.

149 This concerns both the Rohingya situation and the global level. In 2017, UNICEF decided to discontinue its global co-leadership of the Gender-Based Violence Area of Responsibility.

An outreach worker at a UNICEF-supported adolescent group records information from a group of teenage girls in Balukhali makeshift settlement, near Cox's Bazar.

© UNICEF/UN0143862/BINDRA

joint programming for adolescents, especially girls; strengthening the inclusion of children with disabilities; training teachers on psychosocial support and the identification and referral of child protection cases; linking learning centre management committees with child protection committees; and developing the psychosocial support/socio-emotional learning component of the LCFA with the assistance of the child protection section.

Likewise, the linkages between the education and food security sectors are weak. In addition to the missed opportunity of using temporary learning centres as gateways for nutrition and health, the key informant interviews raised the concern that fortified biscuits are not distributed in all temporary learning centres. This supplementary food became an incentive for families to enrol their children in the centres. It is important to note, however, that this is not an issue that falls within the UNICEF nutrition domain, as high energy biscuits are under the responsibility of the food security sector. Following a request from Save the Children, the education sector coordinator met with WFP to ensure high energy biscuit distribution in all learning centres.

There are a number of opportunities for strengthening the connections between health and nutrition. These include: capacity building for implementing partners on anthropometric measurement and IYCF counselling; mapping referral pathways between primary health care, outpatient therapeutic feeding programmes and targeted supplementary feeding programmes at camp level to establish strong referral mechanisms between nearby centres; and streamlining the services provided by health and nutrition community workers to reduce multiple household visits on different issues. Such inter-sectoral benefits are seen for most of UNICEF's health implementing partners as they are carrying out nutrition interventions, including screening and referral of acute malnutrition and counselling on breastfeeding. Health and WASH are collaborating strongly on acute watery diarrhoea preparedness, as evidenced in the acute watery diarrhoea preparedness and response plan. As for the entire response, while some implementing partners are delivering gender-based violence counselling and referral though primary health care, there are major capacity gaps and quality issues. The implementation of the gender-based violence integration plan for health would be a major step forward.

In Shafullarkata refugee camp an NGO worker uses a UNICEF supplied bullhorn to alert camp dwellers of access to the cholera vaccine that is being given to Rohingya refugees in the tent behind him.

© UNICEF/UN0135651/LEMOYNE

## C4D AND ACCOUNTABILITY TO AFFECTED POPULATIONS

The terms of reference for this evaluation also included a question about UNICEF's accountability to affected populations. For various reasons described in the introduction, while the evaluation did not take an in-depth look at this question, it made several observations. The same applies to C4D.

While the evaluation does not provide a comprehensive review of C4D in the response, it has observed a number of positive examples of C4D engagement with the sectors. For example, C4D has been instrumental in the child protection response by providing protection messages, including messages in local languages, that are disseminated through model mothers and volunteers. A next step is to incorporate C4D feedback into child protection programming.

In education, the evaluation found good practices in the inter-sectorial work with C4D through the awareness campaign, including the sensitization of children, families, teachers, religious leaders and communities. Another area of positive inter-sectoral work with C4D is the piloted development and dissemination of visual aids to support the quality of

teaching and learning. This component has potentially high value in developing the capacities of teachers and Burmese instructors. The expansion of this component should be considered while assessing its impact.

The involvement of C4D in health has also been positive. Within the strong collaboration on social mobilization and community engagement for immunization uptake, a rapid behavioural assessment was carried out with several partners. The assessment involved focus group discussions and key informant interviews, explored issues such as vaccination barriers and the influence of community structures, and sought feedback and recommendations for improving vaccination messages and strategies. The findings of this assessment have been used to inform and adapt the approach and achieve improvements in quality and coverage in subsequent rounds through community mobilizers and mass information campaigns. This is a positive example of using community engagement to inform and adapt programmatic approaches and improve quality and coverage.

The picture is somewhat different in nutrition, where communications are primarily limited to message dissemination. Focus group discussions and community

consultations must be stepped up. In the context of the nutrition sector, UNICEF partners primarily use complaint boxes are for accountability to affected communities. This is neither culturally appropriate in a population with low levels of literacy, nor respectful of privacy, and only collects information from those visiting static sites. UNICEF has established more comprehensive information and feedback centres.

Of all WASH activities, hygiene promotion is perhaps the most tangible example of engagement with affected communities. While C4D efforts were focused on preventing infectious disease outbreaks, they also included content on WASH behaviours. The UNICEF WASH section also made efforts to address several hygiene promotion elements. This fits with the way that the WASH sector globally sees hygiene promotion – as an integral part of WASH work. However, the evaluation found that WASH and C4D each worked on hygiene promotion, and did not sufficiently look at how the two sectors could benefit from each other.

## HOST COMMUNITIES

The evaluation has also considered the support provided to host communities. UNICEF's initial priority for delivering services was to reach those in the camps, which the evaluation found was the right call to make in this situation. In WASH, for example, UNICEF's work with host communities had a planned slow start given that health and WASH needs in the camps were the priority.

That said, even before the August 2017 refugee influx, there were clear concerns about the availability of clean water and sufficient access to improved water sources in local communities, particularly the south of the Cox's Bazar District. The evaluation has found that as time passed, UNICEF recognized the need to step up its work for local residents, which is also noted as a good practice. In order to ensure that the potential water-related tensions between refugees and local residents do not escalate, it would be appropriate to prioritize areas where water scarcity is most acute.[150] These are important steps to ensure that host communities are not overlooked.

For education, the continuous engagement with host community schools,[151] which began in 2016, has been important to mitigating the impact of the refugee influx on host communities. The same can be said for health. The evaluation has observed the appropriate and timely inclusion of host communities in the health response and the consideration given to the impact of the refugee influx on local health services. This includes, for example, support to district referral services for newborn care, support to the district-level health management information system, diphtheria vaccination in host community schools, and the expansion of routine immunization and diarrhoea treatment centres for local residents.

## SUB-CONCLUSION

Mainstreaming or incorporating overarching issues that are common to all (programmes and) sectors is a perennial issue in humanitarian response. It requires not only specialist advice, but also a commitment among operational staff working in the sectors to integrate those cross-cutting issues into their work and prioritize them. Working across sectors can also be promoted by headquarters staff during joint missions. The fact that gender mainstreaming has fallen so far behind is an embarrassment for UNICEF (and other agencies involved), as are the delays in the implementation of gender-based violence prevention and protection services. Whether UNICEF's response to the enormous gender-based violence challenges that remain is best carried out through the child protection programme is another matter for reflection.

Achieving strong linkages among sectors or even combining them requires an inter-sectorial approach and flexible coordination. This is a requirement that stands in major contrast to the compartmentalization usually seen in humanitarian coordination. UNICEF will also need to reflect on its approach to accountability to affected communities. As seen in this response, while C4D can make significant contributions across sectors, its added value for engaging affected communities may not always be clear in all initiatives.

---

150  The evaluation has taken note of UNICEF's targets in this respect: it will provide 150,000 Rohingya refugees living in host communities and 200,000 Bangladeshi local residents with safe water and adequate sanitation. United Nations Children's Fund, 'Way Forward: UNICEF work in Cox's Bazar – 4 key strategies and way forward summary' (internal), 28 April 2018.

151  Host community data, 22 April 2018.

# 2.7 The quality and use of information

In reviewing the quality and sources of data and information that UNICEF uses, the evaluation has looked at a range of sources, both internal and external to the organization, either coming from the programmes or the sectors, and the way in which these sources have informed decision-making. The evaluation has not looked at the quality of UNICEF's information products, such as the situation reports that it publishes.

In looking at the various sources, data and information streams and processes, the evaluation has found that while there has been no lack in terms of quantity, issues have been observed in terms of quality. Available information and data vary in quality: products are found in different places; are not necessarily easy to compare for in-depth analyses and planning; and much of the data has been orientated at quantity and numbers for too long.

Early in the response, as part of its humanitarian performance monitoring, UNICEF directly deployed a number of field monitors. Several (UNICEF) key informants referred to this step as very important to facilitating better-informed decision-making. The evaluation also learned that the effort to push humanitarian performance monitoring forward may have had to do with lessons learned from earlier crisis responses, as well as the need for UNICEF to be seen as creating better information products. The evaluation has been less convinced of the successes achieved in this regard for a number of reasons.

First, the initial needs of the refugees were vast and predictable. Better informed and targeted decisions will only later require a stream of data and systems that illustrate, in a granular way, geographical, demographic and other needs and response aspects. The evaluation is unsure as to whether and when detailed needs-based data and analysis were among the underpinning factors of UNICEF programmes. This has been highly dependent on the progress made by the respective programme areas and sectors. Overall, as noted, the response has been driven by quantity, not quality, and the evaluation

## SUMMARY

**What is the quality of the situation analyses and needs assessments (whether inter-agency or UNICEF-led) used to estimate caseloads and project future needs?**

**Are the monitoring systems, reviews and assessment exercises sufficiently comprehensive and accurate to guide UNICEF and partners?**

**How comprehensive are the participatory approaches used to secure Rohingya and other stakeholder inputs in the different information gathering efforts? Are the voices of the affected populations obtained in an effective, proactive and culturally respectful way?**

**How well are these diverse information sources being used to inform and adapt the response?**

Compared to other emergency situations, there has been no lack of data in the Rohingya refugee response. Yet, there is a lack of quality analysis. Data collection is too focused on coverage; that is, the delivery of services in terms of quantity. Different data collection systems, especially those in use at the coordination (sector) level and UNICEF's own system for reporting are running in parallel and do not easily allow for a comparative analysis of the data. Advice from consultants and staff has not always been adequately absorbed.

has seen that the same has been true for the information products, including the ones created by UNICEF for a number of the programmes. Information and data sheets focus on numbers, while quality is best illustrated through narrative analysis.[152]

Second, the evaluation has seen that UNICEF's humanitarian performance monitoring system and the information or data system(s) used at the sectoral (and ISCG) level run in parallel and do not necessarily align. REACH, a third-party monitoring capacity that supports data collection to assist decision-making in the humanitarian sector, has provided critical additional data to complement the ISCG reporting based on the 4Ws (what, where, when and

---

152 This issue, which is not unique to UNICEF, is seen in all responses. The entire sector has focused on numbers in order to demonstrate results.

why). In WASH, this was available as of October 2017, but in other sectors, such education, it took more time.

Third, the parallel systems – UNICEF's humanitarian performance monitoring and the ISCG's 4Ws implemented by REACH – use different indicators or measures,[153] which makes it difficult to compile a full picture of coverage and gaps at the sector level. In education, it took the deployment of a dedicated information management staff member in April to resolve this issue.

While the parallel systems may produce relevant data, the time it takes to understand their complementarity and to align them raises questions about the efficiency and effectiveness of the multiple sources. The child protection and education sectors provide telling examples. These responses have been guided by very limited and non-systematized information through January 2018. UNICEF relied on information and monitoring feedback from its own programme more than on formal assessments. The UNHCR rapid protection assessment highlights some gaps in the response, but it did not sufficiently spell out key child protection risks. The child protection sub-sector produced a secondary data review in November 2017, highlighting some important information gaps. It wasn't until early January 2018 that the data from the joint education and child protection in emergencies rapid needs assessment became available. This assessment, led by the Global Education Cluster and the Child Protection Area of Responsibility, provides an overview of the main barriers to education, includes more qualitative data and recognizes the interconnectedness and importance of education as a key gateway for child protection, which works towards increased effectiveness and inter-sectorality. Key child-specific information is still needed, however, for example through an in-depth assessment, to develop evidence-based prioritization and response strategies.

In nutrition,  SMART surveys jointly supported by UNICEF and conducted relatively early in the response (in October 2017) were overall of good quality and provided very useful data for the effective planning for the response, especially for the treatment of SAM. IYCF was not covered as well, however. Although IYCF indicators were included within the



© UNICEF/UN015818B/SUJAN

Rohingya refugee children make their way home after attending UNICEF's Kokil Learning Centre at the Unchiprang makeshift settlement in Teknaf, Cox's Bazar, Bangladesh.

SMART surveys, this methodology is not the appropriate tool for drawing conclusions on IYCF due to sample size and precision constraints. The sector only began planning an in-depth IYCF assessment in May 2018, at the time of writing this report. Furthermore, nutrition monitoring systems at sector and programme levels are currently insufficient for accurately guiding decisions, but there is awareness of this and the nutrition sector coordination team is working to address these inadequacies.

In WASH, there is no shortage of data, but the data is dispersed and used by different actors in different ways. There is a risk of creating information competition and data overload and the data do not necessarily provide conclusive answers to key questions, such as whether more latrines are needed. For WASH, as for some other sectors, information products have only recently (i.e., as of April 2018) been produced in a way that has value at the camp level and can provide a better picture of gaps and potential oversupply. As a result, until recently, the sector was unable to support the Camp in Charge officials with the data they need for coordination. The evaluation

153 For example, the sector system and UNICEF's system used different age groups, making it difficult to compare.

team noted that the use of geographical data and maps for gaps analyses was improving for WASH, but that this was less true for other sectors.

There is an intimate relationship between the functioning of sector coordination and the quality of information. In health, there are comprehensive monitoring systems that provide critical timely and quality information to guide UNICEF and partners. From early in the response, WHO and the Ministry of Health and Family Welfare established an early warning, alert and response system for disease surveillance. In December 2017, the system was upgraded to an online system to facilitate real-time information sharing and the triggering of alerts. Some 155 registered health facilities currently use this system for weekly reporting. Furthermore, routine data from primary health care facilities is reported directly into the district health information system from which UNICEF extracts data from its partners.

This phenomenon of information overload on the one hand, and the data gaps on the other, has also been observed in the trip reports of UNICEF staff. These reports, which are numerous, vary in quality and structure, are stored in a variety of places and have produced a range of recommendations. It must therefore be extremely difficult for UNICEF staff, especially those on the ground, to keep track of all data sources and to identify the key information or reconcile/prioritize among a myriad of recommendations. One of the few documents that covers and combines data and information from UNICEF's overall and programme responses is the November 2017 (internal) after action review.

A further weakness in terms of multiple information sources has been duplication in reporting. NGO partners who have contractual relationships with multiple United Nations agencies will report to more than one agency depending on their funding sources. This may result in double counting when results are aggregated at the sector level. In nutrition, the sector is now moving to single reporting by site rather than by donor.[154] This appears to be an important step towards efficiency. A proposed move to a web-based system should also improve completeness

and timeliness. It should also be noted that UNICEF has required NGO implementing partners to provide regular, daily updates on the progress made on behalf of UNICEF.

In some sectors, such as child protection and education, the information is disaggregated by gender. In child protection, information identifies protection risks with a gender lens. The results of the joint rapid needs assessment are disaggregated by gender, age and refugee and host communities. In nutrition, data collected from partners is also disaggregated by gender, which facilitates the identification of any gender gaps.

In reviewing whether data collection, monitoring and reporting efforts – including the REACH and 4Ws information – take the views of affected communities (refugees and host communities) sufficiently into account, the evaluation has found that there is a need for triangulation. Data and information obtained from field monitoring can make better use of information from focus group discussions and the feedback from community engagement in the context of CwC or C4D activities.

Finally, and on a more positive note, as part of monsoon preparedness, information on flood risk and mappings have proven to be very useful in guiding preparedness and response planning for the various sectors. Furthermore, data providing breakdowns of camp populations by blocks is being used in planning, such as for nutrition services and to define catchment areas.

## SUB-CONCLUSION

It is understandable that UNICEF sees it as its responsibility to collect data and monitor performance. That said, despite the many (global) efforts to consolidate and learn from previous situations, this response shows once again that multiple systems run in parallel, producing data and information that are not necessarily easy to compare. UNICEF needs to reflect on how its humanitarian performance monitoring system not only serves the agency, but also serves the sector as a whole. Ensuring that UNICEF staff trip reports are stored in one place and that they follow a similar structure may be a quick win.

---

154 It should be noted that NGOs tend to see UNICEF as a donor. In this context, UNICEF may need to reflect on what its responsibility is vis-à-vis the harmonization of (NGO) reporting as, for example, set out in the Grand Bargain.

# 2.8 Working with operational partners

## UNICEF PARTNER PROFILES AND RESULTING CHALLENGES

UNICEF delivers services through close collaboration with partners, mostly NGOs. In this response, UNICEF is mostly working with Bangladeshi NGOs, many of which it knows from working together in other parts of the country. This emphasis on the role of local NGOs not only fits with the Government's preferences, but also matches the localization agenda set out by the Grand Bargain and the World Humanitarian Summit. Some of the international donor governments and international foundations also decided to fund Bangladeshi NGOs directly in this response. This policy line and trend promote the role of local NGOs as equal players.

The evaluation has examined UNICEF's NGO partnerships in the context of the 2006 Principles of Partnership, endorsed by the Global Humanitarian Platform, which serve as an additional mechanism to the IASC. Agreed upon by United Nations agencies, the International Red Cross and Red Crescent Movement and a range of NGOs and NGO networks, these five principles cover commitments related to equality, transparency, results-oriented approaches, responsibility and complementarity.[155] The Principles of Partnership provide guidance as to what these relationships should look like: they should neither be seen as specific benchmarks, nor used as such.

UNICEF's decision to work mostly with Bangladeshi NGOs is based on the context's unique circumstances, including the limitations imposed on international NGOs and the fact that many international NGOs, in turn, work through the (same) local NGOs.[156] It should be noted, however, that in reality, the distinction between national and international NGOs is not always clear in Bangladesh. BRAC, for example, which works with UNICEF as an implementing partner in four sectors in the response, is not only the most well-known Bangladeshi NGO, but is

### ▶ SUMMARY

a. **Does UNICEF have a set of partners able to execute the present and pending programmes to the necessary scale, timing and quality?**

b. **To what extent did UNICEF provide adequate training/capacity building, monitor and address partner performance and establish minimum standards?**

c. **In which ways are UNICEF or United Nations partnership processes facilitating or constraining effective programmatic responses?**

UNICEF primarily partners with national NGOs, in line with the Government's preference and the localization agenda. However, UNICEF's partners were not equipped to keep pace with the work required. Despite UNICEF's extensive efforts to build capacities in most programme areas, it has not been able to provide adequate training, though NGO partners reported they were well supported in general. Contracting was smooth and funding arrived on time. Reporting requirements were burdensome early in the response but most partners noted improvements in reporting requirements over time. There is an opportunity for capacity building around the normative framework for refugee response.

also seen as the largest and most commercially-oriented development NGO in the world.[157] In addition, CARE, one of UNICEF's international implementing partners in the Rohingya response, has been in Bangladesh since 1949.

In scaling up its response, one of the bottlenecks that UNICEF faced was the relatively limited presence of NGOs in the Cox's Bazar area. UNICEF already had agreements with a small number of Bangladeshi NGOs in relation to the October 2016 influx, but in the response following the August 2017 influx, the organization found that it

---

155 For more on the Principles of Partnership, see: International Council of Voluntary Agencies, 'Principles of Partnership: A statement of commitment', ICVA, <www.icvanetwork.org/principles-partnership-statement-commitment>, accessed 13 November 2018.

156 In other words, it is more efficient for UNICEF to work with those local NGOs directly, as it avoids one (costly) layer.

157 'BRAC in Business', The Economist, 18 February 2010, <www.economist.com/node/15546464>, accessed 13 November 2018.

needed to dramatically scale up its implementing capacity. In WASH, for example, given UNICEF's experience in Bangladesh, the initial idea was to contract national NGOs for a variety of appropriate reasons. However, it soon became apparent that international NGOs would also need to be contracted given the scale of the crisis and the fact that national NGOs focused on disaster response were not equipped to deal with the pace of work required and address all of the WASH issues that arise in refugee camps. In education, UNICEF has also felt the absence of its traditional international partners – NGOs such as the International Rescue Committee and the Norwegian Refugee Council – due to the lack of sufficient capacity.

To explain the bottleneck that UNICEF faced in working with international NGOs: A number of UNICEF's usual international NGO partners have struggled to set up or scale up their presences and programmes in the context of the Rohingya refugee response. This has included NGOs with missions geared towards displacement and refugee crises (e.g., the Danish Refugee Council, the International Rescue Committee and the Norwegian Refugee Council). Some of these partners were not registered to work in Bangladesh and/or were unable to obtain the additional authorizations needed for their projects or visas needed for their staff. International NGOs need to register to work in Bangladesh and gain specific authorization for their projects from the NGO Affairs Bureau when they are benefiting from funding derived from sources outside of the country. These authorizations include the FD 7 for emergency responses and the FD 6 for longer-term projects. Given that UNICEF requires its NGO partners (other than sister United Nations agencies) to contribute a certain percentage (usually about 10 per cent) of project funding from sources other than UNICEF, these NGOs need the FD 7 or 6 authorization. While the United Nations maintains that it went to great lengths to advocate with the Government for FD 7 approvals, NGOs have generally reported that the United Nations could have done more in this regard.[158] The evaluation also found that some senior UNICEF staff were unaware of the obligation for their NGO partners to apply for an FD 7 authorization and that other

United Nations agencies do not have this requirement for matched funding. The use of different contracting modalities (e.g., small-scale funding arrangements) as an interim measure at the outset could have helped to side step this problem.

UNICEF has also had to confront challenges in regard to its work with Bangladeshi NGOs. While the organization did recognize and address some of these challenges well, it did not necessarily address effectively address other challenges, and it did not sufficiently recognize one challenge in particular. Beginning with the challenges that UNICEF recognized and addressed relatively well in some sectors, but not all: Despite the hectic daily pressures inherent in this response, UNICEF has undertaken significant efforts to increase the (technical) capacity of partners through staff training. In child protection, for example, UNICEF has invested in developing NGO technical capacities through the deployment of programme staff in Cox's Bazar. Admittedly, UNICEF has not been able to meet the significant needs and demand, partly due to the enormous staff turnover experienced by national NGO partners. In education, while UNICEF was aware of the dearth of NGO partners, it has been slow to develop a plan to increase the number of NGOs in the sector and strengthen their capacity. Such a plan should have been developed at the outset. In WASH, while UNICEF was initially set on working with Bangladeshi NGOs, the organization eventually realized that it would have to expand its partnerships with international NGOs to effectively scale up the WASH response. In health, once UNICEF realized that a national NGO lacked the capacity for the expected work, it engaged a consultant to build capacity, an approach that has shown positive results.

Finally, the challenge that UNICEF did not sufficiently recognize is that few national NGOs have experience with refugee responses. From a protection perspective, this is a concern. Some national NGOs may also be closely aligned with the Government. Particularly in the context of a child protection response, it is important that national NGOs understand the normative framework and the rights that they are expected to uphold and implement. This is

---

158  See HERE-Geneva, 'Real-Time Response Review of the Disasters Emergency Committee (DEC) Emergency Appeal for People Fleeing Myanmar: Responding to the needs of refugees and host communities – Review of the DEC phase 1 responses', DEC, UK Aid and HERE-Geneva, March 2018, p. 30.

a key point for UNICEF, and emphasizing this point will diminish the impression that it mostly works with NGOs as contractors to implement services. On a positive note, the survey results show that UNICEF's implementing partners attach significant importance to using a refugee protection framework in this response. This has opened opportunities to deliver training, not only on technical skills, as UNICEF has done, but also on wider organizational and normative issues.

Capacity development on institutional areas is lacking. Evidence of this is found in the education sector. In November 2017, the Global Education Cluster provided a wide range of suggestions[159] on how to support partner capacity development. The evaluation did not find evidence that these suggestions were sufficiently being taken forward. To add to this, the outcome of a self-assessment of four national partners working in education (i.e., BRAC, CODEC, DAM and Mukti), which focused on a number of organizational capacities, highlights critical institutional capacity issues.[160] A capacity development plan has been drafted as a result of this exercise. But given that the capacity development process began in November 2017, efforts to move forward on these points are long overdue. One factor in the delay relates to the UNICEF partner Save the Children, which did not move forward on the capacity development support allocated to it, while other sector partners, notably Plan International and the Norwegian Refugee Council, have run capacity building for frontline staff in emergency preparedness, disaster risk management, health and hygiene and psychosocial support. Still, UNICEF's April 2018 two-year humanitarian-development strategy refers to expanding partnerships without explaining how this should be done, and key informant interviews did not provide further clarification in this regard.

In nutrition, the evaluation found an interesting, but also challenging situation. In this sector, UNICEF has a mix of international and national implementing partners to deliver its programmes. Since September 2017, UNICEF has contracted an international NGO to deliver technical support

© UNICEF/UN0155478/SUJAN

A Rohingya refugee takes a break from chopping kindling for her family, in a jungle area located quite a distance from their shelter in a Balukhali makeshift settlement for Rohingya refugees, in Cox's Bazar district.

and capacity building, and to conduct monitoring of three partners implementing community-based management of acute malnutrition. Several key informants questioned this model, as the international NGO in question does not have recognized global experience in implementing community-based management of acute malnutrition in emergency contexts. Monitoring the work of the international NGO revealed a number of weaknesses in the quality of the technical support provided, including poor analysis of weekly and monthly data, inadequate time spent on monitoring and supportive supervision and follow up on action points, inadequate time on training on

159 Global Education Cluster and Child Protection Area of Responsibility, 'Options for NHF Capacity Building', 13 November 2017.

160 In March 2018, the Global Education Cluster, Cox' Bazar Education Sector and Norcap (the Norwegian Refugee Council's expert deployment roster) supported this education capacity self-assessment. The self-assessment focused on institutional capacity related to areas such as vision and strategy; staff engagement and collaborative management; human resources and well-being; and working with others, advocacy and preparedness.

anthropometric measurements, and inequity of supportive supervision across partners.[161] These are likely to be contributing to continued gaps in capacity and the quality of the performance of implementing partners. UNICEF should review this partnership, as part of a much-needed comprehensive capacity needs assessment and towards the development of a capacity-building strategy.

## QUALITY OF PARTNERSHIPS

The evaluation team sought the views of implementing NGOs through a survey. The majority of responses came from national NGOs, particularly regarding child protection, WASH and nutrition. It should be noted that national and local NGOs tend to look at the partnership more positively given that they have difficulty obtaining international funds otherwise. Respondents gave UNICEF high marks on its openness to listening to partner views and the support that they received from UNICEF. The time spent on negotiating partnership contracts and project documents was viewed as reasonable (with the large majority of respondents' contracts concluded within eight weeks of the start of conversations). Further positive feedback was given on funding, which arrived soon after the signing of project documents, and UNICEF's visible intention to continue the partnerships. Partners expressed less positive views on UNICEF's reporting requirements. Particularly in the early weeks of the response, when many organizations were still developing their operations, partners felt that UNICEF's daily reporting requirements were excessive. However, the majority of respondents noted that they have seen improvements in the reporting requirements over time.

Most respondents also expressed that the extent of UNICEF's technical advice was sufficient and the organization responded to their requests for such support. Interestingly, and perhaps somewhat at odds with the less positive views on some aspects of UNICEF's sector leadership, implementing partners viewed UNICEF's leadership and vision in the context of their partnerships as overwhelmingly positive.

Overall, international NGOs were more critical of UNICEF than national NGOs. For example, in consultation with international NGOs, the joint Global Nutrition Cluster and UNICEF nutrition programme visit of March 2018 identified several key aspects of the partnership process to review and strengthen.[162] The different levels of appreciation of UNICEF's role, on the part of international and national NGOs, does not come as a surprise. International NGOs and United Nations agencies are often competitors for funding. As some international NGO key informants confirmed, they see UNICEF more as a donor than as a partner; a donor that they will turn to, in addition to other sources, for funding. This is different for many national NGOs, which are often entirely dependent on a United Nations agency for their resources.

Finally, in expanding its partnerships and work with national (and local) NGOs, UNICEF is following the localization agenda set by the Grand Bargain. That said, just as among international NGOs, national NGOs have many differences in terms of their character, goals and ways of working. The evaluation learned of critiques by some of UNICEF's national partners of other national NGOs, such as that a particular NGO does not sufficiently pursue a rights-based agenda.[163] UNICEF may wish to pay attention to these views and concerns by engaging in true partnership dialogues. It goes without saying that the work of national NGOs on the rights of children supports the organization's normative role.

## SUB-CONCLUSION

UNICEF's decision to work mostly with Bangladeshi NGOs fits with the trend in humanitarian practice and the reality in Bangladesh, but has also carried risks. Many of these organizations do not have strong emergency capacities – a fact that was well known to UNICEF before this crisis – and have thus struggled to scale up. UNICEF was unable to develop innovative approaches to strengthen the capacities of these organizations. In addition, the work of these Bangladeshi NGOs should be informed by the normative framework that UNICEF seeks to uphold and strengthen.

---

161  United Nations Children's Fund Bangladesh, 'Programmatic Visit Report' (internal), 19-20 February 2018.

162  United Nations Children's Fund Programme Division, 'Mission Report of the Global Nutrition Cluster and UNICEF Nutrition Programme Visit to Cox's Bazar 12-23 March 2018', March 2018.

163  Key informant interviews with a large, rights-based, advocacy-orientated national NGO.

## 2.9 Support to the programmatic response

The evaluation considered the extent to which a set of internal processes have facilitated the response provided by the UNICEF programmes. These processes are: fundraising, human resources and supply.

### FUNDING

The evaluation team did not conduct an in-depth analysis of funding and funds management, in part because an audit of the response is planned for the second half of 2018. The evaluation also heard from some key informants that funding was not an issue in the response. This was not necessarily the case in the early days of the response, when several decisions were taken while finances had not yet been secured. The team did analyse funding flows, however.

When the influx began, UNICEF had already received US$4.07 million of the US$9.45 million it had appealed for in 2017 to provide assistance to the Rohingya refugees from previous influxes.[164] As more refugees arrived throughout September, the ISCG and UNICEF revised their targets and funding requirements upwards.

On 8 September 2017, UNICEF Bangladesh received a US$2 million loan from the Emergency Programme Fund (EPF). EPF loans are disbursed by UNICEF Headquarters to eligible offices with the expectation that the loan will be repaid. Following the activation of the Level 3 emergency in late September, UNICEF Headquarters issued another US$5 million EPF loan. Two additional loans were issued in October 2017, bringing the total EPF loan amount to US$11 million.

In October 2017, after the HRP was published, UNICEF appealed for US$76.1 million in the HAC to cover the period of September 2017 to February 2018. The graph below shows that funding increased steadily, reaching 94 per cent by the beginning of 2018, which indicates, UNICEF's strong work in this area.

### SUMMARY

a. **How well was the response supported by funding and funds management?**

b. **How well did human resources support the response? Are there skills/staffing needs required to meet its commitments that UNICEF has not identified or moved to secure? If so, why has this situation arisen?**

c. **How well is the supply function able to deliver necessary supplies on time and at the locations needed (including its ability to cope with the obstacles in the working environment)?**
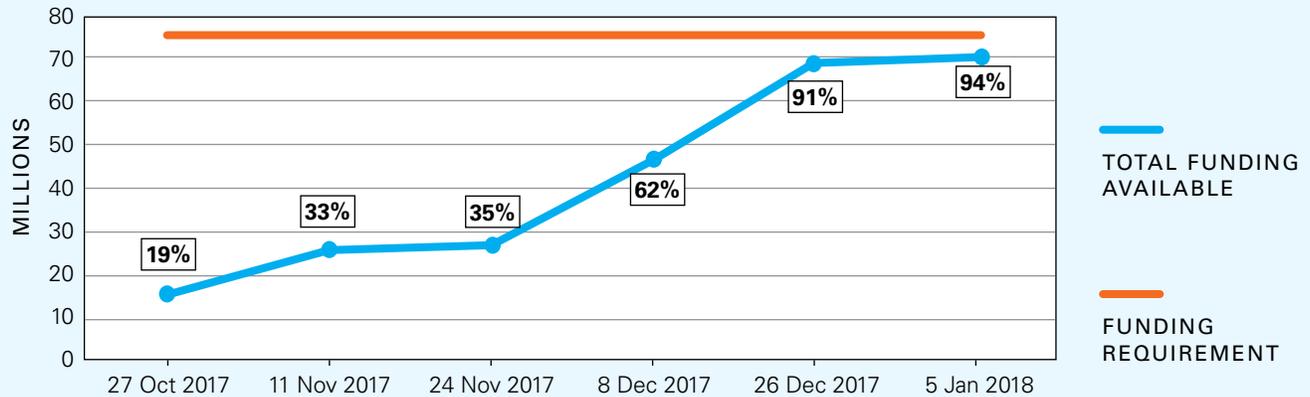
UNICEF deployed a significant number of staff from the Dhaka office, other Bangladesh field offices and from its surge capacity. The deployment was timely. UNICEF should review the seniority of its staff in Cox's Bazar, and ensure that they are of the requisite levels and have sufficient experience, especially in sector coordination positions. The supply function has generally worked well. Funding was a challenge only at the outset of the response. The 2017 HAC was more than 90 per cent funded; and as of early June, the 2018 HAC is nearly 60 per cent funded. As the crisis becomes increasingly protracted, funding levels are likely to decline over time.

Although the appeal was 94 per cent funded shortly after it was launched, it was not always clear that the response would be funded so thoroughly or so quickly. Emergency Management Team minutes and key informant interviews revealed anxiety that the crisis was not attracting the usual donor support and that the requirements would only increase as more Rohingya fled Myanmar.[165] In the first weeks of the response, both public and private funding were slow. As late as the end of October 2017, this was considered one of the most urgent issues facing UNICEF's response. It was in this uncertain environment that the EPF grants were issued. This shows strong leadership and a laudable appetite for risk among UNICEF senior staff,

---

164 United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report', UNICEF, 30 August 2017.
165 Emergency Management Team meeting minutes, September–October 2017.

## FUNDING RECEIVED AGAINEST OCTOBER 2017 HAC



Line chart with y-axis labelled MILLIONS ranging 0 to 80. X-axis dates: 27 Oct 2017, 11 Nov 2017, 24 Nov 2017, 8 Dec 2017, 26 Dec 2017, 5 Jan 2018. Data points labelled: 19%, 33%, 35%, 62%, 91%, 94%. Legend: TOTAL FUNDING AVAILABLE; FUNDING REQUIREMENT.

**Source:** Recreated from UNICEF situation reports and resource mobilization data

as mentioned elsewhere in this report. It is also worth noting that these loans were made at a time when the Government of Bangladesh had publicly made clear its preference for other United Nations agencies, making it all the more notable.

In January 2018, UNICEF published a revised HAC appeal, which superseded the 2017 HAC appeal but took into consideration the US$25.3 million requirement for the first two months of 2018. As the HAC is an appeal, it provides some insight on the activities that UNICEF intends to undertake, but does not provide clarity on strategy and the sequencing of priorities. The 2018 HAC appeal required US$144.6 million through December 2018. In May, the appeal was revised upward to US$148.9 to align with the JRP published in March 2018. As of June 2018, the HAC appeal was 58 per cent funded, which is encouraging.

Finally, the evaluation assessed the work of the resource mobilization team and the senior management involved in the response by considering the number of soft pledges that became firm. Somewhat remarkably, almost all soft pledges became firm pledges. This further demonstrates the strong work of UNICEF and its resource mobilization team.

## HUMAN RESOURCES

To evaluate how well human resources supported the response, the evaluation team analysed four aspects: the timeliness of the scale-up; the appropriateness of the staff posts/surge deployments; staffing continuity; and the organization's efforts to care for staff.

### Timeliness

Before 25 August 2017, UNICEF's field office in Cox's Bazar was staffed by two full-time positions and nine temporary appointment positions.[166] Since then, almost 200 individuals have been sent on surge deployments and the office has increased its number of staff positions nearly six-fold.[167]

On instructions from the Representative, between 11 September and 23 September, 18 staff members from the Dhaka office and nine staff members from other field offices in Bangladesh were sent to Cox's Bazar until a replacement could be recruited. This was described in key informant interviews as a "one-way" ticket.[168] An additional 11 staff from within Bangladesh were sent to Cox's Bazar on mission. The evaluation team also noted the profile of the staff sent. In several cases, the chiefs of section were sent on mission; and the chief of child

---

166  UNICEF field office in Cox's Bazar organogram of April 2017.

167  UNICEF field office in Cox's Bazar, final organogram for December 2017–December 2019.

168  Key informant interviews.

© UNICEF/UN0126275/BROWN

In Bangladesh, girls sing a song about child safety, including what do when being followed, at the Shapla Child Learning Centre in the Kutupalong makeshift refugee camp, in Cox's Bazar district.

protection was deployed indefinitely. This demonstrates UNICEF's strong leadership in quickly recognizing the gravity of the situation and directing adequate attention to it from the outset. In-country staff made up the bulk of the response in the first four weeks. This was critical to establishing the response before the international surge could begin in earnest.

## SURGE MECHANISM

According to the Level 3 Simplified Standard Operating Procedures, when an Level 3 emergency is declared, the country office issues a request to Headquarters for

surge capacity.[169] In another example of strong leadership, UNICEF Bangladesh and the UNICEF Division of Human Resources worked together to initiate surge, without waiting for the Level 3 declaration.[170] The first surge staff arrived in Bangladesh on 7 September 2017 and the number of surge staff peaked with 119 active surge posts on 10 November 2017.[171] As of March 2018, almost 200 individuals had been sent to Cox's Bazar on surge.[172]

UNICEF's surge mechanisms were quick to respond. The average amount of time between a surge request and the individual's arrival in Bangladesh was 20 days, which is

---

169 United Nations Children's Fund, 'Simplified Standard Operating Procedures (SSOP) for Corporate Emergency Activation Procedure in Level 3 Emergencies', UNICEF, March 2012.

170 Internal UNICEF email communication, 'IRT-ERT needs', 12 September 2018.

171 Bangladesh surge tracking, 10 November 2017.

172 Bangladesh surge tracking, March 2018..

On 9 September 2017, the Balukhali makeshift settlement for Rohingya refugees in Cox's Bazar District, Bangladesh.

© UNICEF/UN012042B/BROWN

the Division of Human Resources' unofficial target for surge.[173] The median was 16 days.

## Appropriateness: Staff/skills vs. need

### NUMBER AND SENIORITY OF STAFF

As mentioned in section 2.4 on effectiveness, some programme areas had too few staff, given the commitments made in the HAC. In general, the evaluation observed an over-burdened field office. Although staff in Cox's Bazar are meant to work closely with their counterparts in Dhaka,

they report directly to the Chief of the Cox's Bazar office, who has more than 15 such direct reports.

The evaluation team also considered the seniority of key roles, such as sector coordinator. UNICEF deployed senior staff for some sector coordinator positions or coordination support positions early in the response. This is commendable, as it helped UNICEF establish leadership for sectors such as WASH, and contributed significantly to the CwC Working Group. However, this has not been the case for all sectors led by UNICEF.

---

173 Note that this figure was calculated using the data available in March 2018. The evaluation team notes that surge deployments also spent time in Dhaka before arriving in Cox's Bazar.

**DELAYS AND GAPS**

There were some delays in filling key posts, which affected the response. In WASH, a hygiene promotion sub-sector coordinator joined the team in April 2018. In nutrition, the lack of continuous, stable senior leadership before February 2018 constrained the quality of the response. The gender-based violence expert deployed on surge did not arrive until mid-October 2017.

The evaluation team found evidence of staffing gaps. For example, in nutrition, the response would benefit from more capacity in IYCF. In child protection, despite the initial strategic focus on unaccompanied and separated children, there was no specialist focusing on identification, documentation, tracing and reunification.[174] The gender-based violence strategy and scale-up plan produced in November 2017 included staffing needs that have not yet been met, which has constrained this component of the response. The approval of programme cooperation agreements was somewhat delayed by time-consuming exchanges between the Dhaka and Cox's Bazar offices. This might have been mitigated with staff in Cox's Bazar who could provide budget support.

Finally, the evaluation team noted that while the leadership, programme, planning, monitoring and evaluation, and communications staff were scaled up, human resources itself was somewhat neglected. The human resources section in Dhaka benefited from an eight-week surge deployment in October and November 2017 and the Cox's Bazar office had the help of a human resources consultant. However, given that UNICEF was recruiting and on-boarding many individuals, additional support would have been beneficial. The supply function was also overburdened.

The evaluation team also made two observations related to the future staffing of the response. First, the team noted an overburdened field office. Second, the team observed a growing disconnect between the Dhaka office and the Cox's Bazar office. While it may have been appropriate in the early months of the response for all field office staff to report to the chief of the field office in Cox's Bazar, as

the office has grown and as there is less interaction with the colleagues in Dhaka, this has created a burden on field office leadership. A light management review should investigate the reallocation of roles and responsibilities. UNICEF leadership in Dhaka and Cox's Bazar should be encouraged to develop a matrix management model that facilitates stronger working relationships between Dhaka and Cox's Bazar and among the teams in Cox's Bazar.

## Continuity

The high level of staff turnover has negatively impacted the response, resulting in a loss of institutional memory and, in some cases, affecting relationships with partners. This is a challenge common to all agencies in all emergencies. To analyse turnover, the evaluation team looked at a sample of key positions. The picture is mixed: in a span of eight months, there have been four chiefs of field office in Cox's Bazar, four education sector coordinators and three child protection sub-sector coordinators, with less turnover in other sector coordinator roles. The evaluation team also looked at the balance of fixed term and temporary appointments. In October, there were 8 fixed term and 39 temporary appointments. In December, there were 15 fixed term and 48 temporary appointments, representing an increase in the number of fixed term positions as a percentage of staff posts. The evaluation team encourages UNICEF to continue this trend in the upcoming programme budget review, noting that the need for staff in Cox's Bazar is likely to remain high for some time.

## Staff welfare

Finally, the evaluation team looked at efforts to provide for staff welfare. Staff are under enormous pressure, and this will intensify during the monsoon season. By October 2017, UNICEF Bangladesh had issued a preparedness plan to support staff on burnout issues. The Country Office also championed the flexible work policy, a United Nations doctor had been temporarily dispatched to Cox's Bazar to provide support and a staff counsellor was hired on retainer in Dhaka.[175] Despite these efforts, several key informant interviews revealed that staff felt that more could be done. There have been efforts to ensure that staff have breaks in advance of the monsoon season,

---

174 The staff member deployed from the Dhaka office, who also acted as sector coordinator, had not previously worked in an emergency response.
175 Internal briefing notes for the Executive Director of UNICEF, October 2017.

given the expectation of facing another emergency within the emergency, which is a very sensible step.

## SUPPLY

The evaluation reviewed the way in which UNICEF's supply function has supported the response in relation to each of the programme areas. In many ways, the supply function has worked well in relation to the programmes, especially when considered against the scale of the response, UNICEF's stake in it and external challenges such as government restrictions on certain supplies. Although NGO partners have reported some delays in operational supplies, they have expressed general appreciation for UNICEF's support in this area, particularly given that many of the national and local NGOs involved in the response do not have warehouse capacity. The delays concern in-kind supplies, for example generators, solar panels, water tanks and laptops, which significantly impacted the ability of health partners to fully scale up their 24/7 services as late as six months into the emergency. In nutrition, in-kind operational supplies such as height boards or weighing scales have also experienced delays when procured from outside Bangladesh. Locally produced versions are not of the same quality standards. One suggestion that has come up is an orientation or short training for programme staff on procurement processes, so they can follow up faster and implement actions in a timely manner.

Similarly, the evaluation has noticed some issues with procurement in relation to tenders or contracting of consultancy services to support capacity development or undertake surveys. In child protection, for example, the lack of progress in hiring for a consultancy to strengthen partner capacity has hampered the technical capacity development of partners. The contracting of a knowledge, attitudes, behaviours and practices consultancy for WASH has been extremely delayed. This has been one of the factors challenging hygiene promotion activities and efforts to address the WASH needs of women and adolescent girls.

In nutrition, the evaluation found an issue in regard to RUTF supplies. Unlike in many other contexts, in Bangladesh, UNICEF is not providing the single pipeline for RUTF. There are several other RUTF pipelines, including one managed by ACF and one managed by UNHCR with the approval

of the Ministry of Disaster Management and Relief, which date back to August 2017. According to UNICEF partners, there has been a lack of transparency regarding the actual amounts procured and received to date, and a lack of clarity on forecasting. Communications between UNICEF and its partners on this issue may not have been optimal, likely due to the fact that the use of RUTF in country is still a sensitive issue. As far as the Ministry of Health and Family Welfare is concerned, the use of RUTF is still restricted to the Rohingya. In light of this, moving forward, there is a need for improved discussion, better understanding of differing perspectives and increased transparency between all agencies. To this end, UNICEF, as sector lead, should have kept the nutrition sector supply task force in place. These issues are now being addressed with the leadership of the new nutrition sector coordinator.

While managed well overall, WASH has seen a number of supply issues, including the monsoon contingency supply orders for chlorine, which were only delivered in the quantities required in mid-April 2018. The first contract for the military latrine was a supply and build package – it did not include linkages with soft and hard components of the response, namely to support gender and hygiene promotion. As noted by one key informant, "sanitation is a service".

## SUB-CONCLUSION

UNICEF has managed to deploy significant numbers of staff from the Dhaka office, other Bangladesh field offices and its surge capacity. A number of these positions should now become permanent given that this situation will not be resolved soon. UNICEF should also review the seniority of its staff, and ensure that they are of the requisite levels and have sufficient experience, especially in sector leadership positions.

Funding was a challenge only in the early days of the response, which UNICEF overcame. Despite anxiety about a lack of funding, UNICEF planned a large-scale intervention. While the supply function has been stretched to the limit and could have benefited from additional surge capacity, especially in the early part of the response, the supply function has generally worked well.

# 2.10 Monsoon preparedness

Even without monsoon rains hitting the camps, the situation for refugees living in camps is highly precarious. The monsoon season, which runs from June through the end of October, will most likely increase the complexity and precariousness of the Rohingya situation, and result in additional burdens on the affected population. A January 2018 risk assessment identified at least 100,000 refugees living in high-risk areas exposed to landslides; this figure was later revised to 215,000. In the race against the rains, IOM and UNHCR are leading site development and developing new terrain that will accommodate just 15,000 refugees,[176] and UNICEF has deployed a designated staff member to support the organization's preparedness and contingency planning.

Overall, the evaluation has found that UNICEF did what it could to prepare for the rains given the short timeframe and extremely demanding situation. Preparedness plans are in place at the programme level and implementation is underway. The comprehensive Flood Emergency Preparedness and Response Plan describes the possible scenarios and their potential impacts. It also covers the reinforcement of facilities used for nutrition, health, WASH, child protection and education and the decommissioning of facilities in high-risk locations. For relevant sectors, priorities have included actions such as supply storage, stock pre-positioning and the identification of sector focal points at the camp level. The evaluation was not in the position to verify the status of all of these actions, but has observed a sense of urgency to accomplish as much as possible. For example, the robust nutrition sector preparedness plan is already underway, including the decommissioning of facilities, the relocation or reinforcement of facilities placed in high-risk areas, and the formation of mobile nutrition teams that will ultimately be linked with mobile medical teams and the porter system established by the food security sector.

> ## SUMMARY
>
> **What actions has UNICEF taken to prepare for the immediate future, especially the seasonal monsoon rains and the relocation of refugees?**
>
> The evaluation found that UNICEF took monsoon preparedness very seriously and did what it could to put plans in place. In several ways, monsoon preparedness helped to mobilize actions and accelerated steps that have contributed to improving the response.

The evaluation observed delays in preparedness and/or room for more active UNICEF programme involvement in some sectors. In child protection, for example, the procurement of bracelets to prevent the separation of children was delayed in April. In WASH, the evaluation found that the UNICEF programme could enhance its plans with some supplementary actions. The evaluation team shared these priority issues with the programme and sector when it was on the ground in the spirit of real-time evaluation. In addition, it seems critical that more extensive live simulations on cholera case management and referrals, involving the health and WASH sectors, are held across all locations, beyond the limited number planned.

## SUB-CONCLUSION

The evaluation observed that UNICEF has taken monsoon preparedness seriously in relation to the programme areas. The plans it has developed are comprehensive and address a range of issues that are important to advance even without the rains. The further implementation of the plans is what matters, especially as there are delays in some sectors.

---

176 See Solomon, Ben C., 'Race Against the Rains', *The New York Times,* 30 May 2018, <www.nytimes.com/interactive/2018/05/30/world/asia/rohingya-monsoon-bangladesh.html?hp&action=click&pgtype=Homepage&clickSource=story-heading&module=photo-spot-region&region=top-news&WT.nav=top-news>, accessed 14 November 2018.

A young girl flies a makeshift kite, fashioned from a plastic bag on a hill at the Balukhali Makeshift Settlement, in Ukhiya Upazila, Cox's Bazar District, Bangladesh.

# PART THREE:
# CONCLUSION AND RECOMMENDATIONS

# 3.1 The future of the response

This section looks at the future of the response in the context of the evaluation findings. As noted, at the time of the field mission and in the weeks following, the evaluation observed and learned of improvements in UNICEF's programmes and in the sectors. This included several new staff deployments, the revised HAC for 2018, and indications of future plans made in response to an earlier draft of this report.

The revised HAC for 2018 explains that UNICEF will follow four key strategies: 1) saving lives and protecting children and their families in the camps; 2) promoting social cohesion and confidence building with host communities in Ukhia and Teknaf; 3) system strengthening and accelerating programme implementation in the Cox's Bazar District; and 4) applying lessons learned in the above strategies to the national level.[177]

The evaluation sees the relevance of these strategies, but cautions that the first priority should be to implement the objectives described in the HAC appeal in an effective and efficient manner. The importance for humanitarian agencies, especially those such as UNICEF that are also active in longer-term development, to look at the future and plan ahead is understood. However, at a time when there is still much work to be done in the camps and host communities, as this evaluation has found, an even wider focus and longer list of priorities carries risks.

In terms of improving the situation in the camps, although retrofitting/upgrading better quality services and facilities is an extremely complex undertaking in this densely-populated area, this work needs to be done. The evaluation has identified several immediate steps that could be taken. In WASH, for example, upgrading would involve the targeted and precise removal of some shelters in the most densely packed areas to allow space for gender-sensitive latrines and better FSM. The designing and building of deeper latrines will also help to reduce the frequency of desludging.

However, before perceiving retrofitting/upgrading only as a set of physical activities in terms of adding quality adjustments to existing camp structures, UNICEF should fully integrate protection, gender and gender-based violence into its overarching response strategy. These should be the tenets of its interventions in all programmes and sectors. The evaluation has observed steps taken in this direction, with the development of gender-based violence integration action plans for each of the programme areas. Protection activities for adolescents should be expanded to address many of the unique risks that adolescents face and prevent negative coping mechanisms.

On the normative side, work remains to be done, especially when it comes to upholding the rights of refugee children (e.g., regarding documentation and family reunification). A critical issue in this context is the possible relocation of up to 100,000 refugees to the Bhasan Char island in the Gulf of Bengal. The United Nations position on this matter combines principled and practical considerations – including that refugees must have freedom of movement – and the United Nations is involved in technical assessments of living conditions on the island.[178] Even if the refugees voluntarily relocated to the island, unless they can access continuous ferry services, the principle of freedom of movement will not apply. UNICEF has said that it will provide "support to Rohingya who may move to other parts of the country."[179] Based on this statement, the evaluation understands that UNICEF will provide services to the island, should refugees move there. Given that this is an issue that inherently and fundamentally involves protection questions and rights issues, the evaluation recommends that UNICEF clarify its position for children from a normative standpoint and frame that position as a set of advocacy messages.

Furthermore, efforts to upgrade services should be focused on inter-sectorality. Even with new land available, the standard space for people in camps is unlikely to be realized. Services and facilities should therefore be combined as much as possible, taking gender, age and

---

177  The June 2018 UNICEF situation report, which was produced at the time of writing this report, notes that UNICEF is following these four strategies. United Nations Children's Fund, 'Bangladesh Humanitarian Situation Report No. 33 (Rohingya influx)', UNICEF, June 2018.

178  United Nations High Commissioner for Refugees, 'Rohingya Refugee Crisis: Relocation to Bhasan Char Island', UNHCR, April 2018. According to the resident coordinator, this position paper was adopted as the United Nations' position.

179  United Nations Children's Fund, 'Bangladesh', *Humanitarian Action for Children 2017*, UNICEF, May 2018.

disability into account.[180] One possibility, which may not be feasible in all sites, is the re-grouping of stabilization centres, outpatient therapeutic feeding centres, targeted supplementary feeding programmes and health services, which should either be in the same compound or in close physical proximity so as to ensure strong referral pathways.

Inter-sectorality should also be pursued through shared or combined (inter-sector) vulnerability mapping for better targeting of services in both camps and host communities.

For each programme and sector, the evaluation has identified specific (technical) recommendations. *These can be found in Annex 11.*

Supporting system strengthening through an early engagement with and technical assistance to the Government is an appropriate approach to paving the way for a smooth transition from the emergency response to recovery and development. However, UNICEF must not lose sight of its immediate priorities, and focus first on what needs to be improved in the camps and for host communities before embarking on broader strategies. Clear prioritization of planned activities will be essential in this effort.

Many of the Rohingya refugees arrived in Bangladesh as victims or witnesses of massive atrocities. They have seen their relatives killed, their homes burnt down, and have been the victims of rape and other serious forms of (sexual) violence and abuse. They must be supported during their time in Bangladesh as best as possible by the Government, UNICEF and all involved actors. The Rohingya children's rights need to be protected, promoted, respected and fulfilled. They are entitled to it.

## 3.2 Conclusions and recommendations

### OVERALL CONCLUSIONS

It would be wrong to conclude that the needs of Rohingya refugees have been adequately met by UNICEF and the wider humanitarian community. The living conditions in the camps are appalling and do not meet the minimum standards for humanitarian assistance. This is not to deny the good and admirable efforts of the humanitarian responders working under difficult circumstances, nor to downplay UNICEF's impressive achievements, as described throughout this report. Rather, it is to caution readers that much work remains to be done for the international community to uphold the rights of the Rohingya children in Bangladesh.

All conclusions about UNICEF's response must be understood in the unique context of this crisis. The speed and scale of the influx that began in August 2017 was almost unprecedented.[181] At an average of 20,000 refugees per day in September 2017, the 700,000 Rohingya fled from Myanmar to one small stretch of land, creating the world's largest and most densely populated refugee camp. The influx, combined with the lack of information about the exact situation in Rakhine and (potential) massive outflow of Rohingya, made it impossible for authorities and agencies on the ground to prepare. While 45 square metres is the emergency standard for the average area per person in a temporary, planned or self-settled camp setting, in the densest parts of the camps, the average area per person is 8 square metres. Due to this extreme congestion, many of the standards and indicators that have been carefully crafted since the late 1990s to ensure a minimum level of quality in humanitarian responses, have not been met.[182]

The needs of the arriving refugees were enormous. The Rohingya are victims of egregious human rights abuses in Myanmar. This is compounded by the trauma and violence they experienced crossing into Bangladesh. Within the camps, hundreds of gender-based violence incidents are reported weekly. Children face serious protection risks such as psychosocial distress, neglect, abuse, separation from caregivers, child marriage, child labour and trafficking. In part because of poor access to health services in Myanmar, the newly arrived Rohingya refugees had an extremely low routine immunization coverage of less than 3 per cent. Malnutrition is at acute emergency levels in the camps, with one child in every five suffering from malnutrition

---

180 The evaluation has developed a matrix that provides a basic summary of the key considerations connecting various sectors (see Annex 10).
181 Comparable only to Rwandans in Tanzania and (then) Zaire in 1994 and the Kosovars in Albania and Macedonia in 1999.
182 This applies to the Sphere Minimum Humanitarian Standards in sectors such as shelter and WASH.

Overall, the evaluation team found that despite the obstacles posed by this crisis, UNICEF rose to the challenge. UNICEF's services reached many Rohingya children and their families and undoubtedly addressed their plight. The evaluation has noted a range of impressive achievements in areas such as scaling up, advocacy, sector leadership and service delivery. However, the evaluation also found critical challenges and identified several areas in need of improvement. This section outlines the specific conclusions about UNICEF's response, followed by recommendations for the organization to consider in its response to the Rohingya refugee crisis and its work in emergencies more generally.

## SPECIFIC CONCLUSIONS

### Preparedness and scale-up

The entire international community, including UNICEF, was caught off guard by the size and speed of the refugee influx. Despite strong indications of massive human rights violations in Rakhine and the lack of humanitarian access, the lack of information from Myanmar about a potential massive outflow meant that UNICEF was under-prepared for such a crisis. Despite this, UNICEF's scale-up efforts were impressive. Strong and experienced leadership, some appetite for risk, smooth contracting processes and strong human resource management contributed to the rapid scale-up. However, limited partner capacity hindered UNICEF's ability to keep pace with the refugees' needs.

### Advocacy

From the start of the crisis, UNICEF has appropriately focused its advocacy on three key obstacles to this response: the weak protection environment; the extreme congestion in the camps; and the problematic inter-agency coordination model. The evaluation found that UNICEF's advocacy for a better protection environment should have been stronger, given the organization's normative role and its rights-based agenda. What UNICEF says can be just as important as what it does. It rightly raised the issue of the extreme lack of space in appropriate fora, though it should consider documenting the consequences of congestion on its ability to respond to facilitate more evidenced-based advocacy.

The evaluation found that coordination structures that combined different coordination models caused confusion, delays and unnecessary agency tensions, and negatively impacted UNICEF's ability to deliver for children. UNICEF was right to raise this issue and the evaluation found that the organization was a strong advocate for improved coordination, though it should have formally raised its concerns at the IASC level. Concerns about the response's coordination extend beyond this crisis. It is crucial to the effectiveness of UNICEF's coordination responsibilities in nutrition, WASH, child protection and education to clarify how the refugee coordination model, led by UNHCR, will be implemented in the future. UNICEF should actively engage in discussions about the future of the inter-agency coordination structure in refugee responses.

### Strategy

Although UNICEF did attempt to define its strategies, especially at the programme level, its *overall* strategy was found wanting. First, the rights lens was weak. All humanitarian organizations involved in a refugee response should structure their work around refugee rights, which should in turn underpin all aspects of the response. Second, the overarching strategy should have addressed the significant gender dimensions of this crisis. There was also insufficient reference to how UNICEF would address protection risks such as abuse, exploitation, trafficking and gender-based violence.

The overall strategy also neglected how the context, including congestion in the camps, would impact the organization's ability to deliver and how UNICEF would adjust its programming accordingly. In addition, while the evaluation team recognizes that UNICEF has a wide range of responsibilities and commitments, the context meant that not all priorities could be implemented simultaneously, and as a result, some HAC targets were not reached. While there was tacit prioritization, UNICEF should have been more explicit about this and the associated sequencing. The organization would have been entirely correct to manage the expectations of its stakeholders by sequencing its response activities without infringing on its mandate. This would have helped other agencies define their own priorities, either in support of or complementing UNICEF's approach.

The overall strategy should have better articulated inter-sectorality, a term that signifies strong links across sectors, which should work together in combining their services. In particular, the education-in-emergencies approach, which provides an opportunity to work across sectors, was weak.

Finally, although UNICEF's strategy could be discerned from a collection of various materials, the evaluation team did not find a document that articulated UNICEF's overall strategic vision, its main plans in service delivery, its advocacy and communications work, the technical support it might need from the regional office and headquarters, and the technical support that it would provide to partners. The HAC and the Response Plan appear to be more a collection of sector-specific work plans than a strategy, and were designed to communicate UNICEF's funding requirements. UNICEF should reflect not only on the content of its strategy but on how to better articulate its overall strategy in future emergency responses.

In terms of programme strategies, the findings are more positive. Programme strategies were highly relevant and there is ample evidence that appropriate adjustments were made to address emerging and evolving risks. The concentrations on the prevention of disease outbreaks, improving WASH conditions and addressing the nutritional status of the Rohingya was appropriate. Gaps included the inadequate attention given to gender (*see below*), UNICEF's failure to integrate the critical life-saving aspects of an education-in-emergencies approach, and the inadequate attention given to adolescent education. The FSM strategy is somewhat vague and underestimates the scale and complexity of this area of work in this unique context.

## Rights, protection, gender and gender-based violence

The characterization of the Rohingya refugee response by a key informant as "old-fashioned" and reminiscent of some of the inadequate humanitarian responses of 1990s was apt. UNICEF did not sufficiently emphasize addressing protection, mainstreaming gender and addressing gender-based violence issues – a significant concern given the organization's commitments to these priorities. An initially assistance-driven operation should have been quickly followed, if not accompanied, by a protection-orientated,

rights-based response. Indeed, the quality aspects of the CCCs and Sphere and companion standards derive from the fact that they are rights-based. As noted, with some exceptions, gender mainstreaming aspects were insufficiently considered and implemented in the first several months. Programming to address gender-based violence was critically delayed. While plans were eventually made to address this, the evaluation found clear evidence of the lack of implementation of gender-based-violence-related services at least until February 2018. In UNICEF, gender-based violence falls under the responsibility of child protection, an arrangement that, in a crisis like this, doesn't give it the attention it requires.

## Effectiveness, coverage, timeliness and quality

The evaluation found that UNICEF has reached many of its programme targets against stated objectives in each of the five sectors it assessed, though some areas of work did fall behind. Due to the extreme speed and scale of the influx, the evaluation understands that quantity was prioritized over quality in the first weeks and months of the response. This approach was appropriate to reaching affected populations. But quality must follow quantity, and this did not happen across all areas of work. Some of the reasons for this were outside of UNICEF's control, for example, the extreme congestion, the speed of the influx and the almost non-existent infrastructure. Other factors included gaps or delays in recruiting key staff positions, lack of implementing partner capacity and inter-agency tensions. In April 2018, the implementation of several priorities that should have been well underway had only just begun.

The response would have been more effective had inter-sectorality been better addressed. The push for greater integration needs to come from the top. The evaluation found that the CCCs, which guide how UNICEF responds in all emergencies, include little guidance on inter-sectorality.

The evaluation found that C4D, a service unique to UNICEF, has had an added value in the context of several UNICEF programmes. C4D also found its role and place by actively contributing to the CwC Working Group. While this may be seen as positive, it leaves the question open as to the value of C4D in relation to sector-wide initiatives to engage

© UNICEF/UN0155608/SUJAN

with affected populations, CwC and foster accountability to affected populations. The degree to which UNICEF C4D adds value for the wider humanitarian community in emergency contexts may require further examination.

## Sector leadership

There is a mixed picture of UNICEF's performance in regard to its (sub-)sector (co-)leadership, which resembles the different levels of progress that the evaluation has seen within and among the programmes. The factors that could contribute to better sector leadership range from ensuring continued senior staffing (nutrition) and pushing for inter-sectorality (child protection and education), to ensuring a collective and genuine partnership approach in which UNICEF contributes to but does not dominate the sector (education).

While many of UNICEF's partners were positive regarding UNICEF's lead role in the sector, the evaluation also found that in some cases, the sector was dominated by UNICEF, while in other cases, UNICEF programmes were too distant from the sector. Finding the right balance is challenging and requires a collaborative spirit and open dialogue.

## Partnerships

UNICEF was found to have strong relationships with its partners and many of these partners expressed positive views of UNICEF's contributions to the partnership. The evaluation found evidence that (national) NGOs appreciated UNICEF's sector leadership and their contractual relationships with UNICEF. That said, the NGO capacity in several programme areas was found

wanting, something that not all sectors anticipated in time. The absence of UNICEF's traditional partners in Cox's Bazar contributed to this. The capacity-building effort, which should also be done in collaboration with other agencies and the ISCG, should pay attention to national/local NGOs' understanding of the (international) legal frameworks, rights and standards and mechanisms that offer protection to Rohingya children.

## The quality of information

The evaluation found that parallel data collection systems that are not necessarily compatible do not allow for easy comparison between the work of UNICEF programmes and the sectors. Much of this issue relates to the perennial problem of the division between individual agency responsibilities and collective arrangements in information gathering and coordination. The evaluation also found that data collection is too focused on coverage and the number of people reached and not enough on quality. Finally, advice from consultants and visiting staff was not always adequately absorbed.

## Supporting functions

The human resources, supply and funding functions generally supported the response well. UNICEF deployed a significant number of staff from the Dhaka office, other Bangladesh field offices, and from its global surge capacity in a timely manner. However, the evaluation observed an over-burdened field office and a growing disconnect (less collaboration and communication) between the office in Dhaka and the office in Cox's Bazar. Funding was only a challenge in the early days of the response, which UNICEF overcame, thanks in part to EPF loans. While the supply function has been stretched, and could have benefited from additional surge capacity, particularly in the early part of the response, it has generally worked well.

## Monsoon preparedness

UNICEF took monsoon preparedness very seriously and did what it could to put plans in place. In several ways, monsoon preparedness has helped to mobilize actions and accelerate steps that have contributed to an improved response overall.

## RECOMMENDATIONS

The recommendations presented below follow from the evaluation's findings and conclusions. This section outlines the main priorities for improving UNICEF's response to this crisis, and where relevant, UNICEF's response to emergencies in general. It should be noted that, to UNICEF's credit, many of these recommendations have already been acted upon. *Sector-specific recommendations are included in Annex 11* and other suggested actions are included throughout the report.

### 1. INFORMATION AND ANALYSIS FOR PREPAREDNESS

There is a need for strengthened forecasting capacity, intelligence gathering and analysis. The lack of information from Myanmar on the situation in northern Rakhine State meant that UNICEF (and the entire international community) were caught off guard and were under-prepared to respond to this crisis. The evaluation recommends that UNICEF invest in collecting better political, social and economic intelligence for forecasting to inform its preparedness actions. The intelligence should be cross-border (and, where necessary, cross-regional), include local context and, where possible, be shared with other agencies. The intelligence should be translated into risk analysis and preparedness plans. [*For action by: UNICEF Regional Offices under the leadership of UNICEF Headquarters*]

### 2. COORDINATION

a. While the ISCG remains a temporary mechanism, there is an opportunity to make improvements and strengthen accountability. UNICEF should raise the findings of this evaluation with the Senior Executive Group and the ISCG. Linked to other initiatives to strengthen coordination, it should work with the resident coordinator and the head of the ISCG to clarify lines of accountability and relationships, including the roles of sector leads with their home agencies and with the inter-agency coordination structures. [*For action by: UNICEF Bangladesh and the Cox's Bazar field office*]

b. Share the relevant findings from this evaluation about coordination with the IASC and promote the inclusion of the future of the refugee coordination model on the IASC agenda. In this process, review

accountability issues in this model and make use of the cluster approach experiences. [*For action by: Office of Emergency Programmes (EMOPS)*]

### 3. CONTEXT ANALYSIS FOR PLANNING AND ADVOCACY

The extreme lack of space has meant that the minimum standards for humanitarian action, which are grounded in human rights, have been difficult to meet. The evaluation recommends that UNICEF document the specific ways in which the congestion has impacted its ability to deliver and has ultimately denied Rohingya children and their families their rights. This work should inform UNICEF's future strategies to respond to this crisis, both overall and in regard to specific programmes that were found to lack a thorough reflection on the context in which UNICEF operates. It should also be used to support UNICEF's continued advocacy in this area, by providing a stronger position grounded in evidence. [*For action by: UNICEF Bangladesh with support from the Regional Office for South Asia (ROSA)*]

### 4. STRATEGY

a. Review UNICEF's strategy for 2019 and beyond. Ensure it includes an analysis of the context (in line with recommendation 3), identifies existing and potential issues and obstacles and explains how the strategy will address these. Be explicit about prioritizing and sequencing activities. It is recommended that this strategy includes a greater emphasis on inter-sectorality and gender, be underpinned by a rights-based approach and emphasize the centrality of protection in all aspects of UNICEF's work. [*For action by: EMOPS, the Programme Division, ROSA and UNICEF Bangladesh*]

b. Review how strategies for Level 3 emergencies are informed, developed and adjusted throughout a response. Review what documents UNICEF uses for communicating its humanitarian strategies and priorities and what documents it uses for resource mobilization. Determine whether the HAC and UNICEF's response plans (which are a combination of strategy and appeals) should be reconsidered in future emergencies. [*For action by: EMOPS*]

### 5. RIGHTS, PROTECTION, GENDER AND GENDER-BASED VIOLENCE

a. Review UNICEF's guidance on advocacy in emergencies. Promoting the rights of children must involve robust advocacy messages, which should not only be transmitted publicly in UNICEF communications, but also in private in dialogue with governments and humanitarian decision-makers. The review should consider UNICEF's comparative advantage as an advocate for children in crisis contexts, how to maximize the relationship between operational response and advocacy, and UNICEF's advocacy position in relation to other actors. [*For action by: EMOPS*]

b. Strengthen efforts to address protection risks, including gender-based violence. In so doing, the relevant offices should strengthen and deepen inter-sectoral work among all programme sections and ensure attention to psychosocial support, children with disabilities and similar other risks and vulnerabilities. [*For action by: UNICEF Bangladesh with the support of ROSA and the Programme Division*]

c. Strengthen efforts to mainstream gender in all aspects of UNICEF's response. With the help of gender experts in ROSA and UNICEF Headquarters (and/or an external gender expert) and using the most recent studies about Rohingya refugees' behaviours and practices (including UNICEF's knowledge, attitudes, behaviours and practices study), ensure gender is integrated across all sectors (and that all of the actions from the ISCG Gender Matrix have been implemented). [*For action by: UNICEF Bangladesh with the support of ROSA and the Programme Division*]

d. The relocation of Rohingya children to Bhasan Char island or their return to Myanmar inherently and fundamentally involves protection questions and rights issues. UNICEF should develop a position on these issues from a normative perspective and ensure that this position is framed in a set of advocacy messages in coordination with other United Nations agencies. [*For action by: UNICEF Bangladesh with the support of ROSA and EMOPS*]

## 6.  POSITIONING OF C4D

Review the extent to which C4D fits (better) within the humanitarian community's work on engaging with communities in emergency situations and assess nature of investments needed. [*For action by: EMOPS and the Programme Division*]

## 7.  INNOVATION, OUT-OF-THE-BOX THINKING AND NEXT STEPS

The Rohingya refugee crisis is, in many ways, an extreme situation. Exceptional steps are therefore needed to confront certain challenges. Among other issues, areas of weakness that cannot be strengthened using traditional approaches necessitate that UNICEF think outside the box. These include the following:

a.  Capacity building of local and national NGOs: Some of UNICEF's traditional capacity-building partners aren't present in Cox's Bazar. UNICEF should experiment with innovative ways of building the capacities of its partners, for example, by seconding staff members for financial management, peering and mentoring rather than training. This should include capacity building on protection and rights issues. [*For action by: UNICEF Bangladesh with the support of ROSA and relevant HQ Divisions*].

b.  FSM: Due to the layout of and congestion in the camps, the densely-populated space in the highly rural environment, and the initial lack of design for pit emptying, the issue of FSM faced is extremely complex. Given that no off-the-shelf solutions are available, in a sense, the world's technical capacity needs to be mobilized to identify solutions. Working with the sector, UNICEF and other key stakeholders should experiment with new ways of addressing this issue by engaging the private sector and universities. [*For action by: Programme Division, Supply Division, ROSA and UNICEF Bangladesh*]

## 8.  INTEGRATED PROGRAMMING AND WORKING ARRANGEMENTS

a.  The evaluation team observed a growing disconnect between staff in Dhaka and Cox's Bazar as well as a need to work more inter-sectorally. The evaluation recommends that UNICEF undertake a light management review that would consider the reallocation of roles and responsibilities. The review should look at ways to promote staff work across programmes (and not in silos) and develop a matrix management model that would facilitate stronger working relationships between the Dhaka and Cox's Bazar offices. This review should also examine how an education-in-emergencies approach can forge closer programmes linkages through the education programme. [*For action by: UNICEF Bangladesh*]

b.  Ensure that the revision of the CCCs looks at strengthening inter-sectorality and builds links between UNICEF programme areas. [*For action by: EMOPS*]

## 9.  KNOWLEDGE MANAGEMENT AND DATA

a.  UNICEF's response has been supported by numerous visiting advisers from Headquarters, ROSA and the global clusters, as well as expert consultants. Given the already numerous demands on staff, some of this advice has not been absorbed. UNICEF should further invest in knowledge management. This could include developing a standard format for reports made by visiting advisers and setting up a system for monitoring the implementation of their recommendations or adapting the Emergency Management Team's Action Tracker system. [*For action by: the Emergency Management Team and UNICEF Bangladesh with the support of ROSA*]

b.  The evaluation observed that different datasets are being used in the response. While these datasets may serve different purposes, their compatibility should be ensured from the outset. UNICEF should review the commonalities and differences of the information and data needed at the programme level and the sector level and ensure that these datasets are compatible from the onset of data collection. [*For action by: UNICEF Bangladesh with support from ROSA*]

unicef🙋 | for every child