HUMANITARIAN QUALITY ASSURANCE: LEBANON

Evaluation of Syria Crisis Response

Effectiveness Review Series   2013/14

Credit: Sam Tarling/Oxfam

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1 BACKGROUND

1.1 THE DISASTER AND RESPONSE

Three years of civil war in Syria have caused over 2.2 million Syrians to flee across the country's borders. To date, approximately 800,000 refugees, the majority of whom are women and children, have sought refuge in Lebanon[1] where they have had little option but to rent cramped and inadequate accommodation, such as garages and unfinished/abandoned buildings in urban areas, erect tents on previously unoccupied land, or join long-term Palestinian refugees in their camps and gatherings.[2] With dismal work prospects, most have depleted any savings or assets they brought with them and have rapidly become food insecure and vulnerable to a variety of threats, including eviction and sexual gender based violence (SGBV).

The situation has put significant pressure on Lebanese towns and villages where employment was already scarce and basic services were overstretched before the refugee influxes. With no sign of the war abating in Syria, tensions are growing between the refugee population and Lebanese host communities.

United Nations High Commissioner for Refugees (UNHCR), UN Relief Works Agency (UNWRA)[3] and some international non-government organisations (INGOs) including specialist refugee agencies began to respond to the emerging crisis from the first half of 2012. In July 2012 Oxfam GB initiated a Category 3 response by making a small emergency grant to a former partner organisation, and launching several preparedness activities. In December 2012 Oxfam Novib and Oxfam Italia also made emergency grants to partners.

As the number of refugees in both Lebanon and Jordan increased significantly due to intensified fighting in Western Syria at the end of 2012, Oxfam declared a Category 2 regional response.[4] Then, in April 2013, as the number of refugees in the region surpassed 400,000, Oxfam declared a Category 1 response, placing the Lebanon programme among its top organisational priorities.

Since its start-up, Oxfam's intervention has included the following components:

- Distributions of non-food winterisation items (blankets, mattresses and pillows).
- Distributions of hygiene kits and hygiene promotion.
- Distributions of vouchers for food, clothing and hygiene kits.
- Cash transfers for rent payments.
- Installation and repair of Water, Sanitation, and Hygiene Promotion (WASH) facilities in camps and host communities.
- Information dissemination, advice and referrals on protection issues.
- Advocacy on access to humanitarian assistance and protection, adequate donor funding, and a political solution to the crisis.

To date, Oxfam affiliates' actions have reached 120,000 beneficiaries in South, North and East Lebanon, and Beirut. The total programme cost to date is 32.9 million USD, and further donor contracts are currently under negotiation. Oxfam GB's programme is currently focused on North (Tripoli) and East (Bekaa Valley, Baalbek) regions, as illustrated in Figure 1.

Figure 1. Locations, components of Oxfam GB's programme

1.2 EVALUATIVE METHODOLOGY

This evaluation uses a methodology designed to enable Oxfam GB to estimate how many disaster-affected men and women globally have received humanitarian aid from Oxfam GB that meets established standards for excellence.

The methodology is based on a Humanitarian Indicator Tool consisting of 13 quality standards and a scoring system (see Appendix 2). It requires documented evidence, complemented by verbal evidence where available, to be collected and analysed in relation to each standard. A rating is generated for the programme's results against each standard, and as a cumulative total.

To evaluate the Lebanon response, Oxfam GB decided to include a field visit to corroborate documented evidence with primary data. It also decided to include revision of some documentation relating the actions of Oxfam Novib and Oxfam Italia as part of the Oxfam-wide response.

1.3 STRUCTURE OF THE REPORT

A quantitative summary of the results of the evaluation is provided in Section 2. A fuller explanation of the rating for Oxfam's performance against each standard is provided in Section 3.

2 SUMMARY OF RESULTS

2.1 QUANTITATIVE RESULT BY STANDARD

The quantitative rating given for each standard and the cumulative total are provided in Table 1.

Quantitative ratings for the Lebanon programme, using the Global Humanitarian Indicator Tool

Standard	Level of achievement	Rating
1. Rapid appraisal of facts within 24 hours of pre-defined trigger, plans in place and scale-up or start-up commenced within three days.	Partially met	2/6
2. Coverage uses 10% of affected population as a planned figure with clear justification for final count.	Fully met	6/6
3. Technical aspects of programme measured against Sphere standards.	Almost met	4/6
4. MEAL strategy and plan in place and being implemented using appropriate indicators.	Half met	1.5/3
5. Feedback/complaints system for affected population in place and functioning and documented evidence of information sharing, consultation and participation leading to a programme relevant to context and needs.	Partially met	1/3
6. Partner relationships defined, capacity assessed and partners fully engaged in all stages of programme cycle.	Almost met	2/3
7. Programme is considered a safe programme: action taken to avoid harm and programme considered conflict sensitive.	Fully met	3/3
8. Programme (including advocacy) addresses gender equity and specific concerns and needs of women, girls, men and boys.	Partially met	1/3
9. Programme (including advocacy) addresses specific concerns and needs of vulnerable groups.	Almost met	2/3
10. Evidence that preparedness measures were in place and effectively actioned.	Half met	1.5/3
11. Programme has an advocacy/campaigns strategy and has incorporated advocacy into programme plans based on evidence from the field.	Half met	1.5/3
12. Evidence of appropriate staff capacity to ensure quality programming.	Almost met	2/3
Final rating		**27.5/45**
Equivalent to		**61%**

3 DETAILED ANALYSIS OF RESULTS

3.1 INTRODUCTION

In this section of the report, the data collected from documented and direct sources are analysed against the requirements for the quality standards, and justification of the rating for Oxfam GB's performance against each standard is provided. The data sources are provided in footnotes, together with other explanatory information.

3.2 ANALYSIS USING STANDARDS AND BENCHMARKS

3.2.1 Quality Standard One: Timeliness

	Met	Almost Met	Half Met	Partially Met	Not Met
Timeliness: Rapid appraisal of facts within 24 hours of pre-defined trigger, plans in place and scale-up or start-up commenced within three days				**2/6**	

Requirements to fully meet the standard:

• Initial assessment/rapid analysis of existing information within 24 hours of predefined trigger and scale-up or start-up within three days of assessment/rapid analysis.

• Triggers pre-defined in contingency plan and responded to.

• Monitoring of ongoing situation took place.

• Monitoring data were analysed and reacted upon.

• If monitoring data were not acted upon earlier, reasons are identified and justified.[5]

An historic partnership with a local organisation working in Lebanon played an important role in Oxfam's early reaction to the first signs of what would become, within months, a major refugee crisis. Although Oxfam GB had closed its national programme in 2010, in May 2012 its regional hub in Beirut was approached by the AMEL Association, a former partner organisation seeking emergency funding to address the needs of Syrians fleeing from the violence in Syria.

While the request was not a pre-defined trigger for Oxfam to respond to a refugee crisis, it was in part attributable to various humanitarian preparedness and response activities for partners in previous years. Following a rapid analysis of the situation, Oxfam GB approved the requested funding from its Catastrophe Fund and, as the OI Humanitarian Lead for Lebanon, deployed a humanitarian manager to review in-country contingency planning on behalf of all the affiliates working in Lebanon (Oxfam GB, Oxfam Novib and Oxfam Italia) and to conduct a humanitarian training needs assessment for interested partners.[6] Oxfam GB also contracted a Lebanese consultant to monitor and report on the evolving situation, to keep the organisation abreast of any changes requiring a response.[7]

However, as illustrated in Figure 2, Oxfam GB's subsequent actions lost some of their initial momentum as the contingency planning assignment took over eight weeks to complete. Also, it appears that the staff and partners who participated in the process underestimated the emerging crisis, citing 'up to 100,000 refugees' as potentially the worst-case scenario – a number that would be exceeded barely two months later and would increase ten-fold by the end of the following year. Additionally, the revised contingency plan lacked a specific trigger for further responses, which explains to some extent why Oxfam GB's early reaction to the emerging crisis did not translate into a timely scale-up.

In the meantime, as also illustrated in Figure 2, other agencies started to respond to the needs of a steadily growing number of refugees, many of whom were sheltering in host communities and gatherings while others were beginning to set up informal settlements. UNHCR expanded its operations, setting up additional offices in East and South Lebanon and coordinating 50+ stakeholders present to produce the first regional response plan (RRP1). Donors, such as DFID and ECHO, visited Lebanon in July 2012 to assess needs and potential partners, and INGOs, such as World Vision, Danish Refugee Council, Norwegian Refugee Council, Médecins du Monde and Save the Children, began to distribute non food items (NFIs) and provide other services to the refugees.[8]

Despite a request from UNHCR for WASH partners,[9] Oxfam GB did not participate in the first UN-led Regional Response Plan in May/June 2012, possibly due to a lack of experience of the staff in-country to engage in inter-agency planning and coordination meetings. However, in October 2012 Oxfam GB did bring in a small team of experienced humanitarian staff to carry out a field assessment. This resulted in an internal recommendation for immediate action, including distributing NFIs, initiating advocacy on protection issues, seeking funding from major donors for cash-for-rent, food security and limited WASH activities, and approving further Catastrophe Funds for a rapid start-up.[10] Unfortunately both the regional team and the Humanitarian Department were already committed to resourcing other crises (Yemen, Mali, and 12 other Category 2s globally[11]) and were unable to act upon the recommendations. The other affiliates – Oxfam Novib and Oxfam Italy – were able to approve modest grants[12] to three partner organisations[13] to provide food and winterisation materials to newly arrived refugees and their host families in Palestinian camps and gatherings.

In December 2012, Oxfam GB's Deputy Humanitarian Director visited Lebanon to further assess the deteriorating situation, attend an exploratory planning workshop with Syrian and Lebanese NGOs, and meet with key actors, including UNHCR, whose representative had expressed concern over Oxfam GB's absence from the inter-agency response.[14] Following his internal report of growing needs and an anticipated massive influx of refugees fleeing escalated fighting in Damascus, Oxfam affiliates reprioritised the Syria response (in Lebanon, Jordan and potentially Syria) as a Category 2, thereby placing it clearly among the institutional priorities.[15] In the following days, Oxfam GB approved £500,000 of unrestricted funding for immediate scale-up of winterisation, EFSL and protection activities, either totally or partly through partners.[16] It also deployed a senior manager and team of experienced technical staff who began to identify partners with local knowledge and adequate capacity to carry out an immediate humanitarian response, as well as to carry out an in-depth assessment, focusing on WASH, EFSL and protection needs in North and East Lebanon.[17]

In February 2013 the partners identified during Oxfam GB's assessment began to distribute winterisation kits comprised of blankets, mattresses and pillows[18] in Palestinian camps, gatherings and other locations.

Finally, following approval of funding by SIDA, decisions to launch both an Oxfam appeal and a DEC appeal and the reprioritisation of the Syria Crisis response as a Category 1 in April 2013, Oxfam's programme in Lebanon began to scale-up and extend beyond NFI distributions,[19] as will be explained in the following section.

Overall, given that Oxfam's first reactions were rapid and appropriate but its transition from early warning and situation monitoring to proportionate response was slow, it is considered that Oxfam GB only partially met the standard for timeliness (2/6).

Figure 2. Lebanon Timeline 2012

No. of refugees[20]	Actions by other stakeholders	Actions by Oxfam
MARCH		
c12,000	UNHCR opens operation in East Bekaa and launches inter-agency Regional Response Plan	
APRIL		
c20,000	UNHCR in Bekaa requests implementing partners with WASH capacity. DFID approves funding for SCF, MDM, NRC to respond to refugees' needs.	
MAY		
c26,000		OGB funds partner to distribute food and NFIs to 5,000 refugees in Palestinian camp.
JUNE		
C26,000	UNHCR presents reviewed RRP and appeal. 60 NGOs and INGOs attend.	OGB deploys HSP for contingency planning and training needs assessment for partners.
JULY		
c 30,000	SCF, World Vision, ACF, Muslim Aid, Islamic Relief, CARE and DRC are responding to refugee situation. Head of DFID visits Lebanon, accompanied by SCF and WV, and pledges £10m to refugee response. ECHO holds a partners' meeting in Beirut.	OGB does contingency planning with 4 partners.
AUGUST-SEPTEMBER		
c37,000 (August) **c75,000 (September)**	UNHCR warns Syrian refugees (to all countries) could exceed 700,000 by end of 2012. UNHCR in East Lebanon reports pressing need for non-potable water; Unicef and ACF start responding in WASH. UNHCR issues a revised appeal ($478 million) outlining the plans of 52	OGB carries out assessment and agrees to: ✓ present request for WASH NFIs to UNICEF and deploy HSPs for distribution ✓ follow up with UNWRA on advocacy issues (visas, health and school access) ✓ support assessment/technical support for a WASH project

	humanitarian organisations. UNHCR High Commissioner visits Lebanon.	✓ present proposal to OCHA, ECHO & DFID for cash grants for rent, water and NFIs ✓ use CATFUND for a quick start up. OIT does assessment in Bekaa with partner.
OCTOBER		
c106,000	Caritas and WV distribute NFIs.	OGB holds SPHERE training for partners. ON carries out assessment.
NOVEMBER		
133,000	UNHCR scales up WASH programming in Bekaa with ACF.	ON funds NAJDEH and PARD to respond in Palestinian camps.
DECEMBER		
156,000		OGB Deputy Humanitarian Director visits Lebanon. Oxfam raises response to a Category 2.

3.2.2 Quality Standard Two: Coverage

	Met	Almost Met	Half Met	Partially Met	Not Met
Coverage uses 10% of affected population as a planned figure with clear justification for final count	6/6				

Requirements to fully meet the standard:

- 10% of affected population reached, or

- Justification for not reaching 10% of affected population with agreement from region or HD.

- Beneficiary numbers increase according to need.

In May 2012, when Oxfam made its first grant to AMEL to assist c4,000 refugees in various locations across Lebanon, there were approximately 26,000 refugees in the country.[21] At this early stage, therefore, Oxfam's coverage was significantly higher than its standard of 10%. However, as explained in the previous section, no further beneficiaries were reached in 2012, even though the number of refugees rose to over 150,000 by the end of the year.

From January 2013 the number of refugees grew significantly month on month, as illustrated in Figure 3. By the end of March there were over 400,000 refugees, and by the middle of the year there were over 600,000, the majority of whom were located in the North and East of the country.[22] Over the same period OGB's programme (targeting the North and East) and ON's programme (targeting the South) grew steadily in terms of beneficiary coverage. Together the Oxfam affiliates reached 22,651 beneficiaries by end of March and 78,144 by the end of June, surpassing their joint target of 75,000, which was set in anticipation of a total refugee caseload of 750,000 at this stage.[23]

At the time of this evaluation, there are an estimated 800,000 refugees in Lebanon, of whom Oxfam has assisted 118,000, i.e. over 10%. While its coverage has dropped slightly in proportion to the overall caseload, Oxfam is still very close to its target of 120,000 by the end of September 2013. Also, as two new programmes are about to start, it is anticipated that over the next three months Oxfam will have reached a further 30–40,000 people, thereby meeting or surpassing its target of 150,000 beneficiaries (or at least 10% of the total number of refugees, whichever is the greater) by December 2013.

It is therefore considered that Oxfam fully met the standard for beneficiary coverage (6/6).

Figure 2. Trends in refugee caseload and beneficiaries of Oxfam's programme, Jan–Oct 2013
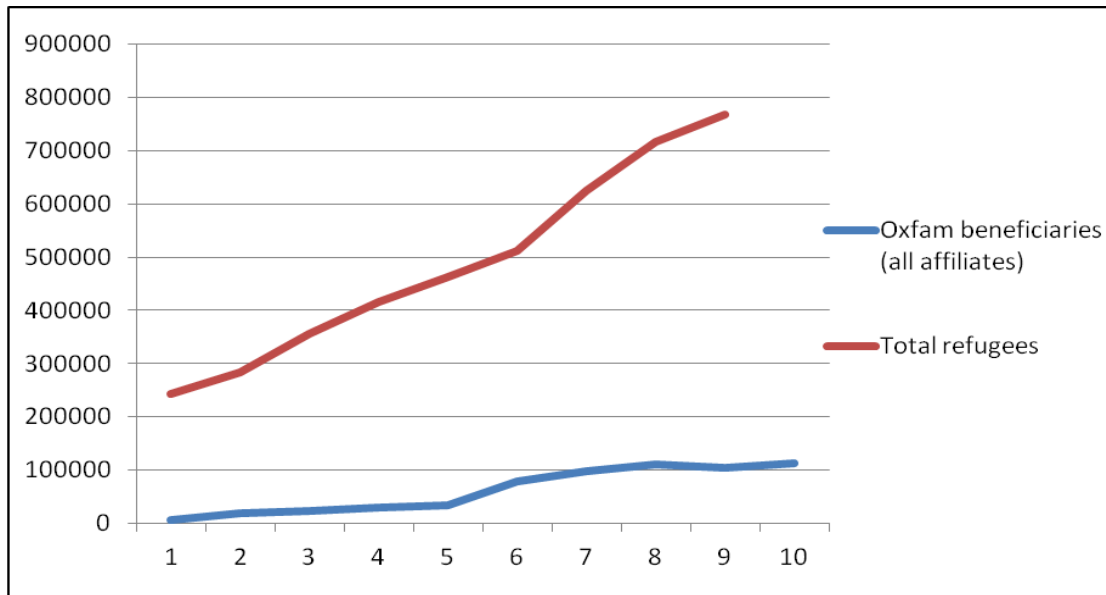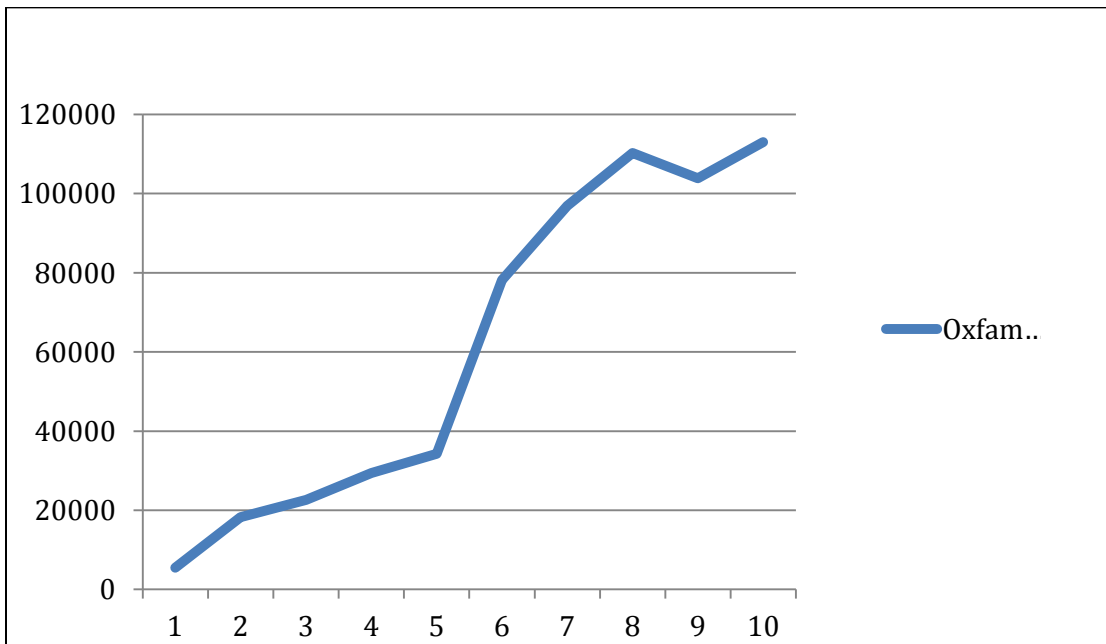

Figure 3. Number of actual beneficiaries vs. targets by month, Jan–Oct 2013

3.2.3 Quality Standard Three: Technical aspects of programme measured against Sphere standards

	Met	Almost Met	Half Met	Partially Met	Not Met
Technical aspects of programme measured against Sphere standards		4/6			

Requirements to fully meet the standard:

• Sphere standards proposed and put in place with adjusted indicators for context.

• Training in standards carried out for staff and partners with direct reference to Sphere.

• Indicators use standards, and monitoring against standards takes place regularly.

• Standards evaluated.

As illustrated in Table 2, all sectors of Oxfam's response in Lebanon were designed to reflect Sphere standards. In some cases the Sphere standards are referenced explicitly, but in most instances they are embedded in key documents and basic approaches. Some key Sphere indicators were used, while others were adapted for contextual reasons. For example:

Strategy

The WASH Strategy and logical framework[24] refers to Sphere standards; the Protection Strategy[25] does not, but its objectives reflect Sphere Principles for Protection. Shelter and EFSL strategies do not exist *per se*, but assessment findings[26] and recommendations reflect Sphere standards and guidelines for use of cash transfers for rent and food.

MEAL

Post-distribution monitoring tools for WASH and shelter[27] reflect a range of relevant Sphere standards and indicators, but do not specifically mention them.

Oxfam has made several adaptations of Sphere indicators for contextual reasons. For example, in October 2013 the inter-agency WASH working group (of which Oxfam is a member) decided to raise the water quantity indicator from 15 litres to 35 litres of water per person per day to reflect the refugees' water-related habits prior to displacement. Also, Oxfam and its partners no longer hold routine hygiene promotion sessions after receiving comments from refugees that they were an affront to their dignity.

Donor proposals and reports

All major donor proposals and reports (Unicef, CIDA, DFID, ECHO) reflect Sphere standards inasmuch as they communicate Oxfam's strategy, but only the WASH narrative consistently mentions Sphere.

One key area of weakness was noted with respect to Sphere standards. Although Oxfam invested in Sphere training for 23 organisations, including three Oxfam partners in October 2012, the workshop has not been repeated with Oxfam's new partners in Lebanon. Partner staff interviewed for this evaluation knew water quantity indicators, but were not aware of the wider relevance of Sphere. Only one partner interviewed possessed a Sphere manual and none knew that it was available online. It is recommended

that Oxfam dedicates time to explaining the origins and principles of Sphere to its current partners, as well as the technical aspects.

Given that the majority of the requirements were met, it is considered that Oxfam almost met the standard (4/6).

Table 2. Use of Sphere standards

Sphere standard	Evidence of use
Cash and vouchers transfers standard 1: Access to available goods and services. Cash and vouchers are considered as ways to address basic needs and to protect and re-establish livelihoods.	*'Although some households said that they can cope by engaging in daily labour (2–3 days in a week), the priority is to then to pay for rent. If rent is being covered, respondents said, they would be able to find means to cover the food gaps…Local markets and shops are fully functioning and accessible to the refugees…Recommended response: cash assistance to cover shelter and basic needs…$300 will help each family pay rent ($100–$250 in the camps and gatherings), cover some of their food ($31/person/month), drinking water ($10/month/family), fuel and health until alternative, more sustainable solutions can be found.'* Source: Palmaera, L., et al. Emergency Food Security Assessments and Livelihoods Assessment: Refugee Displacement to Lebanon due to Syrian Crisis (February 2013).
Food security – food transfers standard 1: General nutrition requirements. Ensure the nutritional needs of the disaster-affected population, including those most at risk, are met.	*'The calorific requirement of 2,100 calories per day was used to calculate the value of the food voucher.'* Source: Interview Justin Okwir, EFSL Coordinator.
WASH – Hygiene promotion standard 2: Identification and use of hygiene items. The disaster-affected population has access to and is involved in identifying and promoting the use of hygiene items to ensure personal hygiene, health, dignity and well-being. **Excreta disposal standard 2: Appropriate and adequate toilet facilities.** People have adequate, appropriate and acceptable toilet facilities, sufficiently close to their dwellings, to allow rapid, safe and secure access at all times, day and night. **Water supply standard 1: Access and water quantity.** All people have safe and equitable access to a sufficient quantity of water for drinking, cooking and personal and domestic hygiene. Public water points are sufficiently close to households to enable use of the minimum water requirement. **Water supply standard 3: Water facilities.** People have adequate facilities to collect, store and use sufficient quantities of water for drinking, cooking and personal hygiene, and to ensure that drinking water remains safe until it is consumed.	*'Refugees having no or limited access to basic hygiene items, such as hand-washing soap, laundry soap, water storage and collection containers, toothpaste, shampoo, etc. They also said that they do not have means to buy such items in future.'* Source: Haider, Z. A. et al. WASH Rapid Assessment Report(s) (May 2013). *'Monitoring data shows that more than 85% beneficiaries from NAVTSS and PAWL locations expressed their satisfaction with quality and quantity of items provided in the hygiene kit…Some of them mentioned that the kit should contain floor cleaning materials.'* Source: PDM report winter kit, Lebanon, 10 April 2013. *'54% (63) reported having a toilet, while the rest 46% (53 respondents) did not have any…50% (53) reported feeling safe during toilet use…in the focus group discussion with women and men from Eaat camp, women reported that they are afraid to use the latrine at night because of the distance from some tents, the unhygienic conditions, absence of lights, and fear from insects and rats.'* Source: Final baseline report wash project Bekaa Baalbek September 2013. *'Baseline data shows that 60% of respondents have above 105 litres of water available per day for drinking and domestic use for the family, while 24% have access to between 81 and 105 litres of water per day, while 13% have access to between 41 and 80 litres, while 6 respondents have access to less than 40 litres per day. 51% indicated that they had no special containers to store drinking water, while the remaining 48% stated that they have…The safety of the water and sanitation will be assessed by public health staff including municipal staff where possible, and this will be undertaken with SPHERE as the point of reference.'* Source: WASH Strategy March 2013.

Sphere standard	Evidence of use
Shelter **Non-food items standard 1. Clothing and bedding.** The disaster-affected population has sufficient clothing, blankets and bedding to ensure their personal comfort, dignity, health and well-being.	*'In general, the majority of beneficiaries in all the locations expressed satisfaction with the quality of mattress, blanket and pillow provided…Although the majority of beneficiaries were able to purchase appropriate clothing for men, women and children using the voucher, the monitoring data shows…quite a lot of beneficiaries who said that they were not able to purchase what they needed for their family members. They were also not happy with the quantity and quality of the clothes which were distributed "in kind".'* Source: PDM report winter kit, Lebanon, 10 April 2013.
Protection Principles 1, 2, 4 **Those involved in humanitarian response take steps to avoid or minimise any adverse effects of their intervention, in particular the risk of exposing people to increased danger or abuse of their rights.** **Ensure people's access to impartial assistance – in proportion to need and without discrimination.** **The affected population is helped to claim their rights through information, documentation and assistance in seeking remedies. People are supported appropriately in recovering from the physical, psychological and social effects of violence and other abuses.**	*'Objectives:* - *Implementation of conflict-sensitive approaches, including: standard amount of cash for all beneficiaries of cash transfers; selection of online cash transfers; implementation of other safe programming standards (refer to checklist for safe programming in WASH and EFSL).* - *Advocate for more efficient refugee registration and information dissemination about procedures and refugee entitlements.* - *Mobilise existing or form new committees for dissemination of information about refugee registration, basic and specialist services.* - *Facilitate access to specialist service and protection for refugees who experience specific protection threats.'* Source: Protection strategy, Oxfam Syria Response: Lebanon.

3.2.4 Quality Standard Four: MEAL strategy and plan in place and being implemented using appropriate indicators

	Met	Almost Met	Half Met	Partially Met	Not Met
MEAL strategy and plan in place and being implemented using appropriate indicators			1.5/3		

Requirements to fully meet the standard:

• MEAL staff in post.

• Budget reflects MEAL activities.

• Evidence of use of OI Minimum MEAL standards.

• Indicators in logframes replicated in MEAL strategy and plan.

• Data collected, analysed and fed back to staff and partners.

• Evidence that data are used to adjust programme activities.

• Indicators reported against in donor reports at activities, outputs and outcomes levels.

• Review or learning days held with technical staff.

• OPAL has MEAL plan in place and is updated regularly.

• Final evaluation planned.

Oxfam GB has given a high priority to establishing and resourcing monitoring activities since its response started to scale up in the first quarter of 2013. Since March 2013 it has had a MEAL HSP based in Lebanon (covering the Lebanon, Jordan and Syria programmes) and, from July, a MEAL officer working solely on the Lebanon response.

MEAL in Lebanon conformed to most relevant OI Minimum Standards, as shown in Table 3. Key elements include:

• The development of a simple MEAL Plan based on the Lebanon WASH framework and Oxfam's generic FSVL indicator framework. Most of its indicators are specific, measurable and relevant, reflect Sphere standards (and indicators and guidelines) and incorporate aspects relevant to safe programming and accountability.

• A Real Time Evaluation[28] within the recommended time frame of programme start-up. A management response and plan was put in place within two weeks to address the identified areas for improvement (namely timeliness, information flow and internal coordination, gender and campaigns, and structure).[29]

• Delivery of a MEAL orientation workshop including PDM training and planning for partners.[30] [31]

• Use of the results of the original assessments as a baseline for the first distributions of NFIs and cash, and the development of WASH-specific baselines for the following stage.[32]

- The development of post-distribution monitoring tools (structured questionnaires) for each of the distributions (winterisation kits, cash for rent[33], food and hygiene vouchers, and hygiene kits) covering many relevant Sphere indicators, process indicators and issues of accountability. They were applied to a sample of beneficiaries using randomisation software for selection.[34] In the case of the cash distribution, PDMs were applied at two different times, to monitor receipt and usage.[35]

- The use of focus groups held separately with groups of men and women.

- Systematic sharing of monitoring results with donors, consisting of reporting against activity schedules and analysis of PDM and focus group results.

The MEAL system fell short of the OI Minimum Standards in the following aspects:

- Although the results of monitoring processes have been analysed and fed back to technical teams, discussions on the implications of the analysis between MEAL, technical and management staff have not taken place regularly. Consequently, opportunities have been missed to adjust programme activities AND to adapt monitoring to ensure maximum benefit to programme planning.

- Regular gendered and generational analysis of the programme's results does not occur.

- A learning event or mid-term review has not yet taken place.

- Systematic monitoring of external trends has not been integrated into the MEAL system. For example there does not appear to be a system to collect data on public health trends in the areas where refugees live, either from municipal authorities or other INGOs working there. This kind of information is important for planning (e.g. to respond quickly to outbreaks of diseases) and to gauge the relevance and impact of programme activities.

- Not all indicators are fully 'SMART'. Some time-sensitive activities, such as distributions of winterisation kits currently lack a timebound element; others are not achievable through Oxfam GB's activities, such as 'Women, men and children are feeling safe (wind, water, light, etc.) and expressing satisfaction with the privacy in shelter facilities'.

Beyond the OI Minimum Standards, to fulfil Oxfam GB's own expectations of good practice the Lebanon MEAL system would need to include a data collection plan that uses a wider variety of rapid and participatory tools to capture real-time data and is implemented by all Oxfam GB and partner staff who interact with beneficiaries, not just dedicated MEAL staff. For example, daily observations, transect walks and spot checks of installations would enable Oxfam to collect valuable data on hygiene practices, food preparation and consumption, quality of shelter materials, latrine usage and water availability.

Given these quite mixed results, a half-met rating (1.5/3) is given for Oxfam's achievements for this standard.

Table 3. Compliance with OI Minimum Standards for MEAL

Standard	Yes/No
Assessment and Start-up	
For slow onset emergencies this should take place one week after receiving the alarm from early warning systems or from other reliable sources on the situation.	N
The assessment must include: beneficiary consultation, unless security or access prevents this; rapid gender assessment of impact of emergency on men and women.	Y
Disaggregated data (sex and age being the most important) should be obtained as soon as possible (within the first month) – this data should be comparable between affiliates.	N
The assessment team should be gender balanced with clear terms of reference.	N
The results should be shared among Oxfam (all affiliates) and partners. These results will determine geographical working areas and needs priorities.	Y
An in-depth assessment should take place as soon as possible after the rapid assessment to provide more in-depth information and to verify disaggregated data (within the first month). For slow onset emergencies the in-depth assessment will be carried out only if the rapid assessment concludes that the situation deserves a response.	Y
The assessment team will consist of different actors depending on the context (Oxfam staff, partners, other INGOs, government representatives). It should be a joint affiliate assessment wherever there is more than one Oxfam present in-country.	N
Participation of representatives of all community groups is essential in order to understand their needs, views and contextually specific issues.	N
Results should be shared across Oxfam teams (through the Country Leadership Team) and with other actors (UN clusters, coordination forums).	Y
A Logframe or planning framework with SMART indicators should be agreed upon after the assessment – this is not a tool used by all affiliates and/or partners, but at least some basic indicators should be developed in order to monitor and evaluate.	Y
The assessment should also explore with the affected population how they wish to receive information (and what kind) and how they wish to provide feedback or submit complaints.	N
Baselines should be carried out if a) it is a category 1 or large category 2 response or b) the programme is likely to be of over six months duration or c) quantitative impact measurement is required or d) the budget is over $500,000.	Y
Expertise in sampling, quantitative data collection and analysis should be ensured before a baseline is attempted (this expertise can also be via a consultant although expense versus usefulness must be considered).	Y
Baselines should be carried out within the first two months of a response.	?
Both quantitative (using a calculated sample size) and qualitative data should be used and disaggregated by sex and age.	Y
The results should be shared among all in-country affiliates and partners in a format that is user-friendly to all.	?
Implementation	
The documentation of activities and number of beneficiaries for each activity is essential. A monitoring framework should be developed within the first month specifying when, how and by whom the data will be collected – the amount and frequency will be context specific. Monitoring information should be available for sharing between affiliates and partners, or consolidated if there is an OI MEAL Coordinator in post.	Y
Monitoring tools should be prepared and disseminated with training as required.	Y

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Monitoring should also capture changing situations in order to adjust the programme in a timely manner.	N
Information will also feed into other networks, such as the clusters, OCHA and other consortia taking in to account security and protection issues.	Y
Accountability mechanisms with the affected population should be established to promote transparency and community involvement. As a minimum a complaints/feedback (from affected population) system should be set up as well as a system for providing information on selection criteria and expected activities.	Y
A feedback system for partners to Oxfam should also be established.	Y
Training on accountability should be required for all programme staff and partners, where appropriate.	N
Regular community meetings (for example monthly) need to be held for information exchange and for community feedback on programming. The frequency will depend on access, security and, of course, the priorities of the affected community.	N
All rapid onset emergencies (category 1 and 2) should carry out an RTE at around six to eight weeks mark after the onset of the disaster. Large slow onset emergencies (category 1 and 2) should carry out an RTE at around ten to twelve weeks after the beginning of the response.	Y
The RTE TOR should be signed off by the Humanitarian Lead after review by the Country Leadership Team after a maximum consultation period (10 days).	Y
Team members should be considered from all or selected affiliates (depending on number in country) with active programming, although evaluator expertise and competence should take precedence over affiliate representation. (See RTE guidelines for selection of teams). The maximum number of team members should be four.	Y
The commissioning manager should be from the Humanitarian Lead agency.	Y
Unless security does not allow, there must be consultation with the affected population.	Y
A management plan written with names against activities, and a CLT mechanism to ensure that this happens, should be the outcome of the Day of Reflection.	Y
All RTE reports should be posted on Sumus within six weeks of completion and sign-off.	Y
At least once during the first year, the indicators should be reviewed and adjusted.	Planned
A learning event, such as a monitoring review or a review day, should be held to assess progress and to discuss changes. Community members should be included but this will depend on the context and issues to be discussed. If not included, community feedback should form part of the discussion in order to feed into planning. If this is conducted per affiliate, the results should be shared.	N
Final Evaluation	
If there are no donor requirements, then programmes under a year should carry out a self-evaluated after action review (either joint or per affiliate). This should be in the last two months of the programme.	Planned
If there are no donor requirements, then programmes over a year should carry out an outcome/impact evaluation (preferably as a joint exercise or per affiliate) that is more in-depth than the after-action review. In these longer-term programmes (especially if two years or over) a mid-term evaluation at the end of the first year should be followed by a final evaluation during the last two months before the programme ends in order to utilise the learning.	Planned
All Oxfam evaluation reports in full or edited form are expected to be posted on Sumus.	Planned
The opinions of the affected population and partners must be included in all reviews and evaluations, preferably using participatory methods for data collection.	Y

3.2.5 Quality Standard Five: Feedback/complaints system for affected population in place and functioning and documented evidence of information sharing, consultation and participation leading to a programme relevant to context and needs

	Met	Almost Met	Half Met	Partially Met	Not Met
Feedback/complaints system for affected population in place and functioning and documented evidence of information sharing, consultation and participation leading to a programme relevant to context and needs				1/3	

Requirements to fully meet the standard:

• Evidence of consultation with community on programme areas such as targeting, preferences for cash/food, siting of latrines and design, distribution, information channels, etc.

• Evidence of sufficient information provided to communities.

• Feedback shows that information received is sufficient.

• Evidence of complaints being addressed and reported on to complainant.

• Evidence of feedback incorporated into planning – changes made to programmes after consultation.

• Examples of good practice captured and shared.

• Feedback from communities around needs and concerns is positive.

• Evaluation reports state that programme is relevant to needs and context.

Following previous rapid and sector-specific assessments, Oxfam GB conducted an in-depth integrated assessment in multiple locations[36] in February 2013.[37] The methodology used promoted beneficiary and wider stakeholder consultation through focus group discussions with refugees (men and women) and members of host families, household surveys, and community mapping activities. The findings, like those of previous assessments, clearly indicated that refugees' priorities were shelter and food, with some limited WASH needs. In accordance with these results, Oxfam GB designed concept notes and proposals for a highly relevant programme focusing primarily on cash for rent, distribution of relief items for winterisation, improvements to WASH facilities and hygiene items.

Beneficiary participation in the implementation of some the above-mentioned activities was relatively low, due the individual nature of electronic cash-transfer programming and the dispersion of many refugees in urban areas. However, for WASH actions beneficiaries have been encouraged to participate in decisions on the location of latrines and tap stands/water distribution points.

Regular post-distribution monitoring surveys, plus focus groups and house-to-house visits have collected feedback, some of which have led to changes in the way Oxfam and partners have carried out similar activities in the future, as shown in Table 4.

Table 4. Sample of complaints received and actions taken

Complaint	Action taken
Over 20% of beneficiaries were unaware of the time and date of distribution of hygiene kits[38]	Date and timing of cash for rent distribution was clearly communicated via SMS and mobile phone.[39]
Hygiene kit should include floor cleaning fluid.	Contents modified to include floor cleaning fluid in subsequent distributions.
Clothing provided in kind was of poor quality.	No further distribution of clothing in kind planned.
Beneficiaries prefer to have one water tank per family, not one shared between two families.	During visits, staff and partners have explained budgetary constraints and the need for wide coverage.
80% of beneficiaries said cash-for-rent amount ($150) did not cover the house rent,[40] which the majority said was at least $250 per month.[41]	No change was made as the amount was set in agreement with the Cash Working Group members, to avoid inflating rents in programme areas.
Some households benefited from a cash-for-rent distribution twice due to some lack of clarity of who was in a one individual family.	The partner and Oxfam jointly discussed the issue with the beneficiaries and mutually discussed the importance of ensuring clarity in terms of family members ahead of the second round distribution. The refugees were then correctly registered and received correct second round payment accordingly.

Although Oxfam's performance in the above aspects of accountability has been good, three main areas of weakness are noted:

• In July 2013 MEAL staff set up a hotline for complaints to be made directly to Oxfam, but it does not appear to be fulfilling its purpose. To date only two complaints have been received via the hotline, despite distribution of leaflets explaining how and why to use it, and the complainant has not been reported back to. Staff suggested this may be due to the fact that the line is not toll-free, or because the refugees are afraid about reprisals if they make a formal complaint. Oxfam has recently submitted a request to the Ministry for Transportation for a toll-free number, but is still awaiting a response. Complementary mechanisms should also be explored, to avoid reliance on one channel for complaints.

• Oxfam GB's partners are not prioritising issues of accountability, possibly because they are not aware of either the Oxfam Code of Conduct or HAP standards. Although partner staff confirmed during this evaluation that complaints are given spontaneously during continuous interaction with beneficiaries, the fact that they do not systematically report on these means that it is impossible to monitor the effectiveness of this 'informal' system, which could otherwise be a good complement to the hotline and other channels for complaints. This issue was highlighted in the RTE[42] but does not appear to have been fully addressed yet.

• Although new proposals have been approved and Oxfam GB and partner staff are in the process of planning new WASH projects, the refugees residing in target areas for implementation are not yet aware of these plans. While this may be an issue of timing (this evaluation taking place during a

planning period), it is important that beneficiaries be provided with information about the aid they have a right to and are due to receive, so that they can participate in the planning and targeting processes and make informed choices about their expenditure and place of shelter.

In accordance with the mixed results described above, it is considered that Oxfam GB partially met the standard for accountability (1/3).

3.2.6 Quality Standard Six: Partner relationships defined, capacity assessed and partners fully engaged in all stages of programme cycle

	Met	Almost Met	Half Met	Partially Met	Not Met
Partner relationships defined, capacity assessed and partners fully engaged in all stages of programme cycle		2/3			

Requirements to fully meet the standard:

• Partner capacity assessment carried out.

• Capacity building plan in place (if needed).

• Documented evidence of Oxfam support to partner on capacity building (training or staff secondment for example).

• Partner agreement clearly states expectations and outcomes for both parties.

• Partner actively involved in planning, monitoring and evaluation.

• Partner feedback is positive.

Oxfam's response in Lebanon has been almost entirely partner-implemented. As shown in Table 5, the Oxfam affiliates have worked with 13 partners, of which 7 were previous or current partners and 6 were new partners.

As mentioned in Section 3.2.9 of this report, Oxfam GB implemented various preparedness measures with partner organisations and other CSOs in the early stages of the crisis, including a humanitarian capacity assessment. Seeing the need for increasing the humanitarian knowledge and skills of the organisations assessed, Oxfam GB held a Sphere workshop and training course in rapid needs assessment tools in December 2012,[43] which were attended by 73 and 61 participants respectively from 18 organisations, of which two were Oxfam partners.

When Oxfam GB began to assess[44] and select partners for distributing winterisation NFIs, staff realised that while these local organisations offered access to refugees and contextual knowledge, they were likely to require support in logistics, financial management and technical expertise, particularly for WASH activities.[45] These needs were then discussed with partners and written into contracts that were signed prior at the start of the joint intervention. For example, in the contract with JAK, the following roles and responsibilities were agreed:

JAK will…	Oxfam will….
Be responsible for the registration of the beneficiaries, consultation with landowner, Local Municipalities, water establishment authority, construction and installing of water and sanitation facilities, hygiene promotion activities by involving community based volunteers and distribution of water containers, latrine cleaning kits, waste bins and environmental kits with support of Oxfam WASH team.	Transfer funding in a timely manner. Ensure project documents, including agreements with project funders, are shared with and understood by the partner. Support the partner organisation in ensuring that the lists of beneficiaries are verified and validated.
Help in organising volunteers from the group of beneficiaries that will be facilitated by the Oxfam Protection Team.	Provide capacity building on technical and professional skills (Cash transfer, WASH, Gender and Protection), finance and administration, organisational development, meeting donor reporting requirements, etc.
Be actively involved in the monitoring of the project, including data collection and analysis.	Support the partner organisation in ensuring that all construction of WASH facilities are up to agreed standards and design. Lists of beneficiaries are verified and validated.
Submit periodic information that will be feeding into the reports, such as bi-weekly and end of project report and WASH activities report within one month of end of project date.	Procure some items, such as IEC materials, hygiene kits, soap, water containers and other health and hygiene kit items, and give them to JAK to distribute.

As shown in Table 5, since February 2013 (when the first contracts were signed) specific training sessions have been held by Oxfam for partners on the following topics:

• MEAL

• Gender in Emergencies[46]

• WASH[47]

• Project Cycle Management[48]

• Protection referrals

• EFSL.

Also, on-the-job capacity building has been provided in logistics, finance and WASH through support by Oxfam staff during procurement and distributions, financial reporting, and for WASH projects.

For the most part, partners are satisfied with the support given by Oxfam, particularly in the field of logistics[49] and regard the relationship as largely positive. However, during this evaluation one partner voiced some frustrations about the lack of opportunities for partners to participate in strategy and programme design, and some instances of insensitive media work. Oxfam's Programme Manager was already aware of these issues and is working to address them.

Two areas of weakness were noted during this evaluation:

1. It appears that the planned training in humanitarian principles has not taken place, which explains some of the gaps described in Sections 3.3.3 and 3.2.5 on Sphere standards and accountability.

2. Although some partners have contributed to data collection for the PDMs,[50] it appears that there is limited discussion between partner staff and Oxfam staff about how partners conduct monitoring, how to interpret the results, and how to make changes to improve implementation. Furthermore, documentation of partners' monitoring results appears to be lacking. A more systematic and participatory approach in this area would ensure that progress is jointly tracked and analysed, and lead to timely adaptations to the intervention.

Overall, it is considered that Oxfam almost met the standard for partnership (2/3).

Table 5. Capacity building of Oxfam's partners for the Lebanon Response to the Syrian Refugee Crisis.

NAME	AREA	FUNDING	Logistics	Finance	Gender	PCM	WASH	MEAL	Assess-	SPHERE	EFSL	Protection[51]
1. **AMEL Association**	Country-wide								✓	✓		✓
2. **NAVTSS** (National Association for Vocational Training and Social Services)	Bekaa host community gatherings / El Buss Palestinian Camp (Tyre)	$154,100							✓	✓	✓	✓
3. **PAWL** (Palestinian Arab Women's League)	Burj El Shemali Palestinian Camp (Tyre) / Beddawi Palestinian Camp (Tripoli)	$168,870										✓
4. **PARD** (Popular Aid for Relief and Development)	Palestinian Camp	€80,000	✓		✓							
5. **NAJDEH Association**	Palestinian Camp	€80,000	✓		✓					✓		✓
6. **Children of Al Jaleel**	Wavel Camp / Taalabaya and Bar Elias gatherings	No Data										
7. **ABAAD Lebanon Resource Centre for Gender Equality**	No Data	No Data										
8. **SAR** (Syrian Aid and Rescue)	**No Data**	**No Data**										✓
9. **JAK** (Jadawel Al Kheir)	Tripoli and Bekaa	$207,000 / $ 143,775 / $ 312,740		✓		✓	✓	✓			✓	✓
10. **SAWA**	Tripoli and Bekaa	$176,900 / $ 296,740		✓		✓	✓	✓			✓	
11. **Muslim Scouts**	Karroun	$168,000									✓	
12. **Naba'a**	*No data*	*No data*										
13. **Utopia**	*No data*	*No data*									✓	

Current/previous partner

New partner

3.2.7 Quality Standard Seven: Programme is considered a safe programme: action taken to avoid harm and programme considered conflict sensitive

	Met	Almost Met	Half Met	Partially Met	Not Met
Programme is considered a safe programme: action taken to avoid harm and programme considered conflict sensitive	3/3				

Requirements to fully meet the standard:

- Assessments look at safe access to services and other protection issues.

- Documented evidence that programmes respond to identified protection issues.

- Protection issues identified by other actors acted upon.

- Protection expertise called in when programme requires it.

- Technical teams do safe programming.

- Advocacy strategy includes protection and action is taken.

Protection issues were highlighted from the early stages of Oxfam's response to the refugee crisis in Lebanon. Multiple internal briefings[52] in December 2012 included reports of: sexual violence in Syria and the specific risks facing women and girls in Lebanon (and Jordan); persecution and human rights abuses of Syrians suspected of being involved in the fighting, and the restrictions placed on Palestinian Syrians seeking refuge in Lebanon.[53] As a result, Oxfam deployed a Protection HSP and ensured her presence in all of the integrated assessments that took place in January and February 2013. Oxfam also undertook a risk analysis. The main assessment tool used in this process included a series of questions related to protection and safe access to services, as illustrated in the following excerpt.

Protection questions

1. When did you arrive from Syria? What part of Syria do you come from? (Ask about their travel from Syria to Lebanon).
2. How were you received at the border? (To start further questions about registration; what were you given at the border, etc).
3. How many people (families) share this room/house? Are they (the families) related to each other?
4. What kind of assistance have they received and when?
5. Are you receiving information about registration in Lebanon? And about assistance in Lebanon?
6. Do you feel safe in the village? Are there any challenges in going about your daily routine in the village? In going in and out of the village?
7. Give a description of your relationship with other refugees? What is it like with non-refugee communities? If you have safety and security concerns, where do you go for help?

Based on the results of this assessment and other external sources,[54] Oxfam developed a protection strategy[55] focusing on safe programming, information dissemination, and referrals to other protection actors and specialist service providers. As mentioned in Section 3.2.3, these activities reflect Sphere Protection Principles and guidance notes. A protection component was subsequently integrated into the programme from March 2013 onwards, and was implemented through activities such as:

• Developing a safe-programming checklist for WASH technical staff.

• Using the waiting time at cash and voucher distributions to inform beneficiaries of registration procedures and legal and medical services available for refugees.

• Holding training for staff and partner staff on definitions, strategies and approaches to protection, and the roles and responsibilities of protection actors.

• Supporting partner staff and Oxfam staff in direct contact with refugees to identify cases of high vulnerable people for referral to organisations such as UNHCR and MSF.[56]

• Holding information sessions for beneficiaries on GBV, medical and legal services provided by other actors, and inviting service-providers to present at the sessions.

Protection was also included in the advocacy strategy, as described in Section 3.2.10, although achievements were limited.

The protection context is systematically monitored by Oxfam, as illustrated by the following excerpt:

Sitrep 13, 11 February 2013

▪ *Despite some refugees benefiting from medical referrals to public and private hospitals facilitated by a local NGO in Tripoli, many sick refugees, especially those with major illness, fail to get proper treatment as the hospitals cover only free consultations and refugees have to shoulder cost for medicines.*

▪ *The humanitarian community acknowledges potential tension between refugees and host communities. No confrontations had been reported but some refugees we have spoken to confirm hearing remarks from the host blaming the arrival of refugees for the increase in rental costs.*

▪ *With no regular livelihoods, Syrian refugees expressed concern about the high cost of visa extension ($600) in Lebanon. The only way to avoid paying this is to return to Syria and come back to Lebanon -- and they concede that this is a dangerous option that they might consider.*

With respect to safe programming, Oxfam has taken care to reduce risks associated with its planned programme activities through decisions such as:

- Widening the target group of beneficiaries of Oxfam's programme to include Palestinian refugees from Syria, Syrians, and to a lesser extent the host communities.

- Using an electronic transfer method for cash for rent transfers, to avoid friction and theft at distribution sites.

- Negotiation with owners of land where informal camps are located, to find mutually acceptable ways of installing WASH facilities for refugees.

- Improving WASH networks in host communities, so that benefits are shared by refugees and Lebanese long-term residents.

- Consultation with municipal authorities, and the provision of resources, where appropriate, for improvements to basic services for refugees and host communities.

- Developing a livelihoods strategy that will include benefits for host communities.

In the coming months Oxfam plans to expand its work beyond information dissemination and referrals. It is currently exploring ways to set up protection committees in shelters, camps and gatherings to help refugees identify and manage local protection issues, such as disputes over resources and requests for information about rights and/or service providers. It is also considering strategies such as providing transport for groups of new arrivals to register as refugees. The feasibility of these actions depends on funding, which is currently being sought.

Based on these results, it is considered that Oxfam met the standard for safe programming (3/3).

3.2.8. Quality Standard 8: Programme (including advocacy) addresses gender equity and specific concerns and needs of women, girls, men and boys

	Met	Almost Met	Half Met	Partially Met	Not Met
Programme (including advocacy) addresses gender equity and specific concerns and needs of women, girls, men and boys [57]				1/3	

Requirements to fully meet the standard:

- Gender analysis carried out, well documented and strategy written.

- Evidence that this is used to guide design and delivery.

- Sex disaggregated data collected, reviewed and used to make appropriate adjustments.

- Programme and advocacy planning addresses gendered needs, roles and power relations.

- Evidence that programme contributes to gender equity.

- Gender minimum standards used and adhered to.

- Programme partners with capacity and support to mainstream gender throughout the programme cycle.

In August 2012, Oxfam's partner, ABAAD, published a report on gender-based violence against Syrian women. Oxfam GB's first sitreps,[58] external communiqués[59] and first strategy[60] cite the findings of this report, highlighting the prevalence of Gender Based Violence (GBV) as an instrument of war in Syria, and early marriage and survival sex as increasingly common coping strategies in Lebanon, as revealed in the report. They also detail the day-to-day problems faced by refugee women in Lebanon, such as lack of privacy in crowded accommodation, extremely limited access to income, and insufficient information on issues of registration and access to services.

This knowledge of the complex gender and protection impacts of the war informed the design of Oxfam GB's integrated assessment, which was undertaken in February 2013 after unrestricted funding was made available to start up the response. The assessment was conducted by a team of three women in order to facilitate discussion with women refugees who, for cultural reasons, would not be expected to talk openly with male staff, and the methodology included separate focus group discussions and interviews with men and women.

The results of the assessment confirmed the previous analysis, as well as providing a greater understanding of men's concerns around livelihoods and personal safety. Consequently, the programme was designed to address needs expressed by both men and women – cash for rent, shelter improvement, WASH, information provision and a protection referral system. It also included proposed protection activities to address the concerns highlighted in the ABAAD report mentioned above.

Once implementation began, however, it seems that Oxfam did not continue to analyse the situation or its own effectiveness through a gender lens. The results of post-distribution monitoring surveys were not

analysed by gender, and it is not possible to determine from their results or any other monitoring activity what contribution, if any, this aid (and that provided by others) has made to preventing the dangerous coping strategies mentioned above. There were two key gaps in Oxfam's response with respect to gender equity and which partly explain why Oxfam's attention to this issue appears to have diminished as the programme expanded. Firstly, the programme lacked a gender strategy, so there was no 'guiding force' or sense of a shared goal for gender; secondly, the team lacked an in-country gender adviser dedicated to the humanitarian response for the whole of 2013.

In light of these mixed results, it is considered that Oxfam only partially met the standard for gender equity (1/3).

3.2.9 Quality Standard Nine: Programme (including advocacy) addresses specific concerns and needs of vulnerable groups[61]

	Met	Almost Met	Half Met	Partially Met	Not Met
Programme (including advocacy) addresses gender equity and specific concerns and needs of vulnerable groups[62]		2/3			

Requirements to fully meet the standard:

• Differentiated vulnerability analysis/assessment data identify especially vulnerable groups, and used to inform design and appropriate actions to meet their specific needs (link also to standard 7 and safe programming).

• Evidence of balanced representation of vulnerable people in managing assistance provided and ongoing feedback/ consultation.

• Evidence that intervention design and delivery ensures vulnerable groups have full access to assistance and protection services.

From the earliest stages of its response, Oxfam demonstrated a strong understanding of vulnerability within the general context of the refugee crisis. Palestinian-Syrians (Palestinian refugees from Syria) were correctly identified[63] as a highly vulnerable group, not only for reasons of historic discrimination but also because they required monthly visas to enter/remain in Lebanon, and were obliged to renew these monthly at significant cost ($35 per person) in order to avoid deportation. Thus, Oxfam's first actions (ON with PARD and NAJDEH; OGB with NATVTSS and OIT with Children of Al Jaleel and Nab'a) focused on providing winterisation materials to vulnerable Palestinian-Syrians arriving at the Palestinian camps and gatherings in Lebanon where its partners had long-term work.

However, as the number of refugees increased and Oxfam GB became aware of many other new arrivals in conditions of vulnerability, it supported its partners' initiatives to include the wider refugee population in humanitarian assistance[64] and sought new partners to work in other areas[65] where it has now built up large, multi-sectoral programmes. Within these there have been multiple projects targeting various

vulnerable groups, such as the cash-for-rent project from May to August 2013, which targeted refugees who had exhausted their own resources after several months in Lebanon. The programme's protection component also aims to address the needs of the most vulnerable through referrals to specialist organisations, such as medical service providers, support services for victims of gender-based violence, and child-focused agencies, although Oxfam has not yet established a satisfactory system to monitor the outcomes of referrals and to follow-up where necessary.

In its current phase, Oxfam GB is planning a distribution of clothing vouchers for 7,200 children, as they have been identified within the populations where it is working as highly vulnerable to the impending cold winter.[66] It has not, however, undertaken any analysis or adopted any measures to ensure that other vulnerable groups, such as elderly people or single-headed households, have access to the assistance/protection they require. This phase also presents new challenges, such as the relatively higher vulnerability in terms of public health issues of refugees in informal camps as compared with those in collective shelters and host communities, and the different levels of vulnerability between informal camps for a variety of reasons, such as exposure to the weather, attitude of the landlord, distance from water sources, etc. Oxfam WASH staff are aware of these issues and have included 'level of vulnerability' as one of the criteria determining the schedule of WASH activities,[67] but they have not yet included any strategies to involve representative of the most vulnerable groups in the design and management of assistance, nor how to ensure accountability to them.

It is therefore considered that Oxfam has almost met the standard for addressing the needs and concerns of vulnerable groups in its programme to date (2/3). It is also noted, however, that complex challenges lie ahead that will require Oxfam to enhance its analysis, design and accountability to ensure that the rights of the most vulnerable refugees are protected.

3.2.10 Quality Standard Ten: Evidence that preparedness measures were in place and effectively actioned

	Met	Almost Met	Half Met	Partially Met	Not Met
Evidence that preparedness measures were in place and effectively actioned			1.5/3		

Requirements to fully meet the standard:

- Contingency plan in place, updated regularly and used.

- Evidence of monitoring of chronic situation and triggers in place for action.

- Evidence of links to existing preparedness programmes where relevant.

- Evidence of surge capacity.

- Evidence of success of preparedness programmes on current response.

As mentioned in Section 3.2.1, an historic partnership with a previous partner, AMEL, played an important role in Oxfam GB's early reaction to the first signs of the crisis. OGB had funded AMEL to provide assistance during the 2006 conflict, and had recently invited AMEL to a training session on Gender and Humanitarian Policy. As a result of this relationship, in July 2012 AMEL approached Oxfam for funding to respond to the needs of Syrian refugees and received an emergency grant from Oxfam's Catastrophe Fund.

This request effectively served as an early warning of the deteriorating situation. Oxfam GB led the OI affiliates in-country to revise their contingency planning process with four key partner organisations (including AMEL) that could respond if needs increased.[68] This served as a good preparedness measure in terms of engaging partners in discussion about a potential humanitarian response but, as mentioned in Section 3.2.1, the contingency plan itself underestimated the extent of the crisis and did not identify potential triggers for action.

Around the same time, Oxfam GB carried out a capacity needs assessment of existing partners, resulting in a plan to provide training in Sphere standards, WASH programming and methodologies for rapid needs assessment. The training, which was delivered by November 2012, made a useful contribution to developing/refreshing the humanitarian skills of the partners with which Oxfam was engaged at this stage in the evolution of the situation.

However, as seen in Section 3.2.1, other factors, both internal (insufficient capacity to resource multiple emergencies, and little humanitarian experience in-country) and external (a difficult funding environment) prevented Oxfam from transitioning effectively from preparedness and early action into a response of appropriate speed and scale.

In view of the combination of good practices and gaps in the preparedness measures taken, it is considered that Oxfam GB half-met the standard (1.5/3).

3.2.11 Quality Standard Eleven: Programme has an advocacy/campaigns strategy and has incorporated advocacy into programme plans based on evidence from the field.

	Met	Almost Met	Half Met	Partially Met	Not Met
Programme has an advocacy/campaigns strategy and has incorporated advocacy into programme plans based on evidence from the field			1.5/3		

Requirements to fully meet the standard:

- Advocacy strategy in place and evidence that it was written with input from programmes and field strategy endorsed by Oxfam International Rights in Crisis (RiC) Campaign Management Team with SMART objectives for change.

- Campaigns/policy and media staff in place.

- Budget sufficient for strategy implementation.

- MEAL plan in place including evaluations.

- Proactive and reactive media work including press conferences, blogs and journalist trips.

- Evidence of lobbying at national and/or global level.

- Evidence of outcomes from advocacy messages – not necessarily Oxfam alone.

- **Global** – involvement of global RiC Campaign network including teleconference, lobbying in capitals, sharing of product.

Oxfam's first advocacy/media strategy for the Syrian crisis was agreed by the affiliates in January 2013,[69] in time to influence opinion ahead of the Kuwait Donor Conference. Focusing on the winter conditions that refugees were facing, and the dire lack of funds for the UN-coordinated response situation, Oxfam proactively sought and achieved major media coverage in the last days of January. ITV,[70] BBC World Service, Sky News,[71] CNN,[72] the *Sun*, *Scotsman*, the *Financial Times*,[73] Al Jazeera, and others picked up Oxfam's release and backed the launch of Oxfam's Appeal.

As was to be expected, donor pledges post-conference were slow to materialise. Oxfam revised its advocacy/media strategy in February 2013, this time calling on donors to provide the funding they promised,[74] and on the armed actors to end the fighting, allow delivery of humanitarian aid and seek a peaceful, negotiated solution. Good media coverage was achieved using the banner of 'One Million Refugees', with the *Guardian*, AFP[75] and the BBC and others taking up the story. The launch of the

Oxfam and DEC Appeals followed closely after this, with a plea to the British public to provide urgently needed funds to cover the enormous gaps in bilateral and multilateral funding.

The appeals generated urgently needed funding to scale up Oxfam's programme, but this success came at a cost. Partner staff complained that Oxfam's media team had been insensitive to the protection concerns and dignity of refugees while they were collecting photos and stories in the field. Oxfam accepted the criticism and agreed to limit visits to the programme sites by non-programme staff.

Around the same time, tension grew between advocacy and field staff because, according to the latter, the strategy did not give enough attention to problems of aid quality being encountered in the field. These tensions were partially overcome in the following months as a new 12-month strategy was drawn up, incorporating programme quality within its five objectives. The new strategy sought to achieve the following:

- Sufficient, transparent donor funding to meet humanitarian needs.

- Quality aid for refugees and host communities that promotes gender equality and mitigates protection concerns.

- Access to assistance for those affected inside Syria.

- International recognition for non-militarised Syrian voices and pressure for ceasefires.

- Arms control.

The new strategy and campaign plan included a power analysis, SMART objectives and a detailed activity plan for research, advocacy, media, policy products and public communications with lobbying peaks around key external events, such as the international donor conference, the RRP6 process, and UN General Assembly events as well as popular mobilisation moments including with Middle East partners, such as Ceasefire for Eid. Parts of the campaign were closely aligned with the Rights in Crisis Campaign, for example on the arms trade and adequate funding for humanitarian response.

However, to implement the strategy required a team of 10–15 dedicated posts, located in Oxford, Lebanon (and Syria and Jordan), New York and Geneva. Funding challenges meant that not all posts were filled in the first half of 2013, leading to a frustration and stress among those trying to move the campaign forwards.

Oxfam carried out an internal review[76] of the campaign in October 2013, which highlighted the following successes:

- The objectives were in the right areas and were right to include both humanitarian relief and political solutions.

- The campaign contributed to raising awareness around the human impact of the crisis, mostly via effective media and public campaigns work with European and American audiences, and with a significant amount of media coverage in Arabic markets too.

- A number of donors have significantly increased their funding for the Syria crisis, and there is evidence that Oxfam's advocacy and campaigning were helpful in supporting the efforts of those within governments (the UK and Germany in particular) that were pushing for this.

- A clear agreement was made by the British government not to transfer weapons to the rebels, which was one of Oxfam's targets for the arms control objective.

The review also identified the following weaknesses:

- The objectives were too ambitious for the level of resourcing available. Furthermore, funding proposals did not consider resourcing needs for the campaign, which widened the 'resource gap' between ambitions and capacity.

- Global campaign objectives were prioritised over national (Lebanon-specific) ones, thus widening the gap between the programme and the campaigns.

- Despite good intentions, Oxfam's campaign team did not establish clear indicators to monitor progress.

- Little was attempted in the first six months of 2013 on protection, despite this being a major need. More recently, closer collaboration with the protection team has identified priorities and targets, which will be the foundation for work to come.

- Gender aspects of the crisis, livelihoods concerns and the needs of Palestinians were considered by many internal and external parties to be 'missing' from Oxfam's advocacy and campaigns work.

Given the mixed performance described above, is considered that Oxfam half-met the standard for advocacy.

3.2.12 Quality Standard 12: Evidence of appropriate staff capacity to ensure quality programming

	Met	Almost Met	Half Met	Partially Met	Not Met
Evidence of appropriate staff capacity to ensure quality programming		2/3			

Requirements to fully meet the standard:

- Job profiles match competency frameworks.

- Interviews conducted using frameworks.

- Inductions systematically carried out.

- Majority of end of deployment appraisals are positive.

- Development programme staff have scale-up in their job descriptions.

- Staff stay for duration of contract.

For the purposes of assessment staff capacity was defined in terms of the proportion of required posts filled; the competences of the post-holders, and the proven capacity of the staff in place to respond appropriately to the demands made. Given the prolonged nature of Oxfam's scale-up the response was divided into phases: May–July 2012; August–December 2012; January–March 2013, and April 2013 onwards.

During the period May–July 2012 Oxfam appears to have had acceptable capacity in relation to the evolving humanitarian situation. A contingency planning exercise was undertaken, a needs assessment

of partners was completed, and an initial grant was made to a partner that was willing and able to respond.[77] During this phase Oxfam's limited, but sufficient staff in-country and in-region demonstrated competences to respond to early-warning signs and the capacity to move to a state of increased preparedness.

From August to December 2012 the capacity of the staff in-country and in-region was weaker in relation to the new demands of the situation. No additional staff were recruited or deployed to manage the response, with the exception of a part-time consultant in a monitoring role who had no humanitarian programming experience. During this phase the refugee caseload was monitored, but the evolving international humanitarian response was not. Oxfam did not join any of the new humanitarian working groups nor attend key donor meetings in-country. As a result, Oxfam missed important opportunities to obtain funding through the first Regional Response Plan and was not able to set up a timely, quality programme even though other agencies were moving ahead.

By January 2013 staff capacity was boosted and prioritised as a result of the Category 2 declaration. In the following three months around a dozen HSPs and secondees were deployed to launch a scale-up[78] – an indication of the organisation's continuing global surge capacity. The additional staff were able to initiate the response, support partners with logistics and integrate into coordination fora, thereby responding to the demands of the situation. However, without sufficient national staff, Oxfam lacked local knowledge and had to rely almost entirely on partners for information and access to the affected population.[79]

By April 2013 Oxfam had deployed an HR manager for Lebanon, Jordan and Syria, based in the Beirut office. National recruitment processes were launched and interviews held but, contrary to expectations, it proved difficult to attract staff with sufficient humanitarian knowledge. Nevertheless, the key posts for Oxfam's response were still held by HSPs and redeployed staff, and Oxfam was able to implement large cash and voucher distributions that had finally been made possibly by funding raised through Oxfam and the DEC appeals.[80]

From mid-2013 national recruitment gradually became more successful, albeit with a flexible approach to recruiting staff with capacity for development rather than continuing to seek a full range of proven competences. As the team and programme grew, so did the need for robust security guidelines, which were developed in a timely manner.

At the time of this evaluation Oxfam has began to put in place performance management and other procedures, register staff on Gold, normalise hours and ensure that inductions and debriefings routinely take place. HR planning is now working to a three-year plan to match Oxfam's programming expectations, and it seems that Oxfam is now on track to deliver its programme through a diverse team of international and national staff.[81]

Based on the above, it is considered that Oxfam almost met the standard for staff capacity (2/3)

APPENDIX 1: SOURCES OF DATA

Internal Reports

1. Situation reports 1–47.

2. Syria discussion paper on what is going on in the country, December 2012, Kitka Goyol.

3. Perspectives on scaling up humanitarian work on the Syria crisis from the Syria scoping workshop and field visit, Beirut, 3–8 December ,2012, M. El Sanousi, G. Dodkhudoeva, N. Timmins.

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15. Palestinian Refugees from Syria, Assessment Report and Concept Note, 26 January 2013, Loreto Palmaera et al.

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19. Notes from discussion of OGB's engagement in Syria, 13 December 2012.

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26. Lebanon Action Plan, Oxfam Lebanon, March 2013.

27. Oxfam MEAL Framework for WASH Programme in Lebanon, March 2013.

28. Complaints/Feedback collection form for during distribution (undated).

29. Oxfam EFSVL Indicator Framework (undated).

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31. Post Distribution Monitoring: Data Analysis for DEC-funded Cash for Rent Project in Tripoli and Qalamoun, Oxfam Lebanon's MEAL Team, October 2013.

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34. Logical Framework, Lebanon Jasmine Response – Cash Transfer Project.

Partnership

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Reports from External Sources

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116. Monitoring, Evaluation, Accountability and Learning (MEAL) Officer.

117. Humanitarian Programme Manager.

118. Syria Crisis Response Manager.

119. Former Humanitarian Programme Coordinator for Syria Response.

120. Regional Humanitarian Coordinator, MECIS.

121. HR Manager.

122. HSP - Monitoring, Evaluation, Accountability & Learning

123. Global PMEAL Adviser.

124. Former Regional Humanitarian Coordinator for MECIS.

125. Deputy Humanitarian Director, Strategic Lead for Syria Crisis Response.

Appendix 2: Global Humanitarian Indicator for Slow-onset disasters: Degree to which humanitarian responses meet recognised quality standards for humanitarian programming

No.	Quality standard	Fully met (score 6)	Almost met (score 4)	Half-met (score 3)	Partially met (score 2)	Not met (score 0)
1	Rapid appraisal of facts within 24 hours of pre-defined trigger, plans in place and scale-up or start-up commenced within three days					
2	Coverage uses 10% of affected population as a planned figure with clear justification for final count					
3	Technical aspects of programme measured against Sphere standards `					
No.	Quality standard	Fully met (score 3)	Almost met (score 2)	Half-met (score 1.5)	Partially met (score 1)	Not met (score 0)
4	MEAL strategy and plan in place and being implemented using appropriate indicators					
5	Feedback/complaints system for affected population in place and functioning and documented evidence of information sharing, consultation and participation leading to a programme relevant to context and needs					
6	Partner relationships defined, capacity assessed and partners fully engaged in all stages of programme cycle					
7	Programme is considered a safe programme: action taken to avoid harm and programme considered conflict sensitive					
8	Programme (including advocacy) addresses gender equity and specific concerns and needs of women, girls, men and boys					
9	Programme (including advocacy) addresses specific concerns and needs of vulnerable groups					
10	Evidence that preparedness measures were in place and effectively actioned					
11	Programme has an advocacy/campaigns strategy and has incorporated advocacy into programme plans based on evidence from the field					
12	Evidence of appropriate staff capacity to ensure quality programming					
13	Country programme has an integrated approach including reducing and managing risk though existing longer-term development programmes and building resilience for the future					

NOTES

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2 An estimated 50,000 Palestinian refugees from Syria have entered Lebanon as a consequence of the war in Syria.

3 UNWRA, not UNHCR, has responsibility for Palestinian Refugees from Syria in Lebanon.

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27 Post Distribution Monitoring Survey Winterisation Kit; Post Distribution Monitoring Survey Cash for Rent.

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61 Elderly, disabled, HIV positive, single women, female-headed households are examples.

62 Elderly, disabled, HIV positive, single women, female-headed households are examples.

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80 Interview Alicia Oughton, November 2013.

81 Interview Alicia Oughton, November 2013.

OXFAM

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Oxfam Hong Kong (www.oxfam.org.hk)
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