

**EVALUATION
REPORT**

**JOINT UNICEF-DFID
EVALUATION OF UNICEF
PREPAREDNESS
AND EARLY RESPONSE TO
THE DARFUR EMERGENCY**

**EVALUATION OFFICE
MARCH 2005**

For every child
Health, Education, Equality, Protection
ADVANCE HUMANITY



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Joint UNICEF-DFID Evaluation of UNICEF Preparedness and Early Response to the Darfur Emergency

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UNICEF

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The Joint UNICEF-DFID Evaluation of UNICEF Preparedness and Early Response to the Darfur Emergency was commissioned by the Evaluation Office in collaboration with the Office of Emergency Operations (EMOPS) at UNICEF New York. An independent team of consultants was assembled, which was led by François Grünewald from Groupe URD, assisted by Anna Gades (URD), Eimar Barr (UNICEF New York) and Anissa Toscano (DFID, London). Simon Lawry-White of the Evaluation Office at UNICEF New York and Krishna Belbase of UNICEF/MENA in Jordan provided guidance and oversight of the evaluation process.

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PREFACE

UNICEF has been involved in addressing the humanitarian crisis in Sudan for the last 40 years. The current conflict in Darfur began in early 2003, and by mid-2004 had escalated to a full-scale crisis. The conflict was characterized by massive population displacement within Sudan, with the number of internally displaced persons estimated at above one million, and a large movement of refugees into neighbouring Chad. Initial estimates of casualties varied between 30-50 thousand people, including a large proportion of children and women. Women and children were the prime victims of sexual violence including a large number of reported cases of rapes.

UNICEF's current programme of cooperation with the Government of Sudan from 2002-2006 has emergency preparedness planning as a key cross-cutting strategy. The strategy aims to ensure that all programmes maintain plans for a rapid response to an emerging crisis and maintain the capacity to deliver essential supplies and services. In the Darfur crisis, in addition to providing support under its Country Programme of Cooperation, UNICEF was a collaborator in developing the UN Contingency and Emergency Response Plan and was designated coordination roles in water and sanitation, education, child protection and nutrition.

This evaluation tracks UNICEF response to the Darfur crisis during three phases of the 2003 conflict from February 2003 to August 2004. The evaluation examined the relevance and timeliness of preparedness planning and early intervention and the effectiveness and efficiency of UNICEF's management and operational support provided during all three phases. It also looked at issues related to coordination, partnerships and UNICEF's role in support of child rights in response to the crisis.

The evaluation team was led by François Grünewald from Groupe URD, assisted by Anna Gades (URD), Eimar Barr (UNICEF New York) and Anissa Toscano (DFID, London). Simon Lawry-White from the UNICEF Evaluation Office at New York and Krishna Belbase from the UNICEF Regional Office Amman, Jordan provided the overall guidance and oversight to the evaluation.

The evaluation findings highlight the strengths of UNICEF response while indicating an urgent need to enhance aspects of its capacity to deliver and coordinate emergency operations, particularly in crises of a protracted nature. The evaluation also identified areas for improvement in operational and management aspects as well as in sectoral and inter-agency coordination.

I am most grateful to the UNICEF Country Office staff in Khartoum and to Sudanese partners who, despite so many difficulties, welcomed the evaluation team and responded to their many questions. The UNICEF Country Representative Joanna Van Gerpen responded to queries and requests throughout the evaluation process. The UNICEF Special Representative for Darfur, Keith McKenzie, was extremely supportive to the team. Suda Eltom provided the team with administrative and technical support and facilitated the field visits to Darfur.

UNICEF is grateful for the generous support of the United Kingdom's DFID, a key stakeholder and participant in the evaluation process. I thank all UNICEF staff and partners who made time available to receive team members in Amman, New York and Geneva and served as key informants to the evaluation.

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LIST OF ACRONYMS

ACF	Action Contre la Faim
AMP	Annual Management Plan
AMR	Annual Management Review
ASAP	Appeal for the Sudan Assistance Programme
AU	African Union
CAP	Consolidated Appeal Process
CARE	Cooperative for Assistance and Relief Everywhere
CCC	Core Commitments for Children in Emergencies
CDC	Centre for Disease Control, Atlanta
CFCI	Child Friendly Community Initiative
CERF	Central Emergency Reserve fund
CHAD	Conflict and Humanitarian Affairs Department (DFID)
CO	Country Office (UNICEF)
CRBP	Child Rights Based Programming
CSFSC	Customer Service and Field Support Centre
DAC	Development Aid Committee of OCED
DDR	Disarmament, Demobilisation and Reintegration
DFID	Department for International Development
DRH	Département des Ressources Humaines
ECHO	European Community Humanitarian Office
EM-DH	Enfants du Monde-Droits de l'Homme
EMOPS	Emergency Operations
EPF	Emergency Programme Fund
EPI	Expanded Programme for Immunisation
EPR	Emergency Preparedness and Response
ERT	Emergency Response Team
EU	European Union
FAO	The Food and Agriculture Organisation
FO	Field Office
FMoH	Federal Ministry of Health
FT	Fixed Term
FGM	Female Genital Mutilation
GBV	Gender Based Violence
GIS	Geographic Information System
GoS	Government of Sudan
HAC	Humanitarian Aid Commission
HC/OCHA	Humanitarian Coordinator/ Office of the Coordinator of Humanitarian Aid
HQ	Headquarters (UNICEF)
HRU	Human Resource Unit
ICRC	International Committee of the Red Cross
IDP	Internally Displaced Person
ITD	Information and Telecommunication Department
ITN	Insecticide Treated bed Nets
JEM	Justice and Equality Movement
LLTN	Long Lasting Treated Nets
MENARO	Middle East and North Africa Regional Office
MERLIN	Medical Emergency Relief International
MCH	Mother and Child Health

MDM	Médecins du Monde
MOSS	Minimum Operating Security Standards
MPO	Master Plan of Operation
MRE	Mine Risk Education
MSF	Médecins Sans Frontière
MTR	Mid Term Review
NFI	Non Food Items
NGO	Non-Governmental Organisation
NWC	National Water Corporation
NY	New York
OCHA	Office for Coordination of Humanitarian Affairs
OLS	Operation Lifeline Sudan
OPSCEN	Operations Centre
OR	Other Resources
PBR	Programme and Budget Review
PER	Performance Evaluation Report
PFO	Programme Funding Office (UNICEF)
PME	Planning, Monitoring & Evaluation
PPA	Project Plan of Action
RC	Resident Coordinator
RO	Regional Office (UNICEF)
RPPB	Rights, Protection and Peace Building
RPO	Regional Programme Officer
RR	Regular Resources
R&R	Rest and Recreation
SC-UK	Save the Children-UK
SC-US	Save the Children-US
SD	Supply Division of UNICEF (based in Copenhagen)
SEA	Sexual Abuses and Exploitation
SFC	Supplementary Feeding Centre
SGBV	Sexual and Gender Based Violence
SITAN	Situation Analysis
SLA/SLM	Sudan Liberation Army
SPLA	Sudan People's Liberation Movement
TFC	Therapeutic Feeding Centre
TFT	Temporary Fixed Term
TOR	Terms of Reference
UNCT	United Nations Country Team
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	The United Nations Children's Fund
UNIMIX	UNICEF Supplementary Feeding Food
UNJLC	United Nations Joint Logistics Centre
UN RC/HC	United Nations Resident Coordinator/Humanitarian Coordinator
UNSG	United Nations Secretary-General
VAM	Vulnerability Analysis and Mapping Unit
WES	Water and Environmental Sanitation
WFP	World Food Programme

MAP OF SUDAN - removed to reduce file size

EXECUTIVE SUMMARY

1. EVALUATION OBJECTIVES, SCOPE AND METHODOLOGY

The objectives of this joint UNICEF/DFID evaluation were to:

- Examine the relevance and timeliness of preparedness planning, early intervention and the 90-Day plan, as well as the effectiveness and efficiency of management and operational support;
- Extract lessons to help UNICEF enhance its preparedness and its ability to respond in a meaningful and effective way to emergencies.

Over a month-long period, the Evaluation Team visited Sudan, including Khartoum and the three Darfur states, UNICEF Regional Office (RO) in Amman, UNICEF New York headquarters (NYHQ), and conducted telephone interviews with additional key UNICEF and DFID staff and external stakeholders. A desk study, including a review of financial and supply records, was carried out before and during the mission. Two feedback workshops took place during the evaluation: one in Khartoum (3-4/11/04) and one in Geneva (19/11/04). The findings and recommendations of this evaluation will be integrated into a wider learning process within UNICEF and their application will strengthen DFID/UNICEF working relations.

2. DARFUR: THE CRISIS NOBODY WANTED

Although in early 2003, initial signals indicated that a crisis was developing in Darfur, the international community was distracted by other international events, including the Naivasha Peace process in Sudan and the Kassala Floods. As the crisis gradually escalated in Darfur and the number of IDPs and refugees continued to rise throughout 2003 and early 2004, affected populations began to assemble in camps. In mid 2004, OCHA estimated that approximately 2 million people had been affected by the crisis, including IDPs, refugees in Chad and resident populations across a vast area. The challenges facing the international community were, and continue to be, overwhelming.

3. THE UNICEF RESPONSE

Prior to the crisis, UNICEF was involved in Darfur through its regular programmes. The UNICEF response to the Darfur emergency comprised four phases.

Early phase: from March/April 2003 to beginning October 2003

UNICEF was among the very few agencies present in Darfur, and responded early with small-scale interventions. Government restrictions, limited resources and insufficient implementing partners have impacted UNICEF's capacity to respond.

Intermediate phase: from November 2003 to April 2004

Security conditions worsened and access to a widely dispersed population was severely restricted. At this point, only limited emergency funding was available for Darfur. The UNICEF Country Office (CO) provided some relief where access and resources permitted. Awareness started to grow at NYHQ and Regional Office (RO) of the developing emergency situation.

Development of a fully-fledged response: May to September 2004

UNICEF activated the corporate trigger on 20 May 2004¹, declaring Darfur an organisation-wide emergency. UNICEF's response had expanded significantly by June/July 2004.

¹ The Corporate trigger is a mechanism aimed at mobilizing the whole institution to meet the challenges of a large scale emergency. It implies that responding to this crisis takes precedent over most of the other priorities.

Stabilisation phase: October 2004 to present day

Now that operations are relatively well resourced, both in human and financial terms, UNICEF has begun to consolidate its activities. The recent nomination of a UNICEF Special Representative for Darfur, with authority in both Sudan and Chad, has also had a positive impact on the Darfur operation. The challenge facing humanitarian agencies now is to maintain momentum, reinforce coordination activities, improve the quality of the response and lay down a long-term strategic plan.

4. FINDINGS

UNICEF was one of the few agencies present in Darfur during the early stages of the crisis. The early warning signals raised by UNICEF field staff triggered a small-scale response in 2003. Over 2003 and during the first part of 2004, the early UNICEF response, along with that of other UN agencies, NGOs and institutional donors, was by and large inadequate. This was due to a combination of factors, some internal (both institutional and country-specific) and some external. Following the activation of the corporate trigger, all emergency UNICEF systems prioritised support to the Darfur response.

Response per sector

In all sectors, the timeframe presented in the Core Commitments for Children in Emergencies (CCC) was irrelevant, as it sets the planning process for a rapid-onset emergency whereas the situation in Darfur is best described as a slow onset, protracted crisis. Yet in the long run, most CCC sectoral targets were met.

Child Protection. UNICEF child protection interventions focused on three components: analysis and monitoring of the situation, creation of a protective environment for children and provision of assistance for the establishment of Children's Spaces. Collaboration between protection and education sectors was very positive. UNICEF should be commended for having been the first UN agency to address SGBV in the emergency and for assuming the lead role in this difficult and sensitive sector. Problems were encountered in the reporting and treatment of GBV cases.

Education. Education is one of the 'success stories' of the Darfur operations. Over 240,000 children were taken care of in schools erected with support from UNICEF. The sector benefited from strong in-house expertise and from the recently published "Guidelines for education in emergency" (May 2004). Climatic conditions caused damage to temporary classroom materials, prompting a widespread need for repairs.

Water and Environmental Sanitation (WES). Water and Sanitation was a critical sector in the response. UNICEF's WES Section was not adequately prepared and had only a limited number of partners. Inappropriate technical choices in the early stages of the emergency significantly reduced the impact of UNICEF's response. The NYHQ WES section has been weakened over the years and it is no longer able to play a significant supportive role for field operations. WES teams stepped up interventions during implementation of the 90-Day Plan. At the end of the 90-Day plan, UNICEF and partners were providing drinkable water to 832,000 people and had constructed 28,000 latrines. These achievements, in conjunction with a large-scale hygiene campaign, contributed significantly to reducing the risk of epidemics. At the time of the evaluation, the status of services, i.e. number of functioning latrines/hand pumps, etc. was not known. Quality problems and maintenance issues indicated that a sustained effort in this sector is still required.

Health and Nutrition. The vaccination campaign implemented in Darfur and Eastern Chad was relatively successful, with 2,023,000 children vaccinated. However, the window of opportunity created by this vaccination campaign was not utilised for other programmes due to security restrictions. UNICEF was one of the main suppliers of drugs and medical equipment to over 100 health facilities run by NGOs and the Ministry of Health (MoH).

UNICEF supported a wide range of programmes for the management of malnutrition through various means, including the provision of specialised products and support to micro-nutrient deficiency. The significant decrease in malnutrition rates can be attributed to a combination of factors, including the

distribution of WFP food aid, high resilience levels amongst IDPs, WES interventions, improved control of most diseases and UNICEF/NGO nutrition interventions.

Management of the Emergency Programme

UNICEF staff has approached the response with dedication and commitment but their ability to respond was hampered by ineffective preparedness measures. The period from November 2003 until June 2004 was particularly difficult and frustrating. The Naivasha Peace process, constraints imposed by the Government of Sudan (GoS), insecurity and UN security regulations and lack of funds hindered UNICEF's and other agencies' capacity to deploy staff in the field and to access affected populations. Additionally, UNICEF operations were severely constrained by the lack of implementing partners in Darfur. Whilst UNICEF's efforts have visibly been gathering momentum, monitoring, reporting and overall sector-based analysis could have been improved. As a result of this situation, questions were raised regarding UNICEF's capacity to report adequately.

Despite the existing chain of responsibility, UNICEF Regional Office (RO), NYHQ Emergency Operations (EMOPS) and Programme Funding Office (PFO) were unable to play a strong advisory role and counsel the CO when necessary. Furthermore, offers of strategic advisory support were often not taken up by the CO.

Field offices struggled to obtain necessary operational equipment. Some offices have only recently become fully operationally equipped.

Resource mobilisation

Financial resources were slow in arriving, despite the early mobilisation of the Emergency Programme Fund (EPF) and, subsequently, the Central Emergency Reserve Fund (CERF). Prior to the declaration of an organisation-wide emergency, identification and strategic deployment of human resources was sluggish and insufficient personnel has proved to be one of the most significant constraints in the UNICEF response in Darfur. However, throughout June-August 2004 staffing levels greatly increased and this has already had a positive impact on UNICEF's coordination role, monitoring capacities and overall credibility amongst partners.

Coordination

UNICEF participated fully in United Nations Country Team (UNCT) meetings and assessments throughout the crisis. However, relations between UNICEF and other agencies (Office of the UN Humanitarian Coordinator (RC/HC) and OCHA) became strained. UNICEF undertook the responsibility of coordinating several sectors - child protection, education, water and sanitation, as well as certain aspects of health and nutrition - yet did not have sufficient technical expertise to ensure effective coordination until July-September 2004. As the number of NGOs deployed in the region rose, so did UNICEF's coordination role become increasingly crucial.

Cross-border issues

Chad and Sudan Country Offices did not develop a joint operational strategy until the nomination of the UNICEF Special Representative for Darfur. Reintegrating the Darfur programme into the country programme remains a challenge for the future.

Communication and Advocacy

At end 2003 and in February 2004, UNICEF issued strong statements with regards to the growing violence affecting children and women in Darfur. Later, the CO adopted a communications policy with a fundraising and visibility perspective, as opposed to advocacy. Opportunities to disseminate UNICEF advocacy and programme activities via Arabic-speaking media were not pursued, despite the strategic

importance of circulating UNICEF messages in the region and the impact this could have had on both advocacy and fundraising.

DFID-UNICEF relations

Criticisms voiced by DFID at HQ and country level were coupled with targeted support (financial, HR, in-kind) to assist UNICEF in improving its response. The procurement process suffered significant delays as a result of inappropriate technical choices and incorrect specifications issued by the CO. Both partners should examine the added-value of DFID procuring on UNICEF's behalf.

5. CONCLUSIONS

The conclusive judgments on the UNICEF response to the Darfur crisis, with a special focus on the 90-Day Plan, have been summarised according to the OECD/DAC evaluative criteria.

Relevance. The sectors of intervention (child protection, education, WES, health and nutrition) were extremely relevant to the Darfur crisis, while the operational strategies and timeframe were in many instances less so. In 2003 and early 2004, Sudan was confronted with a series of emergencies which placed the CO under extreme pressure. This hampered CO's ability to appreciate the nature or magnitude of the crisis, which in turn weighed heavily on the shift from a development approach to a fully-fledged emergency response.

Effectiveness. The very early response in 2003 with initial provision of supplies from the contingency stockpile was effective, even though limited. Activities carried out over the period from November 2003 to May 2004 were far less so. Until the corporate trigger was activated, UNICEF recruitment processes could not support the emergency response. UNICEF was heavily reliant on external surge capacity, a risk for an institution with both operational and normative roles. Additionally, certain technical choices significantly limited programme effectiveness.

Efficiency. In the absence of operational partners, the use of private contractors (in June 2004) in drilling and latrine construction to meet increased targets proved cost-effective, although quality issues later became apparent. The June 2004 participatory field workshops significantly raised the implementation rate. Standby arrangements with certain institutional donors (for example, DFID) and NGOs are very efficient mechanisms, although there is a risk that UNICEF's corporate image may suffer. Attempting to mainstream emergency relief into development programmes at the expense of the emergency response capacity should be avoided.

Impact. After months of difficulties, the activities of UNICEF and its partners finally started to have an impact in most sectors of intervention during the 2004 rainy season. Achievements include better access to water, improved nutritional status, higher enrolment rate in schools, etc. However, relatively weak monitoring systems, limited UNICEF's capacity to measure progress and assess impact. Continuing violence against women and children seems to indicate that the initial UNICEF advocacy has, like many other similar efforts, been largely ignored.

Coordination and coherence. UNICEF's initial performance in coordination does point to a global weakness in UNICEF emergency coordination capacity (see Appendix 7). The lack of leadership on protection issues in the UN system made the articulation of child protection activities with the rest of the protection sector more complicated. Internal coordination between the different stakeholders within the UNICEF structure has not always been optimal. Chad and Sudan coordination is still at its early stage. The recent nomination of a UNICEF Special Representative for Darfur and Eastern Chad and the establishment of a dedicated team should ease the burden on the CO.

Sustainability

Whether sustainability is prioritised in Darfur operations is likely to depend on how situation evolves. There are three likely scenarios: firstly, the situation continues to deteriorate with increasing demand for

emergency relief; secondly, the status quo is maintained and interventions will, broadly speaking, focus on care and maintenance; or thirdly, the situation stabilises creating ad-hoc requirements for rehabilitation. Expansion of the programmes to as yet inaccessible areas, support to non-IDP affected populations and quality control represent key challenges. The relatively high level of assistance provided to IDPs will make it more difficult for them to return to their villages, underlining the importance of routinely providing support to host communities. Certain issues, such as the importance of a response with a longer-term outlook, of ensuring a degree of sustainability and of taking the fate of the resident populations into account, did not receive sufficient attention during the early phases of the operation. Planning an exit strategy, programme stabilisation and a post-emergency strategy are nevertheless recommended good practice.

In conclusion

The difficulties experienced by UNICEF in its management of the Darfur crisis have raised some questions about the agency's capacity to deliver and coordinate emergency operations. The quality of the relationship between DFID and UNICEF has suffered to a certain extent, despite clear improvement in UNICEF's performance from June 2004 onwards. However, this evaluation exercise proves that both parties are committed to restoring confidence levels.

6. RECOMMENDATIONS

The following table summarises the main recommendations of the evaluation.

Table 1: Main recommendations

GENERAL RECOMMENDATIONS FOR UNICEF	
Recommendations to enhance UNICEF Emergency Response Capacity	<ol style="list-style-type: none"> 1. CCCs should be revised, especially the timeframe, which is not adapted to slow onset crises and protracted conflicts 2. UNICEF should continue to improve its early warning and preparedness system by strengthening OPSCEN and EMOPS Geneva, creating an ERT, boosting its surge capacity and developing standard operational procedures. 3. UNICEF should strengthen RO and EMOPS roles in their guidance role to CO. 4. The creation of a dedicated emergency team at CO level should be compulsory procedure in times of emergency. 5. UNICEF should continue to develop and promote strong advocacy tools regarding children in war and SGBV. 6. WES NYHQ emergency staffing capacity should be increased urgently. WES NYHQ should ensure the WES Emergency Preparedness and Response Plan of Action 2004-2005 targets are financed and met. 7. The question of whether UNICEF should become operational in circumstances where there is a lack of partners should be explored further.

Operational recommendations for the management of Emergency Programme	<p>8. Greater attention should be paid to systems aimed at monitoring the crisis situation and how operations are running, as they provide essential information for programme management.</p> <p>9. The importance of sector and inter-agency coordination should be acknowledged with an appropriate level of resource allocation.</p>
RECOMMENDATIONS FOR THE CURRENT DARFUR OPERATION	
General recommendations	<p>10. CO should further explore means of gathering information on inaccessible areas. CO should continue to ensure that all major planning exercises include Zonal Offices as well as partners.</p> <p>11. Focus on quality should be supported by an overall improvement of monitoring and reporting systems.</p> <p>12. A follow-up multidisciplinary evaluation exercise to assess progress should be included in 2005 Action Plan.</p>
Cross-border issues	<p>13. The CO should continue to regularly update contingency planning on a cross-border basis. Significant energy has still to be invested in the Chad/Sudan coordination.</p> <p>14. CO should ensure that joint planning meetings between technical sectors are held regularly for information exchange and identification of cross-sector synergies.</p>
SECTOR-BASED RECOMMENDATIONS	
Child protection	<p>15. Child Protection should be integrated into the overall protection coordination system.</p> <p>16. CO and Protection Section should ensure that protection concerns are integrated into preparedness planning and assessments.</p> <p>17. Emergency coordinator and Protection Section should ensure that protection is integrated into existing sector intervention plans.</p> <p>18. CO and Protection Section should engage in dialogue with AU troops on child protection, SGBV and HIV/AIDS, in order to reduce the risk of improper behaviour (as per evaluations in Guinea, Sierra Leone, Cambodia, etc.)</p>
Education	<p>19. ZO and Education Section should define a set of criteria for the location of temporary classrooms in order to relieve or avoid raising tensions between IDP and host communities.</p> <p>20. CO and Education Section should be more involved in seeking a practical solution to the teachers' salary issue.</p>
Water and sanitation	<p>21. Schools should be provided with adequate health and WES support</p> <p>22. The CO WES and Supply Sections should monitor the quality of hand pump supplies.</p> <p>23. CO WES should examine requirements for maintenance and repair of existing water and sanitation systems, including, where relevant, the social organisation that would be responsible for undertaking these activities.</p>

Health	<p>24. Information on the options for the design of a regularly updated primary health kit should be disseminated to NGOs and other partners.</p> <p>25. Health Section should a) develop a strategy for monitoring health economics in order to reduce the risk of system abuse, for example, IDPs having to pay for drugs and medical care, and b) strengthen its capacity to advise the government and the affected population when the situation has become sufficiently stable to return to a cost-recovery system in healthcare.</p>
Nutrition	<p>26. UNICEF's position in the nutrition sector has to be strengthened at all levels, including HQ and RO.</p> <p>27. HQ should press for systematic UNICEF involvement in inter-agency missions related to nutrition. A senior in-house nutritionist should be assigned to these missions in order to retain a leading role.</p>
RECOMMENDATIONS FOR THE UNICEF/DFID PARTNERSHIP	
	<p>28. Diversified and coordinated mechanisms to ensure a good dialogue with DFID should be established, with the PFO retaining its prominent role.</p>

RESUME EXECUTIF

1. OBJECTIFS, PORTÉE ET MÉTHODOLOGIE DE L'ÉVALUATION

Les objectifs de cette évaluation commune UNICEF/DFID étaient les suivants :

- examiner la pertinence et l'effectivité dans le temps du degré de préparation aux urgences, de l'intervention précoce et du Plan de 90 jours, ainsi que l'efficacité et l'efficience du soutien apporté à la gestion et aux opérations ;
- en tirer des enseignements qui aideront l'UNICEF à améliorer son état de préparation et sa capacité à réagir aux urgences d'une manière probante et efficace.

En une période d'un mois, l'équipe d'évaluation a visité le Soudan — et en particulier Khartoum et les trois États du Darfour — le bureau régional de l'UNICEF à Amman, le Siège de l'UNICEF à New York, et s'est livrée à des entretiens téléphoniques avec d'autres membres clés du personnel de l'UNICEF et du DFID ainsi qu'avec des protagonistes extérieurs. Une étude bibliographique, dont un examen de la documentation financière et des dossiers d'approvisionnement, a été effectuée avant et pendant la mission. Deux ateliers de restitution ont eu lieu au cours de l'évaluation: un à Khartoum (les 3 et 4 novembre 2004), et l'autre à Genève (le 19 novembre 2004). Les conclusions et recommandations de cette évaluation seront intégrées dans un processus d'apprentissage plus large au sein de l'UNICEF, et leur application renforcera les relations de travail entre le DFID et l'UNICEF.

2. LE DARFOUR : LA CRISE DONT PERSONNE NE VOULAIT

Bien qu'au début de 2003 certains signes avant-coureurs aient annoncé le développement d'une crise au Darfour, l'attention de la communauté internationale était attirée par d'autres événements internationaux, et notamment le processus de paix Naivasha au Soudan, ainsi que par les inondations de Kassala. Au fur et à mesure de l'escalade de la crise au Darfour et de l'augmentation continue du nombre de personnes déplacées et de réfugiés pendant toute l'année 2003 et au début de 2004, les populations touchées ont commencé à être rassemblées dans des camps. À l'été 2004, le BCAH a estimé qu'environ 2 millions de personnes avaient été touchées par la crise : personnes déplacées, réfugiés au Tchad et populations locales frappées sur un vaste rayon. Les difficultés auxquelles la communauté internationale a dû et doit encore faire face continuent à être écrasantes.

3. LA RÉACTION DE L'UNICEF

Avant la crise, l'UNICEF était engagé au Darfour avec ses programmes classiques. La réaction de l'UNICEF à l'urgence du Darfour s'est opérée en quatre phases :

Phase précoce : de mars/avril 2003 au début d'octobre 2003

L'UNICEF comptait parmi les quelques organismes présents au Darfour, et a réagi tôt, par des interventions à petite échelle. Les restrictions imposées par le gouvernement, les ressources disponibles limitées et le manque de partenaires opérationnels sur le terrain ont eu un impact négatif sur la capacité de réaction de l'UNICEF.

Phase intermédiaire : de novembre 2003 au début du printemps 2004

Les conditions de sécurité ont empiré, et l'accès à une population très dispersée a été sévèrement restreint. À ce stade, seul un financement d'urgence limité était disponible pour le Darfour. Le bureau national de l'UNICEF a dispensé quelques secours lorsque les conditions d'accessibilité et les ressources disponibles le permettaient. Le Siège et le Bureau régional ont commencé à prendre conscience de l'urgence qui se développait.

Élaboration d'une réaction à part entière : de mai à septembre 2004

L'UNICEF a activé son mécanisme interne de mobilisation d'urgence le plus élevé le 20 mai 2004² en déclarant le Darfour urgence prioritaire pour l'institution tout entière. La réaction de l'UNICEF avait pris une ampleur considérable à l'horizon de juin/juillet 2004.

Phase de stabilisation : d'octobre 2004 à ce jour

Maintenant que les opérations bénéficient de ressources – humaines et financières – en quantité relativement suffisante, l'UNICEF a commencé à consolider ses activités. La nomination récente d'un représentant spécial de l'UNICEF pour le Darfour doté d'une autorité couvrant les opérations au Soudan et au Tchad a également eu un impact positif sur l'opération au Darfour. La difficulté à laquelle les organisations humanitaires doivent maintenant faire face est de maintenir cette impulsion, de renforcer les activités de coordination, d'améliorer la qualité des réponses apportées et d'établir un plan stratégique à long terme.

4. CONSTATATIONS

L'UNICEF a été une des rares institutions présentes au Darfour aux premiers stades de la crise. Les signaux d'alerte précoce donnés par le personnel de l'UNICEF ont déclenché une réaction à petite échelle en 2003. Au cours de 2003 et pendant la première partie de 2004, la réaction première de l'UNICEF, de même que celle d'autres organismes des Nations Unies, des ONG et des donateurs institutionnels, a été dans l'ensemble inadéquate. Cela a été causé par une combinaison de facteurs, dont certains étaient internes (à la fois institutionnels et propres au pays) et d'autres externes. À la suite de la mise en action du déclencheur institutionnel, tous les systèmes d'urgence de l'UNICEF se sont mobilisés autour de la priorité à accorder aux interventions du Darfour.

Réaction par secteur

Les échéanciers fixés pour les différents secteurs au titre des Principaux engagements pour les enfants en situation d'urgence (PEESU) se sont pas avérés pertinents car ils relevaient de la planification d'urgences à déclenchement rapide, alors que la crise du Darfour procédait d'une dynamique lente et prolongée. Néanmoins, dans le long terme, la plupart des objectifs sectoriels des PPESU ont été atteints.

Protection de l'enfance. Les interventions de l'UNICEF pour la protection de l'enfance étaient centrées sur trois composantes : l'analyse et le suivi de la situation, la création d'un environnement protecteur pour les enfants et l'octroi d'aides pour l'établissements d'Espaces pour l'Enfance. La collaboration entre le secteur de la protection et celui de l'éducation a été très positive. L'UNICEF devrait être félicité pour avoir été la première institution des Nations Unies à traiter des violences sexuelles et liées au genre dans cette urgence et à assumer le rôle de chef de file dans ce secteur difficile et délicat. Des problèmes ont surgi dans l'établissement de rapports sur les cas de violences sur les femmes et leur traitement.

Éducation. L'éducation est une des « réussites » des opérations du Darfour. Plus de 240 000 enfants purent être pris en charge dans des écoles construites grâce au soutien de l'UNICEF. Ce secteur a bénéficié d'une grande expertise au niveau interne et des « Directives pour l'éducation dans les situations d'urgence » élaborées en mai 2004. Les conditions climatiques ont occasionné des dégâts dans le matériel des salles de classes, déclenchant ainsi un besoin de réparations généralisé.

Assainissement de l'eau et de l'environnement. Les questions d'eau et d'assainissement n'ont pas fait l'objet d'une préparation suffisante et ont mis seulement en jeu un nombre limité de partenaires. Des choix techniques inappropriés aux premiers stades de l'urgence ont réduit de façon significative l'impact de la réaction de l'UNICEF. La Section de l'eau, de l'environnement et de l'assainissement au Siège a été affaiblie au fil des années et n'est plus en mesure de jouer un rôle de soutien significatif pour ses

² Le mécanisme institutionnel de mobilisation d'urgence est un mécanisme dont le but est de mobiliser l'institution toute entière pour répondre aux défis posés par une urgence à grande échelle. Cela veut dire que réagir à cette crise a préséance sur la plupart des interventions dictées par les autres priorités.

opérations sur le terrain. Les équipes s'occupant de questions d'eau, d'environnement et d'assainissement ont intensifié leurs interventions lors de l'exécution du Plan de 90 jours. À la fin de ce Plan, l'Unicef et ses partenaires avaient distribué de l'eau potable à 832 000 personnes et construit 28 000 latrines. Ces succès, en conjonction avec une campagne d'hygiène à grande échelle, ont contribué de façon significative à la réduction du risque d'épidémie. Au moment de l'évaluation, la situation des services, c'est-à-dire le nombre de latrines et de pompes manuelles en état de fonctionnement, etc., n'était pas connue. Les problèmes de qualité et d'entretien ont révélé qu'un effort soutenu dans ce secteur est toujours requis.

Santé et nutrition. La campagne de vaccination mise en œuvre au Darfour et à l'est du Tchad a été relativement réussie, avec 2 023 000 enfants vaccinés. Toutefois, le créneau ouvert par cette campagne de vaccination n'a pas été utilisé pour d'autres programmes en raison de restrictions de sécurité. L'UNICEF était un des fournisseurs principaux de médicaments à plus de 100 établissements de soins gérés par les ONG et le Ministère de la santé.

L'UNICEF a apporté son soutien à une vaste gamme de programmes de contrôle de la malnutrition ; il a eu recours pour cela à divers moyens, entre autres la distribution de produits spécialisés et le soutien à la lutte contre la carence en micronutriments. La baisse importante des taux de malnutrition peut être attribuée à une combinaison de facteurs, dont la distribution de l'aide alimentaire provenant du PAM, l'extraordinaire résilience des personnes déplacées, des interventions dans le secteur de l'eau, de l'environnement et de l'assainissement, un meilleur contrôle de la plupart des maladies et les interventions de l'UNICEF et des ONG portant sur la nutrition.

Gestion du programme d'urgence

Le personnel de l'UNICEF a abordé cette question avec cœur et détermination, mais ses capacités de réponse ont été entravées par des mesures de préparation inopérantes. La période allant de novembre 2003 à juin 2004 a été particulièrement difficile et frustrante. Le processus de paix Naivasha, les contraintes imposées par le gouvernement du Soudan, l'insécurité et les règles de sécurité de l'ONU ainsi que le manque de fonds ont entravé les capacités qu'avaient l'UNICEF et d'autres institutions de déployer leur personnel sur le terrain et d'accéder aux populations touchées. De plus, les opérations de l'UNICEF connaissaient des limitations sévères en raison du manque de partenaires d'exécution au Darfour. Bien que les efforts de l'UNICEF aient visiblement pris de l'impulsion, le suivi, l'établissement de rapports et l'analyse sectorielle globale auraient pu être améliorés. En raison de cette situation, la capacité de production des rapports nécessaires par l'UNICEF pose question.

Malgré la répartition des responsabilités qui existe dans le système de l'UNICEF, son Bureau régional, le Bureau des programmes d'urgence au Siège et le Bureau de financement des programmes ont été incapables de jouer un rôle d'orientation adéquate et de conseiller le bureau national lorsque cela s'imposait. De plus, les offres de services et les conseils stratégiques n'ont souvent pas été retenues ou suivies par le bureau de l'UNICEF au Soudan.

Les antennes de l'UNICEF sur le terrain se sont battus pour obtenir les équipements opérationnels nécessaires. Ce n'est que récemment que certains d'entre eux se sont équipés entièrement.

Mobilisation des ressources

Les ressources financières ont mis du temps à arriver, en dépit de la mobilisation rapide du Fonds des programmes d'urgence et, par la suite, du Fonds de réserve central d'urgence. Avant la déclaration d'une urgence générale dans l'organisation, les processus d'identification et le déploiement stratégique des ressources humaines étaient léthargiques, et le manque de personnel s'est avéré être un des obstacles les plus importants à la réaction humanitaire de l'UNICEF au Darfour. Toutefois, pendant tout l'été 2004, les niveaux d'effectifs ont augmenté considérablement et cela a déjà eu un impact positif sur les capacités de l'UNICEF à assurer son rôle de coordination de l'UNICEF et de suivre les programmes ainsi que sur sa crédibilité générale auprès de ses partenaires.

Coordination

L'UNICEF a participé à l'ensemble des réunions de la famille des Nations Unies sous l'égide du Résident Représentant et aux bilans effectués au cours de la crise. Toutefois, les relations entre l'UNICEF et d'autres institutions (Bureau du coordonnateur des affaires humanitaires des Nations Unies et BCHA) se sont tendues. L'UNICEF a pris la responsabilité de la coordination de certains secteurs (protection de l'enfance, éducation, eau et assainissement, ainsi que certains aspects de la santé et de la nutrition), sans avoir suffisamment de compétences techniques pour assurer une coordination efficace avant juillet-septembre 2004. Au fur et à mesure que le nombre d'ONG déployés dans la région s'est accru, le rôle de coordination de l'UNICEF est devenu de plus en plus crucial.

Problèmes transfrontaliers

Les bureaux UNICEF du Tchad et du Soudan n'ont pas élaboré de stratégie opérationnelle commune jusqu'à la nomination du représentant spécial de l'UNICEF pour le Darfour. La réintégration du programme du Darfour au programme national demeure une difficulté pour l'avenir.

Communication et plaidoyer

À la fin de 2003 et en février 2004, l'UNICEF a dénoncé de façon énergique la violence croissante qui touchaient les enfants et les femmes du Darfour. Plus tard, le bureau national a adopté une politique de communication plus axée sur la collecte de fonds et la visibilité que sur le plaidoyer. Les occasions de faire diffuser les arguments de l'UNICEF sur la protection des enfants et des informations sur les activités de programmation de l'UNICEF par les médias arabophones n'ont pas été exploitées. Ceci est dommage vu l'importance stratégique qu'il y avait à faire circuler les messages de l'UNICEF dans la région, et l'impact que cela pourrait avoir eu à la fois sur le plaidoyer et sur les collectes de fonds.

Relations entre le DFID et l'UNICEF

Parallèlement aux critiques qu'il exprimait à l'égard du Siège et du bureau national, le DFID accordait un soutien ciblé (fonds, ressources humaines, dons en nature) à l'UNICEF pour l'aider à améliorer son intervention humanitaire. Le processus d'achat de marchandises a souffert de retards importants en raison de choix techniques inappropriés et de spécifications erronées élaborées par le bureau national. Les partenaires devraient tous deux examiner la valeur ajoutée d'un processus d'achats placé sous l'égide du DFID au nom de l'UNICEF.

5. CONCLUSIONS

Les appréciations définitives sur la réaction de l'UNICEF à la crise du Darfour, en référence plus particulièrement au Plan de 90 jours, ont été résumées conformément aux critères d'évaluation de l'OCDE/CAD.

Pertinence. Les secteurs d'intervention retenus (protection de l'enfance, éducation, eau, environnement et assainissement, santé et nutrition) avaient une grande pertinence pour la crise du Darfour, alors que les stratégies opérationnelles et l'échéancier, dans bien des cas, n'en avaient pas autant. En 2003 et au début de 2004, le Soudan a dû faire face à une série d'urgences qui ont mis le bureau national sous une pression extrême. Cela a entravé les capacités du bureau national, qui n'a pas pu se rendre compte de l'ampleur de la crise, et a d'autre part lourdement affecté le processus de changement de politique pour passer d'une approche orientée sur le développement à une réaction d'urgence à part entière.

Efficacité. La réaction très rapide de 2003, avec la fourniture initiale d'approvisionnements provenant du stock de réserve, a été très efficace bien que limitée. Jusqu'à ce que le mécanisme de mobilisation institutionnel fût activé, les systèmes de recrutement de l'UNICEF ont été incapables de soutenir la réaction d'urgence. L'UNICEF s'en est remis à un processus externe de renforcement de sa capacité d'intervention, ce qui représente un certain danger pour une institution investie de rôles à la fois

opérationnels et normatifs. De plus, certains choix techniques ont limité l'efficacité du programme de façon significative.

Efficiences. En l'absence de partenaires opérationnels, le recours à des entrepreneurs privés (en juin 2004) spécialisés dans les forages et la construction de latrines pour atteindre des cibles plus importantes s'est avéré rationnel d'un point de vue financier, bien que les problèmes de qualité soient apparus plus tard. Le lancement d'ateliers participatifs sur le terrain de juin 2004 a permis de faire remonter de manière significative le taux de réalisation des objectifs retenus. Les accords de mise à disposition d'un réservoir de cadres rapidement mobilisables passés avec certains bailleurs de fonds institutionnels (par exemple le DFID) sont des mécanismes très efficaces, bien qu'il existe par là même un danger de dégradation de l'image institutionnelle de l'UNICEF. Sur un autre plan, il faudrait éviter que l'intégration des dynamiques de préparation aux catastrophes aux programmes de développement ne fasse passer le besoin de garder une capacité forte d'intervention rapide au second plan.

Impact. Après des mois de difficultés, les activités de l'UNICEF et de ses partenaires ont finalement commencé à avoir un impact dans la plupart des secteurs d'intervention au cours de la saison des pluies de 2004. Au nombre des réalisations : l'amélioration de l'accès à l'eau, l'amélioration de l'état nutritionnel, un taux de scolarisation plus élevé, etc. Toutefois, la faiblesse relative des systèmes de suivi, la capacité limitée de l'UNICEF à mesurer les progrès accomplis et évaluer l'impact obtenu, la violence continue à l'encontre des femmes et des enfants semblent indiquer que le plaidoyer initial de l'UNICEF a, comme beaucoup d'autres efforts de ce type, été largement ignoré.

Coordination et cohérence. La performance initiale de l'UNICEF dans le secteur de la coordination révèle bel et bien une faiblesse globale dans la capacité de coordination de l'institution en situation d'urgence (voir annexe 7). L'absence de leadership dans le système des Nations Unies sur les questions de protection a compliqué l'articulation des activités de protection de l'enfance avec le reste du secteur de la protection. La coordination interne entre les différents protagonistes au sein de la structure de l'UNICEF n'a pas toujours été la meilleure. La coordination au Tchad et au Soudan en est toujours à son premier stade. La récente nomination d'un représentant spécial de l'UNICEF pour le Darfour et l'ouest du Tchad et la mise en place d'une équipe spécifique devraient alléger la tâche du bureau national.

Durabilité

L'importance des enjeux de durabilité des opérations du Darfour dépendra vraisemblablement de l'évolution de la situation. Il y a trois cas de figure possible : soit la situation continue à se détériorer, et la demande de secours d'urgence va croissant ; soit le statu quo est maintenu et les interventions, de manière générale, sont centrées sur les soins et l'entretien ; soit enfin la situation se stabilise, ce qui suscite des besoins ponctuels de reconstruction. L'extension des programmes à des zones à ce jour inaccessibles, le soutien apporté aux populations non touchées par les déplacements internes et le contrôle de qualité constituent des difficultés fondamentales. Le niveau relativement élevé d'assistance accordé aux personnes déplacées rendra leur retour à leurs villages plus difficile, soulignant l'importance du soutien systématique aux communautés les hébergeant. Certaines questions, comme l'importance d'une réaction qui s'inscrive dans le plus long terme en garantissant un certain degré de durabilité et en prenant en compte le destin des populations locales, n'ont pas reçu une attention suffisante pendant les premières phases de l'opération. La préparation d'une stratégie de sortie, la stabilisation du programme et l'adoption d'une stratégie post- d'urgence sont néanmoins recommandées au titre des bonnes pratiques.

En conclusion

Les difficultés éprouvées par l'UNICEF dans sa gestion de la crise du Darfour ont soulevé certaines questions sur la capacité qu'a l'institution de lancer des opérations d'urgence et de les coordonner. La qualité de la relation entre le DFID et l'UNICEF en a souffert jusqu'à un certain point, malgré des améliorations marquées dans la performance de l'UNICEF à partir de juin 2004. Toutefois, cet exercice d'évaluation prouve que les deux parties sont déterminées à rétablir une relation de confiance mutuelle.

6. RECOMMANDATIONS

Le tableau suivant résume les recommandations principales de l'évaluation.

Tableau 2 : Recommandations principales

RECOMMANDATIONS GÉNÉRALES POUR L'UNICEF	
Recommandations pour améliorer la capacité de réaction de l'UNICEF	<ol style="list-style-type: none"> 1. Les principaux engagements pour les enfants en situation d'urgence devraient être révisés, et surtout leur échéancier qui n'est pas adapté aux crises à déclenchement lent et aux conflits prolongés. 2. L'UNICEF devrait continuer à améliorer son système d'alerte et de préparation rapides en renforçant le Centre des opérations et le Bureau des programmes d'urgence de Genève, créer une équipe d'intervention rapide, stimuler sa capacité d'intervention immédiate et élaborer des procédures opérationnelles standard. 3. L'UNICEF devrait renforcer les rôles des Bureaux régionaux et du Bureau des programmes d'urgence dans leur rôle d'encadrement des bureaux de l'UNICEF dans les pays où elle intervient. 4. La création d'une équipe affectée aux urgences au niveau du bureau national devrait être une procédure obligatoire pendant les périodes d'urgence. 5. L'UNICEF devrait continuer à élaborer et à promouvoir des outils de plaidoyer puissants pour les enfants dans les situations de guerre et de violences sexuelles et notamment celles faites aux femmes. 6. La capacité de recrutement d'urgence du Siège pour les questions d'eau, d'environnement et d'assainissement devrait être accrue dans les plus brefs délais. Le service chargé de ces questions au Siège devrait s'assurer que les objectifs du Plan d'action 2004-2005 sur la préparation et la réaction aux situations d'urgence en matière d'eau, d'environnement et d'assainissement sont financés et atteints. 7. La question de l'opportunité de rendre l'UNICEF opérationnel dans les circonstances où les partenaires font défaut devrait être explorée davantage.
Recommandations opérationnelles pour la gestion du programme d'urgence	<ol style="list-style-type: none"> 8. Une plus grande attention devrait être accordée aux systèmes de suivi de la situation de crise et d'analyse de la manière dont les opérations se poursuivent, car ces systèmes fournissent des informations essentielles pour la gestion des programmes. 9. L'importance de la coordination sectorielle et inter-agences devrait être reconnue et confortée par un niveau approprié de dotation budgétaire.

RECOMMANDATIONS POUR L'OPÉRATION ACTUELLE AU DARFOUR	
Recommandations générales	<p>10. Le bureau national devrait explorer davantage les moyens de rassembler des informations sur les régions inaccessibles. Le bureau national devrait continuer à s'assurer que les bureaux « terrain » et les partenaires puissent participer dans tous les grands exercices de planification.</p> <p>11. L'accent sur les questions de qualité devrait être soutenu par une amélioration générale des systèmes de suivi et de rapports.</p> <p>12. Un exercice d'évaluation pruridisciplinaire du suivi devrait figurer au Plan d'action de 2005 pour déterminer les progrès accomplis.</p>
Questions transfrontalières	<p>13. Le bureau national devrait continuer à réactualiser régulièrement la préparation aux urgences sur une base transfrontalière. Beaucoup d'énergie doit encore être investie dans la coordination entre le Tchad et le Soudan.</p> <p>14. Le bureau national devrait s'assurer que les réunions de planification communes entre secteurs techniques aient lieu régulièrement pour que s'opèrent des échanges d'informations et des synergies intersectorielles.</p>
RECOMMANDATIONS SECTORIELLES	
Protection de l'enfance	<p>15. La protection de l'enfance devrait être intégrée au système général de coordination de la protection.</p> <p>16. Le bureau national et la Section de la protection devraient s'assurer que les préoccupations relatives à la protection sont intégrées à la préparation à la gestion des désastres et aux bilans y afférent.</p> <p>17. Le coordonateur des urgences et la Section de la protection devraient s'assurer que les questions de protection soient bien intégrées comme axe transversal aux plans existants d'interventions sectorielles.</p> <p>18. Le bureau national et la Section de la protection devraient s'engager dans un dialogue avec les troupes de l'Union africaine sur la protection de l'enfance, les violences sexuelles, notamment celles faites aux femmes et le VIH/SIDA afin de réduire les risques de comportements inacceptables (comme le soulignent les évaluations sur la Guinée, la Sierra Leone, le Cambodge, etc....).</p>
Education	<p>19. Les bureaux de zone et la Section de l'éducation devraient définir un ensemble de critères pour décider de l'emplacement de salles de classes temporaires afin d'atténuer ou d'empêcher le développement de tensions entre les personnes déplacées et les communautés qui les hébergent.</p> <p>20. Le bureau national et la section de l'éducation devraient être impliqués davantage dans la recherche d'une solution pratique à la question des salaires des enseignants.</p>

Eau et assainissement	<p>21. Les écoles devraient recevoir un soutien suffisant dans les secteurs de la santé et de l'eau, l'environnement et l'assainissement.</p> <p>22. Les Sections « Eau, environnement et assainissement » et « Approvisionnements » devraient vérifier la qualité des approvisionnements de pompes manuelles.</p> <p>23. La Section « Eau, environnement et assainissement » du bureau national devrait examiner les besoins d'entretien et de réparations des systèmes existants d'eau et d'assainissement, y compris, lorsque cela s'impose, le choix de l'organisation sociale qui aurait la responsabilité d'assurer ces activités.</p>
Santé	<p>24. Les informations relatives aux possibilités de conception des kits régulièrement re-adaptés pour les soins de santé primaire devraient être diffusées auprès des ONG et des autres partenaires.</p> <p>25. La Section Santé devrait : a) élaborer une stratégie de suivi de l'économie de la santé afin de réduire le danger d'abus du système, par exemple lorsque les personnes déplacées sont obligées de payer pour leurs soins médicaux et leurs médicaments), et b) renforcer la capacité qui est la sienne de conseiller le gouvernement et la population touchée lorsque la situation est devenue suffisamment stable pour en revenir à un système de recouvrement des coûts des soins médicaux.</p>
Nutrition	<p>26. La position de l'UNICEF dans le secteur de la nutrition doit être renforcée à tous les niveaux, y compris à ceux des bureaux nationaux et régionaux.</p> <p>27. Le Siège devrait faire pression pour que l'UNICEF participe systématiquement aux missions inter-agences sur la nutrition. Un responsable de haut niveau des questions nutritionnelles recruté à ces fins devrait se voir confier ces missions et conserver un rôle pilote.</p>
RECOMMANDATIONS POUR LE PARTENARIAT UNICEF/DFID	
	<p>28. Des mécanismes diversifiés et coordonnés devraient être institués pour garantir un bon dialogue avec le DFID, tout en laissant au Bureau de financement des programmes son rôle prépondérant.</p>

RESUMEN EJECUTIVO

1. OBJETIVOS, ALCANCE Y METODOLOGÍA DE LA EVALUACIÓN

Los objetivos de esta evaluación conjunta UNICEF/DFID fueron:

- Examinar la pertinencia y oportunidad de la planificación de la preparación, de la intervención temprana y del Plan de 90 días, así como la eficacia y eficiencia de la gestión y del apoyo operativo;
- Extraer lecciones para ayudar a UNICEF a mejorar su preparación y su capacidad para responder a las emergencias de una forma significativa y eficaz.

A lo largo de un mes, el Equipo de Evaluación se desplazó a Sudán, en una visita que incluyó Jartum y los tres estados en que está dividida la región de Darfur, así como la Oficina Regional de UNICEF en Amman, y la Sede de UNICEF en Nueva York; en este período realizó también, entrevistas telefónicas a otros miembros importantes del personal de UNICEF y del DFID así como a socios externos. Antes y durante la misión se llevó a cabo un estudio de gabinete, en particular, una revisión de los registros financieros y de los suministros. Durante la evaluación se llevaron a cabo dos seminarios de retroalimentación sobre la respuesta obtenida: uno en Jartum (los días 3 y 4 de noviembre de 2004) y otro en Ginebra (el 19 de noviembre de 2004). Las conclusiones y recomendaciones de esta evaluación se incorporarán al proceso más amplio de aprendizaje en el seno de UNICEF y su aplicación reforzará las relaciones de trabajo entre UNICEF y el DFID.

2. DARFUR: LA CRISIS QUE NADIE DESEABA

A pesar de que ya a principios de 2003 había algunos indicios de que se estaba gestando una crisis en Darfur, la comunidad internacional estaba concentrada en otros eventos internacionales, en particular en el proceso de paz de Naivasha, en Sudán, y en las inundaciones de Kassala. A medida que la crisis en Darfur fue adquiriendo paulatinamente mayor gravedad, el número de desplazados internos y refugiados continuó aumentando a lo largo de 2003 y principios de 2004, y las poblaciones afectadas comenzaron a concentrarse en campamentos. En el período julio- agosto de 2004, la Oficina de Coordinación de Asuntos Humanitarios (OCAH) calculó que aproximadamente 2 millones de personas se habían visto afectadas por la crisis, entre ellos desplazados internos, refugiados en el Chad y poblaciones residentes en toda una vasta región. Los retos a los que se enfrentó —y continúa enfrentándose— la comunidad internacional fueron y continúan siendo abrumadores.

3. LA RESPUESTA DE UNICEF

Con anterioridad a la crisis, UNICEF estaba presente en Darfur a través de sus programas regulares. La respuesta de UNICEF a la situación de emergencia en Darfur abarcó cuatro fases.

Fase inicial: desde marzo/abril de 2003 hasta principios de octubre de 2003

UNICEF fue una de las pocas organizaciones presentes en Darfur, y respondió rápidamente mediante intervenciones de pequeña escala. No obstante, las restricciones a nivel de gobierno, lo limitado de los recursos y el insuficiente número de socios para la ejecución, repercutieron negativamente en la capacidad de respuesta de UNICEF.

Fase intermedia: desde noviembre 2003 hasta abril de 2004

Las condiciones de seguridad empeoraron y el acceso a una población ampliamente dispersa se vio gravemente restringido. En ese momento, se disponía de fondos limitados para situaciones de emergencia para Darfur. La Oficina de UNICEF en el País proporcionó alguna asistencia en la medida en que el acceso y los recursos lo permitieron. Fue entonces cuando en la Sede de Nueva York y en la Oficina Regional comenzó a incrementarse la concienciación sobre la situación de emergencia que se estaba gestando.

Desarrollo de una respuesta plena: mayo a septiembre de 2004

UNICEF puso en marcha el mecanismo denominado “*desencadenante institucional*” (*corporate trigger*) el 20 de mayo 2004³, fecha en la que declaró a Darfur como una emergencia para toda la organización. La respuesta de UNICEF se había ampliado de forma importante hacia los meses de junio y julio 2004.

Fase de estabilización: octubre de 2004 hasta la fecha

Ahora que las operaciones están relativamente bien dotadas de recursos, tanto en términos de personal como financieros, UNICEF ha comenzado a consolidar sus actividades. El reciente nombramiento de un Representante Especial de UNICEF para Darfur, con autoridad tanto en Sudán como en el Chad, ha tenido también una repercusión positiva en la operación de Darfur. El reto al que se enfrentan los organismos humanitarios ahora, es mantener el “momento”, reforzar las actividades de coordinación, mejorar la calidad de la respuesta y establecer un plan estratégico de largo plazo.

4. CONCLUSIONES

UNICEF fue uno de los pocos organismos con presencia en Darfur durante las etapas iniciales de la crisis. Las señales de alerta temprana lanzadas por el personal de UNICEF ubicado en la zona, desencadenó una respuesta, a pequeña escala, en 2003. A lo largo 2003 y durante el primer semestre de 2004, la respuesta temprana de UNICEF, junto con la de otros organismos asociados, ONG y donantes institucionales fue, en gran medida, insuficiente. Ello se debió a una combinación de factores, algunos internos (tanto institucionales como específicamente relacionados con el país) y otros externos. Tras la activación del “*desencadenante colectivo*”, todos los sistemas de emergencia de UNICEF dieron prioridad a apoyar la respuesta a la crisis de Darfur.

Respuesta por sectores

El calendario presentado, por todos los sectores, en los Compromisos Básicos para la Infancia en Situaciones de Emergencia (CCC por sus siglas en Inglés) fue inadecuado. Esto debido a que el CCC está configurado para procesos de planificación de emergencias que se desencadenan con rapidez; la situación en Darfur, en cambio, puede describirse mejor como una crisis de desarrollo lento y prolongado. Sin embargo, en el largo plazo, la mayoría de las metas sectoriales relativas a los Compromisos Básicos para la Infancia fueron cumplidas.

Protección de la infancia. Las intervenciones de UNICEF en materia de protección de la infancia se centraron en tres componentes: análisis y seguimiento de la situación, creación de un entorno protector para la infancia y previsión de asistencia para la creación de “Espacios Infantiles”. La colaboración entre los sectores de protección y educación fue muy positiva. UNICEF es digno de encomio por haber sido el primer organismo de las Naciones Unidas en hacer frente a la violencia sexual basada en el género en situaciones de emergencia y por asumir una función de liderazgo en este difícil y delicado sector. Algunos problemas fueron, no obstante encontrados en los mecanismos de reporte y en el tratamiento de casos de violencia basada en el género.

Educación. La educación es una de las experiencias exitosas en materia de operaciones en Darfur. Más de 240.000 niños fueron atendidos en escuelas construidas con apoyo de UNICEF. El sector se benefició de los profundos conocimientos técnicos con que cuenta la organización y de los recientemente publicados “Lineamientos para la Educación en Emergencias” (mayo de 2004). Las condiciones climáticas ocasionaron daños materiales de las aulas provisionales, lo que generó una necesidad generalizada de reparaciones.

Agua y saneamiento ambiental. A pesar que agua y saneamiento fue un sector clave en el marco de la respuesta, la sección de agua y saneamiento ambiental de UNICEF no estaba adecuadamente preparada y contaba con un número limitado de socios. Las decisiones técnicas poco acertadas en las

³ El “*desencadenante institucional*” es un mecanismo dirigido a movilizar a toda la institución para hacer frente a los retos que supone una situación de emergencia a gran escala. Cuando se activa, la respuesta a esta crisis adquiere preferencia sobre la mayoría del resto de las prioridades.

fases iniciales de la emergencia redujeron significativamente el impacto de la respuesta de UNICEF. La Sección de Agua y Saneamiento Ambiental de la Sede en Nueva York se ha ido debilitando con los años y ya no es capaz de desempeñar una importante función de apoyo a las operaciones de campo. Los equipos de agua y saneamiento ambiental multiplicaron sus intervenciones durante la aplicación del Plan de 90 días. Al final del Plan de 90 días, UNICEF y sus asociados estaban proporcionando agua potable a 832.000 personas y habían construido 28.000 letrinas. Estos logros, sumados a una campaña de higiene a gran escala, contribuyeron de forma importante a reducir el riesgo de epidemias. En el momento de la evaluación, la situación de los servicios, por ejemplo, el número de letrinas, bombas de mano y otros en funcionamiento, se desconocía. Los problemas de calidad y de mantenimiento parecen sugerir que todavía se requiere un esfuerzo sostenido en esta esfera.

Salud y nutrición. La campaña de inmunización llevada a cabo en Darfur y en el Chad oriental fue relativamente exitosa, ya que se vacunó a 2.023.000 niños. No obstante, la magnífica oportunidad que supuso esta campaña de inmunización no se utilizó para otros programas debido a las restricciones impuestas por la falta de seguridad. UNICEF fue uno de los principales proveedores de medicamentos y equipos médicos a más de 100 instalaciones sanitarias gestionadas por ONG y el Ministerio de Sanidad.

UNICEF apoyó una amplia gama de programas para la gestión de la desnutrición mediante diferentes medios, en particular la provisión de productos especializados y el apoyo en casos de deficiencias de micro nutrientes. La importante disminución de las tasas de desnutrición puede atribuirse a una combinación de factores, en particular, a la distribución de ayuda alimentaria del PMA, al nivel de resistencia que muestran los desplazados internos, a las intervenciones en materia de agua y saneamiento ambiental, al mejor control de la mayoría de las enfermedades y a las intervenciones de UNICEF y de las ONG en materia de nutrición.

Gestión del Programa de Emergencia

El personal de UNICEF abordó la repuesta con dedicación y compromiso, pero su capacidad de respuesta se vio obstaculizada por las ineficaces medidas de preparación para la emergencia. El período comprendido entre noviembre 2003 y julio 2004 fue especialmente difícil y frustrante. El Proceso de Paz de Naivasha, las restricciones impuestas por el Gobierno de Sudán, la inseguridad y las normativas de las Naciones Unidas en materia de seguridad, así como la falta de fondos, disminuyeron la capacidad de UNICEF y de otros organismos para ubicar personal en la zona y para acceder a las poblaciones afectadas. Adicionalmente, las operaciones de UNICEF se vieron gravemente coartadas por la ausencia de socios para implementar acciones en Darfur. A pesar que las actividades de UNICEF fueron adquiriendo, a todas luces, impulso y dinamismo, el seguimiento, la presentación de informes y los análisis globales por sectores podrían haber sido mejorados. Como resultado de este análisis, se plantearon interrogantes sobre la capacidad de UNICEF para informar de manera adecuada.

A pesar de que existe una cadena de responsabilidades que funciona, la Oficina Regional de UNICEF, el Centro de Operaciones de Emergencia de la Sede en Nueva York (EMOPS) y la Oficina de Financiación de Programas (PFO) fueron incapaces de desempeñar una función consultiva enérgica y de asesorar a la Oficina en el País cuando fue necesario. Adicionalmente y de manera frecuente, la Oficina en el País desestimó ofertas de apoyo en materia de asesoramiento estratégico.

Las oficinas de campo tuvieron grandes dificultades para obtener el equipo operativo necesario. Algunas oficinas sólo recientemente lograron ser plenamente equipadas como para poder funcionar a pleno rendimiento.

Movilización de recursos

Los recursos financieros llegaron con lentitud, a pesar de la rápida movilización del Fondo para Programas de Emergencia (EPF) y, posteriormente, del Fondo Central Rotatorio de Emergencia (CERF). Antes de que la declaración de emergencia fuera lanzada a nivel corporativo, la identificación y el despliegue estratégico de recursos humanos fueron excesivamente lentos, y la falta de personal parece ser uno de los problemas más importantes de que demostró la respuesta de UNICEF en Darfur. No

obstante, en el período julio - septiembre de 2004, los niveles de dotación de personal aumentaron de forma importante y ello generó una repercusión positiva en la función de coordinación de UNICEF, en su capacidad en materia de seguimiento y en general, en la credibilidad de UNICEF entre los socios.

Coordinación

UNICEF participó activamente en las reuniones y evaluaciones del Equipo de Naciones Unidas en el País (UNCT) a lo largo de toda la crisis. No obstante, las relaciones entre UNICEF y otros organismos (la Oficina del Coordinador Humanitario de las Naciones Unidas y la Oficina de Coordinación de Asuntos Humanitarios (OCAH) se volvieron tensas. UNICEF asumió la responsabilidad de coordinar diversos sectores: protección del niño, educación, agua y saneamiento ambiental, así como ciertos aspectos de salud y nutrición; sin embargo, hasta julio/septiembre de 2004, no demostró tener la capacidad técnica necesaria como para garantizar una coordinación efectiva. A medida que aumentó el número de ONG en la región, la función de UNICEF en materia de coordinación, pasó a ser más y más crucial.

Problemas ínter fronterizos

Las Oficinas Nacionales en el Chad y Sudán no desarrollaron una estrategia operativa conjunta hasta que el Representante Especial de UNICEF para Darfur fue nombrado. La reintegración del programa de Darfur en el programa de país sigue siendo un reto de cara al futuro.

Comunicación e incidencia

A finales de 2003 y en febrero de 2004, UNICEF realizó declaraciones enérgicas en relación con la creciente violencia que afectaba a mujeres y niños en Darfur. Más adelante, la Oficina en el País, en vez de optar por una estrategia de incidencia, adoptó una política en materia de comunicaciones orientada a captar fondos y obtener presencia en los medios. No se aprovecharon, entonces, las oportunidades de difundir las actividades de incidencia y programáticas de UNICEF a través de los medios de comunicación en lengua árabe, a pesar de la importancia estratégica que la distribución de mensajes tiene en la región y la repercusión que ello podría haber tenido tanto en la incidencia como en la captación de fondos.

Relaciones entre el DFID y UNICEF

Las críticas expresadas por el DFID en la Sede y en el país se vieron acompañadas de un apoyo (financiero, de recursos humanos, en especie) concretamente dirigido a asistir a UNICEF a mejorar su respuesta. El proceso de adquisiciones mostró retrasos importantes como producto de decisiones técnicas poco acertadas y de especificaciones incorrectas provenientes de la Oficina en el País. Ambos socios deberían estudiar la conveniencia de que el DFID se encargue de realizar las adquisiciones en nombre de UNICEF.

5. CONCLUSIONES

Los juicios de valor que se formulan a nivel de conclusiones sobre la respuesta de UNICEF a la crisis de Darfur, con una atención especial al Plan de 90 días, han sido resumidos con base en los criterios del Comité de Asistencia al Desarrollo (CAD) de la OCDE.

Pertinencia. Los sectores de intervención (protección del niño, educación, agua y saneamiento ambiental, salud y nutrición) fueron extremadamente pertinentes en lo que se refiere a la crisis de Darfur, a pesar que las estrategias y calendarios operativos, en muchos casos, no lo fueron tanto. En 2003 y principios de 2004, Sudán se enfrentó a una serie de emergencias que colocaron a la Oficina en el País bajo una situación de extrema presión. Ello dificultó la capacidad de la Oficina para apreciar la naturaleza o magnitud de la crisis, lo que a su vez influyó en el cambio de un enfoque de desarrollo hacia una respuesta plena frente a una situación de emergencia.

Efectividad. La respuesta de 2003, muy ágil, con una provisión inicial de suministros con cargo a la reservas para contingencias, fue eficaz aunque limitada. Las actividades realizadas durante el período comprendido entre noviembre 2003 y mayo 2004 fueron mucho menos efectivas. Los procesos de contratación de personal de UNICEF no demostraron ser eficaces para responder a la emergencia sino hasta cuando el *desencadenante colectivo* fue activado., UNICEF dependió enormemente de la capacidad de reacción externa, un riesgo para una institución que desempeña a la vez funciones operativas y normativas. Adicionalmente, algunas decisiones técnicas limitaron, de manera significativa, la efectividad del programa.

Eficiencia. Ante la falta de socios para la ejecución, la utilización de contratistas privados (en julio 2004) para la excavación y construcción de letrinas a fin de cumplir con metas cada vez más ambiciosas, demostró ser eficaz en cuanto a los costos, a pesar que más adelante aparecieron algunos problemas de calidad. Los seminarios participativos celebrados en julio de 2004 sobre el terreno elevaron de forma importante la tasa de ejecución. Los acuerdos sobre recursos de reserva, con determinados donantes institucionales (por ejemplo, el DFID) y las ONG revelaron ser mecanismos muy eficientes a pesar del riesgo de que la imagen institucional de UNICEF pueda verse afectada. Aquellos esfuerzos para transversalizar el alivio en situaciones de emergencia en los programas de desarrollo, a expensas de la capacidad de respuesta para la emergencia, debieran ser evitados.

Impacto. Tras meses de dificultades, las actividades de UNICEF y de sus asociados comenzaron por fin a tener un impacto en la mayoría de los sectores de intervención durante la estación de las lluvias de 2004. Algunos de los logros incluyen, mayor acceso al agua, mejora de la situación nutricional, mayores tasas de matrícula escolar, etcétera. Es importante resaltar, no obstante, que los sistemas de seguimiento que fueron relativamente débiles, limitaron la capacidad de UNICEF para medir los progresos y evaluar el impacto. La continuación de la violencia contra las mujeres y los niños parece indicar que las actividades iniciales de incidencia llevadas a cabo por UNICEF así como muchas otras actividades similares, han sido en gran medida ignoradas.

Coordinación y coherencia. El desempeño que inicialmente tuvo UNICEF en materia de coordinación, no indica que existan debilidades en la capacidad de UNICEF, a nivel global, para la coordinación (véase el Apéndice 7). La falta de liderazgo en materia de protección en el sistema de las Naciones Unidas hizo que la articulación de las actividades de protección del niño con el resto de actividades relativas al sector de protección resultase más complicada. La coordinación interna entre las diferentes partes interesadas dentro de las estructuras de UNICEF no ha sido siempre óptima. La coordinación en el Chad y Sudán está todavía en su estadio inicial. El reciente nombramiento de un Representante Especial de UNICEF para Darfur y el Chad oriental, así como la creación de un equipo ad-hoc independiente, se espera, aligerarán la carga que actualmente tiene la Oficina en el País.

Sostenibilidad

La medida en que la sostenibilidad sea priorizada en las operaciones, muy probablemente influirá en cómo evolucione la situación en Darfur. Existen tres situaciones hipotéticas probables: primera, que la situación continúe deteriorándose y que ello conlleve una creciente demanda de alivio de la emergencia; segunda, que se mantenga el *status quo* y que las operaciones, en términos generales, se centren en la prestación de atención y en acciones de mantenimiento; tercera, que la situación se estabilice originando necesidades de rehabilitación de carácter específico. Los principales desafíos son, la ampliación de los programas a zonas que aún son inaccesibles, el apoyo a las poblaciones afectadas no desplazadas y el establecimiento de mecanismos de control de calidad. El nivel de asistencia relativamente elevado que fue brindado a los desplazados internos, sin duda, hará más difícil el retorno a sus pueblos; ello subraya la importancia de que el apoyo sea brindado con carácter regular, a las comunidades de origen. Durante las fases iniciales de operación, algunos temas no recibieron la atención necesaria, entre ellos, la importancia de ofrecer una respuesta con una visión de largo plazo; asegurar un cierto grado de sostenibilidad y tomar en consideración cuál será el destino de las poblaciones que residen en la zona. Algunas buenas prácticas que se recomiendan son entre otras, la planificación de una estrategia de salida, la estabilización de los programas y la elaboración de una estrategia post emergencia.

En conclusión

Las dificultades experimentadas por UNICEF en su manejo de la crisis de Darfur plantan algunas interrogantes sobre la capacidad de este Organismo para implementar y coordinar operaciones de emergencia. La calidad de las relaciones entre el DFID y UNICEF se vio afectada en cierta medida, a pesar de la evidente mejora del desempeño de UNICEF a partir de junio de 2004. No obstante, este ejercicio de evaluación demuestra que tanto DFID como UNICEF están comprometidos a restablecer los niveles de confianza.

6. RECOMENDACIONES

El cuadro siguiente resume las principales recomendaciones de la evaluación.

Cuadro 1: Principales recomendaciones

RECOMENDACIONES GENERALES PARA UNICEF	
Recomendaciones para reforzar la Capacidad de UNICEF para responder ante situaciones de Emergencia	<ol style="list-style-type: none">1. Revisar los Compromisos Básicos para la Infancia (CCCs), especialmente el calendario y los plazos los cuales no se adaptan a situaciones de crisis de lento desarrollo y a crisis prolongadas.2. Continuar mejorando los sistemas de alerta temprana y de preparación para situaciones de emergencia mediante el reforzamiento del Centro de Operaciones y la Oficina de Programas de Emergencia en Ginebra, la creación de un Equipo de Intervención en Situaciones de Emergencia (EISE), la multiplicación de su capacidad de reacción y la elaboración de procedimientos operacionales estandarizados.3. Reforzar el papel de la Oficina Regional y de la Oficina de Programas de Emergencia en lo relativo a su función de orientación a la Oficina en el País.4. La creación de un equipo exclusivamente dedicado a las emergencias a nivel de la Oficina en el País debería constituirse en un procedimiento obligatorio en épocas de emergencia.5. Continuar desarrollando y promoviendo instrumentos de incidencia fuertes en relación con los niños en situación de guerras y la violencia sexual y basada en el género.6. Incrementar, de manera urgente, la capacidad de la sede para dotar personal de emergencia en materia de agua y saneamiento ambiental. El Departamento de Agua y Saneamiento Ambiental de la Sede en Nueva York debería velar por que las metas del Plan de Acción de Preparación y Respuesta para Situaciones de Emergencia 2004-2005 reciban financiación y se cumplan.7. La respuesta a la pregunta de si UNICEF debiera o no entrar en operaciones cuando no existen socios, requiere de mayor exploración.
Recomendaciones operativas para la gestión del Programa de Emergencia	<ol style="list-style-type: none">8. Prestar mayor atención a los sistemas orientados al seguimiento de la situación de crisis y a cómo funcionan las operaciones, en la medida en que ofrecen información esencial para la gestión de los programas.9. Reconocer la importancia de la coordinación inter sectorial e inter agencial mediante un nivel adecuado de asignación de recursos.

RECOMENDACIONES PARA LAS OPERACIONES ACTUALES EN DARFUR	
Recomendaciones generales	<p>10. La Oficina en el País debería explorar los medios que le permitan recabar información sobre zonas inaccesibles; y debería continuar velando por que todos los ejercicios importantes de planificación incluyan a las Oficinas de Zona, así como a los asociados.</p> <p>11. La priorización de operaciones de calidad debiera estar sustentada en un mejoramiento general de los sistemas de seguimiento y de presentación de informes.</p> <p>12. El Plan de Acción de 2005 debiera incluir un ejercicio multidisciplinario de evaluación que permita analizar los avances conseguidos.</p>
Cuestiones transfronterizas	<p>13. La Oficina en el País debería continuar actualizando regularmente la planificación para las contingencias basándose en criterios que aborden las cuestiones transfronterizas. Aún es necesario dedicar importantes esfuerzos a la coordinación entre el Chad y Sudán.</p> <p>14. La Oficina en el País debería asegurar la realización, de manera regular, de reuniones intersectoriales de planificación para el intercambio de información y para la identificación de sinergias.</p>
RECOMENDACIONES POR SECTORES	
Protección de la infancia	<p>15. La protección de la infancia debería integrarse en el sistema global de coordinación en materia de protección.</p> <p>16. La Oficina en el País y la Sección de Protección deberían asegurar que las problemáticas en materia de protección sean integradas en la planificación y evaluación de las acciones de preparación.</p> <p>17. El Coordinador para las Emergencias y la Sección de Protección deberían velar por que la protección se integre en los actuales planes de intervención por sectores.</p> <p>18. La Oficina en el País y la Sección de Protección deberían entablar un diálogo con las tropas de la Unión Africana sobre protección del niño, violencia sexual y basada en el género y VIH/SIDA, a fin de reducir el riesgo de conductas indebidas (a partir de las evaluaciones en Guinea, Sierra Leona, Camboya, etc.)</p>
Educación	<p>19. La Oficina de Zona y la Sección de Educación deberían definir un conjunto de criterios para la ubicación de aulas temporales a fin de mitigar o evitar tensiones crecientes entre los desplazados y las comunidades de origen.</p> <p>20. La Oficina en el País y la Sección de Educación deberían participar más en la búsqueda de una solución práctica al problema de los salarios de los maestros.</p>
Agua y saneamiento	<p>21. Debería ofrecerse a las escuelas, apoyo adecuado en materia de salud y agua y saneamiento.</p> <p>22. Las Secciones de Agua y Saneamiento Ambiental y de Suministros de la Oficina en el País deberían supervisar la calidad de los suministros relacionados con las bombas manuales.</p> <p>23. La Sección de Agua y Saneamiento Ambiental de la Oficina en el País deberían estudiar las necesidades de mantenimiento y de reparación de los actuales sistemas de agua y saneamiento, y en la medida de lo pertinente, identificar la organización social que sería responsable de realizar estas actividades.</p>

Salud	<p>24. Debería difundirse información de manera regular, entre las ONG y otros asociados sobre posibles opciones para el diseño de un paquete sanitario actualizable.</p> <p>25. La Sección de Salud debería a) desarrollar una estrategia para dar seguimiento a los aspectos financieros de la gestión sanitaria a fin de reducir el riesgo de que el sistema cometa abusos, por ejemplo, que desplazados internos tengan que pagar por medicamentos y atención médica, y b) reforzar su capacidad para asesorar al Gobierno y a la población afectada cuando la situación haya devenido lo suficientemente estable como para regresar a un sistema de atención de la salud basado en la recuperación de los costos.</p>
Nutrición	<p>26. La posición de UNICEF en el sector nutrición debe reforzarse a todos los niveles, en particular en la Sede y en las Oficinas Regionales.</p> <p>27. La Sede debería presionar a favor de una participación más sistemática de UNICEF en misiones interagenciales en materia de nutrición. A fin de mantener el liderazgo, sería importante incluir en estas misiones a un experto interno en materia de nutrición.</p>
Recomendaciones para el acuerdo de cooperación entre UNICEF y el DFID	
	<p>28. Deberían crearse mecanismos diversificados y coordinados orientados a garantizar un buen diálogo con el DFID, asegurando que la Oficina para la Financiación de Programas conserve un papel preponderante.</p>

EVALUATION REPORT

1. OBJECTIVES OF THE EVALUATION

This evaluation was a joint endeavour between UNICEF and DFID, led by an independent consultant. The findings and recommendations of this evaluation will be integrated into a wider learning process within UNICEF, into the DFID-funded UNICEF emergency preparedness and response capacity-building programme and the DFID-UNICEF Institutional Strategy Paper.

The main purpose of the evaluation is to draw lessons from UNICEF's response to the Darfur crisis and to make recommendations in order to strengthen UNICEF's support to the Darfur operation. The evaluation aims to carry out a systematic assessment of UNICEF's experience and performance in planning, organising and managing the early response. The objectives of the evaluation were to:

- Examine the relevance and timeliness of preparedness planning, early intervention and the 90-Day Plan, as well as the effectiveness and efficiency of the management and operational support;
- Extract lessons to help UNICEF enhance its preparedness and its ability to respond in a meaningful and effective way to emergencies.

Although in many respects this mission resembles a 'real time' evaluation, it is not labelled as such because it was not designed according to the UNICEF pilot RTE methodology.

The Terms of Reference are presented in the Appendix 1.

2. METHODS

2.1. Presentation of the method

The team was composed of two consultants from Groupe URD (a French-based research and evaluation institute, www.urd.org), a senior staff member from UNICEF NYHQ and a highly experienced member of the DFID-CHAD team. The team members represent a variety of institutional and cultural views and a wealth of experience, which proved to be a great asset in the evaluation process. Additionally, the team comprised two women and two men and this attention to gender balance enabled the Evaluation Team to assimilate gender issues at all times.

The evaluation used the methodology recommended in the various reviews of good practice in the sector, such as ALNAP, ODI and OECD/DAC. This included:

- Documentation review at various levels and across a range of sectors, including financial and logistical data;
- Discussions with UNICEF staff in the Darfur offices, Khartoum Country Office (CO), the Regional Office (RO) in Amman and New York Headquarters (NYHQ);
- Discussion with institutional stakeholders in Darfur and Khartoum, including UN agencies, host government, NGOs and donors;
- Visits to the intervention sites in IDP camps in the three Darfur states;
- Discussions with beneficiaries during individual or semi-structured group interviews.

The report meets most of the requirements of UNICEF's 'Evaluation guidelines' and complies wholly with ALNAP's 'evaluation proforma'.

Information was triangulated and validated through a series of mechanisms, including:

- Regular feedback sessions with the UNICEF CO;
- Visits to UNICEF Regional Office (RO) in Amman and UNICEF New York headquarters (NYHQ);

- A two-day workshop in Khartoum, with the participation of UNICEF staff from the three Darfur Field Offices (FO), Khartoum Country Office, Chad Country Office, the Regional Office and New York Headquarters;
- A meeting with DFID staff in Khartoum;
- A feedback presentation to the donor community in Khartoum;
- A presentation of findings was held in Geneva, which was attended by representatives from UNICEF NYHQ, RO, CO and DFID.

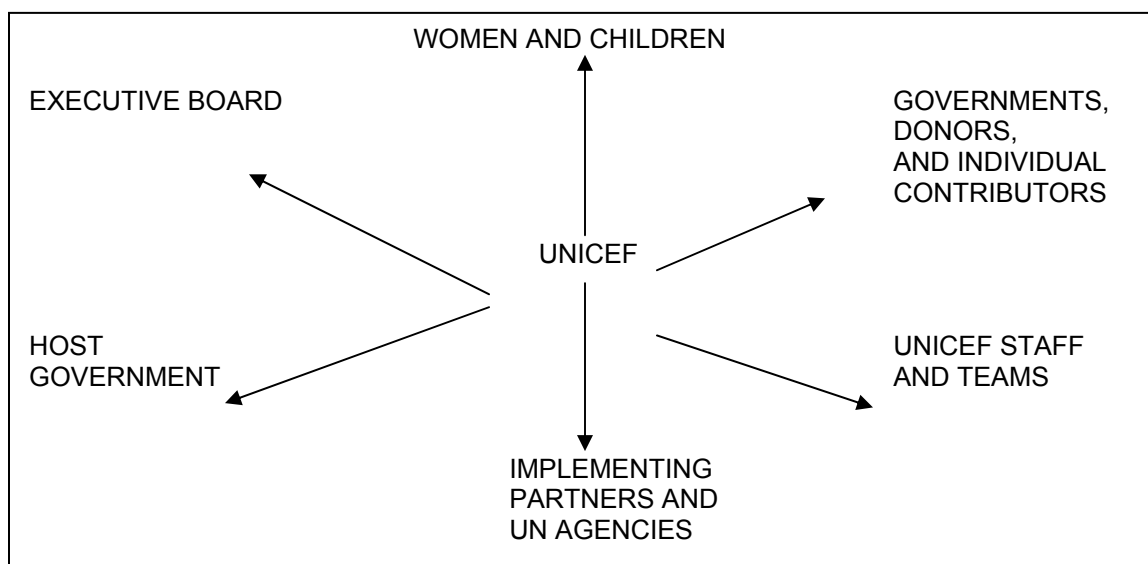
The Evaluation Team's itinerary is presented in Appendix 2, a list of people consulted during interviews and by phone is presented in Appendix 3, and Appendix 4 presents a bibliography.

A general methodology was established whereby the evaluation team would examine UNICEF's preparedness and response in relation to:

- the UN Country Team and the international community's response to the Darfur crisis;
- a timeframe ranging from the initial stages of the crisis (February 2003) to the end of the 90-Day Plan (June-August 2004), covering the implementation of the 120-Day Plan and field visits in early November 2004;
- the overall UNICEF set-up, taking into account the viewpoints of the UNICEF Country Office, Regional Office, New York headquarters, Supply Division in Copenhagen and EMOPS in Geneva;
- inter-agency mechanisms, taking into account the views of a wide range of donors, UN agencies and NGOs.

An accountability framework was drawn up, as illustrated below.

Diagram 1: Accountability framework



In order to inform stakeholders of the Evaluation Team's progress, the following documents were prepared and circulated:

- an Inception Report one week into the evaluation timetable, indicating how the evaluation process had been initiated and how it was developing;
- an Interim Report with findings, conclusions and recommendations, which was presented to key stakeholders on the Evaluation Team's departure from Khartoum on 10 November 2004;
- an initial version of the Executive Summary and Recommendations, which was circulated prior to the Geneva workshop on 19 November 2004.

2.2. Limitations

Several limitations have affected the Evaluation Team's work, including:

- Limited duration of the evaluation, albeit a common factor in most evaluation exercises: evaluating a significantly large and widespread humanitarian programme in a complex emergency context over a three-week period is a demanding exercise.
- Complex set-up with a large number of stakeholders: the Evaluation Team invested a significant amount of time in interviewing institutional donors, other agencies, UNICEF Amman and New York, which left less time available for information gathering at beneficiary level.
- Inconsistent sets of data used in different publications and reports. The triangulation of various sources of quantitative data represented a significant problem. UNICEF quantitative data from various sources often did not match and errors were identified, which made it necessary to re-transcribe data correctly into new spreadsheets. Certain data contained in this report may not match the Humanitarian Profiles because in some instances it has not been possible to identify the origin of the Humanitarian Profiles data;
- Tight time schedules: a second series of interviews with UNICEF sector coordinators would have been extremely useful upon return from field visits.
- Information management in general could be improved at CO and ZO level: tracking down documents and information proved time consuming.
- Information has not always been made readily available and cooperating with certain sectors has been cumbersome: information has in certain instances not been forwarded.
- The Evaluation Team dispersed just after the Khartoum learning workshop, limiting the time available for collective drafting⁴. Despite the best efforts of the team, drafting the report within the given deadlines proved difficult.

3. DARFUR: BACKGROUND

3.1. A fragile area

The 'Country of the Fur' has always been a case apart in the Sudanese chess game. The region was integrated into Sudan in 1916 under the Anglo-Egyptian condominium. The Sultanate, run by the Fur Sultans, is part of a transition belt between desert and tropical zones. Darfur represents a contact zone between pastoral groups and farming communities and has always benefited from dynamic commercial exchange. Confrontation regarding land or water rights are fairly recurrent but are often settled by means of traditional conflict-solving mechanisms. The region has been severely weakened in recent years due to desertification and has experienced regular food security crises, of which the most significant were in 1973, 1985 and 2000. Darfur populations possess an extraordinary capacity to cope but their resilience has been placed under serious pressure recently. These factors have inevitably had repercussions on the recent course of events.

For many reasons, Darfur remains an area that has been overlooked repeatedly by central government. This led to a serious feeling of injustice and dissatisfaction amongst the Darfur population and tensions have run high on a number of occasions. The Darfur region was divided into three administrative sectors, the three Darfur states, as part of a 'divide-to-rule' strategy.

3.2. The crisis

The history of Darfur consists of low intensity but cyclical crisis events. Although initial signals indicated that a crisis was developing in this remote western part of Sudan, the international community's attention was focused on other events. At this time, access for journalists was extremely limited. The Iraq war and a series of natural disasters, including the Bam earthquake in Iran, were dominating on the international

⁴ Departure of DFID representative on 5 November, UNICEF representative on 6 November and team leader on 7 November.

scene. Apart of the response to the Kassala floods in August 2003, the primary focus in Sudan was on the North-South Naivasha Peace Process. Hence, the UN Country Team focused all its efforts on preparing the 2004 Appeal for Sudan Assistance Programme (ASAP) in the event of lasting peace. As a result, most agencies, including UNICEF, were geared towards rehabilitation and development operations.

It was only when the number of IDPs began to rise sharply and the crisis spilled over into Chad in a significant way that the media began to cover the widespread suffering. The region made a dramatic comeback to the front pages in March 2004 when the then UN Humanitarian Coordinator, Dr. Mukesh Kapila, declared Darfur 'the world's worst humanitarian disaster'. After months of efforts to relieve constraints, significant amounts of humanitarian aid finally began to arrive in Darfur in early June, and by August the number of aid workers present in the region increased significantly.

With the gradual escalation of the crisis in Darfur, the number of IDPs and refugees swelled to unprecedented levels throughout 2003 and into 2004. In summer 2004, OCHA estimated that approximately 2 million people had been affected by the crisis, which included IDPs, refugees in Chad and resident populations across a geographical area the size of France. The challenges facing the international community were, and continue to be, overwhelming.

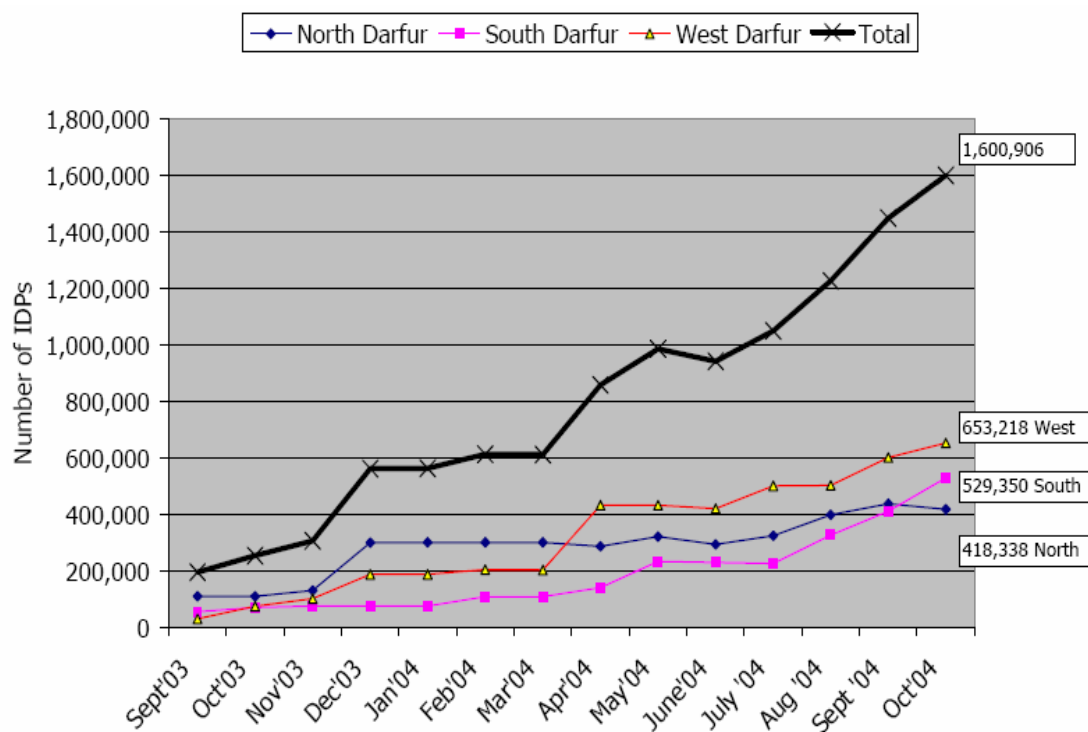
Displacement rates varied in the three Darfur states and three distinct phases can be identified:

Phase 1: Up to November 2003, a sense of urgency had not fully emerged in the aid sector.

Phase 2: From December 2003 to April/May 2004, the situation worsened and access was extremely difficult.

Phase 3: From April/May 2004 onwards, the situation is marked by a sharp rise in the IDP population.

Graph 1: Number of IDPs in Darfur



Source: UN estimates, October 2003

3.3. The international response: facts and figures

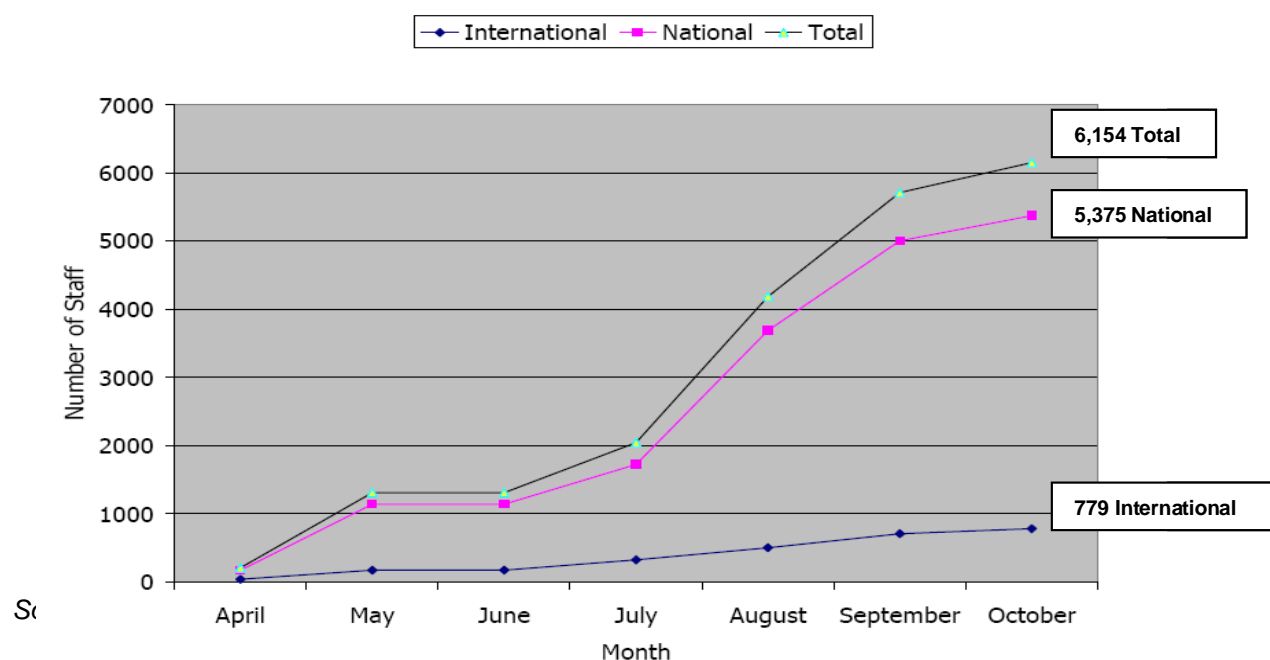
The slow response to the Darfur crisis is the joint responsibility of the Sudan government, the UN system as a whole, the donor community and NGOs. The UN Country Team did not grasp the gravity of the situation in Darfur until end 2003, at which point the alert was raised. Field visits and flights over the affected areas in early 2004 enabled the international community to verify the extent of the crisis.

Several constraints affected the international response to the unfolding Darfur crisis, including:

- The UN Country Team's (UNCT) persisting focus on the development and recovery oriented 2004 Appeal for Sudan Assistance Programme (ASAP);
- General desire not to upset the Sudanese government at a crucial time in the North-South negotiations;
- Restrictions imposed by the Sudan government in terms of visas and travel permits dramatically affected the rate at which emergency relief teams were deployed on the ground, at least until a 'fast-track system' was established in June 2004, thanks to pressure exerted by the international community.

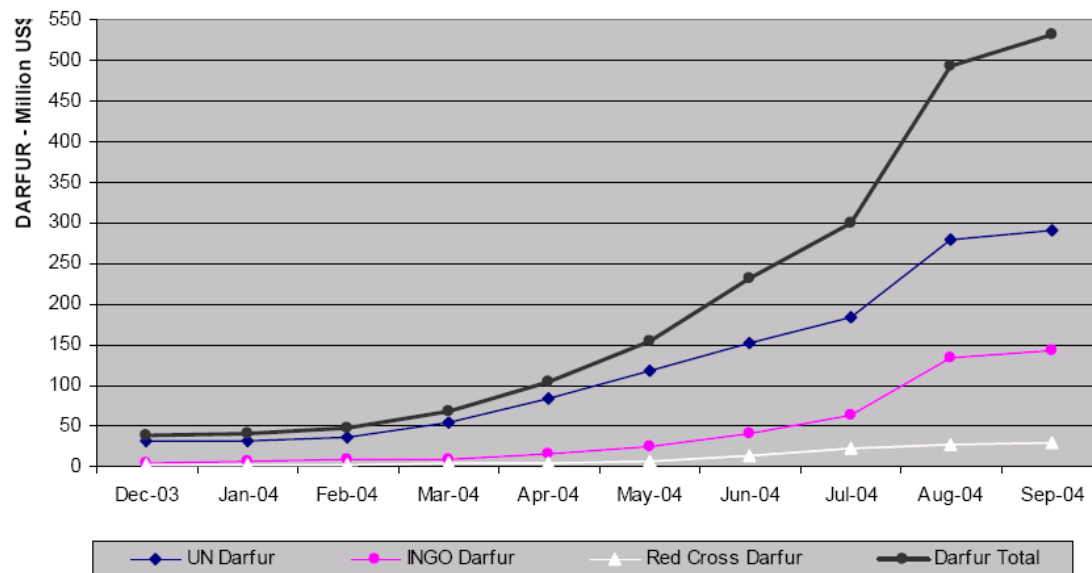
The delay in mobilising an adequate response is clearly illustrated in graph 2 below.

Graph 2: Aid community presence in Darfur



Donor funding for the international humanitarian response was initially slow to arrive and was provided by a few key institutional donors, as illustrated in graph 3 below.

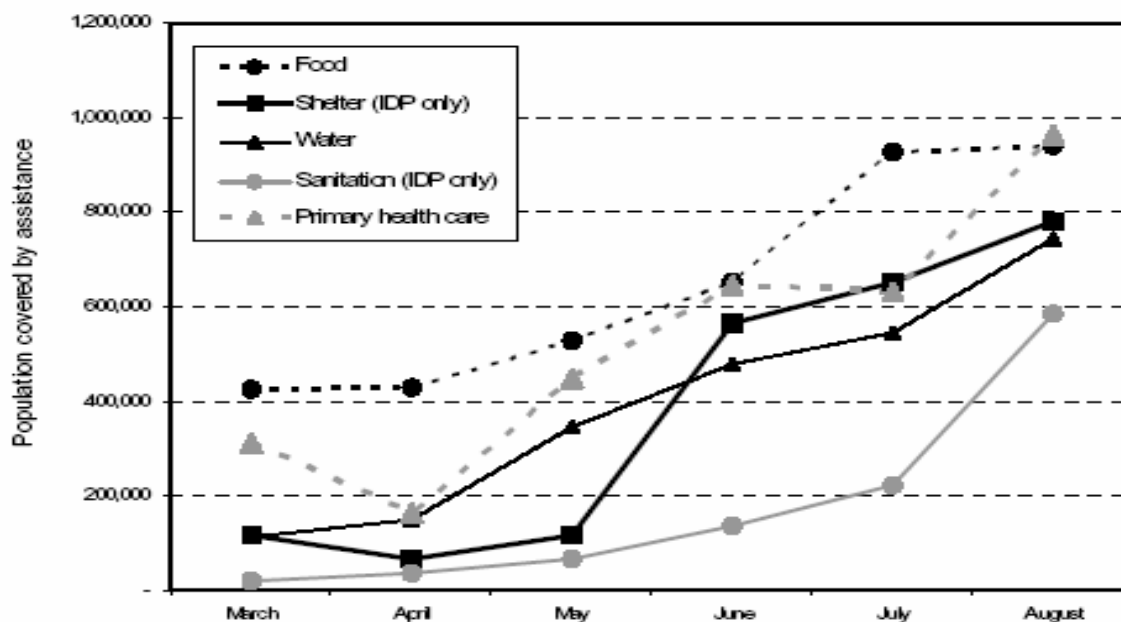
Graph 3: Resources mobilised for the Darfur crisis



Source OCHA

However, the international community's efforts speeded up in May and June 2004.

Graph 4: Population covered by assistance



Source: OCHA

4. UNICEF INTERVENTIONS IN DARFUR

UNICEF has been present in Sudan for over three decades. Prior to the onset of the current crisis, regular country programme activities 2002/2003, and in particular the Child Friendly Community Initiative project (CFCI), focused on supplying integrated service packages to the most vulnerable communities within the three Darfur states.

UNICEF's response to the Darfur Crisis has received criticism from both institutional donors and other UN agencies. While some criticisms regarding UNICEF's internal preparedness and management of the initial response are valid, UNICEF was by no means the sole body responsible for initiating a tardy and inadequate response. The donor community, many UN agencies and the majority of NGOs were also late in gearing up.

The UNICEF response to the Darfur emergency comprised four phases.

Early phase: from March/April 2003 to beginning October 2003

UNICEF was among the very few agencies present in Darfur. With three national staff based in Nyala, UNICEF's response was comprised of small-scale interventions. Over this period, the field offices submitted requests for further support and staff were dispatched from the Nyala office to El Geneina and El Fasher. Government restrictions, limited resources and insufficient implementing partners, excluding government agencies, have impacted the UNICEF response.

Intermediate phase: from November 2003 to early Spring 2004

Security conditions worsened and access was severely restricted. At this point, only limited emergency funding was available for Darfur, yet the wider donor community was slow to respond. The UNICEF Country Office (CO) continued to provide support where access permitted, relying to a large extent on existing human and financial resources. There was a growing awareness at UNICEF NYHQ and Regional Office (RO) of the developing emergency situation.

Development of a full-fledged response: May to September 2004

UNICEF activated the corporate trigger on 20 May 2004, declaring that the situation in Darfur was an organisation-wide emergency. UNICEF's response expanded significantly by June/July 2004 thanks to a substantial injection of experienced emergency personnel and financial resources. The response shifted towards emergency programming which had a significant impact on the ground. 13 August 2004, the Corporate Trigger was extended for an additional two months, i.e. to 19 October 2004, on the grounds that Sudan was in the throes of the rainy season and the UNICEF response, though solid, was unable to respond to the large scale of the crisis. The rains, the risk of water-borne diseases has increased and it was necessary to scale up efforts, particularly in WES, nutrition and protection. The UNICEF 90 and 120-Day Plan provided targets for the response. NGO implementing partners began to arrive in greater numbers.

Stabilisation phase: October 2004 - present

Now that operations are relatively well resourced, both in human and financial terms, UNICEF has begun to consolidate its activities. The recent nomination of a UNICEF Special Representative with authority in both Sudan and Chad has also had a positive impact on the Darfur response. The challenge now is to maintain momentum, reinforce coordination activities, improve the quality of the response and lay down a strategic long-term plan.

The CO drew up the 90-Day Plan which covered June to August 2004 and included health, nutrition, child protection, education and WES as target areas. This was the first time that CO was able to provide a well-structured and detailed plan, which included supply requirements.

5. GENERAL FINDINGS

Despite numerous difficulties, which are outlined below, it is the Evaluation Team's appraisal that UNICEF staff has approached the response with dedication and commitment. The comments attached should be seen within the broad understanding that, despite a difficult early phase lasting until June 2004, UNICEF relief efforts have since gathered momentum in Darfur. As the response geared up, these efforts have had a tangible impact on the lives of more than two million beneficiaries.

5.1. UNICEF shifts quickly into first gear, slowly into second and third

The situation in Sudan, with ongoing peace efforts in the South, efforts being undertaken to prepare for the possibility of lasting peace, and long term development programmes in the North, shaped the UNICEF response. In this situation, shifting from a development-oriented operational mode, characterised by bilateral dialogue with the government, to an emergency response was a problematic and lengthy process. The strategy adopted by the UNICEF sections of the Darfur Initiative (September 2003) and the Sudan 2004 Consolidated Appeal Process (CAP) does not seem to have changed dramatically from the development-style approach that was in place in Autumn 2003.

The CO was not prepared to deal with a crisis of this magnitude. The most recent Emergency Preparedness and Response (EPR) process took place in November 2001, with a contingency plan to target 35,000 people within ten days over a two-month period. Although it did include a multi-risk analysis, it focused on a natural disaster or a small-scale conflict, and was not subsequently updated⁵. All stockpiling was geared towards this contingency plan.

Given the limited presence of UNICEF in Darfur, the early warning/response issued by the Nyala office was timely (Oct 2003) but small-scale and reactive rather than pre-emptive. Early warnings from Nyala staff resulted in a site-specific response but CO was slow to realise the scale of the crisis.

At regional and HQ levels, UNICEF was slow to provide support until the corporate trigger was activated. Among the reasons for the slow response were:

- UNICEF's emergency response systems were not triggered at an early stage, indeed, the Corporate Trigger mechanism was only created in January 2004 and regular procedures were not geared towards an emergency response;
- Access to Darfur was very limited due to insecurity and logistical constraints (security deteriorated drastically in December 2003 and all staff had to be relocated);
- Besides the government partners, there were very few NGO implementing partners operating in Darfur;
- There were limited funds available to scale up the response in the initial stages and reluctance on the part of the CO to exceed the US\$2m Emergency Programme Fund (EPF) loan, in view of possible repayment difficulties;
- Delay in amending activities in the Project Plan of Action from development to emergency focused interventions.

Following the corporate trigger on 20 May 2004, support systems began to gear up within weeks. The interim Head of Office who arrived in Khartoum early June managed to maintain and indeed boost the momentum of the emergency response. This included a rapid deployment of emergency staff, participatory planning, and 'off the shelf' emergency planning for CO core staff. These measures had a tangible effect on IDP camp management.

⁵ The CO submitted a request to the RO on 30 March 2004 for a visit from EMOPS Geneva to update the EPRP, but it was agreed that the timing was not appropriate.

Box 1: Positive achievements

Despite the complexity of the situation and the many logistical, security and resource constraints that were encountered by the Sudan Country Office, the evaluation findings suggest that there were many positive achievements where UNICEF's response improved the conditions of the IDPs and where the staff can feel justifiably proud of their hard work.

Among these were the following:

- Initial advocacy (Dec 2003/Feb 2004) of UNICEF on access and the rights of women and children in Darfur;
- The provision of emergency supplies from the contingency stockpile;
- The mobilisation of resources, in early 2004, to increase the level of interventions (funds from EPF and CERF were released);
- The declaration of an organisation-wide emergency in May 2004 substantially bolstered UNICEF's Darfur Response;
- Participatory workshops which brought Khartoum staff to each of the Darfur states to engage with Field Offices and partners on the 90-Day Plan are an example of good practice;
- Carrying out mass polio and measles vaccination campaigns (UNICEF, WHO and local structures) in both government and SLA controlled areas;
- Achievement of key targets in each sector of the 90-Day Plan, including meeting deadlines to deliver reliable, drinkable water in some areas, for example, Mornie prior to the rainy season;
- Eventual use of private contractors (June 2004) in drilling and latrine construction to meet increased targets.

5.2. Operational constraints

5.2.1. Political aspects and remoteness

Until June 2004, the GoS imposed a number of restrictions on travel permits, visa applications and customs procedures. Staff were unable to travel to the region, situation assessments could not be carried out and emergency supplies could not be delivered. This situation dramatically improved as of June 2004, when the government established a fast-track system as a result of international pressure.

The Sudan Liberation Army (SLA) and the Justice and Equality Movement (JEM) continued to set higher conditions for entry into the areas under their control, hindering operations even further.

Darfur is an extremely remote and isolated region, El Geniena being the furthestmost point inland in Africa. The terrain is harsh and tarmac roads are extremely limited and, in most areas, the only transport network is made up sandy roads, which quickly become inaccessible during the rainy season⁶, making transport difficult and costly. Apart from air transport, which has its own limitations due to climatic conditions and cost, movement of goods and personnel is fairly restricted, especially during the rainy season.

5.2.2. Security

The security situation was probably the main constraint, although conditions have fluctuated during the period under review. Following a relatively tense mid-2003, access improved gradually, until it deteriorated severely once again during the first months of 2004. After an easier period from May to mid October 2004, security has begun to deteriorate once again recently.

UNSECOORD's capacity to establish security clearance has been a constraint at times. Security Officers were not deployed full time in the field until February/March 2004. When there were only a limited number

⁶ Darfur is part of the sahel-saharian belt with 200-400mm of rain over a three-month period, resulting into frequent flash floods.

of agencies on the ground, the UNSECOORD team that was deployed was apparently sufficient but with the increasing number of projects, agency staff and sub-offices being opened, UNSECOORD's capacity became overstretched. The most complex issue currently under discussion is the evacuation of non-UN Staff. Security measures adopted by the UN and NGOs vary significantly and this affects the way humanitarian staff work in the field. UNICEF staff are governed by UN security rules which are more stringent than those applied by some of the NGOs. This has resulted in NGO staff having, at times, better access to areas to initiate activities and monitor results.

MOSS (Minimum Operating Security Standards) compliance was a major challenge as each security officer assessed the security threats in a different way. The minimum standards were raised significantly late in the emergency. The efficiency of certain components of the country-specific MOSS (Thuraya in every car, anti-personnel mine protection for each vehicle, etc.) is questionable. It is possible that while anti-personnel mine protection, in particular, may give one a sense of security, in reality it offers little protection against the threat of anti-tank mines.

UNICEF nevertheless tried its best to adhere to MOSS, as far as possible, taking into account the regular changes. This has meant considerable effort focused on changing office/guesthouse locations and retrofitting offices and vehicles with equipment that could have been provided with greater efficiency when the vehicles were first procured or offices first installed.

5.2.3. Other constraints

UNICEF faced a range of external and internal implementation constraints, some of which were specific to the organisation while others were similar to those faced by other UN agencies and NGOs:

- UNICEF does not implement directly, but works through government and non-government implementing partners. Although, this strategy works well in a development programme, it is a constraint when a quick action response is needed, where the Government is seen as party to the conflict and where NGO partners in the field are scarce. The lack of international presence in the area, coupled with a nearly total absence of local NGOs made UNICEF's task of identifying an implementation strategy more difficult.
- As the timeframe of the CCCs is related to rapid onset crises, meeting the CCC targets in the context of the Darfur crisis (slow onset crises) is partly irrelevant.
- While external missions are important as a means to raise funds and to advocate in favour of children's rights, all three ZOs complained that too many external missions distracted staff from the management of the emergency programme.

5.3. Programme design and planning

For the 90-Day Plan, UNICEF programme design and planning for the Darfur crisis was Khartoum-driven and relied strongly on a theoretical quantitative assessment of the needs since access to the field was extremely limited. Contingency planning did not take place until the preparation of the interagency contingency plan in March/April 2004. Rapid assessments were conducted sporadically in most sectors but the Evaluation Team did not see evidence that this fed into analysis/strategic planning at the Khartoum level. With increased personnel, more comprehensive technical assessments are now being conducted in most sectors.

The ever-increasing number of beneficiaries created complications for planning. Positively, CO implemented revised its planning process as the situation changed over the course of the 90-Day Plan.

An assessment of the Planning Unit's capacity was carried out in Jan/Feb 2004 and the decision was taken to create a post for an international Planning Officer in the April budget, as it was concluded that the Unit did not have adequate capacity to support the challenges that lay ahead. In the meantime, requests to Regional Office and Headquarters for dedicated Planning Officer support for the Darfur emergency were treated as a priority. Support was initially provided by a member of staff from the Afghanistan Office on mission, followed by a mission from Headquarters. This mission of a member of the NYHQ Humanitarian Response Unit in April 2004 was extended to assist the CO in its planning activities.

It would appear that the Planning Unit is still not fully integrated into Darfur Planning discussions. Planning requirements are being evaluated within the context of the new organisational structure and additional resources should be provided if deemed necessary.

On a positive note, in June 2004, the UNICEF acting Country Representative and new Emergency Officer organised field-based workshops, whereby Khartoum-based staff travelled to each Zonal Office to discuss and refine the 90-Day Plan. The process of bringing together UNICEF staff and implementing partners was extremely positive and enabled UNICEF to fine-tune the 90-Day Plan, which had originated in Khartoum. The 90-Day Plan as it was finally implemented highlighted the positive contributions from partners and it is unfortunate that this planning process has not been repeated subsequently.

Although not all UN agencies participated in the development of the UNICEF 120-Day Plan (Sept.-Dec. 2004), this exercise was constructive and appropriately focused on increasing coverage and quality of interventions. Visits to the field were carried out individually by section chiefs, but the 120-Day Plan did not replicate the full participatory process of the 90-Day Plan, apparently for logistical reasons. Although constraints and lessons learned were identified⁷, subsequent planning seemed to be informed primarily by cumulative quantitative reporting undertaken under the 90-Day Plan, for example: latrines constructed rather than number/quality of latrines still functioning. The Evaluation Team did not identify comprehensive assessment documentation on file, nor evidence of in-depth discussions or participatory planning with partners. The 120-Day Plan (September-December 2004) is often perceived as largely a fundraising tool although it is supported by a detailed implementation plan.

Planning for UNICEF activities in 2005 was already underway during the evaluation mission. This process should positively identify gaps and requirements, if devised with clear baseline information on current conditions, capacities and gaps⁸. It is positive that in water and sanitation, approval has been given by the new UNICEF Darfur/Eastern Chad office for a comprehensive baseline survey.

5.4. Monitoring and reporting

5.4.1. Assessment

Despite UNICEF's long-term presence in Sudan and in Darfur⁹, little relevant baseline data on Darfur was available at the onset of the crisis¹⁰. Since UNICEF is not involved in IDP registration, needs assessment and quantitative targets were often based on data produced by different UN agencies and NGOs. OCHA made a commendable effort to ensure a follow-up of the needs assessment process with the monthly publication of the UN Humanitarian Profile, although defining needs often relied heavily on computer generated information as opposed to real field assessment.

Assessing the situation regularly is essential in order to obtain relevant information for the identification of the population's needs and keeping track of trends and dangers. The very unpredictability of population movement, including cross-border displacement, requires constant monitoring of the situation in order to understand the dynamics of the crisis and thus adjust UNICEF action plans. At the ZO level, the HZO is in charge of coordinating the assessments of the various technical sectors.

⁷ See Darfur Planning Meeting 12-13 September 2004.

⁸ The Evaluation Team was unable to ascertain to what extent this was being carried out in all sectors.

⁹ Until February 2004, UNICEF presence in Darfur was confined to a field office in Nyala, South Darfur. This Field Office was in charge of overseeing all UNICEF supported activities throughout all three Darfur states.

¹⁰ Despite various projects developed by the PME (SITAN), very little specific information was available.

5.4.2 Monitoring and Reporting

Monitoring comprises two main branches:

- situation monitoring;
- programme monitoring.

Situation monitoring consists of a series of information gathering and triangulation exercises. This has required much involvement from UNICEF Country Representative and the ZO, implying regular contact with various sources, especially at interagency level. UNICEF situation monitoring was more focused on assessing the situation in the IDP camps rather than tracking the overall situation in the region. As a result, very little information related to resident communities is available. Due to access restrictions, UNICEF was also unable to assess the situation in rebel-held areas.

Programme monitoring is a different exercise, involving the CO and ZOs. The objectives of programme monitoring (reporting, quality control, updated contingency planning) and the end-users (Representative, Section chiefs, Communication) were not clarified in sufficient detail to the staff. Therefore, staff did not always fully understand the link between reporting/analysis, planning and programme revision. Criteria and indicators for the various technical sectors were often defined only as quantitative targets in the OCHA-led 90-Day Plan. Intermediary and task-related indicators and benchmarks, and related monitoring and reporting mechanisms are often lacking in programme descriptions. As a result, field staff encountered difficulties in monitoring activities.

CO level: Planning, Monitoring and Evaluation section

The Planning, Monitoring & Evaluation (PME) section provides support to programmes in all technical sectors and to the country programme as a whole. In the case of the Darfur emergency, PME did not have the capacity to provide sufficient support to meet the ever-increasing demands as the situation unfolded. The unit did not provide sufficient guidance to the programme sections on how to set up proper monitoring mechanisms. Reviews of the CO organisational charts from September 2003 and July 2004 indicate that the unit did not receive additional staff to respond to the new challenges. The limited numbers of staff within PME had a direct impact on its ability to support field staff in planning and implementing comprehensive monitoring systems. By contrast, the Protection and Health sectors have undertaken substantial efforts to develop monitoring mechanisms. A comprehensive set of indicators has been designed, taking into account a large number of variables. The various sectors submit draft reports and the PME unit is in charge of the final editing and formatting. Unfortunately, the Evaluation Team noticed a significant number of calculation and typing errors, a problem that has also been commented on by donors and NGOs. The credibility of data produced by UNICEF has suffered as a result.

ZO level

At field level, staff were responsible for monitoring the interventions carried out in their respective sectors. The responsibility for coordinating monitoring efforts between the different sectors lies with the Head of the ZO. In most instances, the direct reporting line was to the Khartoum-based sector chief. In the Darfur offices, only one staff member has been recruited for full-time monitoring of health and nutrition interventions, sectors in which he has limited experience. This issue was noted in the Human Resource Unit (HRU) May 2004 Darfur field visit report but, as yet, no action has been taken to rectify this situation.

The effectiveness of UNICEF's operations depends upon the capacity of its implementing partners. Thus, monitoring the activities implemented by these partners is an essential task for UNICEF field staff. UNICEF's capacity to monitor programmes in the field was hampered by UN security clearance procedures, which limited field staff travel to UN no-go zones. At the same time, assessing partners' capacity has not been systematic prior to signing of agreements.

Monitoring improved during the 90-Day plan period but remains short-term oriented with little concern for longer-term impact. Monitoring continues to verify compliance with targets, outputs and numbers of beneficiaries, with insufficient focus on the quality or the impact of the services provided.

The reporting demand placed on ZO staff is high. Vast amounts of quantitative data is collected in the field and sent to CO but the Evaluation Team did not see evidence that this information was being analysed, due to time constraints. This weakness in data analysis renders the adjustment or improvement of programmes difficult. Different reporting forms (zonal sitreps, monitoring checklists, field visit) have been developed by the M&E section as a result of the request made in early June by the emergency officer and the CO Representative. Effective monitoring tools were available¹¹ but staff on the ground either did not know of their existence and/or did not use them. The main objective of adopting new monitoring and reporting systems, according to the emergency officer, was to meet donors' specific requirements in terms of data provision and frequency of reporting.

The amount of time ZO staff spent visiting the camps was limited, due to their involvement in coordination activities. In most instances, only limited consultation with the targeted population has taken place. Efforts to monitor the assistance delivered through the government were apparently less rigorous than for NGO interventions.

5.4.3. Knowledge management

A high turnover of international staff has hampered monitoring on the whole. Vacant positions have required ad hoc placements and staff, who were allocated new and/or additional responsibilities, often received little preparation. The lack of staff continuity has also limited the development of an institutional memory at ZO and CO level. Institutional memory has been further stunted by the absence of a system for documenting field experience or preparing comprehensive handover notes as a guide for new recruits, and the generally weak management of filing systems.

5.5. Coordination

5.5.1. UN Country Team (UNCT)

Towards end August 2003, Darfur began to feature in the agenda of UNCT Meetings but was not seen as a priority. The arrival of an OCHA Area Coordinator for Darfur, coupled with the recruitment of staff for OCHA field offices in Darfur and the release of the UN Darfur Initiative in Sept 2003, can be interpreted as indications of initial concern. However, the UNCT minutes reflect a general lack of urgency until December 2003, when discussions on the subject of access gained momentum. It was only in February 2004 that interagency Darfur morning meetings were initiated, and in April 2004 that an interagency contingency plan was drafted. Top-level missions intensified in April 2004, including Dr Kapila, RC/HC, who issued a strong departing statement, Jan Egeland, OCHA and Jim Morris, WFP. These were followed in June by the visits of the UN Secretary General (UNSG), UNICEF's Executive Director Carol Bellami and high-ranking officials from donor governments.

UNICEF fully participated in UNCT meetings throughout the crisis and was an active participant in inter-agency planning mechanisms, including Darfur Initiative, Interagency Contingency Planning and 90-Day Plan. UNICEF CO and field staff also participated in a number of inter-agency assessment missions.

As the UN country team's engagement intensified, it appears that relations between UNICEF and other agencies (RC/HC Office and OCHA) became strained. In Spring 2004, OCHA criticised UNICEF for not having reacted quickly enough and for insufficient capacity. OCHA's criticism of inadequate UNICEF reporting on programme achievements was raised during UNCT meetings. This tension impacted on coordination efforts as information exchange between the two agencies apparently suffered.

The fact that the position of Resident Coordinator/Humanitarian Coordinator was left vacant for a few months at a critical period (April-August 2004) created a level of uncertainty in the UNCT, although a series of highly experienced people were placed for short periods in this key role. With the arrival of the current RC/HC, unity within the UNCT has reportedly improved dramatically.

¹¹ For example, the document "Guidance on Civilian Protection in Darfur" presents valuable recommendations for monitoring humanitarian assistance in Darfur from a protection oriented perspective.

UNCT's expectations regarding UNICEF's operational role and capacity were high in most sectors, largely due to the key role that UNICEF has played in Operation Lifeline Sudan. This did not match UNICEF Khartoum's understanding of its role. Additionally, the HC/OCHA voiced strong doubts as to whether UNICEF could become 'directly operational' and ensure service delivery in the absence of implementing partners, a role that UNICEF was not prepared to undertake¹². Similarly, the UNCT requested that UNICEF undertake the responsibility for coordinating the NFI/Shelter sector¹³. Although UNICEF agreed to appeal on behalf of this sector, UNICEF assessed it did not have the capacity to coordinate the sector. While the Evaluation Team finds it positive that UNICEF did not take on a role that it could not fulfil, this continues to be an issue of contention amongst UNCT team members. UNCT's reluctance to air and resolve issues has proved detrimental to the maintenance of a good working relationship between UNICEF and the RC/HC Office.

5.5.2. Sector coordination

UNICEF was expected to play a lead agency role in four key sectors, namely child protection, nutrition, primary education, and water and sanitation, an ambitious commitment.

The Darfur experience shows that coordinating several sectors is by no means simple and comes at a price. Indeed, an effective performance in coordinating several technical sectors depends upon the agency's ability to identify the necessary resources, both financial and human, and to prioritise.

The sector coordinators were formally nominated in March 2004 when the interagency Contingency Plan for Darfur was drafted. Roles were reallocated in June during a visit by a top-level OCHA delegation. UNICEF participated in sector coordination prior to its appointment in June, yet its performance and capacity in this role varied according to the sector in question. However, the Evaluation Team could not find evidence that this role had ever been clearly defined by the UNCT or the CO.

Throughout the early phase of the response, UNICEF Zonal Offices were not equipped with sufficient technical expertise to ensure effective coordination. With the arrival of additional technical staff over July-September 2004, UNICEF performance improved. However, effective coordination requires that coordinators are competent in the appropriate technical field, that they possess coordination and facilitation skills and adopt a strategic approach to coordination. At the time of the present evaluation, UNICEF was gradually undertaking a systematic analysis of each sector and was engaging in forward planning. However, UNICEF does not have sufficient information management capacity and technical staff are not always skilled facilitators, an essential quality for sector coordinators.

Despite high degree of commitment demonstrated by all UNICEF staff involved in coordination activities at both CO and ZO level, this continues to represent a major challenge for UNICEF¹⁴. There is no clear UN guidance, however, on how to lead sector coordination in the field and there are no minimum standards within UNICEF for effective coordination.

5.6. UNICEF internal coordination

5.6.1. Country Office–Regional Office–Headquarters coordination

Interaction between the CO, RO and HQ has not always been optimal throughout the crisis, although improvements were noted post-May 2004, and, more recently, with the appointment of a UNICEF Special Representative for Darfur and Eastern Chad.

¹² This was a key issue for most UN agencies in Darfur.

¹³ OCHA was in need of a coordinating agency with a logistic capacity, while the donors were looking for a cost-effective mechanism to ensure proper management of procurement, delivery and reporting.

¹⁴ UNICEF will need to examine its capacity to invest in key sectors globally and make some hard choices regarding prioritisation. If UNICEF does not have the capacity to undertake effective coordination in all five sectors, it should focus on those it can do well and engage in dialogue with the wider International Community to identify an alternative agency.

The CO dealt with the initial response in relative isolation apart from its support structures within the RO and HQ. The CO's initial impression that it could handle the situation, followed by the slow realisation that the emergency was going to exceed their limited resources, delayed early engagement with RO and HQ (sitreps to RO and NYHQ only commenced in Dec 2003). Requests for ad hoc staffing support increased in early 2004 but did not include dialogue regarding the overall UNICEF response strategy, nor advance contingency planning.

The CO was apparently not fully aware of the range of emergency tools, including human resource pools, emergency response templates, or funding streams, such as details of EPF terms. This points to a relatively ineffective dissemination at Country Rep/Senior Management level of the work carried out by EMOPS over the past few years. Importantly, NYHQ did not realise the extent of CO's reluctance to exceed current funding levels, which was also preventing the country team from exploring alternative options. It was only in May 2004 that HQ confirmed that CO should not let its capacity to repay the EPF loans restrict its emergency response.

The CO did not significantly expand its staffing structure at Khartoum level in the initial stages, despite repeated prompting from NYHQ. As a result, existing CO staff, particularly the management structure, were placed under extreme pressure. Designating a specific team for Darfur within the CO was not seen to be necessary, although Darfur-specific meetings with section chiefs began in late 2003. The search for a Field Operation Officer commenced in February 2004 but the position was only filled two months later. NYHQ later decided to upgrade this position to Emergency Coordinator for Darfur (confirmed beginning June 2004). This appointment had a substantial positive impact.

NYHQ was slow to realise that the CO required strengthening. RO contact with the CO was maintained throughout 2003 and the CO's request to establish two additional Zonal Offices in November 2003 was processed quickly. However, it is only as a result of visits to Khartoum and Darfur in late 2003 (Emergency Advisor visit in December 2003) that the RO began to appreciate the rate at which the situation was escalating and the CO's limited capacity.

Offers of strategic advisory support (i.e. RO advisers, nutrition consultants, stress counsellors, etc) from the RO were in many instances not taken up by the CO due to concerns regarding costs, perceived limited added value and appropriateness, and general work overload at Khartoum level. Although CO seems to have another perception of events, this created a certain feeling of frustration at RO level. Information flow between CO and Regional Advisors varied depending on the sector, but in many cases was not optimal, which further limited the regional advisors in assisting the CO.

The absence of a WES regional advisor was a notable gap in the Darfur crisis. The RO did provide support on Child Protection via the RO Assistant Emergency Officer, which was highly appreciated. However, the RO Assistant Emergency Officer's post remained vacant for a four-month period until August 2004, severely affecting key support work.

With the exception of the Department of Human Resources (DHR), technical engagement from NYHQ was minimal during the initial response, apart of the Darfur-related mission carried out by EMOPS Director in December 2003. Technical capacity evolved with time, however, with an increasing number of visits from top-level delegations, including EMOPS Director and UNICEF Executive Director visited in June 2004, EMOPS Directors visited again in September. The deployment of an advisor from NYHQ HRU strengthened UNICEF CO's capacity at a critical time, yet most NYHQ technical advisors that the Evaluation Team consulted have not visited Darfur nor do they appear to have had much involvement beyond participating in conference calls with CO.

UNICEF's decentralised organisational structure did not simplify its handling of the Darfur crisis. Despite the RO having direct supervisory responsibility over the CO, and NY EMOPS's role in emergency situations, neither the RO nor NYHQ felt empowered to engage with and challenge the CO in its management of the crisis. Although the RO ordered a number of field visits and support visits throughout the response, the RO and NYHQ could have been significantly more rigorous in imposing structural support on the CO.

Post-May 2004, engagement between the CO and HQ intensified. However, UNICEF will feel overload 'if the alert is sustained is sustained over a long period or if more than one large-scale emergency occur simultaneously. UNICEF is currently examining ways of diversifying its response options at HQ, RO and CO levels to better react to emergencies (see Appendix 6).

The Evaluation Team views the appointment of a UNICEF Special Representative and the cross-border approach to Darfur and Chad as a positive step forward in UNICEF's response. However, the challenge remains to ensure connectivity with the wider UNICEF Sudan programme, which will entail the eventual re-integration of emergency interventions into the country programme, as and when appropriate. Additionally, given Sudan's history of disasters and emergencies, the creation of a Special Representative should not detract from the CO upgrading its preparedness status.

5.6.2. Coordination between Country Office and Zonal Offices

In October 2003, when the crisis was developing, the Nyala sub-office sent a memorandum to the CO suggesting that a task force be drawn up and requesting support in the form of additional staff and drivers. This request did not receive any follow-up from the CO. When attacks against civilians increased in the region, the Nyala sub-office was divided up in order to ensure an UNICEF presence in the three states. UNICEF deployed staff to the three state capitals as early as November 2003 and Zonal Offices were established in El Geneina and in El Fasher in February 2004, an appropriate and timely move.

However, due to the slow deployment of additional staff and, in some cases, operational equipment (including vehicles, computers, radios, etc), the Zonal offices struggled to keep up the momentum in the early months. A lack of communications equipment and other basic office infrastructure in the initial stages hampered information flow and increased the feeling of isolation. This has improved only very recently with the installation of VSAT and other communications equipment. Since programme staff was deployed prior to support staff, the Regional Programme Officer (RPO) was obliged to spend a considerable amount of time setting-up the office, which detracted from programme implementation

Prior to the introduction of the 90-Day Plan, the Zonal Offices were not fully involved in the decision-making process with the CO in Khartoum, and, to a certain degree, this situation persisted into the 120-Day Plan, resulting in low morale and a general lack of understanding of the overall UNICEF strategy.

Limited communication between technical staff in the field offices and the supply section in Khartoum meant that the dispatch of relief items was difficult to follow up. This was particularly true for the nutrition sector, since nutrition supplies are delivered directly to implementing partners in Khartoum.

The management of the emergency response was not integrated into existing country programme infrastructure in Darfur, but replaced it. This point was raised on several occasions by the GoS as an important issue requiring urgent attention.

Despite the fact that the general situation and ongoing events throughout the three Darfur states were obviously interlinked, the ZOs worked predominantly as separate units. At programming and operational levels, management, and to a large extent communication, were top down between Khartoum and the field offices. There has been limited information-sharing between field offices, even when events in one state have had implications for the neighbouring state, such as population movement.

5.6.3. Cross-sector links

To what extent internal coordination facilitated multi-sector approaches and synergies remains to be seen. It is evident that attempts to coordinate and synergise programme activities have been made, as demonstrated by the collaboration between:

- WES and Education, in order to ensure that schools are equipped with water points and latrines;
- Education and Child Protection;
- Health and Nutrition, in order to ensure that Nutritional Centres are supplied with the necessary drugs required for treating the children in their care.

This cooperation has been attributed to personal relationships across sectors rather than a particular strategy.

5.7. Relations with donors and funding

5.7.1. Emergency funding mechanisms

Significant resources for the Darfur Emergency began to be mobilised in early 2004. Up until October 2003, interventions in Darfur were funded from Regular Resources (RR) and non-emergency Other Resources (OR). In the month of October alone, four orders were placed for drugs, medicine, tarpaulin, therapeutic feeding sachets and UNIMIX for a total value of approximately US\$115,000 (including freight) using emergency funds from USAID/OFDA¹⁵. On 19 December 2003, the CO received a US\$2 million loan from the Emergency Programme Fund (EPF). Two loans totalling US\$5.3 million from the Central Emergency Fund (CERF) and US\$2.5 million from additional Regular Resources (RR) were also made available for the Darfur emergency.

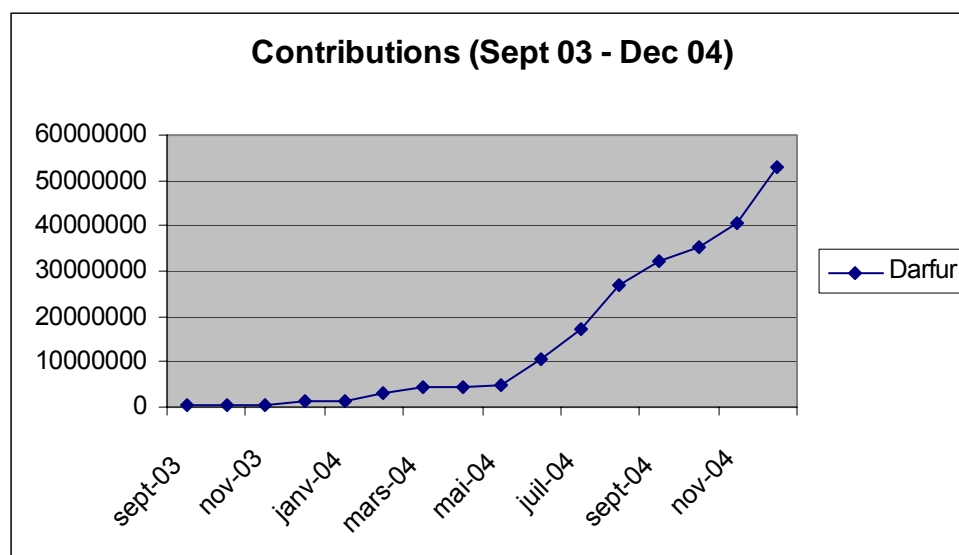
UNICEF produced a three-phase plan to donors:

- Phase 1: April-May 2004;
- Phase 2: June-August 2004;
- Phase 3: Sept.-Dec. 2004 inclusive.

This was a positive initiative, which was launched earlier than many other UN agencies. CO staff highlighted that the plan constituted a useful starting point for organising the initial response. Apart from a few of the early donors, such as Italy, Ireland and Norway, which supported the early UNICEF emergency activities, the donor community began to engage in February 2004.

Although funding was slow during 2003, the increase in 2004 ensured that 70% of the total funding requirement of US\$61.9 million presented by UNICEF within the 90-Day Plan was reached by end September.

Graph 5: Change in funding contributions

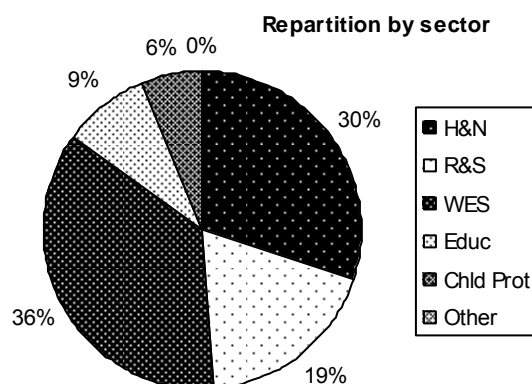


Source: UNICEF CO

¹⁵ PBA SM 03/0566-02

The allocation of funds per sector is also an important factor as certain sectors were better resourced than others. Health & Nutrition and WES represent altogether 2/3 of the whole resources.

Graph 6: Funding contributions by sector



Source: UNICEF CO

5.7.2. DFID - UNICEF Relationship

DFID and UNICEF are already engaged in various types of partnership through the Institutional Strategy Paper (ISP)¹⁶ and country-level grants¹⁷. In addition DFID and UNICEF are currently implementing a programme to develop UNICEF's emergency preparedness and global response capacity¹⁸. Both the DFID-UNICEF ISP and the current capacity building programme are approaching their final year and an evaluation of each is currently being organised.

Through these partnerships, DFID and UNICEF have developed a relationship marked by honest critical dialogue, accompanied by targeted support aimed at improving UNICEF's overall capacity to deliver in emergency response.

The relationship between DFID and UNICEF during the Darfur operation has been characterised by the same principles of frank exchange. At headquarter and country levels regular communication has taken place, both bilaterally and in wider donor forums. UNICEF HQ was proactive in taking advantage of meetings and written correspondence with the Secretary of State to request assistance from DFID in lobbying for better access to NGOs. DFID made the most of opportunities at all levels to express concern regarding the speed and capacity of UNICEF's in-country response from early February 2004.

Due to a perceived lack of progress in addressing concerns at country level, DFID London pursued contact with Senior Management of UNICEF HQ in Spring 2004 to discuss Darfur¹⁹. While addressing issues at senior level was positive, more frequent mid-level operational HQ-London contact between the DfID Sudan Unit and EMOPS might have been more effective in resolving operational questions.

Criticisms voiced by DFID at country level and via NYHQ were coupled with targeted offers of support (financial, HR, in-kind) to assist UNICEF CO in improving its response. Simultaneously, uncoordinated contacts between different sections or levels (HQ, CO and even within CO) of UNICEF and DFID did add to the impression of chaos.

¹⁶ Budget of £56 million (2003-2006).

¹⁷ Budget of £61 million for 2003 (Source: UNICEF statistics).

¹⁸ Budget of £15.65 million (2002-2006).

¹⁹ June/July 2004 correspondence and meetings between Hillary Benn, UK Secretary of State for International Development, and Carol Bellamy, Executive Director, UNICEF, meetings between DFID and UNICEF staff regarding the global capacity building programme, DFID speech during Executive Board Sept. 2004.

Table 3: DFID resources to UNICEF programmes in Darfur

Financial totals	Human Resources (3 months)	In-kind contributions (DFID procured)
£1 million (Feb.-Dec. 2004, although pledged in October 2003 against UN Darfur Initiative)	4 WES staff	Truck-mounted Drilling Rig with truck (not yet delivered)
£1.5 million (May-Dec. 2004)	1 Health	1 pick up and 3 water tankers
£1.915 million (Sept.-Oct. 2004 pledged)	2 Nutritionists	NFIs in kind = £1.365 million
		Contribution to common pipeline (mosquito nets worth £122,000)

DFID funding, first pledged in October 2003 and paid early 2004, and other support assisted UNICEF in escalating its response. DFID human resource contributions via surge capacity were critical in ensuring that additional emergency technical staff were deployed in key sectors (water and sanitation, health and nutrition). However, delays in obtaining responses from UNICEF HQ/Programme Funding Office (PFO) on Terms of Reference (TOR) and candidate selection (6-14 days) should be examined to ensure the process can be speeded up in the future. Although the Programme Funding Office should be kept informed of discussions with DFID, contact on surge capacity should be centralised with one surge capacity focal point within UNICEF (DHR NY or EMOPS Geneva).

The UNICEF policy of only accepting new vehicles, which apparently differs from other UN agencies, increased costs and lead times for vehicle procurement. The added value of DFID procurement of some in-kind items (drilling rig, mosquito nets) is questionable. The DFID procurement of the drilling rig was especially problematic, as extensive delays were experienced in finalising specifications with UNICEF CO and identifying a supplier that was acceptable to UNICEF. The specifications that were supplied by the WES Section to DFID were inaccurate²⁰ and WES Section's choice of an expensive heavy drilling rig over lighter, and less expensive, rigs (a decision which was queried by DFID in writing) raised questions about UNICEF's emergency technical capacity in country and caused extensive and avoidable delays.

Again, although the PFO should be kept informed by correspondence, an appropriate technical focal point should be identified with the responsibility of processing specifications. In the case of the drilling rig, the HQ WES Department was not informed of the discussion on specifications. Despite initiating procurement discussions in June, specification was finally agreed by UNICEF in September/October 2004. The DFID-procured rig is expected to arrive in December 2004/January 2005.

5.8. Staffing Issues: a major bottleneck

5.8.1. Strategic deployment of Human Resources

Slow identification and strategic deployment of human resources (i.e. getting the right people in the right place at the right time) have proved a major constraint for the UNICEF response in Darfur.

²⁰ It is technically impossible to construct a drilling rig based on specifications provided.

Table 4: Current Field Staffing for Darfur operations

August 2003	February 2004	June 2004	July 2004	August 2004	Sept 2004
3 national staff. No member of staff in Khartoum was deployed full-time on Darfur.	6 national staff + 1 international (RPO EI Fashir). Periodic support from CO when access permitted.	49 staff (of whom 30 international staff) + 22 vacancies	58 staff (of whom 31 international staff) + 13 vacancies	67 staff (of whom 35 international staff) + 11 vacancies	71 staff (of whom 37 international staff) + 10 vacancies

Source: Interview and documentation from HR Officer, CO

Table 5: Staffing requests for Darfur operations

Oct 2003	April 2004	May/June 2004	August 2004	Sept 2004
Request for 2 international staff (NOC/ L3) to head two new Zonal Offices. Request upgraded to L4.	Request 15 international technical staff for Zonal Offices	Corporate Trigger. Target increased to 71 (34 international) field staff. A specific Darfur department established in Khartoum for first time.	Target increased to 78 field staff	Target increased to 81 field staff

Source: Interview and documentation from HR Officer, CO

A number of the findings detailed below have been identified in previous evaluations and in previous reviews²¹. UNICEF has made some progress in developing competency profiles, the HQ web-based roster and improving stand-by arrangements. However, the slow updating of the HQ roster, low prioritisation of human resource contingency planning and staffing strategies at country level, as well as gaps in staff development in emergency response, continue to hamper UNICEF's response capacity.

The lack of an early warning system to trigger strategic analysis of staffing needs at all levels hindered advance contingency planning by DHR and RO. The CO relied on immediately available RO resources for the immediate response. The CO request for additional staff in all sectors for Zonal Offices was only submitted in April 2004. This substantial request for members of staff with similar profiles understandably took time to fulfil. Early warning would have allowed DHR and RO to begin sourcing potential candidates well in advance. DHR and RO proposed a number of initial mission assignments from the RO as well as national staff from other COs to fill initial gaps. However, in many cases, these proposals were rejected, as candidates had not passed through the vetting procedure and their profile was perceived to be inappropriate²².

Given the slow recruitment process and ongoing regular programmes, the CO staff quickly became overstretched. Slow identification and recruitment of Darfur-specific staff at Khartoum level for a variety of functions, including emergency coordination²³, technical and operational support limited both the level of support that should have been provided to Darfur field offices, as well as ongoing country programmes.

Staffing levels greatly increased over the summer months. This has already had a positive impact on UNICEF's coordination role, monitoring capacities and overall credibility amongst partners. This will hopefully be pursued further with the deployment of a number of Darfur-specific sector coordinators and the setting up of a distinct UNICEF Darfur/Eastern Chad department.

²¹ In particular, the recent review of Rapid Deployment of Human Resources in Emergencies, Heffnick, July 2004.

²² The exception is the deployment of the RO Child Protection Advisor.

²³ See section on Management of the Response for further details on the delay in setting up of coordination structures.

5.8.2. Recruitment processes

Prior to 20 May 2004, the pace of recruitment was extremely slow at all levels.

Correspondence and interviews in CO, RO and DRH NY indicate that the organisation did not always treat the issue of recruitment with the required urgency. Requests to other COs in the MENA region to release staff went unanswered for a period of weeks. The CO requested two internationals (L3) to staff the two new Darfur Zonal offices in October 2003. These posts were eventually filled in February and April 2004.

Several discussions regarding recruitment were established via numerous channels but were loosely coordinated. There was no 'one-stop shop' for HR needs.

Following the corporate trigger the process underwent a dramatic improvement, in part due to additional staffing in DHR NY. The CO staff increased from three Nyala national staff in Spring 2003 to a total of 81 staff, of which 40 international staff, for the Darfur operation by September 2004.

Overall though, capacity at all levels was overstretched. CO HR was headed by an L2 and no action was taken to strengthen this position despite the additional workload in 2003 and 2004. The MENA HR Unit was also understaffed, with one HR officer for the region. The lack of adequate staff in the CO HR unit resulted in delays in responding to procedural requests from RO/HQ (i.e. drafting TORs, selection of candidates). Despite the clear overload, CO did not request additional HR staff. Additionally, according to the RO/CO, it was unclear who should vet and contact potential candidates, and in most cases this fell to the CO, prior to the corporate trigger. Consequently, the CO HR unit became overloaded, resulting in the CO Representative playing a large role in vetting potential staff. CO email requests surprisingly did not reflect a feeling of urgency as the delays stretched into months, nor did they indicate the overload experienced by the CO. It was only on 31 March 2004 that the CO requested that RO and HQ screen candidates prior to sending them to CO.

Other humanitarian emergencies impacted UNICEF's recruitment efforts for the Darfur crisis, for example, similar profiles were required in Chad and Haiti. A large number of agencies were recruiting from the same candidate pool and often for the same type of expertise. At one time DHR was reportedly recruiting 26 nutritionists.

Table 6: DHR overview/Sourcing for Darfur (April-October 2004)

Index Count	Status				
Post/Functional Area	External ²⁴	Internal ²⁵	Stand-by Arr. ²⁶	Total	Selected ²⁷
Total	106	44	23	173	52

On a positive note, UNICEF adopted a range of strategies to identify potential staff, including secondment, staff on mission, external recruitment and surge capacity. Given the constraints outlined above, this diversity was essential for identifying the required number of staff and necessary profiles.

External surge capacity and stand-by arrangements with DFID, RedR Australia and NRC constituted critical stopgap measures. This enabled UNICEF to tap key expertise in water and sanitation, nutrition, education and child protection.

Delays in recruitment procedures were experienced due to medical clearance procedures required by New York, albeit a standard requirement for UN agencies. However, DHR did allow some candidates to undertake medical screening in Khartoum to fast track deployment.

²⁴ External candidates considered for posts identified from various sources (e.g. Global Web Roster).

²⁵ Staff members from various offices considered for internal redeployment on mission status.

²⁶ Personnel from Stand-by Partners reviewed for deployment.

²⁷ Number of staff selected in the various functional areas in support of Sudan/Darfur operations. This figure reflects the number of staff who at some point have served in Darfur between 19 April-19 October 2004, or staff that were selected over this period and are in the process of being deployed.

The CO faced a challenge in raising awareness amongst new recruits regarding UNICEF's mandate and strategies²⁸. The induction given to new recruits, especially those new to UNICEF, did not provide sufficient exposure to these issues. In some cases, newly recruited Zonal Office staff requested a brief presentation on child rights-based programming in emergencies. DHR is currently compiling a briefing pack to address this shortcoming, but the pack should be accompanied by in-country briefing.

5.8.3. Contractual terms

A number of contractual factors hindered rapid redeployment of human resources within UNICEF. Many new recruits are contracted on a Temporary Fixed Term (TFT) contract which does not have the same stability as a two-year Fixed Term (FT) contract. Thus, UNICEF experienced difficulty in attracting experienced international or national staff to the Darfur response who were expected to give up fixed term contracts for short-term TFTs if they desired to join the emergency response.

Alternatively, staff can be released on secondment from other COs. However, the Evaluation Team was informed that CO representatives from other offices showed reluctance in releasing staff to Sudan CO until the corporate trigger was activated.

The high cost of replacing staff on secondment was a consideration in the CO's acceptance of these staff during the early response (the CO must pay for their replacement and allowances while in Sudan). Additionally, secondments are only a short-term solution for a CO facing a sustained response. Deployment of experienced emergency national staff from other country offices occurred in two cases. Many members of staff declined requests to deploy to Darfur due to contractual and/or financial considerations. This aspect deserves further investigation.

A review of staffing requirements was completed in August 2004. Contracts were extended to up to twelve months and budgetary measures were taken in order to create fixed posts for key positions. Nevertheless, many staff initially recruited through both surge capacity and secondments mechanisms, were approaching the end of their initial contract at the time of the mission. Unless a clear commitment is made by both staff and CO to extend these contracts, the CO may find itself with a depleted team in the coming months.

5.8.4. Staff care

From the early response into Summer 2004, poor working and living conditions in the Zonal Offices created additional stress, fatigue, presenting a health risk for field staff. While living conditions were acceptable in early stages of a response, they were only just being upgraded in one of the three field offices at the time of the field mission. A combination of factors, including the difficult living conditions as well as feeling of isolation borne out of poor communications, has reportedly deterred staff from extending beyond short-term contracts (3-6 months).

Field staff are extremely committed and work long hours in difficult conditions. Although international staff is granted Rest & Recreation (R&R), there is no policy of mandatory rest days for national staff. This should be reviewed to ensure that national staff is cared for adequately during the response.

Good team management in difficult environments is an important factor in maintaining motivation and reducing stress amongst field and Khartoum staff. Team management, including stress management, and training for senior staff at both field and Khartoum levels, have not been adequately addressed and this continues to be an outstanding need. Resources for stress management at both HQ and RO level were not tapped by the CO. A request for the NYHQ stress counsellor was not submitted and although stress counselling was offered via the RO, the CO did not pursue this opportunity.

Due to overload at Khartoum level, the HR Unit responsible for the recruitment of new staff has a relatively limited capacity for undertaking other aspects of personnel management, which are essential for

²⁸ This includes CRC, rights-based approach to programming, protection, CCCs, etc.

ensuring staff wellbeing and professional efficiency. The new UNICEF Darfur/Eastern Chad department should set up a separate Human Resource Unit for Darfur to ensure that staff wellbeing is catered for.

5.8.5. Staff capacity building

Capacity building for incoming staff within UNICEF CO appears to be limited. While new staff did receive an induction CD-ROM, the Evaluation Team is unclear as to whether the Programming Process Course was included in all cases. Induction varied in duration and was reduced in length as more staff arrived. This placed external recruits without extensive UNICEF experience at a particular disadvantage.

Training in Emergency Preparedness and Response did not take place for all UNICEF staff. Although partners (GoS and NGOs) benefited from a number of workshops, it is a concern that UNICEF staff were not prioritised. Indeed, in Nyala only two UNICEF staff participated in a workshop as facilitators. Despite time constraints, the Evaluation Team commends the many efforts of individual staff members and Zonal Offices in taking the initiative to attend individual training and improve management and technical skills.

5.9. Supplies and logistics

5.9.1. Background

A large proportion of funds allocated to the Darfur Emergency has been channelled into supplies. By October 2004, over US\$28m have been requisitioned for supplies, compared with US\$8.5m in 2002 and US\$9.3m in 2003, for the entire Sudan Country Programme. As early as January 2004, the CO progressively mobilised resources and raised the demand for supplies through its orders for Darfur. Although the CO did not provide a formal emergency/contingency supply plan, the CO informed the Supply Division (SD) of their potential supply requirements so that SD could be ready to respond.

In April and May 2004, ordering of supplies increased significantly. Large volumes of AD (disposable) syringes, safety boxes, and cold chain supplies (refrigerators, icepacks, etc) were ordered for the measles campaign. A charter was arranged and a rigorous follow-up was carried out with the 'DOLTA' supplier for ice packs in India.

In April 2004, the SD Emergency Coordinator set up the 'Darfur Team' in Copenhagen, consisting of the SD Emergency Coordinator, the Customer Service and Field Support Centre (CSFSC), Supply Planning Officer & Focal Point for Sudan, Chief Warehouse & Logistics Centre and other relevant staff, including Shipping and the Contracting Centre Representative who is responsible for monitoring the orders received from the CO. The Darfur Team met on a daily basis to discuss issues and review the status of orders. Tracking orders and creating a space for dialogue between staff from various centres helped speed up order processing and shipping and overcome obstacles. CSFSC was also created a Status Report, listing all the approved Emergency orders with details and status.

In view of the emergency, SD also authorised other UNICEF offices to engage in procurement. The India office supplied hand pumps and the Sudan CO could undertake local procurement of jerry cans for a total value of up to US\$1m.

The report served as the basis for Darfur Team's meetings in Copenhagen. CSFSC ensures that the report is updated regularly and circulates it to the rest of the SD staff, NY Supply Section, NY HQ Emergency unit, CO and RO. The Supply Section in the CO also forwarded this report to all departments concerned in Khartoum. A separate report is issued indicating the shipping status of orders issued by Copenhagen.

The mobilisation of all the stakeholders in the supply chain was extremely important, in view of the magnitude of the demand. A wide range of items, occasionally in high volumes, had to be procured and dispatched to the operation.

Box 2: Items supplied by SD until August

SD supplied the following items:

ORS, Anti-malaria tablets, Communication equipment, IT equipment, Toyota vehicles fitted with ballistic blankets and communication equipment, Educational kits, Recreational kits, Blankets, Therapeutic spread, Unimix, Artesunate tablets, Medical equipment, Water purification tablets, F-75, Electric Pump, Oxygen concentrator, Pharmaceuticals, Artesunate tablets, Ferrous salt + folic acid, Squatting plates, Watsan items, infant length/height measuring boards, Oxfam kits, School-in-a-box & replenishment kit, RubbHalls, Mosquito Nets, Sulfadox + Pyrimeth tables, Generators, Submersible pumps, Unimix, ReSoMal & IT equipment.

Box 3: Items supplied by SD during the 120-Day Plan

Communication equipment, Pharmaceuticals, ORS, Artesunate tablets, Sulfadox + Pyrimeth tables, Therapeutic spread, Watsan items, Oxfam kits, Mosquito Nets, Unimix, F-75, F-100, ReSoMal, FG Wilson Generators, Tarpaulins, Blankets, Sleeping mats, Measles vaccines, Syringes and safety boxes, Cold chain items, Toyota vehicle fitted with ballistic blankets and communication equipment, School-in-a-box and Replenishment kit, Trauma kit and refill, medical supplies, IT equipment, Therapeutic spread, Watsan items, Oxfam well digging kits, Mosquito Nets, FG Wilson Generators, Meningitis vaccines, School-in-a-box & replenishment kit, IT software, First Aid Kit A, Travel/Survival items, Midwifery kit, Haemoglobin colour scale, Branded items, Iodized oil capsules, Education kits, Recreational kits, Bentonite, Submersible pumps, Centrifugal pumps, Collapsible water tanks, Calcium Hypochlorite & Aluminium sulphate.

Mid-September 2004, the Supply/Logistics Officer of UNICEF Sudan gave a presentation to Supply Division staff in Copenhagen on the Darfur emergency. This was helpful for staff to understand the nature of emergency and the impact that supplies and equipment handled by SD were making.

5.9.2. Key general findings

Although the procurement systems have worked well in the emergency response, management of the logistical system was not optimal until mid-2004.

There has been no substantial staffing increase in the supply section in Khartoum to deal with the emergency. Only one additional professional officer at the L2 level was brought in during 2004 to help on a temporary basis. The office is only now recruiting a professional national officer for the Supply Section in Khartoum.

Throughout 2003, the stockpile of emergency goods was insufficient given the scale of the emergency and this problem is linked to the low-level emergency preparedness plan. The stockpile was substantially improved by the start of the 90-Day Plan in June 2004.

Field staff were often unaware, or received delayed information, about supplies that were ordered and delivered to implementing partners (e.g. NCW/WES, MOH, NGOs) at CO level. Although UNICEF has the right to monitor supplies delivered via the government and NGO partners, field staff, many of whom were new to UNICEF, were unclear about their right to access supplies provided by UNICEF in GoS and NGO warehouses, even though this subject is apparently covered during the orientation briefing. This has caused difficulties in planning and monitoring.

In typical development programmes, UNICEF is not responsible for the management of warehouses, as supplies are handed over to partners at the port of entry. UNICEF nevertheless maintained storage capacity in Sudan even before the Darfur crisis erupted and was obliged to rent warehouse capacity in the three Darfur states to cope with the influx of large quantities of emergency supplies. Despite some efforts, there was insufficient training for field logistics staff, many of whom were new to UNICEF, in warehouse management. Training manuals on logistics and warehouse management could have been

sourced from other agencies (WFP, WHO) in order to boost UNICEF logistical capacity. UNICEF Sudan operates a country-developed tracking system (ESMS) as a countrywide UNICEF emergency tracking system is still under development.

A joint UN Task Force (chaired by UNICEF) undertook a market survey in 2003 and put forward a list of suppliers. During 2004, UNICEF assessed markets for major items that were required for Darfur before floating the bids for NFI. UNICEF has been procuring items directly from Dubai-based suppliers that have been vetted by UNICEF Copenhagen in the Dubai Initiative.

A market survey is now being proposed with support of the Supply Division in Copenhagen to update this information. UNICEF has been using United Nations Joint Logistics Centre (UNJLC) as the main transporters and no major problem has been reported. As a precaution, UNICEF has chartered a plane to prevent a bottleneck from jeopardising an operation.

5.10. Telecommunications

Telecommunications is an essential component of an efficient emergency response. However, HF radios were not always available in all locations and in all vehicles by December 2003. Zonal Offices experienced delays in receiving equipment due to difficulties in obtaining authorisation and custom clearance. The field offices were quickly equipped with Inmarsat or alternative light satellite equipment. With lower initial cost but expensive running costs, this was a suitable arrangement for the early phase of the operation.

When it was decided to change the equipment for a system that was better adapted to a complex and long-lasting large-scale crisis, the necessary material was not available on the market²⁹. UNICEF's flyaway VSAT systems had already been assigned to other emergencies, such as Iraq and Liberia. There was a significant delay in ordering and receiving the equipment and, in the meantime, UNICEF had to rely on standard VSAT systems.

5.11. UNICEF cross-border relations

As Darfur populations fled into neighbouring Chad, the situation had clearly developed into a cross-border crisis. Each CO was preoccupied with its own country programmes and developing a country-specific emergency response. As a result, both sides failed to develop a coherent operational strategy and harmonise activities, such as standardised sector approaches where appropriate, joint advocacy, logistics, etc. Optimisation of human resources and physical assets (drilling rigs) was reduced to a minimum.

Opportunities for information gathering on aspects such as population movement, protection, security, health, and water, were not taken up by the Chad CO. Despite initial discussions facilitated by the RO Emergency Officers MENA and WCARO, neither the Chad nor the Sudan CO committed to establishing a joint approach.

The slow initiation of the UNICEF response on the Chad side impacted negatively on UNICEF's interventions in Sudan. The CO Khartoum could have benefited from both information gathering and needs assessment, as well from joint advocacy, which was suggested by the regional assistant emergency officer but not taken forward by CO Chad or CO Sudan. With the exception of a limited exchange regarding educational material and some notable steps in child protection³⁰, technical information sharing and development of cross-border strategies are commencing only now. Water and

²⁹ According to a discussion with ITD in NYHQ.

³⁰ Child protection became an issue for coordination between Chad and Sudan only in mid-July 2004. Since then, the Child Protection section has had regular correspondence with Chad with regard to separated children. It was also agreed at that time that conferences between child protection staff should take place weekly. Developing these cross-border links was limited by the absence of child protection staff on the Chad side.

sanitation, as well as Expanded Programme for Immunisation (EPI) campaigns, are two areas which offer concrete opportunities for synchronisation and coordination.

5.12. Working in SLA and JEM-held areas

Access to areas held by the Sudan Liberation Army (SLA) and by the Justice and Equality Movement (JEM) was limited due to GoS policy, UN security regulations and unclear lines of command on the SLA/JEM sides. UNICEF's highly visible role in the Asmara Talks between GoS and the SLA ended with a breakthrough agreement for the polio campaign to be run on both sides of the frontline. This was among the first UN humanitarian interventions in rebel-held areas, alongside WFP food distributions with the support of the Sudanese Red Crescent.

Access to beneficiaries in rebel-held zones has been a major problem facing UNICEF and other UN agencies. By working through NGO not submitted to the same security constraints, UNICEF was able to support activities in places where access was not possible for UN staff. As a result, six health facilities have been supported in North Darfur and four in the Jebel Marra region, which, according to the implementing partner, GOAL, are located in SLA-held areas. UNICEF also supports a Therapeutic Feeding Centre run by MSF-Holland in disputed areas in West Darfur. The WES sector's strategic choice to work through the government WES/NCW meant that activities in this sector could only be implemented through NGOs in SLA/JEM areas, despite an early agreement in which SLA consented to allow technical personnel to enter the areas under its control.

Due to prolonged insecurity, travel restrictions prevented UNICEF, and other UN agencies, from distributing emergency supplies to IDPs in rebel-held areas. While placing agency staff at extreme risk is not acceptable, further assessment of the varying degrees of safety risk is merited given the importance of a prompt response. Permanent efforts in formal negotiation with warring parties may ensure quicker access to rebel-held areas in the future. Due to lack of contingency planning with regards to inaccessible populations, UNICEF was unable to respond adequately when access opened up. As a result, it was not possible to develop activities and needs assessment processes in N. Darfur SLA-controlled areas, although some regions were cleared for access by UNSECOORD.

With regard to the return of IDPs to their location of origin, contingency planning exercises should also address the question of defining clear criteria for the shift from relief to return and recovery, including indicators on the improvement or deterioration of the socio-political and security situation in the region.

5.13. Communication and advocacy

Until June 2004, the media had only very limited access to Darfur. Most journalists were unable to obtain visas or travel permits. Those that did gain access were only able to do so if they were accompanying a high-level delegation. As a result, coverage of the crisis was extremely limited in the early phases resulting in a low impact for advocacy and low donor interest. At a certain stage, it was only by means of clandestine entry from Chad that the images of the situation began to reach the outside world.

Communication, including its critical advocacy component, was neither prioritised in the CO Sudan emergency preparedness plan³¹, nor in the developing Darfur response. Until the preparation of the 120-Day Plan, the CO did not develop a specific Communications Strategy with clearly defined objectives, activities and indicators for each level of the organisation.

There also does not appear to have been a clear strategy either within the Communications, Policy and Programme Unit or EMOPS to guide NYHQ's approach. Even though the Communication Officer's position remained vacant from January to March 2004, the CO did not actively seek support or advice

³¹ Although communication is included in the CCCs in emergencies, and is identified as best practice in the recent Iraq Lessons Learned exercise.

from the RO or NY HQ, despite RO and HQ's experience in communications in difficult environments³². UNICEF should urgently clarify its communications strategy at all levels.

During the early response, the CO lobbied the GoS in order to improve access, and discussions were also held with institutional donors. However, given the highly sensitive nature of the situation, and earlier warnings from GoS against making public statements, advocacy at country level was not rigorously pursued³³ through Spring 2004. Faced with the dilemma of having to prioritise either advocacy or implementation, UNICEF shifted its focus from advocacy on access and children's rights (only two advocacy statements to date, issued in Dec. 2003 and 20 Feb. 2004) to issuing press releases on programme activities. Discussions with donors on these issues of concern were also limited at country level, although communication between NYHQ and DFID London continued to include requests for lobbying assistance into Spring 2004.

UNICEF continues to engage in non-public advocacy at the NYHQ level, which is positive. NGOs are currently making public statements on the rights of children in Sudan (for example, recent Save the Children Press Release) while UNICEF pursues less visible forms of advocacy. Given UNICEF's mandate and role in the Sudan response, reluctance at all levels to take a prominent role through public statements constitutes a lost opportunity.

From Spring 2004, CO has approached communication from a fundraising and visibility perspective (especially in favour of UNICEF National Committees) rather than advocacy. Understaffing in the Communications Unit and the perceived sensitivity of many advocacy issues limited the opportunities to develop a proper advocacy strategy. This resulted in a fragmented approach to Communication.

The CO Communications Unit was overloaded until the recent arrival of a Darfur-specific communications officer in October 2004. Efforts to bolster the Communications Unit were hampered by lack of funding until a small contribution of US\$167,500 was earmarked for this purpose in March 2004. This oversight was perhaps due to inadequate information regarding the importance of communication and advocacy to the donor community. A Communications kit was developed over this period and is distributed to all visitors.

CO engagement with the media was effective. However, the Communications Unit largely targeted media from Western and traditional donor states. Opportunities to disseminate UNICEF advocacy and programme activities to Arabic-speaking media were by and large ignored, despite the importance of counter-balancing anti-Western and anti-UN messages and stereotypes with positive images. The recent 120-Day Communications Strategy includes outreach to Arabic-speaking media, thanks to the efforts of the RO Communications section. It is important to follow up this dynamic with proactive coordination between RO and CO. A number of communications initiatives were set up but not prioritised by the CO and were seen as a burden by the field offices. Video phones disseminated to the field have remained largely unused.

CO engagement with donors took place via regular donor meetings and two donor briefings in April and June 2004. These were positive initiatives to address concerns and questions from the donor community. Regular bilateral meetings also took place. In addition, the CO provided assistance and briefed all government representatives who visited Sudan during the period under review, which represents a considerable investment. Fundraising visits from National Committees, while important, placed a burden on field office operations. CO requests to HQ to minimise and/or combine visits have helped ease the pressure.

³² An advocacy in emergencies toolkit is being developed by NYHQ.

³³ It is worth noting that following Mukesh Kapila's statement in March 2004, the Government of Sudan did not approve a visa for a temporary replacement until June. The UN was essentially leaderless at a critical time. UNICEF, as well as other UN agencies, refrained from issuing overly critical statements in March-May so as to avoid causing longer delays in the appointment of an Acting UN RC/HC, and a negative impact on operations. During this period, advocacy efforts focused on placing pressure on the GoS to relax travel restrictions.

5.14. Implementation improves; need for strategic thinking increases

With the initiation of the 90-Day Plan and the activation of the corporate trigger, HR capacity increased and CO management began to catch up with implementation. By mid-June 2004, management dynamics had shifted and the pace had increased. The field offices in Darfur rose to the challenge and finally had the resources to do so. The number of NGO partners rose, as did implementing capacity. UNICEF's coordination role became subsequently more crucial. Increased funding for the emergency allowed the CO to feel more secure, thus enabling the team to scale up the level of inputs. While the response through the 90-Day Plan Response was well underway, strategic multi-scenario contingency planning had not been carried out. For example, a clear strategy had not yet been devised on how to empty latrines that had nearly reached their capacity. The new management structure comprising a UNICEF Special Representative for the Darfur emergency caters for contingency planning, a necessity given the ever-changing context.

6. SECTOR RELATED FINDINGS

6.1. Child protection

6.1.1. Situation analysis

The protection of civilian populations and providing security for humanitarian staff are, and remain, priority concerns. In Darfur, protection activities were implemented in a context of a poor human rights culture. Even the strongest statements issued by senior officials have not prevented human rights violations and abuses from taking place on a regular basis. For UNICEF, the main protection concerns are related to physical protection, freedom of movement, protection against forced relocation, sexual and gender based violence (SGBV) and access to basic entitlements as defined in the Convention of the Rights of the Child.

Social norms regulating behaviour have been weakened by displacement, and as a result, people have been placed in situations where there is an increased risk of violence. Rape, physical violence against women and children, neglect and verbal abuse are the most common types of SGBV in and around the camps in Darfur.

The presence of military and police forces, as well as other armed groups, also contributed to the increased risk of violence against the displaced population. Cases of people being forcibly relocated, violence against women and girls collecting firewood and children becoming associated with armed forces are reported on a regular basis. In some cases, humanitarian interventions have inadvertently increased IDP vulnerability and insecurity: for example, where camp populations have been targeted by armed groups for receiving humanitarian assistance. The general situation regarding protection in camps is also directly related to the absence of adequate camp management. Some members of camp security have used their position to profit financially. While the Government of Sudan is increasing pressure on IDPs to return to their places of origin, IDPs in the camps continue to express considerable fear about the idea of return home. Hence, achieving security and ensuring protection in the region are basic conditions for ensuring a transition to sustainable return and recovery.

6.1.2. Child protection programme

In UNICEF Sudan Annual Report of 2003, humanitarian assistance to Darfur in 2004 was clearly defined as a priority. In February 2004, the child protection section undertook a series of comprehensive rapid assessments in Darfur but the section suffered from a lack of adequate human resources. The head of the child protection unit had the dual responsibility of fulfilling the role of section head and child protection coordinator for Darfur. Hence, the 90-Day planning exercise, the deployment of child protection officers to Darfur and the increase in partners on the ground contributed to a dramatic increase in child protection interventions.

The overall goal of the 90-Day Plan in Darfur was to strengthen aspects that help foster a protective environment for IDP children, such as advocacy with government and NGOs, capacity building for partners providing assistance for children, establishment of services for recovery and reintegration of children affected by the conflict as well as monitoring and reporting of activities to better coordinate the response.

Child protection monitoring

Monitoring the child protection situation constituted an important aspect of the 90-Day Plan with the objective of providing sustainable information on child protection issues and building a protective environment for children living in IDP camps. The strategy focused on collecting data on the following categories: children arrested by the police, children bearing arms, separated and unaccompanied children, abandoned babies and sexually abused children.

Final reports comprised exclusively quantitative data. Causes have in most instances not been identified nor documented properly, as was recommended in the technical guideline³⁴. Further advocacy work was not possible due to the lack of comprehensive incident reports and ZO level was not sufficiently active in advocating with authorities on their duty to investigate incidents, and to prosecute and punish perpetrators. The link between monitoring, reporting and advocacy was not always clear to field staff. It remains unclear as to whether the CO optimised UNICEF's traditional comparative advantage to advocate on child protection issues in the emergency.

Child protection data collection was not systematically shared with other technical sectors nor incorporated into programming decision. This might be due to the lack of communication channels between the different sectors and to insufficient understanding of rights-based approach in most sectors. An exception to this lack of articulation between the CRPB and other sectors is the joint response to separated children implemented by education and child protection sectors, which was integrated into strategic programming focus on children's spaces. This initiative had an extremely positive effect, since children's spaces were available in all IDP locations, with attendance of over 100,000 children by the end of the 90-Day Plan period³⁵. Another positive result of this collaboration is the focus on the participation of the children themselves in decision making and running the children's spaces, in accordance with Article 12 of the Convention of the Rights of the Child. In practice, UNICEF concentrated child protection monitoring efforts only in, and around, schools and play areas. No comprehensive child protection monitoring activities were conducted in host communities and in SLA/JEM-controlled areas, although some had been cleared for access by UNSECOORD. As a result, in the context of the Darfur emergency, UNICEF's child protection activities focused on protecting children in IDP camps but failed to defend the integrity of humanitarian assistance by ensuring access to all in need³⁶.

Despite the fact that a significant number of child soldier cases has been reported, the decision to extract an agreement from combatants to protect children was not yet considered to be appropriate³⁷.

As part of the child protection monitoring activities, contact with the Chad Office with regard to separated children has been established, but is not maintained on a regular basis. CO ensured that the operational framework developed with ICRC and other child protection agencies for inter-agency cooperation on separated children in Darfur and related forms and training manuals were transferred to the Chad office. Further cross-border links were limited by the absence of child protection staff on the Chad side.

Sexual and Gender Based Violence (SGBV) and Sexual Exploitation and Abuses (SEA)

Cases of rape and other forms of violence have been reported on a regular basis but were not properly recorded or followed up. This may be due to the fact that despite an early commitment from UNFPA and UNICEF's role in coordinating the sector during the 90-Day Plan, a lead UN agency had not been

³⁴ See Chapter 7, Protecting the Rights of the Child, Identifying priorities, p416.

³⁵ According to the Darfur Humanitarian Response Report on Child Protection sector of August 2004.

³⁶ See CRC and technical note pp410-411

³⁷ See Article 38 of the CRC, 1989, Armed Conflicts, as well as the Optional Protocol to the CRC.

appointed for the SGBV and SEA sector. UNICEF failed to establish a clear procedure on how to report SGBV and SEA cases and referral systems for the physical and psychosocial recovery of rape victims.

In terms of prevention of violence, lessons from past emergencies were not adequately taken into account. In situations of high food insecurity and shortage in basic items, women and girls may find themselves coerced to engage in casual or commercial sex as a survival strategy to gain access to food and other fundamental needs. UNICEF should have pushed harder to ensure that all humanitarian activities, and especially food distribution, were implemented in such a way to minimise the risk of SGBV and SEA³⁸. Field staff did not explore alternative ways to prevent SGBV inside and around the camps, for example by increasing women's involvement in programme design and implementation, representation of women on management committees and participation in the distribution of food and non-food rations, post distribution monitoring, etc.

Capacity building

One of UNICEF's main objectives for the 90-Day Plan was to build capacity of staff involved in education (teachers), psychosocial support (animators) and SGBV registration (police). As a result, numerous training sessions took place during the review period (see table 6), including training for police members on SGBV, training on the Convention of the Rights of the Child (CRC) for aid workers and training on children's rights. In addition, aid workers, police forces and UNICEF staff were also trained on children's rights and rights-based programming.

Table 7: Training in Child Protection during the 90-Day Plan

Psychosocial support		Recreation facilities		Human Rights awareness		SGBV awareness		SGBV	
Teachers & animators		In & out of schools		Aid workers		Aid workers		Police staff	
Target	Results	Target	Results	Target	Results	Target	Results	Target	Results
300	744	100,000	85,470	1,000	722	500	955	200	424

Source: UNICEF report on the 90-Day Plan

Coordination of the many ongoing and planned training activities is weak, with the risk of duplicating work. For example, OHCHR and UNDP are also involved in police training. UNICEF should be credited however for its diplomacy in trying to bring many agencies together in the protection sector. More work nevertheless needs to be carried out on the promotion of the Code of Conduct against Child abuse.

6.1.3. Sector coordination

No UN agency has a clear protection mandate for IDPs. In Darfur, collaboration between UN agencies specifies that the RC/HC should organise protection coordination, whereas traditionally OCHA would assume this role. UNICEF has assumed the lead in child protection interventions and has participated in the prevention of sexual and other abuses in IDP camps. ICRC has its own approach derived from International Humanitarian Law (IHL).

At CO level, UNICEF tried to ensure that all protection issues were addressed with due consideration to the special protection of children and to guarantee that all initiatives include a special focus upon women and children's rights. At field level, the coordination mechanisms established vary widely from one state to another. In some cases, coordination was limited to sharing information about child protection programmes amongst the organisations involved in the sector, while in others, staff were more active in providing strategic guidance. But in all three states, field staff made an effort to inform implementing partners from all technical sectors about the referral process for separated or unaccompanied children. Nevertheless, at the end of the 90-Day Plan, the family reunification programme still had to be put into operation. In mid July, an inter-agency agreement between UNHCR, ICRC and UNICEF laid down a framework for joint efforts on cross-border issues related to unaccompanied and separated children.

³⁸ See CCCs Operating approach, point f: 'Operationalize humanitarian response mechanisms that prevent and limit the exposure of children and women to abuse, violence, exploitation and HIV/AIDS.'

Unfortunately, and despite coordination efforts, the child protection sector still had no overall view of what was being done, where and by whom. As a result, UNICEF was unable to prevent duplication and, in some cases, competition between agencies.

6.1.4. Conclusion

The different technical sectors within UNICEF operations placed varying degrees of importance on the issue of child protection. With regard to prevention of SGBV, high levels of awareness were encountered in the education sector, yet much less so in Health or WES. UNICEF child protection staff have a limited understanding of the Principles and CCCs in emergencies. Opportunities for cross-sector exchanges and collaboration have been lost.

In quantitative terms, training targets have been reached. But as training sessions only lasted a couple of hours, it is difficult to appreciate what results were expected in terms of capacity building and/or changed behaviour. Child protection and education sectors worked closely and successfully in seeking to mitigate the risks by providing education in safe environments.

In some cases, limited consideration for beneficiaries' and/or local partners' culture has sometimes resulted in delivering an inappropriate service and caused negative reaction from the community. This was the case for psychosocial support programmes, which were perceived by some UNICEF Sudanese partners as being overly Christian-oriented. Similarly, gender issues were not always taken into account. For example, sports and recreational kits contained fewer options for girls.

6.2. Education

6.2.1. Situation analysis

Darfur is one of the most deprived regions in Sudan with regards to primary education. In 2003, Darfur's primary education system was characterised by extremely low enrolment levels, gender disparity and poor educational efficiency. Student enrolment indicators were among the lowest in the country. The emergency had disrupted schooling, both for displaced and refugee populations and resident communities, whose schools were occupied by displaced persons.

Apart from the Ministry of Education (MoE), SCF-UK was the only partner that was operational within the basic education sector prior to the escalation of the crisis.

6.2.2. Education programme

In the early stages of the emergency, the education sector suffered from insufficient funding since education was not perceived as a priority by most institutional donors. Prior to the 90-Day Plan, the education sector had developed an emergency education plan for 2004. Its aim was to improve the learning environment through rehabilitation and construction of classrooms, provision of water points, construction of latrines and provision of educational equipment. Thanks to previous interventions in Darfur, UNICEF was prompt in setting up additional temporary school facilities and in providing classrooms, and education and recreational kits to IDP camps.

The strategic response implemented by UNICEF education unit at the beginning of the emergency was modified not in nature but in terms of scale. It is only with the introduction of the 90-Day Plan that the importance of caring for children's psychological needs in a conflict environment was taken on board.

From this moment onwards, the education strategy was clearly oriented to providing normalcy and reducing the effects of trauma, and thus aimed for the rehabilitation of both individuals and affected communities. The 90-Day Plan focused on restoring learning opportunities for children affected by the crisis, rehabilitation and construction of classrooms, teacher training and distribution of education and recreational supplies.

In some cases, the quality of recreational kits is reported to have been very poor. Construction of temporary classrooms relied on local materials, tents and plastic sheeting. In some cases, the selection of material was not appropriate since plastic sheeting is fragile and not adapted to the climate in Darfur. Storms and rain have caused damage, not only to plastic sheeting classrooms, but also to local materials used for classrooms and it has been necessary to carry out repairs, and even rebuild a number of classrooms.

Table 8: Activities in Education during the 90-Day Plan

State	IDP + host	Actor	Enrolment			Classrooms constructed/rehabilitated		
			Target	Results 31/08	Cov. (%)	Target	Results	Cov. (%)
N. Darfur	60,591	UNICEF	24,000	30,960	129	212	284	134
		Partners	27,200	8,532	31	20	4	20
S. Darfur	49,409	UNICEF	25,000	25,387	101	104	211	203
		Partners	6,000	5,200	87	n/a	80	n/a
W. Darfur	80,548	UNICEF	30,000	19,336	64	318	106	33
		Partners	29,000	1,600	5	n/a	14	n/a
Total	190,548	Total	141,200	91,015	60	654	699	97

Source: UNICEF report on the 90-Day Plan

UNICEF support for psychosocial orientation within short-term teacher training programmes was positive.

Water points and latrines were not always functioning in the school facilities visited. Emergency school feeding remains to be implemented and textbooks were not supplied in sufficient quantities.

6.2.3. Sector coordination

Coordination within the education sector was until recently limited due to low numbers of implementing partners and also capacity. The number of education partners increased and allowed the 90-Day Plan to become operational in June. UNICEF was very active in advocacy for the provision of Emergency School Feeding as a strategy to maintain enrolment.

6.2.4 Conclusion

UNICEF succeeded in providing emergency education in a protective environment to a large number of displaced and resident children, both girls and boys. The UNICEF 'School in a box' and other components of the 'return to school' programme represent an important contribution to the wellbeing of roughly 140,000 children.

UNICEF's clear mandate and guidelines for education in emergencies helped UNICEF staff in their work. Despite the discrepancy between the 90-Day Plan targets and achievements, UNICEF results in terms of registration and enrolment of students has to be commended. UNICEF's main challenge now is to ensure that enrolment of students is maintained. The increased demand for education has raised concerns regarding MoE's ability to provide and pay trained teachers.

The UNICEF response in education conforms to the CCC objective to promote access to education for all children in affected communities, with a special focus on girls.

6.3. Water and sanitation

6.3.1. Situation analysis

Darfur is characterised by a complex hydrogeology, including a localised water table in deep fragmented strata, as well as a large, relatively shallow, underground water table which is supplied on a yearly basis by a *wadi* system (wells are dug in the main course of the river, where the water table is close to the

surface). Most settlements were historically located in areas where the *wadi* system was relatively accessible. Over the past decade, water has been tapped from deeper levels by drilling rigs, engine-operated pumps and hand pumps. In general, access to water was limited in most areas before the crisis, with water sources supplying a few hundred families per settlement. Sanitation management systems, including latrines, are non-existent in many Darfur villages.

The crisis, with its related displacement, created a situation of extreme overload on existing water sources, both in urban areas as well as in large camps. Access to an acceptable quantity of drinking water became critical, not only for the immediate survival of the population but also in order to control key public health hazards. With densely populated IDP settlements, ranging in size up to 80,000 people, appropriate sanitation management and hygiene promotion became essential.

6.3.2. Water and Sanitation programme

UNICEF's water and sanitation strategy consisted of providing support to the following activities:

- Coordination;
- Drilling additional boreholes;
- Rehabilitating damaged hand pumps;
- Water tinkering;
- Developing a chlorination chain (format varied depending on the location);
- Digging of latrines by means of a variety of implementing partners (NWC/WES, NGOs, private sector contractors);
- Developing hygiene awareness campaigns.

Water and sanitation was one of the most critical sectors in the response. Neither the UNICEF WES staff nor the National Water Corporation NWC/WES staff were fully prepared for, or adequately staffed to meet the magnitude of needs. Technical choices with regards to drilling rigs in the early stages significantly affected the impact of UNICEF's response and therefore service to beneficiaries.

Despite constraints, water and sanitation interventions gradually increased in intensity during the implementation of the 90-Day Plan. From June 2004 onwards, significant and tangible achievements were made, due to the commitment of UNICEF partners and UNICEF WES staff on the ground. UNICEF reports that safe water has been provided to over 830,000 people³⁹ by means of the various technologies presented above. The development of alternative strategies to boreholes was of particular importance given the low drilling capacity.

These alternative strategies included tankering and purification of water that IDPs were then able to collect from the reservoirs in their own jerry cans. Water supplies and sanitation facilities were generally available in all IDP sites visited. Concerns regarding future contingency planning, expansion to areas not yet accessible, quality control and hygiene promotion are currently being assessed and solutions identified by incoming UNICEF WES staff.

³⁹ UNICEF September 2004 Donor Report

Table 9: Activities in WES during the 90-Day Plan

Activities	Output	Numbers of units		Population	
		Target	Results	Target	Results
Water	No. of safe water points rehabilitated	200	268	-	134,000
	No. of water yards rehabilitated	5	5	-	25,000
	No. of hand dug wells equipped with centrifugal pumps	5	15	-	60,000
	No. of new water points with hand pumps	100	233	-	116,500
	No. of high yield boreholes with submersible pumps	2	23	-	115,000
	No. of water tankering operations	-	46	50,000	84,800
	No. of population receiving purification tablets	-	-	20,000	700,000
	No. of hand pump mechanics trained	600	316	-	-
	No of Community leaders trained in management	60	276	-	-
Sanitation					
	No. of latrines constructed	10,000	28,519	-	-
	No. of social mobilisation trainers trained	200	2685	-	-
	No. of people who received hygiene education	-	-	500,000	614,922

Source: UNICEF 90-Day Plan report

The initial stages of the response were constrained by limited capacity amongst relevant agencies, including UNICEF WES, NWC/WES, NGOs and private contractors. Although NWC/WES moved staff to Darfur from other parts of Sudan in April/May 2004, when the IDP population doubled, the scale of the crisis exceeded their limited capacity. NGO capacity was also extremely limited during the early response and only began to scale up during the summer of 2004. In the absence of NGO partners, UNICEF's eventual use of the private sector, for drilling and latrine construction beginning in June 2004, was commendable. There are however reported problems regarding poor quality construction and standardisation.

UNICEF is now shifting activities from the private sector to NGOs, as capacity in the sector increases. This is in acknowledgement of the fact that the private sector does not integrate community-based or participation approaches.

Reliance on the assessment, planning and response proposed by NWC/WES limited options and did not reflect the independent and proactive nature of UNICEF emergency thinking. This has had a significant impact on the procurement of drilling rigs. NWC/WES rejected the use of cheaper, lightweight drilling rigs in favour of more expensive, heavier drilling rigs with significantly longer lead times. Despite in-house experience with lighter rigs (see box 4), UNICEF WES accepted this decision. The service provided to beneficiaries and UNICEF's credibility as the lead agency in drilling activities have suffered as a result. The UNICEF WES department quickly became overstretched and could have benefited early on from emergency water and sanitation experience to bolster its more development-oriented thinking. Until Sept 2004, field staff, comprising one WES staff member per office⁴⁰ were working under extreme pressure and this prevented them from developing a clear understanding of the sector as a whole and from exploring cross-sector issues, for example health and watsan. If UNICEF wants to continue to lead sector coordination, there is a clear need to strengthen internal sector capacity, in terms of monitoring and evaluation, sector analysis, contingency planning and hygiene promotion.

The Oct 2004 Discussion Paper from the WES Darfur Coordinator recommends additional staffing in hygiene promotion, coordination, logistics, etc, to strengthen capacity in Darfur. The CO is currently considering this proposal.

⁴⁰ Staffing has now been increased to include four DFID WES experts and a WES Darfur Coordinator, based in Khartoum.

Box 4: Drilling rigs

UNICEF took responsibility for coordinating support in drilling, while NGOs focused on hand pump installation, etc. At the time of the early response, NWC/WES had one drilling rig per state, 10-year old equipment that required frequent maintenance. In February 2004, UNICEF WES ordered a heavyweight rig for Darfur, in accordance with NWC/WES's preference for a rig that was relevant for longer-term development use.

In February/March 2004, the situation clearly began to call for additional water interventions. UNICEF Copenhagen offered to airlift a lightweight PAT drill from Bangkok within two days. This offer was rejected by the CO, following consultation with NWC/WES, on basis that the lightweight drill was unsuitable. Throughout Spring 2004, UNICEF WES asked to visit the UNICEF programme in South Sudan in order to observe PAT drills being used. After multiple requests and little response from the South Sudan Office, the CO did not pursue. Nor, to the knowledge of the Evaluation Team, did the CO request information regarding whether they might be able to 'borrow' rigs, which may have been inactive during the South Sudan rainy season.

In June 2004, UNICEF formally requested that DFID procure a truck-mounted drilling rig on their behalf. Although DFID queried the specifications and indicated that perhaps a lightweight (PAT-type) drill would be suitable, EMOPS NYHQ responded, after consultation with CO, that PAT drills and 'off-the-shelf' drills in general, are 'not suitable for Darfur'. The NYHQ WES Unit was not consulted by EMOPS, or by the CO. A £300,000 custom-built drilling rig was therefore procured by DFID, based on UNICEF specifications (estimated date of delivery December 2004/January 2005). It has since been acknowledged by UNICEF WES staff that PAT drills are effective in most parts of Darfur. Indeed, NGOs are beginning to use and order PAT drills with positive results.

Thus, had UNICEF WES ordered PAT drills in early Spring 2004, they could most likely have been in place within 1-2 months (depending on the quantity ordered). Additionally, for the cost of the £300,000 rig procured by DFID, which is still not in country, UNICEF could have procured 4-5 PAT drills. It is difficult to assess the impact on delivery to beneficiaries but it is clear that increased and earlier access to water in Darfur would have been possible if lightweight drills had been procured in Spring 2004.

As a result of HQ WES's weakened capacity, the WES sector in Sudan did not get all the support it required. In addition, the RO does not have a WES officer on its staff, which meant that the CO was effectively planning and implementing in isolation. Nevertheless, the CO could have benefited from early HQ technical support on drilling rigs (NYHQ WES was not copied in on correspondence with DFID regarding the drilling rig) and on emergency strategies. The recent visit of HQ WES to Darfur has produced some useful recommendations for both Darfur and Chad operations, which should be taken forward.

The initial draft of the 90-Day Plan denoted full reliance on NWC/WES, with little regard for options for scaling up implementation, e.g. through private contractors. The original UNICEF target of 2,000 latrines, out of total of 10,000 for the sector, was scaled up to 40,000 latrines, out of 48,000 for the sector. Although UNICEF was unable to meet its revised targets (achieving 19,728), the adjustment reflects an improved appreciation of the emergency needs.

Planning for the 120-Day Plan was characterised by many of the same issues raised in section 5.3. Many of the constraints and problems in the water and sanitation sector identified by the Evaluation Team were highlighted in UNICEF's internal Review of the 90-Day Plan⁴¹. However, the Evaluation Team found little evidence to suggest that the shortcomings of the programme were addressed in the initial months of the 120-Day Plan. During the evaluation mission, feedback from field staff indicated that although 1½ months of the Plan had elapsed, they had only just begun to implement against its targets.

⁴¹ See section 'Interventions in WES' in the Review of the 90-Day Plan.

Planning and reporting focused largely on quantities of hardware installed, rather than quality and scope of response. For example, the quantity of hand pumps installed is recorded with little regard for the existence of maintenance strategies or for monitoring quality (a number of defective India Mark II pumps were delivered and installed). UNICEF WES planning and reporting is largely based on partners' reports, although NWC/WES implementation has been integrated into UNICEF figures⁴². Due to limited monitoring capacity, the current post-installation status of services (e.g. number of functioning latrines and hand pumps, etc) is not known. Reports of problems related to quality, damage and maintenance strategies indicate progress in the sector is not as sustained as current reporting indicates and there is a clear need for a comprehensive analysis of this sector.

6.3.3. Sector coordination

UNICEF's performance in coordination was weak during the initial response. It has significantly improved due to increased technical capacity at field level. During the early response, the choice of potential partners was extremely limited, but as actors increased, UNICEF began to co-facilitate coordination alongside NWC/WES via weekly coordination meetings in Khartoum and in Darfur.

Due to limited capacity, UNICEF WES staff have been largely reactive to sector needs and have not had the time to make effective progress in strategic sector coordination. UNICEF has not yet begun to establish sector standards, nor has it obtained a comprehensive overview of the sector. UNICEF has not adequately grasped its role in information management and exchange, again due in part to its limited capacity and to inaccurate information supplied by partners. Baseline information on water resources and hydrological data compiled by NWC/WES that have been made available to UNICEF, have not been circulated systematically to partners.

6.3.3. Conclusion

The 90- and 120-Day plans were useful tools for mobilising UNICEF WES structures. Coupled with increased emergency technical expertise in the field, the implementation of these plans has seen marked improvements in the water and sanitation sector. Given the large and ever increasing scale of needs in this sector, NGO implementing partners, NWC/WES and the limited UNICEF WES staff on the ground at the time, did achieve an impressive amount. All IDP settlements visited by the Evaluation Team had functioning water facilities, albeit of varying types and quality, and some level of latrine coverage. The CCC targets for water were by and large achieved quantitatively.

Other reported targets under the 90-Day Plan were overachieved, in some cases significantly so. However, due to concerns regarding quality and information provided by partners, the extent of successful implementation cannot be confirmed without a comprehensive assessment.

Box 5: SPHERE Standards for planning interventions

There was a heavy reliance on the technical indicators provided in the SPHERE manual (2000 edition), but in most instances, the key standards, such as, participation, assessment and situation analysis were not met. Many technical staff stated that the output indicators attached to SPHERE standards are not appropriate either because of natural and physical factors, or because they exceed the level of access prevailing in the region and consequently risk creating a pull factor. Although the SPHERE indicator is 15 litres of water/person/day, the WES target was 20 litres/person/day, and 1 latrine/20 people. Furthermore, a large number of these technical indicators are not met for 90% of the population in Sudan. Additionally, it was pointed out that the planning timeframe set out in the 90-Day Plan was not sufficient to meet these indicators, given the logistic and security conditions in Darfur. Many technical staff were concerned to see these references being used to assess needs and measure the gaps in the Humanitarian Profiles.

⁴² See attribution under the 90-Day Plan.

It was planned that one NGO in each IDP location would coordinate activities in hygiene promotion and sanitation, UNICEF would provide soap, chlorine, jerry cans and promotion materials and that NWC/WES would make sanitation and hygiene staff available.

There was little evidence put forward to indicate that gender issues were being dealt with sufficiently in this sector. Only a few examples were observed where a clear distinction existed between latrines for men and latrines for women. In many other cases, latrines were situated in between rows of houses.

A series of comprehensive assessments undertaken during Oct/Nov 2004 by UNICEF WES emergency staff should provide useful recommendations to guide future WES operational strategies. Future UNICEF planning should be based on a realistic assessment of both UNICEF's and partners' capacity to implement, monitor and effectively coordinate this key sector.

6.4. Health and Nutrition

6.4.1. Situation analysis

The health situation in Darfur has always been precarious and availability of health services rather low, often only existing in the main cities. Due to its remoteness and weak economy, it has reportedly been difficult to attract government health staff to the Darfur region. To this extent, MEDAIR was the only NGO to implement a public health programme in the area. The scope of the programme was fairly limited and was based in and around El Geneina, West Darfur. The referral pyramid, comprising health posts, district hospital, provincial hospital, State Hospital was, by and large, non functional, although the highest referral levels were eventually used by UNICEF for some of its national programmes, such as EPI although coverage remained very limited. Traditional medicine was in most instances providing the initial and often the only treatment.

The conflict created a totally new health environment in the quasi-urban concentrations. Many people were wounded as a result of the conflict. The displacements and concentration of the population in camps created additional epidemiological risk in areas where water was scarce and hygiene habits rather primitive. The WFP/FAO/UNICEF/CDC food security and nutrition survey attempted to estimate the severity of the health situation by means of an assessment of the retroactive crude mortality rate over the previous seven months (see table 9). The result of the survey indicates that the overall situation was globally just below emergency threshold while it was much more serious in affected areas. Findings do not correlate with an equally recent WHO survey, which indicate how careful one should be in the use of numbers.

The crude mortality rate (CMR) for the period February to August 2004 was 0.72 deaths/10,000 persons/day and the under-5 mortality rate (U5MR) was 1.03 deaths/10,000 persons/day. Both of these figures fall below the emergency benchmarks. Due to the different sample population and a different recall period, it would be incorrect to compare these findings with previous mortality surveys conducted in IDP camps, such as the recent survey by the World Health Organization. Data from this survey suggest that mortality is highly clustered. For example, although not statistically significant, mortality rates appeared higher among the displaced population compared with residents. The CMR was also found to be significantly higher for males than for females, whereas there was no significant difference between boys and girls under-5.

Extract from "Emergency Food Security and Nutrition assessment in Darfur, Sudan, WFP, October 2004

Table 10: Mortality rate in Darfur

Mortality rates expressed as deaths/10,000/day (95% Confidence Interval)				
	All population (n=5,347)	Displaced (n=3,302)	Non-displaced (n=1,994)	Threshold
CMR*	0.72 (0.45-0.99)	0.88 (0.49-1.27)	0.46 (0.21-0.71)	1/10,000
U5MR*	1.03 (0.38-1.68)	1.15 (0.27-2.03)	0.80 (0.07-1.53)	2/10,000
*CMR = crude mortality rate as deaths per 10,000 persons per day				
*U5MR = under five mortality rate as deaths per 10,000 under five per day				

Nutrition status prior to the crisis is not known, despite sporadic surveys carried out in the area as a result of the drought in the early 2000ies. However, it is likely that the nutrition status in Darfur was similar to that observed in neighbouring parts of the agro-ecological belt of Africa, especially of the rural arid and semi-arid belt bordering the Sahara: precarious food security with relatively high rates of global malnutrition, but impressive resilience resulting in limited severe acute malnutrition.

Displacement and loss of assets induced a depletion of food security assets: livestock was slaughtered or stolen, food stocks were burned or families in flight were unable to transport crops in significant quantities. Yet, the rate of severe acute malnutrition, which prevailed during the early part of the crisis, is due in most instances to illness and water-born diseases. Adults and children had to adapt to a totally new living situation characterised by high population density and overcrowding, etc.

The prevalence of global acute malnutrition (wasting and/or oedema) was 21.8% among children aged 6-59 months [95% Confidence Interval (CI) 18.2-25.3]. This figure markedly exceeds the 15% threshold used in emergencies to define a 'serious situation'. Severe acute malnutrition (severe wasting and/or oedema) was present in 3.9% of children [95% CI 2.3-5.6]. More than half of children had anemia (55.2%) a condition that is often indicative of iron deficiency. Among non-pregnant mothers, anemia prevalence was 28.0%, and the prevalence of iodine deficiency among adult women, as determined by visible goiter, was 25.5%. The prevalence of diarrhea in children was 41.0% and acute respiratory infection was 18%.
Extract from "Emergency Food Security and Nutrition assessment in Darfur, Sudan, WFP, October 2004

Table 10: Prevalence of acute malnutrition in Darfur (WFP/FAO/UNICEF/CDC report)

Table 5.3 Prevalence of acute malnutrition (< -2 whz) among children 6 to 59 months (N=844)		
Acute Malnutrition	Prevalence	95% CI
Global acute malnutrition	21.8%	(18.2, 25.3)
Severe acute malnutrition	3.9%	(2.3, 5.6)
Edema	.9%	

6.4.2. Health and Nutrition programme

UNICEF's response in the Health and Nutrition sectors in Darfur focused on how to improve the health of mothers and their children.

Health

Health activities comprise the following components:

- Support for coordination efforts in collaboration with MoH, WHO and major NGOs;
- Monitoring of the health situation through the network of partners;
- Direct vaccination campaigns (polio, measles and standard EPI) in some areas;
- Provision of vaccines and key cold chain components to NGOs (cold boxes, ices boxes);
- Provision of health kits for health institutions and health posts run by GoS and NGOs;
- Provision of equipment for organisations working in Mother and Child Health (MCH);
- Provision of mosquito nets (Long Lasting Treated Net, or LLTN) through the UNJLC as part of a more elaborated malaria control programme;
- Monitoring the UNICEF supported programmes in order to adjust content and report to donor.

Table 11: Activities in Health during the 90-Day Plan (to be completed)

Activity	Target	Results
No. of children 6 months to 15 years to be vaccinated against measles	2,260,000	2,023,000
No. of children 6 months to 15 years to be vaccinated against polio	1,031,000	1,011,463
No. of pregnant women to be vaccinated against tetanus	22,000	18,000
No. of health facilities receiving technical, drug and equipment support	100	127

Source: UNICEF Report on the 90-Day Plan

The vaccination campaigns have undoubtedly had a significant impact in preventing outbreaks of 'camp syndrome' diseases, such as measles. Most informants praised UNICEF's efforts to negotiate and implement vaccination programmes on both sides of the front line. There is however a degree of debate regarding the true extent of coverage achieved by the vaccination campaigns. A recent WFP/CDC survey, in which FAO and UNICEF were also involved, gives the following coverage for the measles and Vitamin A programmes:

Table 12: Coverage of measles vaccination and Vitamin A distribution in Darfur

Program	Coverage*	95% CI
Measles coverage in previous 6 months		
Children 6-59 months	65.1%	(55.7, 74.6)
Children 9-59 months	66.7%	(56.8, 76.6)
Vitamin A coverage in previous 6 months		
Children 6-59 months	74.1%	(67.2, 81.1)
Children 9-59 months	74.2%	(66.8, 81.5)
*95% coverage needed to prevent measles outbreaks		

This survey is the most extensive multi-stakeholder study carried out in the Darfur since the beginning of the emergency and the estimated vaccination coverage, with its confidence interval, falls mid-way between the numbers produced by various agencies, including UNICEF.

A recurring comment in the field is that the 'standard health kit' response is valid for only a relatively brief period. Many NGOs complained that a sizeable part of the health kit lost its usefulness as the situation evolved and that it was necessary to buy other components on the local market. Pharmacies in several health structures had entire shelves full of unused drugs. It should be noted that this comment crops up regularly in the transition period when assistance shifts from emergency to care and maintenance, and is by no means specific to Darfur operations.

UNICEF was praised by all NGOs interviewed for having changed its malaria treatment strategy relatively quickly, exchanging Chloroquine, which is known for its high levels of resistance, for the Artesunate-based treatment.

The mosquito net programme has experienced many difficulties. UNICEF supplied 150,000 Long Lasting Treated Nets (LLTN) to the Ministry of Health (MoH) for the National Malaria Programme. However, the LLTN were stocked in the South Darfur Ministry of Health warehouses for months, while UNICEF and the MoH endeavoured to agree on a distribution plan. Indeed, UNICEF suggested that the distribution plan discussed in Khartoum in mid-February be reviewed in order to incorporate free distribution to recent IDP settlements in Darfur but the MoH insisted on maintaining the cost recovery strategy previously defined. Despite several attempts, UNICEF failed to persuade the MoH to allocate nets to IDPs. Reported irregularities in the MoH distribution of LLTN prompted an investigation in August 2004⁴³.

⁴³ For further information, see 'Note for the record on the meeting with National Malaria Program on LLTN Distribution' of 11.02.2004 and *The LLTNs fiasco* chapter in the Report on the field trip to S. Darfur 08-13/08/2004. 'The main purpose of the visit was to investigate the reported irregularities involving the distribution of LLTNs sent earlier to the state.'

Further clarification is still required with regards to the delay in distribution of LLTNs until June/July 2004, how the nets then came to be available on the open market and where the money generated from the sale of LLTNs was kept and how it was utilised.

At the time of the evaluation, UNICEF was supporting 54 health facilities, including two mobile clinics from the MoH. The mobile clinics have also encountered several difficulties. In South Darfur, the Evaluation Team were informed that the resources provided by UNICEF to the MoH mobile clinic teams were not being used for the running of the clinics⁴⁴.

Nutrition

Nutrition activities included:

- Support for coordination efforts as lead agency for the sector, including the promotion of information sharing;
- Provision of high energy and specialised food items for the feeding centres . This included various kinds of milk formula, as well as the newly developed “plumpeanut” (a extremely expensive item currently tested for community and home based nutrition programmes);
- Provision of medical supplies for the re-nutrition scheme (de-worming, vitamin, malaria treatment, etc.);
- Provision of various items for micronutrient deficiency (vitamin A, iron complement for anaemia, etc.);
- Support to surveys and training (including by involving well known experts to provide in-country training to staff from NGO and MoH).

Table 13: Activities in Nutrition during the 90-Day Plan

Activity	Target	Results
No. of existing supplementary feeding centres to be supported or established	24	30
No. of existing therapeutic feeding centres to be supported or established	24	30

Source: UNICEF report on the 90-Day Plan

The main difficulties encountered by UNICEF and its partners in the Nutrition sector are related to access to affected areas, irregularity of supply, which is not surprising given the logistical constraints, and establishing an overview of the sector for future operations, which is mainly linked to staffing and security constraints.

Access remained a problem, as shown below:

Among children with moderate acute malnutrition, only 18% were enrolled in supplementary feeding. None of the children identified by the survey to have severe acute malnutrition were enrolled in therapeutic feeding. Measles vaccination coverage for children aged 9-59 months was also very low, at 66.7% [95% CI 56.8, 77.6].

Extract from “Emergency Food Security and Nutrition assessment in Darfur, Sudan, WFP, October 2004

As the situation improves, activities are shifting from traditional nutrition centres to a community approach. UNICEF is monitoring the various interventions and provides information and technical guidance when required.

The various food and nutrition interventions (WFP food aid, UNICEF and NGO nutrition programmes) have drastically improved the situation, which nevertheless remains precarious. The WFP/FAO/UNICEF/CDC study confirms this hypothesis as shown in the table below.

⁴⁴ See the *PHC situation, activities & findings* chapter in the Report on the field trip to S. Darfur 08-13/08/2004. ‘MoH admitted that no mobile teams have been organized ever. Dr. Malik is investigating how the disbursed funds for this purpose had been utilized.’

6.4.3. Sector coordination

While the primary coordination role in the health sector lies with WHO, one of the key roles UNICEF has been expected to play is coordinating the Nutrition sector. The Nutrition Sector is extremely competitive and many NGOs have developed highly sophisticated methods and employ well-trained staff. Yet, it is also a sector that encompasses several schools of thought. For an organisation to be recognised as legitimate for the coordination of this sector it must have a team of senior nutritionists. Several aid actors mentioned to the Evaluation Team that a certain amount of time was required before UNICEF was perceived as having the necessary staff to deliver the quality coordination necessary, given the complexity of the situation.

At the time when needs in terms of staffing and support were acute, the NYHQ nutrition team was reduced to one person. Additionally, only one field-based UNICEF nutritionist participated in the recent WFP/FAO/UNICEF food security and nutrition survey, compared with numerous senior WFP staff, FAO specialists and CDC consultants.

6.4.4. Conclusion

Commendable achievements were made by UNICEF and its network of partners. Other agencies, especially NGOs such as MSF, that are not required to respect UN Security regulations have managed to achieve wider coverage in the rural areas, where UNICEF access remains limited. One important exception was the mass vaccination campaign for polio and measles on both sides of the frontline. Access to SLA/JEM controlled areas and cross-border cooperation remain important challenges.

The focus on quantitative information has not always been complemented by enough epidemiologic data collection in order to monitor trends and appraise impact. However, the situation improved during the 90-Day Plan with the deployment of more medical staff in both UNICEF and WHO field offices.

7. CONCLUSIONS

The year 2003, and the first months of 2004, represented a very difficult period with a slow start to emergency operations due to: the complex political situation; logistical, security and resource constraints experienced by the Sudan CO; the CO's lack of preparedness an emergency of this magnitude. From June 2004 onwards however, programme activities geared up and many positive results have been achieved. In recent months, UNICEF's response and the effective implementation of programmes though its partners have improved the conditions of the IDPs. UNICEF's difficulties in its early management of the Darfur crisis have raised some questions about its emergency preparedness and response capacity. The quality of the relationship between DFID and UNICEF has suffered to an extent but this joint evaluation shows that both parties are committed to restoring confidence levels.

The conclusions below are based on overall performance, using the OECD/Development Aid Committee (DAC) evaluation criteria.

7.1. Relevance

The technical sectors of intervention (child protection, education, WES, health and nutrition) were extremely relevant to IDP needs. The problems related to IDP camps and populations on the move are well known in humanitarian circles, yet the strategy adopted by UNICEF to deal with these problems is less well developed. It may be misleading to assume that an emergency response can be mainstreamed into development programmes and this should not be attempted at the expense of emergency activities.

The question of the relevance of the CCC is also important. The CCC, as they currently stand, are more appropriate for rapid-onset natural disasters rather than protracted complex conflicts.

7.2. Effectiveness

The very early response that took place in 2003, with initial provision of supplies from the contingency stockpile, was effective.

The period from November 2003 to May 2004 was much more difficult for the majority of humanitarian organisations, UNICEF included, and operations on the whole could not be implemented effectively during these months, partly due to restricted access⁴⁵. The lack of humanitarian organisations in the field particularly affected UNICEF since it works mainly through implementing partners. When emergency relief operators are limited, UNICEF's effectiveness suffers dramatically. The declaration of an organisation-wide emergency in May 2004 substantially bolstered UNICEF's Darfur response. In most cases, programmes reached or exceeded the targets stipulated in the 90-Day Plan.

Until May 2004, recruitment processes had difficulty supporting a large-scale emergency response and UNICEF was heavily reliant on external surge capacity. This situation is risky for an institution with both an operational and a normative role, for example in the domain of elaboration of policies, promotion of norms and manuals, etc.

The capacity of the NYHQ WES department is severely depleted and it was unable to satisfactorily fulfil the role that partners and donors expect in emergency situations. UNICEF effectiveness in the WES sector has sharply declined over the years.

7.3. Efficiency

UNICEF efficiency relies heavily on that of its partners and this posed a serious problem at end 2003 and during the first six months of 2004. When UNICEF realised that no WES partner would be present in many regions for some time, the use of private contractors (April/May 2004) in drilling and latrine construction to meet increased targets was cost-effective, although real capacity (out of six contractors, only one submitted a bid for the project) and issues of quality arose later. The June 2004 participatory workshop process, which brought Khartoum staff to each of the Darfur states to engage with Field Offices and partners on the 90-Day Plan (example of good practice), was a very efficient mechanism to boost implementation.

The mobilisation of resources in early 2004 from CERF and EPF and standby arrangements with certain donors (DFID) and NGOs, have proved critical to increase UNICEF's intervention capacity. Some technical choices (i.e. the heavy drilling equipment) significantly limited programme efficiency.

7.4. Impact

After months of difficulties, the activities implemented by UNICEF and its partners finally started to produce a real impact in most sectors during the 2004 rainy season. Relatively weak monitoring systems and UNICEF's near-total reliance on partners (due to UN security regulations) did not permit a thorough assessment of progress and impact, or of the quality of partner information.

The continued violence against children and women seems to indicate that UNICEF's initial advocacy, together with the advocacy efforts of the international community (Dec 2003/Feb 2004), have had a limited impact. It took a strong statement, in which Darfur was compared to the Rwandan genocide just prior to the latter's tenth anniversary, to catch the world's attention.

Many inhabitants from Darfur are now facing a situation where health, education services and access to water are of a significantly better quality to those in their villages. This level of assistance may well generate a degree of 'dependency syndrome', whereby it is difficult for IDPS to return to their villages. The demographic and human settlement pattern will therefore be drastically modified if many choose not to return to their area of origin.

⁴⁵ The notable exception is MSF, who was able to mobilize its own funds and thus benefit from a greater freedom to intervene.

7.5. Coordination and coherence

UNICEF was a full member of the UNCT and participated in all coordination mechanisms. Due to strained relations, coordination between UNICEF and other actors in the UNCT has at times been troubled. Internal coordination between the CO, the RO, NY and Geneva HQ suffered as a result of the complexity of the organisational set-up and from certain aspects related to the decentralisation process. In some instances, information has passed through certain channels without reaching all the stakeholders, generating misunderstandings, or worse, creating tension.

In Darfur, UNICEF faced difficulties in effectively fulfilling the lead agency role simultaneously in several sectors. UNICEF resources were spread too thin which weakened its technical capacity in some sectors. Initial staffing in UNICEF field offices was insufficient which also hindered its coordination role in all sectors. As UNICEF's capacity increased, its performance in coordination improved significantly from mid-June onwards. In sectors where UNICEF was equipped with appropriate levels of human resources, expertise and technical capacity inputs, progress and added value were real. The following box presents the key challenges facing an organisation playing the role of 'sector lead agency'.

Box 6: Characteristics of a sector lead agency

To play a lead agency role, an agency should:

Be respected and recognised as legitimate by the other stakeholders, and therefore develop the capacity to:

- be proactive in situation analysis and assessment of risks;
- clarify the different parameters of the situation by proper and shared assessments and handle the issues at stake in terms of advocacy;
- demonstrate an overall control of the sector;
- give a sense of direction;
- become operational if, and when, required (for example, if there is no potential implementing agency);
- rapidly deploy key technical staff from either HQ or RO, in order to backstop operations.

Bring added value compared to others, by developing capacity to:

- set up and manage a multi-stakeholder coordination system where people will feel comfortable (i.e. coordinate with rather than be coordinated by);
- set technical standards and provide technical backstop if, and when, required;
- set up and maintain a system for gathering and sharing information, with built-in quality control of the information;
- set up a supply chain for the key inputs required in the given sector.

Protection and security remain key concerns for most IDPs and humanitarian agencies in Darfur. The Protection Sector still lacks a lead agency from the UN system, which has created difficulties in ensuring coherency between Child Protection activities and the rest of the Protection sector.

The recent appointment of a UNICEF Special Representative for Darfur and Eastern Chad and the establishment of a specific department with emergency expertise are based on the assumption that this new set-up will ease the burden on staff running the regular Sudan programme and generate a certain level of coherence, if not synergy, between programmes on both side of the border.

7.6. Sustainability

Emergency programme strategies focus on saving lives and sustainability is not necessary a key objective. Whether sustainability becomes a priority or not in Darfur will depend upon how the situation evolves. Three main scenarios exist: a deterioration in the context with increasing demand for emergency relief; status quo with needs for care and maintenance; stabilisation, with ad-hoc requirements for rehabilitation. Given the uncertainty surrounding ongoing peace talks, proper contingency planning will prove essential.

In the current context, extending programmes into as yet inaccessible areas and quality control will be key factors in improving the quality of the response and in ensuring flexibility.

In the health sector, the next challenge lies in health economics. When the time comes to return to pre-emergency health systems, a gradual transition to cost-recovery is essential. UNICEF has been involved in the Bamako Initiative since its introduction and should continue to promote sustainable health systems that are coherent with the population's economic situation. This will be crucial for the sustainability of programmes that are based on government-managed health structures.

Table 11: Multi-scenario analysis for Darfur

Scenario	Description	Impact on the populations
Prompt and durable solution	This would imply a watertight political agreement between the three known factions that are currently active in Darfur	Some of the population will go back to their villages, others will remain in the quasi-urban settlements where they have managed to identify and adopt survival mechanisms. It is likely that many families will combine these two approaches. Access will increase, the nature of the needs will change, funding requirements will probably not drop for a while, but donor interest might decline.
Status quo	The situation remains as it is, with an acceptable access to large concentrations of IDPs but limited access to the countryside.	Population movements will continue, although at a slower pace, and it is possible that some return movements will be observed. In supporting the camp populations, aid programmes will shift from a pure emergency approach to a care and maintenance approach. There is a risk of donor fatigue.
Deterioration	No political agreement is reached or at least not one with all factions. High insecurity and related access constraints prevail. More people move to the camps.	Needs will continue to rise under the double pressure of a pull factor (aid availability and security) and a push factor (fear and acute needs in the countryside). Agencies will experience difficulty in mobilising enough staff and resources to cope with the scale of the situation.
Combination or 'continuum'	A mix of the above three scenarios with various outcomes depending on the area	Interventions will continue to rise in number but will vary in relation to the nature of needs due to the mix of emergency, care and maintenance and rehabilitation responses. Donor fatigue is a significant risk.

8. RECOMMENDATIONS

Table 12: Recommendations for UNICEF and Darfur operations

LEVELS AND PRIORITY		RECOMMENDATIONS
GENERAL RECOMMENDATIONS FOR UNICEF		
Recommendations to enhance UNICEF Emergency Response Capacity	Priority 1	<ol style="list-style-type: none"> 1. The relevance of CCC in slow-onset and protracted crisis should be reappraised. EMOPS should review the CCCs and develop a CCCs Implementation Handbook (as per recommendations in Heffnick Study on Rapid Deployment of Suitable Human Resources for Emergencies, July 2004). 2. OPSCEN role/capacity as an early warning mechanism should be assessed by EMOPS and if necessary strengthened. The CO, with RO support, should undertake a participatory EPRP process. If deemed necessary, EMOPS Geneva EPRP Unit should support this activity. 3. Roles and responsibilities in emergency response at CO, RO and HQ level must be clarified. The Office of the Executive Director should continue to stress the responsibility of RO and NY HQ in assessing CO capacity and if necessary take robust measures to ensure response is sufficient. 4. CO should be instructed to designate a separate emergency officer/task force with clear division of responsibility early in the crisis. If CO is reluctant to implement, RO/EMOPS should investigate the CO's capacity and structural organisation.
	Priority 2	<ol style="list-style-type: none"> 5. DHR and EMOPS should review progress in relation to the recommendations provided in the Heffnick study (the Evaluation Team was unable to assess progress in relation to all recommendations). Clear policy for HR in emergencies should be documented and disseminated to RO and COs. 6. NY HQ Division of Communications should ensure that guidelines and lessons learnt in communication during emergencies are packaged and disseminated to CO Communication Units. UNICEF NY HQ should discuss the possibility of using Advocacy in Emergencies Toolkit as a pilot in Sudan with CO. 7. UNICEF NY HQ should examine the possibility of allocating ad-hoc in-house funds for emergency communications to ensure early support to Communications function. CO should integrate a Communications strategy when developing future EPRP and contingency plans 8. UNICEF should continue to advocate (to donors but also international humanitarian community) that education should be treated as a priority in emergency. Since UNICEF recognised the multi-sector nature of the needs of the affected population and that protection issues were a high concern, a Child Protection plan should be drawn up with specific activities focusing on general management and on a sector-by-sector basis. 9. UNICEF still needs to develop appropriate tools and guidelines to enable staff to deal appropriately with protection issues. Protection issues should be further integrated into the different sectors (components) of the programme rather than being treated separately. 10. Evaluation Office NYHQ should compile findings and action points on emergency related reviews undertaken over the past twelve months. EMOPs should compile a list of all emergency tools (and updated status of development). Both documents should be disseminated to HQ and RO emergency focal points and countries experiencing, and prone to, emergencies. 11. EMOPS should undertake dissemination of the recently revised emergency funding mechanisms (CERF and EPF). 12. EMOPS should examine the potential of a RO trigger, as part of a staged approach to supporting country-level response. 13. UNICEF in general should further invest in the prevention of SEA and SGBV. Causes of threats need to be identified and documented urgently. Protection issues related to humanitarian assistance should be identified and addressed at a very early stage in the programme. The link between monitoring, reporting and advocacy should be strengthened.

Operational recommendations for the management of Emergency Programme	Priority 1	<p>14. EMOPS should establish standard mechanisms for surge support whereby the first support sent is a team to back up senior management functions (cf. Liberia RTE recommendation).</p> <p>15. CO should ensure that baseline assessments are carried out urgently (for example in water and sanitation) to feed into future planning. CO planning process should then be undertaken for each sector and operational unit. This should integrate lessons learnt and findings from Zonal Offices.</p> <p>16. Strong investment in roster development and maintenance, together with diversification of stand-by arrangements should be implemented.</p> <p>17. CO should ensure that operation support staff are deployed prior to, or simultaneously with, programming staff in order to ensure minimum working conditions (computers, printers, etc.) and living conditions, in compliance with MOSS requirements (proper communication means, evacuation plan in place). HQ DRH and CO should ensure that the mechanisms and means for proper staff care are in place.</p> <p>18. UNICEF HQ should examine its role and capacity to fulfil its obligations under the CCCs in emergencies where implementing partners are limited.</p> <p>19. UNICEF HQ, RO and CO should analyse their own capacity and subsequently ensure that it can call on the appropriate technical capacity if required. The emergency HR structures at all levels (NY HQ, RO and CO) should be reinforced at an early stage in case of large-scale emergencies. If necessary, this should be undertaken prior to declaring an organisation-wide emergency.</p>
	Priority 2	<p>20. A strategy should be designed for CO Communications Unit with specific targets for advocacy and fund raising. This should be harmonised with the strategies of RO and HQ to ensure coherence in the messages. This strategy should also include processes and mechanisms for monitoring its effectiveness.</p> <p>21. CO should update their assessment of the capacity of current partners on the ground. If necessary, CO, together with RO and EMOPS, should examine alternative implementation modalities if capacity remains lacking.</p> <p>22. CO should ensure that a clear monitoring and reporting mechanism is defined at a very early stage in the project cycle in order for these activities to be integrated into the programme planning process. The quantity and nature of information gathered should be adapted to the management and coordination requirements of the different sectors.</p> <p>23. Outputs should not be exclusively defined in terms of quantitative performance but should include qualitative impact indicators. Monitoring should be conducted with short-term, mid-term and long-term goals in mind.</p> <p>24. Training and staff development are strategic activities, which contribute to an agency's capacity to run protracted relief and rehabilitation operations.</p> <p>25. SD should ensure that a dedicated person in Copenhagen is assigned to support the Sudan operation (with appropriate funding from the emergency operation's budget).</p> <p>26. CO should share detailed supply plans for all programme sectors with SD as early as possible to allow time for sourcing and procurement of supplies, thus ensuring effective, efficient and timely response.</p> <p>27. If the decision is taken that UNICEF will manage warehouses in an emergency, it is important to produce an in-house Logistics and Supply guide (or to adopt one produced by a sister agency) and to provide training on warehouse management.</p> <p>28. CO should ensure that all opportunities are explored to reinforce the position of UNICEF in coordination. A clear strategy should be developed that is supported with manpower and information management software and hardware and that is coherent with other types of coordination system (including OCHA and HIC). DRH should develop a roster of people with both technical knowledge, and facilitation and negotiation skills.</p> <p>29. In future cross-border crises, relevant COs and ROs should ensure inter-country communication, technical coordination and information sharing from the inception of the operation through regular contact between both top management and technical focal points.</p>

30. RECOMMENDATIONS FOR THE CURRENT DARFUR OPERATION		
General recommendations	Priority 1	<p>31. Proper funding, lines of responsibility and coordination mechanisms should be put in place to ensure that the creation of the office of the Special Representative for Darfur is an efficient and effective set-up.</p> <p>32. The CO should continue to regularly up-date contingency planning on a cross-border basis, paying particular attention to the need for a coherent cross-border approach.</p> <p>33. Monitoring efforts should not exclusively focus on the situation in the IDP camps but also consider the impact on host and resident communities.</p> <p>34. CO should invest further resources in exploring means of gathering information on inaccessible areas.</p> <p>35. The number of external missions that are sent to ZO through CO should be kept to the minimum required. Additional staff should be deployed and assigned for this specific purpose</p> <p>36. CO should continue to ensure that all major planning exercises include Zonal Offices as well as partners.</p> <p>37. CO should ensure that joint planning meetings between technical sectors (Health and Water and Sanitation, Education and Child Protection, etc) are held regularly for information exchange and identification of cross-sector synergies</p> <p>38. Sudan and Chad CO should promote cross-border initiatives in all fields, especially in Health, Education, WES and Protection.</p> <p>39. CO should recruit a separate HR officer to support the ongoing operation. Development of a twelve-month staffing strategy, which is currently being undertaken, is essential and should be regularly updated. Deployment of replacement staff should be organised in order to ensure a proper handover process.</p> <p>40. CO should ensure that monitoring takes place in the most appropriate and cost-efficient way. Additional specialised staff should be hired and assigned to the M&E unit as Darfur focal points in order to provide technical support to the different programme sections.</p>
	Priority 2	<p>41. Greater emphasis should be placed on data analysis, as opposed to data collection. A data specialist should be recruited and assigned to the PME unit to verify and analyse all quantitative data prior to final edition of UNICEF documentation.</p> <p>42. All newly recruited staff should receive a three-day training on UNICEF's Programme Policies and Procedures, with special emphasis on Emergency, Rights Based programming, administrative management and in-country orientation</p> <p>43. CO should envisage and plan for different scenarios to overcome any break in supply chain links. Recruiting experienced logistics staff to manage emergency supplies in and out of the warehouses, distribution and monitoring with beneficiaries, should resolve many of the difficulties encountered.</p> <p>44. CO/SD should continue to update its information on produce availability through regular market survey in Sudan as part of contingency and preparedness planning for the Emergency Preparedness.</p> <p>45. CO should produce a list of the essential documents that should be made available as standard briefing kit to any new staff, visitors or consultants. Consultants' time should be maximised for the key tasks of the exercise for which they are contracted, and not the compilation of basic background information. In order to achieve this, there is an urgent need to upgrade the filing system.</p> <p>46. CO should ensure that Zonal Offices are integrated into the decision-making process with the CO in Khartoum.</p> <p>47. CO should ensure that women, who represent roughly 65% of the total population in camps, see their needs clearly integrated in all activities. Monitoring should be gender oriented.</p> <p>48. A multidisciplinary evaluation might be worth considering for mid-2005.</p>

SECTOR RELATED RECOMMENDATIONS	
Child protection	<p>49. CO and Protection Section should ensure that protection concerns are integrated in preparedness planning. CO and Protection Section should facilitate the assessment of the specific protection needs of men, women, boys and girls at the early stage of the emergency.</p> <p>50. Emergency coordinator and Protection Section should ensure that protection is integrated into existing sector intervention plans.</p> <p>51. CO and Protection should engage in dialogue with the AU troops on child protection, SGBV and HIV/AIDS in order to reduce the risk of improper behaviour (as per evaluations in Guinea, Sierra Leone, Cambodia, etc.).</p> <p>52. UNICEF should systematically incorporate HIV/AIDS prevention in SGBV activities and provide relevant information, as stated in the CCCs.</p>
Education	<p>53. SD should ensure that Quality control of recreational kits supplied by Copenhagen be carried out prior to arrival in country. Greater care should be taken in classroom design so that they can withstand the specific climatic conditions in the region.</p> <p>54. ZO and Education Section should define a set of criteria for the selection of the location of temporary classrooms, in order to relieve or avoid raising tensions between IDP and host communities.</p> <p>55. CO and Education Section should be more involved in seeking a practical solution to the teachers' salary issue.</p> <p>56. The Emergency Coordinator and the Education Section should ensure that other sectors are providing adequate support for schools (construction and maintenance of latrines and water points).</p>
Water and sanitation	<p>57. WES NYHQ emergency staffing capacity should urgently be strengthened.</p> <p>58. The CO should ensure that the recommendation of NYHQ WES Senior Officer to set up a WES database (including types of equipment, spare parts, maintenance requirements, etc.) be implemented.</p> <p>59. The CO should identify alternatives to the heavy drilling rigs of the NWC/WES and diversify its range of technical options.</p> <p>60. The CO WES and Supply Sectors should monitor the quality of hand pump supplies.</p> <p>61. CO WES should examine requirements for maintenance and repair of existing water and sanitation systems, including (where relevant) the social organisation required to undertake these activities.</p> <p>62. Enhanced sanitation monitoring should be carried out to verify whether the response continues to meet needs. CO must urgently engage with partners in planning for alternative options to the existing latrine system in IDP camps in the process of urbanisation.</p>
Health	<p>63. Coordination with WHO on establishing coherency between MCH, primary health care, prevention, etc. should be further nurtured and developed.</p> <p>64. Information on the options for the design of a regularly updated primary health kit should be disseminated to NGOs and other partners.</p> <p>65. Health Sector should a) develop a strategy for monitoring health economics in order to reduce the risk of system abuse, for example, IDPs having to pay for drugs and medical care, and b) strengthen its capacity to advise the government and the affected population when the situation has become sufficiently stable to return to a cost-recovery system in healthcare.</p> <p>66. UNICEF should continue to use EPI, polio and measles vaccination campaigns as well as nutrition surveillance, as a means of gaining access to, and eventually developing its activities in SLA/SLM and JEM areas. This strategy should be coherent with activities implemented in Government-controlled areas.</p> <p>67. In view of the difficult security situation, agencies should take advantage of opportunities to access areas and populations (multi-sector activities).</p> <p>68. As part of an integrated approach to SGBV and reproductive health, culturally acceptable HIV/AIDS prevention messages should be more widely disseminated, including to OAU troops.</p>

RECOMMENDATIONS FOR THE DFID-UNICEF RELATIONSHIP	
Nutrition	69. UNICEF's position in the nutrition sector has to be strengthened at all levels, including HQ and RO. (This appears to be currently underway at New York level as a second nutritionist has been recruited recently.)
	70. HQ should press for systematic UNICEF involvement in inter-agency missions related to nutrition. A senior in-house nutritionist should be assigned to these missions in order to retain a leading role.
	71. UNICEF should continue to promote good practice information, especially in relation to the new area of community-based therapeutic feeding.
	72. Mid-level EMOPS – DFID London contacts must be further nurtured during the crisis response and utilised to discuss operational concerns. Diversified and coordinated mechanisms to ensure a good dialogue with DFID should be established, with the PFO retaining its prominent role.
	73. DFID should ensure there is clear added value in DFID procurement of in-kind support, especially with regard to the time factor. If UNICEF requests cash support, DFID should not insist on providing in-kind support.
	74. The DFID-UNICEF surge capacity arrangement should be continued. If a revision of the MOU is required, this should be undertaken immediately to avoid any delays in rapid deployment.
	75. UNICEF Evaluation Office should ensure that this review is shared with the external team conducting the review of the DFID-funded UNICEF capacity building programme for emergency response.

