



United Nations Population Fund

Distr.: General
2 March 2020

Original: English

Second regular session 2020

31 August – 4 September 2020, New York

Item 13 of the provisional agenda

UNFPA – Evaluation

United Nations Population Fund

Evaluation of the UNFPA capacity in humanitarian action *

Summary

The Evaluation Office conducted an evaluation of the UNFPA capacity in humanitarian action, as part of the quadrennial budgeted evaluation plan (2018-2021). Covering the period 2012-2019, the evaluation assessed the organizational capacity of UNFPA in humanitarian action, in terms of both preparedness and response.

The evaluation generated important findings, conclusions and recommendations. It is intended to support accountability for past and present performance and contribute to evidence-based decision-making for future humanitarian programming priorities at UNFPA.

* Reissued due to the COVID-19 impact on meetings

I. Background

1. The number of people affected worldwide by humanitarian crises continues to rise as both the frequency and severity of natural disasters and complex emergencies increase. The United Nations has calculated global humanitarian requirements of \$21.9 billion to reach 93.6 million people in 2019.¹ Both the scale and nature of displacement have changed, with the latter becoming more protracted, and in multiple waves over time, with populations being secondarily or repeatedly displaced. Displacement is also increasingly manifested within urban settings and out-of-camp settings, as opposed to traditional camp settings. Cyclical disasters – particularly those driven by climate change– are increasing in frequency and scale, and historical drivers of conflicts are re-emerging with new dimensions.
2. Against this background, there have been significant changes in the global humanitarian architecture since the adoption of United Nations General Assembly resolution 46/182,² which laid the foundation for the current global humanitarian response system in 1991. The most prominent changes include: (a) the humanitarian reform agenda, in 2005, which resulted in the establishment of the extant cluster system; (b) the Inter-Agency Standing Committee (IASC) transformative agenda, in 2011, which was based on the three pillars of improved coordination, improved leadership and improved accountability; and (c) the World Humanitarian Summit, in 2016, from which stemmed the Grand Bargain – an agreement among donors and humanitarian agencies on a range of improvements to the humanitarian system – and the “New way of working”, which responds to the need to strengthen the humanitarian-development nexus.
3. Within this global context, UNFPA has sought to meet its mandate under successive strategic planning cycles and under the 2012 UNFPA second-generation humanitarian strategy. In line with this strategic direction, humanitarian action for UNFPA currently focuses on the prevention of and response to gender-based violence, the provision of sexual and reproductive health and rights services, working in the field of humanitarian data and, more recently, for and with young people in humanitarian action.

II. The purpose, objectives and scope of the evaluation

4. The primary purpose of this evaluation was to assess the organizational capacity of UNFPA in humanitarian action, in terms of both preparedness and response. A secondary purpose was to generate findings and lessons that would be of value across UNFPA and for other stakeholders.
5. The specific objectives of the evaluation were to assess: (a) the relevance of humanitarian programming at UNFPA; (b) the extent to which internal systems, processes, policies and procedures allowed for efficient and timely humanitarian action; (c) the effectiveness and coverage of humanitarian action; (d) how connected humanitarian activities are with the longer-term vision and strategic plans of UNFPA; and (e) the extent to which humanitarian principles, minimum standards, human rights and gender equality are integrated into humanitarian action. Finally, the evaluation sought to draw lessons from past and present UNFPA humanitarian work and propose recommendations for future humanitarian programming priorities at UNFPA.
6. The evaluation had a global geographic coverage, with a focus on all countries considered ‘priority countries’ by UNFPA. It covered all UNFPA-supported humanitarian interventions, in all types of humanitarian settings, during 2012-2019.

¹ United Nations Office for the Coordination of Humanitarian Affairs, Global Humanitarian Overview, 2020.

² United Nations General Assembly resolution 46/182: Strengthening of the coordination of humanitarian emergency assistance of the United Nations (1991).

III. Evaluation methodology

7. The evaluation methodology followed a mixed multi-method approach, combining qualitative and quantitative data collection methods, including a desk review of documentation, key informant interviews and community-based focus group discussions.
8. Triangulation of data was ensured through systematic crosschecking of pieces of evidence from different sources and by applying different data analysis methods.
9. A total of 437 key informants were interviewed across 15 countries and UNFPA regional offices and headquarters (including field visits in four humanitarian programme countries³ and extended desk reviews of another 11 countries).⁴ A total of 150 current or past beneficiaries of UNFPA interventions were interviewed in the four field visit countries. In addition to the countries selected for primary data collection, the evaluation team prepared in-depth analyses of two thematic areas: (a) supply chain management for humanitarian commodities and (b) human resources for humanitarian action, for which specific reports were prepared.

IV. Key highlights

10. The evaluation developed a number of findings, which are highlighted below.

There has been a significant trend of improvement in humanitarian action by UNFPA and progressive, albeit inconsistent, alignment of humanitarian programming with strategic directions.

11. The evaluation has gathered strong evidence to indicate UNFPA humanitarian response as a whole has significantly and positively evolved from 2012 to 2019. In 2015 (the earliest year for which full data was available) the global UNFPA humanitarian spend was \$82,386,133. In 2018 it was \$172,625,466, which accounts for 31 per cent of total spending for that year, a doubling of humanitarian activity in financial terms in just three years. This growth exists within the overall context of a scaling-up in international response to meet increasing humanitarian needs but it is also indicative of an evolution in the scale of humanitarian action within UNFPA, as illustrated by the establishment of the stand-alone Humanitarian Office in 2019. As a result, UNFPA and its mandate have gained increased visibility within the humanitarian sphere.
12. Humanitarian programming is well aligned with specific humanitarian needs regarding sexual and reproductive health and rights and gender-based violence in different humanitarian contexts.
13. There are clear output-level results of maternal and newborn health services and some evidence of gender-based violence service-delivery effectiveness. Youth programming is increasing, but still nascent, with examples across most countries of increased consideration for youth-friendly or adolescent-friendly services.
14. UNFPA has progressively mainstreamed humanitarian assistance in all its strategies and programmes, notably since the adoption of its strategic plan, 2014-2017. However, this evolution has not been uniform; the overarching institutional approach remains predominantly development-orientated. This presents a challenge to effective humanitarian programming, particularly when seeking to balance financial risk and response timeliness, managing human resources to best effect (via surge and other mechanisms) and management of humanitarian commodity-supply chains.
15. The second-generation humanitarian strategy was relevant to UNFPA in 2012, and has set the ground for the mainstreaming of humanitarian action in subsequent strategic documents. However, due to the changing global humanitarian context and the evolving UNFPA role within humanitarian action, the strategy requires updating.

³ Democratic Republic of the Congo, Haiti, Indonesia and Ukraine.

⁴ Bangladesh, Chad, Colombia, Nigeria, Philippines, Somalia, South Sudan, Sudan, Turkey and Yemen.

UNFPA has put in place several useful monitoring systems. However, the lack of coherent and comprehensive monitoring data limits the capacity of the organization to fully demonstrate the results of its humanitarian assistance.

16. UNFPA has progressively developed several monitoring systems, which provide useful information on results achieved at activity and output levels, particularly in the field of maternal and newborn health services.
17. However, these monitoring systems are not systematically or consistently utilized, leading to a lack of coherent and comprehensive data on the results of UNFPA activities on the health and welfare of target populations. Thus, the effectiveness of UNFPA cannot be fully or reliably measured in many country contexts or aggregated at regional or global levels. It also presents challenges to setting appropriate targets for results.

There are many examples of processes being successfully applied across humanitarian and fragile settings for needs assessment and geographic and demographic targeting; such processes need to be systematized.

18. The evaluation noted strong evidence that regular and continuous assessment of needs are conducted, and that responses are being adjusted in response to the identified needs. Across the sample of countries examined for this evaluation, there is evidence of an evolution of humanitarian response across different phases of a crisis, adapting to changing needs of affected populations.
19. However, there is no systematic approach to these processes. UNFPA staff frequently struggle to access adequate corporate guidance, miss opportunities for synergy and duplicate efforts in developing or implementing basic approaches, tools and processes.

In a difficult resource environment, UNFPA has performed well but should align its level of risk acceptance with the requirements of humanitarian action.

20. While it has been challenging for UNFPA to mobilize adequate core resources for humanitarian interventions to fully deliver its mandate at the global level, UNFPA has been increasingly successful in mobilizing other humanitarian resources, especially at the country level, such as pooled funds.
21. UNFPA has improved mechanisms and frameworks for accountability to affected populations and protection from sexual exploitation and abuse . For accountability to affected populations, there are many examples across countries of UNFPA staff, at the programmatic level, seeking to ensure that feedback from communities, and particularly women and girls, is incorporated into programme design, implementation, and monitoring; however, this is not implemented in a coherent and systematic way. For protection from sexual exploitation and abuse, UNFPA has significantly increased the level of corporate guidance on UNFPA responsibilities for UNFPA staff, programmes and partners. However, as the implementation of mechanisms for protection from sexual exploitation and abuse is still ongoing, this has not yet translated fully into increased capacities everywhere at the country level.
22. While there are highly knowledgeable humanitarian experts in the organization, their number is not commensurate with the humanitarian accountabilities of UNFPA. This limits the capacity of UNFPA to operate within modern humanitarian architecture at country level and challenges the development of UNFPA as a major humanitarian actor.
23. The creation of an internal surge roster, in 2014, allowed UNFPA to scale up its humanitarian presence on the ground. The surge mechanism was further expanded and improved in recent years, particularly with the addition of an external roster and standby partnership agreements. However, the evaluation noted an overreliance of country offices on the surge mechanism, which is itself symptomatic of the restricted humanitarian human resources at country level.
24. UNFPA has good practices in terms of the delivery of inter-agency reproductive health kits at the beginning of an emergency. However, UNFPA is perceived as being slow and not always matching other agencies in this regard, although there are regional variations.

Currently, the supply-chain model operated by UNFPA is not optimal or specific for humanitarian response but before systems can change, UNFPA must recognize it is not possible to be an effective humanitarian agency without taking a higher level of risk aimed at ensuring timely delivery.

UNFPA demonstrates a positive trend of working with national actors and humanitarian coordination, but some sectoral gaps remain, particularly around youth.

25. UNFPA has a demonstrated and laudable record of close relationships with government partners within development contexts – a clear comparative advantage for humanitarian action. This positions UNFPA very well within the current humanitarian direction of the “New way of working” and operating toward collective outcomes across the humanitarian-development-peace nexus, despite the absence of a global strategy to optimally leverage this position. However, close relationships with governments in some contexts (e.g., conflict areas) present a risk vis-à-vis humanitarian principles of neutrality, impartiality and independence.
26. UNFPA leadership and coordination role via IASC structures (areas of responsibility, subclusters and working groups) have significantly progressed in recent years. This is particularly notable with the area of responsibility for gender-based violence, for which UNFPA has assumed sole leadership at the global level. However, in order to fully deliver on its commitment as a cluster lead agency, UNFPA must further strengthen its capacity and ensure that gender-based violence subclusters at country level are sufficiently resourced. For sexual and reproductive health and rights, there is clear evidence that the UNFPA leadership of informal reproductive health working groups under the IASC/WHO-led health cluster is effective and useful; however, in crises where working groups are not present, sexual and reproductive health and rights are deprioritized, particularly beyond elements of maternal and neonatal health.
27. Regarding youth, the absence of UNFPA coordination leadership for youth at country level precludes meeting the global commitments assumed with the Compact for Young People in Humanitarian Action (2016) and United Nations Security Council resolution 2250 (2015) on youth, peace and security.
28. Concerning humanitarian data, the role of UNFPA as the United Nations entity for population and its associated expertise in development settings has not been leveraged sufficiently for humanitarian action across all actors.

V. Recommendations

29. The following 12 recommendations are based on the analysis that informed findings and conclusions, and on discussions held with the evaluation reference group.

Recommendation 1. UNFPA should develop a strategic framework for humanitarian action.

30. This should account for:
 31. Changes in the external environment and within global humanitarian architecture structures since the previous UNFPA humanitarian strategy in 2012;
 32. A stronger UNFPA role within this architecture;
 33. Working across and bringing together the constituent parts of the triple nexus;
 34. The need to integrate humanitarian response within the overarching UNFPA Strategic Plan, 2018-2021; and
 35. The need for effective resource mobilization that facilitates timely responses to crises.

Recommendation 2. UNFPA should review existing datasets and monitoring systems to identify current gaps and bottlenecks and use this to develop a comprehensive data management system.

36. This should be integrated into the new enterprise resources planning platform currently being developed and should focus on both data management at indicator level and data

collection systems to distinguish types of data (e.g., outputs/outcomes) and purposes of data (e.g., programming, advocacy, communications) and to ensure comparability and consolidation at all levels.

Recommendation 3. The UNFPA knowledge management approach should include a work plan to ensure ongoing embedding of corporate guidance on humanitarian processes at field level.

37. This should link to the new enterprise resources planning platform and the policies and procedures repository in use but bottlenecks, gaps or access issues with respect to humanitarian knowledge/practice should be systematically identified and addressed to maximize the utility of these resources to country offices.

Recommendation 4. UNFPA should review the corporate approach on preparedness for supplies, including, where necessary, regional stockpiling and national pre-positioning.

38. This should include an organization-wide preparedness policy, including regional stockpiling and national pre-positioning that considers differentiating between contexts and types of commodities and integrating learning from ongoing initiatives. The UNFPA approach to regional stockpiling and national pre-positioning should be based on the fundamental concern for speed being as critical a factor in humanitarian response as cost and quality. Any approach should also include a review of human resources for humanitarian logistics and continual monitoring of commodity delivery times and availability in line with supply-chain management best practices of consistency and robustness.

Recommendation 5. UNFPA should develop a comprehensive plan for increasing humanitarian expertise.

39. This should include a five-year humanitarian human resources strategy for increasing general humanitarian expertise from a clearly understood baseline and with a realistic goal. The strategy should cover new and existing personnel (including senior management) and systematically utilize deployed humanitarian personnel (roving team and surge) for skills transfer to both incoming replacements and national country office staff.
40. The plan should also provide appropriate resources to the Division for Human Resources to ensure speed, consistency and quality in the identification, recruitment and deployment of humanitarian personnel.

Recommendation 6. UNFPA should develop an inclusion strategy that is based on leaving no one behind and incorporates reaching the furthest behind first.

41. This should be developed from the current global guidance on inclusion, which notes that UNFPA will address “inequity in access to, the poor quality of, and the lack of, social accountability for sexual and reproductive health services in all contexts, including humanitarian and fragile contexts and in public health emergencies.”

Recommendation 7. UNFPA should undertake a mapping of existing initiatives on accountability to affected populations at country level, with a view to incorporating good or promising practice guidance.

42. Based on identified good or promising practices on accountability to affected populations, UNFPA should develop humanitarian-specific pragmatic guidance (taking into account unique challenges of displaced, conflict, hard-to-reach populations) on how best to establish sustainable feedback channels accessible by all vulnerable persons and systematic mechanisms for incorporating feedback into the programming cycle.

Recommendation 8. UNFPA should conduct a survey of knowledge and capacity for protection from sexual exploitation and abuse at country level to establish the current bottlenecks between global and country levels.

43. This should be used as a basis to identify where UNFPA remains at highest risk regarding sexual exploitation and abuse, and to develop a resourced workplan to systematically reduce this risk at the field level, where day-to-day contact with vulnerable women and girls within communities (by both UNFPA and partner staff) represents the highest risk.

Recommendation 9. UNFPA should develop a resource plan for ensuring that gender-based violence subclusters are resourced equivalently to other clusters with well-capacitated coordinators and technical support.

44. This should include ensuring that the UNFPA minimum standards regarding gender-based violence are adhered to, including appointment of a subcluster coordinator and addressing key coordination challenges, such as high turnover of coordination staff, excessive coordination workloads (double/triple-hatting) and lack of information management functions within subclusters.

Recommendation 10. UNFPA should develop a plan to systematize establishment and functioning of reproductive health working groups.

45. This should include support for a mechanism to monitor functioning working groups on reproductive health led by UNFPA; assessment of the impact of absence of such working groups within response systems; and systematically monitoring achievements and added value of working groups on reproductive health.

Recommendation 11. UNFPA should address the gap between global-level leadership in the area of youth in humanitarian response and peace and country-level tangible action.

46. This should include a survey of crises where UNFPA leads a functioning coordination mechanism for young people in action and where gaps remain; determining resources required to translate UNFPA global commitments into country-level action; a review of potential partners (for resources and collaboration) and a position statement for youth and peace outlining commitments to country-level action.

Recommendation 12. UNFPA should review the activities referenced within the 2018 letter of understanding with the United Nations Office for the Coordination of Humanitarian Affairs as a foundation for increasing the UNFPA data footprint within humanitarian action.

47. This should incorporate a vision statement and a three-year to five-year plan on humanitarian population, health and gender data at global, country and field levels. It should also include resource requirements (platforms, staffing, funding strategy) and a workplan, including the activities outlined in the 2018 letter of understanding.
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