EVALUATION REPORT

REAL-TIME EVALUATION OF UNICEF'S HUMANITARIAN RESPONSE TO TYPHOON HAIYAN IN THE PHILIPPINES

EVALUATION OFFICE JULY 2014

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James Darcy, Team Leader Enrico Leonardi, Senior Consultant Patrick Robitaille, Senior Consultant Maiden Manzanal, National Consultant Jérôme Gandin, Researcher

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Real-Time Evaluation of UNICEF's Humanitarian Response to the Typhoon Haiyan in the Philippines - Final Report

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July 2014

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PREFACE

This real-time evaluation (RTE) was commissioned by UNICEF's Evaluation Office at the request of the East Asia and Pacific Regional Office (EAPRO) and the Philippines Country Office (PCO). Its purpose was to draw conclusions and make recommendations for the on-going Haiyan response, examine the implementation of Level 3 emergency procedures, and identify wider lessons for UNICEF with regard to future large-scale emergency responses.

Super typhoon Haiyan, locally known as Yolanda, hit the central belt of the Philippines on 8 November 2013. Some warning of the impending typhoon allowed the government to organise a partial evacuation, but the impact on communities, and children in particular, was massive. One of the most powerful storms ever recorded, and accompanied by a tsunami-like storm surge of up to six meters, it claimed more than 6,000 lives. Many cities and towns experienced widespread destruction, with as much as 90 percent of housing destroyed in some areas. Around 14.1 million people were affected and over 4.1 million were displaced, including 1.7 million children. Schools were flattened. Water supply and power were cut. Food stocks and other goods were destroyed, and in the immediate aftermath, many health centres were not functioning and had very limited medical supplies. The devastating impact shook a country still recovering from two other recent emergencies: the escalation of conflict in Zamboanga in September 2013 which displaced over 120,000 people, and a 7.2 magnitude earthquake that hit Bohol province in October 2013, which affected more than 2 million people. National and international actors were overwhelmed by the scale and the needs. The areas hit by Haiyan were not areas where UNICEF had an existing presence, but it responded quickly by declaring a Level 3 emergency and making it an institutional priority on 11 November. It rapidly deployed its Immediate Response Team (IRT) and other surge capacity to the Philippines and raised over US\$120 million in the first ten weeks following the typhoon to scale up its response and meet the needs of women and children.

The evaluation found that overall, UNICEF's response was timely, appropriate and relevant to priority needs in the initial stages of the relief operation. Notably, UNICEF played a key role in restoring the municipal water supply in Tacloban City for some 200,000 people within a week, and its education interventions were particularly well aligned with the government's own interventions, especially the back-to-school campaign. The RTE found examples of innovative good practice as well as factors that limited the effectiveness of the response. It presents a number of important areas of learning, both for the on-going response and for UNICEF's emergency response model in relation to Level 3 emergencies.

On behalf of the Evaluation Office, I would like to thank Universalia for conducting the RTE and in particular James Darcy for his leadership, and the evaluation team consisting of Enrico Leonardi, Patrick Robitaille, Maiden Manzanal, Jerome Gandin and Yvan Conoir. I would like to express our sincere gratitude to Lotta Sylwander, Abdul Alim and Hammad Masood in the PCO, to Dan Toole and Ted Chaiban for overseeing and coordinating support from EAPRO and headquarters, to Angela Kearney for her support as IRT Team Leader, and to the members of the Reference Group, including Genevieve Boutin, Kathryn Donovan, Ada Ocampo, George Paltakis, Frederic Sizaret, Karin Sorensen, Julie Verhaar and Ashley Wax for their engagement in the evaluation process. I extend our thanks to our government partners in the Philippines and the many external partners and individuals that contributed their time and inputs to this RTE. Lastly, I would like to thank my team in the Evaluation Office, including Erica Mattellone who managed the RTE, and Geeta Dey and Dalma Rivero for their support to the RTE team, which has been exemplary throughout.

Colin M. Kirk

Director, Evaluation Office, UNICEF New York

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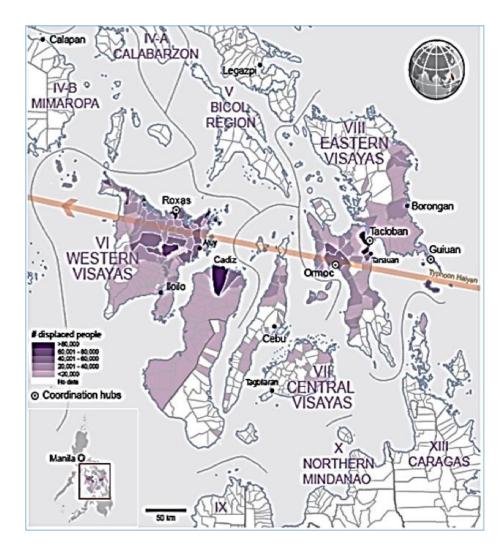
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LIST OF ACRONYMS

4MR	UNICEF Four Month Report
AAP	Accountability to Affected Populations
ACF	Action Contre le Faim (Action against Hunger)
AOR	Area of Responsibility
C4D	Communication for Development
CCC	(UNICEF) Core Commitments for Children in Humanitarian Action
CEAP	Corporate Emergency Activation Procedure
СО	Country Office
СР	Child Protection
CWC	Communicating with communities
DRR	Disaster risk reduction
DSWD	Departments of Social Welfare and Development
EAPRO	East Asia and the Pacific Regional Office
EMOPS	Emergency Operations
EMT	Emergency Management Team
EWEA	Early Warning Early Action
FTR	Family Tracing and Reunification
GEC	General Emergency Coordinator
HPMIS	Humanitarian performance monitoring information system
IASC	Inter-Agency Standing Committee
ICT	Information and Communication Technologies
INEE	Inter-agency Network for Education in Emergencies
INGO	International non-governmental organisation
IRT	Immediate Response Team
KII	Key informant interviews
L3	Level 3
LGU	Local governance unit
MIRA	Multiple Indicator Rapid Assessment
MoRES	Monitoring of Results for Equity System
NEDA	National Economic and Development Authority
NGO	Non-governmental organisation
OCHA	United Nations Office for the Coordination of Humanitarian Affairs

OECD/DAC	Organisation for Economic Cooperation and Development/Development Assistance Committee
OPSCEN	Operations Centre
PARMO	Public-Sector Alliance and Resource Mobilization Office
PBR	Programme Budget Review
PCA	Programme Cooperation Agreement
PCO	Philippines Country Office
PDNA	Post disaster needs assessment
PFP	Private Fundraising and Partnerships
PSEA	Prevention of sexual abuse and exploitation
RD	Regional Director
RTE	Real-time evaluation
SRP	Strategic Response Plan
SSOPs	Simplified Standard Operating Procedures
UNFPA	United Nations Population Fund
UNHCT	United Nations Humanitarian Country Team
UNICEF	United Nations Children's Fund
WASH	Water, sanitation and hygiene
	World Food Programme

WFP World Food Programme



Map showing the path of Typhoon Haiyan after it made landfall (from Strategic Response Plan)

EXECUTIVE SUMMARY

This real-time evaluation (RTE) of UNICEF's response to Typhoon Haiyan in the Philippines was undertaken between February and June 2014. It is based on an assessment of the first four months of the response, based on field visits, interviews with key informants, discussions with community stakeholders, documentary review, online survey and analysis. Its purpose is to draw conclusions and make recommendations for the on-going response and to identify wider lessons for UNICEF with regard to future large-scale emergency responses. In keeping with the corporate nature of UNICEF's response, the RTE was managed by the Evaluation Office and undertaken by a team of external consultants.¹

The RTE assessed UNICEF's response to the typhoon under three headings:

- (i) UNICEF's own programme
- (ii) Its contribution to the wider response, particularly as cluster co-lead

(iii) UNICEF's organisational processes, capacities and management structures, and how well these served the response.

The programme was evaluated against criteria of timeliness, relevance and appropriateness, coherence, effectiveness, efficiency, coverage, coordination, connectedness of relief to recovery and the longer-term programme. Compliance with UNICEF's Core Commitments for Children in Humanitarian Action and other relevant standards – internal and external – were also considered.

Typhoon Haiyan hit the central Visayas regions of the Philippines on 8 November 2013, with devastating effect. While government efforts at early warning and evacuation saved some lives, overall preparedness and contingency planning (by government, UNICEF and others) had not allowed for an event of this magnitude. Between 6-8,000 were killed and some 4 million were left homeless, in an area that already suffered high levels of poverty. Those who survived faced multiple threats. The short-term needs and risks (particularly to children) included risks to health and physical security from the disruption of water sources and sanitation, destruction of houses, schools and health centres, relatively low vaccination coverage and high initial levels of food insecurity. In the medium to longer term, the recovery needs of children and adults revolve around three main requirements: (i) housing, both interim and long-term, for the many who lost their homes; (ii) the restoration of lost livelihoods and provision of interim income support; and (iii) the restoration of basic services, including health and education. Related to all three is the need to repair or rebuild damaged public and private infrastructure, and in such a way as ensure future resilience to shocks.

UNICEF's programme response

The areas hit by the typhoon were not areas where UNICEF had an existing programme presence. UNICEF nevertheless responded quickly, declaring this a Level 3 (L3) emergency and institutional priority on 11 November 2013 and quickly deploying the IRT and other surge capacity to the Philippines, initially to Tacloban and progressively to other affected areas. It was right to do so. The subsequent relief response was boosted by an extraordinary fundraising response from the general public through UNICEF National Committees. The US\$ 120 million raised in the first ten weeks following the typhoon allowed UNICEF to scale up its response (its earlier budget estimate was US\$ 61.5m) without having to wait for the results of the United Nations appeals. It also meant that it had great flexibility as the ratio of unrestricted to restricted funding for the response overall was exceptionally high (around 70:30).

¹ James Darcy, Team Leader; Enrico Leonardi, Senior Consultant; Patrick Robitaille, Senior Consultant; Maiden Manzanal, National Consultant; Jérôme Gandin, Researcher

With regard to its own programme performance, the immediate challenge for UNICEF was to spend the money raised in a way that was timely, appropriate and relevant to priority needs, and effective in tackling those needs – while adding value to the wider response and linking to recovery and longer-term priorities. Overall, the evaluation team found that UNICEF performed well against these criteria in the initial stages of the response. The targeted support in urban locations and displaced centres – focused on reestablishing clean water supplies, basic sanitation and a programme of immunisation for the most vulnerable groups – was both needed and effective. Notably, UNICEF played a key role in restoring the municipal water supply in Tacloban for some 200,000 people within a week after the typhoon hit. In education, the initial provision of temporary learning spaces and school kits was timely and appropriate, as was the subsequent emphasis on psychosocial support. The education interventions, especially the response and recovery plan and the back-to-school campaign, were particularly well aligned with the government's own interventions.

Within this overall positive picture lies a more varied programme performance. Outside the urban and displaced centres, WASH interventions were slow. The interventions in nutrition had very limited coverage, hampered by lack of partner and government capacity in emergency nutrition as well as weaknesses in UNICEF's own capacities. The child protection programme was not prepared for the emergency and had to count on external support. While initial interventions on child friendly spaces and family tracing were highly relevant, there was a loss of momentum following the withdrawal of IRT staff. In general, the NGO partnership model did not always serve UNICEF well in this context, as evidenced by the time it took to conclude Programme Cooperation Agreements (PCAs), which was 3-4 months in some cases. The more widespread use of 'emergency clauses' in existing PCAs or the greater use of interim forms of agreement might have speeded up the partnership process at critical points.

The RTE was undertaken during the transition from a relief to recovery focus, roughly 3-4 months after the typhoon hit; by their nature, the more recovery-focused programme elements could not be fully evaluated. But the process of transition left an overall impression of organisational 'drift', compounded by changes in senior management (particularly at Country Representative level) and the withdrawal of experienced staff deployed during the initial stages of the response. At the time the RTE team was in the field, UNICEF was trying to define a clear recovery strategy against the priorities for intervention described above (shelter, livelihoods, basic services) and appeared to lack a clear sense of direction and purpose. The process of recovery began the day after the typhoon, largely through people's own efforts, and the RTE team has no doubt that UNICEF has a vital role in the recovery process. This is particularly true of basic services and the building of more resilient (future disaster-proofed) systems and infrastructure. At the time the RTE was conducted, there were encouraging signs that UNICEF was mapping out an appropriate recovery agenda in some key areas, including water supply and health infrastructure, and that these are being integrated into the overall country programme priorities for UNICEF.

UNICEF in the wider response

Beyond UNICEF's own programme, it had significant responsibilities as co-lead with government and others of the Education, Nutrition and WASH clusters, as well as the Child Protection area of responsibility. Senior staff were deployed for several weeks from all Global Clusters at the outset of the crisis. This team set the basis for activating the relevant clusters, identified most of the cluster coordinators and information managers, defined the structure of decentralised clusters in the field, and provided inputs to the United Nations Office for the Coordination of Humanitarian Affairs (OCHA) for all the L3 and Transformative Agenda-related commitments (Strategic Response Plan, Multiple Indicator Rapid Assessment, etc.). With regard to UNICEF's performance as cluster co-lead, a survey conducted for the purposes of the RTE suggests a relatively high level of satisfaction among cluster members,

particularly with regard to its overall leadership. However, once the original coordinating teams left the country, the clusters had little or no supervision from the Country Office (CO) senior management, including guidance on strategy and liaison with the United Nations Humanitarian Country Team (UNHCT), limiting their effectiveness and resulting in some loss of direction and purpose.

During the first two months of the crisis, the UNHCT was widely felt not to have given the guidance and leadership necessary to guide the overall humanitarian response and effectively influence the government's response. *Ad hoc* early morning meetings amongst core agencies managed to tackle some key issues, but minutes were not produced, and information did not trickle down sufficiently to implementing actors in general and to UNICEF in particular, including the clusters. The Operational Peer Review, which took place in mid-January 2014, offered several sound recommendations to improve the work of the UNHCT.

UNICEF's working relations with central government counterparts from before the crisis were generally strong and appreciated, as reflected in interviews with national government officials. At field level, relations started in the context of the crisis, and while more variable, were broadly considered effective. That said, better preparedness, including in relation to the working of the jointly-led clusters, could have resulted in a smoother process of collaboration. Working with government at central and municipal levels on programme design and implementation, notably in the WASH and Education sectors, meant that UNICEF was able to both influence and complement the government's response. At the local level, the decision to conclude MoUs with Local Government Units (LGU) was a brave one considering the challenges inherent in this model; but in the view of the RTE team this was an appropriate attempt to engage locally in the recovery process. Again, this is an area where preparedness might have paved the way for swifter collaboration; although it should be noted that this was an area of the country where UNICEF had no pre-existing programme presence. The RTE team felt there was greater scope for collaboration at the provincial level to be explored as part of a revised preparedness strategy.

UNICEF processes, structures and management

The RTE considered the extent to which UNICEF's organisational processes, systems and management structures helped or hindered the response to Typhoon Haiyan. The activation of the Corporate Emergency Activation Procedure (CEAP) and L3 protocols was appropriate and timely, though some argue it could perhaps have been made a day earlier. The pre-agreed Simplified Standard Operating Procedures (SSOPs) were fully applied here for the first time by UNICEF, and were generally agreed to have proved their worth, particularly in terms of speed of staff deployment, recruitment and procurement. The general adoption of a 'no regrets' approach was felt to have been appropriate and successful in expediting the response. Although the RTE found a few examples of inappropriate procurement, these were not significant enough to conclude that the risks associated with a 'no regrets' approach outweighed the benefits. The deployment of the IRT and other surge capacity had a generally positive effect, although significant concerns were raised about the manner of the deployment (see paragraph below on IRT deployment).

With regard to management of the response, the decision to appoint the Director of Emergency Operations (EMOPS) as General Emergency Coordinator (GEC) for the response was justified, although the handover to the Regional Director (RD) could have happened earlier in the response. The feedback from those interviewed suggested that the Emergency Management Team (EMT) mechanism worked well, in spite of difficulties caused by time zone differences. The close working relationship between GEC, RD, Representative and leader of the IRT facilitated a rapid and coherent initial response. That said, in the view of the RTE team, the division of labour between the Representative (in Manila) and IRT team leader (in Tacloban) would have worked better had the highly emergency-experienced IRT team leader been given overall management responsibility for the Haiyan response from the outset. This would also have brought greater clarity of management lines, responsibilities and communication. As it was, lack of joined-up working between the CO in Manila and IRT-led response team in Tacloban was described by many of those involved as a limiting factor in the response.

The deployment of the full IRT team – the first time it had been fully deployed – was achieved within ten days of the typhoon. It brought a number of benefits for UNICEF: senior staff with technical and management experience in emergencies, the ability to deploy sectoral experts at the field level, and (at least in theory) a complement to the existing staff capacity in the CO. In practice, this last benefit did not materialise as it should: the IRT played a role that was less about support than about delivery. Differences between the IRT members and existing country staff led to considerable friction and a general sense of demoralisation on the part of many country staff, who felt bypassed by the IRT. The fact that the IRT was deployed to Tacloban while existing country staff, especially most senior staff and section heads, largely remained in Manila only served to heighten the sense of division. While an element of schism may be inevitable when any large surge deployment is made (and this is not unique to UNICEF), this could have been better managed to achieve genuine synergy between the two. In part this lies in achieving greater clarity and better understanding of the respective teams of their role in relation to the other. More use could certainly have been made of expertise within the country team. That said, not all country staff appeared to understand the nature and imperatives of managing a major emergency response, in spite of the fact that the Philippines Country Office (PCO) had two on-going emergency responses in country.

At headquarters level, the coordination between different Divisions and units appeared to work well. EMOPS played an essential coordinating and advisory role, as well as deploying Emergency Response Team members in key roles. The coordination with Programme Division who provided specialist advisory input as well as staff deployments appeared to work well. On the fundraising side, Private Fundraising and Partnerships (PFP) and Public-Sector Alliances and Resource Mobilization Office (PARMO) worked well together and with the National Committees whose fundraising efforts provided the motor for the response. The communication aspects of the response were generally well managed, though as often they rather overshadowed UNICEF's advocacy role. On the supplies side, some problems were reported – but these related less to orders placed through Copenhagen than to the time it took to get supplies to the point of end use in country.

The Regional Office in Bangkok played an important role, especially during the first few days of the response. It encouraged the PCO to realise the magnitude of the crisis and its implications, and promptly sent key staff to assist the team there. Among others, the role of the Chief of Communication was important to start the media response and produce materials for the National Committees and other possible donors. The role played by the RD, even before he became GEC, was pivotal in coordinating the response between country and global level. The activation of the L3 protocol, and the consequent wide-scale organisational involvement in the response, ensured that support and surge staff became available from headquarters, other country offices, and partner organisations. Yet the regional roster proved essential in allowing staff deployments in the initial weeks of the response.

In conclusion, there are a number of important areas of learning from the Haiyan response, both for the on-going response itself and for UNICEF's crisis response model more generally, particularly in relation to L3 emergencies. Many examples of innovative good practice were found, but so too were some factors that limited the effectiveness of the response overall. The L3-related processes – and particularly the IRT model – need to be better adapted to specific contexts. In this case, where substantial capacity existed in the CO, the largely 'substitutory' model – while certainly effective in the short term – left a difficult legacy for the CO and the subsequent phases of the Haiyan programme. Related to this, the initial response has not (to date) been matched by the recovery response, and UNICEF needs to consider how better to manage and resource the transition from a relief to a recovery-focused programme in such contexts. More generally, the Philippines is one of a category of crisis-prone but capable countries – that includes

Kenya, Bangladesh and Indonesia – where UNICEF needs to reconsider the nature of its role in relation to government. While it worked relatively well with both national and local government in this case, this was largely based on an *ad hoc* approach. A more structured approach, worked out in advance in the framework of higher level collaboration for preparedness, could have provided the basis for significantly greater coverage than was possible in this case, as well as reducing the time and transaction costs of establishing new agreements – and potentially reducing the need for such a hands-on operational approach by UNICEF.

The findings and conclusions of the RTE relate partly to the PCO, partly to UNICEF as a whole. Recommendations for each are made under the following headings:

- **Preparedness**, internal and external, with an overall emphasis on re-aligning the response role of UNICEF in relation to government in collaboration with other actors
- Needs assessment, clarifying UNICEF's role both in the aftermath of rapid-onset disasters and at the reconstruction phase, including involvement in the post disaster needs assessment (PDNA) process
- Strategy and planning, including the harmonisation of UNICEF's own strategic planning process with that for the wider United Nations Strategic Response Plan, and the need for a rolling advocacy strategy
- **Sectoral responses**, including the promotion of synergy between sectors, better metrics for performance management, and some sector-specific issues including the use of cash transfers
- **Communication with communities**, particularly relating to clarity and transparency on what can be expected of UNICEF and its partners, and the need for clearer feedback and complaints mechanisms
- **Partnerships**, including the need to develop a wider partner base in the Philippines relying less exclusively on INGO partners and to review the use of PCAs or alternatives in crisis-prone contexts
- **Monitoring and reporting**, stressing the need to inform real-time operational decision making through basic output monitoring while building on the more multi-dimensional humanitarian performance monitoring information system (HPMIS) approach developed by the Philippines CO
- UNICEF's cluster (co-)lead role, including the need to clarify respective roles with government at national and subnational levels, and review supervision arrangements for cluster staff in country
- L3 procedures, the IRT and surge deployments, emphasising the need to ensure a better fit between existing CO staff capacity and surge deployments, and to provide more guidance on the application of L3-related processes in more developed contexts
- **Management of transitions**, including the need to ensure greater continuity of senior management at CO level in L3 emergencies, and for a recovery plan to be formulated by the three-month mark.

1. BACKGROUND AND CONTEXT

1.1 Typhoon Haiyan and its Impact

Typhoon Haiyan hit the central Visayas regions of the Philippines on 8 November 2013. While the wind speeds were unprecedented and highly damaging, most destructive of all was the storm surge which followed.² Between 6-8,000 were killed and some 4 million were left homeless, in an area that already suffered high levels of poverty. Those who survived faced multiple threats. The short-term needs and risks (particularly to children) came from a combination of factors: inadequate shelter; disruption of water supplies, destruction of clean water sources and sanitation facilities, destruction of health care facilities and the cold chain, relatively low vaccination coverage, and high initial levels of food insecurity. This was accompanied by destruction of schools and a variety of protection threats to children, including a significant problem of unaccompanied and separated children.

In the medium to longer term, the recovery needs of children and adults revolve around three main requirements: (i) housing, both interim and long-term, for the many who lost their homes; (ii) the restoration of lost livelihoods and provision of interim income support; and (iii) the restoration of basic services, including health, water, sanitation and education. Related to all three is the need to repair or rebuild damaged public and commercial infrastructure. Though the Philippines is a middle-income country, wealth is not evenly distributed; 40 per cent of those living in the areas affected by Haiyan lived below the poverty line *before* the typhoon struck. The medium and longer-term response to the typhoon presents an opportunity to address some of the basic developmental challenges which themselves constitute risk factors for potential future disasters. To use the current terminology, the 'resilience' agenda is an area of common concern in the longer term.

While government efforts at early warning and evacuation saved lives, overall preparedness and contingency planning (by government, UNICEF and others) had not allowed for an event of this magnitude. The limited local government capacity to respond was also severely impacted by the effects of the typhoon, notably in the cities of Tacloban (Leyte) and Guiuan (Eastern Samar) whose infrastructures were devastated. Supporting the restoration and strengthening of that capacity, particularly in service delivery, represents an important priority for the United Nations in general and UNICEF in particular. There is also a policy and advocacy agenda here. As the UNICEF Strategic Response Plan points out, "Since early warning are issued by National Agencies and have to be implemented by LGUs it does not always lead to an early action as it depends on interpretation and capacity of the local governments [...]. The implementation of the Disaster Risk Reduction & Management Act of 2010 relies largely on the capacity of and resources made available to LGUs. Poor LGUs with little capacity and higher exposure to risks are therefore especially vulnerable." The question of fiscal flows between national and local government is identified as one of the most important issues involved. So too is the effective integration of national resources – including vital civil defence capabilities – with local capacities.

The areas hit by the typhoon were not areas where UNICEF had an existing programme presence. But this was a relatively experienced office, used to dealing with recurrent emergencies – including the Bohol earthquake in 2013 and the Mindanao conflict, the responses to both of which were continuing at the time the typhoon hit. The question of how well that capacity and experience was used in the Haiyan response is therefore an important one, although it was generally agreed that the scale of Haiyan exceeded all existing capacities. In this context, the evaluation considered, to a limited extent, the effect of previous

² The same was true of the 2004 Indian Ocean Tsunami and the 2008 Cyclone Nargis in Myanmar. It is worth noting that the death toll related to both was far higher than for Haiyan (at least 138,000 died as a result of Cyclone Nargis).

efforts in the fields of emergency preparedness and Disaster Risk Reduction (DRR) in relation to the Haiyan emergency. The question of preparedness, in particular, was a recurrent theme of the evaluation.

A timeline showing the main activities and decision points in the UNICEF response is contained in Annex 3 to this report.

1.2 The Real-Time Evaluation

1.2.1 Purpose and process

The purpose of the RTE is set out in some detail in the terms of reference (see Annex 1) and the Inception Report for the RTE. The primary purpose is a "formative and forward-looking one to help improve the effectiveness and quality of UNICEF's response to the Typhoon Haiyan and learn lessons for application in future emergencies [...]." It also has an accountability purpose in the form of a "summative component, reviewing plans and performance to date, in order to provide impartial evidence on how UNICEF has been responding in the initial phase of the emergency."

Two topics of enquiry are specified in the terms of reference: 1) the application of lessons learned from previous urban disasters, and 2) working in partnership with national and local authorities in middleincome countries. While this report provides some analysis of lessons drawn from evaluations of previous comparable disasters, more emphasis was placed on the second topic, which was found to be the more fruitful line of enquiry.

The intention is that the RTE should provide UNICEF with real-time and practical recommendations to facilitate operational improvements to strengthen the response and the transition to early recovery. In addition, it considers the implementation of the CEAP and the SSOPs for L3. This is taken to include the question of the relevance and applicability of the L3 processes to the context of the Philippines and events like Typhoon Haiyan. It also looks in some detail at the practical implications of applying these processes in this case, in particular the deployment of the IRT and related management and accountability issues.

1.2.2 Evaluation criteria

The criteria for evaluating UNICEF's performance were a combination of standard evaluation criteria and specific benchmarks in two main categories. The first consists of relevant internal policies, standards and guidelines, including the Core Commitments for Children and the L3 Protocols and standard operating procedures. The second category consists of external standards, benchmarks and best practices to which UNICEF adheres, including (*inter alia*) the relevant Sphere and Inter-agency Network for Education in Emergencies (INEE) standards. While an exhaustive review of programme and operational performance against all relevant standards is beyond the scope of the RTE, the evaluators considered the overall extent of compliance and any cases of significant divergence from key benchmarks.

The general evaluation criteria adopted were those of the OECD DAC³ (modified), understood here as follows:

- *Timeliness*: Were the various elements of the UNICEF programme delivered in a timely way?
- *Coherence*: Were the appropriate linkages made between the various components of the emergency response?

³ Organisation for Economic Cooperation and Development/Development Assistance Committee

- *Relevance and appropriateness*: Were the UNICEF programme elements relevant to priority needs and appropriate in the context?
- Effectiveness: Did the various programme elements achieve their immediate objectives?
- *Efficiency*: Were the available financial and other resources put to best use? Could the same ends have been achieved at less cost?
- *Coverage*: Was the coverage achieved by the UNICEF programme elements proportionate to the overall needs? Were significant groups / areas omitted in the programme areas?
- Coordination: How well did UNICEF coordinate its planning and activities with other actors?
- Connectedness: How well did UNICEF's initial 'relief' response connect to medium-longer term recovery objectives?

These are further elaborated in the evaluation matrix set out in the Inception Report and in Annex 2 to this report.

1.2.3 Evaluation methods

The evaluation used a combination of the following methods:

- Key informant interviews
- Direct observation
- Focus group discussions
- Expert panel
- Timeline analysis
- Documentary review and analysis
- Feedback workshops
- On-line survey (of cluster members).

As noted in the Inception Report, the process of consultation with aid recipients, affected communities, and local government officials posed particular methodological challenges and was dependent on the conditions that the RTE team faced during the fact-finding phase at the field locations in Tacloban, Guiuan and Roxas. With limited time allotted for field investigation, the team focused on key elements of UNICEF's programmatic response through its own activities or those of its implementing partners with due regard to affected population's situation and perspectives. It employed the following methods of data collection in keeping with the 'light footprint' approach and the desire to be both opportunistic and participatory:

- Non-structured group discussions with groups of women, teachers, school children, households, and barangay workers and key actors in communities
- Key informant interviews with government officials at provincial, municipal and barangay levels and line ministries
- One-on-one conversational interviews with families and individuals, children, youth, and community leaders in tent cities and bunk houses
- Direct observation and participant observation of the activities conducted by partners in various programme areas at different sites.

The areas visited were selected in consultation with programme staff, cluster coordinators and field managers, or were chosen on the basis of information from projects – including areas where goods were distributed and where partners were active – that allowed observation in real time and cross validation using existing data. The field locations visited were the following:

- Barangay Annibong, Barangay Magallanes in Tacloban and nearby municipalities such as Pastrana, Dagami, Burauen, and Palo
- Guiuan and Borongan, Lawaan, Balanginga, Quinapondan communities in Eastern Samar
- Roxas City, Capiz and nearby municipalities such as Estancias, Panay, Pilar, President Roxas, Maayon, Ivisan, Panitan.

Municipalities that have on-going Direct Cash Transfer (DCT) agreements with UNICEF were met by the team to understand the terms of partnership, the status of early recovery efforts at these communities and continuing needs and gaps.

In addition to these field-level consultations, the RTE team conducted interviews with the following:

- Government officials (National Economic and Development Authority [NEDA], relevant ministries), United Nations bodies and INGOs in Manila
- UNICEF staff in the Regional Office in Bangkok
- · Selected informants from other organisations at regional level, including OCHA
- Phone and/or face to face interviews with IRT and other surge staff involved in the initial response
- UNICEF staff at the New York Headquarters, including EMOPS, Programme Division, PARMO, Human Resources and Communication
- UNICEF staff in Geneva from the relevant Global Clusters and from PFP
- UNICEF staff in Copenhagen from the Supply Division
- Staff from selected National Committees.

A full list of those consulted for the RTE is included in the Annex 5.

A variety of written sources was consulted, many of which are referenced in the text. The RTE team drew in particular on the Four Month Report (4MR), Emergency Management Team (EMT) minutes, programme situation reports and monitoring reports, Strategic Response Plans of UNICEF and the Inter-Agency Standing Committee (IASC), the Core Commitments for Children in Humanitarian Action, earlier evaluations (including the 2012 'Lessons learned review for tropical storm Washi') and a variety of internal documented lessons learned exercises, including the 'L3 learning wiki for external surge' initiated by EMOPS and the papers 'Lessons from Yolanda', 'Programme Lessons Learnt for Typhoon Haiyan Response' and 'A Quick Assessment of UNICEF WASH Programme'.

2. UNICEF'S HAIYAN RESPONSE PROGRAMME

UNICEF's own response to the Haiyan disaster revolved around five main sectors – WASH, Health, Nutrition, Education, Child Protection – together with a limited programme of Cash Transfers. The RTE team assessed these activities primarily against criteria of timeliness, relevance and appropriateness, effectiveness and efficiency, coherence, coverage and 'connectedness'. It also considered compliance with the Core Commitments for Children in Humanitarian Action (CCC) and other standards as appropriate. The analysis below is structured as follows: (i) preparedness, assessment, strategy and planning; (ii) analysis of the individual sector responses; and finally (iii) analysis of the related operational and process aspects of the programme, including engagement with communities, communication and fundraising, supply and logistics, monitoring and reporting.

2.1 Preparedness, Assessment, Strategy and Planning

2.1.1 Preparedness⁴

In common with other disaster-prone countries, the PCO had worked on disaster preparedness before Haiyan struck.⁵ But its plans, including contingency stocks, were not commensurate with the scale of this disaster. This in itself is not surprising: the scale of damage caused by Haiyan was unprecedented, and it happened in an area of the country where UNICEF had no programme presence. Central contingency stocks for 10,000 households are normally planned by PCO, but had been partially depleted by previous crises and had not yet had the time to be replenished. Also, major differences exist in the consistency with which these stocks are set up by different programme sections. The 'hardware' aspects of in-country preparedness could not reasonably be expected to cater for an L3-scale disaster. The 'software' side, on the other hand, could and should have been better prepared. This includes a number of elements: clearer working agreements with government departments at national, provincial and local level;⁶ emergency clauses in existing PCAs; and the appointment of a dedicated staff member in each section responsible for emergency preparedness and response.⁷ On this last point, the RTE team found that attitudes to preparedness and to emergency response generally were very variable among sectors, depending largely on individual's aptitudes and previous experience with in-country responses.

2.1.2 Needs assessment

UNICEF's initial response was not based on any formal (survey-based) assessment of need, either generic or sector-specific. The informal assessment of need, however – drawing on available government data, information from partners and lessons from previous similar disasters – resulted in sector approaches that were broadly suited to the initial response. Initial planning figures were somewhat over-

⁴ This section deals with UNICEF's own preparedness to respond to emergencies. The government and others' preparedness is not dealt with here, but it is argued that this can and should be a more collaborative agenda for UNICEF.

⁵ See online Early Warning Early Action (EWEA) system for logging country preparedness. The Philippines CO completed an update of EWEA during the course of 2013 based on the lessons learned review of Typhoon Bopha emergency response in 2012-13.

⁶ Government interviewees in central Departments responsible for education and WASH expressed openness to a higher level of collaboration with UNICEF on emergency preparedness.

⁷ This made a critical difference to the UNICEF WASH response to Haiyan.

inflated and very generic (see below). Limited or poor-quality baseline information was available, with the exception of the Health and Education sectors. The OCHA-led Multiple Indicator Rapid Assessment (MIRA) process, to which the clusters contributed, was described by all those consulted as not being useful for UNICEF's own programming purposes, partly because of timing but also because it did not provide sector-specific, operationally-useful information. It did reportedly help to some extent with geographic targeting. As stated in the UNICEF SRP, the criteria used to target UNICEF's initial interventions were "those LGUs affected by a one metre or higher storm surge; located directly in the path of its strongest wind (signal 4); and with a proportion of affected population of 95 per cent or above. In addition to cater to special sectors like Child Protection, consideration was given to highly urbanized cities with high number of displaced/transit population based on displacement and death data." These appear reasonable proxies for need in the first instance.

One consequence of the lack of formal needs assessment was a dearth of information and data disaggregated by sex and age. This lack of specificity meant that there was limited scope for more precise targeting and better tailored (sex and age-appropriate) interventions.

On the recovery side, although it fielded specific support missions to influence it, UNICEF played no substantive role in the Post-Disaster Needs Assessment (PDNA) process, and more generally was not involved in the government's assessment and planning for recovery and reconstruction. Whatever the particular reasons for this in the Philippines case,⁸ this seems a missed opportunity. UNICEF should reflect more generally about its role in helping to shape, as well as to implement the use of rapid assessment tools both for the immediate response (MIRA) and longer-term recovery plans (PDNA) in the aftermath of major disasters.

2.1.3 Strategy and planning

Following the initial inter-agency Humanitarian Action Plan (HAP) and Flash Appeal issued by the HCT on 16 November, a process of inter-cluster/sectoral needs assessment (MIRA 1 and MIRA 2) fed into the Inter-agency Strategic Response Plan (SRP) which replaced the HAP. Launched on 6 December, the United Nations SRP (covering 12 months) had a total appeal amount of US\$ 791 million, of which the revised UNICEF appeal component was US\$ 130,000,000.

Box 1: The UNICEF Strategic Goals in its SRP

1. To meet immediate lifesaving needs of most affected population, within the most affected LGUs... targeting the worst affected children (Month 1-4);

2. To meet the medium term education, water, sanitation and hygiene (WASH), health and nutrition and protection needs of affected children with special attention to ensuring gender and disability responsive interventions (Month 3-9).

3. To support the long-term government-led recovery efforts with a specific focus on strengthening the resilience of communities and local institutions including by Disaster Risk Reduction (DRR) (Month 1-18).

UNICEF's own SRP was designed independently and in advance of the United Nations SRP – and both were designed independently of the government's own 'Reconstruction Assistance for Yolanda' (RAY)

⁸ The government appears to have been reluctant to involve any United Nations agency other than UNDP in the PDNA process.

plan.⁹ The pace of UNICEF's own fundraising was a major driver in this case: this was in some ways a 'resource led' response strategy, at least in terms of scale – though the scale of need was such that (unlike some of the Indian Ocean tsunami responses) this can be seen as beneficial in overall terms. Conceived as a rolling, two-year plan, its integration with the one-year United Nations SRP was reportedly problematic. The process for the latter was widely felt to be too heavy for the early stages of an L3 response, and those consulted generally felt the HCT had not provided an effective lead.

The UNICEF SRP makes special mention of the importance of focusing on "convergence among sectors and synergy with cross sectoral programmes" – citing examples such as temporary learning spaces and child-friendly spaces where multiple services were provided. In practice, the RTE team saw relatively little synergy between the programme elements in the earlier stages of the response, with some limited progressive improvements at field level; something that should be remedied in the more recovery-focused next stage. While some attention was given to gender and disability in the design of programmes, this was not apparent in the disaggregation of data and was inconsistently applied across sectors. Government departments like the Department of Education (DepEd) themselves set high standards, for instance for access for disabled children and teachers to schools. Many of the INGO partners also set high standards with regard to gender and disability. But there were perhaps too many assumptions made by UNICEF about vulnerability, without sufficient assessment to verify such assumptions.

One significant omission from the SRP was a rolling advocacy strategy with defined priorities, as required by the SSOPs. Instead advocacy is conflated in the SSRP with communication (as UNICEF tends to do) and linked to fundraising. Advocacy and influencing was not a prominent part of the defined response, though examples of *ad hoc* advocacy were found by the RTE team. The lack of an advocacy strategy, or indeed of a consistent attempt by UNICEF at high-level influencing on key child-related issues (including protection), may be due in part to the fact that the Philippines CO saw three changes of Representative in four months. This would have affected the necessary leadership required for high level advocacy as well as in other areas.

2.2 Programme Elements

UNICEF's overall programme goal, as formulated in the SRP, was "that children in worst typhoon-affected areas receive immediate lifesaving and life-sustaining assistance in WASH, Health, Nutrition, Education and Child Protection; humanitarian action contributes to reducing risk and strengthening resilience; and their capacity to achieve MDGs is strengthened through building back better." We review here the five main sectoral elements of the related programme, together with the cash transfer intervention. The main focus is on the initial (3-4 months) response, with some analysis of the forward programme of recovery.

The overall programme budget – which was ultimately fully funded – was broken down as follows¹⁰:

Budget head	Programme Budget Review (PBR) submission (US\$)
Nutrition	10,250,000
Health	19,480,000
WASH	46,130,000
Child Protection	15,380,000
Education	30,760,000
Cash Transfers	8,000,000
Total	130,000,000

⁹ Launched on 18 December at US\$ 8 billion, this dwarfed the United Nations appeal.

¹⁰ Data taken from the UNICEF SRP.

2.2.1 Water, sanitation and hygiene (WASH)

Context and needs analysis

Widespread disruption of water systems and loss of water sources created an immediate crisis of access to clean water, particularly in urban locations. The need for immediate facilities in evacuation and displaced centres was particularly pressing. It was harder to assess and meet needs in rural areas. As stated in the 4MR "scaling up remains a challenge due to the geographic spread of affected areas." Lack of baseline data on sanitation also hampered this expansion of the programme.

WASH targets until November 2014	Cluster target	Cluster result	UNICEF target	UNICEF cumulative results	% target achieved at 3.5 months
People with access to safe water	3,000,000	1,057,597	1,250,000	930,056	74%
People with access to appropriately designed toilet	3,000,000	92,452	600,000	76,690	13%
Children provided school hygiene kits	500,000	231,260	500,000	231,260	46%

UNICEF and Cluster targets and results as of 21 February 2104 (as per 4MR)

UNICEF response

UNICEF's early focus was to restore the water supply in Tacloban City and evacuation centres for displaced people. Its initial contribution to this was to supply fuel for generators/pumps and provide technical support to the government and partners. Sanitation was provided mainly in evacuation centres and in some schools and urban locations. Hygiene kits were distributed in priority locations, meeting around half of the target population after three and a half months.

UNICEF is now extending its partnerships, particularly with LGUs, in order to reach beyond cities and evacuation centres into rural and hard-to-reach areas, aligning with national policy priorities for recovery. For water supply, the stated aim is to improve resilience of water networks, while anticipating expansion of the overall rural water supply. Sanitation efforts will shift focus to the household level, and involve communities in constructing and maintaining their own toilets. Hygiene promotion will expand through community health workers and hygiene programmes in schools.¹¹

RTE findings

The Tacloban/Leyte Province water supply intervention was judged by those consulted and by the evaluation team to have been both timely and highly relevant, given the shortage of safe water sources and the related health risks (particularly to children) in the aftermath of Haiyan. It played to UNICEF's strengths and was largely effective in achieving its goals, enabled in particular by having a National WASH Cluster Coordinator and Emergency WASH Officer (programme) already based in the CO. More concerns were raised about coverage, timing and to some extent the relevance of other interventions, particularly outside Tacloban. Distribution of hygiene kits outside collective centres was slow and had limited coverage. The delivery of rural water supply and sanitation were slow and in some cases (seen in

¹¹ Source: 4MR.

Capiz region) of doubtful relevance and appropriateness to the context,¹² the baseline being lower in this case, with open defecation common. The priority focus on water supply to more crowded urban areas and displaced centres was in itself appropriate given the risk factors – but the down side was slower delivery elsewhere. Signing of PCAs with partners was somewhat delayed, though quicker than in other sectors; WASH and Education were the only sectors that managed to make use of the PCA emergency clause in a few cases.

In summary, the overall RTE judgment of UNICEF and its partners on WASH interventions is relatively positive: strongest on urgent restoration of water supply and hygiene kits to urban and displaced centres, weaker on sanitation and more generally in dispersed rural areas. The fact that there have been no major outbreaks of diarrhoeal disease can reasonably be attributed (at least in part) to the effectiveness of UNICEF's work with its partners in the more congested urban and displaced centres.

2.2.2 Health

Context and needs analysis

UNICEF's 4MR states: "Low overall measles coverage pre-emergency, between 70 to 90 per cent coverage for diphtheria, pertussis and tetanus and population movement made mop-up and mass immunisation campaigns a paramount priority." The crowding of populations due to loss of shelter and use of evacuation centres heightened the risk of epidemic outbreak. The destruction of the cold chain was a major barrier to immunisation campaigns. As noted above, lack of clean water and sanitation facilities exacerbated the risks of diarrhoeal disease.

Health targets until November 2014	UNICEF target	UNICEF cumulative results	% target achieved at 3.5 months
Children aged 6 - 59 months vaccinated for measles	1,100,000	83,239	8%
Children aged under 1 year receiving routine EPI	29,000	1,848	6%

UNICEF targets and results as of 21 February 2104 (as per 4MR)

UNICEF response

(i) **Measles and Polio Immunisation Campaigns**, with an initial focus on measles and polio immunisation, and Vitamin A for most vulnerable (including displaced) among under-5s, plus response to suspected outbreaks. From December the strategy shifted to re-establish routine immunisation through cold chain restoration and support in procurement of vaccines. (ii) **Cold Chain restoration**. Equipping more than 300 health centres with electric and solar fridges and other cold chain equipment in Regions 4b, 5, 6, 7 and 8 plus providing training on cold chain and vaccine management. (iii) **Preparedness for disease outbreaks**. Prepositioned health and diarrhoeal disease kits; work with government, WHO and partners on field guidelines for response and treatment of acute watery diarrhoea (AWD) and dengue; training on AWD, dengue and measles preparedness.

As noted in the 4MR "the risk of disease outbreaks remains, requiring continued vigilance. So far only half of damaged health centres have re-opened." UNICEF's forward programme will focus on three priorities: contribute with basic rehabilitation of damaged health facilities; develop capacity for primary health and

¹² E.g., the provision of squat plates and lack of support to latrine construction.

community health workers; and establish a mechanism for quick surge in local health capacity in future emergencies.

RTE findings

The initial vaccination campaign in urban and (particularly) displaced centres was swift and timely, including response to confirmed and suspected measles cases. Overall progress on immunisation at the 3.5-month stage was slow:¹³ around 7.6 per cent of target vaccinated for measles (for children aged 6 - 59 months), 6.4 per cent of target (for children under 1 year) for EPI.¹⁴ Initial efforts were "focused on most at-risk areas, including evacuation centres and communities with confirmed and suspected measles cases."¹⁵ Given the continued risk of disease outbreak, the preparedness measures are timely and appropriate.

Agreement was reached quickly with the government and WHO on cold chain interventions, allowing swift use of funds earmarked for health. These interventions had a sound 'resilience' element with high quality standard fridges and materials, and use of solar power. On the down side, delays in the delivery of fridges and other equipment plus delays in training for installation and utilisation limited the early benefits.

In summary, the initial health response by UNICEF was appropriately targeted and well adapted to the immediate health risks. As with the WASH intervention, the fact that there have been no major outbreaks of epidemic disease (particularly measles) may be attributed at least in part to UNICEF's swift work with WHO and the government on immunisation. Plans for restoring the cold chain (purchase of fridges, etc.) and complementary training to health staff had a slow start, partly for reasons of site readiness.

As with most other sectors, the lack of specialist emergency capacity was noted by the RTE team as a constraining factor for UNICEF's health response.¹⁶

¹³ Under UNICEF's Core Commitment that "Excess mortality among girls, boys and women in humanitarian crisis is prevented", one of the benchmarks is 90 per cent of children aged 12–23 months fully covered with routine EPI vaccine dose. This is a long way from being achieved. The target measles vaccination and Vitamin A is 95 per cent. ¹⁴ These low figures may reflect an initial overestimation of the population in need and hence an over-ambitious target for the programme.

¹⁵ Source: 4MR.

¹⁶ During consultations on the first draft of this report, the Regional Office noted that while UNICEF has significant health commitments in the CCCs, it does not have cluster lead responsibility for health. This is said to cause confusion and an under-investment in 'health in emergencies' at regional and country level.

2.2.3 Nutrition

Nutrition targets until November 2014	Cluster target	Cluster result	UNICEF target	UNICEF cumulative results	% target achieved at 3.5 months
Caregivers of children aged 0-23 months with access to IYCF-E counselling for appropriate feeding	250,000	12,384	210,000	10,799	5%
Pregnant women provided with iron tablets & folic acid supplements	30,000	416	30,000	416	1%

UNICEF and Cluster targets and results as of 21 February 2104 (as per 4MR)

Needs analysis

While there was no large-scale nutrition crisis following Haiyan, various heightened risk factors for acute malnutrition were created, including limited access to clean water and food in affected areas. The 4MR Report states "According to the Nutrition cluster, up to 12,000 children are believed to be suffering from severe acute malnutrition [SAM], and more than 100,000 pregnant and lactating women at risk of malnutrition and micronutrient deficiencies." As with some of the overall figures for people in need of assistance, the malnutrition figures were overestimated: a SMART survey carried out in March-April indicated that SAM and MAM cases were much lower than these earlier figures suggested, though it should be noted that this survey followed three months of nutritional support interventions.¹⁷ The survey also confirmed the chronic problem of stunting in the affected areas, with percentages more alarming than in the rest of the country. One in two children aged 6-11 months already suffered from anaemia before the disaster, as did 43 per cent of pregnant women and nearly one in three lactating women.

UNICEF response

(i) **Infant and Young Child Feeding in Emergencies (IYCF-E)**. In the first four months of the response, UNICEF and its partners established 52 mother/child-friendly spaces serving 10,799 pregnant and lactating women, with counselling on breastfeeding and complementary feeding. (ii) **Micronutrients**. Vitamin A supplementation was combined with measles immunisation in UNICEF's immediate response, reaching 55,300 children. (iii) **Community-based management of acute malnutrition (CMAM)**. UNICEF and partners screened over 97,000 children and found 2,702 to be acutely malnourished, 370 severely and 2,332 moderately malnourished. Among those, 146 severely malnourished children were admitted to therapeutic feeding.

Notwithstanding UNICEF's global advocacy efforts to avoid the use of milk powder in humanitarian crises, the problem arose in the Philippines, with the government allowing in-kind donations of this product from different countries. The problem was eventually resolved and there is consensus that this issue should and could be advocated at the highest possible level (i.e., the President) in the framework of much heightened preparedness collaboration with key line ministries.

¹⁷ It should be noted that nutrition cluster targets (specifically for SAM/MAM) were developed exclusively from DSWD/OCHA estimates of affected population, 2011 FNRI nutrition survey results and data from the Food and Nutrition Surveillance System (2011).

UNICEF is now working to train partners on community-based management of acute malnutrition. As a preparedness measure, UNICEF also prepositioned ready-to-use therapeutic foods to treat 6,000 children with SAM. Working with the World Food Programme (WFP), UNICEF is launching a campaign to reach 100,000 children with micronutrient supplements, together with iron and folic acid supplementation for 30,000 pregnant women. Some of the excess therapeutic food and equipment procured at the beginning of the emergency is being diverted to other humanitarian responses in the country.

A long term IYCF-E strategy is being developed to start tackling the stunting and chronic malnutrition problems in the typhoon-affected areas and in the rest of the country.

RTE findings

In light of the initial risk of deterioration of the nutrition situation and the worrying – albeit excessive – planning figures, and also based on the 'no regrets' approach, UNICEF's initial response was reasonable. Collaboration with WFP for technical and responsibility-sharing arrangements was initially good, but later affected by UNICEF delays in issuing PCAs with partners jointly selected.

According to UNICEF's own 4MR, the "limited scale of treatment is due to lack of capacity and coverage of existing health facilities." This was confirmed by the RTE; weaknesses for work on nutrition in emergencies existed at all levels before Haiyan. UNICEF's Nutrition programme was limited in scope, not emergency-focused, and affected by in-house staffing issues.¹⁸ No NGO in the country was working consistently on CMAM and IYCF-E before the crisis, and they had to scale up capacity and staffing after the typhoon. Coverage is still limited. The way Nutrition is decentralised at municipal level in the Philippines makes it a very low priority for Mayors, and local capacities are generally extremely low. UNICEF's own reported figures on progress against target at the 3.5 month mark show the extent of the challenge, falling far short of its targets for this sector (as has the cluster). Although the initial estimate of needs have been over-estimated, this represents poor performance.¹⁹ While acute malnutrition remains at relatively modest levels, the typhoon has helped cast light on the wider problem of chronic malnutrition (stunting). A long term IYCF strategy is being developed to start tackling the stunting and chronic malnutrition problems in the typhoon-affected areas and in the rest of the country.

¹⁸ It is noted that UNICEF Programme Division did not meet the repeated requests to deploy senior staff support. A P5 Nutrition in Emergencies Advisor arrived in Manila only in late December 2013.

¹⁹ It is reported that at six months, with the scale of software elements rapidly expanding (following capacity building of government health and nutrition staff), the progress towards cluster targets looks much better. These figures also reflect the completion of the iron and folic acid supplement programme, not reflected at four months.

2.2.4 Education

Education targets until November 2014	Cluster target	Cluster result	UNICEF target	UNICEF cumulative results	% target achieved at 3.5 months
Pre-school and school age children (3-17 years) provided with learning materials and supplies	550,000	460,000	500,000	430,223	86%
Children accessing temporary learning spaces	500,000	231,000	300,000	132,000	44%
Temporary learning spaces established	5,000	2,310	3,000	1,320	44%
Education service providers trained on at least one emergency- related topic	10,000	1,239	10,000	500	5%

UNICEF and Cluster targets and results as of 21 February 2104 (as per 4MR)

Needs analysis

From UNICEF's 4MR: "Typhoon Haiyan damaged or destroyed close to 3,200 schools and day-care centres. Other schools served as evacuation centres. Over a million pre-school and school-aged children were out of school and close to 31,600 teachers were affected. Bringing children back to learning was an immediate priority, as children were at risk of their education being severely disrupted."

The Department of Education (DepEd) has a solid decentralisation system and good baseline data were available from the beginning of the crisis. Information on destroyed and damaged schools became available fast. UNICEF's strong collaboration with DepEd for its regular Education programme allowed for a sound response.

UNICEF response

The table above shows the extent to which relatively rapid progress was made in the provision of learning materials and temporary learning spaces equipped with school-in-a-box kits. UNICEF also worked with the government on an initial 'back to school' campaign in January, and integrated efforts so that children returning to school would have access to safe water and adequate sanitation together with hygiene education. This was overall successful, although kits and supplies were not sufficient to cover all needs and in some areas distribution was slow. Psychosocial support to children and teachers "has been a priority in the aftermath of disaster" (see also under child protection below). Education staff were trained on education in emergencies and DRR – including on providing psychosocial support, improving school safety, and child centred risk-assessments.²⁰

School reconstruction and rehabilitation work is to a very large extent under direct responsibility of DepEd, which follows high standards. UNICEF involvement is limited to small-scale renovations in this broader framework. Developing flood mitigation for temporary learning spaces (in collaboration with government) is described as a priority in the 4MR, as heavy rains in mid-January decreased children's

²⁰ Source: 4MR. There was however limited consultation with CP staff on psychosocial interventions at the initial stages of the response.

attendance at many schools just as they were reopening. Prior to the start of the new school year in June 2014, UNICEF will also support a larger back-to-learning campaign with all partners, which will include social safety net measures for families with children who may have left school to engage in livelihoods. The campaign "will incorporate longer-term advocacy for creating inclusive and child-centred learning and disaster resilient teaching environments."²¹

RTE findings

UNICEF's education interventions have been among the more successful elements of its response. The setting of temporary learning spaces with related equipment was very timely in helping get children back to school in Tacloban. Lack of effective collaboration between the IRT and the country team in Manila led to some problems, including delays in supplies. The latter were also exacerbated by some glitches in local procurement, which could have been avoided with better preparedness pre-established procurement arrangements.²² Some concerns were raised about the tents provided as they were too hot and not appropriate to the warm tropical climate. The few tents that had double roofing were much more suitable.

2.2.5 Child protection

Child Protection targets until November 2014	Cluster target	Cluster result	UNICEF target	UNICEF cumulative results	% target achieved at 3.5 months
Children with safe access to child-friendly spaces	115,500	55,682	75,000	16,934	23%
Children accessing psychosocial support activities	115,500	55,682	75,000	16,934	23%
Caregivers accessing psychosocial support activities	45,000	4,165	45,000	4,165	9%

UNICEF and Cluster targets and results as of 21 February 2104 (as per 4MR)

Needs analysis

Over 40 per cent of children in affected areas were living in poverty prior to the typhoon's landfall and many were vulnerable to abuse and neglect. As the 4MR notes, "trafficking and other forms of genderbased violence were among the most acute risks for women and children. The devastation brought by Haiyan has exacerbated such vulnerability, together with added risks for children from displacement [and] loss of loved ones [...]." Tracing and reunifying families was one clear priority for UNICEF along with providing psychosocial support.

UNICEF response

(i) **Child-friendly spaces and psychosocial support.** Some 17,000 children now benefit from 89 child-friendly spaces in typhoon-affected regions, through UNICEF and partners. "Children in these spaces have an opportunity to engage in activities – play, recreation or informal learning – that promote psychosocial recovery. Structured psychosocial support for children comes alongside coaching for staff in

²¹ ibid

²² UNICEF has long established long-term agreements (LTAs) with local suppliers as part of preparedness. However, in the case of Education, the IRT Education Team felt the need to reduce the content of school supplies which rendered the LTAs for these supplies invalid and necessitated going through a new round of bidding based on the reduced content of school supplies. This contributed to delays in procurement.

these spaces."²³ (ii) **Support to unaccompanied and separated children** including **rapid family tracing and reunification.** After four months, approximately 130 children were identified as unaccompanied or separated and are being followed up. UNICEF's innovative Rapid Family Tracing and Reunification (Rapid FTR) technology, using an open-source mobile phone application, was deployed to document and share information on unaccompanied and separated children. Real-time reporting reduced time and cost compared to paper-based FTR, increased security of managing sensitive information and will protect data from destruction in future emergencies through storage on a digital space. Government officials in 31 municipalities were trained on Rapid FTR. For the future, a specific campaign against human trafficking across affected regions will bring together the Department of Justice, Departments of Social Welfare and Development (DSWD) and UNICEF to boost the capacity of frontline service providers in sea ports and airports that are entry, transit and exit points for child trafficking, while also setting up a network of help desks in affected areas.²⁴

RTE findings

The fact that (new) major problems of child protection appear to have been avoided might be taken as a sign that the Child Protection (CP) programme was a success, though other factors are likely to have played a greater part. Looked at in its own terms, it was one of the weakest elements of UNICEF's response. The capacity of the Child Protection section to respond to an emergency of such magnitude was limited, and collaboration with government (several ministerial counterparts) was based on long-term system strengthening and not focused on emergency issues. Few NGOs in the country were working on CP in emergency before the crisis (mainly in conflict/CAAC), and after Haiyan it was difficult for them to scale up capacities and engage in collaborations with UNICEF. Little baseline data on CP in emergency vulnerabilities and issues was available.

The IRT CP specialist led the activation of the Rapid FTR. However proper follow up of cases and case management in general suffered from the limited capacities of social workers in the municipalities. Child Friendly Spaces were installed in good numbers, and their effectiveness became dependent on the involvement of the local communities managing them. In general, the overambitious strategy to link emergency to recovery interventions drafted at the early stage (particularly on Rapid FTR) was not – and perhaps could not be – implemented. This, together with other internal and external factors, led to long delays in processing the PCAs, which as a result were signed very late. Failures of communication between the IRT and the Child Protection section in Manila contributed to PCA delays and other problems.

Working relations with the United Nations Population Fund (UNFPA) were good at the field level but not at the Manila level. While there was good collaboration with government, it did not correspond to the emergency-related CP needs. Some concerns were expressed that no specific assessment was conducted in Ormoc even though it is considered a hub for child trafficking.

Overall child protection responses in emergency should benefit from more robust application of the existing gender-based violence and protection tools and mechanisms.

²³ Source: 4MR. The figure of 17,000 children with an average of nearly 200 children per CFS seems an overestimation, though. The RTE visited several CFSs in the affected areas and spoke to many social workers and volunteers; while some Spaces are clearly well-run, numbers of children attending are normally lower than these figures suggest.

²⁴ A technical workshop in Cebu in February offered some conclusions to help prioritise CP interventions in the following months; though in April 2014, the RTE team had limited evidence of this happening.

2.2.6 Cash transfer

Needs analysis

One of the most damaging effects of Haiyan was to deprive those affected of a source of income. Whether through loss of crops by farmers, loss of productive assets like boats for fishermen, or loss of employment because of destruction of commercial infrastructure, millions of people found themselves without income or livelihood. Many had also lost their basic household assets.

Box 2: Extract from MIRA I

With 45 per cent of sampled communities reporting farming as their primary source of income, the most urgent needs are to replant the damaged rice and corn fields during present planting season. Support is also required to repair fishing assets, 30 per cent of respondents indicated fishing to be a primary source of income. A priority need is to resume employment and livelihoods, clearing of debris and rehabilitation of public infrastructure including local markets in urban areas to ensure access.

UNICEF response

In six of the most affected communities – Tacloban, La Paz, Dagama, Pastrana, Julita and Burauen – UNICEF worked in partnership with Action Contre le Faim (ACF) and the government to launch a programme of emergency unconditional cash transfers to help families cover basic and most immediate needs. Under this scheme, some 10,000 vulnerable households will receive US\$ 100 every month for six months, based on key vulnerability criteria – families with pregnant women, lactating mothers, female-headed households, or other households hosting separated children or with children under 5 at risk of malnutrition. After six months UNICEF and the government will determine whether and how to include beneficiaries into the government's existing social protection conditional cash transfer scheme and/or their pasture and livestock grant programme.²⁵

Box 3: Quote from barangay-level interviews

"Sometimes I noticed that there are some donations that were given to people too much but there is no support for livelihood and shelter. We were not given plywood, cash transfer (unconditional). WFP gave some cash transfer under the government Pantawid Pamilya program. UNDP had cash for work for 15 families only."

RTE findings

The use of unconditional cash transfers to vulnerable individuals and households took some time to be embraced as a strategy, this being the first time UNICEF had tried such an approach in the Philippines. The programme was somewhat delayed and could have started earlier.²⁶ But once implemented, it was

²⁵ Source: 4MR.

²⁶ The arrival of a cash advisor from Afghanistan on 13 January was an important catalyst. The CO may have been reluctant to proceed because of the risks believed to be associated with cash transfer programmes. This relates to the wider question of risk management in major emergency responses. The deployment of a specialist advisor on risk from headquarters was reported to have been an important step in helping the CO put such risks into context.

widely considered successful and was appreciated by recipients, who were able to choose their own priorities. Many sceptics appear to have been converted to this approach.

Some instances were found of inappropriate practice. In Dagami, where cash transfers were made through the local delivery store, the procedures adopted – requiring women to line up for the whole day – were insensitive to the needs of pregnant women, women with young children, and older women.²⁷ Mostly, however, the programme appears to have been implemented appropriately and efficiently. It was mounted in conjunction with ACF, a collaboration that worked well.²⁸ Given ACF's and UNICEF's combined capacities, the programme could arguably have been conducted on a larger scale from the outset. In the event it was 'trialled' with 10,000 recipients, in itself a fairly substantial contribution. PCO is currently looking into an expansion and extension of the programme. In addition to on-going monitoring of the use made of cash grants, it is recommended that a more comprehensive review be conducted at the end of the programme.²⁹

While cash transfer provides an opportunity to help break down the silos between the various sectoral responses, in practice it is not clear how this social policy should be integrated with the other programme elements.³⁰ Nor is it clear how it can best be integrated with the government's own social protection scheme. Overall, this is an important learning opportunity for UNICEF, and preliminary reviews of households' fund-utilisation patterns should be followed by a more comprehensive final survey. One of the informal findings from ACF – based on comparing the one-off donation as per WFP approach with a predictable monthly donation – reveal that with the latter, the beneficiaries are less prone to impulsive purchases and could be adapting a more comprehensive strategy for long term investment on housing or livelihood projects. Based on informal discussion with recipients, the evaluation team confirmed the prudent and practical use of cash for purchases to support basic needs such as food, clothing and construction materials to make minor repairs; schooling for children; and some savings for example to build a sari-sari (i.e., small convenience) store.

²⁷ This problem has been recognised and steps have now been taken to minimise such incidents.

²⁸ As with WASH, ACF used the emergency clause of their existing PCA with UNICEF to implement the cash transfer programme.

²⁹ An internal review by UNICEF and ACF is currently planned, supplemented by a report from an independent monitor.

³⁰ In commenting on an earlier draft of this report, the UNICEF team noted that "Cash creates a demand on the services available. Sectoral related expenditures (Education, Health and Nutrition) necessitate information sharing on available services so as to ensure an efficient use of the cash grant."

Box 4: Cross-sector collaboration with selected LGUs

Building on its experience of working with selected LGUs in the framework of its regular programme, the PCO decided to apply a similar approach in the typhoon-affected areas. 40 LGUs in Regions 6 and 8 were selected based on the number of people affected, with the aim of reaching a threshold of 3 million people. MoUs were signed with each selected LGU. The programme, for which US\$ 10 million has been allocated, has the objective to provide each LGU a sum of approximately US\$ 250,000. It is the responsibility of each LGU to allocate these funds to different sectors (WASH, Education, Health, Nutrition, Child Protection), prepare a work-plan and a budget, and submit these to UNICEF for review and fine-tuning.

This intervention has proved challenging to put in place as the LGUs in question are not traditional partners. But while they will need support with work-planning, this approach appears to the RTE team both appropriate and relevant. It is to be noted that the grants given to some traditionally less funded departments of the municipalities such as social welfare is a good way to re-establish a more positive power balance to woman.

While it raises some accountability issues, working with this tier of government brings with it the greater likelihood that the responses so funded will be responsive to the needs and priorities of local communities. UNICEF field offices in Tacloban and Roxas are actively involved with the finalisation of the work-plans, and while this is proving challenging, it is also an opportunity to refine the working collaboration with different local administrations at municipal and provincial level. Also, it could and should be an opportunity for UNICEF sectors to better harmonise cross-sector coordination and interventions.

2.3 Related Country and Field-Level Processes

The more 'central' UNICEF operational and programme support issues like human resources, communication and fundraising, and supplies are dealt with in Section 4. Here we consider those processes more directly linked to the programme at the country and field level.³¹

2.3.1 Communication and accountability to the affected population

An immediate, urgent and practical communication problem arose at the early warning stage, prior to Haiyan making landfall. There was reportedly a huge communication challenge explaining to people what a 'storm surge' was, when the majority of average Filipinos have no prior experience of such an event. Thus despite the warnings, many did not take refuge in evacuation centres or elsewhere. This indicates that there is much more to be done by way of community awareness-raising at the preparedness stage as well as later on.³²

With many of the normal channels of communication out of action in the wake of Haiyan, UNICEF "focused on local networks and basic communication tools to reach out to those most affected". This

³¹ Though it is not further explored in the RTE, it should be noted that the ICT challenges faced in the initial stages of the response were formidable, and made communication between Manila, Tacloban and the field offices particularly difficult.

³² The experience of Bangladesh in preparing vulnerable communities to face tropical cyclones may be instructive in this regard.

included using megaphones to mobilise communities for vaccination, flyers and banners in public transportation to spread the word on immunisation and highlight the back-to-learning campaign. Once access to networks was restored, UNICEF collaborated with the Communicating with Communities (CWC) cluster in Tacloban to send out SMS messages and air key information on child protection and hygiene promotion.

UNICEF laid stress on 'participation, accountability and feedback' both in relation to response plans and monitoring,³³ and the RTE noted several initiatives in this often neglected programmatic area. These included consultation with representatives of the 40 targeted municipalities (LGUs) on the targeting of resources. Children had their voices heard through consultations organised with other child-focused organisations (Save the Children, Plan and World Vision).³⁴ UNICEF set up mechanisms to share response results information with affected populations and an online platform allows dialogue with affected populations and a means of giving feedback – including satisfaction information on services provided (see also the HPM Satisfaction Meter below). While potentially very relevant for the future emergency work of UNICEF in the Philippines, these mechanisms are still centralised at Manila level and limited in their field coverage.

Communication and feedback through the programme elements themselves has also been patchy. In project planning and implementation, some implementing partners (e.g., Oxfam) have adopted approaches to CWC and accountability to affected populations (AAP). Communication for Development (C4D) initiatives by programme sectors (notably Education and Health) has been appreciated but is still mainly one-way. The deployment of advisors on CWC, AAP and prevention of sexual abuse and exploitation (PSEA) by OCHA was appreciated though reported to have limited impact to date. It does have the potential to help strengthen the international response.

With regard to accountability for the delivery of UNICEF's own programme, the intended beneficiaries did not always understand what UNICEF was, what its role was in relation to implementing partners, and why the assistance delivered might be delayed or inadequate – for reasons that might be technical, logistical or financial.³⁵ Most damaging are instances where such occurrences create distrust, suspicion and tension in the community. According to CWC/AAP reports, allegations of misuse and corruption of aid are made against the Barangay leaders themselves. While this possibility has to be taken seriously, it is not uncommon for disaster victims to blame politicians concerning the inadequacy of aid received. UNICEF at least has a responsibility to be as transparent as possible both about what people can expect from its programmes, and where it is not delivered as expected, the reasons why.

³³ Source: 4MR.

³⁴ See for example 'What Children Think' report, Save the Children, December 2013.

³⁵ Community consultations in Pilar Municipality, 1 April 2014; with Oxfam, Eastern Samar, 24 March 2014; Guiuan Tent City, Maayon Municipality, 1 April 2014.

2.3.2 Coordination and partnerships

UNICEF has worked with a range of both governmental and non-governmental partners in its response to Haiyan, as well as with its fellow United Nations agencies.

Collaboration with Government

On the central government side, UNICEF has worked with the National Economic and Development Authority (NEDA),³⁶ responsible for the post-Haiyan reconstruction and for reconstruction assistance on Yolanda (RAY); the Office of Civil Defence (OCD) and its National Disaster and Risk Reduction Management Committee (NDRRMC); Departments of Social Welfare and Development (DSWD) and Department of Education (DepEd); and different departments of the Department of Health (DoH).

The Philippines government adopted the cluster approach (see Section 3) in humanitarian crises, and embedded it in the law system. UNICEF had already collaborated on emergency issues to some extent with governmental counterparts for Education (DepEd), Health (MoH) and especially for WASH (Disaster Prevention and Response Office). This facilitated Manila-level coordination for these sectors during the response. The picture was much more variable at the local level. Here the central ministries had limited reach and capacity due to the extremely cumbersome decentralisation system of most line Ministries, and coordination was mainly with municipal authorities and other LGUs, influenced by capacity, political affiliation and personality factors.

Box 5: Quotes from local officials

"So far good relationship with UNICEF specifically on the Haiyan/Yolanda response. A Planning assistant from UNICEF, roving and checking work plan preparation and monitoring would be of great help to the municipality to expedite the process." – Mayor Cherry Espero, Municipality of Pastrana

"Without UNICEF support, the DepEd cannot start the reconstruction."

"UNICEF even offered for DepEd [use of] the UNICEF office to send emails at a time when there was no electricity. UNICEF is always doing quality assurance, [it is] proactive and full of initiative."

The collaboration with LGUs (see Box 5 above) was bold and innovative. As one PCO staff member described it: "UNICEF's decision to engage with priority municipalities and cities in the highly affected provinces was made precisely to assist local governments in their effort at recovery and restoration of critical and most basic services such as water supply, sanitation, health, nutrition and protection. The decision to embark on these partnerships and the provision of direct cash transfer has been made as a strategic response to the limited resources available locally given the extent of devastation and highly problematic bottleneck in fiscal transfer from the national and local government [including access to funds raised for the Reconstruction Assistance on Yolanda plan]."

Collaboration with others

Coordination with the United Nations system generally, including the HCT, is covered in Section 3 below. On the programme side, we note here that there was good technical coordination with WFP on nutrition and with WHO on health. Coordination proved more difficult with UNFPA on child protection and gender-

³⁶ NEDA is also the body with which UNICEF coordinates most directly in its country programme.

based violence, especially at the Manila level. One respondent noted that "Early on in the emergency the Country Representative discouraged UNICEF's involvement in GBV, noting potential conflict with UNFPA...[who] clearly did not want to share GBV work with UNICEF... While CP and GBV coordination has been successful in smaller emergencies, it was more challenging with the number of partners and greater amounts of available resources in Yolanda."

UNICEF had pre-existing implementing partnerships with some NGO partners, both national and international. In the event, available partner capacity for the Haiyan response proved relatively strong in WASH, and to a lesser extent in education and cash transfer (ACF); it was more limited for nutrition and child protection. Despite the application by UNICEF of the SSOPs, the PCAs process was one of the limiting factors on progress in the response. The relative abundance of funding options also meant that incentives for NGOs to sign PCAs was less than in some other humanitarian crises. Box 6 below describes the PCA issue in more depth.

With regard to partnerships with community based organizations (CBOs) and local NGOs, UNICEF had few PCAs with such bodies either before or during the response in the areas concerned. This was attributed in part to these not being areas of previous programme engagement for UNICEF, but also to the apparent lack of partners with adequate capacity. For the most part, UNICEF's engagement with local organisations was through INGO partners (e.g., through Oxfam in Eastern Samar) for whom capacity building of CBOs is part of their exit strategy. Certainly, some investment in capacity building is needed to bring local NGOs more directly into emergency programme delivery, as well as into coordination mechanisms (including the clusters). Many currently lack the capacities needed to deliver to the scale and quality that UNICEF would expect, but could assist greatly in areas like needs assessment, community outreach and public education.

The RTE did not explore UNICEF's potential collaboration with other sectors that have an actual or potential role to play in response to disasters, including the Philippines military and Office of Civil Defence which played a major role (supported by foreign militaries) in the Haiyan response.³⁷ Nor did it consider the role of private sector (commercial) actors. Both are topics that deserve further consideration in future work on preparedness.

One other feature of the response should be noted here: the significant role played by 'non-traditional' international humanitarian actors – including groups from China, Taiwan and Korea – which have tended to work in isolation from the mainstream international system. Notably, Tzu Chi - the Philippines branch of a Taiwanese Buddhist organization – had a major programme (reportedly around US\$ 27 million)³⁸ largely involving cash transfers and cash for work.

³⁷ For detail on this see 'Lessons from Typhoon Haiyan (Yolanda)', Centre for Excellence in Disaster Management and Humanitarian Assistance, January 2014, US.

³⁸ See e.g. Thomson Reuters Foundation report at <u>http://www.trust.org/item/20140227104617-x915g/</u>

Box 6: Programme Cooperation Agreements (PCAs)

With the exception of the activation of the emergency clause in a couple of existing WASH and Education PCAs, all PCO programme sections accumulated delays with the negotiation and issue of PCAs with implementing partners. In some cases, PCAs were signed four to five months after the beginning of the humanitarian crisis. While several contextual factors influenced these delays, this is a major issue which directly affects UNICEF's reputation and its humanitarian response.

The L3 SSOPs offer room for simplification of the standard PCA processes. Screening of partners can be postponed and *ad hoc* and flexible Contract Review Committees (CRC) can be organised to review proposals. Other aspects are also simplified, with a view to faster and leaner processes. While information about this simplification was made available to the office, the RTE noted that key managers in the office differed in their interpretation of it. In addition, some sections (Nutrition, Child Protection) showed more weaknesses than others in the overall management of emergency issues, and this exacerbated the problem. The problems of miscommunication and friction between the IRT team in the field and the sections in Manila contributed to further delays.

In some cases, a decision was taken to sign multi-sector PCAs with one partner (e.g., CP and Education with Child Fund). While this approach should theoretically optimise resource utilisation, avoid 'double-dipping', and encourage cross-sector collaboration, it resulted in each section sending different administrative information and requirements to the partner, adding further delay to the process. Additionally, some partners had limited in-country capacity to produce solid draft proposals, which, coupled with an unusual availability of funds, discouraged them from firmly engaging UNICEF for partnership.

2.3.3 Monitoring and reporting

The PCO has developed the humanitarian performance monitoring information system (HPMIS), a sophisticated system for monitoring. This has three components – partnership monitoring, supply/input tracking and humanitarian performance monitoring – and the intention is to roll it out to the 40 priority LGUs.

Of the three components of HPMIS, e-Supplies monitors how UNICEF supplies are mobilised building on the existing VISION system; e-Partners allows UNICEF partner results to be reported, collated and triangulated, by tracking partners' key actions and achievements against response plan indicators – and serves as an inventory of all UNICEF partners.³⁹ e-HPM is based on an electronic survey designed to monitor how women and children benefit from UNICEF's humanitarian action. According to the 4MR, several rounds of data collection under e-HPM took place since December 2013 in Tacloban. More than 7,200 households in communities and evacuation centres were queried on humanitarian services in water sanitation and hygiene, education, health, child protection and nutrition. The results are collated in an HPM 'Satisfaction Meter': an idea that has great potential, but needs refining and expanding in coverage.

At present the HPMIS remains largely centralised in the M&E section in Manila and appears not yet to be fully understood and used by programme people and at the field level, including the humanitarian performance monitoring (e-HPM) component. Most importantly, it is not yet well adapted to the planning, operational and monitoring requirements of emergency response.⁴⁰ The IRT team was not familiar with

³⁹ Source: 4MR

⁴⁰ More generally, the normal Level 2 of the Monitoring Results for Equity (MoRES) system for country programmes does not provide a basis for operational decision making, being based on a six-monthly traffic light system.

the e-HPM system and focused instead on monitoring using the EMOPS-standardised HPM system and indicators. While this generated the necessary information (including the data that fed into the 4MR) it created some disconnection and use of parallel systems at early stages between the CO and IRT, though these were later reconciled.

In general terms, the standard UNICEF approach to monitoring emphasises situational monitoring rather than programme delivery. In the Philippines case, the country system is designed to monitor performance, based on a set of specially developed indicators derived from the CCCs. The global HPM approach is more operational and is based on the capacity and funding constraints found in the majority of humanitarian contexts. The aim of the global HPM approach is to monitor what UNICEF has actually done (results) in relation to what it planned to do (targets) in order to support CO operational decision making and strengthen the CO humanitarian intervention. This more functional approach was adopted by the IRT for understandable reasons, given the limits of time and resources. In Tacloban, the system was based on a dashboard of output reporting of the three main indicators or each programme and cluster section. The CO survey-based approach of e-HPM has now been adapted to measure access to services and "engage with the affected population on the utility and outcome of its approach". It has the potential to be further adapted to meet UNICEF's operational and output reporting requirements in the Haiyan response.

Box 7: Talking with the affected communities about relief and recovery

The communities affected by Haiyan-Yolanda, like disaster-prone communities throughout the country, are highly resilient. They are openly and expressively grateful for outside help, but they are not waiting for others to help them. They have weathered natural disasters and climatic changes on a yearly basis, using their local social networks and resourcefulness to support themselves and their families. In some communities 'bayanihan' (meaning helping one another) is practiced and local charities and people's organizations have been in the front-line of emergency response. Individuals, churches and community benefactors filled the gaps in relief through cash donations and locally-procured building materials, tents, and supplies. These local actors have not been given proper recognition, dwarfed as they are by big humanitarian organizations, especially in Tacloban. But their role has been crucial and mutual assistance has been as important as any other factor in helping families get back on their feet.

The communities, municipal partners and government officials acknowledged with an overwhelming gratitude the assistance provided by UNICEF in particular and the humanitarian community in general. It is to be noted that there has been also some perceived inequitable distribution of aid in a number of communities. There may be a tension here between vulnerability-based targeting criteria and the concept of 'fair shares'. The charge of inequity tends to be laid at the door of government; but there may also be some responsibility on the part of the aid agencies for over-concentrating their assistance in some areas, particularly urban areas, at the expense of rural areas.

In areas where the devastation was more acute and vulnerabilities of communities were high pretyphoon, especially in Samar province and in some municipalities in Panay, the needs are greater for shelter, livelihoods, infrastructure and on-going support for the communities to 'build back better' without relapsing into further destitution. Communities in bunk houses and tents face daily risks and vulnerabilities associated with their distance from the social support systems, from extended kinship or economic activities, schooling for children, protection issues for young women and female-headed households and heightened deprivations. Basic needs will remain high. Given the coming of the new monsoon season, these Haiyan-affected areas are susceptible to further degradation, potentially weakening the gains achieved at the earlier stage of recovery especially with regard to the situation of children, youth and women in temporary shelters.

The Accountability to Affected Populations (AAP) framework has yet to be transformed into practice on the ground by all cluster members, including in relation to Disaster Risk Reduction (DRR). Differential impacts of the disaster on women and girls, boys and men, people with disability, elderly people, indigenous communities and other diversities need to be considered seriously when designing a long-term recovery agenda for UNICEF and other humanitarian actors – and this represents an important influencing agenda with the Philippines government.

Source: Community and barangay-level interviews

2.4 Findings on Programme Efficiency, Coherence and Connectedness

2.4.1 Efficiency

Efficiency was defined in Section 1 as concerning the question: *Were the available financial and other resources put to best use? Could the same ends have been achieved at less cost?* These questions proved difficult to answer in practice, not least because of the lack of any direct comparators. For the purposes of this RTE, the team began by considering 'implementation efficiency' using indicators that included the rate of expenditure by programme element (burn rate), correlated with the achievement of programme targets. However, it was unable to draw conclusions from the subsequent analysis, except to note that spending to schedule was a challenge across the board and particularly in those sectors in which PCAs took a long time to conclude.

In the definition above, the best available use of resources includes, of course, staff time and capacities. The related issues are considered further in Section 4. In particular, the RTE team considered the *transaction costs* and *opportunity costs* involved in delivering UNICEF's response. These are not possible to quantify with any degree of precision, but based on the findings under a number of different headings, the RTE team concludes that transaction (process) costs were disproportionately high in some areas compared to the results achieved. In particular, the challenging nature of collaboration between IRT and PCO affected the efficiency of operations in some sectors, in terms of both transaction and opportunity costs. As noted earlier, the transaction costs associated with concluding PCAs with implementing partners were unduly high in some cases, leading to significant delays and lost opportunities. Beyond UNICEF's own programme, the transaction costs associated with cluster coordination and the associated information demands were felt by some to outweigh the benefits.⁴¹

One area where the RTE team might have expected to find significant inefficiencies was in the procurement of supplies. The 'no regrets' approach embedded in the L3 protocols might have led to significant levels of over-ordering or redundancy of stocks. In fact, with the few exceptions noted above, this was found not to be the case. In the nutrition programme, the initial over-estimation of acute malnutrition figures led to excess procurements of CMAM equipment and products – but this cannot reasonable be cited as an example of inefficiency.

2.4.2 Coherence

Coherence is defined in Section 1 as concerning the question: *Were the appropriate linkages made between the various components of the emergency response?* Put another way, it is about the extent to which the programme overall hung together or was composed of unrelated elements. In this regard, the picture is mixed: the RTE team found that the approach was initially 'silo-ed' between the various programme elements – but that it got better with time, and was better at sub-hub level (Guiuan, Cebu). The cash transfer programme was largely disconnected from rest of the programme, suggesting that UNICEF has yet to locate this mode of programming within its overall conceptual framework.

The RTE team also found that there was more scope for cross-cutting analysis in both the relief and recovery phases. In general, cross-cutting issues including gender, age, disability and HIV/AIDS are not well represented in UNICEF's analysis. Some aspects of its programme (including WASH and Education) are stronger in this regard, though there is heavy reliance on implementing partners to ensure that these issues are properly taken into account in the planning and delivery of programmes.

⁴¹ Results from RTE survey of cluster members in clusters co-led by UNICEF. Further analysis of this issue is beyond the scope of the RTE, but it will form part of the forthcoming IASC Inter-Agency Humanitarian Evaluation.

2.4.3 Connectedness

Connectedness is defined in Section 1 as relating to the question: *How well did UNICEF's initial 'relief' response connect to medium-longer term recovery objectives?* Some elements of recovery and resilience are present in all of the sectors' plans as well as in some PCAs. Yet there is limited cohesiveness and consistency among these. In general, the RTE team found that UNICEF lacked a broad strategic vision on how to integrate (and build upon) the emergency response in the regular programme. The strong focus of the IRT on the immediate response, and its limited complementarity to the PCO, may have prevented early fertile discussions about transition.

UNICEF now has an opportunity to re-focus its strategy and to re-shape the Country Programme, in order better to incorporate preparedness, DRR, and resilience concerns in the light of Haiyan. It should be noted in this context that agreements reached with the Local Governance Units (see Box 4 above) went beyond emergency response and included from the outset recovery efforts, including the restoration of water services and establishment of case management systems for child protection.

Box 8: Extract from the UNICEF Strategic Response Plan

The UNICEF Haiyan response plan will support continuity from relief to development by strengthening the formal (governance) and informal (community) systems. Strengthening the resilience of children, communities and systems to multiple shocks and stresses, including natural hazards, climate change and conflict, is a building block of the country programme and will be central to the response and recovery. All sectoral interventions will support people's own recovery and strengthen the resilience of people and local institutions to shocks, including through Disaster Risk Reduction (DRR), in the longer term.

UNICEF did make some efforts to ensure that the link with DRR and resilience were incorporated from the outset. A DRR specialist was deployed from headquarters, a simple two-page guide was prepared on DRR in the response, and some practical DRR measures were included in cluster response plans. DRR planning workshops were held with LGUs, as well as team planning sessions in Tacloban and Manila. An early draft 'resilience framework' was developed in concert with the Tacloban and Manila teams. In spite of these efforts, the overall conclusion (based on the feedback of CO and RO staff) is that just as UNICEF's overall approach to recovery was disjointed, so its approach to DRR and resilience lacked clear practical application and remained overly theoretical.

3. UNICEF IN THE WIDER SYSTEM RESPONSE

In this section, we consider the role played by UNICEF in supporting and helping shape the wider response to Haiyan, both that of the government and the international system. Central to this has been UNICEF's role as co-lead of the WASH, Nutrition and Education clusters – the first two with the government, the last with Save the Children and the government – as well as its role as co-lead on the Child Protection area of responsibility (AOR), and its role as cluster member in relation to health and GBV. For the purposes of this RTE, a survey was commissioned to canvas the views of those involved in the Philippines clusters (at Manila and field level) that were co-led by UNICEF. A summary of the results from this survey is presented here, and these help inform the conclusions reached. (See cluster survey data in Annex 4.)

3.1 UNICEF as Cluster Co-Lead

UNICEF took seriously its responsibilities as co-lead of three clusters for the Haiyan response. Senior staff were deployed for several weeks from the Global Clusters at the outset of the crisis. This team set the basis for activating the relevant clusters, identified most of the cluster coordinators and information managers, defined the structure of decentralised clusters in the field, and provided inputs to OCHA for all the L3 and Transformative Agenda-related commitments (SRP, MIRA, etc.). The 'no regrets' approach and availability of funds facilitated this approach, and it appeared to pay off in terms of the speed with which clusters were established. Continuity was ensured in the majority of cases in the form of three-month deployments of cluster coordinators and information managers. That said, there were a number of gaps in coverage and periods in which UNICEF staff had to 'double hat' as UNICEF programme staff and cluster coordinators.

The deployment by UNICEF of an inter-cluster coordinator and an information manager was widely welcomed. Performance appeared to be at its best during this initial phase but the deployment was relatively short, and when these persons departed, they were replaced temporarily and with *ad hoc* solutions, never as effective. At the time of the review, it was not yet clear who (between the Representative and the Chief of Field Offices) should take the management of the national cluster leads.

This group of senior cluster staff offered senior managers in the office all the elements to properly supervise and manage the cluster coordinators and information managers progressively being deployed in Manila and in the field. Unfortunately, this did not happen. At one point the clusters reported to the Country Representative at his request. However, the Representative had little time for this role and the cluster staff subsequently started loosely reporting to the relevant section chiefs in Manila, though accountabilities remained unclear.⁴² The field clusters, meanwhile, felt 'totally disconnected' from Manila, and no one appeared sure to whom they were accountable. The situation was better for the WASH cluster: the coordinator (national) was already working in the WASH section from before the crisis, had an established network of contacts and organizations, and good collaboration with key government counterparts as well as within the UNICEF organization; this made a big difference.

At field level, there was close collaboration between clusters and programmes, which brought both benefits (stronger coordination on a continuous basis) and disadvantages (the perception by others that no distinction was made between UNICEF and the clusters). The system worked less well as time went

⁴² Roles were apparently clarified before the departure of the Global Cluster Coordinators (there was an organogram and agreement in country in terms of reporting lines). The issue appears to have been one of implementation and ownership.

on, due to more double-hatting and decreased seniority of staff deployments, and also due to OCHA pressure to phase out the clusters in the field locations and prematurely hand responsibilities to local administrations. Most seriously, there appeared to be a lack of understanding of the function of clusters and how they relate to UNICEF's own programme. This showed itself in the lack of supervision given to cluster staff and uncertainty about reporting lines.

The deployment of senior staff from the Global Clusters as well as an inter-cluster coordinator and an information manager at the beginning of the crisis appears to be a good model to consistently set up the cluster structure and supervisory systems under UNICEF responsibility. The way these lost momentum indicates that: a) either longer deployments are required to consolidate the gains achieved – which is probably not easily feasible, given the seniority of this staff, or that b) the process to hand-over supervision and management of the clusters to the UNICEF office should be strengthened with allocation of clear responsibilities and accountabilities.

Based on the advantages offered by a cluster coordinator embedded in the WASH section, the RTE team believes it makes sense to maintain an interim cluster-type mechanism (such as a working group) in the medium term and in all sections to work specifically on preparedness and other emergency issues with the government.

Governments at the provincial and municipal levels appeared unaware – or were poorly informed – about the cluster coordination system. Initially in Tacloban, the DepEd provincial officers were shocked at the number of expatriates attending the meetings and felt it was 'too much' at one point. UNICEF should be sensitive on this point, and it should also be remembered that these government officials were survivors of the crisis themselves. That said, it should also be noted the clusters were very well received by the more local authorities interviewed for the RTE, who were overwhelmed at the time and appreciated UNICEF cluster leadership. The NGOs consulted were also very appreciative of UNICEF's work in this regard.

UNICEF can play a role through its co-leadership of key clusters in broadening the base of humanitarian actors whose voices are heard. Civil society engagement has been largely missing in the humanitarian arena. Local NGOs tended to be crowded out by big international players and, given the media spotlight, there was a huge pressure on the latter to be seen to deliver. In the Philippines, the role of local and grassroots NGOs has more promise to buffer and coordinate with the INGOs and the government in order to create more participatory, citizen-led and centred approaches to community-based DRR. This can democratise the space and (*inter alia*) make it more accountable and better protected from corrupt practices.

Through the clusters, UNICEF should advocate for a feedback system whereby affected people's voices are taken into consideration by cluster members at all stages of the humanitarian response.

The overall question concerning the clusters is 'what was their added value'? Interestingly for the government representatives consulted, a significant part of that value – and specifically the role of their co-leads (in this case UNICEF) – lay in helping them to manage the international aid community. The government needs partners that can talk the language of the international system, including the language of clusters, and help them navigate it.

Box 9: Quote from partners

"Non-traditional humanitarian actors are constructing in areas where INGOs are present [...]. It is important for the cluster to be more proactive to reach out to these INGOs, and local NGOs, to be part of the cluster, something that the lead or co-lead can do."

While it is not within the remit of this RTE to assess the performance of the clusters themselves, the survey conducted as part of the evaluation sought views as to UNICEF's performance as co-lead – and inevitably there is some correlation between this and the perceived performance of the cluster itself. The web-based survey proposed a simple questionnaire to members of all UNICEF co-led clusters, at all levels of cluster representation (Manila, Tacloban, Guiuan and Roxas); 33 organizations (INGOs, local NGOs, United Nations agencies, Red Cross movement, government) contributed by completing 53 questionnaires. The results confirmed the findings of numerous key informant interviews carried out with numerous external actors, although – as often happens in this type of exercise – the responses on the survey appear more magnanimous. The general feeling is that UNICEF performed quite well in terms of basic cluster responsibilities (information sharing, 3W analysis⁴³), but that limited inputs were offered in terms of broader strategic guidance and advocacy.

3.2 Coordination with the Humanitarian Country Team

While it is beyond the remit of this RTE to assess the performance of the United Nations Humanitarian Country Team (UNHCT), a number of factors meant that the scope for effective coordination through the HCT appeared limited. The HCT was perceived by many as dysfunctional, particularly during the first two months of the Haiyan response. In this view, there was a failure by the HCT to provide clear strategic guidance and decisions. Some attributed this to there being "too many non-emergency actors around the table" with business dominated by the problems faced by the core agencies. No minutes emerged from these meetings, and there was no proper information flow to the clusters and the field.

In general, those interviewed for this RTE felt that the central United Nations-led coordination functions were disconnected from the reality of the response. The Humanitarian Coordinator (HC) remained in Manila, and while the temporary deployment of a Deputy Humanitarian Coordinator (DHC) was useful, he spent most of the time in Manila supporting the work of the HCT, when his presence on the field would have been more beneficial. The Operational Peer Review, which took place in mid-January 2014, offered several sound recommendations to improve the work of the HCT.

Partly for these reasons, and aided by the volume of unrestricted funding it was able to raise, UNICEF played a largely independent role in the response. It pursued bilateral relations with relevant parts of government at both national and local levels. In the circumstances, the RTE team considers this a sensible approach. As noted above, UNICEF played its 'good humanitarian citizenship' role largely through its work with the clusters.

⁴³ 3W: who does what, where.

4. UNICEF PROCESSES, STRUCTURES AND MANAGEMENT

In this section, we review the main support functions and processes that enabled UNICEF to respond to Haiyan. This includes the management structures as well as the processes that helped ensure that UNICEF had the funds, people and goods it needed for the response. Some aspects of this have been covered in Section 2 above. Here we focus more on the centrally-coordinated processes: human resources (including surge); communication and fundraising; supplies and logistics; and specialist support, including lesson learning. We begin by reviewing the application of the L3 protocols and Standard Operating Procedures, and ask how well these were suited to this particular crisis response.

4.1 Corporate Emergency Activation Procedure, Level 3 Protocols and the Simplified Standard Operating Procedures

In accordance with the requirements of the Inter-Agency Standing Committee (IASC) and the 'Transformative Agenda', UNICEF has developed a set of procedures for responding to L3 emergencies, which are classified as 'corporate emergencies'. This includes a set of SSOPs covering the business sectors listed in the Box below.

Box 10: The SSOPS

The UNICEF Corporate Emergency Activation Procedure (CEAP) was issued by the UNICEF Executive Director on 21 March 2011 and complemented by UNICEF's SSOPs for L3 Emergencies. The latter were issued by the ED on 6 March 2012, with the objective to simplify, streamline and clarify UNICEF procedures related to emergencies and to enable an effective response to major emergencies. The L3 SSOPs apply to all situations in which the UNICEF Executive Director has declared a L3 emergency and activated the CEAP. This may apply for up to three months and is renewable.

The SSOPs include 12 UNICEF business sectors, namely General Emergency Coordinator (GEC); Cluster Coordination; Planning, Performance Monitoring and Evaluation; Human Resources; Supply and Logistics; Operations; PCAs and partnerships with NGO; Resource Mobilisation; Communications; Humanitarian Advocacy; ICT; and Security/OPSCEN.

One of the questions concerning the application of the L3 mechanism is whether or not it should be invoked in emergencies affecting a middle-income country (MIC) that is well-used to dealing with natural disasters and where both the government concerned and its humanitarian community partners have the capacity and will to respond to such events. In the Haiyan case, it seems reasonable to reply to this that both the PCO and the government itself found their capacities exceeded by the exceptional nature of this situation – as reflected in the government's request for assistance.⁴⁴ For UNICEF, the scale of Haiyan was such that the RO could not make up the resource gap, though it played an important role in helping fill it, especially during the initial phases of the response.

⁴⁴ One of the five criteria assessed in deciding whether to activate the L3 CEAP is 'capacity'. It should be noted here that some of the government officials consulted for the RTE expressed unhappiness at the activation by the United Nations of the L3 process at the national level.

The issue is rather the form and manner in which support is provided. Does it reinforce and complement the existing country capacities, or does it by-pass them by implementing the response more directly? The issue may not be straightforward when children's lives are at stake and where an urgent response is needed, creating a potential tension between 'supporting' and 'implementing' roles. Nor is this tension unique to UNICEF.

Box 11: Extract from the 'Write-up of Lessons workshop, Manila, 10 January 2014'

The L3 SSOPs were not adapted to suit the context of a middle income country, including insufficient consideration of the role and capacity of government and national actors in disaster response, with limited obligations to engage with and coordinate with them. For example the L3 SSOP timeline for UNICEF to finalize its Response Plan did not take account of government deadlines for response planning. In the Philippines the government deadline was longer than the 30 days allowed for in the SSOP.

The overall judgment of the RTE is that it was appropriate to invoke the L3 procedures in this case, and that the SSOPs had a beneficial effect in terms of speed of deployment of personnel and procurement of supplies. There were some areas (e.g., PCAs, as noted above) where they were not applied in such a way as to simplify or streamline the processes concerned. The step aside provision was not used, which it arguably should have been (see below). Most importantly, the HR-related processes were applied beyond the 'no regrets' component in terms of IRT and surge deployments, probably underestimating the resources available in country. The overall way in which the IRT mechanism was used was much more 'substitutory' than it was supportive or complementary. For the reasons described in Section 4.3 on human resources below, this had both positive and negative effects for UNICEF and its response to the Haiyan emergency.

The SSOPs themselves were followed in the great majority of cases, and in the view of most respondents to the RTE they proved their worth. Sometimes the lack of specificity – or a failure of full implementation – led to confusion. One example concerns the role and accountabilities of the IRT and surge staff in relation to the CO staff (see Box 12 below). In some cases the SSOPs were not followed. For example, the failure to define a rolling advocacy strategy as required by the SSOPs was a noticeable deficit in the Strategic Response Plan, where advocacy is conflated with external communication and, by extension, with fundraising. These, however, were exceptions to the general picture of full compliance and application of the SSOPs.

Other aspects of the L3 process, and in particular the application of the 'no regrets' principle, were credited with facilitating the response in a number of ways – particularly in the area of recruitment and deployment, and in supplies procurement (see Section 4.4 below). A few examples were found (mostly on the procurement side) where the 'no regrets' approach may have led to inefficiencies and over ordering, but such examples were relatively few and comparatively minor.

More problematic was the uncertainty over the process of exit from L3 and the related processes such as the withdrawal of the IRT. The L3 was initially declared for two months, but was extended for a further month from 14 January, with the RD of the East Asia and Pacific Regional Office (EAPRO) taking over as GEC. While the initial period for which the L3 status was maintained was judged appropriate, the extension was arguably unnecessary – allowing that some of the SSOPs needed to remain in place.⁴⁵ It added somewhat to confusion over the transition, planning for which might have started earlier. Further

⁴⁵ The overlap in the occurrence of multiple L3 situations in Syria, South Sudan and Central African Republic is also a factor here, as is the need not to tie up the ED for too long in any one L3 emergency as GEC.

guidance on how to best manage this transition is needed, including communicating it consistently throughout office sections and units.

4.2 Management: Structures and Performance

The decision to appoint the EMOPS Director as the GEC was a reasonable one, given the need to coordinate the multiple strands of support operations from New York, Geneva and Copenhagen as well as input from the RO. In this case, the alternative option of appointing the RD as GEC would have made equal sense, given his long experience in the field of emergencies and his established working relations with the CO, as well as the time zone factor (12 hours difference between New York and Manila). The RTE draws no particular conclusion in this case; although to create greater predictability, it recommends that the appointment of the EMOPS Director as GEC – at least for the first 4-6 weeks of an L3 response – be made the default option for UNICEF. By extension, in the Philippines case, the transition to having the RD as GEC could probably have been made some 2-4 weeks earlier.

Box 12: Example of feedback from the Level 3 Emergency Learning 'Wiki'

Extract from GEC SSOPs

16. Determine IRT members' roles, responsibilities and accountabilities

Response:

There is a need to provide better clarity around the exact role and responsibilities of incoming IRT members. Formal supervisory and reporting lines should be made much clearer earlier on. This should include full familiarity with the SSOPs.

There was no common understanding amongst staff on who was in charge of the response at the senior level during the first 3 to 4 weeks of the response, including on where responsibility for decision making lay between the IRT, CO, RO and HQ. In particular **there was not a shared understanding of how the IRT aligned with the CO**, or whether the IRT or CO senior staff (including Section Chiefs) had ultimate responsibility for decision making, with some staff thinking it was the IRT and others the CO. Recommendation: brief all staff on the TOR of the IRT at the outset and explain what this means in practice.

The views expressed here are consistent with the findings of the RTE team.

The senior management for the response worked well together from the outset. In particular the close working relationship between the GEC, RD, Country Representative and IRT team leader was instrumental in making the SSOPs work and in maintaining the coherence of UNICEF's initial response. Close and regular communication was essential to this. When gaps started to emerge over time between the Representative and IRT team leader – and more generally between Manila and Tacloban – these reflected to some extent a structural ambiguity about who was in charge of what, and who was accountable for what. With parallel reporting lines (Tacloban team through IRT leader to GEC; CO staff to Country Representative to RD), the management relied on a 'matrix' arrangement that worked as well as could be expected but which perhaps masked the basic issues of responsibility.

While clear in theory, the leadership arrangements were perceived as *un*clear in the PCO, and this perception, compounded by very different management styles, caused tensions. The complete cessation of the regular country programme seems to have been a contributory factor here, leaving Manila staff with no immediately clear role. Failures of in-house communication also appear to have been a factor, despite

the efforts of senior managers to clarify matters at the outset. Parallel reporting lines in Manila and Tacloban hampered collaboration between IRT and sections, as did poor communication generally between the two offices, complicated by challenges in Information and Communication Technologies (ICT).

When the Representative was forced to step down through ill health, the IRT team leader stepped into this role – and thereby unified the reporting lines. The result was a gain both in clarity and in cohesion, though not surprisingly it was not welcomed by all in the PCO. Indeed the IRT team leader reports having felt in a rather invidious position. The RTE team believes that this might have been avoided had the IRT team leader been placed in clear charge of the overall response from the outset. This is not a reflection on the merits of the Country Representative. UNICEF appears extremely reluctant to invoke the step aside procedure, and its failure to do so over time has probably created a stigma which now makes it harder to use. This is a pity. It is perfectly natural that in the case of an exceptional emergency, UNICEF should deploy its most experienced managers to lead the response. While the Representative in this case had been responsible for other emergency responses, none had approached this in scale. But without defining a clearer role for those asked to (temporarily) step aside, UNICEF leaves itself with few options on this issue. There are certainly cases where it makes sense for the incumbent Representative to remain in charge, even if they have not managed an L3 emergency before, but this should be on the basis of experience and aptitude for the very particular job of managing an L3 response.

An alternative solution might involve deployment of an experienced senior manager specifically to manage the disaster response – as here with the IRT team leader – reporting to the GEC but in close consultation with the Representative over strategy and 'fit' of the emergency response with the country programme and existing external relationships. Relevant powers for external representation on the HCT (signing of contracts, etc.) would need to be transferred as necessary from the Representative on a temporary and limited basis. This could go hand in hand with a continuation of the existing country programme – albeit scaled down – managed by the Representative, who would also be responsible for overseeing the transition to recovery and re-integration of the response with the country programme.

The Regional Office (RO) in Bangkok played an important role, especially during the first few days of the response. It encouraged the PCO to realise the magnitude of the crisis and its implications, and promptly sent key staff to assist the team there. The role of the Chief of Communication was important to start the media response and produce materials for the National Committees and other possible donors; the extremely successful fundraising effort was built on the initial targeting of private donors in countries with substantial Filipino communities. Other Regional Advisors and staff were quickly deployed to assist the PCO for child protection, nutrition, monitoring & planning, human resources, ICT and administration. However, the regional humanitarian advisor was not deployed, and the DRR specialist was deployed in a general rather than a specialist capacity. These appear missed opportunities. By contrast, deployments through the regional roster were crucial to ensuring that essential staff posts were filled in the Philippines in the first few weeks of the response.

Even before being appointed as GEC, the RD got directly involved with the response, ensuring continuous support to senior managers in the CO, undertaking several missions to the affected areas, contributing to the global support coordination, and actively supporting international fundraising and awareness initiatives. His role was considered pivotal.

As the L3 activation took effect, and headquarters' support role to the response grew, assistance missions from the RO decreased. Its specific role was perceived as unclear, including once the L3 was

deactivated – in particular the role of the Regional Advisors once the advisers in headquarters took the support lead. This is an aspect which should be reviewed in the revision of L3 CEAP and SSOPs.

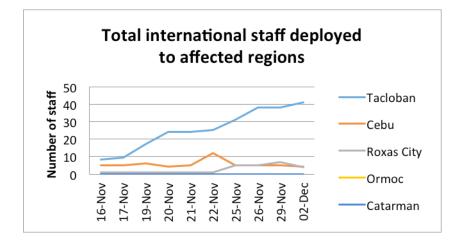
Box 13: On lessons learned from this and other emergencies

More than most organisations, UNICEF devotes time and effort to reflecting on the lessons learned during and after its emergency responses. This was reflected here in a number of internal reflection exercises, the most substantial of which was *the Lessons from UNICEF's Response to Typhoon Yolanda - November 2013 to February 2014*. The aim of this exercise was to "gather and synthesize perceptions of staff based in the Philippines for the first 10 weeks of the response on the lessons emerging from the activation of the CEAP and the application of L3 SSOPs." The result is a detailed set of lessons and recommendations, many of which are echoed by the findings of this RTE. While they play a different role to an independent evaluation, the result of these lessons-learned exercises deserve to be considered alongside the findings of the RTE, particularly since they contain a level of detail on some issues that is beyond the scope of the RTE. The 'Lessons from Yolanda' document, for example, sets out a number of practical lessons concerning staff well-being that deserve to be acted upon.

As well as reflecting on lessons in real time, UNICEF also took some care to review the lessons from previous emergency responses. Programme Division (HATIS) and EMOPS worked together to synthesise these lessons and make them available to the response teams – see the document *Programmatic Lessons for Typhoon Haiyan Response* and *Relevant Lessons Learned from Past UNICEF Responses to Major Emergencies* (Nov. 2013). These included lessons from the Haiti earthquake and Indian Ocean Tsunami responses, and reference to external sources like ALNAP's work on lessons learned in urban disaster responses. Inevitably, some of the lessons are more pertinent than others – e.g., those on cross-sector planning, on child protection and GBV, and on C4D. The lessons on HR and surge deployment are particularly relevant. Yet while the lessons are clearly framed, it is not clear to what extent they were considered in practice. Of more immediate perceived relevance and influence were the lessons from the earlier responses to tropical storm Washi and Typhoon Bopha in the Philippines, as well as from the on-going response to the earthquake in Bohol.

4.3 Human Resources

As is clear in the previous sections, human resources are at the heart of UNICEF's response to Haiyan. More than any other factor, getting the right people in place at the right time, with clarity about their roles and with effective management and support systems, is what ultimately determines the success of such interventions. In this case, the deployment of 'surge' capacity – in the form of the IRT, other surge deployments of UNICEF staff (past and present), consultants and personnel from Stand-By Partners (SBP) – was a central component of the UNICEF response. At its peak, 103 staff were deployed to field locations and Manila in addition to the 84 UNICEF staff already in country. This included staff for programmes, communication and operations, and cluster coordinators and information managers for the clusters and areas of responsibility (AORs) for which UNICEF has global responsibility. The question of how well this surge support worked, alongside the existing capacities in country, is therefore one of the main questions for the RTE.

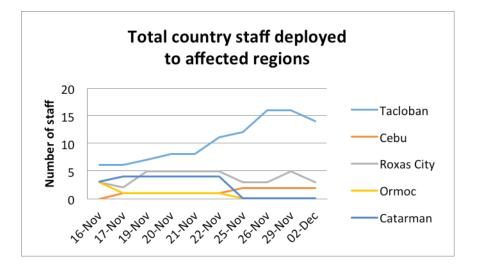


The IRT was deployed within a week of the typhoon, mostly to Tacloban. Though such deployments are formally intended to be made in support of existing staff capacity, UNICEF had no existing presence in Tacloban which was epicentre of the field response to Haiyan and itself one of the worst affected towns. In the event, the role of the IRT and other surge capacity deployed to Tacloban was more like that of an implementing task force. The deployment of such experienced and relatively senior personnel certainly provided a major boost to UNICEF's own response and to its role as cluster co-lead. Conversely, when these staff were withdrawn after the first stages of the intervention, they left (in many cases) a considerable vacuum.

Other surge deployments – from UNICEF headquarters, elsewhere in the region, globally (current and former staff), as well as from standby partners – made up the bulk of the incoming capacity. Most of the issues raised here were common between IRT and other surge deployments. The standby partner deployments had an additional barrier to overcome, namely their lack of familiarity with UNICEF and its ways of working. Those consulted for the RTE raised this as a particular problem for the clusters, adding to the sense of disconnection between the UNICEF programme and the clusters.

The problems concerning relations between the IRT/surge teams and the existing CO staff have been noted above. Better pre-deployment sensitisation and briefing of both the surge teams and the CO staff might have mitigated this. Neither appeared to know what to expect of the other, with the result that the potential synergy between them was never realised. The extent to which this was new territory for both parties was striking, and adds weight to the argument that UNICEF should invest more in standing HR capacity for emergency response. Among other benefits, this would have the potential for building experience among a cadre of flexibly-deployable staff on *how* to operate effectively alongside country staff in an emergency.

The RTE team noted some problems with the integration of surge staff in the existing structure of the offices, both in Manila and the field. In several instances, surge staff arrived in the country without proper terms of reference or job descriptions, and with unclear responsibilities and reporting lines. The organogram of the response was not widely shared and because it was based on the Programme Budget Review (PBR), it did not include surge members and temporary assignments (TA). This added to the confusion. While in most cases the sections and units worked out *ad hoc* ways of integrating, this remains an area where UNICEF should be more proactive.



In some cases, questions were raised about the motivation and capacity of some of the surge members deployed. This raises the question of accountability for the performance of the surge members and those on temporary assignment: in particular, who should evaluate their performance and what control does the CO have over them?

The Fast Track Recruitment Process (FTRP) that is part of the L3 package appeared to be put to good use in this case, particularly after the visit of a senior specialist from Division of Human Resources (DHR) New York. Overall, deployments were timely, though there were exceptions, for example in the Nutrition and Child Protection clusters. The office undertook a Programme Budget Review (PBR) before the end of the year to define programmatic and staffing needs till November 2015. Some 94 positions were established, the majority of which to be filled by staff on temporary assignment (TA) contracts. While offering TA contracts has drawbacks – it may limit the quality of the applicants and it creates challenges in the recruitment process – the approach is sensible in light of the likely need to phase down presence in the field by end 2015. Positions for the recovery phase have been relatively quickly filled, and 90 per cent of this longer term staff were reported in the 4MR to have been already been hired to enable continuity of support.

With regard to staff support and well-being, a number of areas for improvement were noted. Those coming from outside UNICEF (standby partner staff, consultants), or retirees who were brought back in, needed more extensive briefings than they received in practice, especially on latest developments in humanitarian issues and UNICEF processes. The briefing package produced by PCO and adapted for the emergency was generally welcomed, as were the provision of backpacks and the appointment of a counsellor to support staff. However, even within these good practices there was scope for improvement: not all contents of the backpacks were suited for the local context, the backpacks were given only to IRT staff and not to other staff on surge, and the counsellor was under-utilised. In the field, standards of lodging and food were in many cases inappropriate, as is well documented in the staff lessons learned exercises⁴⁶ and confirmed by many interviewees. On the positive side, UNICEF appears to recognise these problems and is looking at different options for solving them, including learning from other organizations like WFP.

⁴⁶ See for example Lessons from UNICEF's Response to Typhoon Yolanda - November 2013 to February 2014.

4.4 Supply and Logistics (S&L)

The availability of supplies was a major issue at the outset of the crisis. Local and national suppliers could not meet demand and existing stocks had been run down in response to emergencies in Bohol and Mindanao. Supplies had to be mobilised via UNICEF's Supply Division (SD) in Copenhagen and its regional hubs in China and Indonesia. Even when supplies arrived in country, delivery and distribution was a major challenge in the days and weeks following the typhoon. Roads, airports and other key parts of the infrastructure were critically damaged. Fuel shortages and security issues further complicated operations at the beginning of the response.⁴⁷

UNICEF worked closely with the government and other partners, using local military planes⁴⁸ and international commercial airlines alongside a fleet of trucks and ships. A logistics hub was established in Cebu, which proved essential in the first two months of the response while Manila re-established road transport to Tacloban.

Box 14: Extract from the Four Month Report

Four months on, supplies being brought in have shifted from life-saving to recovery, and UNICEF has begun to move to local sources when possible. To date, UNICEF has procured supplies worth US\$ 27 million in total, of which local procurement accounts for US\$ 15.7 million. The estimated total amount of supplies ordered is projected to be around US\$ 41.1 million by the end of 2014 or 2015.

To a great extent, UNICEF response to the crisis in terms of supply and logistics has been effective. The emergency offered SD the opportunity to implement some positive innovations. Together with several senior S&L staff deployed from the beginning of the crisis in different locations, S&L staff with specific responsibilities for recruitment and surge and data management were deployed in Manila in support of the expanded S&L team. A more advanced utilisation of VISION for real-time management and monitoring of delivery and distribution of supplies was tested and partially implemented. While this is clearly useful progress for supply in emergency, its full application still seems hampered by lack of capacity of S&L staff who would need comprehensive training. SD is planning a global scale capacity building initiative to tackle this problem.

The ability to track supply orders and subsequent shipments is essential. This did not always go smoothly. The SD reported problems with delays in the recording of transactions, with orders not being put through VISION in a timely way. There appeared to be an assumption that once the logistics hub was established that all of this would be 'taken care of'. But the effectiveness of the system requires staff at all stages of the transaction to input the relevant data, and this did not happen consistently. Yet the PCO was relatively experienced, having been responding to scale in response the Bohol earthquake and the conflict in Zamboanga.

UNICEF worked as closely as it could with the WFP-coordinated Logistics cluster. But the cluster was hampered at the outset since it was not empowered to use civil military assets, and the result was a degree of chaos. This pushed UNICEF to set up its own systems for trucking, shipping and warehousing, minimising its reliance on the Logistics cluster. This is reported to have worked well.

⁴⁷ Source: 4MR and RTE interviews.

⁴⁸ In line with international guidelines on the use of military assets in disaster response.

Some challenges were faced with local procurements of kits (WASH, Education). Although some stand-by agreements with local producers were in place, the systems were not able to cope with the large scale of needs and some delays were accumulated. The PCO indicated that better preparedness should help mitigate this problem in the future. Some delays were also accumulated whenever frictions between the IRT team and the respective sections in Manila slowed down decisions.

During the initial weeks of the response, some particular problems were faced in Roxas, where logistics needs were underestimated and the office struggled to cope with incoming supplies. The problem was solved only once two logisticians were finally deployed on surge.

With the application of the 'no regrets' approach, one would have expected some evidence of overordering. The RTE investigated this aspect, but no major problems were identified. Such cases as were found arose in part because some of the supplies were ordered in the context of the initial phase of the crisis, when tackling critical risks and immediate perceived needs was paramount. For example, therapeutic food was ordered for an expected 12,000 SAM cases, a figure that was drastically revised downward later on; some temporary shelters for staff and cholera kits ordered in light of possible outbreaks were never utilised.

4.5 Communication and Fundraising

The UNICEF response was made possible in large part thanks to an extraordinary fundraising effort by National Committees. The unrestricted private funds raised constituted an unprecedented 70 per cent of total funding for the response, the remainder coming from public sources (governmental donors), contributing to a total of US\$ 160 million. While some of this can be attributed to the generosity of expatriate Filipino communities around the world, it also reflects the relative responsiveness of the general public to situations in which ordinary people are affected by natural disaster, without the complicating political overlay of conflict, and where pictures and reports of their suffering pervade the news media for a time.

UNICEF made a significant contribution to the media coverage, in part because it was able to field a senior communication staff member at an early stage of the response. That said, some frustration was expressed by National Committees that UNICEF could not always meet key media requests in early days. Those consulted felt that there was a loss of opportunity for building UNICEF's profile as a result. This may be attributable in part to a lack of confidence and capacity among field staff to provide generic comments for the media in the early days of an emergency; and limited capacity of fundraising offices to use what limited information is available as a basis for handling media enquiries. A similar message was given by some in relation to the field programme, where the branding of UNICEF's response was said to be slow and inconsistent. As noted above, working through partners meant that UNICEF's connection with a given intervention was sometimes lost.

The overall conclusion reached by the RTE is that UNICEF's fundraising effort was highly successful, although its communication did not always keep pace. The challenge of organizing National Committee and ambassador visits was mainly well negotiated, and there was good reported collaboration between PARMO in New York, PFP in Geneva and the National Committees. Some challenges were reported in the tracking and reporting of the use of funds raised. Here it is important to stress that the management and reporting on the use of unrestricted private funds should receive the same level of attention as it does in the case of funds from major institutional donors. That said, the 4MR was an excellent example of public communication, being a full and relatively frank account of what UNICEF had done and achieved with the funds raised. UNICEF could have been more explicit in explaining why some elements of the programme lagged behind others – often for understandable and largely unavoidable reasons.

5. CONCLUSIONS AND RECOMMENDATIONS

In this final section, we summarise the main conclusions of the previous sections and make recommendations for action by UNICEF, both with regard to the Philippines and more generally.

5.1 Overall Conclusions on the Haiyan Response

UNICEF's response to Typhoon Haiyan can only be fully understood in relation to the whole range of demands on the organization by other L3 responses that coincided with the period of the Haiyan response: in Syria and the surrounding region, in the Central African Republic and in South Sudan. Taken together with a number of L2 responses, on top of the core work of UNICEF's continuing country programmes, this represents a formidable organisational challenge.

It is outside the remit of the RTE to consider how the Philippines response has impacted on UNICEF's continuing ability to meet all of the other demands it faces, but there is no doubt that it *has* impacted in a number of ways. This has perhaps been most evident in the demands of time on key staff and the deployment of some of UNICEF's most senior staff to support the Haiyan response. For many of the surge staff concerned, this has meant leaving their 'day jobs' unattended for considerable periods, potentially at the expense of even more pressing priorities. For the Philippines Country Office, of course, the effect has been most dramatic, with the re-assignment of roles and complete suspension of the country programme – including the on-going emergency response in Mindanao. Finding convergence between the typhoon response and the revived country programme poses its own challenges.

With regard to the Haiyan response itself, the RTE found much to commend. The response in key areas was timely, appropriate and well-targeted, and there was also a good deal of innovative practice and a number of positive examples from which to learn – for example, in the use of cash transfers and work with LGUs. Crucially, the work on urban water supply and immunisation appears to have had a significant impact in preventing excess mortality and morbidity in the wake of the typhoon – evidenced in the absence of major outbreaks of disease in spite of the risk factors associated with congested living conditions caused by displacement and loss of homes. Work on providing temporary learning spaces and restoring health and education infrastructure was also essential in the early recovery process.

Some aspects of the programme went less well. The provision of sanitation was slow and not always appropriate. Work on nutrition and child protection did not live up to UNICEF's expected standards. A significant factor in underperformance was that major delays occurred in most sectors in the signing of partnership agreements, limiting the speed of implementation. Overall coverage of the programme was limited at the four-month point, reflecting the difficulties of reaching beyond the urban areas and displaced centres to more remote rural locations.

The transition from a mainly relief-focused programme to one that is more recovery-focused has proved difficult for UNICEF. This is partly because it struggled to define a coherent role for itself in the recovery phase, although it now appears to have found a clear theme in helping restore basic services and critical infrastructure (water and sanitation, health facilities, schools) in a way that helps future-proof them against recurrent shocks. The other main challenge in the transition was the changeover of staff and management with the withdrawal of the IRT and initial surge teams. While some hiatus may be inevitable in any such process, there has been a distinct sense of organisational 'drift' around the transition and a consequent loss of momentum. The arrival of the new Representative should help redress this.

UNICEF devoted significant time and resources to fulfilling its cluster co-leadership role. Senior staff were deployed from the Global Clusters, and the result in the initial stages of the response was generally

strong leadership performance in the relevant clusters – as reflected in the survey conducted for this RTE. As time went on and the original deployments came to an end, performance became rather more variable. There was uncertainty concerning responsibilities and reporting lines for cluster staff who were given little guidance from UNICEF managers.

With regard to coordination with other international actors, UNICEF worked well enough with other United Nations agencies (WFP, WHO), but coordination through the HCT was problematic – for reasons largely beyond UNICEF's control. Work with INGOs was generally satisfactory, although hampered by the length of time taken to negotiate PCAs.

With the government, UNICEF built well on existing working relations with central government departments, and took the bold step of concluding MoUs with 40 LGUs in the areas affected where it had not previously worked. While these have yet to prove their worth, the RTE team believes this was an appropriate step and provides a good potential platform for locally-grounded and politically accountable recovery work. UNICEF's work with government authorities in particular points the way to a potential new, less operational and more supportive role for UNICEF in future major emergencies in the Philippines. As recommended below, this should be one of the aims of joint preparedness work with government over the coming years.

UNICEF's processes and management structures generally served it well. The L3 CEAP and SSOPs proved their worth, considerably simplifying and accelerating steps that have in the past taken longer to achieve. The main issues concern the deployment of the full IRT plus major surge capacity and the problems encountered with integrating this team with existing capacities in country. Such integration did not happen in this case – the IRT/surge team in Tacloban became in effect the implementing wing of UNICEF's Haiyan response. Some recommendations are made below to better allow synergy between surge and CO capacities in future deployments of this kind.

In making the recommendations below, we are conscious that whatever is recommended must make sense in relation to preparedness and response for crises that only reach Level 1 or Level 2, since these are the types more frequently encountered in the Philippines. The recommendations should be considered in this light. We note however that the likelihood of another L3 emergency – whether relating to natural hazards or conflict – occurring in the medium or longer term is high, and that the risk is arguably increasing with the effects of climate change. UNICEF should be prepared accordingly.

5.2 Specific Conclusions and Recommendations

Notes: (i) Some of the actions recommended below are already being acted upon, particularly at the PCO level. They are nevertheless recorded here to fully reflect the findings of the RTE. (ii) A few of the more detailed technical recommendations in the text are not repeated here.

1. Preparedness

Overall conclusion: UNICEF was not prepared for an event on this scale. This is understandable in terms of 'hardware', but the 'software' (including specialist staffing and pre-agreements with government and others) could have been stronger.

The preparedness and risk reduction agenda in Philippines should now be a priority focus for the country programme. We suggest an 18-month uplift plan on preparedness with clearly defined milestones and an emphasis on re-aligning the response role of UNICEF in relation to government. This should be done in collaboration with other actors, including United Nations agencies and INGOs.

Philippines-specific recommendations [PCO, EAPRO]:

- UNICEF should consider entering pre-crisis joint response agreements in key sectors with government at national and provincial level, particularly with the ministries with which it has existing relations. This should include provision of technical support as appropriate to government bodies at all levels in UNICEF's areas of specific competence.
- 2) With its cluster partners, UNICEF should take part in (and help lead as appropriate) the National Emergency Preparedness simulation exercise, and should further support preparedness planning in the communities at risk.
- 3) The existing DRR strategy should be reviewed in the light of Haiyan and UNICEF should contribute to a major awareness campaign (in partnership with government and others) among vulnerable communities concerning risk – particularly storm surge – and avoidance options. This should be done within the framework of the government's NDRRMP.
- 4) UNICEF should help sponsor (through the HCT) a collective reflection on these lessons and their implications for future working relations between government and international community.
- 5) All sections (programme, plus others like ICT) should be made accountable to establish and maintain suitable contingency stock levels.
- 6) Focal points for emergency preparedness and response, with clear accountabilities, work-plans and targets, should be put in place in all programme sections. In education, nutrition, WASH and child protection, these staff should have cluster coordination capacity and responsibilities, and established links with key governmental counterparts – noting that the clusters have a role not just in emergency response but also in enhancing disaster preparedness and capacity for risk mitigation.

General recommendations for UNICEF:

 Managers and their teams in the most crisis-prone countries should be trained on the application of L3 CEAP and the related SSOPs, including administrative and financial.
 – COs, ROs, EMOPS

2. Needs assessment

Overall conclusion: While UNICEF's immediate post-typhoon response was well enough supported by *ad hoc* assessments and consultations, use of proxy indicators of need and lessons from previous experience, the lack of a formal needs assessment process was felt at later stages of the programme.

UNICEF needs to be clearer on its assessment process in relation to rapid-onset disasters. The MIRA process does not appear to meet organisational needs. In particular, the transition from relief to recovery demands a more formal process of assessment. UNICEF should also seek to be more consistently involved with the PDNA process.

General recommendations for UNICEF:

- Review first and second phase assessment process, in collaboration with the relevant clusters, and consider a more active role for UNICEF in both.
 – EMOPS, PD, Global Clusters
- 2) Advocate at IASC level for a more effective MIRA process, driven by needs of operational agencies and their donors.
 - EMOPS

 Review global role of UNICEF in PDNAs in consultation with UNDP/World Bank and disseminate guidance to emergency-prone countries.
 – PD.

3. Strategy and planning

Overall conclusion: UNICEF's Haiyan response was based on a clear SRP, but the process of designing it and harmonising with the United Nations SRP was not optimal. Nor was the strategy harmonised with the government's own recovery plan. The strategy was not refreshed over time, and lacked a true advocacy (as distinct from communication) component.

General recommendations for UNICEF:

- UNICEF should review its SRP process in relation to the related United Nations-wide process, and advocate at the IASC level for a more streamlined process for the latter.
 – EMOPS
- 2) In any event of this scale (L3), UNICEF should define for itself a rolling influencing and advocacy agenda and strategy, as is envisaged in the L3 SSOPs. This should be backed up with clear guidance (position papers) on recurring issues such as child trafficking and the use of powdered milk for infant feeding. This advocacy should be done at the highest level of government, in the framework of heightened preparedness collaboration with government ministries. COs, ROs, EMOPS, PD
- UNICEF should review the SSOP timeframe for formulating its response plan, to allow better harmonisation with other processes.
 – EMOPS, PD

4. Sectoral responses and programme support

Overall conclusion: Performance was variable across the various sectors in which UNICEF intervened, suggesting the need for more consistent performance management across the sectors. The time taken to conclude PCAs is one indicator of this. Greater synergy should be achievable between sectoral responses through joint planning and harmonised targeting. In particular, as the use of cash transfers in emergencies continues to grow – and to cut across the sectoral approach – UNICEF should consider how best to reflect this in its programme activities and cluster coordination.

Philippines-specific recommendations [PCO, EAPRO]:

- UNICEF should invest in providing technical assistance to the LGUs with which it partners, on project management, strategic planning for DRR and preparedness, aid management, and setting up accountability mechanisms that strengthens civil society engagement and local ownership.
- 2) The PCO should strengthen its child protection and GBV in emergency response, including developing an overall CO strategy for addressing GBV in emergencies, and embedding cross-cutting vulnerability factors in its DRR agenda.
- 3) The PCO should consider drawing up a protocol for cash-based interventions in natural disasters in the Philippines using the experience gained from the Haiyan response in order to allow for swifter responses to future disasters.

General recommendations for UNICEF:

- 4) Consider simplified metrics for performance management of sectoral performance in the context of emergency response, including (for example) percentage coverage achieved within 1, 3 and 6 months of response, and average time taken to conclude PCAs.
 EMOPS (Policy), PD
- To avoid 'silo-ed' sectoral responses, review process and tools for joint planning and targeting.
 PD, Global Clusters
- 6) In appropriate circumstances (as in this case), UNICEF should consider the earlier and more widespread use of cash transfers in its areas of operation and should provide appropriate guidance to country offices on assessment, design and management, drawing on the Haiyan experience.
 - EMOPS
- Ensure that all the relevant staff (including programme staff) understand how to use VISION for supply orders, and that responsibilities for documenting orders are understood.
 – COs, ROs, IRT/surge staff.

5. Communication with communities

Overall conclusion: UNICEF relies too heavily on its implementing partners to ensure that the process of communication with affected communities works well. UNICEF should take steps to ensure that its identity and values are communicated to the communities it is working with (directly or through partners), and that transparency is maintained about both the planned and actual delivery of goods and services. Clear feedback and complaints mechanisms are a minimum requirement.

Philippines-specific recommendations [PCO]:

- Establish clear feedback and complaints procedures for UNICEF aid recipients, and enable feedback to be provided through the cluster coordination system for those clusters and AORs for which UNICEF shares responsibility.
- 2) A strong UNICEF communication and visibility component should be written into agreements with implementing partners.
- UNICEF should explore an expanded range of communication tools, including use of public boards and solar powered radios, and make use of existing community-based information systems.
- 4) Messages need to be more nuanced according to variations across regions, LGUs, and even Barangays. A more targeted communication strategy, especially with coastal communities and low-lying vulnerable areas, could be linked to strategic medium-range DRR objectives.

6. Partnerships

Overall conclusion: UNICEF is heavily reliant on a relatively small group of international NGOs to provide the implementing capacity for its programmes. The capacity of these organisations to implement on UNICEF's behalf is a critical variable in the response, and in the Philippines case it proved insufficient in certain areas. Just as UNICEF needs to work more closely with government, so too it needs to broaden its partner base in contexts like the Philippines.

Philippines-specific recommendation [PCO, EAPRO]:

- UNICEF should review its reliance on INGO partners in contexts like Philippines and seek to broaden its partner base over time, in particular by forging agreements with more local NGOs. This may demand some capacity-building investment.
- 2) In seeking to reach pre-crisis collaborative agreements with relevant government departments (see above under 'Preparedness'), UNICEF should consider working with the Office of Civil Defence. It should also consider partnerships with relevant private sector (commercial) actors.

General recommendations for UNICEF:

- UNICEF should review its PCA process in emergencies, ensuring that where authority to conclude PCAs is delegated to the field that it is not held up at the CO level. It should also ensure that existing PCAs have (where appropriate) emergency clauses built into them, such that they can be rapidly re-directed towards crisis response as necessary. – COs, ROs, EMOPS, PD
- Guidance should be provided to enable the use of interim forms of partnership agreement (such as letters of agreement) in L3 situations, to be reflected in the L3 SSOPs during the next revision.
 - EMOPS, PD
- Globally, UNICEF should look at best practices in simplified agreements and formalise the use of simplified PCA simpler formats in all emergencies, linking them to the SSOPs. – EMOPS, PD

7. Monitoring and reporting

Overall conclusion: The setting up of parallel monitoring systems indicated a lack of common understanding about good monitoring and reporting practice in major emergency responses. UNICEF must ensure that country-level monitoring and reporting systems can generate the minimum required data to inform real-time operational decision making as well as fulfilling accountability requirements. The PCO system is a good model in many ways, but needs some adjustment to deliver this.

Philippines-specific recommendation [PCO, EAPRO]:

1) Review the design of the HPMIS in light of the Haiyan response in coordination with programme staff, and revise to ensure operational relevance.

General recommendation for UNICEF:

- In light of the Philippines experience, review monitoring systems in other most crisis-prone countries to ensure compatibility with global MoRES in humanitarian performance monitoring (HPM) requirements.
 - EMOPS, ROs

8. Cluster (co-)lead role

Overall conclusion: Some confusion appears to exist as to the nature and scope of the 'co-lead' role. Agreement needs to be reached at national and sub-national levels concerning the respective roles of government and UNICEF in this regard, and mutual responsibilities defined. More generally, work needs to be done to raise the awareness of government at these levels concerning the cluster coordination agenda.

Philippines-specific recommendation [PCO]:

 As part of the preparedness discussions recommended above, UNICEF should use the opportunity of reflection on the Haiyan response to have a dialogue with national and subnational counterparts concerning their respective sector coordination roles in emergencies.

General recommendations for UNICEF:

- 2) UNICEF should review the management and accountability arrangements between managers and cluster staff deployed to emergencies. In particular, the cluster supervisory roles of senior Global Cluster staff – including inter-cluster staff – and Senior Managers in the COs should be clarified to ensure smoother transitions and continuity at the end of senior Global Cluster staff missions.
 - EMOPS, Global Clusters
- Establish as standard the good practice of having internal inter-cluster coordination and information management capacity for L3 emergencies.
 – EMOPS, HR
 - EMOPS, HR

9. L3 procedures, the IRT and surge deployments

Overall conclusion: UNICEF should review its L3 procedures in the light of the Philippines experience. While in most respects they proved well suited to the Philippines context, further guidance on their application is needed in some areas – in particular with regard to the IRT and surge deployments and their 'fit' with existing CO staff capacity. L3 surge deployments generally need to be better tailored to the specific crisis context; as does the application of the L3 protocols more generally.

General recommendations for UNICEF:

- Provide guidance on application of L3 protocols in middle-income country contexts and consider modified application in such contexts, particularly where response cooperation agreements are reached with government.
 - EMOPS
- Review protocols and practice relating to IRT and surge deployments, to ensure better 'fit' with existing CO capacities. Those elements of the IRT, surge and standby partner training concerning cultural context, sensitivities and UNICEF ways of working should be reviewed and strengthened as necessary.
 – EMOPS, HR
- 3) UNICEF should review the use of the step aside option in the SSOPs and consider making it default option in L3 cases. It should also consider re-formulating this option to allow limited and temporary transfer of powers to a crisis response manager at country level, and re-naming the option accordingly.
 - EMOPS, senior managers
- 4) Ensure that the terms of reference and reporting lines of all those deployed on surge are ready and clear by day-one of their mission. Up-to-date organograms including surge staff should be maintained throughout the emergency and disseminated regularly. The L3 SSOPs should clarify how this is to be done.
 - EMOPS, HR
- The well-being of frontline emergency response staff, particularly those on surge deployment, should be given higher priority by UNICEF – as set out in the 'Lessons from Yolanda' document.
 - HR, EMOPS, senior managers

10. Management of transitions

Overall conclusion: The lack of clarity and loss of momentum around the 'transition' point of the UNICEF response (around 3-4 months in) was striking. The successive changes in management at CO level were an important factor in this, as was the withdrawal of the initial IRT and surge teams – and the lack of connection noted above between these team and the CO staff. In retrospect, the *de facto* suspension of the country programme appears a mistake – although the focus on Haiyan made partnership work hard to continue. UNICEF should reflect on the Philippines experience and take steps in future to 'smooth' such transitions to ensure that clarity of purpose and direction is maintained.

General recommendations for UNICEF:

- In responding to L3 emergencies, suspend on-going programme activities in country only where it is inevitable or necessary to do so for the sake of the emergency response. Some continuity of programme allows for more successful transition to recovery post-disaster. – COs, ROs, senior managers
- Make it a corporate priority to avoid gaps in continuity of senior management at the CO level in any L3 emergency, including over the period of transition to L2 or otherwise.
 – EMOPS, HR, senior managers
- 3) Plan the main 'recovery' elements of the programme as a coherent package, based on a reassessment of needs and discussion with partners, and produce a recovery plan by the threemonth mark as a detailed sub-component of the SRP.

- EMOPS, senior managers

EVALUATION REPORT

REAL-TIME EVALUATION OF UNICEF'S HUMANITARIAN RESPONSE TO TYPHOON HAIYAN IN THE PHILIPPINES

ANNEXES

EVALUATION OFFICE JULY 2014





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ANNEXES

EVALUATION OFFICE JULY 2014

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Real-Time Evaluation of UNICEF's Humanitarian Response to the Typhoon Haiyan in the Philippines - Annexes

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July 2014

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ANNEX 1: TERMS OF REFERENCE

UNICEF Evaluation Office

Real-time Evaluation of UNICEF's Humanitarian Response to Typhoon Haiyan in the Philippines

1. INTERVENTION BACKGROUND

On 8 November 2013, category 5 Typhoon Haiyan struck 36 provinces of the Philippines, a densely populated country of 92 million people. Haiyan is possibly the most powerful storm ever recorded in history, and it came weeks after the Bohol earthquake on 15 October that hit some of the same provinces and about a year after Typhoon Bopha. An estimated 14.1 million people in nine regions are affected and more than 3.9 million people have been displaced. About 6,000 people have been killed and many more injured. UNICEF estimates that more than 5 million children are affected and vulnerable to disease and protection risks, including 1.6 million displaced children. Normal provision of basic services, including food, drinking water and healthcare, has been disrupted. Children and youth are at risks of gender-based violence and trafficking, and exposure to abuse, exploitation and violence is likely to be amplified, with marginalized populations particularly vulnerable. The impact of the Typhoon is likely to affect children's psychosocial well-being, particularly for those at risk of prolonged displacement. Education of millions of children has been interrupted due to schools being severely damaged or used as shelter in the aftermath of the Typhoon. Prior to the disaster poverty and malnutrition rates were already higher than the national average. The country has also been responding to the protracted conflict in Mindanao.

As part of the inter-agency Typhoon Haiyan Strategic Response Plan¹, the UNICEF Philippines Country Office (PCO) is responding to the disaster in collaboration with partners including the Government's National Disaster Risk Reduction and Management Council and local authorities. UNICEF PCO is prioritizing interventions in water, sanitation and hygiene (WASH), child protection, health, education and nutrition. In addition, UNICEF is also supporting national coordination mechanisms as cluster lead agency (CLA) for WASH, education, nutrition and the child protection area of responsibility (AOR). In support of the Government-led response, UNICEF's funding requirements amount to US\$ 96.4 million to support children and women affected across the Philippines by Typhoon Haiyan, Bohol Earthquake and the Mindanao conflict through May 2014.²

Given the scale, urgency and complexity of the crisis, UNICEF has activated its Corporate Emergency Activation Procedure (CEAP) and the Simplified Standard Operating Procedures (SSOPs) for Level 3 emergencies to support the PCO on 11 November. The Director of the Office of Emergency Programmes (EMOPS), in a first phase, and then the Director of the Regional Office, in a second phase, has been appointed as Global Emergency Coordinator (GEC), responsible for overseeing and coordinating the mobilization of support from HQ and the Regional Office for a period of three months.

¹ OCHA (Office for the Coordination of Humanitarian Affairs), Philippines: Strategic Response Plan for Typhoon Haiyan (November 2013 - November 2014), United Nations, November 2013.

² UNICEF, Philippines: Humanitarian Action for Children, UNICEF, November 2013.

In consonance with the CEAP and the SSOPs for Level 3, UNICEF wishes to conduct a Real-time Evaluation (RTE) of UNICEF's response to the Typhoon. As the situation was declared a Level 3 emergency, the evaluation will assess UNICEF's response at all levels: at HQ, at the Regional Office and in country. The RTE seeks to assess (1) UNICEF's progress in achieving results in the initial phase of the response and in transitioning to early recovery, and (2) the implementation of the CEAP and the SSOPs for Level 3 in supporting the response from HQ and the Regional Office.

2. PURPOSE AND OBJECTIVES

The purpose of the RTE is a formative and forward-looking one to help improve the effectiveness and quality of UNICEF's response to the Typhoon Haiyan and learn lessons for application in future emergencies, where appropriate. It will also entail a summative component, reviewing plans and performance to date, in order to provide impartial evidence on how UNICEF has been responding in the initial phase of the emergency. By drawing lessons now, the RTE will provide UNICEF with real-time and practical recommendations to facilitate operational improvements to strengthen the response and the transition to early recovery. In addition, the evaluation will examine the implementation of the CEAP and the SSOPs for Level 3 in supporting the response from HQ and the Regional Office to achieve better results for the affected population, and most especially children and youth. The evaluation will also consider how far lessons learned from previous urban disasters have been applied in implementation of the current response, and it will help draw lessons with regard to working in partnership with national and local authorities in middle-income countries.

At the country level, the RTE will help UNICEF consider which aspects of UNICEF's response to the Typhoon have been working well, which aspects have been working less well, and why, in terms of the specific objectives of the Strategic Response Plan and in relation to established benchmarks – such as the Core Commitments to Children (CCCs), and existing guidelines and standards. The RTE will also consider how well the response has addressed issues of accountability to the affected population.

UNICEF does not work in isolation in the Philippines. The evidence and analysis provided by this RTE will also inform UNICEF's partners in national/local government, as well as the members of the clusters or areas of responsibility (AOR) where UNICEF serves as cluster lead agency (CLA).

At the regional and global level, the RTE is intended to inform any further development of UNICEF's CEAP and the SSOPs to support the response to Level 3 corporate emergencies.

The RTE, overall, will have a strong utilisation focus. The main users of the evaluation will be UNICEF PCO, the Regional Office management, the Global Emergency Coordinator (GEC), and Divisions and Offices in HQ. Other users of this RTE include: co- lead agencies, cluster partners, and other partners in the Philippines (e.g., National Disaster Risk Reduction and Management Council and local authorities) participating in the response.

3. SCOPE

The main focus of the RTE will be on UNICEF's progress in achieving results in the initial phase of the response to the Typhoon and in the transition to early recovery, in the wake of the declaration of the Level 3 corporate emergency. At the country level, the RTE will examine narrowly the relevance, appropriateness, efficiency, effectiveness, coverage and coordination of UNICEF programmatic³ and

³ For instance: Performance monitoring, M&E, Nutrition, Health, WASH, Child protection, Education, Supply and logistics.

operational⁴ responses in meeting the CCCs. The scope of the RTE will include assessment of the clusters' performance in enhancing coordination and UNICEF's performance as a partner in fulfilling its CLA role. The evaluation will also include consideration of ongoing responses to support children and women affected by the Bohol Earthquake and the Mindanao conflict, and how these affect the Typhoon Haiyan response. At the regional and global level, the RTE will look at the HQ response, and the role of the Regional Office, and whether the CEAP and the SSOPs for Level 3 emergencies have worked effectively.

The period under review will cover UNICEF's response from November 2013 to February 2014, assessing the initial phase of the response and the transition to early recovery. In addition, the RTE will explore issues of preparedness and early warning mechanisms prior to the Typhoon. There are valuable opportunities for lesson learning not only in view of the exceptional the level of devastation of the infrastructure, but also with regard to the relatively high level of national and local capacity in a middle-income country and potential sources of resilience.

The RTE will not preclude more comprehensive evaluation of the response later in 2014 to assess in depth results achieved (or not achieved) at the sector level during the emergency response. It will also inform proposals for an Inter-Agency Humanitarian Evaluation (IAHE) of the response and recovery.

4. EVALUATION QUESTIONS

The evaluation questions below, based on the OECD/DAC criteria and other criteria specific to evaluation of humanitarian action, represent a provisional list of questions to be refined by the Evaluation Team in the scoping and inception phase of the evaluation process. The questions will be tailored to the initial phase of the response and the transition to early recovery, and examine the role of the PCO, the Regional Office and HQ in the response. These include:

- Relevance/Appropriateness: How appropriate is the UNICEF's response as a whole, and what programmatic and operational results did it produce in the initial phase of the response and in the transition to early recovery? How closely aligned is the UNICEF's response plan with the interagency Typhoon Haiyan Strategic Response Plan, and with the Government's National Disaster Risk Reduction and Management Council wider response plan? How closely aligned is the conduct of UNICEF's programmatic and operational responses with key sources of guidance and normative standards, including the CCCs? In what ways has the affected population been involved in the design, implementation and monitoring of UNICEF's response? To what degree have gender, disability and ethnicity issues been addressed? How appropriate and consistent is the support provided by UNICEF's HQ and the Regional Office in meeting the needs of the PCO?
- Efficiency: How well have UNICEF's resources, both human and financial, been managed to ensure the most timely, cost-effective and efficient response to the Typhoon? How quickly was the CEAP activated, and how clearly have the SSOPs for Level 3 been communicated at various levels of the organization? To what extent has investment in preparedness prior to the Typhoon resulted in a more timely, cost- effective and efficient response? To what extent have innovative or alternative modes of delivering on the response been explored and exploited to reduce costs and maximize results? What has constrained the efficiency of the response?

⁴ Media and communications, Security, Human resources, Resource mobilization, Finance and administration, Information and communication technology.

- Effectiveness: How successful has UNICEF been in delivering results vis-à-vis its programmatic and operational commitments in the initial phase of the response and in easing the transition to early recovery? How well has organization-wide mobilization under the CEAP and the SSOPs for Level 3 supported UNICEF's response in the Philippines?
- **Coverage:** To what extent has the affected population been properly targeted and reached by UNICEF and its partners? How successful has UNICEF been in reaching the most vulnerable groups in the most affected geographic areas? Have data been disaggregated by sex, age, disability status, and ethnicity? To what extent has an equity-based approach contributed to better results for children and young people?
- **Coordination:** How effectively and efficiently has UNICEF fulfilled its cluster leadership obligations? How effectively has UNICEF coordinated its response with other key actors in the initial phase of the response and in the transition to early recovery? How effective, efficient and timely has coordination between the Immediate Response Team, the PCO, the Regional Office and HQ been, in light of the Level 3 requirements?
- **Monitoring and reporting:** To what extent has monitoring and reporting met UNICEF's needs at each level of the organization, and the needs of UNICEF's partners and stakeholders? How far has monitoring and reporting been undertaken efficiently and effectively and in turn how far has it contributed to the efficiency and effectiveness of the various aspects of the response?

5. METHODOLOGY AND APPROACH

In order to help UNICEF gather as much insight as possible with a light footprint on the PCO and UNICEF's partners, the RTE will follow a phased approach, which also allows time for reflection and realtime feedback. The RTE will be participatory in its approach, so as to ensure ownership and promote interaction with, and feedback from, the UNICEF response team in country, personnel in the Regional Office and HQ, and from UNICEF's partners. In keeping with the IASC Transformative Agenda, the RTE will make special efforts to consult the affected population, notably children and youth, to help inform the on-going response, and promote accountability. In the same way, it is essential that the RTE process is rigorous and evidence-based. It will employ mixed-methods to triangulate qualitative and quantitative data and reach findings and conclusions in each phase, as outlined below.

Phase 1: Scoping and Inception Phase (February 2014) – During the first phase of the RTE, the Evaluation Team will conduct a rapid desk review of key qualitative and quantitative data and critical information coming in from the PCO, the Regional Office and HQ, coupled with interviews with key informants. UNICEF will provide the Evaluation Team with all relevant documentation and information, namely: Situation Reports (SitReps), needs assessment reports, key messages, timelines of key decisions and main contact lists of key informants in the PCO, the Regional Office and HQ. Documents, data and other inputs from other agencies will be actively sought. Data collection will entail a scoping mission to the Philippines to interview key informants and triangulate the information obtained. Visits to NYHQ and UNICEF's Regional Office in Bangkok will also be undertaken for briefing and data collection, supplemented by telephone interviews to relevant staff in Copenhagen (Supply Division) and Geneva (EMOPS, PFP). These methods will establish a clear chronology and a broad overview of the initial response to the Typhoon, as well as a framework on priority issues and questions for further examination. The main output of the scoping and inception phase will be an Inception Report, to be approved by the Evaluation Office in consultation with the Reference Groups (see section on Management and Governance Arrangements below)

Phase 2: Structured Field Work and Feedback Phase (March 2014) – In the second phase of the RTE, the evaluation will employ a mixed-method approach entailing triangulation of qualitative and quantitative methods to put together a comprehensive and credible evidence base to assess UNICEF's response to the Typhoon at the global, regional and country levels. It is expected that the evaluation will use the following methods to provide an assessment and real-time feedback examining those issues more relevant during the initial phase of the response, their causes, and potential solutions, including at minimum:

- Key informant interviews and focus group discussions: The Evaluation Team is expected to interview or conduct focus groups with key informants in person or by telephone or Skype. Key stakeholders will include, but not limited to, UNICEF staff in the PCO, Regional Office and HQ, Immediate Response Team (IRT) members, cluster members and partners, national and subnational authorities, donors, and affected population (including children and youth).
- Direct observation: The Evaluation Team will prioritize field visits to observe the UNICEF's response in the Philippines directly and conduct interviews with affected populations to determine their view of UNICEF's programmatic and operational responses. The team will participate in Emergency Management Team meetings at the global level to inform the analysis on how HQ and the Regional Office support the response. In addition, it will also develop and use tools to record and compare observations.
- Formal desk review: In addition to rapidly review data in the scoping and inception phase, the Evaluation Team will conduct a systematic desk review of documents, data and other inputs. The Evaluation Team will use data collection tools to code or organize the information.

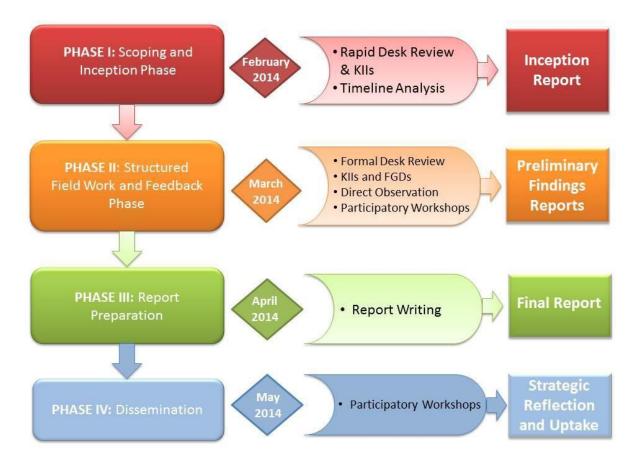
In this period, the team will conduct an extended data collection mission to the Philippines to look at the initial relief and time critical programmatic and operational responses, and at the transition to early recovery. Stop-over visits to the UNICEF Regional Office in Bangkok and HQ in New York will be made to provide briefing on emerging results, and to gather further primary information regarding efforts at the regional and global levels. Telephone interviews will cover the involvement of UNICEF offices in Copenhagen and Geneva. The main outputs will be public debriefing sessions at the country, regional and global levels, in the form of participatory workshops, to allow feedback findings on a real-time basis and further validation of emerging findings and conclusions. A short report on emerging findings will be prepared at the end of the mission to promote positive change in real-time.

Phase 3: Report Preparation Phase (April 2014) – This phase of the RTE will include the preparation of a final report, based on an impartial analysis of the information gathered in Phase 1 and 2 that provides a comprehensive assessment of the UNICEF's global response to the Typhoon in order to draw conclusions and SMART recommendations. The final report shall contain a short executive summary of no more than 2,000 words and a main text of no more than 12,000 words (plus Annexes).

Phase 4: Dissemination (May 2014) – In line with the PCO's wish to ensure maximum utilization of the evaluation results, a final visit to the Philippines will be scheduled to communicate the findings, conclusions and recommendations of the evaluation, and to facilitate strategic reflection on response and uptake of useful lessons and recommendations. A series of well-facilitated participatory workshops would be conducted with the PCO and UNICEF's key partners.

This multi-phased approach is conveyed graphically in Figure 1 below.

Figure 1 – Multi-Phased Approach



6. MANAGEMENT AND GOVERNANCE ARRANGEMENTS

In keeping with the corporate nature of the UNICEF's response, the Evaluation Office will manage the RTE, in close collaboration with the PCO, EMOPS, other HQ Divisions concerned and the Regional Office. An Evaluation Manager will lead the process, under the guidance of the Evaluation Office Director. The Evaluation Office will commission a team of external consultants to undertake the evaluation, and provide overall management of the evaluation process. At the country level, the PCO PME Chief will provide day-to-day management and facilitation of the evaluation process in-country, including day-to day oversight of the consultant evaluation team.

Two Reference Groups will be established, one at the country level and one at the global/regional level, to strengthen the relevance, accuracy and hence credibility and utility of the evaluation. The Reference Groups will serve in an advisory capacity, their main responsibility being to review and comment on the main evaluation outputs (i.e., this TOR, the Inception Report, reports on emerging findings and the Draft and Final Reports). At the country level, members of the Reference Group will include programme section Chiefs and UNICEF's cluster partners. At the global/regional level, a Global Reference Group, chaired by the GEC, will be established with membership composed of members of the (global/regional) Emergency Management Team (EMT). A TOR outlining the roles and responsibilities of the Reference Groups will be developed separately.

UNICEF partners will be kept informed of the RTE's progress on a regular basis. They will be invited to the participatory workshops and consulted on the evaluation outputs. A UNICEF Team Site will be set up for the RTE to post regular updates, promote collaboration and ensure transparency.

7. DELIVERABLES AND TIMEFRAME

The Evaluation Team will generate the following major outputs that will be reviewed by the Evaluation Office and the two Reference Groups, and approved by the Evaluation Office before wider dissemination. These include:

- An Inception Report of maximum 8,000 words (not including annexes). The Inception Report
 is intended to outline the team understanding of UNICEF's response to the Typhon Haiyan at the
 country, regional and global levels. It will include a clear chronology and a broad overview of the
 initial response to the Typhoon as well as a framework on priority issues and questions for further
 examination. It will also include a data collection took-kit (i.e., interview guides, focus group
 discussion guides, direct observation forms, questionnaires for consultations with affected
 populations, and so on) to be used in the course of the RTE;
- **Power-point Presentations** that will be used by the Evaluation Team to present the preliminary findings in a set of participatory workshops;
- **Preliminary Findings Reports** of maximum 4,000 words at the end the data collection mission to promote positive change in real-time;
- A Draft RTE Report that outlines clear evidence-based findings, conclusions and SMART recommendations, with a clear Executive Summary, for consideration by the two evaluation Reference Groups;
- A Final RTE Report of no more than 12,000 words (plus Annexes), with a clear Executive Summary of no more than 2,000 words. This will incorporate responses to the comments of the two Reference Groups.

Given the focus on the initial phase of the response and the transition to early recovery, the RTE will be undertaken over four months from February 2014 to May 2014, as laid out in Figure 2.

Step¤	End·Date¤
Finalize TOR (EO/PCO)¤	24 January 2014 🕅
Recruit-Evaluation-Team-(EO)¤	14 February 2014
$Commence \\ Step \\ 1 \cdot work, \\ including \\ data \\ collection \\ and \\ data \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ analysis \\ (Evaluation \\ Team) \\ x \in [n] \\ (Evaluation \\ Team) $	17 February 2014
Conduct inception mission to NYHQ, EAPRO and PCO (Evaluation Team)	17-28-February-2014¤
Submit·Step·1·outputs, including·Inception·Report·for·comment·and·data·collection· tool-kit-(Evaluation·Team)¤	3·March·2014¤
Commence-Step-2-work-(KIIS, FGDs)-on-initial-response-and-transition-to-early- recovery-(Evaluation-Team)¤	10 March 2014 ¤
Conduct data collection mission to NYHQ, EAPRO and PCO (Evaluation Team)	10-28·March·2014¤
Facilitate-participatory-workshops-(Evaluation-Team)¤	1-2-April¤
Submit Preliminary Findings Report (Evaluation Team) X	4 April 2014 x
Submit-first-Draft-RTE-Report-for-comment-(Evaluation-Team)¤	18 April 2014 🕸
Submit-second-Draft-RTE-Report-for-comment-(Evaluation-Team)¤	2.May.2014¤
Submit final RTE Report for management response and publication (EO/PCO)x	16·May-2014¤
$\label{eq:Facilitatedissemination, strategic} Facilitatedissemination, strategic reflection and uptake (Evaluation Team) \texttt{X}$	20-21-May-2014¤

Figure 2 – Indicative Timeline

8. EVALUATION TEAM

UNICEF will hire a team of external consultants to conduct the evaluation, comprising:

- a senior team leader with extensive evaluation experience in humanitarian approaches and programmes;
- a senior consultant familiar with UNICEF emergency operations, likely a former UNICEF staff member;
- a national consultant familiar with participatory methods and techniques to promote consultations with affected population; and
- an analyst capable of undertaking back-office analysis (e.g., desk review, analysis of timeline data, analysis of funding resources, etc.).

The team leader will work on the evaluation full time from start to finish, and in a timely and high-quality manner. S/He will be responsible for managing and leading the Evaluation Team, undertaking the data collection and analysis, conducting the participatory workshops, as well as report drafting and dissemination. The other team members will be responsible for carrying out data collection, analysis, and drafting elements of the report.

ANNEX 2: EVALUATION MATRIX

Evaluation questions	Sub-questions	Indicators/Data sources
1. What has been the qu	ality of UNICEF's programme response to Typhoon Haiyan?	
(i) (a)How well did the UNICEF first four months programme deliver judged against	Timeliness : Were the UNICEF programme elements (WASH, Health, Nutrition, Education, Child Protection and cash transfer) delivered in a timely way, judged against priority needs over time and against planned delivery schedules?	Interviews with staff and partners Implementation & PCA signature timelines Aid recipient and community stakeholder interviews
DAC evaluation criteria (+)	Coherence : Were the appropriate linkages made between WASH, Health, Nutrition, Education, Child Protection, cash and other components of the emergency response?	Interviews with staff and partners Review of UNICEF SRP
	Relevance and appropriateness: Were the WASH, Health, Nutrition, Education, Child Protection and cash interventions relevant to priority needs and appropriate in the context? Especially given the identified priorities for children.	Interviews with staff and partners UNICEF SRP and related assessments Monitoring reports Aid recipient and community interviews
	Effectiveness : Did the various programme elements (W, H, N, E, CP, cash) achieve their immediate objectives? Outputs and short-term outcomes? Differential impacts on children, women, others? To what extent has UNICEF achieved its strategic objectives after 4 months? Is it on track to achieve its medium term (9 month) and longer term (18 month) objectives?	Interviews with staff and partners SRP objectives, partner /UNICEF reporting Monitoring reports Aid recipient and community interviews
	Efficiency: Were the available financial resources put to best use (overall, and by programme element); or could the same ends have been achieved at less cost? Ditto for staff time and other resources?	Review of budgets (delivery costs etc.) Output/input ratios of programme elements Inter-sector/cross-sector comparison
	Coverage : Was the coverage achieved by the UNICEF programme elements (W, H, N, E, CP, cash) proportionate to the overall needs? Were significant groups / areas omitted in the programme areas?	Interviews with staff, government, partners UNICEF SRP and related assessments Monitoring reports Beneficiary and community interviews

Evaluation questions	Sub-questions	Indicators/Data sources
(i)(b) How well did the UNICEF programme	Coordination : How well did UNICEF coordinate its planning and activities with other actors (government, UN agencies, NGOs etc.)?	Interviews with partners Interviews with other government depts
deliver against key benchmarks?	Connectedness : How well did UNICEF's initial 'relief' response connect to medium-longer term recovery objectives? Overall and by programme element?	Interviews with staff, government, partners Review of UNICEF SRP and Country Strategy. Review of PCAs
	How well did the programme deliver against the CCCs? And against relevant UNICEF guidelines? Were UNICEF's sectoral interventions (W, H, N, E, CP, cash) compliant with Sphere and other best practice standards?	Interviews with staff Monitoring reports Interviews with staff (section chiefs etc.) Project plans and reporting CCCs, guidelines and standards
(ii) Emergency preparedness	How well prepared was UNICEF to respond (with others) to the emergency caused by Typhoon Haiyan? Did it have appropriate contingency plans of its own? Was it part of effective system-wide contingency planning? Did it have appropriate contingency stocks?	Interviews with staff Contingency plans Interviews with government, partners
(iii) Partnerships	How effective were the various forms of collaboration and partnership formed by UNICEF: with INGOs, local NGOs, central government bodies, LGUs? Could alternative partnerships have proved more effective? To what extent did UNICEF capitalise on existing partnerships?	Interviews with staff, government, partners Review of lessons from wider responses (OPR, other evaluations, etc.)
(iv) Strategy and needs analysis	How clear and coherent was the overall UNICEF programme strategy? How well was it connected to (i) the UN SPR, (ii) GoP strategy (RAY)? How well were the related planning and implementation processes coordinated (inter-agency, government)?	Review of UNICEF SRP Interviews with staff and partners (and particularly government counterparts)
	How clear and coherent were the sectoral strategies of UNICEF? Were they the right strategies?	Review of UNICEF SRP Interviews with staff, government, partners
	What was the quality of UNICEF's needs and situational analysis (overall, by sector) underpinning its plans? On what was it based (initial and on-going analysis)?	Review of needs analysis documentation (assessments etc.) and SRP Interviews with staff

Evaluation questions	Sub-questions	Indicators/Data sources
(v) Monitoring	How well did UNICEF monitoring systems work (strengths/ weaknesses)? Did they provide adequate understanding of (i) evolving context and (ii) the continued relevance and effectiveness of UNICEF's programme? How well were the HPM and existing PCO processes combined?	Review of monitoring reports and process documentation Interviews with staff and partners Interviews with independent monitors
(vi) Accountability and community engagement	How well did UNICEF and its partners engage with communities in relation to each programme element and more generally? <i>Criteria:</i> <i>consultation on priorities; transparency and communication about</i> <i>available assistance; involvement in programme design and</i> <i>implementation; response monitoring; feedback and complaints.</i> How well did UNICEF contribute to wider AAP efforts? How well did UNICEF engage directly with children to voice their priorities and needs? Link to C4D efforts of PCO?	Aid recipient and community interviews, focus group feedback, and other existing feedback Staff, government, partner interviews
(vii) Transition to recovery	How well was the programme adapted to the evolving priorities for (i) relief and (ii) recovery support? How well integrated were the relief-recovery elements? How clear is the transition strategy? How clear and appropriate is UNICEF's recovery strategy? Overall and by programme element.	Review of UNICEF SRP Review of mid-term revisions to plans Review of PCAs
(viii) Lessons learned from previous disaster responses	How well did UNICEF's response reflect the relevant lessons from recent evaluations of major emergency responses?	Review of key recent evaluations Interviews with staff and partners
	Specifically, how well did UNICEF's response reflect lessons concerning response to urban disasters (from Haiti etc.)?	As above
(ix) Advocacy	How well did UNICEF perform as an advocate for children in the Haiyan emergency? Did it have an advocacy strategy? With what positive outcomes?	Interviews with staff and partners SPR and monitoring reports. Advocacy and communications strategy
2. How strong has UNIC	EF's contribution been to the wider system response to Typhoon	Haiyan?
(i) Cluster lead role	How well did UNICEF perform its cluster lead role? Did the global cluster support team + surge capacity and standby partnerships work well? Did UNICEF offer sectoral leadership as well as coordination capacity?	Interviews with cluster support staff (in country and at Geneva level) Interviews with cluster members Survey of cluster members

Evaluation questions	Sub-questions	Indicators/Data sources
	Did UNICEF manage the relationship between its own programme partnerships and its cluster co-lead role appropriately? How well did UNICEF coordinate its own programme with others in the relevant clusters? How appropriate were the UNICEF management arrangements for cluster coordinators and other support staff?	Interviews with staff (programme, cluster) Interviews with cluster members Survey of cluster members
	Co-leadership: how well did UNICEF share its leadership role with co-leads (government, Save the Children)?	As above
(ii) Involvement with UNCT, HCT and joint	How well did UNICEF engage with HCT and other international- national forums?	Interviews with HC & other UN agencies Interviews with staff
processes	What was the quality of UNICEF's engagement in joint assessment processes?	Interviews with HC & OCHA Interviews with staff
(iii) Coordination and collaboration with	How well did UNICEF coordinate with relevant government bodies at the national (Manila) level?	Interviews with government officials Interviews with staff
government at national , provincial and local levels	How well did UNICEF coordinate with relevant government bodies at local levels (provincial, city/municipality, barangay)?	Interviews with government officials Interviews with staff Interviews with community stakeholders
3. How well did UNICEF	processes serve the response to Typhoon Haiyan?	
(i) L3: CEAP, SSOPs, GEC, etc.	Was it appropriate to invoke the L3 mechanisms in this case given the MIC context, UNICEF country and regional capacities, etc.?	Staff interviews at all levels (HQ, region, country) plus HC/OCHA
	How well adapted were the SSOPs and L3-related processes to such a context? How well did all staff – CO, Surge, EAPRO, HQ, Geneva and Copenhagen – understand the provisions of the SSOPs?	Staff interviews plus review of procedures
	How well were the CEAP and SSOPs implemented in practice? Were the SSOPs used appropriately? Did they deliver the intended benefits?	As above Review of operational decisions and timelines
	How appropriate was the 'no regrets' policy? E.g. regarding staff deployment, procurement? Was it implemented in an appropriate way? How well managed were the associated risks?	

Evaluation questions	Sub-questions	Indicators/Data sources
	How appropriate were the management arrangements in this case - as between New York, the regional and country offices? How well did they work in practice? How well did the EMT mechanism work?	Staff interviews at all levels
(ii) IRT and surge deployments	How well was the IRT deployment managed? How well did the IRT work alongside existing country staff? Were the capacities of each used to best effect? Did the IRT members fill real gaps in capacity?	Staff interviews at all levels (current staff plus selected former IRT)
	How well were the surge and standby partner deployments managed? How well did they work alongside existing country staff? Did they fill real gaps in capacity?	Staff interviews at all levels (current staff plus selected former surge)
(iii) Human Resources	How well were recruitments and staff deployments managed at HQ, regional and country levels? Was there a good understanding of the needs in the field? Were the deployments timely? Were the procedures appropriate in regards to the urgency of the situation? What was the quality/appropriateness of the staff deployed? Did they have a good understanding the context, the organisation, of the job? Was there an appropriate level of experience? What was the quality of staff support and staff welfare measures in	Review of timelines Staff interviews at all levels (current staff plus selected former IRT/surge) UNICEF staff lessons learned exercises
(iv) Supplies and logistics	country? How appropriate and timely was the supply component of the response? Were contingency stocks at country level available and useful? Was there any main and/or sector-specific bottleneck at either delivery or distribution level? How relevant and appropriate were the goods procured and distributed? How effective and appropriate was the use of contributions in kind?	Review of main supply statistics Interviews with Supply staff (surge and PCH) and programme staff. Interviews with aid recipients

Evaluation questions	Sub-questions	Indicators/Data sources
 (v) Other areas of operations: ICT, security, finance, 	How did other operations processes and sections adapt to and support the response? Were there bottleneck at any level? What caused them?	Operations and other staff interviews
administration, risk	How effectively did the VISION system serve the response?	
management	How good was the financial management of the response? Was the right balance struck between the need for control and the demands of timely and efficient programme delivery?	
	How well managed were the risks associated with a response of this kind (fiduciary and other)? Particularly given the combination of high proportion of unrestricted funding (=> 'soft' budgets?) and adoption of a 'no regrets' policy.	
(vi) Fundraising and communications	How well did UNICEF's fundraising efforts support the response? Were they well-coordinated at country, regional and HQ level? How well were they in turn served by communications?	Senior managers interviews in Manila, Bangkok and HQ Interviews with selected NatComs

ANNEX 3: HAIYAN RESPONSE TIMELINE

UNICEF Haiyan Response Timeline (5 Nov. 2013 to 10 Feb 2014)

Date	Key external events	Critical UNICEF interventions and decisions
8 Nov.	Haiyan Typhoon hits Philippines at 4:30 am	RD informs EMOPS Director of retention of EPF and potential re- purposing. EMOPS Director agrees in response. Rep sends first update to EMOPS and RD.
		First Deployment plans done in country. First request for additional surge after exchanges.
9 Nov.	138 people dead, 14 injured, 4 missing	UNICEF's first priorities are focused on life-saving interventions – getting essential medicines, nutrition, safe water and hygiene to children and families.
10 Nov.	10,000 people dead and 9.5 million affected	L2-L3: CO/RO analyse the five Emergency Level criteria in collaboration with EMOPS. The current situation is <i>defacto</i> considered as L2, and considerations for L3 will be made in next 24 hours.
		IASC meeting held. UNICEF CO relays requests for support from member states' militaries and review of sector prioritization and UN staff missions to Tacloban.
		UNICEF steps up emergency response.
		Draft OSM under development. Staff have already been mobilized from the region (e.g., Coms), Stand-by partners and HQ ERT. The CO requests that surge staff remain on board for at least three months to allow for some continuity. Urban water and sanitation SBPs on standby.
11 Nov.	9.8 million affected people	CERF to be requested. Agreement to set up hub offices in Tacroban, Roxas City, Cebu, and possibly Busuanga. WASH, health, food and shelter sectors prioritized in discussion with HCT and Government.
		Decision taken to activate L3 for 2 months, deploy the Immediate Response Team and appoint GEC.
		EMOPS internal meetings (plus DHR) to prepare for L3 CEAP issuance.
12 Nov.	OCHA SitRep	EMOPS Director establishes EMT and circulates EMT TOR.
	estimates 11.5 million people affected and 544,000 displaced	IASC declares system-wide Level 3 emergency. UNICEF supports DHC at D1-D2 level.
		US\$ 4 million EPF released to CO and US\$ 1 million to DHR.
		OSM circulated. Core IRT members identified and begin deploying. DHR holds coordination meeting to identify focal points, information management and coordination processes.
		EMOPS team assembles and sends package of L3 procedures, guidance and lessons learned to CO.

Date	Key external events	Critical UNICEF interventions and decisions
13 Nov.	Not enough aid reaching affected people due to logistical challenges	CO requests support around account closures/end of year closures. IRT team leader arrives, as well as HPM specialist and reports officer. ERT member deployed from Manila to Tacloban. Eight IP deployed to crisis, plus eight nationals. Three hub offices being established in Cebu, Tacloban and Roxas. CO distributes emergency organigrams. CO requests P4 security officer for Tacloban urgently. HQ to propose candidate immediately. DSS has surged two security officers. EMOPS humanitarian policy chief advises GEC on the use of military and civil defence assets.
14 Nov.	Political tensions between local and national authorities	EMOPS internal strategy meeting to advise GEC on humanitarian programme cycle, CivMil policy issues. Chief HPS provides simplified draft position on the use of military assets to GEC. EMOPS Director advises RO/CO on the status of the IRT deployment.
15 Nov.	4,460 people dead	PARMO shares resource mobilization plan with OED and EMOPS.
16 Nov.		UNICEF Response plan process and timeline shared with EMOPS.
17 Nov.	13 million people affected and 4 million displaced	On a request from the government UNICEF has taken the lead on Cold Chain for the affected regions. UNICEF has developed an internal strategy to address identified challenges related to Infant Feeding in Emergencies (IFE), particularly the use of infant formula.
		 UNICEF is providing technical support for child, newborn and maternal health, and is procuring and distributing essential medicines and supplies, including the distribution of family health kits, in Cebu. DED authorizes delayed submission of PCO and EAPRO annual reports.
		Division Director arrives into Manila, Supply Division Director arrives on mission.
20 Nov.		CFS have been established. UNICEF working with Dept. of Ed to reopen schools late Nov/early Dec. UNICEF to support UNFPA to take the lead on coordinating the GBV AOR and to do so effectively. PCO to flag to EMOPS if there are issues to be solved.
		GEC requests that all deployment discussions and decisions be routed through DHR. Media have largely left the scene, need to re-engage. Planning for Goodwill Ambassador to accompany ED on his CO visit.
25 Nov.		MIRA first phase is completed in Philippines. CO raises concern about data collection methodology results. WASH indicators have been combined into a general "restoring basic social services" category. EMOPS and PD begin preparation of lessons for CO on UNICEF experience in construction.

Date	Key external events	Critical UNICEF interventions and decisions
26 Nov.		PCO develops scope for RTE learning exercise to be undertaken by third party. Of the 89 surge staff deployed, 58 staff are on the ground in affected areas.
28 Nov.		MIRA initial phase results released. IA decision to undertake a second MIRA exercise. Water not initially classed as 'lifesaving need' and grouped under social services, changed after further discussion.
30 Nov.		1st PCA signed (WASH).
2 Dec.		UNICEF has deployed 95 surge staff. Of the 95 surge staff deployed, 68 staff are in the affected areas.
3 Dec.		GEC flags concerns regarding MIRA.
05 Dec.		PCO finalizes revisions to PBR.
		Interim measures taken and confirmed with PCO/RO/GEC that staff leave and R&R process that should be instituted immediately. Formal classification and R&R cycle pending ICSC approval.
09 Dec.		GEC gives NYHQ debriefing on his mission to Philippines.
13 Dec.		CO decision taken to implement cash-based response.
18 Dec.		CO programme strategy meeting in Tacloban.
20 Dec.		MIRA II issued.
2 Jan.		In light of Representative's need to go on extended medical leave outside of the Philippines, decision was taken between RO, OED and EMOPS for IRT Team Leader to act as OIC starting on 2 January/today thru the beginning of January.
6 Jan.		CO internal coordination: establishment of daily stand ups with Section Chiefs and senior management.
7 Jan.		Dedicated EMT conference call for programmatic issues. PD & EMOPS share LLs.
9 Jan.		Planning underway to extend the UNICEF L3 with OED.
10 Jan.		EMOPS drafts memo & global broadcast on extension of L3.
13 Jan.		EMOPS coordinates with PARMO on request for extension of deadline on donor report to DFAT/AusAid
		Revisions to memo & global broadcast on extension of L3. Correspondence between ED, EMOPS Director & EAPRO Director on management arrangements for one month extension of L3.
14 Jan.		ED declares one-month extension of Philippines L3. EAPRO Director to be GEC for reminder of response.
15 Jan.		EMOPS Director provides EAPRO Director with GEC handover package. Cebu partnership meeting bringing national, provincial and local governments, NGOs, private sector partners, and UNICEF led clusters to establish the institutional framework for an optimal delivery of the response. UNICEF signs MoUs with 39 priority Local Government Unit Mayors.

Date	Key external events	Critical UNICEF interventions and decisions
24 Jan.		Dedicated programme call between Manila & NYHQ on crosscutting issues.
28 Jan.		Programme meeting between Manila and Tacloban: Request of guidance on the LGU planning meeting.
30 Jan.		CO shares L3 exit strategy plan with EMOPS.
		EMT conference call. Explanation for WASH and immunization target revisions, discussion on the OPR. Confirmed revision of Bohol Earthquake Action Plan with reduced target and request for funds.
4 Feb.		CO Call with EAPRO Regional Emergency Advisor:
		 Request of RO support for child protection in emergencies training;
		 Request to RO on final decision and/or action plan for DFID preparedness fund;
		 Discussion on the capacity development of PHCO staff on DRR/resilience.
8 Feb.		Senior management level conference call on exit strategy for deactivation of L3. Incoming new Representative participates.
10 Feb.		UNICEF Level 3 is deactivated /expires. GEC shares plans for transition period:
		- EMT will scale back to monthly calls for the next three months;
		 HR fast-track procedures remain in effect thru 31 March to aid completion of new PBR;
		 CO is developing a transition plan at national and sub-national levels for UNICEF led clusters/AORs;
		 Evaluation findings will be used to inform CO preparedness & post-typhoon strategies.

ANNEX 4: CLUSTER SURVEY REPORT

Survey of UNICEF led or co-led clusters

Name of the Organisation:

#	Response
1.	ACF International
2.	ActAlliance
3.	Bukidnon Resource Management Foundation, Inc. (BRMFI)
4.	Catholic Relief Services
5.	ChildFund
6.	Children International - Quezon City
7.	Children International Inc.
8.	Community and Family Services International
9.	Department of Health Western Visayas
10.	Department of Social Welfare and Development - Protective Services Bureau
11.	Disaster Management and Crisis Intervention Unit, DSWD Field Office VI
12.	Emergency Architect
13.	Feed The Children
14.	GOAL
15.	Good Neighbours International
16.	Health Organization for Mindanao
17.	International Medical Corps
18.	National Nutrition Council Region VIII
19.	Nazarene Compassionate Ministries - Nazarene Disaster Response
20.	Norwegian Church Aid
21.	Oxfam
22.	Philippine Red Cross
23.	Plan International
24.	Samaritan's Purse
25.	Save the Children International
26.	SC
27.	Solidarites International
28.	Tacloban City Mayor's Office
29.	UNICEF
30.	World Food Programme
31.	World Vision Development Foundation - ABK3 LEAP
32.	World Vision International
33.	WVDF

Please clarify what is the type of organisation:

Response	Chart	Percentage	Count
Government co-lead		5.7%	3
Government		5.7%	3
NGO co-lead		1.9%	1
Local NGO		5.7%	3
International NGO		60.4%	32
Local Red Cross		1.9%	1
IFRC/ICRC		0.0%	0
UN		15.1%	8
Other (please specify)		3.8%	2
	Total Responses		53

Please clarify what is the type of organisation:

#	Response
1.	Faith Based
2.	INGO with LOCAL NGO (WVDF)

Participation:

Response	Chart		Percentage	Count
Nutrition			34.0%	18
Education			15.1%	8
WASH			32.1%	17
Child Protection			18.9%	10
	Total Resp	onses		53

Cluster Location:

Response	Chart	Percentage	Count
Manila		28.3%	15
Tacloban		45.3%	24
Roxas		13.2%	7
Guiuan		13.2%	7
	Total Responses		53

	Very Poor	Poor	Average	Good	Very Good	Total Responses
Overall leadership	0 (0.0%)	3 (7.9%)	6 (15.8%)	22 (57.9%)	7 (18.4%)	38
Technical expertise and technical support	0 (0.0%)	4 (10.8%)	9 (24.3%)	12 (32.4%)	12 (32.4%)	37
Inclusiveness (included all relevant stakeholders)	0 (0.0%)	1 (2.6%)	7 (18.4%)	20 (52.6%)	10 (26.3%)	38
Coordination of cluster members	1 (2.6%)	0 (0.0%)	9 (23.7%)	16 (42.1%)	12 (31.6%)	38
Ensuring coordination with the other clusters	1 (2.8%)	2 (5.6%)	11 (30.6%)	13 (36.1%)	9 (25.0%)	36
Efficiency (timely decisions and clear action points)	2 (5.3%)	1 (2.6%)	13 (34.2%)	17 (44.7%)	5 (13.2%)	38
Effectiveness (cluster work improves work at field level; coverage of response expanded, gaps filled; marginalised people reached; etc.)	1 (2.7%)	3 (8.1%)	8 (21.6%)	19 (51.4%)	6 (16.2%)	37
Planning and strategy development	2 (5.3%)	3 (7.9%)	7 (18.4%)	19 (50.0%)	7 (18.4%)	38
Promotion of best practice standards	1 (2.8%)	0 (0.0%)	14 (38.9%)	15 (41.7%)	6 (16.7%)	36
Coordination of needs assessment	1 (2.9%)	2 (5.9%)	11 (32.4%)	11 (32.4%)	9 (26.5%)	34
Attention to priority cross-cutting issues (e.g. age, diversity, environment, gender, human rights)	0 (0.0%)	3 (8.1%)	10 (27.0%)	13 (35.1%)	11 (29.7%)	37
Supporting training activities and capacity building	1 (2.8%)	1 (2.8%)	8 (22.2%)	18 (50.0%)	8 (22.2%)	36
Play a significant advocacy or influencing role	0 (0.0%)	2 (5.4%)	6 (16.2%)	22 (59.5%)	7 (18.9%)	37
Help shape the way funds are allocated (e.g. influence on donors, inputs to appeals, CERF allocations)	1 (2.9%)	2 (5.7%)	11 (31.4%)	14 (40.0%)	7 (20.0%)	35
Help support emergency preparedness for future emergencies	0 (0.0%)	2 (5.9%)	13 (38.2%)	11 (32.4%)	8 (23.5%)	34
Sharing its leadership role appropriately with the government	0 (0.0%)	0 (0.0%)	8 (21.6%)	12 (32.4%)	17 (45.9%)	37
Included and maintained good relationships with all level of the government	0 (0.0%)	0 (0.0%)	5 (13.9%)	16 (44.4%)	15 (41.7%)	36

Please rate UNICEF in its role as cluster (co-) lead:

Did the cluster system already in operation for prior emergencies (including Bohol and Zamboanga) help facilitate the response to Haiyan?

Response	Chart		Percentage	Count
Yes			79.3%	23
No			20.7%	6
	Total	Responses		29

ANNEX 5: LIST OF THOSE CONSULTED

List of people interviewed for the RTE

Location	Organisation	Name	Title
	UNICEF	Andrea Berther	IRT (Deployed as Education Specialist)
	UNICEF	Azimur Rahman	IRT (Deployed as HR Advisor)
	UNICEF	Claire Mariane	Head Field Office, UNICEF Afghanistan (Deployed as Cash Specialist)
	UNICEF	Hendrik Van Norden	IRT (Deployed as WASH Advisor)
	UNICEF	Pernille Ironside	IRT (Deployed as Child Protection Specialist)
	UNICEF	Rado Ramanahadray	IRT (Deployed as ICT Specialist)
	UNICEF	Teija Vallandingham	IRT (Deployed as Education Specialist)
Balanginga	Albino Duran Memorial Hospital	Dr Garcia	Albino Duran Memorial Hospital Doctor
Balanginga	Albino Duran Memorial Hospital	Jonathan Licatan	Albino Duran Memorial Hospital Building Officer
Bangkok	OCHA	Marcus Werne	Deputy Director, OCHA
Bangkok	SCF Asia	Nick Finney	Operations Director, SCF Asia
Bangkok	UNFPA	Francesco Ambrogetti	Regional Resource Mobilisation and Partnership Adviser, UNFPA RO
Bangkok	UNFPA	Maryline Py	Special Assistant to RD, UNFPA RO
Bangkok	UNICEF EAPRO	Ada Ocampo	Regional Evaluation Advisor
Bangkok	UNICEF EAPRO	Bertin Gbayoro	Monitoring Specialist, Planning Section
Bangkok	UNICEF EAPRO	Christiane Rudert	Nutrition Specialist
Bangkok	UNICEF EAPRO	Christopher de Bono	Regional Chief of Communications
Bangkok	UNICEF EAPRO	Colette Turmel	Regional Chief of Operations
Bangkok	UNICEF EAPRO	Dan Toole	Regional Director
Bangkok	UNICEF EAPRO	David Parker	Regional Program Monitoring specialist
Bangkok	UNICEF EAPRO	Dominik Horneber	Consultant, Social Policy & Economic Development Section
Bangkok	UNICEF EAPRO	Dorothy Foote	Programme Specialist, National Security Project Coordinator
Bangkok	UNICEF EAPRO	Grace Agacoli	Child Protection Specialist

Location	Organisation	Name	Title
Bangkok	UNICEF EAPRO	Guy Mbayo Kakumbi	WASH Specialist
Bangkok	UNICEF EAPRO	Isiye Ndombi	Deputy Regional Director
Bangkok	UNICEF EAPRO	Khun Vijuu Kasapanandha	Senior Admin Assistant
Bangkok	UNICEF EAPRO	Kristen Wenz	Consultant, Child Protection Section
Bangkok	UNICEF EAPRO	Lizamma Thomas	Regional Chief of HR
Bangkok	UNICEF EAPRO	Mary Grace Agcaoili	Child Protection Specialist
Bangkok	UNICEF EAPRO	Mioh Nemoto	Acting CP Specialist
Bangkok	UNICEF EAPRO	Sammy Njoe, Technology, Regional ICT	Regional Chief of Information Communication
Bangkok	UNICEF EAPRO	Shirley Mark Prabhu	Consultant, HIV & AIDS Section
Bangkok	UNICEF EAPRO	Xavier Foulquier	Consultant
Bangkok	WFP	Geoffrey Pinnock	Regional Emergencies Officer
Bangkok	WFP	Katrien Ghoos	Senior Regional Nutrition Advisor
Bangkok	WFP	Lindsey Horton	OIC Nutrition Response
Bangkok	WFP	Peter Guest	Programme Advisor, Regional Bureau for Asia
Bangkok	WFP	Samir Wanmali	Senior Programme Officer
Borongan	Provincial Government, Borongan	Eva Esplago	Provincial Sanitation Inspector
Burauen	Residents	Interviews with cash transfer beneficiaries	
Copenhagen	UNICEF HQ	Ashley Wax	Evaluation Specialist, SD
Copenhagen	UNICEF HQ	Chris Cormency	Chief WASH, SD
Copenhagen	UNICEF HQ	Gemma Orta-Martinez	Market Research Specialist, SD
Copenhagen	UNICEF HQ	Jean-Cedric Messus	Senior Emergency Supply Specialist, SD
Copenhagen	UNICEF HQ	Joselito Nuguid	Deputy Director, SD
Copenhagen	UNICEF HQ	Lena Romer	Supply Specialist, SD
Copenhagen	UNICEF HQ	Raju Shrestha	Chief Logistics, SD
Copenhagen	UNICEF HQ	Shanelle Hall	Director, SD
Dagami	Municipality of Dagami	Norman Delos Reyes	Social Worker
Geneva	UNICEF HQ	Anthony Spalton	Emergency Specialist, EMOPS (Deployed to work on resilience)
Geneva	UNICEF HQ	Ayadil Saparbekov	Deputy Global Nutrition Cluster Coordinator, EMOPS (Deployed as Nutrition Cluster Coordinator)

Location	Organisation	Name	Title
Geneva	UNICEF HQ	Catherine Barnett	Global Child Protection Cluster Co-Coordinator, EMOPS (Deployed as Child Protection Cluster Coordinator)
Geneva	UNICEF HQ	Dermot Carty	Deputy Director, EMOPS
Geneva	UNICEF HQ	Ellen Van Kalmthout	Global Education Cluster Co- Coordinator, EMOPS (Deployed as Education Cluster Coordinator)
Geneva	UNICEF HQ	Franck Bouvet	Deputy Global WASH Coordinator, EMOPS (Deployed as WASH Cluster Coordinator)
Geneva	UNICEF HQ	Gavin Wood	Information Management Specialist, EMOPS (Deployed as Inter-Cluster IM Support)
Geneva	UNICEF HQ	Gwyn Lewis	Chief Cluster Coordination, EMOPS (Deployed as Inter- Cluster Coordinator)
Geneva	UNICEF HQ	Josepine Ippe	Global Nutrition Cluster Coordinator, EMOPS
Geneva	UNICEF HQ	Julie Verhaar	Programme Specialist, PFP
Geneva	UNICEF HQ	Paul Shanahan	Global WASH Coordinator, EMOPS
Guiuan	Guiuan Central School	Interviews with teachers	
Guiuan	Municipality of Guiuan	Lea Chua	Public Nurse
Guiuan	Municipality of Guiuan	Neneth Ecleo	Planning & Development Officer
Guiuan	Municipality of Guiuan	Rebecca Nadores	Day-care Worker
Guiuan	Municipality of Guiuan	Recti Melquiades	Focal Point for Typhoon Yolanda
Guiuan	Municipality of Guiuan	Zenaida Cunanan	Social Worker
Guiuan	Oxfam	Humphrey Marangu	WASH Engineer
Guiuan	Oxfam	Maria Libertad Dometita	Gender Officer
Guiuan	Oxfam, Guiuan	Abdullah Ampilan	PHP Team Leader
Guiuan	Oxfam, Guiuan	Ernesto Casiple Jr	Deputy Programme Manager
Guiuan	UNICEF	Prem Bahadur Chand	WASH Specialist, Cluster Coordinator, Chief Field Office
Guiuan Bunkhouses	Residents	Interviews with families in bunk houses	
Guiuan Tent City	Residents	Interviews with TLS volunteer workers	
Lawaan	Oxfam Community Workers	7 community health workers	Maaslog Community Latrine

Location	Organisation	Name	Title
Lawaan	Residents	1 family beneficiary	Maaslog Community Latrine
Manila	Child Fund	Katherine Manik	National Director
Manila	Department of Education	James Cheche	Education Specialist
Manila	Department of Education	Usec Mario Denriquito	Partnership Specialist
Manila	Department of Health	Dr Irma Asuncion	OIC, Disaster Prevention & Resp. Office
Manila	H&N Section	Alex Iellano	IYCF Specialist
Manila	National Nutrition Council	Maria Bernadita T. Flores	Assistant Secretary of Health
Manila	NDRRMC	Edwin Sadang	OiC, Operations Division
Manila	NEDA	Emmanuel Esguerra	Deputy Director-General
Manila	OCHA	Agnes Palacio	National Disaster Response Advisor
Manila	OCHA	David Carden	Country Director
Manila	OCHA	Fotini Rantsiou	Inter Cluster Coordinator
Manila	OCHA	Gil Francis Arevalo	CWC Officer
Manila	OCHA	Joseph Addowe	IM Analyst
Manila	OCHA	Luisa Carvalho	UN RC/HC
Manila	OCHA	Shawn Boeser	Chief IM
Manila	Save the Children Philippines	Edwin Horca	
Manila	SCF Philippines	Dr Pathak	Chief of Health
Manila	UNICEF Geneva	Joanne Dunne	Inter Cluster Coordinator
Manila	UNICEF IRT	Angela Kearney	IRT Team Leader
Manila	UNICEF PCO	Abdul Alim	Deputy Representative
Manila	UNICEF PCO	Anne Ong Lopez	Former Philippines Staff Association
Manila	UNICEF PCO	Annie Rosario	Admin Officer
Manila	UNICEF PCO	Anselme Motcho	Chief of Operations
Manila	UNICEF PCO	Anthony Hudson	Logistics Officer, Emergency
Manila	UNICEF PCO	Augusto Rodriguez	Chief, Social Policy
Manila	UNICEF PCO	Bettina Hasel	Human Resources Specialist
Manila	UNICEF PCO	Cecile Dajoyag	Education Specialist (ECCD)
Manila	UNICEF PCO	Flora Sibanda-Mulder	Nutrition Cluster Coordinator
Manila	UNICEF PCO	Frederik Telle	Education Cluster Coordinator
Manila	UNICEF PCO	Giovanni Lapina	WASH Officer
Manila	UNICEF PCO	Gwendoline Fernandez- Estrada	HR Officer
Manila	UNICEF PCO	Hammad Massod	Chief, PME
Manila	UNICEF PCO	Jeremy Shusterman	Consultant
Manila	UNICEF PCO	Leon Dominador Fajardo	Chief, DRR

Location	Organisation	Name	Title
Manila	UNICEF PCO	Lotta Sylwander	Country Representative
Manila	UNICEF PCO	Madeleine Francisco	Finance Officer
Manila	UNICEF PCO	Margaret Sheehan	Chief of Field Operations
Manila	UNICEF PCO	Maria Lourdes de Vera	Chief Education Section
Manila	UNICEF PCO	Mariella Castillo	Senior Health Specialist, Emergency
Manila	UNICEF PCO	Michael Emerson Gnilo	WASH Specialist
Manila	UNICEF PCO	Raju Shreshta	Supply Officer
Manila	UNICEF PCO	Rene Galera	Emergency Nut. Specialist
Manila	UNICEF PCO	Richard Wecker	Nutrition Custer IM
Manila	UNICEF PCO	Rodeliza Barrientos	CP Officer
Manila	UNICEF PCO	Sarah Norton-Staal	Chief, Child Protection
Manila	UNICEF PCO	Susan Prosser	CP Cluster Coordinator
Manila	UNICEF PCO	Umar Daraz	CP Cluster, IM
Manila	UNICEF PCO	Willibald Zeck	Chief, Health & Nutrition
Manila	UNICEF PCO	Ysmael Martinez	Supply Officer
Manila	UNICEF PCO	Zafrin Chowdhury	Chief, Communication
New York	UNICEF HQ	Andrew Parker	Senior WASH Advisor, PD (Deployed as WASH Specialist)
New York	UNICEF HQ	Barry Wentworth	Deputy Director, DFAM
New York	UNICEF HQ	Betel Tassew	Chief Business Partner Emergency, DHR (Deployed as IRT/HR)
New York	UNICEF HQ	Brenda Haiplik	Senior Education Advisor, PD
New York	UNICEF HQ	Diane Holland	Senior Nutrition Advisor, PD
New York	UNICEF HQ	Dominique Hyde	Deputy Director, PARMO
New York	UNICEF HQ	Eddie Carwardine	Deputy Director, DOC
New York	UNICEF HQ	Frederic Sizaret	Surge Specialist, DHR
New York	UNICEF HQ	Genevieve Boutin	Chief of Humanitarian Policy Section, EMOPS
New York	UNICEF HQ	George Paltakis	Donor Relations Officer, PARMO
New York	UNICEF HQ	Gina Gugliotta	Emergency Specialist, EMOPS
New York	UNICEF HQ	Heather Papowitz	Senior Health Advisor, PD (Deployed as Heath Advisor/IRT)
New York	UNICEF HQ	Kathryn Donovan	Senior Communication Specialist, DOC (Deployed as Communication Specialist)
New York	UNICEF HQ	Kent Page	Senior Communication Specialist, DOC
New York	UNICEF HQ	Luis Soares	Budget Specialist, DFAM (Deployed as Budget/Finance Specialist)
New York	UNICEF HQ	Martin Engels	Emergency Specialist, EMOPS

Location	Organisation	Name	Title
New York	UNICEF HQ	Martin Porter	Emergency Specialist, EMOPS (Deployed as IRT/HPM Specialist)
New York	UNICEF HQ	Sandra Lattouf	Head of Tacloban Office, Senior Emergency Specialist, ERT EMOPS (Deployed as Field Coordinator)
New York	UNICEF HQ	Silvia Danailov	Chief Field Support Section, EMOPS
New York	UNICEF HQ	Ted Chaiban	EMOPS Director (GEC for the Haiyan response till January)
New York	UNICEF HQ	Yasmin Haque	EMOPS Deputy Director (Member of the OPR)
New York	UNICEF HQ	Yodit Abdisa	Emergency Specialist, EMOPS (Deployed as Emergency Coordinator)
New York	UNICEF US Fund	Lisa Szarkowski	Vice President of Public Advocacy and Strategic Communications
Palo	Cogon Elementary School		Cogon School Director
Pastrana	Municipality of Pastrana	Mayor Cherry Espero	Municipality of Pastrana
Quinapondan	Quinapondan Community Hospital	Dr Baby Makabare	Chief of Hospital
Quinapondan	Quinapondan High School	Joel Bagalay	Quinapondan High School Property Custodian
Regional	Department of Education	Atty. Rhoan Obrera	OIC Assistant Regional Director
Regional	Department of Education	Cora Abrera	Vice Chair, Education Cluster
Regional	Department of Education	Elma Herrera	Education Program Supervisor, Training And Development Division
Regional	Department of Education	Ramon Daga	Regional Facilities Coordinator
Regional	Department of Education	Rita Dimakiling	OIC Office of Planning
Regional	Save the Children	Kate Nolan	Program Development and Quality Manager
Roxas	ACF	Gladys Montales	Head of WASH
Roxas	ACF	Isabelle Ordonez	Head of Base
Roxas	ACF	Shiela Cabigas	Head of Nutrition Programme
Roxas	ACF	Shiela Cabigas	Head Programmes
Roxas	Barangay Banica	Anna Marie Albaladejo	Violence Against Women and Children Desk Officer, Banica Barangay

Location	Organisation	Name	Title
Roxas	Barangay Banica	Meeting of Banica Barangay BCPC	
Roxas	Barangay Kabuhayan	Rene Dador	Brgy Kabuhayan Captain
Roxas	Child Fund	Babes Chua	Team Leader Emergency Response
Roxas	Child Fund	Ethel Frogosa	Team Leader RISE Project
Roxas	Child Fund	Joy Ayupan	Technical Education Lead
Roxas	Child Fund	Marilyn Tumilba	Nutrition Specialist
Roxas	Child Fund	Mederick Ybanez	Finance/Admin Emergency Response
Roxas	Department of Education	Dr. Eveleth Gamboa	Capiz Schools Division Superintendent
Roxas	Department of Education	Nilo Domingo	Capiz Division
Roxas	Department of Health Maayon	Dr. Sandra Sorongon	LGU of Maayon
Roxas	Ivisan Rural Health Clinic	Visit to Ivisan Rural Health Clinic - IYCF-CMAM awareness session, with Chid Fund (±30 mothers, ±40 children 0-59 months)	
Roxas	Loctugan Elementary School	Mario Cerajuco	School Principal
Roxas	MDRRMO	Eugene Tentativa	MPDC/EO MDRRMO, Estancia
Roxas	Municipality of Maayon	Mayor & Vice Mayor	
Roxas	Municipality of Maayon	Sanitation Officers (2)	
Roxas	Municipality of Panay	Sheila	Panay Latrine sites, Pawa
Roxas	Municipality of Panay Panay	Rey Cordeno	Municipal Administrator
Roxas	Municipality of Pilar	Catherine Casipit	Pilar Day Care Worker, President & Trainor
Roxas	Municipality of Pilar	Interviews with 10 day care workers	
Roxas	OCHA Roxas	Jean-Luc Tonglet	Head of Office
Roxas	Panital Hospital	Dr Advincula	Chief Doctor, Panital HC
Roxas	Pilar Rural Health Clinic	Amorosa	Pilar RHU Midwife
Roxas	Provincial Health Office, Capiz	Ayr Altavas	MNCHN Assistant Coordinator
Roxas	Provincial Health Office, Capiz	Cecile Tuazon	Family Planning and CHT Coord

Location	Organisation	Name	Title
Roxas	Provincial Health Office, Capiz	Dr. Leah Del Rosario	Provincial Health Officer
Roxas	Provincial Health Office, Capiz	Julius de la Cruz	EPI Coordinator
Roxas	Residents	Welry Dorado & Fernando Dorado	Informants on hygiene kits issues
Roxas	Rural Health Clinic, Pilar	Cherry Grace Leda	
Roxas	UNICEF PCO	Angelita Evidente	Nutrition Officer
Roxas	UNICEF PCO	Anna Layto	Education Programme
Roxas	UNICEF PCO	Martin	Education Officer
Roxas	UNICEF PCO	Patrick Nyeko	WASH Programme
Roxas	UNICEF PCO	Poona Durdana	Health Specialist
Roxas	UNICEF PCO	Sam	Head of Office
Roxas	UNICEF PCO	Samuel Mawunganidze	Chief of Field Office
Roxas	World Vision	Roussam Dilig	Roving Engagement Officer, ABK3 LEAP
Stockholm	UNICEF Sweden	Véronique Lönnerblad	Deputy Executive Director
Tacloban	ACF	Jesus	WASH Specialist,
Tacloban	Child Fund	Fe Suelam	
Tacloban	Child Fund	Ivy Itom	
Tacloban	Department of Health	Dr. Paul Sydingco	Regional GD Deputy
Tacloban	Department of Social Welfare	Agnes Bugal	Social Welfare Officer 2, Camp Manager
Tacloban	Department of Social Work, Tacloban	Lillia Baltazar	
Tacloban	IFRC	Camelia Marinescu	WASH Manager
Tacloban	IFRC	Steve McAndrew	Operation Manager
Tacloban	OCHA	Christine Mougne	CP Cluster Coordinator
Tacloban	OCHA	Kasper Engborg	Head of Office
Tacloban	OCHA	Megan Wiezoreck	CP Cluster
Tacloban	Plan International	Richard Sandison	Emergency Response Manager
Tacloban	Residents	Rowena Ponce and 3 neighbours, Tent City dwellers	
Tacloban	Tent City Residents	9 women dwellers, near airport	
Tacloban	UNICEF PCO	Alvin Manalansan	Nutrition Officer
Tacloban	UNICEF PCO	Arifa Sharmin	Communication Officer
Tacloban	UNICEF PCO	Bella Ponferrada	Health Officer
Tacloban	UNICEF PCO	Chris Wiezoreck	IM
Tacloban	UNICEF PCO	Dominik Koeppl	Nutrition Cluster

Location	Organisation	Name	Title
Tacloban	UNICEF PCO	Emily Grande	Nutrition Officer
Tacloban	UNICEF PCO	Faye Balanon	CP Cluster
Tacloban	UNICEF PCO	Galit Wolfensohn	Child Protection Manager
Tacloban	UNICEF PCO	Leah Tacsan	Supply Officer
Tacloban	UNICEF PCO	Matthew Swift	Education IM
Tacloban	UNICEF PCO	Moulid Warfa	Chief of Field Office
Tacloban	UNICEF PCO	Naoko Imoto	Education IM
Tacloban	UNICEF PCO	Nicole Hahn	Cluster Coordinator
Tacloban	UNICEF PCO	Rory Villaluna	Cluster Coordinator
Tacloban	UNICEF PCO	Rosanat Mota	Operation Manager
Tacloban	UNICEF PCO	Sheena Calub	National IM
Tacloban	UNICEF PCO	Simone Klawitter	WASH Specialist
Tacloban	UNICEF PCO	Sweetc Alipon	Health Specialist
Tacloban	UNICEF PCO	Tai Ring Teh	WASH Specialist
Tacloban	UNICEF PCO	Tim Grieve	WASH Chief of Section
Tacloban	UNICEF PCO	Yule Olaya	Education Officer
Tacloban	Various Municipalities	LGU DSWD Officers (focus group 7)	
Tacloban	World Vision	Adam Riddell	Admin Officer
Tacloban	World Vision	Ronnie Santos	WASH Coordinator
Tanauan	Sto Nino Elementary School	Priscila Mesias	Head Teacher, Sto Nino Elementary School