



Disasters Emergency Committee – East Africa Crisis Appeal
Ethiopia Real-Time Evaluation Report

January 2012

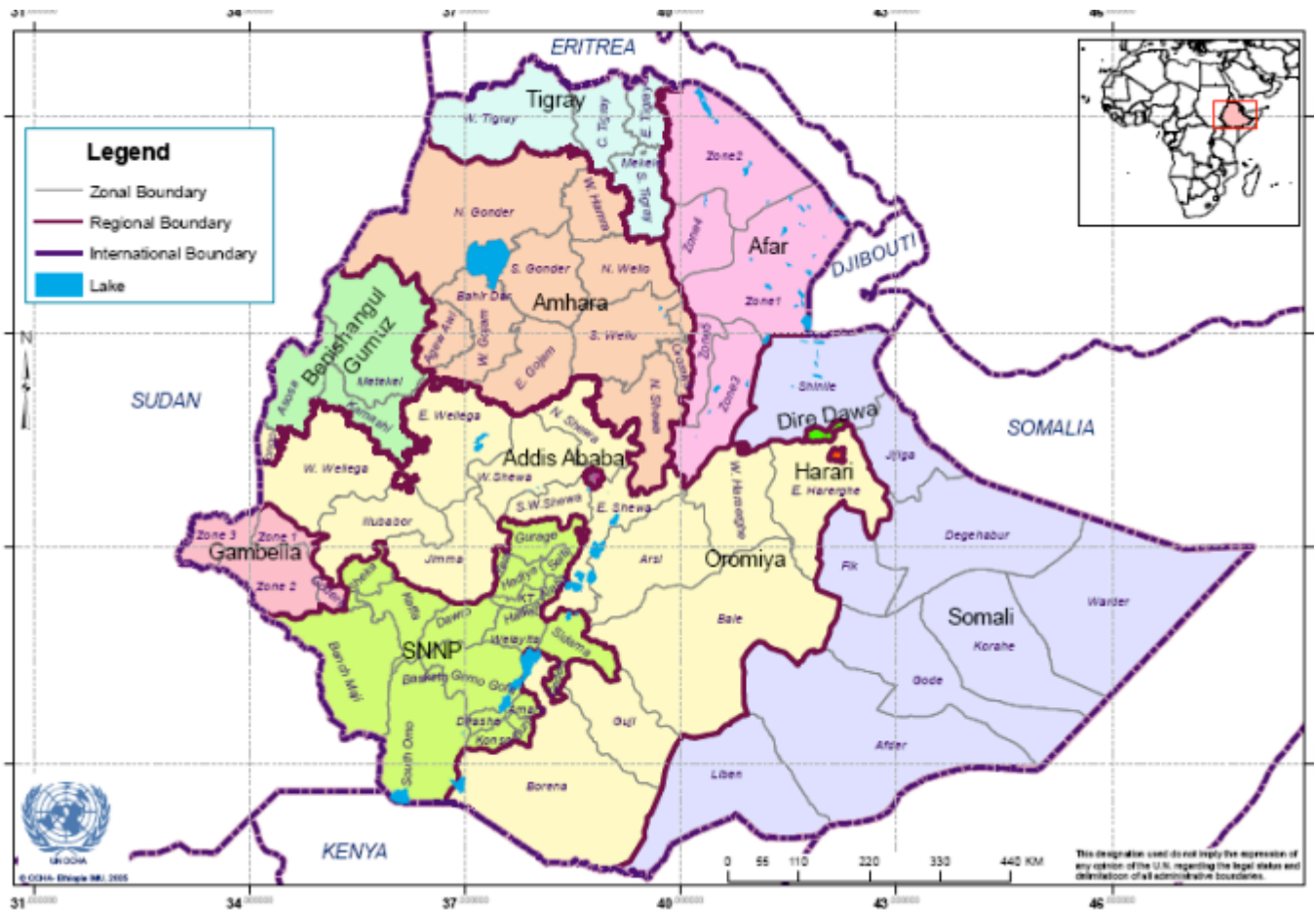
CONTENTS

	Page
Preface	3
Executive Summary	4
Section 1 Context and background	9
1.1 The current crisis in context: Ethiopia, drought and food insecurity	9
1.2 The humanitarian system and donor response in Ethiopia	9
1.3 Real-time evaluation methodology	10
Section 2 Response to the crisis in South and East Ethiopia	11
2.1 Introduction	11
2.2 Effectiveness and efficiency of response	11
2.3 Quality and appropriateness of response	17
2.4 Accountability to aid recipients	19
2.5 Lessons learned	21
Section 3 Response to Somali refugee influx to Dolo Ado	22
3.1 Background and general issues	22
3.2 The response by DEC member agencies	23
Section 4 Conclusions and Recommendations	27
4.1 General conclusions	27
4.2 Effectiveness and efficiency	27
4.3 Quality and appropriateness	29
4.4 Accountability	30
4.5 Lessons learned	31
Section 5	35
Annex 1 RTE Main lines of enquiry	35
Annex 2 RTE Term of reference	35

Preface

This evaluation was conducted in Ethiopia in November 2011 by a team from Valid International led by James Darcy and comprising Eleni Asmara, Theresa Banda and Deborah Clifton (for the Canadian Humanitarian Coalition). The findings presented in the evaluation report are those of the authors and do not necessarily represent the views of the DEC Secretariat or member agencies. That said, a high degree of consensus was found to exist on most of the issues explored, and the report attempts to reflect this consensus.

The authors would like to thank all those who gave their time and advice so generously during the conduct of the evaluation. In particular we would like to thank the staff of Merlin who hosted our visit in Addis Ababa and in the field.



Executive Summary

1. Background to the RTE

This report contains the findings of a real-time evaluation conducted for the DEC in Ethiopia in November 2011, as part of a wider regional RTE also covering Kenya and the response to recent Somali refugee influxes in both countries. A summary Synthesis report has also been written for the overall regional response (not including Somalia), which includes some generic conclusions about the DEC response and should be read in conjunction with the present report. The provisional conclusions of this RTE were shared and discussed with DEC member agencies in Addis Ababa prior to the evaluation team's departure. One member of the team was appointed by the Canadian Humanitarian Coalition¹ to evaluate the use of HC funding, test the viability of joint evaluation and provide a particular focus on gender issues.

Following the DEC 'accountability priorities', the performance of the DEC agencies was reviewed according to the *effectiveness* and efficiency of the response to date, including preparedness; the *quality* of responses judged against established standards, principles and best practice; the *accountability* of agencies to aid recipients; and the extent to which *lessons* had been learned from previous responses, in particular regarding the link between short and long term dimensions of crisis in this region. The specific questions addressed under each heading can be found in the Annex.

2. Context

The **context** for the Ethiopia crisis response was a situation of critical food insecurity, water shortage and acute stress on households and livelihoods, particularly in the south and east of the country (Oromiya, SNNPR and Somali regions) which is where this RTE was focused, with field visits to Gode and Borena zones. In addition, the RTE considered the response by DEC agencies to the situation of Somali refugees in the camps at Dolo Ado. The immediate trigger for the crisis was drought attributed to the current La Niña episode in the eastern Pacific and consequent failure of *meher* and *belg* rains in the highlands – as well as patchy *deyr* and *gu* rains in Somali region. As in Kenya, this compounded other factors including high food and fuel prices. The symptoms of the crisis have included high levels of acute malnutrition, morbidity and mortality, the most extreme conditions being found in the Somali refugee camps. Most of those consulted felt that, thanks to early warning, existing safety nets and systematic response to problems like acute malnutrition, a potential catastrophe had been averted. Certainly there has not been famine like that experienced in the conflict-affected 1980s, since when Ethiopia has developed considerably. Even since 2006 there has been significant progress. But there has been widespread human suffering, the response has been patchy and great damage has been done to livelihoods, particularly those of pastoralists.

¹ An organisation similar to the DEC, whose members include Canadian affiliates of Save the Children, Plan International, Care, Oxfam Canada and Oxfam Quebec.

Central government planning is a feature of the Ethiopian system, and this has both strengths in terms of early warning and coordination; and weaknesses in the form of delayed approvals and control of information. There is considerable mistrust of international organisations, particularly those working in the highly sensitive Somali region and the Dolo Ado camps, and there are tight restrictions on access, recruitment and operations. Establishing trust and good relationships at both Federal and Regional levels is said to be key to the ability to operate effectively.

3. Effectiveness

It is a measure of how the scale of the present crisis took time to be become acknowledged that the projections in the government's Humanitarian Requirements Document (HRD) of people requiring assistance had to be revised twice: from 2.8 million to 3.2 million in April 2011; and then again to 4.5 million in July. Since agencies are only allowed to operate within the parameters set by the HRD, this had a constricting effect on early response, particularly given the long lead time for approval of projects. The major donors (including the US and UK) were pushing for a scaled-up response in the first half of 2011, and the OCHA-managed HRF funding allowed some crucial early intervention. DEC funds, when they came, played an important 'bridging' and gap-filling role, particularly as allocation was not dependent on demonstrating particular levels of mortality and malnutrition. While the larger agencies were able to draw on their own unrestricted funds, one smaller agency – for which DEC made up around 40% of funding for the crisis response – noted that without the DEC funds 'we would have been delayed by six to eight weeks'.

Within the constraints noted above the response by DEC agencies and the use made of DEC funds was judged by the RTE team to have been generally effective. Most based their response on existing *programs* and partners, which proved an efficient method of expansion though it may have contributed to gaps in coverage in areas like SNNPR and Somali region. In the latter, for example, only Islamic Relief was operating in Afder zone – although this also reflects access constraints and security concerns.

As in Kenya, the main caveat on effectiveness was that the response was late – by some two to three months according to some, longer according to others. Overall, funding was not the major constraint that it was in Kenya, though major institutional funding did not become available until May and donors were going by the stated HRD requirements. Rather the constraints were those noted above, including the 'lag' in project approval – on average about two months from when proposals were submitted to government – and issues of access and capacity. The latter included limited partner capacity and too few local and national partners through which to channel the international response; as well as major challenges of staff recruitment and capacities. Some agencies noted weaknesses in their own internal capacities, including lack of management capacity and organisational experience, as significant causes of delayed response.

4. Quality

The RTE team was favourably impressed with the overall **quality** of the *programs* that it was able to visit. DEC agencies have a high level of confidence in the quality of their emergency responses, in

large part because their national partner organisations are well established and some already subscribe to international codes and standards. All the INGOs interviewed provide training on standards and conduct to staff and partners, and are confident of the awareness and commitment of their own senior staff. The Livestock Emergency standards (LEGS) are clearly widely followed by actors in pastoral and agro-pastoral areas. Both national and international agencies described quite rigorous project output monitoring; but there appeared to be a relative weakness in quality assurance, with monitoring focused on quantitative outputs and technical standards rather than wider quality issues. In the Dolo Ado camps, even meeting the most basic technical standards was said to be a continuing challenge.

Many saw the large numbers of newly-recruited staff, including many quite new to humanitarian work, as constraints to quality and the ability to deliver effective training. Several people also mentioned the unreliability of 'training' as means of ensuring compliance. Local capacity building is the priority for international staff in several agencies.

The lack of coordination among INGOs with respect to their work through the same partners was recognised by most as a concern, but given the constraints placed on international actors they see no other ways of working. More generally on coordination, agencies describe a lack of transparent coordination and decision making as contributing to turf wars, and to a lack of clarity around partnerships, future intentions and *program* duration.

The aspect of project appropriateness most stressed by drought-affected men and women, as well as by government and NGOs, was the need for emergency interventions to simultaneously address current needs and contribute to future resilience. On both counts, the credibility of assessment data was felt to be a major challenge in planning and delivery the most timely and appropriate response. The HRD document was still heavily food focused, and there was felt by many to be a relative lack of due attention to other sectors.

5. Accountability

Accountability to aid recipients adopted for this RTE was reviewed under the headings of communication, community involvement and feedback/complaints mechanisms. With regard to these the agencies generally scored well. For both directly implemented projects and those run through partners we found an impressive ability among community women and men to explain their entitlements and how these were arrived at. The extent to which projects visited in Borena had clearly been designed by communities and reflected the priorities of affected women and men was impressive. The need for formal complaints mechanisms is universally recognised by all actors, and these have either been introduced or are in the process of being set up for all projects visited. Limitations of time meant that it was not possible to assess how well these worked in practice. There is an apparent link between accountability and the operational mode of a given agency. One evident strength of working with partners is their level of acceptance in communities, and consequent sense of community ownership of the activities. Some felt this was higher than in projects directly implemented by INGOs. But a recent Oxfam RTE found that while partners feel confident and satisfied about their level of accountability, in practice there appear to be few mechanisms in place to ensure it.

6. Lessons learned

The DEC agencies in Ethiopia have clearly drawn on their own recent experience in developing their approaches to the current crisis – though (as in Kenya) they appear to suffer from some loss of institutional memory concerning their longer-term engagement in Ethiopia, and lacked the long-serving staff that they used to have. In particular agencies have learned that emergency responses which are built on and work alongside longer-term development projects are likely to have greater impact in themselves, to increase future scale up and response capacity, and to assist in building resilience. This is crucial in chronically drought-prone areas. Communities themselves demonstrate a high level of commitment to emergency interventions that are seen as supporting them in carrying out their *own* priority activities.

Markets and market interventions are clearly one area where agencies have improved their understanding in recent years. But much more work is needed to help increase long term livelihood security for pastoralists; for example on assisting pastoralists to take animals to market regularly to ensure best prices and greater economic security in hard times. More generally it was felt that the impact of escalating food prices had yet to be adequately accounted for in the design of relief responses, particularly those involving food and cash inputs.

One lesson that appears to be more difficult for agencies to get adopted by the wider system is the recognition that continuity of program engagement *between* crises is essential, in a context where crisis is an ever-present possibility. For example, agencies working in health question the effectiveness of interventions in the absence of government planning for continuity, worrying that emergency levels of malnutrition in particular could recur with the phase out of emergency interventions.

Many of those consulted felt that a shift of perspective from ‘crisis response’ to ‘risk management’ was needed, but had only partly been achieved. Some new initiatives, including new forms of risk financing (including weather-based insurance), were helping to point in this direction. Meanwhile some more immediate steps could be taken, including the routine adoption of ‘crisis modifiers’ in all development programs in drought-prone areas to allow for quicker and smoother adaptation to extreme circumstances. A more general shift was felt by many to be required away from the use of *outcome* indicators such as nutritional data towards the use of *predictive* (risk) indicators as a basis for early intervention. The necessary complement to this was an agreed policy framework for early (preventive) intervention and specific funds to enable such interventions.

7. The situation in the **Dolo Ado camps** for Somali refugees appears **alarming**. A recent survey by Save the Children US and others found levels of acute malnutrition and mortality in two of the camps (Kobe and Halowyen) far in excess of emergency thresholds. Assuming their figures are accurate and representative, it is shocking that such levels persist in camps (particularly Kobe) that have been established for some time and where admissions have reduced dramatically since the peak in mid-2011. The situation in the transit camp is said to be particularly bad. The RTE team was unable to find an explanation of how such figures could have emerged from what were said to be ‘stabilised’ environments. More generally there appears to be a substantial reality gap between the

actual conditions in the camps as described to us by many of the DEC agencies, and the picture painted by ARRA (the government body concerned) and UNHCR. Of all the priorities for action in the country, this appears to us to be the most urgent – especially in light of the potential for new refugee influx from Somalia.

Section 1: Context and background

1.1 The current crisis in context: Ethiopia, drought and food insecurity

Ethiopia was the site of one of the worst famines in recent history in 1983-5. Much has changed since then, with the end of the civil war around twenty years ago and a period of stable government since then. Although there has been significant development and economic growth in that time, the country is still not self-sufficient in staple food production. This is due in part to the high and growing human population, poor soil fertility, environmental degradation in some regions, and inadequate investment in agriculture. Recurrent shocks such as drought and flooding regularly affect food production, and climate change is generally recognised as an underlying factor. In recent years there have been severe droughts and subsequent food and health crises in 2003, 2006 and 2009.

Ethiopia's GDP is growing substantially year on year and there is domestic commercial expansion due to significant government investment in rural infrastructure. Nevertheless the purchasing power (effective demand) of rural households remains weak with almost 40% of the rural population living in poverty. Urban areas are somewhat better off and food gaps are filled in part by commercial imports of staple foods, in particular wheat (0.5 million tonnes imported each year). As in recent history, however, a large part of the food gap is filled by food aid imports. Each year food relief distributions are made to households affected by disasters such as droughts and floods, on top of the food and cash distribution to chronically food insecure households assisted by the national 'Productive Safety Net Program' (PSNP).

The crisis in 2011 was triggered by drought attributed to the La Niña episode in the eastern Pacific and consequent failure of *meher* and *belg* rains in the highlands – and patchy *deyr* and *gu* rains in Somali region. The result has been a situation of critical food insecurity, water shortage and acute stress on households and livelihoods, particularly in the south and east of the country (Oromiya, SNNPR and Somali regions). As in Kenya this compounded other factors including high food and fuel prices, and the symptoms have included high levels of acute malnutrition, morbidity and mortality. Meanwhile the parallel food and livelihoods crisis in Somalia, exacerbated by conflict and insecurity, led to a major influx of Somali refugees into Ethiopia during the course of 2011, peaking around the middle of the year.

1.2 The humanitarian system and donor response in Ethiopia

In Ethiopia, more than in other countries in the region, emergency response is factored in to annual government planning, with the production of a twice-yearly 'Humanitarian Requirements Document' (HRD) which makes a six month forward projection of relief (mainly food) needs for those whose needs cannot be met through the country's social protection mechanism (PSNP). This sets the framework both for international donors and for all agencies who wish to provide relief services in Ethiopia.

Humanitarian aid is financed internationally through a number of different channels. The EC (ECHO) and US (USAID/OFDA), together with the UK (DfID) are the largest donors to emergency responses. While most donors fund implementing agencies directly, there has also been the establishment of a common fund called the *Humanitarian Response Fund* (HRF) managed by UNOCHA. By 2011 this had disbursed some USD 50 million against proposals submitted by UN and INGOs.

Overall international funding for the emergency response in Ethiopia (including that for Somali refugees) in the period July-December 2011 was approximately USD 510 million.² There remains a significant shortfall of around 42% of requirement for the refugee response.

Of the GBP 75 million (USD 116m) raised by the DEC regional appeal to date, around 30% (GBP 22.5 million, USD 34.9m) has been allocated to the response in Ethiopia, including the refugee response. This represents around 7% of the total international funding for the Ethiopia response.

1.3 Real-time evaluation and methodology

The terms of reference for the RTE can be found in Annex 2 of this report. The evaluators followed the structure of the four 'accountability priorities' of the DEC, and devised a series of questions (also in the Annex) designed to help evaluate the response under four main headings:

- *Effectiveness* of scale-up and response, including preparedness;
- *Quality* of the response, judged against compliance with humanitarian principles, standards and best practice;
- *Accountability* of the response to the aid recipients, in terms of communication, participation and feedback; and
- Extent to which the response builds on *lessons learned* from previous drought responses particularly with regard to linking short- and longer-term agendas.

A series of interviews was conducted in late November 2011 in Addis Ababa and selected field locations, primarily with the staff of DEC member agencies, but also with government officials, UN agencies and local partner organisations. This was supplemented by a review of selected agency program and strategy documents. Field program visits and consultation with aid recipients were conducted in Gode and Borena. Logistical factors – flights cancelled or roads made impassable by rain – prevented planned visits to Afder and to the Somali refugee camps in Dolo Ado. This was a significant limiting factor in the efforts of the evaluation team to make direct observation of field programs and to interview front line staff, partners and aid recipients. In order to help compensate for this, a number of interviews were conducted with agency staff working in the Dolo camps, the results of which are reflected in Section 3.

² Source: UN OCHA Financial Tracking Service as at 25 January 2012 (<http://fts.unocha.org/>)

Section 2: Response to the crisis in South and East Ethiopia

2.1 Introduction

As noted above, the geographical coverage of the evaluation was limited in terms of field visits; but the areas visited (Borena/Oromiya and Gode/Somali) represent some of the worst affected by the current crisis. Although the emphasis in this section is on findings from those areas visited, the findings as discussed in interviews with agency staff in Addis Ababa largely echoed their experiences in other areas of the country.

Following the DEC ‘accountability priorities’, the performance of the DEC agencies was reviewed according to the *effectiveness* and efficiency of the response to date, including preparedness; the *quality* of responses judged against established standards, principles and best practice; the *accountability* of agencies to aid recipients; and the extent to which *lessons* had been learned from previous responses, particularly regarding the link between short and long term dimensions of crisis in this region. The specific questions addressed under each heading can be found in the Annex.

2.2 Effectiveness and efficiency of response

In addressing the questions of effectiveness and efficiency of the DEC agency response, the evaluators were guided by three sets of questions:

1. *How well prepared were agencies to respond to this disaster? How timely was their response?*
2. *How effectively have agencies scaled up to respond in the most urgent sectors and to the needs of the most vulnerable? How efficient was the response?*
3. *How have agencies been able to work with local and national capacity? More generally, how well coordinated were their activities?*

2.2.1 Effectiveness of scale up

Several agencies felt their effectiveness was grounded in well-thought out scale up strategies. Concern WW, Oxfam Canada and others made decisions not to expand geographically outside of areas where they already had an established presence. Many INGOs already had long term partnerships in the affected areas, and found it relatively easy and effective to scale up with or through those partners. Several described their long term activities as “low-level” or “ongoing” humanitarian programs, because of the almost perennial drought situation. Oxfam GB, by way of comparison, did move into new geographic areas (in Borena), and identified its most effective emergency role there as one of “gap-filling”, based on its greater flexibility, and ability to deploy highly skilled short-term technical support.

Where INGOs felt their interventions had been effective, many attributed this to the availability of internal funding that enabled early intervention. Some agencies were able to fund partners to start up activities two to three months before government agreements were formally signed (e.g. Age UK's sister organisation Help Age International funding to SOS Sahel). While this entailed some risk, it clearly helped communities when it was most needed. Also credited were funds made available quickly and/or with less rigorous proposal standards, including Humanitarian Coalition funds, the HRF through UNOCHA, and CIDA funds. In broad terms, the availability of funding appears not to have been the major constraint that it was in Kenya. This view was shared by agencies including Age UK/Help Age, Merlin, Oxfam GB and others.

Agencies whose long term programs are focused on drought mitigation and disaster risk reduction felt the emergency interventions were effective because they built on and further contributed to longer-term resilience. A variety of initiatives aimed at reducing drought impact on pastoral livelihoods were commended, including de-stocking, PHP, pasture clearance and water supply. NGOs, government, and people receiving the services cited their long term mitigation aspects, in addition to the immediate relief provided, in describing why these were considered effective. Several agencies were able to give examples of where their long term mitigation work resulted in those communities being less affected than others. The government is also supportive of longer term work that promotes resilience and strengthens community coping abilities.

Agencies whose strategy was to scale up in existing areas of work, particularly where those were also severely affected areas, felt they made the right choice. Oxfam GB acknowledged that its long term program areas were not as badly affected as some, but that continued work through partners in those *woredas* (districts) is still worthwhile, especially in the form of infrastructure rehabilitation for future risk reduction. Oxfam also responded in some new and more badly affected areas.

A key aspect of effectiveness was the extent to which agencies made efforts and were successful in ensuring benefits to specific groups within target communities, particularly women. SOS Sahel (a national partner of several INGOs) and others described strategies for ensuring different opinions of women, men, boys and girls were recognised and reflected in all aspects of program design and implementation. These methods were clearly described and greatly appreciated by project participants and beneficiaries.

Coordination and inter-agency communication was felt to contribute to response effectiveness, particularly in Gode. Clusters were found to be useful for relationships, sometimes enabling joint advocacy on critical issues, and INGO coordination and transparency was commended by local government officials. Recognition by all organisations that drought conditions requiring intervention are increasing in frequency has helped facilitate cooperation.

Merlin's health and nutrition programs were identified as particularly effective, providing a genuinely life-saving essential service.

2.2.2 Challenges to Effective Response

All DEC and HC-funded organisations cited delay and difficulty in getting government clearance and approval to implement their programs; on average about two months from when proposals were submitted to government, to when approval to start work was granted. The nature of the government approval process is such that agreement has to be sought at both federal and regional levels. Good working relationships and trust were reported to be important factors in ensuring timely and successful applications for project approval.

Staff recruitment difficulties were widely acknowledged to have had a major impact on response effectiveness. Limits on the number of international staff allowed (one per project) and visa requirements were both factors. One agency was very candid in acknowledging a misstep in judging the number of internationals required for scale up. While some agencies were satisfied with their ability to re-allocate staff from their long term programs, others felt that staff who had been working on development projects like honey production did not have skills that were relevant or transferable to emergency work; one commented that bringing program support staff (admin/finance) from development projects was more appropriate and effective, though this helped on a very small scale.

There was widespread agreement among INGOs that national partner organisations struggled to scale up fast, and experienced major challenges of technical capacity. With salaries one third of those offered by INGOs, it is very difficult for partners to recruit and retain skilled staff. One partner agency in Borena described hiring three public health workers in less than a month, as each stayed only a few days in before leaving for a better job. This problem is compounded by the fact that all INGOs in Borena are working through the same four to five national partner organisations. Partners feel they are coping well, citing organisational changes made to accommodate so many new projects, though none has significantly increased its finance or logistics capacity. INGOs have also not jointly discussed partner capacity limitations and possible solutions; rather each agency does its own independent partner capacity assessment and develops its own plan for building it.

Some agencies found it challenging to expand into new areas, particularly where national partners were already over-committed to existing INGO agencies. They found partners had taken on a lot of work in the first phase response. When this was compounded by rain delays, making roads impassable, this meant shifting much of that work to the second phase. Many observed that the size of the international response presents serious coordination challenges also for government.

Lack of knowledge of the country and the key emergency/development actors is a barrier to coordination affecting newer organisations. In Borena, seen as one of the most vulnerable zones, lack of coordination and collaboration among NGOs was cited as a barrier to effective response, and leadership is reported lacking in some clusters (e.g. agriculture).³ Gap identification was described as weak, and the lack of an apparent UN role was felt to be problematic, especially as both UN

³ That said, the evaluation team found some good examples of collaboration amongst NGOs, e.g. the extensive joint assessment conducted by CAFOD, Age UK/Help Age and a number of other agencies – one practical result of which was to show the limitations of using cash distribution in this context.

coordination and the Oromia government are based in Addis. Communication with government was felt to be improving, but often limited to unproductive information sharing in weekly task force meetings; this has been getting better as technical discussions are moved to sectoral working groups.

Agencies mentioned a lack of transparent coordination and decision-making as contributing to turf wars and lack of clarity around partnerships, future intentions and program duration. This has resulted in some agencies scaling back their ambitions, particularly in WASH, with the likelihood of reduced impact and effectiveness. Work with refugees was also mentioned as a very 'competitive space'. Lack of coherence between local, zonal and national government complicates planning for NGOs.

Several comments, from both government and INGOs, referred to challenges in working with the UN; for example, UNICEF supplies arrive late because they don't have authority in zone and must wait for decisions to be made in Addis (government official, Gode). UNICEF itself is constrained by the lack of equipment, drugs, staff and motivation at government aid posts (Gode Zone).

Those INGOs planning a relatively short term presence in their current work areas express concern about the effectiveness of intervention, given the clear need for emergency response to be linked to longer term vulnerability reduction. Agencies working in health question the effectiveness of interventions in the absence of government planning for continuity, and speculate that emergency levels of malnutrition in particular will soon recur with the closure of emergency interventions. Several felt the nature of partnership with government was weak and one-sided, with little attention to sustainable improvement. Lack of government involvement, lack of case identification and referrals from field aid posts to therapeutic feeding programs, is seen as a major barrier to greater impact of nutrition interventions (Gode).

Water trucking, while often most appreciated by government and beneficiaries, is the activity most frustrating to DEC agencies, who perceive it as a largely unfeasible and completely unsustainable response. In addition to often inaccessible target destinations assigned by government, the high cost of rental vehicles and unreliable drivers, trucking has added critical stress to the few remaining functional water sources. The water trucking response highlighted government lack of capacity to maintain water sources in many locations, and community lack of management capacity to look after them in the longer term. These capacity gaps are seen as significantly contributing to the recurrent need for 'emergency' responses.

Some agencies felt their activities were delayed by lack of donor action, including from DEC. ECHO in particular was mentioned as a slow and bureaucratic donor. One agency felt that, in retrospect, its response was not quick enough, but attributed this to internal shortcomings including its own scale up, weakness in the assessment system, and simultaneous effort to introduce a new management structure. The same respondent reflected that all agencies were slow, missing the period of critical need; but felt that the large professional humanitarian organisations could have had more impact earlier without the huge ramp up costs. They were hampered by institutional pressure to respond to three emergencies "lumped together"; that the "huge machine" of media and donor pressure got going before the complexities were understood and the difficulties apparent.

With respect to coordination of donor funding, HRF, OFDA and ECHO were seen as having well-coordinated approaches, others less so. The DEC is something of an anomaly – it is not a donor but a joint agency fundraising mechanism. Each agency is responsible for the way it spends its share of the funds raised, there is no overall strategy and no one agency ‘represents’ the DEC. As a result the use of DEC funds is not captured in agency coordination fora, and some frustration was expressed by UN coordinators at the lack of transparency about the use of DEC funds. For their part DEC members expressed concern about the need to ensure coverage of all areas in the shift from DEC Phase one to Phase two, and the linking of completed emergency projects with ongoing DRR work to prevent crisis recurrence in six months.

Physical challenges, such as lack of communications, infrastructure, poor roads, vehicles, and bad weather have limited effective response in more remote areas. Limited NGO capacity for and risks inherent in information gathering and security analysis, was also mentioned as a constraint in Gode. A number of INGOs now find their project sites inaccessible because of rain.

Detecting and responding to acute malnutrition

Nutritional early warning and response systems are relatively advanced in Ethiopia. The government primary health care network and delivery systems cover most drought-prone areas, including Somali, Oromia, Amhara and SNNP regions. These have the capacity to tackle severe acute malnutrition through community-based management of acute malnutrition (CMAM). From the 2008 drought experience, there are over 8,000 health posts implementing CMAM in most of the priority hot spots in these four regions. Coordinated by the Emergency Nutrition Coordination Unit (ENCU) as cluster lead, with support from UNICEF and other implementing partners, monthly information on admissions, recovery, referrals, deaths and defaulters is collected with 80% reporting coverage with about a month's delay. In March/April 2011, reports showed a 90% increase in admissions and led UNICEF and implementing partners (including Save the Children and World Vision) to start the response using contingency/reserve funding and discussions with donors for support.

Agencies reported that scaling up of existing developmental programs to respond to the emergency were possible because of inclusion of emergency contingency reserves in existing development programs. In addition bilateral donors such as DFID and USAID/OFDA responded quickly to requests from agencies such as UNICEF based on reports of an increase in acute malnutrition admissions, without waiting for the joint assessment results released by the government.

Agencies still faced delays in sourcing for external funding for new areas however since they needed to include officially acceptable figures released by the government on the basis of joint assessments. Most of the activities in areas where external funding had to be sought started in September 2011. Reserve supplies kept by UNICEF for the management of acute malnutrition within the country were not adequate to respond to all areas and it took time to build up the necessary stocks. Problems associated with the transport and communication infrastructure posed additional challenges to getting stocks to nutritional hotspots. Catchment areas tend to be large, meaning that beneficiaries often have to walk long distances to access these services (Gode).

Most agencies expressed confidence that their nutrition interventions were effective, and available reporting showed that in CMAM for drought affected and IDP populations, performance is within or above Sphere standards for cure rates (82%), defaulters (5%) and mortality (0.7%).

This is *not* the case in the camps in Dolo Ado, based on the unofficial results of a joint survey led by Save the Children US in early November 2011 and made available to the evaluators. These showed extremely high prevailing levels of moderate and acute malnutrition (well in excess of emergency thresholds) in Kobe and Hilaweyn camps. It remained unclear at the time of the evaluation what lay behind these figures and what the response to them would be. On the face of it they present a picture of a nutritional situation that remains alarmingly out of control some months after the peak of the refugee influx.

2.3 Quality and appropriateness of response

In addressing the issues of quality and appropriateness of the DEC agency response, the evaluators were guided by the following questions:

1. *What was the quality of agency context and needs analysis, and how was this reflected in programs? How appropriate were program choices?*
2. *How well did agency responses meet current standards and best practice guidelines in their programs? Did they adhere to humanitarian principles as per Sphere / Code of Conduct?*

DEC agencies have a high level of confidence in the quality of emergency response projects being implemented, in large part because the national partner organisations (SOS Sahel, AFD, GAYO) are well established in their own right, some of them explicitly subscribing to international codes and standards. A clear rationale for and strength of working with partners is their level of acceptance in communities, and consequent sense of community ownership of the activities. Some felt this was higher than in cases where projects were directly implemented by INGOs.

CAFOD partner assessments include a financial audit, as well as requirements for a code of conduct, gender policy and child policy; and they provide assistance in developing these where required. All INGOs interviewed provide training on standards and conduct to staff and partners, and are confident of the awareness and commitment of their own senior staff. The Livestock Emergency standards are clearly widely subscribed to by all actors in pastoral and agro-pastoral areas. For its part, the government is well aware of the Sphere standards and Code of Conduct.

Quality is apparent in the extent to which many projects have either been designed by communities or clearly reflect the priorities of affected women and men. All project sites we visited were remarkable in their consciously inclusive approaches, particularly of the most disadvantaged people in the community. Beneficiaries were able to articulate why such an approach was taken, and why it is important. We saw projects that were based on traditional knowledge, enhanced by technical engineering skills; community pride in the success of which was inspiring.

The understanding of project quality and appropriateness most strongly felt by drought affected men and women, as well as by government and NGOs, was the need for emergency interventions to simultaneously address and contribute to future resilience. Most projects seen or described placed high emphasis on its contribution to mitigating impacts in future. Humanitarian responses implemented by national partners were reported to be closely linked and integrated with development projects in environmental management, food security, and gender equality.

Several people referred to the weekly Borena zone coordination meetings as contributing to overall program quality and appropriateness, through mutually agreed working areas, collaborative approaches, and sharing of budget information. However, this perception was not shared by all; others felt the level of coordination and collaboration varied, noting that it is very good among US organisations, and that 'HINGO' is a very supportive forum. Overall, there was felt to be a good level of program coherence at partner level.

Both national and international agencies interviewed describe quite rigorous project output monitoring, including CAFOD, Oxfam Canada & Age UK/Help Age, whose dedicated monitoring officers spend a minimum of 50% of their time based in Borena. Oxfam GB has a full-time Monitoring, Evaluation & Learning Officer based there as well. Several projects include paid community facilitator positions from each community, to ensure feedback and quality. Age UK/Help Age has also strengthened partner capacity by providing partners with an Emergency Food Security and Livelihoods advisor.

Local capacity building is the priority for international staff in several agencies, and the sole focus of the Oxfam International support office in Borena. This office is staffed with public health engineering, public health promotion, food security and livelihoods advisors, as well as the above MEAL officer for three months. While there is a lot of emphasis on the quality of partner interventions, this does appear to be mainly addressed through training; however there has been no discussion among INGOs about the possibility of sharing technical training across projects.

Agencies understand the implications of different ways of working, noting that while there are advantages to working through national organisations, this does affect both the speed and quality of work. Several INGOs are taking steps to build national partner emergency response ability: CAFOD has proposed an emergency unit for GPDI at their headquarters level, with an emergency coordinator half-time in Yabelo; while its partner AFD has endorsed the idea of an emergency DRR unit. SOS has had an emergency unit for the past three years. The Oxfam International partner support office in Yabelo provides technical assistance, planning and skill building with the technical staff of each partner. One organisation stated that they were carefully reviewing partner capacity before making further commitments.

Example

A group discussion with men working on a cash and food-for-work pasture clearance project implemented directly by OGB, explored why they had decided to take up this particular activity. The men were very articulate that while pasture clearing is an activity men and women normally do voluntarily, they appreciate the support provided to keep doing it at a time when they are completely lacking in resources. They were adamant that the community does not want “free aid” – that this creates bad habits and attitudes. Rather they appreciate being assisted to do the work they need to undertake for improved livestock in future, and see that this short term food and cash provides them with a long term benefit.

2.3.1 Challenges to quality

Perceived weaknesses or possible threats to program quality centred on the lack of monitoring mechanisms for standards and accountability; that monitoring is focused on quantitative outputs and technical standards, rather than on quality issues.

The large numbers of new staff, including many completely new to humanitarian work, and constraints in delivering training to all, was seen to be a weakness. Several people also mentioned the unreliability of training as a means of raising staff awareness and ensuring compliance.

Lack of exit strategies e.g. from programs supporting the Ministry of Health was raised as a critical gap in quality and appropriateness. There are real concerns that the services currently being provided by NGOs will not be continued and that this is likely to result in a rapid return to high levels of acute malnutrition.

Finally the timeliness and accuracy of emergency assessment data was felt to be a major challenge in planning and delivering the most timely and appropriate response.

2.4 Accountability to aid recipients

In considering the question of agency accountability, the evaluators were guided by the following questions:

- 1. How well did agencies communicate with the intended beneficiaries of their emergency programs? How transparent were they about those programs & about people's entitlements?*
- 2. To what extent did agencies involve intended beneficiaries in priority setting and in the design and implementation of programs?*
- 3. What feedback and complaints mechanisms did agencies establish and how well did these work?*

On all three headings of accountability to aid recipients adopted for this RTE – communication, community participation and feedback and complaints mechanisms – agencies scored well.

For both directly implemented projects and those implemented through partners, we found an impressive ability among community women and men to explain their entitlements and how these were arrived at. There was also ready articulation of their role in project design, and consequent feelings of ownership. Men and women were very clear about who the beneficiaries were, why and how they had been selected, including why the equal participation of women was important. Projects that target specific groups, or have specific project management groups, (Age UK/Help Age) also noted that whole community inclusion in the design was fundamental to acceptance and success. Others also noted that involvement of elderly women and men helps in ensuring accountability, as they tend to be more outspoken.

The need for formal complaints mechanisms is universally recognised by all actors, and has either been introduced or is in the process of being set up for all projects visited. While we saw no physical signs at project sites, at least one organisation has developed and distributed a poster depicting procedures and entitlements.

Community members were generally somewhat less clear about where they might take complaints if they had concerns, for example, about behaviour of NGO staff, or mismanagement of a project. "We have no complaints!", was the usual response; but when probed further, recipients were able

to identify several places they could go for help, including community elders, the implementing partner, the funding INGO (both known and referred to by name), leaders, and visitors to the project.

CAFOD reported holding quarterly stakeholder meetings to get beneficiary feedback, while Save the Children said it routinely asks about satisfaction and monitors to see if there are any complaints. At least one INGO has translated the RC Code of Conduct into local language, and they are about to roll out the Code of Conduct to all development partners.

We saw evidence of creative thinking in the design of cash for work activities, ensuring women and other disadvantaged individuals were the main beneficiaries, in ways that enhanced community solidarity around such decisions. We heard about public beneficiary selection, women being given priority and encouraged to speak, and the necessary presence of INGO, community, and government representatives to ensure transparency and agreement. People receiving food and cash were clear about the temporary nature of such assistance, and that they did not want community members to become dependent on it.

Example

SOS Sahel held separate group discussions with men and women to find out whether they wanted to be paid in cash or grain. The men wanted to receive cash for work, while the women wanted payment to be made in grain. SOS then facilitated the groups coming together to explain the reasons behind their choices. The final consensus was that payment would be 50 kg of grain and 200 birr cash, with the cash being given to women for purchase of other necessary food. All beneficiaries spoken with appreciated and supported this decision-making process. At the time of the interviews, women were requesting a larger portion to be provided in cash due to the falling price of grain.

2.4.1 Challenges to accountability

Some beneficiaries were not clear about the idea that they might complain, or where they would take complaints. Some INGO staff were unclear about the concept of accountability, except as it referred to their immediate job responsibilities.

Some INGOs felt it unlikely that local partners do proactive, on-going quality monitoring once a project is underway. A recent Oxfam RTE recommended further work on accountability with partners. This evaluation also found that partners feel confident and satisfied about their level of accountability, but in practice there appear to be few mechanisms in place to ensure it.

2.5 Lessons learned

In considering the question of how agencies drew on lessons from past experience in the current response, the evaluators were guided by the following questions:

- 1. What evidence is there that DEC member agencies have learned the lessons of past drought responses in Ethiopia and elsewhere?*
- 2. Specifically, how have agencies addressed the necessary relationship between short and long term agendas in drought-prone areas?*

The following lessons appear widely recognised and subscribed to in this context:

- Emergency responses that are built on and function alongside long term development projects increase future scale up and response capacity
- Emergency response activities in areas of chronic vulnerability should make every effort to incorporate crisis mitigation and resilience building
- Communities demonstrate a high level of commitment to emergency interventions that support them for carrying out their own priority activities.

Further effort will be needed on market interventions to increase long term livelihood security for pastoralists. For example when current pasture improvement projects have fattened the livestock, encouragement will still be needed to ensure pastoralists take animals to market regularly to ensure best prices and greater economic security in hard times.

Many NGOs – particularly those engaged in direct implementation of technical interventions – lack preparedness or mitigation approaches in their emergency work. More effort might go into exploring whether longer-term risk reduction is possible.

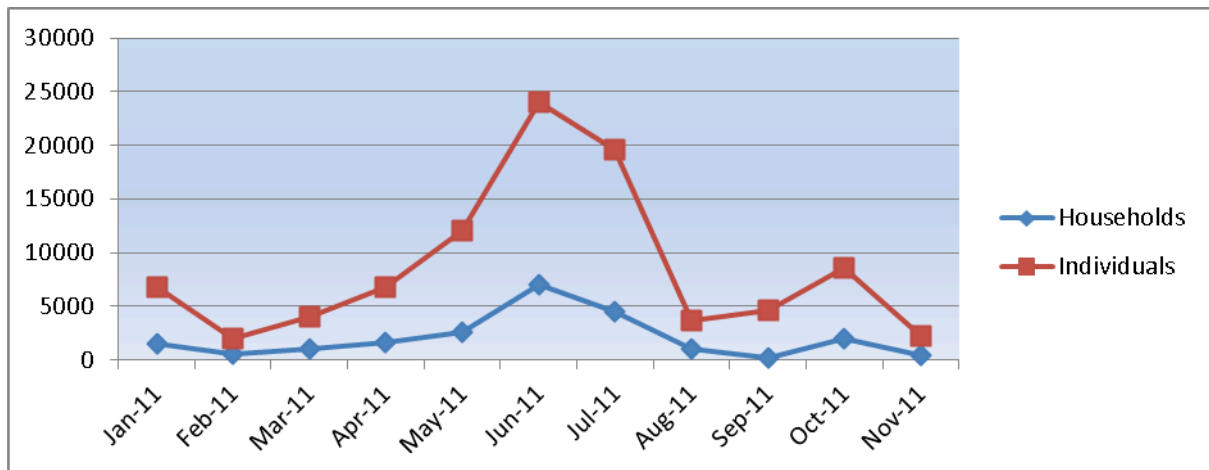
Section 3 Response to the Somali refugee influx to Dolo Ado

3.1 Background and general issues

Drought and conflict have led to the displacement of an estimated 1.7 million Somalis, of whom around 1.5 million are displaced within Somalia, with the rest crossing international borders into neighboring countries. The majority have gone to the Dadaab camps in Kenya. But conflict in south central Somalia and famine in south Somalia, particularly the regions of lower Shabelle, middle and Lower Juba, Bay, Bakool, Benadir, Gedo and Hiraa have caused mass displacement of children and women-headed households to Dolo Ado camps in Ethiopia.

The camps are around 90km away from the boarder of Somalia. Bokolomayo was the first to be established in February 2009 and currently it is occupied by 37,803 Somalia refugees. Melkadida is the second oldest camp opened in February 2010 and currently it is occupied by 40,155 Somalia refugees. The camps established since then are Kobe (25,000 capacity) and Hilaweyn (25,000). Currently the four refugee camps have reached their maximum capacity and ARRA, UNHCR and other humanitarian actors are working on the process of opening a new camp: Buramino (40,000) to reduce congestion at the Dolo Ado transit center.

Numbers of new (drought-related) refugees peaked in the middle of 2011, as illustrated by the graph below.



The majority of the displaced are women and children. Many men remained behind in Somalia to protect assets and properties or flee to seek work in towns.

Services in the camps are coordinated by ARRA and UNHCR, while much of the implementation of services is conducted through non-DEC INGOs (including MSF, ACF, IMC, IRC and LWF). Of the DEC members, Save the Children (through Save US), Oxfam and World Vision International are operational in some of the camps. Age UK/Help Age are now working in the camps through a local partner, Pastoralist Welfare Organisation.

3.2 The response by DEC member agencies

Before the large influx of refugees in Dolo Ado, in addition to overall camp management, ARRA was implementing health and nutrition interventions in two old camps, as well as being responsible for overall camp management. Then as the number of the refugees increased dramatically ARRA, together with UNHCR, called for assistance from international NGOs. Currently five UN agencies and twenty international NGOs are implementing programs in the Dolo camps. DEC funds have helped NGOs (notably Save the Children through its US affiliate) to scale up their pre-existing programs. Some agencies (including Age UK/Help Age) are starting new programs in the Dolo camps.

The influx in June-July 2011 was very difficult to manage within the existing capacities of NGOs already in the camps. The condition of the new arrivals was poor with regard to nutrition and health, many having travelled long distances over a number of weeks to get there. ARRA and the agencies provide initial meals at the overcrowded Transit Centre where all refugees are screened for malnutrition. Based on their nutritional status they are then transferred to sites where they can get appropriate treatment.

Dolo Ado remains in an emergency state. A recent survey by Save the Children US and others found levels of acute malnutrition and mortality in two of the camps (Kobe and Hiloweyn) far in excess of emergency thresholds. Assuming their figures are accurate and representative, it is shocking that such levels persist in camps (particularly Kobe) that have been established for some time and where admissions have reduced dramatically since the peak in mid-2011. The situation in the Transit camp is said to be particularly bad. The evaluation team was unable to find an explanation of how such figures could have emerged from what were said to be 'stabilised' environments. More generally, there appears to be a substantial 'reality gap' between the actual conditions in the camps as described to us by many of the DEC agencies, and the picture painted by ARRA and UNHCR.

ARRA for its part questions the effectiveness and efficiency of the response by NGOs. Certainly something is wrong when the situation of refugees remains so poor months after the peak influx. The initial international response was slower than it should have been – attention perhaps being diverted by the 'Arab Spring' events in North Africa. Only when dramatic figures for mortality and malnutrition started to emerge did the world turn its attention to the crisis in East Africa.

3.2.1 Challenges to implementation

Agencies report severe challenges to working in the Dolo camps, under the following main headings:

- **Access and communication.** Given the underdevelopment of the Somali region in terms of infrastructure, access can be difficult and the rains in particular have made it difficult to respond effectively. Access and communication are among the major challenges all actors in Dolo face. There is minimal internet access and limited phone communication with Addis.
- **Nature of designated sites.** More challenging still is the nature of the sites designated for refugee camps in Dolo. The sites are unsuitable for a number of reasons: a rock substructure close to the surface (making latrine digging almost impossible); salinity of the water sources; and the insecurity of the surrounding area, as well as the general access issues noted above. The issue has been raised by Oxfam GB with UNHCR.

- **Conflict with local communities.** This issue is particularly of concern in relation to the collection of firewood, raising specific protection issues as well as more general concerns about tolerance and good relations. Conflict resolution committees have been established in each camp to try to minimise such tensions, comprising representatives from both host and refugee communities.
- **Recruitment and deployment.** Agencies report great difficulty getting suitably qualified staff to work in Dolo, in part because of the restrictions on staff recruitment and deployment imposed by the government. Only limited numbers of international staff are allowed to be deployed, and recruitment has to be attempted locally (from a very limited pool of qualified applicants) before it can be done nationally.
- **Meeting minimum standards.** Given the burden of caring for an expanding population of refugees under the conditions noted above, agencies report that they have struggled to meet Sphere standards for e.g. management of severe acute malnutrition and WASH. Recovery rates from therapeutic feeding are very slow. Food services appear relatively good in relation to Sphere standards, yet food is in short supply at household level. The most frequently given explanation is that households are selling food to meet other priorities, raising concerns that the malnourished people (including the elderly) are not getting what they need to recover. The latest nutrition figures from Kobe and Hilaweyn indicate a serious problem here.

3.2.2 Responding to the challenges

Each agency working in specific camps and sectors has been given responsibility based on their previous experience, technical expertise and overall capacity. The assigned NGO is responsible for coordination among other NGOs operating in the same camp in the same sector. UNHCR tries to ensure each agency has access to sufficient funds. When ARRA requested more support from partners to deal with the new influx, most NGOs wanted to intervene with food-related interventions. Diversification of services has therefore been a problem. This is compounded by the very heavy selection and coordination process through ARRA and UNHCR.

All interviewed NGOs monitor their programs based on minimum standards (particularly Sphere), national guidelines and code of conducts. Each agency operates under an MoU with ARRA and UNHCR which sets out mutual understandings of the expected results from the intervention. ARRA and UNHCR conduct regular joint monitoring and supervision of activities provided by each agency in the camps. UNHCR is responsible to ARRA for implementation and quality assurance arrangements.

3.2.3 Accountability

While ARRA and UNHCR have overall responsibility for accountability to the refugees, the agencies who are their implementing partners are fully involved in helping to establish and run accountability processes. For all of the agencies interviewed, accountability was assured through reporting mechanisms to local authorities, regular meetings with different actors in the camp and feedback from locally employed community health workers amongst refugees. Most of the nationally and locally recruited staff speak the Somali language, which helps communication with refugees.

Most agencies reported that they tried to be transparent by consulting the community on service provision, holding meetings and focus group discussions. Banners are posted about child protection with details of where to report cases of violence of children and GBV (Save the Children). To help

ensure transparency and avoid unrealistic expectations, ration sizes are posted on banners. Suggestion boxes were widely distributed in the camps but feedback by this route was said to be low (WVI). Help desks had also been established at distribution sites in order to hear the complaints and questions of the beneficiaries.

The refugees themselves are the most active participants in managing their own affairs (see box below).

Role of Camp Residents in Self-Management

Refugee Central Committee (RCC) – is a resident coordination and leadership body that is consulted on multi-sectoral issues pertaining to camp life. It's made up of a Chairman, Secretary, Child Protection Representative, Women's Representative, Disabled Representative and Representatives from each Zone. Committee members are elected by camp residents. In addition to the RCC the refugees actively participate and are represented in the following committees.

- **Women's Association** - runs a grinding mill (income generation project), helps with the distribution of sanitary pads, the mobilisation of women for community projects and represents women's interests in camp management.
- **Food Distribution Committee** – provides information about food distribution to the community, monitors the scooping and provides feedback on the quality of food and the distribution process.
- **Youth Committee** – represents youth, advocates for their interests and organizes sport activities.
- **Older People Groups** – facilitated by Age UK/Help Age, responsible for ensuring that older people's needs and rights are acknowledged and met.
- **Refugee Security Committee ("neighbourhood watch")** – responsible for crowd control and overall conflict management in the camp; the committee also refers cases to ARRA and UNHCR protection staff.
- **Child Protection Committee** - works with Save the Children to assist in identification of children with specific needs and to mobilize the community's children to attend school.
- **Conflict resolution committees** - the main conflict refugees' face with the host community leaders is during fire wood collections. For this purpose conflict resolution committees have formed in each camp comprised of both refugees and host community.

3.2.4 The outlook

Though the number of refugees coming into Dolo has reduced greatly from the July peak it does not mean the emergency is over. Drought and insecurity are the main reasons for the movement of Somalis. The impact of both will continue to be felt in the medium term and there is no indication that these refugees will go back to Somalia in the near future. Indeed more may yet arrive and certainly continued assistance will be required over the coming months, possibly years.

Agencies report that 'Phase two' will follow when the situation is stable. This will be more focused on development and livelihood support, health and school water for the areas as a whole. The aim will be integration of the emergency response into a longer term development program for the area, capacity building of the local community and systems to make them more resilient to shock through

livelihood and agriculture support. Longer term planned health facilities will be handed over to the local authorities when there is capacity to run these, otherwise NGOs will have to continue to do so. As the emergency load reduces, so it is expected will the number of NGOs working in Dolo. Those who leave will hand over to those who stay.

Section 4 Conclusions and Recommendations

4.1 General conclusions

Once the situation in Ethiopia was recognised as ‘critical’ by June/July 2011, and following the DEC appeal in early July, the evaluation team judged that the DEC agencies scaled-up about as effectively as was possible in the circumstances. Although the lag in the system of government approval meant that DEC-funded projects were only really being implemented from September⁴, the knowledge that DEC funds would be forthcoming meant that agencies could cross-subsidise other initiatives and gave them a ‘head start of around six to eight weeks’, according to one agency representative. Agencies generally worked well with local authorities and with national partners, though the fact that so many international agencies were trying to work through the same four national partners, led to significant bottlenecks and problems of partner overstretch. That said, the quality and accountability of DEC-funded programs was generally impressive, with strong awareness of standards and best practice, and accountability processes that appeared to the evaluation team to represent a significant advance on practice of five to ten years earlier.

Agencies appeared to have made considerable efforts to learn from previous experience, though some loss of institutional memory was noted – partly related to short-term deployments. In particular, almost all of the DEC agencies had configured their emergency responses in such a way as to ‘dovetail’ as well as possible with their longer-term programs, in two senses. First, they were largely built out of existing programs and this was generally a strength, though it may have contributed to some gaps in coverage. Second, there was a deliberate effort to build a longer term perspective into relief operations, including efforts to enhance community and household resilience and disaster risk reduction. For many agencies, there is also a desire to *maintain* a degree of extended coverage in anticipation of future crises, rather than simply reverting to previous program scale and geographic areas. Institutional donors appear to be increasingly willing to consider funding such initiatives, though the attitude of the government is less clear. Evidently these will need to be designed as capacity-building rather than service delivery initiatives if they are to succeed.

4.2 Effectiveness and efficiency

As noted earlier in this report, the operating environment in Ethiopia is such as to make it difficult to respond quickly to new circumstances, and to do so according to the ‘standard’ international model of combining specialist international staff with teams of locally-recruited staff. There have been other constraints, including both factors external to the DEC agencies (funding, access), and internal (including management capacity). Within these constraints, the response by DEC agencies and the

⁴ A review of the 3 month reports from the agencies shows that in fact, as in Kenya, many of the projects were not fully underway until mid-October. A range of factors were cited to explain the delays.

use made of DEC funds was judged by the RTE team to have been generally effective. There are various aspects to this:

- The RTE team was unable in the time available to draw any firm conclusions about the *impact* of DEC-funded programs, which in most cases were anyway only one to two months old. The question of effectiveness was therefore judged more according to how well agencies ‘changed gear’ to meet the scale and urgency of relief needs, and the adequacy of program resourcing as well as the appropriateness of program choice (see below under ‘Quality’).
- Most agencies based their response on existing programs and partners, and this had various advantages: it was a relatively quick and efficient method of expansion, it built on existing competencies and established partnerships, and it ensured that there was a good ‘fit’ between the shorter- and longer-term programs. In many cases it involved a scale up of existing activities to cover new *woredas*. For example Merlin, which was not untypical in this respect, expanded its existing health program coverage through mobile teams from two to seven *woredas* in Gode zone, Somali region.
- This ‘do what we know’ policy, while generally sensible, may also have contributed to gaps in coverage, both sectoral and geographic – particularly in areas of relatively low program coverage like SNNPR and parts of Somali region.

As in Kenya, the main **qualification** to the judgement on effectiveness was that the overall response was *slow* and *late* – by some two to three months according to some. In general, funding was not the major constraint that it was in Kenya, though major institutional funding did not become available until May and donors were going by the stated HRD requirements. The constraints were those noted above, most strikingly the ‘lag’ in project approval by both major donors and by government – the latter taking on average about two months from the time proposals were submitted. Some of the constraints to effective scale up appeared to be *internal* to the agencies concerned. For the most part agencies seem aware of these factors – including regional management and HR capacity issues as well as lack of relevant organisational experience in disaster response – and of the need to address them to ensure more effective future responses.

There have been a number of operational challenges to effectiveness and efficiency, including variable access (partly due to rain) and security factors. Limited partner capacities, and the limited choice of local and national partners through which to conduct responses, have caused effectiveness as well as quality assurance problems. Finally, there have been major challenges of recruitment and staff capacities, in part because of external restrictions on recruitment and deployment of staff.

Recommendations:

4.2.1 DEC agencies should **review the extent to which internal rather than external factors hindered the scale up of responses in Ethiopia, and should take steps to ensure that these issues are urgently addressed before the need for future responses. In particular, internal decision-making**

processes between HQ, regional and country level should be reviewed, to ensure that agencies are in a position to make such appropriate, early responses as circumstances (including funding and government approval) allow.

*4.2.2 DEC agencies should, with other international actors, **review the extent to which external factors hindered the crisis response**, and make appropriate representations to relevant actors including donors and the Ethiopian Government to help ensure more effective future responses. Joint representations with major donors may assist in ensuring that policies and procedures are adapted in ways that facilitate an appropriate and timely response.*

*4.2.3 The factors hindering appropriate response in the **Dolo Ado refugee camps should be a matter of urgent, joint representation** by DEC and other international agencies to the Government of Ethiopia, UNHCR and other UN bodies. Better coordination and transparency between ARRA, UNHCR and agencies operating in the camps is needed. The scale and urgency of the problems in these camps merits engagement at the most senior level by DEC member agencies.*

4.3 Quality and appropriateness

In general, the quality of DEC-funded projects was found to be high, and the choice of program approach and design was found to be appropriate to the contexts concerned. The RTE team was favourably impressed with the overall quality of the programs that it was able to visit. The confidence of DEC agencies in the quality of their emergency responses was high, partly because of the credibility of their established national partners, partly because of the investment in training and awareness of standards in their own and partner staff. Monitoring of the latter was admitted to be a problem, as was the fact that partner organisations tended to be overstretched. Indeed partner delivery capacity is a significant constraint for both quality and general effectiveness. Both national and international agencies described quite rigorous project output monitoring; but there appeared to be a relative weakness in quality assurance, with monitoring focused on quantitative outputs and technical standards rather than wider quality issues. In the Dolo Ado camps, even meeting the most basic technical standards was said to be a continuing challenge.

The lack of *coordination* among INGOs with respect to their work through the same partners was recognised by most as a concern, but given the constraints placed on international actors, some saw no other ways of working. More generally on coordination, agencies describe a lack of transparent coordination and decision making as contributing to turf wars, and to a lack of clarity around partnerships, future intentions and program duration.

While the twice-yearly process of needs assessment by the government and partners is a strong one, the lack of independent assessment leads to some questions about the credibility of the resulting analysis of needs. Agencies and donors alike are heavily reliant on the government's own analysis of needs, since this determines where they are allowed to work. While agencies are somewhat freer to make their own assessment of the appropriate forms of response, this too is constrained, leading to questions about the quality and appropriateness of the programs delivered.

The aspect of project *appropriateness* most stressed by drought-affected men and women, as well as by government and NGOs, was the need for emergency interventions to simultaneously address current needs and contribute to future resilience. The Livestock Emergency standards (LEGS) are clearly widely followed by actors in pastoral and agro-pastoral areas, and this marks a significant advance on previous years. But some agencies expressed concern that they were not able to provide the level of technical support required either from UK headquarters or through regional offices. Some of those interviewed felt that there was a relative lack of attention to sectors other than food and food assistance. The HRD document itself is still heavily 'food assistance' focused, and the related mechanisms are understandably dominated by assessment of food and nutritional support requirements. Health, WASH and education probably all deserve greater attention, as does protection and particularly the issue of gender-based violence.

Recommendations:

4.3.1 *Attention needs to be given to addressing the problems caused by limited partner capacity. **DEC members should coordinate much more closely when working with the same partner organisations, and help address the problems of overstretch that this can cause.***

4.3.2 *Stronger **joint representations** should be made by DEC agencies concerning the meeting of **basic standards in the Dolo Ado refugee camps**. Donors need to increase funding to include security, communications, and host community work in budgets.*

4.3.3 *Program approaches of great complexity and contextual sensitivity, including agriculture & livestock, livelihood support and social protection, demand **consistent levels of technical support** from agencies if they are to succeed and continue to evolve. Agencies engaging in these areas should ensure that they are able to provide such consistent support, along with the social and political analysis that is the necessary complement.*

4.3.4 *Together with their national and international counterparts, DEC members should review the **sectoral balance of programming** in the current and future crisis responses, and make appropriate representations through government and sector coordination bodies.*

4.3.5 *Efforts should be made, in collaboration with UN OCHA, donors and others, to ensure that the **results of joint assessment with government result in genuinely shared analysis and agreed program responses.***

4.4 Accountability

On the three heads of accountability to aid recipients adopted for this RTE (communication, community participation and feedback and complaints mechanisms) agencies generally scored well. For both directly implemented projects and those run through partners, we found an impressive ability among community women and men to explain their entitlements and how these were arrived at. The extent to which projects visited in Borena had clearly been designed by communities and reflected the priorities of affected women and men was impressive. The need for formal complaints

mechanisms is universally recognised by all actors, and these have either been introduced or are in the process of being set up for all projects visited. It was not possible to assess how well these worked in practice.

There is an apparent link between accountability and the operational mode of a given agency. One evident strength of working with partners is their level of acceptance in communities, and consequent sense of community ownership of the activities. Some felt this was higher than in projects directly implemented by INGOs. But a recent Oxfam RTE found that while partners feel confident and satisfied about their level accountability, in practice there appear to be few mechanisms in place to ensure it.

A number of the UN agency staff (including OCHA) consulted commented that there was a lack of transparency from DEC member agencies about the use being made of DEC funds, one saying 'it is as though they see these as their own private funds'. A consequence of this was felt to make it harder to coordinate activities effectively with DEC member agencies.

Recommendations:

*4.4.1 DEC agencies should ensure that they are **transparent and proactive in communicating** both with affected communities and with other aid agencies about the use being made of DEC funds and the ways in which these are allocated to programs.*

4.5 Lessons learned

The DEC agencies in Ethiopia have clearly drawn on their own recent experience in developing their approaches to the current crisis. In particular agencies have learned that emergency responses which are built on and work alongside longer-term development projects are likely to have greater impact in themselves, to increase future scale up and response capacity, and to assist in building resilience. This is crucial in chronically drought-prone areas. Communities themselves demonstrate a high level of commitment to emergency interventions that are seen as supporting them in carrying out their *own* priority activities.

One lesson that appears to more difficult for agencies to get adopted by the wider system is that continuity of program engagement *between* crises is essential, in a context where crisis is an ever-present possibility. For example, agencies working in health question the effectiveness of interventions in the absence of government planning for continuity, worrying that emergency levels of malnutrition in particular could recur with the phase out of emergency interventions. Some progress appears to be being made with major international donors in this respect.

Markets and market interventions are clearly one area where agencies have improved their understanding in recent years, although the impact of highly variable food and fuel prices has yet to be adequately accounted for in the design of relief responses, particularly those involving food and

cash inputs. More work is needed to consolidate and generate consensus on the appropriate package of early interventions that will both help prevent the worst effects of crises like the present one, and increase long term livelihood security for particularly pastoralists. Application of the LEGS guidelines is a good step in the right direction.

One of the noticeable features of INGO engagement in Ethiopia – including the DEC members – is the lack of *concerted* action and adoption of common advocacy and influencing positions. This is partly a feature of the working environment, and the fact that the scope for effective advocacy (joint or separate) is more limited than in some other contexts. Nevertheless it appeared to the evaluation team that more joint representations on crucial issues affecting humanitarian response might yield results. Certainly many of the issues concerned deserve more joint discussion by the organisations concerned at both field and Addis Ababa level than they appear to get at present.

DEC agencies appear to suffer from some loss of institutional memory concerning their longer-term engagement in Ethiopia. Some of the organisations concerned have been working in Ethiopia for forty years, but government officials sometimes appeared more familiar with this history than agency staff. That history is surely a strength, demonstrating a level of commitment over time that provides a basis for building trust. In this regard, the discontinuity of staffing and organisational experience appears to the evaluators to be a significant weakness and a missed trick. Without the long-serving staff (national and international) that they used to have, and with relatively rapid turnover of staff, consistency of engagement with government and other actors is made much more difficult.

Finally, some of those consulted felt that an overall shift of perspective was needed from ‘crisis response’ to ‘risk management’. So far this had only been achieved to a limited extent. Some new initiatives, including new forms of risk financing (including weather-based insurance), were helping to point in this direction. But meanwhile it was felt that development programs needed to be made more adaptable to extreme circumstances, to allow quicker and smoother response to recurrent crises. A more general shift was felt by many to be required away from the use of *outcome* indicators such as nutritional data towards the use of *predictive* (risk) indicators as a basis for early intervention. The necessary complement to this was an agreed policy framework for early (preventive) intervention and specific funds to enable such interventions.

Recommendations:

4.5.1 *Design and implement appropriate ‘**crisis modifiers**’ in all development programs in drought-prone areas. This should allow for both scale up of existing programs and adaptation and extension as required.*

4.5.2 *Agencies should propose a **collective shift of emphasis from ‘crisis response’ to ‘risk management’**. This has a number of dimensions, including the adoption of decision-making and financial mechanisms that are more responsive to early warning and ‘leading’ (‘risk’) indicators rather than exclusively to ‘outcome’ indicators such as acute malnutrition and mortality. Government of Ethiopia early warning and predictive processes already provide a basis for this; but at present*

early action does not follow. Donor governments should be asked to back this approach with appropriate funding channels.

*4.5.3 Based on current and recent experience, DEC members should make a concerted effort to influence policy in such a way as to **allow the humanitarian, DRR, social protection and recovery and resilience agendas to be better integrated**. For example, scaled up social protection coverage may help meet many of the needs currently addressed too late through ‘add on’ relief mechanisms. Greater consensus is needed on the appropriate timing and form of ‘early intervention’ measures that would assist pastoralists in particular to protect their livelihoods and so help obviate the need for relief.*

*4.5.4 DEC members (with other internal actors) should make more deliberate efforts to develop and pursue **joint advocacy positions** both with donors and with the Government of Ethiopia.*

*4.5.5 DEC members should consider ways in which **continuity of staffing** can be better ensured in contexts where continuity of organisational experience is vital. This might include allowing for longer-term postings to Ethiopia of international staff and measures to enhance retention of local staff.*

*4.5.6 There are numerous example of **good practice** in relation to program innovation and accountability processes that deserve to **documented and shared**, both within and across agencies.*

Ethiopia DEC response: Table of RTE Conclusions

Area of interest	Positives	Problems and challenges
<p>Effectiveness and efficiency</p> <p>Overall conclusion: <i>DEC response effective in areas of operation, but patchy and late – largely for factors beyond agency control</i></p>	<ul style="list-style-type: none"> ▪ <i>Responses built on existing programs and partners</i> ▪ <i>Strong links to longer term programs (resilience...)</i> ▪ <i>Effective balance in use of own funds vs external donors</i> 	<ul style="list-style-type: none"> • <i>Fragmentation of INGOs & lack of concerted action</i> • <i>Weakness of early intervention (mainly due to external constraints)</i> • <i>System delays in approval of response plans</i> • <i>Neglect of some areas in SNNPR, Somali (Afdar), Afar, north?</i> • <i>Still major issues in Dolo and surrounds</i>
<p>Quality & appropriateness</p> <p>Overall conclusion: <i>DEC response generally appropriate and of good quality, though problems of assessment and delivery in some areas</i></p>	<ul style="list-style-type: none"> ▪ <i>Strong analysis</i> ▪ <i>Use of flexible and innovative approaches (mixing cash, food etc)</i> ▪ <i>Implementation of LEGS and other common standards</i> 	<ul style="list-style-type: none"> • <i>No independent assessment (due to external factors)</i> • <i>Credibility of some data</i> • <i>Problem of meeting minimum standards in the Dolo camps</i> • <i>Relative neglect of some non-food sectors (HRD very 'food assistance' focused)</i>
<p>Accountability to aid recipients</p> <p>Overall conclusion: <i>An area of strength in the DEC response, with generally good communication, participation and feedback</i></p>	<ul style="list-style-type: none"> ▪ <i>Good levels of awareness of entitlements.</i> ▪ <i>Responsiveness to expressed priorities</i> ▪ <i>Community ownership in Borena</i> ▪ <i>Complaints mechanisms established</i> 	<ul style="list-style-type: none"> • <i>Challenges to communication, community engagement and feedback in Somali region and Dolo camps</i> • <i>Lack of transparency with other aid organisations about how DEC monies being used</i>
<p>Lessons learned</p> <p>Overall conclusion: <i>Responses generally well informed and closely linked to longer-term programs</i></p>	<ul style="list-style-type: none"> • <i>Good program learning, innovation and adaptation – especially on markets</i> 	<ul style="list-style-type: none"> • <i>Discontinuity of staffing and organisational experience</i> • <i>Lack of convincing policy framework for early intervention</i> • <i>Impact of food/fuel prices still not fully understood</i>

Annex 1

RTE main lines of enquiry (used as basis for interviews)

DEC Priority 1: We use our resources efficiently and effectively

1.1 How effectively have agencies scaled up to respond in the most urgent sectors and to the needs of the most vulnerable?

- *Particular challenges and successes; time frame (sudden or progressive, to what extent it was planned for); increase in staff numbers (prop m/f); increase in numbers of people assisted; increase in infrastructure & resources. Capacity to manage extra program load.*
- *Scope of the programme, and programming limitations due to funding, access, security, other institutional constraints.*
- *Have agencies been able to achieve their expectations for this time period?*

1.2 Preparedness

- *How well prepared were agencies prepared to respond to this slow onset disaster? How well did they help communities to prepare?*
- *How is such preparedness (or lack of it) reflected in the response?*

1.3 Efficiency: to what extent have agencies developed programmes which balance quality, cost and timeliness in a reasonable manner?

Speed of scale up July => Oct. Acceptable trade-offs between speed and quality? Rate of spend; challenges to spending effectively; cost of delivery; value added relative to spend.

1.4 What evidence is there that agencies have been able to work with local & national capacity?

- *Who are the local and national partners? Govt and Non-govt? New or existing?*
- *Partnership capacities, traditional relationship, composition, level of participation, roles?*
- *Participation in local initiatives, e.g. assessments, capacity building of local institutions and communities; proactive use of knowledge/capacities of local women & men.*

Priority 2: We achieve intended programme objectives in accordance with agreed humanitarian standards, principles and behaviours

2.1 How relevant and appropriate have agency responses been to the evolving needs of the crisis-affected populations?

- *Quality of situational and response analysis: assessment etc. Use of findings from earlier assessments & studies. Effective predictive/forecasting analysis (not just status quo)?*
- *Programme choice and design follows from assessment, consultation, best practice, past lessons?*
- *Recognition of differential impacts on different groups; in particular gender analysis, impacts on women and men, boys and girls?*
- *Procedures set up to monitor the situation and to intervene in a timely and efficient manner? Indicators of ongoing situation evolution?*

2.2 Coordination: to what extent have agencies engaged in joint assessment and programme coordination processes (Clusters, working groups etc). What has been their added value?

- *Active and representative participation in coordination bodies at national/district level. Perceived added value of the participation?*
- *Participation in joint assessments and analytical processes? Sharing and use of assessment findings from own, joint and other agency assessments?*

2.3 Are programmes planned and delivered in line with humanitarian principles, standards and agreed best practice?

- *In accordance with humanitarian principles: e.g. Code of Conduct, Sphere Charter*
- *In accordance with minimum standards and best practice: Sphere Core and sectoral Minimum Standards. What gives confidence that these are being followed?*
- *In accordance with Protection best practice: GBV, Elderly, Children, Refugees*
- *What account taken of DRR, resilience-building, LRRD?*

Priority 3: We are accountable to disaster affected populations

3.1 How successful have agencies been in communicating and explaining their plans to disaster affected women and men?

- *Men & women from all groups in the affected population know about the agency, its programmes, procedures, entitlements, in a timely manner.*

3.2 What evidence is there of an inclusive approach to communities, ensuring representatives of all groups have opportunity to influence programme design and implementation?

- *Strategies and activities put in place to ensure the participation of women and men in programme*

design; design based on opinions and needs expressed by different groups the affected population; monitoring and responding to changing / evolving needs; ongoing engagement and responsiveness.

3.3 Are feedback procedures in place, understood and used by beneficiary groups?

- *Systems in place to ensure women and men can raise questions or complaints & get answers.*

Priority 4: We learn from our experience, taking learning from one emergency to the next.

4.1 What lessons from past humanitarian responses have agencies drawn on when planning and implementing this response?

- *To what extent was the process of analysis, including of constraints and opportunities, able to take into account existing tools, documented lessons learnt, and knowledge of best practice? Organisational learning in long-standing programme areas?*
- *Level of agency competency in proposed area? Added value and existing competencies of the agency, observing 'do no harm', including human and environmental impact.*
- *See e.g. ALNAP Drought lessons learnt paper*

4.2 What is the relationship between the crisis response and agency long term programmes?

- *What is the 'fit' between the crisis response and longer-term programmes?*
- *Fit between livelihood support and relief programmes? More generally between relief, social protection and development approaches?*

Annex 2

Terms of Reference

Introduction

The East Africa region is experiencing the most profound drought conditions for 60 years causing the world's most serious food emergency. According to UN reports an estimated 12.4 million people are severely affected across the region including in Kenya, Somalia, Ethiopia, South Sudan; an increase of 38% in just the last three months. The situation continues to deteriorate, and there is no likelihood of real improvements until 2012, and then only if the October rains are sufficient. By the end of 2011, food security levels in the worst affected areas in Ethiopia and Kenya are expected to ease from 'emergency' to 'crisis', but in southern Somalia it is anticipated that the crisis will continue to worsen, with all areas of the south slipping into famine.

Failed rains, or rainfall below normal levels, and recurrent droughts in recent years, have made it a battle for many households to maintain their livestock and agricultural holdings. Many have become destitute and moved to urban centres in the hope of finding casual labour opportunities. Many households have also become increasingly dependent on limited humanitarian aid, remittances from the Diaspora and on internal social supports. However, all these safety nets are drastically weakened as the world economy deteriorates and food prices increase.

In response to this crisis, on July the 7th the Disasters Emergency Committee launched an appeal to the public for funds to enable DEC member agencies to scale up the humanitarian response across 4 countries, Kenya, Somalia, Ethiopia and South Sudan. By 22 August the total raised by the appeal stands at £56 million; £32 m by the DEC and rest by the member agencies. An initial allocation of £20 m was made on 21st July 2011.

DEC Member Agency Programs

All DEC fourteen member agencies had existing programs in the region and are responding in this appeal. Twelve agencies are using DEC funds in Kenya and ten in Ethiopia. Approximately £15 million of DEC funds will be used in the first six months of the response from 1 July 2011 to 31 December 2011. The balance of fund raised will be used by member agencies over the subsequent eighteen months.

Further details of DEC member agency programs and funding will be made available to the consultants on signing the Contract of Agreement with the DEC.

Objectives of the DEC RTE:

To review Member Agencies' response to the crisis in Ethiopia and Kenya using the DEC Accountability Priorities as the basis of the RTE framework. Specific questions for consideration relating to each priority:

Priority 1: We use our resources efficiently and effectively

1.1 How well have DEC member agencies' scaled up to respond in the most urgent sectors and to

the needs of the most vulnerable?

1.2 To what extent have agencies developed programs which balance quality, cost and timeliness in a reasonable manner?
--

1.3 What evidence is there that agencies have been able to draw in and build on local capacity?

Priority 2: We achieve intended program objectives in accordance with agreed humanitarian standards, principles and behaviours

2.1 To what degree have agencies engaged in joint assessment procedures/cluster approaches and what has been their added value?

2.2 How well were agencies prepared for this slow onset disaster and how far have they been able to include the building of resilience into their response programs?
--

2.3 Are nutrition and health programs planned and delivered in line with best practice guidelines?
--

Priority 3: We are accountable to disaster affected populations

3.1 How successful have agencies been in communicating and explaining their plans to disaster affected populations (e.g. agency background, program timeliness, beneficiary entitlements and section criteria)?

3.2 What evidence is there that communities – especially women – have been able to influence program design and implementation?

3.3 How well are complaints procedures understood and used by beneficiary groups?

Priority 4: We learn from our experience – taking learning from one emergency to the next

4.1 What are the lessons from past humanitarian responses which agencies have drawn on when planning and implementing this response?
--

4.2 One key lesson from the past is the importance of livelihoods –are livelihood interventions purely immediate life-saving or have they considered the longer term implications?
--

- To review the extent to which agencies correctly identified the key risks to a quality disaster response and implemented suitable mitigating actions.
- To advise on any program adjustments or modification and highlight any unmet needs or unnecessary overlap that should be addressed in Phase two.

Timing and Resources

The field mission should take place in October/November 2011. Up to five days may be taken prior to departure for the review of agency plans and to make contact with Members' head offices. The field mission should be a maximum of twelve days duration in each country. A further week after the field mission may be taken for report writing. Time should be allowed for a workshop in the UK after the first draft of the report has been prepared.

Field Coordination:

One DEC member agency will be responsible for helping to coordinate the field mission in Ethiopia and Kenya, offer appropriate logistical support and be able to answer the consultants' questions.

DEC members, where appropriate, will ensure that key partner agencies meet the consultants and ensure the work funded by the DEC is open for scrutiny.

The lead agency will organise two meetings of the DEC agencies [or partners] in Ethiopia & Kenya; one at the start of the mission and one at the conclusion, to feedback the findings. The first meeting will enable the Consultants to facilitate a review exercise; enable discussion on the cumulative coverage and impact of the DEC response; and on the specific issues outlined above. In addition to providing feedback, the final meeting could be used to identify any program, policy, or advocacy issues that need attention and determine whether agencies are willing and able to take them forward.

Coverage

Consultants should be prepared to travel within the countries in order to cover as many agencies' programs as possible. Each agency's program should be visited in at least one country.

Other Coordination

The DEC Secretariat will

- Identify a lead agency for each country to provide field coordination
- Compile contact information in the UK and Ethiopia & Kenya for each agency
- Make available member agency program plans and budgets

The consultants will arrange their own visas, insurance and travel to the area.

It is possible that one member of DEC secretariat staff will accompany the consultant team in each country.

Report

The Consultants will be responsible for the delivery of a draft report and executive summary written in English and submitted ten days after return from the field. This will be shared with member agencies and a meeting of representatives set up at the DEC office in London with the consultants to discuss the findings prior to finalisation of the text.

The report must be confined to the specific objectives of the mission and should not be more than twenty five pages for each country, including an executive summary and map of the members operations but excluding appendices. The executive summary should include a brief narrative overview of what members have achieved as well as highlighting any issues of concern.

It is the intention of the DEC that the report will be published with the DEC assuming lead responsibility for this.

Appendices providing commentary on individual agencies' performance are welcome.

Recommendations should be based on empirical evidence gathered during the course of the mission, prioritised and limited to ten key points. This mission is not a commentary on the overall international relief effort, but a timely snapshot of the efforts and behaviours of DEC members. The report should avoid generalisations or speculation as to the possible role of the DEC in current or future emergencies. If other issues do arise, discussion with the secretariat will determine how they should be addressed.

The RTE findings are those of the authors and will be made available to the members as such. Any communication on the findings will make it clear that the report reflects the opinions of the authors

alone and not the DEC secretariat or its members. It is intended that the report will be made available on the DEC and ALNAP websites.

Consultant Profile

The DEC is open to receiving proposals from consultants and consultant agencies for either or both countries.

Each team should comprise at least one local member and demonstrate gender balance, in order that the views of both men and women are easily accessed in the field.

Consultants should be confident they are able to obtain the necessary visas to enter the countries and move around without inordinate delays.

Selection will be made against the profile outlined and the elements set out below as evidenced in the submission.

Key skills and abilities for the team

Essential

- Previous experience in the evaluation of humanitarian programs, including methodologies for engaging with affected populations
- A sound understanding of the context prevailing in East Africa
- A good understanding of the DEC and appreciation of the Accountability Framework
- A sound knowledge of Humanitarian Principles, Red Cross Code of Conduct and Sphere standards
- An appreciation by the bidder of key constraints on the use of Sphere standards and the Red Cross/NGO code
- Clear written English.

Desirable

- Previous experience of working in Ethiopia and/or Kenya

To Apply

- Interested parties should submit CVs for each member of the team (maximum of 3 pages each)
- An indication of availability [*Optimal time for the mission October/ November 2011*]
- Proposal to include evidence of how the team meets the requirements above and setting out the conceptual framework on how the work is to be undertaken
- Affirmation of acceptance to be accompanied by a DEC secretariat staff member
- Work plan and schedule
- Budget
- Two references with contact details of referees
- The DEC may wish to see substantive pieces of work.

Please email your CV, proposal and supportive documents to adevonport@dec.org.uk by 09.00 GMT **15th October 2011.**