



Bangladesh: Population Movement Mid-Term Review – Final report



 International Federation
of Red Cross and Red Crescent Societies



Front page picture: *People watch a volleyball match at the Kutupalong camp in Bangladesh for people displaced by violence in neighbouring Rakhine State, Myanmar. (Source: IFRC).*

"In the memory of an amazing, dedicated RC/RC heart:

Dr. Jeyathesan Kulasingam

Health and Care Delegate, Cox's Bazar Sub-Office
International Federation of Red Cross and Red Crescent

*We have been honoured to be part of your life. We will
miss you."*

Disclaimer

The opinions expressed are those of the authors, and do not necessarily reflect those of the International Federation of Red Cross and Red Crescent Societies. Responsibility for the opinions expressed in this report rests solely with the authors. Publication of this document does not imply endorsement by the IFRC of the opinions expressed.

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Section 1 – Executive Summary

Background and context

Bangladesh Red Cross Society¹, has assisted people fleeing Myanmar Rakhine State since early 1990. After uprising violence in 2017, massive movements of displaced people from Rakhine has tripled and even quadrupled the population in certain instalment areas, exceeding 900,000² overall displaced people in March 2019. BDRCS supported by International Federation of Red Cross and Red Crescent Societies (IFRC) and Participating National Societies (PNS), has considerably increased, with the Population Movement Operation (PMO)³, their support to the people in need in Cox's Bazar (CXB), covering 200,000 displaced people and 60,000 people from host communities over the 1,2 million estimated people in need in the area⁴.

The protracted character of this complex humanitarian crisis as one of the world's most fragile places is a fact. Working within this context of widespread and large needs while under restrictions, the humanitarian community faced challenges in providing immediate relief and save lives, then create basic services and stabilise communities and infrastructure. As time passing, there is a need to move from an emergency phase to a more long term phase, where humanitarian needs will be addressed using a more sustainable approach.

The decision to develop the One Window Framework (OWF) began in Bangladesh. Inspired by the Shared Leadership Concept, this has been developed under the strong leadership of IFRC Secretariat together with BDRCS and PNS. To support the transitioning phase, it is time to review it (in parallel with evolving needs and resources). This Mid Term Review (MTR) aims to provide a strong basis for this process while assessing the performances of BDRCS, IFRC and PNS with reference to the PMO. The MTR is commissioned by IFRC Asia Pacific Regional Coordinator and review activities from September 2017 to December 2018⁵.

Using the nine DAC criteria, the team has reviewed the 43 questions set by the Evaluation Management Team (EMT) to reach three core objectives:

1. Consider the existing and operation related mechanisms: how they were used to assess, deliver and monitor the action and how relevant they were.
2. Evaluate the results of the interventions in supporting the needs of the most vulnerable, identify what works and further orientations.
3. Analyse learning from other recent "Red" level migration and displacement related crisis responses and the incorporation of learning from them into this response.

Methods

This review was done roughly within two months (early May to early July), with 1 - a short inception phase allowing the design of the methodology; 2 – a data collection phase, consisting of the field mission where Key informant interviews and focus group discussions were held. Extended to allow proper literature review; 3 – a reporting phase, during which a wide consultation was done with all entities involved in PMO, taking back the OWF structure to present findings.

Findings

General findings are as follow:

- ✓ Work toward host and displaced communities' cohesion, using as example small scale DRR⁶ and Preparedness⁷ projects as case study. This goes alongside with the localization agenda.
- ✓ BDRCS still need to be supported for a longer period of time while upscaling to overtake PMO overall delivery (especially in term of HR, support service, planning and advocacy).
- ✓ Despite the difficulties to get consolidated figures against (based on agreed indicators), PMO has reached its overall targeted beneficiaries.

¹ List of Acronyms presented in Annex 1.

² ISCG report – March 2019, https://reliefweb.int/sites/reliefweb.int/files/resources/sitrep_march_2019.pdf

³ Defined as the RCRC Federation-wide response to the movement of displaced population from Rakhine state, Myanmar (which includes IFRC led Emergency Appeal, bilateral responses between PNSs and BDRCS and unilateral responses by PNSs).








⁴ IFRC, 1st May 2019, *Revised Emergency Appeal*.

⁵ However PMO results have been considered up to March 2019 to better feed the revision process.

⁶ Including DRC DRR mitigation project, BRC V2R project.

⁷ BDRCS/GoB joint CPP project supported by AmRC.

Response priorities

| | |
|--|--|
| <p>Health & PSS</p>  <p>RCRC emergency health response is largely commended. BDRCS has taken the lead of the transitioning from emergency Field Hospital to Bangladesh standard hospital. This transition present some challenges in term of resources to mobilize and community understanding. PSS remain a predominant need for community but also for staff and volunteers</p> | <p>WASH</p>  <p>Access to safe water, hygiene and sanitation facilities has been generally improved. However addressing water, sanitation and waste management needs in a congested environment is challenging. Movement partners have to determine what will be the most efficient way to be engaged in the next phase and mobilize HR appropriately.</p> |
| <p>PGI</p>  <p>Limited common understanding of protection framework, do not harm principles and of entire PGI sector. Difficulties to apply minimum protection standards together with gender and inclusion perspective, into a difficult environment with a small team. RCRC Movement has a unique position and capability to foster protection and principles if it is envisaged as a wider Movement shared responsibility..</p> | <p>Shelter & NFI</p>  <p>Emergency Shelter assistance and NFIs provision has reached its intended targets. There is a need to move from emergency to more midterm type of shelter assistance which is progressively done within the sector in coordination with GoB and local authorities.</p> |
| <p>Food security & resilience</p>  <p>Advocate more sustainable solutions to address needs. PMO resilience framework need further work to integrate all work done already.</p> | <p>Preparedness - DRR & Contingency planning</p>  <p>Cyclone Preparedness Programme support host and displaced communities to be better prepare to extreme weather. PMO contingency planning (CP) has well started (PMO Cyclone CP) and should be further strengthen especially by CP on relocation reviewing the already defined different scenario.</p> |
| <p>CEA</p>  <p>PMO CEA team is working well alongside technical sector to address key accountability matters such as transparent beneficiaries' selection process (i.e. SoPs for feedback mechanisms), but still has a lot to cover, including advocacy for smoother communication type of work. Having strong CEA capacities in such complex environment is seen essential for good accountability toward beneficiaries.</p> | |

Enabling actions

| Strong National Society and Unit | OWF approach - Movement coordination - accountability | Humanitarian Diplomacy |
|---|---|--|
| <p>At least 3 different programmes are ongoing at Unit level without integration, resulting in kind of confusion which is impacting the unit enhancement, well-illustrated by volunteers' difficulties of management in CXB. BDRCS known capacities to support disaster operation, might have influenced the limited investment into National Society Development under PMO. Resulting to a delayed ability to take over the PMO lead with well-resourced organizational capacities in term of structure, operation strategy linked with proper HR, procedures and resources.</p> | <p>Coordination vs partnership Despite strong work in adapting SMCC⁸ tools for shared leadership under OWF, for various reasons, wider Movement ownership of the approach still to be strengthen. Support services delivery obstacles have strongly impact programme quality. If Federation wide reporting has well improved, its relevancy is still not enough understood despite needs of transparent information sharing. Global online platform (GO platform) has limited outreach among PMO partners. If PDM findings are to some extent used to foster PMO quality, wider strategic CEA engagement could strengthen the programme.</p> | <p>In their auxiliary role BDRCS has a strong relationship with GoB which allow them to be trusted and recognised allowing a certain level of activities to key sectors such as livelihood, shelter and cash type of intervention for instance despite GoB restrictions. PMO external representation role is well recognised with a request of deeper BDRCS visibility into external coordination mechanisms (clusters) in relation with aligned strategic engagements⁹. IFRC representation and advocacy</p> |

⁸ Strengthening Movement Coordination and Cooperation

⁹ Between revised IFRC Emergency Appeal and OWF plan (to be finalised) and UN 2019 Joint Response Plan

Recommendations

Overall recommendations

Recommendation 1: Review transitional process to avoid gaps in implementation:

- ✓ Immediate review of transition plan for longer term strategy (immediate and midterm available resources).
- ✓ Review prioritization and operating model (considering added value and available resources)
- ✓ Ensure in-country-led resources mobilization (developing national resources mobilization plan)

Recommendation 2: BDRCS strengthen leadership role into PMO

- ✓ Continue OCAC/BOCA process to ensure management capacities are in place.
- ✓ Being more visible as THE national leader counterpart by playing a strong representation and advocacy role.
- ✓ Tackle PMO management issues following National Society Development plan.
- ✓ Resolve CXB unit matter to better integrate local programmes and raise opportunities

Recommendation 3: IFRC Secretariat to foster coordination role and lowering implementation

- ✓ Ensure continuity in already made commitments by reviewing the OWF Plan of action jointly with wider Movement
- ✓ Show case best practices under OWF and shared leadership to feed the global learning and support the operating model revision
- ✓ Review IFRC emergency response tools and templates to better support Population Movement type of protracted crisis.

Recommendation 4: Other Movement partners to streamline their support to PMO

- ✓ PNS pro-actively participate to transition plan, looking at their medium and long term commitments
- ✓ ICRC could use their expertise to support advice to PMO on matter impacting delivery.

Sector specific recommendations

| | | |
|--|--|--|
| <p>Health & PSS</p> <p>Recommendations BDRCS to lead the way in service delivery, constantly assessing performance and resources allocated</p> | <p>PGI</p> <p>Recommendations PMO to amplify, adapt to practical realities PGI mainstreamed approach- especially protection</p> | <p>Preparedness - DRR & CP</p> <p>Recommendations PMO and CPP to continue to expend and improve</p> |
| <p>WASH</p> <p>Recommendations PMO to build upon great work done – allocating appropriate resources to selected priorities</p> | <p>Shelter & NFI</p> <p>Recommendations PMO to move to more durable and safer mid-term shelter solutions – prefer cash type of support for NFIs assistance</p> | <p>Food sec. & resilience</p> <p>Recommendations PMO to focus on more durable solutions – linked with DRR activities and resilience framework.</p> |
| <p>CEA PMER - IM</p> <p>Recommendations PMO management to ensure calibrated support to accountability and wide reporting.</p> | | |

Annex 7 – Enabling actions for recommendations

Present concrete steps to address recommendations

Annex 8 – Lessons learned from other reviews & evaluation PMO

Quickly highlight key common trends to Population Movement crisis in the world

Section 2 – Background and context analysis

Background of the evaluation

Purpose and objectives

This MTR assessed the performance of BDRCS IFRC and PNSs with reference to the PMO. The original timeframe in the MTR Terms of Reference (ToR) was from September 2017 to December 2018; however to increase accuracy for the coverage criteria, implementation time frame considered under this review has been extended to April 2019.

The scope of the review covered the PMO actors (BDRCS, IFRC, and PNSs), in conjunction with other stakeholders, i.e. ICRC, government partners, non-governmental partners in Dhaka and Cox's Bazar (CXB). The review also takes into consideration the feedback from beneficiaries and non-beneficiaries in both displaced¹⁰ and host communities¹¹, in nine camps¹² of CXB, where RCRC multi-sectoral response has been implemented since the beginning of the response.

This report is not presenting detailed figures on sectoral and operation overall achievements, but have analysed the data from the PMO Two-year Federation-wide report (not published yet at the time of reporting), which should be read in parallel with this report.

Following consultation with the EMT, the ToR objectives have been re-organised into 3 core objectives encompassing all criteria agreed in the initial ToR:

1. Consider the existing and operation related mechanisms: how they were used to assess, deliver and monitor the action and how relevant they were.
2. Evaluate the results of the interventions in supporting the needs of the most vulnerable, identify what works and further orientations.
3. Analyse learning from other recent “Red” level migration and displacement related crisis responses and the incorporation of learning from them into this response.

Criteria used for this evaluation are:

- ✓ Relevance and Appropriateness,
- ✓ Coverage,
- ✓ Efficiency/Effectiveness and Accountability,
- ✓ Impact,
- ✓ Connectedness and sustainability.

These were covered by 43 questions, through 127 KIIs and 21 FGDs.

Management and timelines

Evaluation management, roles and responsibilities were agreed to, during the inception phase and are reflected in the Inception Report. The Evaluation Management Team gave directions to the MTR team who split the work to get the most out of the time allocated for the review.

Review management is further detailed under the ToR in Annex 2.

The MTR team relied heavily on the, IFRC, and BDRCS field teams to support the field work, KII and FGD selection and settings. Further details on methodology and limitations for this research are presented in Annex 3.

¹⁰ Refers to the population displaced from Rakhine state, Myanmar.

¹¹ Refers to the population surrounding the camp hosting the displaced population, in Ukhia and Teknaf.

¹² Camp 7 (RCEH), Camp 8w (CRC Clinic), Camps 11, 12, 13, 14, 18, 19, 26 (CPP).

Context of the Population Movement Operation

Since 25 August 2017, violent conflict in Rakhine State, Myanmar has forced more than 725,000 people to flee to Cox's Bazar (CXB), Bangladesh, in what many call the world's fastest growing mass exodus since the 1994 Rwandan genocide¹³. This follows a string of historical conflict involving alleged widespread human rights violations in Rakhine State and displacement of the same ethnic group to Bangladesh since the 1970s, with many repatriated within the next several years after each displacement¹⁴. Up until 1992, the displaced population from Rakhine were registered as refugees by the GoB, which has since stopped giving official registration and instead label subsequent displaced people as 'undocumented Myanmar nationals'. Prior to 25 August, CXB hosted 33,000 registered refugees in camps and approximately 200,000 to 500,000 additional undocumented individuals in host communities and informal settlements. Since 25 August, there continues to be groups of people fleeing Rakhine into Bangladesh as conditions remain hostile and dangerous for them in Rakhine¹⁵. Living in regular conflict and displacement has created a displaced population with exponential vulnerabilities across generations who fled Rakhine with nothing.

The added vulnerabilities of living in a protracted crisis situation in CXB has created new vulnerabilities and a complex humanitarian crisis for the GoB, humanitarian actors, displaced and host communities, with no end in sight¹⁶. Together with the host community, the total population in need has risen to 1.2 million. The more than 900,000 displaced people (52 per cent of whom are women and children) from Rakhine state has made the very poor and disaster-prone Cox's Bazar, one of the world's most fragile places, impacting the host community. The total population in Sadar, Ramu in CXB and Teknaf has quadrupled within 2 months (Aug. to Oct. 2017) with the displaced population. The ratio in Ukhia between displaced and host communities is three to one¹⁷. This has several socio-economic impacts, raising competition for available resources. In Ukhia and Teknaf, on average, 33 per cent of the host population live below the poverty line and 17 per cent below the extreme poverty line¹⁸. Tensions are growing between the host and displaced communities as competition for firewood and livelihood opportunities increase.

Since 1992, the GoB placed restrictions such as restricting movement, settling the displaced population in camps and setting restrictions on humanitarian operations to ensure no long-term settlement and to prevent pull factors through improving living conditions in the camps¹⁹. Many of these camps are built on hilly areas previously uninhabited and are prone to heightened weather-related risks during the monsoon season, such as landslides, floods, disease outbreak from flow of latrine waste through hilly terrain and is in the cyclone pathway. Poor shelter conditions due to government restrictions have also further exacerbated these risks. The repeated refrain heard from the displaced community during this review was that they had received the training for cyclone preparedness, however, many did not feel confident that they would know where to or have a place to go. There were multiple requests for stronger homes and strong cyclone-proof community centres. Restrictions placed on the camps and humanitarian operations further create a continual dependence of the displaced community on humanitarian aid, as more sustainable aid solutions such as livelihood assistance are not allowed.

This crisis is also a protection crisis. Put simply, protection in humanitarian action is about keeping people safe from harm that others may cause²⁰. During interviews with the displaced community, they recounted traumatic experiences of killing, rape and family separation. This is a protection crisis because the displaced community with their intense vulnerabilities from experiencing extreme and systematic violence, in prolonged living in poor and congested camp conditions with no durable solutions in sight are now under new and additional complex protection risks, such as human trafficking and forced prostitution.

Working within this context of widespread and large needs while under restrictions, the humanitarian community faced challenges in figuring out the amazing feat of providing immediate relief and save lives, then create basic services and stabilise the humanitarian community and infrastructure. Prior to this crisis, the RCRC was involved during the displacement in the 1990s through BDRCS, creating the Myanmar Refugee and Undocumented Myanmar Nationals Response Operation (MRRO) which continues until today. This crisis requires a large scale and sustainable response to address immediate and longer-term needs of displaced and host communities. The Population Movement Operation (PMO) is aimed at providing humanitarian assistance and building resilience across 10 critical sectors with the cross-cutting themes of protection, gender and inclusion, as well as community engagement and accountability.

From the beginning of the humanitarian response, GoB has provided rapid response and humanitarian services, represented and locally coordinated by the Refugee Relief and Repatriation Commissioner (RRRC). It has been an excellent partner in authorizing others to make appropriate changes, allowing for some level of flexibility in livelihoods, shelter and cash-based intervention. This is a partnership that has worked well since December 2016. BDRCS'

¹³ International Rescue Committee (2017). *Rohingya refugees: The world's fastest-growing humanitarian crisis by the numbers*, online at <https://www.rescue.org/article/rohingya-refugees-worlds-fastest-growing-humanitarian-crisis-numbers>.

¹⁴ Analysis Hub (2017). *Review: Rohingya influx since 1978*, online at https://reliefweb.int/sites/reliefweb.int/files/resources/20171211_acaps_rohingya_historical_review_0.pdf.

¹⁵ UNICEF (2018). *Bangladesh: Humanitarian Situation Report No. 17 (Rohingya Influx)*, 7 January 2018, online at <https://reliefweb.int/report/bangladesh/bangladesh-humanitarian-situation-report-no-17-rohingya-influx-7-january-2018>.

¹⁶ Reuters (2018). *Rohingya Crisis: One year past, no end in sight*, online at <https://fingfx.thomsonreuters.com/gfx/rnqs/MYANMAR-ROHINGYA/010072393P3/index.html>.

¹⁷ IFRC, 1st May 2019, *5th Revised Emergency Appeal*.

¹⁸ World Health Organization (2017). *Humanitarian Response Plan: September 2017-February 2018*, online at http://www.searo.who.int/about/administration_structure/hse/20171003_hrp_bangladesh.pdf?ua=1.

¹⁹ *Ibid.*

²⁰ IASC Protection Policy on Protection in Humanitarian Action 2013



auxiliary role and relation to GoB has served the PMO well in the role of advocacy for the needs of the displaced and host communities. The humanitarian response is transitioning from emergency to address longer-term needs. This has to be considered to align the response to evolving context and BDRCS (in relation with the wider Movement) strategic choices will influence the overall approach.

Acknowledging the realities of this protracted crisis is requiring all major actors to revise their funding requirements. IFRC has submitted the 5th revised emergency appeal for CHF 51 million (55 percent covered at the end of March 2019). The PMO's is looking at defining new objectives and results under an updated One Window Framework (OWF)²¹ Plan of Action to be linked to the [2019 UN joint response plan](#) (USD 920.5 million required for 2019) detailing all major sectors to be covered. The risk of losing donor interest – what some might call, donor fatigue has to be overcome. The Red Cross Red Crescent challenge will be to focus on where RC/RC adds value, optimize resources, ensure proper handover and raise funds for and with BDRCS.

As BDRCS prepares for the next phase of this protracted crisis, it may be time to review the self-assessment documents (OCAC for Dhaka headquarters and BOCA for local units), to ensure that management capacities are in place to be the partner of choice. Localisation is gaining ground in RCRC and beyond because it is a sound investment in promoting more equal partnerships and better integration with local coordination mechanisms. It came out of the Grand Bargain at the World Humanitarian Summit. In support of that concept note, the OWF illustration shows BDRCS in the middle of the Framework. That is the model to be followed. During interview, the review found that the OWF model was duplicated in the Mozambique and Ebola operations.

The importance of a Red Cross Red Crescent coordinated response cannot be overstated. The map in Annex 4 summarises the achievements by sectors until end of January 2019. The decision to develop the OWF began in Bangladesh. The new OWF plan of action (PoA)²² continue to address the needs of 200,000 people within the displaced community, but also targets 60,000 people from the host community including a potential new influx. The new timeframe of the OWF (PoA) includes longer term planning and budgets from all BDRCS and Partner National Societies up until 2023 targeting the activities within and outside of the camps.

²¹ Not released yet at the time of reporting.

²² To be released.

Section 3 – Findings²³

If the host community was welcoming the displaced people from Rakhine State at the initial stage, the complexity of the crisis and context has been easily used to raise tension. Despite the NGO forum press release, after protests of early 2019 (stating 66% of people working with humanitarian organisations in the area are from CXB²⁴), there still an impression of unfair treatment from host community side, especially for poorest communities. The rising tension was mentioned in every focus group discussion (host and displaced communities) during the review, where host community was complaining of “losing job”²⁵ while displaced people mentioned getting beaten when going out of camps to collect fire woods²⁶. Programmatic wise, reaching the 30% of targeted beneficiaries²⁷ from host communities has been mentioned as not reached yet by most of the RC/RC partners²⁸. However, BDRCS community base mobilizers and volunteers (from host and displaced communities) working together to address both communities needs and other small scale DRR and preparedness initiatives²⁹ could serve as cement between the two communities or at least increase mutual understanding. This goes alongside with the localization effort where RCRC partners have to identify together with BDRCS where RCRC intervention add the most value (compared to other actors).

The OWF PoA was designed on available support and not on systematic and aligned among partners’ measurable targets indicators. Then, most partners have set strategy and targets based on their own commitments and donors’ requirements within and in parallel to IFRC Emergency Appeal (having often bilateral and multilateral contributions). This makes the comparison between planned and achieved results not possible in a methodical way. This does not mean in term of overall target (number of beneficiaries) results have not been achieved. Under the RCRC Statement of the OWF, partners agreed on overall population targets per sectors³⁰. Sectorial progress figures below show overall population targets of OWF have been exceeded. BDRCS and RCRC partners can be commended for that, strongly contributing to BDRCS strategic 2017-2020 objectives.

Response Priorities

Humanitarian action

RCEH was run under institutional ERU setting³¹ until end of December 2018 delivering emergency obstetrics, outpatient department and general medical care for children and adults (incl. 60 beds). After joint review from Finnish RC, BDRCS and IFRC, BDRCS took the lead of the transition from an emergency response mode to a more sustained and rationalized approach of continuing the services³² with support of PMO partners. BDRCS hospital³³ (up to 10 beds only) services include Eye, Dental and surgical section, obstetrics and gynae departments. Facilities upgrading³⁴ (funded by QRCS) were still under construction during field visit.

In term of coverage, the 442,830 cases treated in RCRC health facilities and the 290,153 people reach with PSS has largely over exceed the overall target of 200,000 for the health sector (and even the 300,000 mentioned in the OWF joint statement).

²³ All numbers presented into findings are extracted from Bangladesh: Population Movement – Two-year Federation-wide report – 1 January 2017 – 31 December 2018 – to be published.

²⁴ IFRC, Rakhine Crisis Humanitarian Context update, Jan-Feb 2019 – Survey made over 102 organizations.

²⁵ As displaced people are accepting to be paid one-third of what was usual local daily work wages.

²⁶ This was raised especially by women.

²⁷ Target set by RRRC. IFRC EA target is 40,000 households from displaced and 4,000 households from host communities.

²⁸ In the OWF action plan, original overall target was 10% only (cf. precedent comment), reviewed now to 30% (60,000 people) - FWR.

²⁹ Refer to Danish RC Micro DRR projects, British RC V2R projects

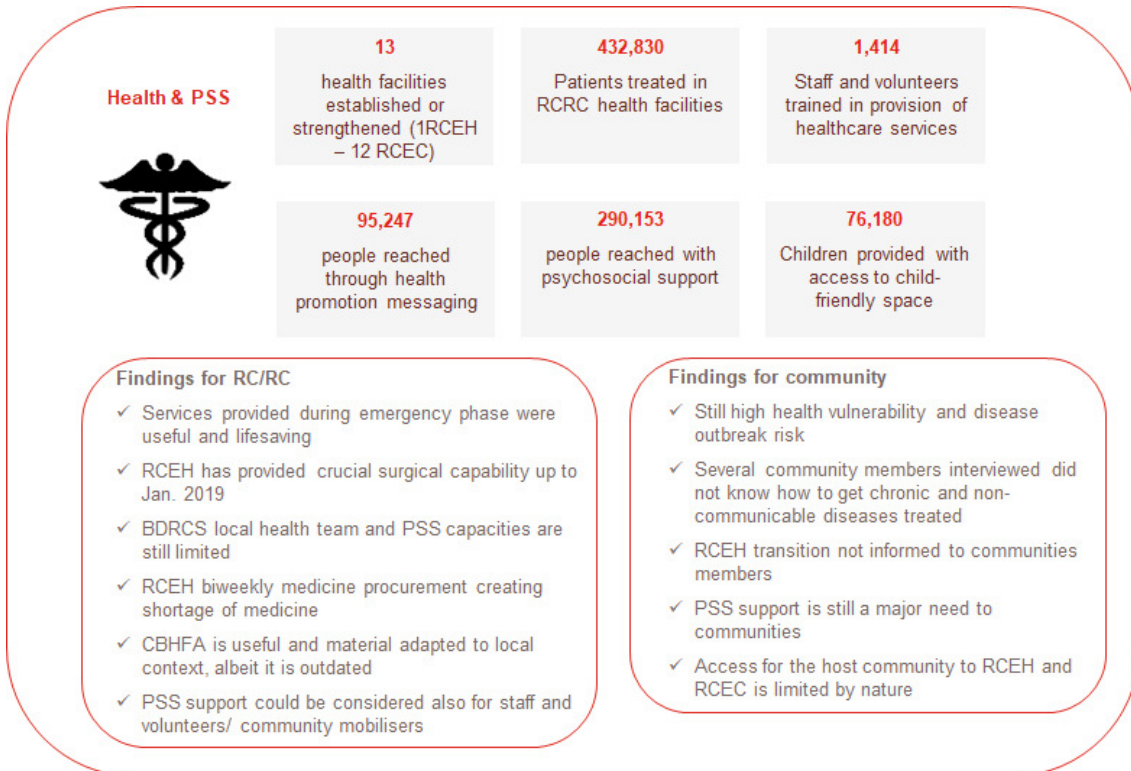
³⁰ Health – 300,000 people catchment area - WASH – 110,000– Emergency shelter 300,000 – NFIs – 240,000

³¹ Led by Norwegian RC then Finish RC with multiple partners support.

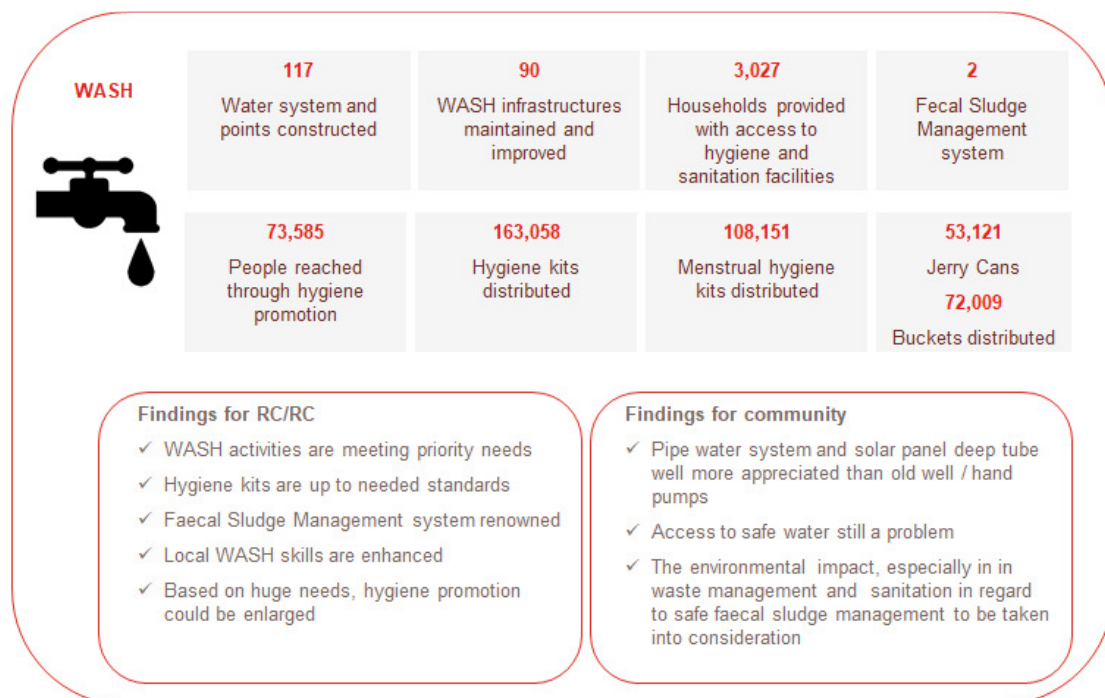
³² Federation – Wide Internal Situation Update No.44

³³ As renowned from January 2019.

³⁴ From emergency set up to sustainable buildings.



Despite a transition phase, where international doctors handed over activities to their local colleagues, the difference between services provided prior to January 2019 and after is not well understood by the communities. The difference in services delivery is explained by difference of strategy, resources³⁵, aligning RCEH on national standard. Recruiting and retaining qualified physicians and staff is also impacting health service delivery with a perception from community of declining services quality provided by RCEH and RCEC³⁶. The CBHFA manual used by community mobilisers are from material taught from a ToT in 2010 and supplemented by material from on online learning platform. No new CBHFA ToT has been taught at time of reporting. While a large amount of PSS support and trainings has been provided, the need of PSS support seem to be predominant in our discussion with communities and staff. Tendency confirmed under the UN 2019 Joint Response Plan (p 16).



It is more difficult to identify the extend of the coverage and impact on targets in WASH sector, as for example a borehole equipped with handpump could benefit to 100 household while a deep borehole equipped with solar

³⁵ In 2018, 35 international were back upping 12 national doctors, since Jan 2019 only 6 national doctors remain.

³⁶ In FGDs, beneficiaries mentioned: “whatever disease we are coming in with, they provide us with 2 pills of paracetamol. If we complain and ask for more help, we are dismissed and chased out.” Reference to the 2 pills paracetamol came in each female group discussions.

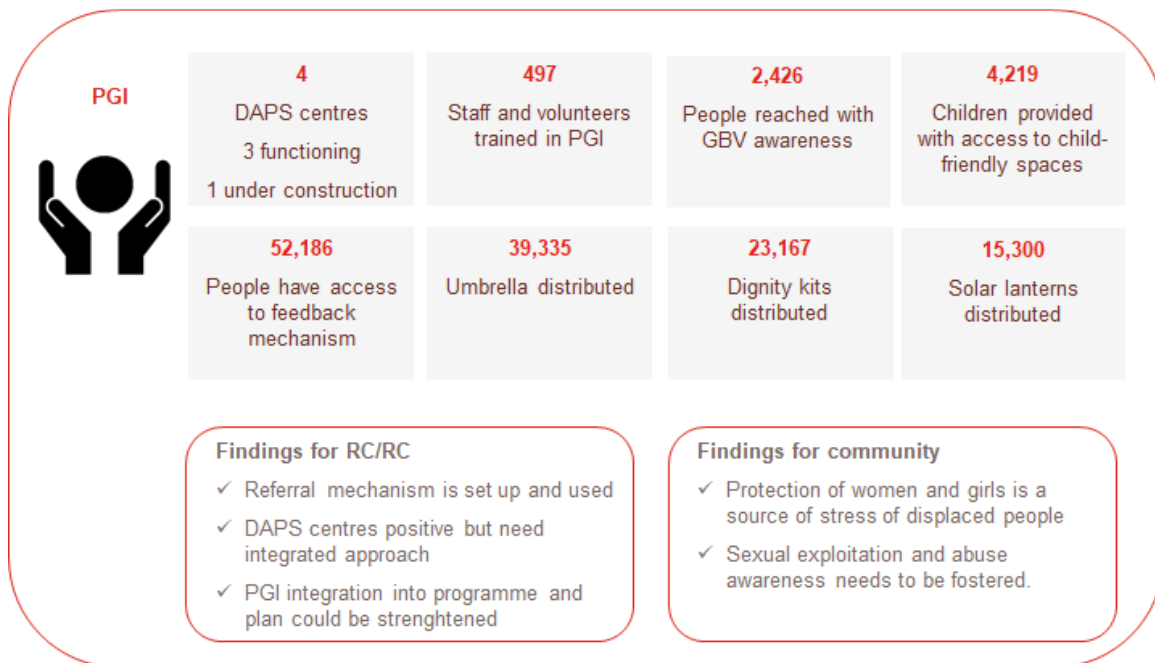
pumping could provide water to 20 tapstand and 2,000 households. Similar type of example could be given with hygiene and sanitation facilities. However the overall beneficiaries' target of 110,000 (as per OWF joint Statement) could be somehow considered reach while taking into consideration the 163,058 hygiene kits distributed.

In close coordination with WASH cluster, PMO has provided access for a more sustainable safe water for the population, by putting in place a water system and maintaining/improving existing system. After the emergency phase, where water was distributed using rudimentary mechanisms (water trucking, household water treatment, batch chlorination), preference was given to deep production boreholes and pipe network (including tap stand pipe network). FGD emphasise the practicality of pipe water system and solar panel deep tube well. However the access to safe water still difficult due to geographical context³⁷ and protection of sources. Meanwhile, lack of space is deeply affecting ability to construct new boreholes.

If local WASH skills were enhanced (community mobilizers and volunteers), a wider use of BDRCS trained WASH expert and volunteers will have benefit to develop WASH skills and cover the needs in CXB³⁸.

If the access to hygiene and sanitation facilities³⁹ has been improved under PMO, beneficiaries expressed concerns on secured access especially overnight (lack of light and slippery access) impacting the most vulnerable. A large effort has been made on MHM⁴⁰, but disposal management is an issue as well as overall waste management.

Within 18 months, IFRC built 2 FSM systems, a pilot one and one built by ERU and handed over to BRC on May 2018. BRC has also FSM with lime treatment through which significant quantity of faecal sludge has been treated from the very beginning, however wider plan for safe management still need to be taken deeply into consideration.



The major finding under PGI is related to a limited common understanding of protection framework and do not harm principles. Applying protection minimum standards in a context of an almost million displaced population crowded camp is crucial and can hardly be handle by a small team together with gender and inclusion. This has driven the team to exhaustion and need to be taken into consideration for further planning. Some work started to evaluate needs through anti-trafficking assessment and training which should be further strengthen and considered into next planning phase.

The DAPS centres are multi-purpose centres and serve as activity centre, or a community space. They are entry point for awareness raising sessions, protection, referral mechanisms and outreach related activities. They are used as safe space for children with daily activities organised by trained staff and volunteers. However during field visit, some lack of concertation in the sector was clearly point out⁴¹, not optimising opportunities and resources used. This could be linked with the absence of needs assessment⁴² and joint planning. This is not helping mutual learning, as per example how Swiss RC and TRC are integrating PGI into respectively 5 and 4 different sectors.

³⁷ Often water has to be collected "down the hill" which is harder for women, girls and older people, slippery in rainy season.

³⁸ As point out in MTR sector KII related interviews

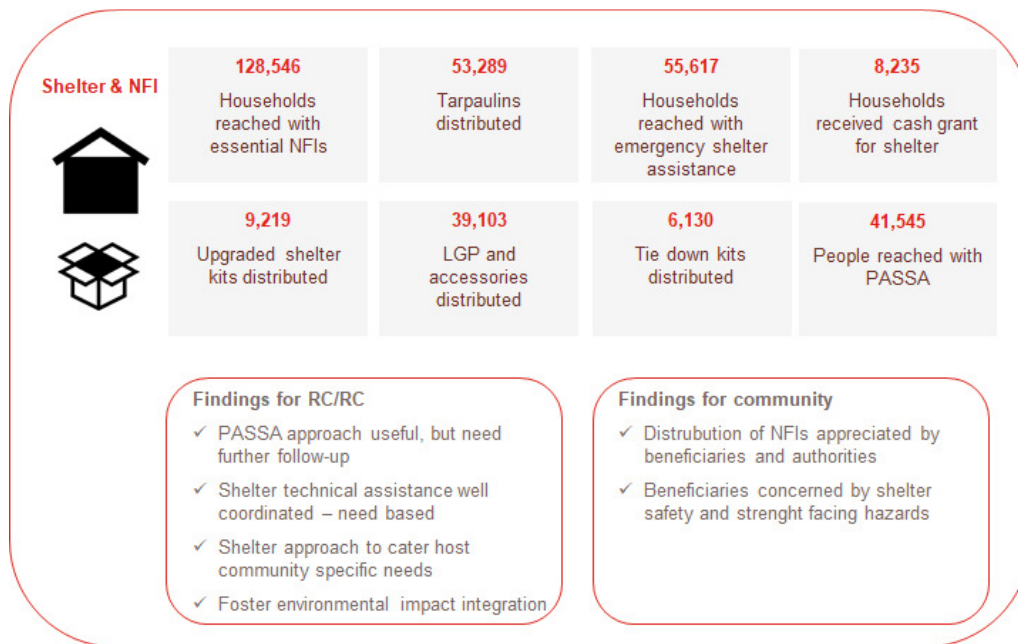
³⁹ Including bathing facilities, and toilets.

⁴⁰ Including distribution of 76,246 non-RC MHM by BDRCS as part of their auxiliary role.

⁴¹ In centre construction as example.

⁴² As stated in interviews.

As per PDM survey, dignity kits were relevant to beneficiaries and they were overall satisfied with solar lanterns⁴³. If umbrella are useful and visibly used to protect from sun and heat, their relation with PGI type of intervention is questionable. This illustrates again the need of joint assessment and further analysis to rationalise approaches.



Here again the cover and impact of the operation in term of target is not evident to define. MTR consider the overall population target of 300,000 beneficiaries assisted with emergency shelter is reached (considering the first numbers of the figure above and counting 5 people per household).

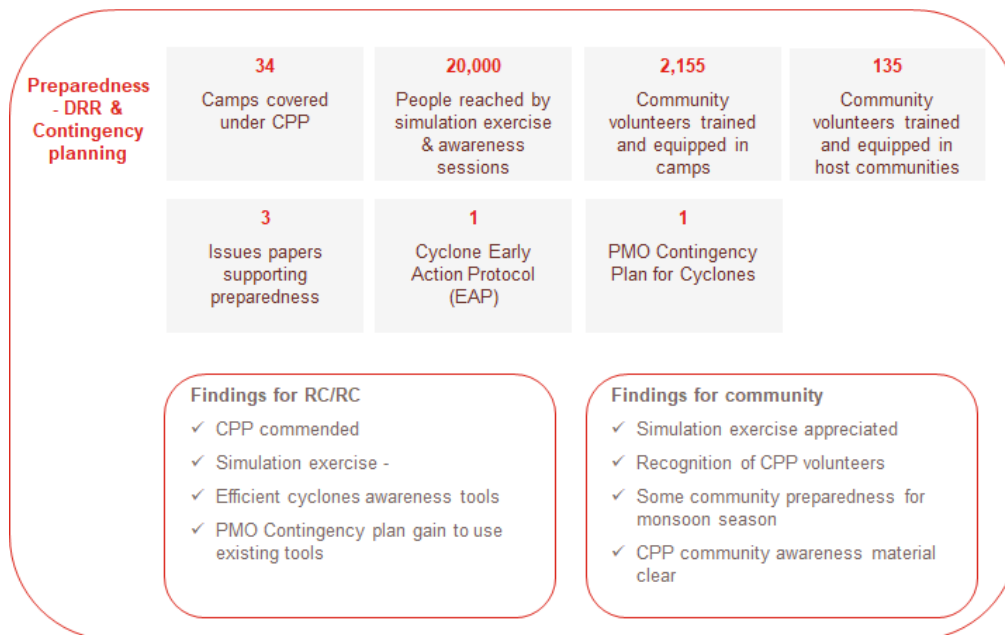
In an acute humanitarian needs environment, NFIs distribution is an important immediate assistance for both displaced and host communities. Coordination in shelter is largely recognised as well done (internally and externally) and should continue to adapt sector approach to needs such as approach of semi-permanent shelter⁴⁴. This consistent approach should address the communities' safety concerns regarding the strengths of the temporary shelter in relation with hazards (landslide, floods, winds⁴⁵) and adapt the approach to specific needs. As example, the 100 host community household cash grant support is more efficient than building temporary shelter for them. In that sense, the PASSA approach is really efficient and allow to raise preparedness awareness with specific activities (tie down kits). A particular attention to fire risk should be given especially in relation to LGP distribution and associated risks.

⁴³ Despite need of additional items and regular replenishment for dignity kits and 6% of solar lanterns not functional.

⁴⁴ Design discussed and agreed with RRRRC and sectors' partners

⁴⁵ 2 year – Federation Wide Report (to be published).

Preparedness for response



The CPP is a long-standing joint program of the GoB and BDRCS providing a robust cyclone early warning system, evacuation assistance, first aid, search and rescue. Under this project and in relation with PMO, volunteers have been trained within host community through units and in all camps. The level of preparation in the last simulation was appreciated by GoB, humanitarian stakeholders⁴⁶ and communities, giving a high profile to RCRC Movement. Trained volunteers and community mobilizers are keen to be responders and can count on good awareness tools developed. Together with host community members, they carried some preparedness for monsoon activities for shelter/housing preparedness⁴⁷ under PMO.

In term of planning for disaster response, the cyclone Early Alert Plan is clear and has been effectively activated during cyclone Fani alert (April 2019)⁴⁸. Despite PMO Contingency Plan for cyclones being tested couple of times, it appears during interviews, not all Movement staff and volunteers knew their role in such circumstances. This might be strengthened with the developed resilience approach.

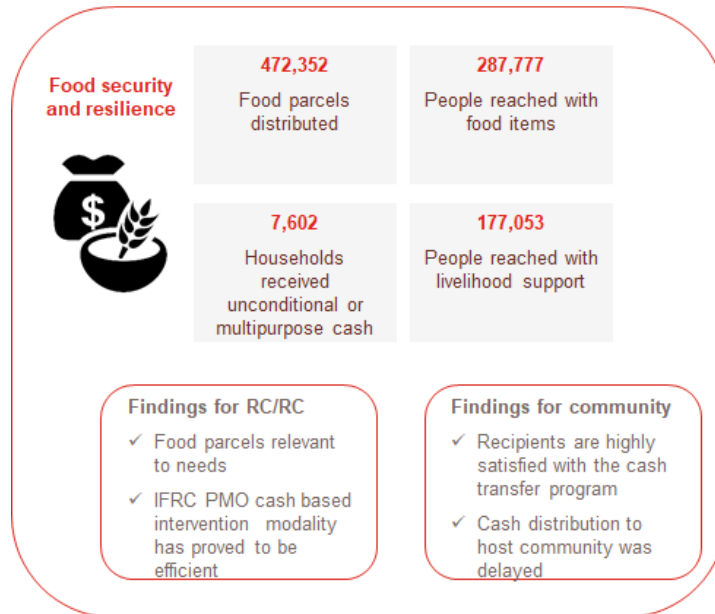
It seems a Contingency plan for epidemics is existing but MTR did not have access to it. Potential scenarios for relocation have been drafted, further work should be done to foster advocacy on a well-defined common vision and approach (as started already under Humanitarian Diplomacy work).

⁴⁶ From interviews discussions.

⁴⁷ Roofing ties.

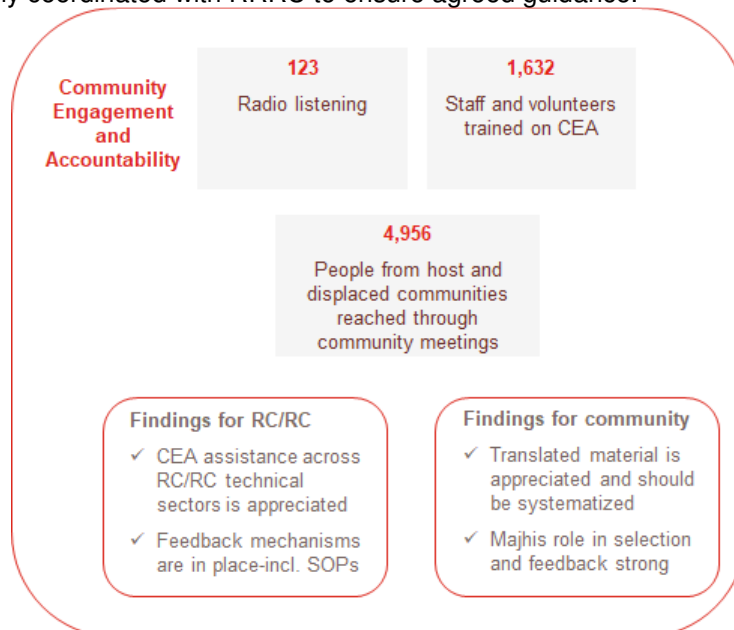
⁴⁸ <https://media.ifrc.org/ifrc/2019/06/05/bangladesh-forecast-based-financing-helped-communities-prepare-cyclone-fani/>

Community Resilience



Initially, BDRCS with the support of IFRC distributed full food parcels (29 kg) which included 25 kg rice, soya bean oil, semolina, pulse, sugar and salt. However, since World Food Programme has agreed to provide rice to all the people in the settlements, BDRCS has revised its food parcels specification to only distribute supplementary food parcels (lentils, sugar, semolina, salt, oil) as to complement WFP rice distribution. Complementary food parcel also includes one-time Ramadan package and nutrition food value pack. Nutrition Food Value Pack (NFVP) has been distributed specially targeting vulnerable population such as under 5 children, pregnant and lactating women, and elder people. NFVP recipients (100%) were highly satisfied⁴⁹.

Despite delayed start in host communities⁵⁰, PDM 2018 overview also emphasize beneficiaries' satisfaction of cash type of intervention. IFRC MoU with Post Service, using IM system for transfer was recognised as one of the best options. However, PNSs and other humanitarian actors could not access similar modalities and it is impacting their ability to support beneficiaries in similar way. A potential solution mentioned by PNSs envisage cash vouchers. Solutions should be closely coordinated with RRRRC to ensure agreed guidance.



CEA ensured the selection process is transparent, i.e. by sharing specific selection indicators (in line with RCRC Movement policy) in collaboration with local elected public representative (from HC) and targeted community as well. Before distribution, BDRCS displayed the mutually selected recipients on boards. There are however some limitations

⁴⁹ IFRC, PMO 2018, Post Distribution Monitoring overview

⁵⁰ Due to difficulties of intervention modalities

in term of aids' constraint, allocated budget/fund for intervention in comparison to the community size. Most of the beneficiaries encountered did not understand or were not aware of criteria and were not aware of those boards. In that perspective, formalised feedback mechanisms with SoPs is in place under PMO since Feb 2019. As needs are widespread, beneficiaries' selection for distributions are mostly "cover blanket", using RRRC list without detailed selection criteria. Only WASH, LPG, cash and shelter (own land of host community) have specific criteria. Consultations for selection are done with CiC, Majhis and site management. In CIC office the process is clearly defined, and a prudent modality is followed. This is recognised by PMO programme managers as not the best and reliable option. As Majhis have been involved in programmes and day to day activities, some allegations of corruptions were raised by humanitarian agencies. CiCs requested all stakeholders to better control Majhis' involvement into programmes. This is not an easy task as Majhis are culturally the "door keeper" of any community. The attempt to precise selection criteria into revised EA is good and needs to go beyond EA to the entire OWF partners.

During interviews, having CEA person since the beginning was qualified efficient to allow better information sharing. However under this operation, CEA is used more as an advocacy tool rather than as a strategic one to nourish decision making. PMO will gain to have this systematic approach.

Enabling actions

Strong National Society and Unit

Unit enhancement

Virtually in every discussion at which the relationship between Dhaka HQ and CXB Unit was brought up, was described as a "deadlock". The level of political animosity seems to preclude near term resolution. The volunteers were first responders and should be given a special thanks and acknowledgement for that. ICRC worked well with them in border area of Konarpara, in Teknaf and CXB Sadar Upazilas. Currently at CXB, there are three different BDRCS entities running activities in the same areas: Unit, MRRO and PMO. RCY volunteers are working on long term development activities with HC. MRRO volunteers are working under UNHCR lead for food and NFIs distribution with displaced communities. While PMO has paid community mobilizers (with BDRCS salary package) and not paid community volunteers (incentive only), working in camps (from displaced and host communities). If CM are not volunteers but paid staff, they are often mistakenly refer to as volunteers (from external and internal actors). Internally, BDRCS with partners need to clarify what role each entity has and what are the differences, as it is clearly confusing external actors as well as volunteers and staff themselves. Ensuring everyone is aware of the existing guidelines for Community Volunteers Deployment and Volunteers and Staff mobilization will help. There are approximately 50 community mobilizers, 300 RCY and 1000 community volunteers involved under PMO at the moment.

This volunteers matter illustrates the confusion created around the 3 different entities which is directly impacting the sustainability of the branch (unit) development. While addressing the needs to respond to a protracted crisis, the Movement have to focus on the sustainability of the response. The Unit has to be integrated into the PMO (or reverse) to optimise the use of resources. In the long run, some support is available to strengthen the Unit which could also decrease the nurtured confusion. As per example, the setup of new office, emergency stocks and warehouse is willing to be supported by partners, but there is a need to finalise decision on allotted land and clarify decision-making chain.

BDRCS enhancements

BDRCS has a great capacity to support major disaster operations. There is a need for resource mobilization to allow the NS to sustain their role as a leader in this operation. They will have to continue demonstrating that they are a great auxiliary and partner to the Government.

In the transition plan, designed by IFRC secretariat⁵¹, BDRCS was due to significantly increase HR capacities and engagement in PMO to take over most of IFRC led field activities, over a 6 months period early 2019. After September 2018, BDRCS has made a lot of improvement particularly in HR but still there is gap when compared to expecting delivery and workload. The phase out of IFRC delegates at the end of June 2019 is seen in that matter too early, as BDRCS is still relying on those HR for technical support in the field. As per example, in WASH sector IFRC PMO positions will go from 7 positions⁵² down to 3 and the 10 staff provision for BDRCS PMO is not fulfil yet. In the meantime, PNSs are also phasing out. This will obviously impact the delivery⁵³. Similar example could be found under each sectors.

Staff recruitment for BDRCS has been a hassle for the entire delivery period considered. In the initial phase the deployment of experienced NDRT and HQ staff has well supported the implementation, but increased the turn over and significantly placed undue burden on staff and system to process and train these staff in and out. It is true that there is a high competition among partners on recruiting qualified and experienced staff and volunteers. This together with the current policy allowing to hire locally only staff below BDT 50,000/month pay grade, has not permitted to

⁵¹ Draft decision paper – March 2019

⁵² Delegates and national staff

⁵³ Notes on Bangladesh PMO Operation – Transition Plan May 6th, 2019

attract local management level talents. In addition, BDRCS salary scale is considered low in CXB labour market. It is a matter of concern to see only little improvements on recommended enabling actions under the Internal review – Bangladesh Population Movement Operation 2017 such as: 1) Install a BDRCS fast - track recruitment procedure, applying a fixed - contract model , considering the competitive job market situation 2) Delegate the recruitment of BDRCS field personnel to the CXB level. 3) Consider aspects of ‘duty of care’ for BDRCS staff and volunteers in the PMO.

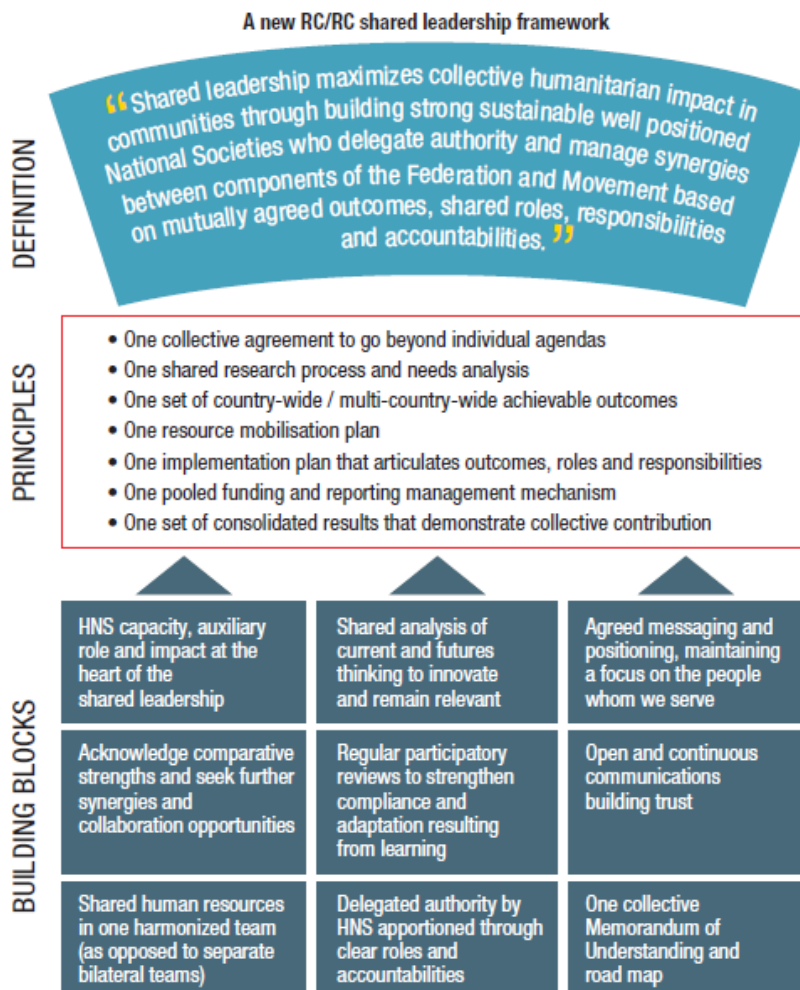
IDB project is seen to start funding transitional phase aligned with its objectives and targets. However, there is little evidence that PMO connections between this new programme and PMO are matured enough. A special attention should be given of not creating another standalone programme/entity in CXB.

BDRCS has reason to believe that PNS’s were going to participate up to 5% to assist with strengthening them by the end of the operation (NSD commitment). In addition to that, based on budget analysis, the NSD type of activities funded under the PMO since two years seem to not have exceeded 2% of the total expended funds⁵⁴. PNSs required to BDRCS without success, some NSD plan to participate to it. This commitment to NSD would have made the upcoming transition easier.

One Window Framework approach/ Movement coordination and accountability

Coordination vs partnership

A lot of work has been done to frame the RCRC Movement coordination under PMO, using and adapting global tools such as the shared leadership framework of the Strengthening Movement Coordination and Cooperation (SMCC) initiative⁵⁵. Figure below present the global SMCC framework which has been adapted under this operation.

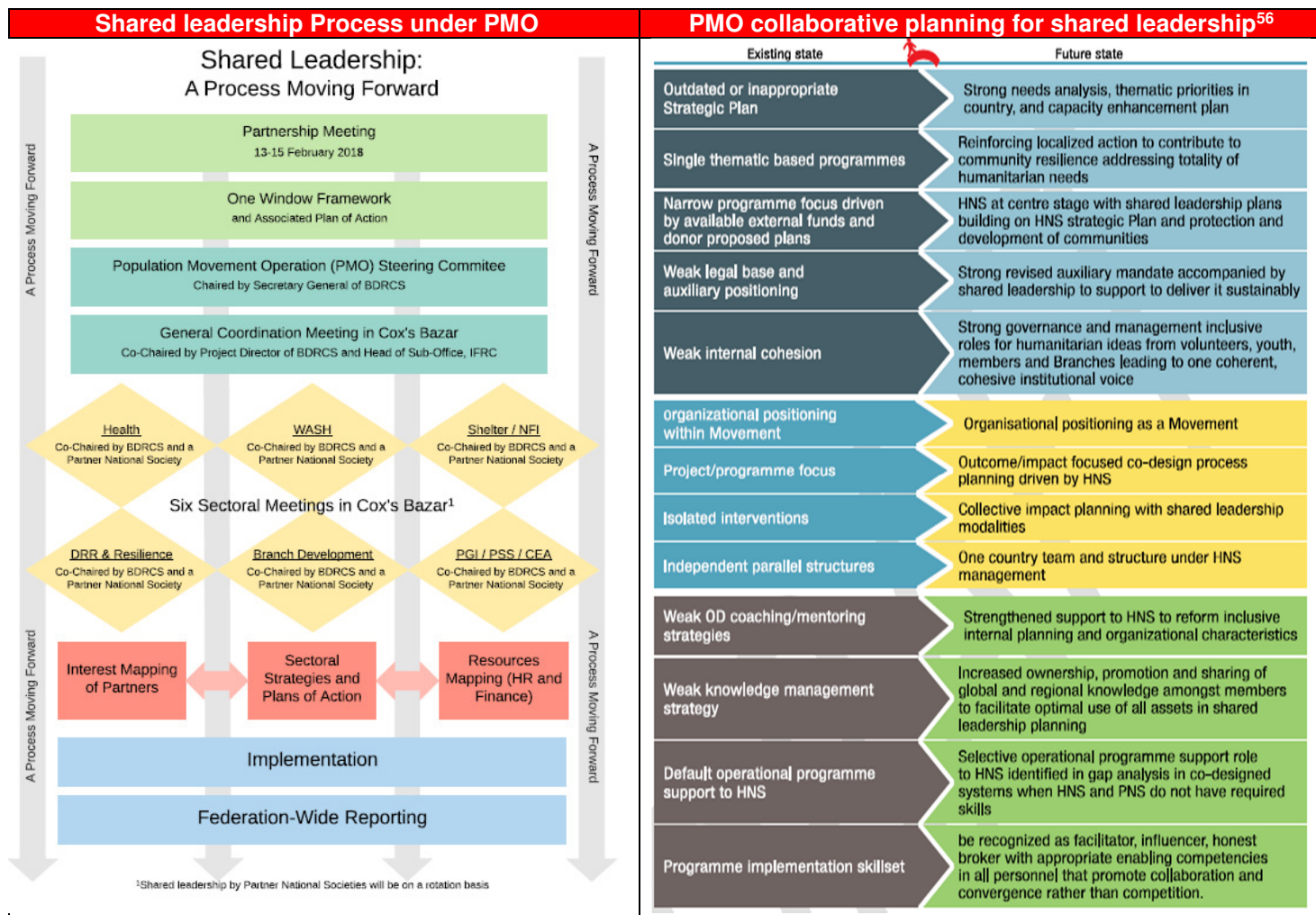


From MTR literature review and interviews, work has been done under most of the 7 Ones principles. Adapted building blocks have served to frame the in-country approach, steering and coordination committees ToRs. It should be noted that difference between those three above mentioned documents might be confusing and wider approach will benefit for alignment of in-country building blocks. In-country shared leadership process with collaborative

⁵⁴ As of end of December 2018

⁵⁵ IFRC, Final report, Shared leadership to strengthen humanitarian impact, Shared leadership initiative phase 2, Dec 2017.

planning has been designed (figure below). Outcomes progress indicators, might be in the updated OWF document to be released soon.



The rotation basis of the share leadership might be difficult to activate. Following example illustrates this difficulty: MTR has received several different answers for the definition of the OWF and its utility⁵⁷. A named leadership with concert standards partnership and operation modalities (as per Steering Committee building blocks 2) will surely better support the process.

If Federation wide reporting system has improved information sharing on monthly basis, it could be further strengthen (refer to section below) with working on this operation modalities.

Accountability, transparency and quality programming

IFRC services to PNS's under PMO, included Partnership meetings, support services like logistics, status agreement, conveyor role and problem solving. There were a few incidents that might have jeopardized RCRC legal status in country. By enlarge the hybrid approach of working through the IFRC system some bilateral work can function. However, this require IFRC to be strongly focus on coordinating all entities together rather than implementing to ensure the rules of engagement are adhered to. That includes reporting to the secretariat, fully and on time. For instance, on Federation Wide reporting, consolidated figures are hard to obtain from some PNSs, but all PNSs continually go to IFRC Secretariat for information and appreciate the systematic information system. The one-year Federation-wide report only had 8 PNSs (out of 31 that contributed to PMO) contribute data, and was therefore not published as it was not representative. The two-year Federation-wide report had significantly wider contribution of data from 23 PNSs after closer coordination between IFRC PMO with larger long-term capacity and IFRC APRO with PNSs at both in-country and HQ levels. In addition the OWF document highlight population targets as main overall indicators. Sometimes differing from the core of the text and annexes⁵⁸. The PoA is a list of activities and no clear concerted targets are defined which cannot allow proper monitoring. The result- based planning and comprehensive

⁵⁶ Extracted from shared leadership approach for the CXB Operation in Bangladesh, draft document

⁵⁸ i.e. Shelter sector overall target in core text is 200,000 while in Cox Bazar Statement (in appendix) it is 300,000 for emergency shelter and 240,000 for NFIs.

progress tracking process planned under OWF document is not developed yet. Therefore each sector and partner have defined their own targets which is impacting reporting consistency.

As correct and timely information is cited as a gap and need by PNSs who report to back donors and BDRCS who is the main implementer, there have been requests for a Federation-wide dashboard (with financial and programmatic data) to ensure that all Federation-wide partners are aware and reduce duplication. This could be integrated somehow with IFRC GO platform⁵⁹, not just PMO. This is a higher level decision and could be reported back to SMCC.

To some extent, PDM have been used to improve quality delivery⁶⁰, to advocate and update sector strategies. However the use of learnings and recommendations from PDM findings to improve quality could be systematized, by prioritising at coordination meetings, not depending solely on sectors leads, insuring documented tracking or follow up mechanism. The IFRC PMEAL position will be left empty after June 2019 with the rest of the PMER team in BDRCS⁶¹ and IFRC focusing on reporting, IM and resource mobilisation, this will fall under the CEA portfolio, increasing pressure on a small dedicated team.

Humanitarian Diplomacy

BDRCS auxiliary role

The Operation benefits from the very close ties between the BDRCS and Government of Bangladesh. That strength removed barriers and allowed for a smooth operation. At the same time, it will be important for BDRCS leadership to celebrate the great auxiliary role enjoyed. With such a strong relationship, BDRCS leadership is well positioned to clarify and explain to GoB, the strategic difference between being a part of government and a partner to government. The Humanitarian Diplomacy work done under PMO has contributed to start this conversation. However follow-up HD trainings⁶² should be provided to all governance and management leadership in Bangladesh with related HD work. BDRCS has a crucial role with defining further their position on repatriations and relocation using the work already done with the issue papers and scenarios designed. But also working together with the wider Movement on how to address protection related issue into protracted Movement Population crisis.

IFRC representation role and advocacy

To a large extent, the Movement is coordinating well with external partners (such as government authorities, ISCG and other agencies), however internal coordination differs according to sectors and levels. The Movement partners had great relationships with the external coordination bodies ensuring connectedness and sustainability. Major partners, IOM, OCF, MSF, Oxfam, UNHCR, all worked in seeming harmony. As IFRC is a standing observer invitee to IASC represented by ISCG as the “cluster” tier. There is an impression of IFRC and by extension BDRCS, tended to lay back in their observer type of role during meetings. This tendency is less assertive when PNS are playing a “lead” sectorial role. In several mentions, the message is that RCRC and BDRCS has to be more assertive and present for localisation and sustainability reasons.

While the UN is interested in developing stronger information sharing mechanism and investing more in HD processes, the Movement's role and contribution in these two areas could have been stronger, especially in more ambiguous sectors (to the Movement and Government) like PGI⁶³. If IFRC revised EA outlines some of the strategy engagements which are in line with UN's Joint Response Plan (JRP) a more robust plan and strategy correlate to this JRP could be foster to optimize support opportunities to beneficiaries.

IFRC has not limited early warning and preparation system for Population Movement crisis and the collective Federation-wide system was and still is not prepared for such crisis. Every PMO around the world seems to be unprecedented. With the PMO in Cox's Bazar, the large scale has understandably overwhelmed the humanitarian system and no amount of early preparation would have fully prepared the system to face such a huge challenge. However, we also have to recognise that this is and should not entirely be a surprise to the Movement. The persecution and flight of displaced people from Rakhine State in Myanmar started in 1970s and the Federation has experience dealing with it through MRRO. Despite starting the response earlier in January 2017 with the IFRC Appeal and having a strong presence in Myanmar, the Movement could have used its advantage to solidify its strengths and strengthen advocacy with the Governments in both Bangladesh and Myanmar. In that context the Humanitarian Diplomacy work under PMO seems to be crucial and should remain in longer term phase. This should be strongly instituted at regional and global levels.

⁵⁹ <https://go.ifrc.org/emergencies/2>

⁶⁰ i.e. Hygiene Kits PDM to improve kits

⁶¹ Only based in HQ

⁶² Initial one was provided by HD delegate in December 2018

⁶³ Refer to findings under PGI and related recommendations

Section 4 – Recommendations

Overall recommendations

Here under are presented the main recommendations, the table in Annex 7 is taking them back and articulating key steps to address them, adding details on tangible actions to activate those recommendations.

Recommendation 1: Review transitional process to avoid gaps in implementation

The matter of planning, strategic direction, coordination and NS Development to enable BDRCS to better face the protracted displacement crises is a hard call. Because this unexpected crisis was made even more complex by decisions outside of the purview of IFRC or BDRCS. Not officially recognizing the guests as refugees hampered planning, strategy and NS development. Only recently has it been possible to start looking at this as a three to five years endeavour. It is late. However, the IFRC can and should rally to ensure that BDRCS has strong support in building a strategy for this crisis and future disasters.

- ✓ **Immediate review of transition plan and longer-term strategy** (BDRCS, Federation/PNS)⁶⁴

Proposed transition plan from response to longer term, should be reviewed ensuring it is well reflected into the new OWF plan, to prioritise available wider Federation resources - HR wise, funding (ie. IDB) and priority field support and actions. BDRCS management should guide partners through their priorities to allow them to orient dedicated support. After addressing above gaps, BDRCS takes a leading role in standardising the commitment to OWF as a requirement to operate in Cox's Bazar. This should include how to operate with the Unit, with milestones and management system agreed and in place.

A strategic plan is required to prepare for the next three to five and perhaps ten years. The Federation's brightest and best should be deployed to assist BDRCS leadership with planning and NS development for the immediate and long-term future in Cox's Bazar and throughout the nation. The Secretariat has expertise and experience in change management. BDRCS has to be in the centre for designing this position and for all decision making process, which need to be open to allow ownership and buy-in of all partners. To ease the transition, such a new kind of delegate would seem appropriate.
- ✓ **Review prioritization and operating model** (BDRCS, Federation)

BDRCS with support from the Secretariat and in discussion with partners, must choose those things it can and will do to support this operation. As importantly, BDRCS must decide what not to do. Here are some initial guiding questions for this analysis:

 1. Considering community needs, the fair amount of investment in specific sectors and wider humanitarian engagement, should BDRCS stay and expand the excellent work done in Health, WASH, shelter and DRR? Think about complementarity of actions with wider vision of needs and capacities.
 2. Should BDRCS/Federation collaborate more strongly with ISCG along their JRP plan for 2019 and the other years? For instance
 3. Will the addition of a humanitarian diplomacy/intelligence role help us make better choices?
 4. How can good Human Resource, support and communications systems make a difference in the operation? Is BDRCS in CXB and Dhaka teams are ready to take over with appropriate HR? What is missing and how to handle it?
 5. Identify who is the best placed and has the willingness in wider Federation, to lead (using shared leadership and/or technical lead modalities) specific sectors. Ensure all sector takes aboard is covered, led and well-resourced to address needs.
- ✓ **Ensure in-country led resources mobilization** (BDRCS – Secretariat)

Resource mobilization, marketing and communications staff can make a significant impact on the sustainability of an organization. Hiring staff with these skills will strengthen BDRCS. Hire a full-time resource mobilization staff to work with senior leaders in Governance and Management to settle NS operating budget in the longer run (after June 2020). Innovative funding sources research need to be conduct in the next half of 2019 to ensure agreements negotiation in the first 2020 semester. A funding committee could be set, led by BDRCS RM manager including IFRC Secretariat RM department (KL, GVA) and interested PNS, to design or reshape RM plan and mobilise resources accordingly.

Recommendation 2: BDRCS strengthened leadership role into PMO

BDRCS has most capacities to lead this new phase of the operation. They should request specific support where they think it is necessary, based on prioritization work. BDRCS can play a stronger role in management, coordination and advocacy by taking a stronger stand in orienting Movement partners, Government entities and external partners on collaborative and trustful type of joint actions.

- ✓ **Continue OCAC/BOCA process** (BDRCS, IFRC)

As BDRCS prepares for the next phase of this protracted crisis, it may be time to review the self-assessment documents (OCAC for Dhaka headquarters and BOCA for local units), to ensure that management capacities

⁶⁴ Brackets indicate the entities involved in the process. Secretariat refers to IFRC Secretariat.

are in place to be the partner of choice by focusing on: 1. Continuing essential humanitarian assistance. 2. Community resilience. 3. Social Cohesion. 4. Preparedness and Response. A BDRCS plan using these documents for the foundation will position this NS to be a role model for others in the movement on the path toward localisation. Localisation is gaining ground in RCRC and beyond because it is a sound investment in promoting more equal partnerships and better integration with local coordination mechanisms. It came out of the Grand Bargain at the World Humanitarian Summit. In support of that concept note the illustration showing BDRCS in the middle of the OWF. That is the model to be followed. The MTR team heard during interviews that the OWF model was successfully deployed in the Mozambique and Ebola operations. The IFRC Governing Board might benefit from hosting a panel of leaders from Bangladesh, Mozambique and Congo to share lessons learnt.

✓ **Being more visible as THE national leader counterpart (BDRCS)**

BDRCS is the lead of the immediate review of transition plan and longer-term strategy. Senior management together with partners should take a strong stand on their selection of prioritized sectors. BDRCS has all rights to assert where/when and how they want partners to be lead. This lead should be conducted in good intelligence with partners to ensure long-term capacities of the NS are built. This might include but not limited to, NSD contributions are met and standardised.

BDRCS should be represented by senior management at all levels in multilateral meetings. Partners can help with jointly designed strategies. BDRCS should be the speakers (ensuring strong visibility as well). Formalise and standardise BDRCS as the official Government communication channel for all partners working under OWF, and all official information to be disseminated to all Movement partners and at all levels.

As Government's partner and trusted servant in the community, BDRCS could raise the voices of the most vulnerable in a powerful manner. For example, issues like distributing kerosene when liquid gas was appropriate is an opportunity to educate and serve as a guide to the Government. Similarly with external partners, BDRCS has the capacity to influence (together with Movement partners) the type of support given to host and guest communities under PMO. This might include (but not limited to), presenting success stories (small scale pilots) and case studies as well as requesting specific support for HD to develop further position papers and advocacy tools. This could feed long term strategy for engaging with government within its auxiliary role.

✓ **Tackle Operation management issues (BDRCS, Secretariat and PNS)**

BDRCS HQ should be focused on wider management and strategic direction setting and leave operational daily management at PMO level. This implies delegating authorities where it makes sense and effective results (HR recruitment, logistics, and procurement). This is going together with strengthening PMO capacity of HR and logistics departments with sufficient and skilled staff together with necessary guidelines and procedures. Or create a programme liaison position that specifically liaise with government and local authorities. Volunteer management has to be seriously taken into consideration as an immediate matter to solve. BDRCS has to make sure volunteers' management and staff mobilisation guidelines are known and used. The guidelines have to be shared, presented and their applications discussed with all PMO involved Movement partners. It might be relevant to build further surge mechanism with competent staff and volunteers (could be part of the contingency planning process). Using NDRT surge mobilisation procedures to be extended to further needs.

Under PMO, Secretariat / BDRCS HR salary advance has to be separated from programme working cash advances to allow staff salaries to be paid on time. This might include IFRC Secretariat in Kuala-Lumpur and Geneva increasing trust and delegating authorities to BDRCS PMO (raising cash advance ceiling – aligning procurement process with local possibilities).

✓ **Resolve CXB Unit matter (BDRCS supported by Secretariat)**

This is a matter that can only be resolved by leaders from Dhaka and the Unit relationship. There will be many opportunities missed to serve the host and guest communities because of the lack of coordination and cooperation. The National Headquarters might be able to change statutes to unilaterally solve the matter. However, a negotiated settlement though difficult is the more prudent road for the parties to take. Movement Leadership could engage a mediation specialist to work with appropriate representatives from Dhaka and Cox's Bazar to negotiate a mutually agreeable solution to the conflict.

Recommendation 3: IFRC Secretariat to foster coordination role and lowering implementation

Coordination is sometimes side-lined due to the high need for technical support and at times, implementation of the IFRC Appeal, despite the fact that coordination is seen as IFRC's primary responsibility. Many times, the same staff are expected to coordinate (internally and externally), provide technical support and implement the IFRC Appeal all at the same time. IFRC Appeal is mostly prioritised on needs, meanwhile due to management pressures (spending pledges in time), reporting and accountability needs, some decisions were taken too quickly. Initiatives taken to operationalize shared leadership can be better presented along with challenges, to serve as fundament of committed leadership with agreed criterion to foster sector leads.

✓ **Ensure continuity in already made commitments (Secretariat, BDRCS and PNS)**

Foster collaboration through strong coordination by documenting shared responsibilities ensuring flexible application and proper monitoring plan with clear indicators. Review current EA allocation and how IDB funding

and engagement could support transition period. IDB project should create another standalone project focused on resilience without building outputs and outcomes on existing capacities and needs. For sectors that continue to be led by PNSs under shared leadership, ensure clear communication, guidelines and integration with PNSs as part of the OWF, and capacity building of BDRCS being done.

✓ **Showcase the best practices under One Window Framework and shared leadership** (Secretariat).

The One Window Framework can serve as the standard for good coordination and cooperation. To feed the SMCC and help to make it a Global Best Practice, Secretariat should conduct in-depth case studies at least on Preparedness, WASH and Health sectors to duplicate their successful collaboration in other sectors and programmes.

To ensure wise coordination and focus, a best practice would be to engage a humanitarian diplomacy expert (as it was done with HD delegate) who reports to and works with top leadership. Create a long-term (at least one year) humanitarian diplomacy/intelligence role roving between PMO and Dhaka will help with positioning the Movement. Initial priority topics might be: auxiliary role (and strategy), further work on potential population movement scenarios, SMCC...

In order to ensure adaptive institutional knowledge in a constantly evolving context, conducting regular follow up (initially three months then later every six months) and review of the OWF at all levels (operational, management and strategy) and with all Movement partners (BDRCS, in-country PNSs, out of country contributing PNSs, ICRC, IFRC) is a must.

✓ **Secretariat to review IFRC emergency response tools and templates** (Secretariat KL-GVA)

In the longer run, IFRC has to adapt to protracted Population Movement crises. PMO has initially relied on existing expensive emergency response tools (FACT, ERU). Being able to have strategic and longer term envision at the response early stages is crucial to optimise resource mobilisation and look at building stronger national counter parts which often happen more with local/regional HR, better fitting with the context.

Comparing with other Population Movement crisis in the world (Annex 8), some interesting common trends are emerging where protection is notably a concern. Further investigation including a full research to compare Population Movement Operation results, challenges and deep research on common trends and solutions might benefit to the Movement and more generally to humanitarian sector learning for better programming.

Recommendation 4: Other Movement partners to streamline their support to PMO

The willingness to work to support the needs of the most vulnerable is indisputable. However higher level and donor pressure force PNS teams to act somehow independently from BDRCS. With BDRCS taking stronger commitment into leading operation, Movement partners have the opportunity to optimise their contribution and effectively collaborate together. Back donors who give funds that don't facilitate our goal of localization and the Grand Bargain should be persuaded to give this new approach a chance to succeed and PNSs should also provide a realistic picture of BDRCS capacity and adjust the expectations of back donors

✓ **PNS pro-actively participate to transition plan** (PNS)

PNS together with BDRCS should consider their commitment timewise and where agreed, find innovative solution to ensure technical leadership together with BDRCS and Secretariat. This goes alongside with actively collaborating to the revision of the transition plan, new plan for OWF and ensuring they have all the capacities to fulfil commitments. Ensuring scaling down is well back-up with appropriate and well-resourced exit plan.

✓ **ICRC could use their expertise to support PMO delivery** (ICRC)

The ICRC is working on the border and in Teknaf Upazila, along with the local Unit. They have different working modalities and might be able to share experience and collaborate together to strengthen the unit.

In addition, PMO could establish consistent communication with ICRC and Movement offices in Myanmar. As of today, the ICRC delegations in Myanmar and Bangladesh are constantly in touch so this exchange should include feedback of Myanmar. An exchange committee (or less formal) including BDRCS/MRCS/IFRC and ICRC country offices (from both side) could benefit to scenario discussion and humanitarian diplomacy work.

ICRC and IFRC have different approaches to protection. However, considering the context, advises on protection and integrating PGI work within sectors of PMO might be beneficial.

Sectors specific key recommendation for PMO

Recommendation 5: Ensure agreed sector related commitments are kept

Sectors specific key recommendations have been built on immediate and ongoing actions to be taken to ensure smoother transition. Only main recommendations are presented below, they have been further structured with actionable steps in Annex 7.

Enabling actions per sectors

Health & PSS



Lead the way in service delivery

- ✓ Assess current service delivery, make sector related plan based on commitments and available resources (Movement and sector wise).
- ✓ Close monitoring and support to RCEH and RCEC performance
- ✓ 3 monthly medicine procurement
- ✓ Define attractive package (benefit, living conditions) to involve qualified doctors
- ✓ Take measures to ensure longer opening hours for health facilities together with availability of doctors and adequate medicine.
- ✓ Create more private spaces for some the health posts.

WASH



Build upon great work done

- ✓ Recruit and trained gender balanced hard and soft skills WASH national experts within PMO.
- ✓ Ensure WASH quality results are kept in transition phase.
- ✓ Collaboratively with sector identify how to further cover water needs (considering needs / space / resources and incl. ground water management).
- ✓ Construction of more quality/appropriate water points/ pipe line to ensure easy access to safe water.
- ✓ Formalise sector share leadership agreement.

PGI



Implify – adapt to practical realities

- ✓ Look at alternative plans for DAPS centres which could be either handing over to PNS or use as community centres which is more multipurpose.
- ✓ Integrate DAPS centre with other relevant sectors and similar centres to maximize the utility and coverage.
- ✓ Identify what priorities are in PGI – unpack what protection, gender and inclusion mean for PMO (incl. appropriate staffing).
- ✓ Apply minimum standards on protection and do not harm principles in PMO activities.
- ✓ Mainstream PGI across all sectors.

Shelter & NFI



Move to more durable and safer mid-term shelter solutions

- ✓ Foster cash attribution for NFIs requirement, especially non standards (i.e. fans).
- ✓ Strengthen assistance for shelter upgrades prior to and repair during, the monsoon season.
- ✓ Ensure the commitment to meet the targets for midterm and transitional shelter is honoured / kept during the transition of PMO.
- ✓ Prioritise cash for housing repairs support to HC. MTR was informed midterm shelter design has been approved.

Food security and resilience



Focus on more durable solutions

- ✓ Advocate for in Incomes Generating activities – to benefit the host and displaced communities.
- ✓ Continue to advocate and pilot cash transfer activities for HC and cash for work for displaced communities.

CEA – PMER - IM



CEA – PMER - IM

- ✓ Ensure CEA – PMER – IM team is well calibrated to continue quality and efficient work.
- ✓ Ensure PDM findings are used to constantly improve quality of service delivery.
- ✓ Raise number/standards of need assessment.
- ✓ Strengthen BDRCS reporting/ PMER team and promote a common/ harmonized monitoring and reporting practice.
- ✓ Create a Federation-wide information dashboard for ease information sharing (access to GO platform).
- ✓ Create follow-up mechanisms for community feedback and PDM findings.

Preparedness - DRR & Contingency planning



Continue to expend and improve

- ✓ Ensure green response/ environmental sensitivity as a part of DRR (as plan in VCA).
- ✓ No similar type of work – CPP/ contingency plan – avoid over documentation burden. Test and update SOPs to different situation.
- ✓ Ensure cohesive collaboration.



Section 5 – Conclusions

A major learning for all of RCRC must be that population movement operations are “manmade” disasters. They are not the same as conflicts. The UN refers to these refugees as, persons who have been systematically persecuted from birth to death. We have to redefine how we work with such a population. The people of Rakhine have been referred to as the world’s most persecuted minority. From RC/RC Humanitarian Diplomacy role, helping government and communities to better envisage implications of this is a due. With their principles, RC/RC can be the most effective humanitarian diplomats in this complicated world. RC/RC Humanitarian Principles should permanently be used to support displaced people human rights to their identity, livelihoods and safety.

These days, population movement operations are increasingly becoming more prevalent, constituting more than 14 per cent of global RCRC emergencies in the past three years compared to nine per cent for the past ten years⁶⁵. Clearly it is time to develop tools and train personnel for this new normal. This might be also an occasion to explore new working modalities where ICRC/IFRC play a joint coordination/technical support role to encompass all dynamics with such type of crisis. In the seek of localization, it may be time to appoint regional coordinators who either live in or deploy to where the emergency is. This makes the Grand Bargain more feasible and helps strengthen the operation on the ground. For the sake of coordination, PMO should continue to closely coordinate with the Joint Response Plan. That plan generally provides for a clear and well-defined playbook at the head of sector level with a budget, strategic objectives and significant documentation to assist with clear accountability. That could go a long way toward aligning all actors around common goals, objectives and targets. As partners learn and exchange ideas, they will strengthen their ability to carry out their own robust planning. The One Window Framework should be reintroduced with BDRCS at the centre. As RC/RC reshape their strategy, be mindful that this is manmade disaster. The upcoming months should be filled with concrete transition and strategic planning. As the IFRC team and PNS teams reduce, BDRCS needs to increase. It should be looked as a 3 to 5 years development crisis and plan accordingly.

More than coordination – The great competitive advantage RC/RC Movement has enjoyed for years is that it is Global but also local. RC/RC community-based units are the first responders – neighbours helping neighbours. When we need greater strength, we have a national support system. When it is too much for the National Society, we have a Federation and a network full of helping hands willing to join forces when the need arises. When it works, there is nothing better. Coordination - Cooperation and collaboration - starting with the local Unit up to the Secretary General is our super power.

Again, as a Movement, human and material resources should be further develop to be fit for purpose in the new context. As RC/RC Movement is going to stay in this important mission, it is imperative that Movement work to be the best at it. It’s time to innovate with a strategy that will fight against allowing what is happening around the globe to the most vulnerable.

⁶⁵ Calculated based on [IFRC GO data](#).

Annex 1: List of acronyms

| Acronym | Definition |
|---------|---|
| APRO | Asia Pacific Regional Office |
| BDRCS | Bangladesh Red Crescent Society |
| BRC | British Red Cross |
| CBHFA | Community-Based Health and First Aid |
| CEA | Community Engagement and Accountability |
| CM | Community Mobilizers |
| CPP | Cyclone Preparedness Programme |
| CXB | Cox's Bazar |
| DAPS | Dignity Access Participation and Safety |
| DRC | Danish Red Cross |
| DRR | Disaster Risk Reduction |
| EA | Emergency Appeal |
| EMT | Evaluation Management Team |
| ERU | Emergency Response Unit |
| FACT | Field Assessment Coordination Team |
| FGD | Focus Group Discussion |
| FSM | Faecal Sludge Management |
| FWR | Federation Wide Report |
| GBV | Gender Based Violence |
| GRC | German Red Cross |
| GoB | Government of Bangladesh |
| HC | Host Community |
| HD | Humanitarian Diplomacy |
| HH | Households |
| HQ | Headquarters |
| HR | Human Resources |
| ICRC | International Committee of Red Cross |
| IDB | Islamic Development Bank |
| IM | Information Management |
| IOM | International Office of Migration |
| ISCG | Inter Sector Cluster Group |
| JRCS | Japanese Red Cross Society |
| KII | Key Informant Interview |
| LGP | Liquid Gas Petroleum |
| MHM | Menstrual Hygiene Management |
| MoU | Memorandum of Understanding |
| MRCs | Myanmar Red Cross Society |
| MRRO | Myanmar Refugee Relief Operation |
| MSF | Médecins Sans Frontières |
| MTR | Mid-Term Review |
| NDRT | National Disaster Response Team |
| NFI | Non-Food Items |
| NSD | National Society Development |



| | |
|-------|--|
| OWF | One Window Framework |
| PASSA | Participatory Approach to Safe Shelter Awareness |
| PMER | Planning Monitoring Evaluation and Reporting |
| PGI | Protection, Gender and Inclusion |
| PDM | Post Distribution Monitoring |
| PMO | Population Movement Operation |
| PoA | Plan of Action |
| PNS | Partner National Societies |
| PSS | Psychosocial Support |
| QRCS | Qatar Red Crescent Society |
| RC/RC | Red Cross/Red Crescent |
| RCEC | Red Cross Red Crescent Emergency Clinic |
| RCEH | Red Cross Red Crescent Emergency Hospital |
| RFL | Restoring Family Links |
| RFU | Regional Finance Unit |
| RRRC | Refugee Relief and Repatriation Commissioner |
| SMCC | Strengthen Movement Cooperation and Coordination |
| ToT | Training of Trainers |
| TRC | Turkish Red Crescent |
| UNHCR | United Nation High Committee for Refugees |

Annex 2: Terms of Reference

TERMS OF REFERENCE Mid-term Review of Bangladesh Population Movement Operation (PMO)

1. SUMMARY

Purpose: The purpose of this Mid-term Review (MTR) is to review the PMO's relevance, effectiveness and sustainability in setting the collective coordination and strategic direction of Red Cross Red Crescent (RCRC) Federation-wide response, under the One Window Framework (OWF) (including planning and supporting National Society (NS) sustainable development), and operational response (including the IFRC emergency appeal).

Audience: Bangladesh Red Crescent Society (BDRCS), Partner National Societies (PNSs), IFRC in Cox's Bazar, Dhaka, Kuala Lumpur, Geneva, actual and future partners.

Commissioner: IFRC Asia Pacific Regional Director

Reporting to: Evaluation Management Team

Duration: 25 working days (12 days (excluding weekends) in Bangladesh for field work and debriefing)

Timeframe: April-June 2019

Location: Dhaka, PMO focused camps where RCRC has multi-sectoral response, i.e. Burmapara (Camp 13), Hakimpara (Camp 14) and Balukhali 2 (Camps 11, 12, 18 & 19) in Cox's Bazar, Bangladesh

2. BACKGROUND

The displacement from Rakhine State, Myanmar is not a new phenomenon. In 1978, an estimated 200,000 people fled to Bangladesh (nearly all were returned within two years) and in the early 1990s, an estimated 250,000 people fled again (with again, nearly all being returned over the next decade). More recently, the largest influx happened on 25 August 2017, linked to an increase in serious violence in Rakhine State. This created one of the most critical, complex and acute humanitarian crises in the Asia Pacific region for decades. Since then, more than 725,000 displaced people have crossed the border from Rakhine State to Cox's Bazar, Bangladesh, and have settled in a number of camps, including what has become known as the "world's largest refugee camp". This influx added to a number of people who had fled Rakhine State in earlier waves of displacement (including 32,701 who were formally registered as "refugees" and 87,000 people who crossed in 2016). As of January 2019, the total number of displaced people in Cox's Bazar from Rakhine State is estimated at 911,000 people⁶⁶.

In January 2017, the PMO was launched as a Federation-wide response to increasing displacement from Rakhine State. It was initially funded under the disaster response emergency fund (DREF) and numbered MDRBD018, and IFRC subsequently launched an emergency appeal in March 2017 to meet the increasing needs. After the August 2017 influx, the emergency appeal was revised to upscale the response activities.

In October 2017, the IFRC categorized the situation as crisis level 'Red' according to the IFRC Emergency Response Framework. This categorization indicates that the scale of complexity of the operation demands an organization-wide priority for the IFRC Secretariat at all levels.

In the initial phase after the August 2017 influx, IFRC applied global emergency response tools such as Field Assessment Coordination Team (FACT), mobilising experienced RCRC disaster managers in relief, logistics, health, nutrition, public health and epidemiology, psychosocial support, water and sanitation, finance and administration. They supported BDRCS and IFRC field offices to respond effectively to the population movement. FACT worked closely with Emergency Response Units (ERUs), IFRC local office and BDRCS to respond the immediate basic needs of displaced population targeting 40,000 households. In addition to FACT and ERUs, other response tools such as Regional Disaster Response team (RDRT) as well as surge capacities from different regions were deployed to support the operation. BDRCS with the support of IFRC coordinated all the teams.

⁶⁶ ISCG Situation Report – Jan 2019: <https://reliefweb.int/sites/reliefweb.int/files/resources/ISCG-Situation-Report-January-2019.pdf>

Sector-wise, health, WASH and shelter were the focus of RCRC Movement to respond to the PMO. After FACT and ERU missions, the operation has been continued with a clear focus on mid-term shelter, stable health services and sustained water supply, sanitation and hygiene promotion. Most of the implementation has been conducted by BDRCS with support from IFRC and PNSs with increasing access challenges caused by landslides and flooding during the monsoon and risk of cyclone.

In response to the increasing number of stakeholders and PNSs involved and the complexity of the protracted crisis, the One Window Framework (OWF) was developed to coordinate the Federation-wide response in the PMO. The OWF includes six pillars, three of which are response priorities (RP) and next three are the enabling actions (EA). The response priorities are (RP1) humanitarian action; (RP2) preparedness for response; and (RP3) community resilience approach. The enabling actions are (EA1) strong national society and branch; (EA2) one window approach and movement coordination; and (EA3) humanitarian diplomacy.

3. PURPOSE AND SCOPE

3.1 Purpose

The review aims to identify lessons for **improving IFRC enabler's role** in leading a Federation-wide joint planning process, coordinating sectoral planning, addressing cross cutting themes and **strengthening the National Society operation response capacity**. This MTR's findings and recommendations should help the PMO team and its partners to make immediate necessary adjustments to **programming and operational strategies** as the response evolves in order to better meet the needs of the displaced and host communities. To improve quality assurance and accountability, the MTR should provide clear recommendations to support **formulating medium- and longer-term vision and strategy including transition and sustainability strategies** beyond 2019, and document the lessons learned so that it can be used to replicate the good practices in other similar kind of refugee and protracted crises.

3.2 Scope

The focus will be on the overall **Federation-wide and Movement cooperation and coordination including external coordination** e.g., ISCG coordination, as well as the application of the Fundamental Principles and Rules for Red Cross Red Crescent humanitarian assistance, exercising of the Shared Leadership approach and its application.

This MTR will be carried out by assessing the performance of **BDRCS, IFRC and partners** with reference to the response strategy, structure, system, procedure and implementation of interventions as per the **OWF, related plan of action and IFRC emergency plan of action** for the PMO with a timeframe from **September 2017 to December 2018**.

The scope will cover the PMO stakeholders (including BDRCS, IFRC, PNSs, government partners, non-governmental partners, beneficiaries and host communities), in Dhaka and six focused camps (Burmapara (Camp 13), Hakimpara (Camp 14) and Balukhali 2 (Camps 11, 12, 18 & 19)) of Cox's Bazar, Bangladesh where RCRC multi-sectoral response has been implemented since the beginning of the response.

4. OBJECTIVES AND CRITERIA

4.1 Objectives

This MTR will examine the **relevance, effectiveness and sustainability** of the PMO based on the following:

- to assess the **Federation-wide cooperation and coordination** in line with One Window Framework (OWF) and Shared Leadership approach for effective implementation of the PMO towards a protracted crisis mode;
- to provide medium- to longer-term recommendations for **sustainable transition** beyond the emergency appeal, which will help in **planning and supporting National Society sustainable development** (including NS branch level) beyond 2019;
- to review the response in line with the established **Fundamental Principles, Code of Conduct, Strategy 2020** and other relevant guidelines. It will examine whether BDRCS, IFRC and associated partners' humanitarian action has been timely, were at appropriate scale and scope, providing quality technical programming, efficient and effective, and delivered safely and securely to benefit the most vulnerable people;

- to assess the extent to which the response has been **accountable to the affected (displaced and host) communities** by addressing their differentiated needs and engaging them in effective and efficient manner;
- to identify good practices, lessons learned and capacity development needs regarding **operational strategies and coordination** (including government, BDRCS and other humanitarian partners) at **national, sub-national and local / branch levels**, including facilitation and management of complementary international assistance;
- to recommend **deliverable actions and its modality** such as cash transfer programmes and address its relevant challenges in the response to protracted crises like PMO that are grounded in the response's context and can immediately be implemented;
- to analyse learning from other recent “Red” level migration and displacement related crisis responses and the incorporation of learning from them into this response.

4.2 Criteria

The following criteria will be used to guide the MTR recommendations:

- Relevance and appropriateness
- Coverage
- Efficiency / effectiveness / accountability
- Impact
- Connectedness and sustainability

4.3 Evaluation questions

The consultant and MTR team will create specific questions linked to the above objectives, protracted migration and displacement crisis, RCRC focused sectors (health, WASH, shelter) and cross-cutting themes such as community engagement and accountability (CEA); protection, gender and inclusion (PGI); preparedness for international assistance; monitoring and reporting; and logistics arrangement. Recommendation of questions based on the criteria above are outlined in Annex 1. Please note that sample questions need to be adjusted based on the situation and operation, in agreement with the evaluation management team (EMT), and outlined in the inception report.

5 METHODOLOGY

The methodology will adhere to the [IFRC Framework for Evaluations](#), with particular attention to the processes upholding the standards of how evaluations should be planned, managed, conducted and utilized.

For this MTR, a **‘Review Board’ will be established to guide the methodology of the MTR and review the findings. The Review Board will have members from National Society leaders** with experience of protracted crises and population movement operations.

Key informants will include BDRCS, PNSs, ICRC and IFRC personnel (e.g. sector leads, program managers, cross-cutting sector leads, field officers, direct implementers, volunteers and community mobilizers), beneficiaries, Government of Bangladesh officials, other non-Movement donors (DFID, SDC, USPRM, etc.), and people who did not receive assistance.

The specific evaluation methodology will be detailed in close consultation between the MTR team, EMT, Commissioner, and relevant key stakeholders, but will draw upon the following primary methods:

- **Desktop review** of operation background documents, relevant organizational background and history, including IFRC as well as BDRCS and National policies and SOPs, prior IFRC reports, and any relevant sources of secondary data, such as exit surveys, Post Distribution Monitoring (PDM), learning review report and other evaluations / reviews, health baseline, and WASH KAP survey from IFRC and participants in the operation.
- **Field visits / observations** Six camps in Burmapara, Hakimpara and Balukhali 2 of Cox's Bazar.
- **Key informant interviews** (institutional and beneficiaries as appropriate).
- **Focus group discussions** (institutional, beneficiaries and non-beneficiaries) as time and capacity allow.

The detailed evaluation design is to be created by the MTR team; however, the following should be considered:

- **Sampling method** is to be decided by the Team Leader, as long as the final sample to be evaluated on includes both BDRCS and IFRC involved in the PMO interventions, sectors of the intervention and the ‘most vulnerable’ beneficiaries.

- **Data collection methods** and pace are to be decided by the Team Leader, in consultation with the EMT but should take into account the reality of difficult-to-reach districts.
- **The MTR team should visit** a representative number of communities in the PMO operational areas (camps); Hakimpara, Burmapara and Balukhali 2. The MTR team will be responsible to clearly outline the support needed in-country. This will be agreed with EMT based on resources available.

The Team Leader will need to work together with MTR team members.

6 OUTPUTS / DELIVERABLES

The MTR team will deliver the following outputs:

- Inception Report:** The inception report will be a scoping exercise for the review and will include the proposed methodologies, data collection and reporting plans with draft data collection tools such as interview guides, the allocation of roles and responsibilities within the team, a timeframe with firm dates for deliverables, and the travel and logistical arrangements for the team.
- Debriefings / feedback to management at all levels:** The team will report its preliminary findings to the BDRCS and IFRC PMO / Bangladesh Country Office prior to leaving the country.
- Draft report:** A draft report identifying key findings based on facts and will separate from the report opinions or rumours, conclusions, recommendations and lessons for the current and future operation, will be submitted by the Team Leader within three days after presenting the initial findings.
- Final report:** The final report will contain a short executive summary (no more than 1,000 words) and a main body of the report (no more than 6,000 words) covering the background of the intervention evaluated, a description of the MTR methods and limitations, findings, conclusions, lessons learned and clear recommendations. Recommendations should be specific and feasible. The report should also contain appropriate appendices, including a copy of the ToR, cited resources or bibliography, a list of those interviewed and any other relevant materials. The final report will be submitted two days after receipt of the consolidated feedback from IFRC. Details of the final report are outlined in the table below.

Suggested final report outline

| No. | Content | Description |
|-----|-------------------------------------|--|
| 01. | Executive Summary | Summarizes the overall findings of the MTR with key conclusions and not more than 10 key recommendations. Executive Summary must be specific to the MTR and clearly outline the specific context of the interventions. |
| 02. | Background and context analysis | Outlines the overall objectives, aims, intervention strategy, policy frameworks, targets, main stakeholders, financial frameworks, institutional arrangements, and a brief context analysis that highlights the challenges and issues on the ground. |
| 03 | Methodology | Outlines the overall approach used and the rationale on the approach used, the tools applied and the key assumptions. It will focus on consideration for relevance and appropriateness, coverage, efficiency / effectiveness / accountability, impact, connectedness and sustainability in function of the internal and external issues. |
| 04. | Findings | Outlines the findings of the MTR. |
| 05. | Conclusions | Outlines the main conclusions that have emerged from the findings |
| 06. | Lessons learned and recommendations | Provides general overall recommendations, including on cross-cutting issues that affect not only the specific interventions but also the strategies. |

All products arising from this MTR will be owned by the IFRC. The evaluators will not be allowed, without prior authorization in writing, to present any of the analytical results as his / her own work or to make use of the MTR results for private publication purposes.

The draft and final reports will be submitted through the EMT, who will ensure the quality of the report providing input if necessary. The EMT will submit the report to the key stakeholders interviewed for review and clarifications. The Commissioner will oversee a management response and will ensure subsequent follow up.

7 SCHEDULE

The MTR is expected to be completed no more than 25 days, including submission of the final report. The MTR will commence on 26 April 2019 with the following schedule and deliverables:

| Activity | Location | Days | Deliverables | Dates |
|--|---|-----------|------------------------|-----------------------|
| Literature/desktop review and draft inception report | Home country | 4 | Draft Inception Report | 3 - 6 May 2019 |
| Consultation, revision and approval of Inception report by Evaluation Management Team, Review Board and Commissioner | | | | 7 May - 10 May 2019 |
| Arrival | Dhaka, Bangladesh | | | 11-May-19 |
| Briefing of MTR team (with Review Board, IFRC and BDRCS) and Key Informant Interviews (KII) with stakeholders | (Team 1): Dhaka, Bangladesh | 3 | | 12 - 14 May 2019 |
| | (Team 2): Cox's Bazar, Bangladesh | | | |
| In-country data collection (field work) and analysis | Cox's Bazar (Hakimpara, Burmapara, Balukhali 2) | 7 | Preliminary findings | 15 - 23 May 2019 |
| Data analysis | | 2 | | 24-25 May 2019 |
| Presentation of initial findings by MTR Team Leader to IFRC, BDRCS and other stakeholders (with some joining remotely) | Cox's Bazar / Dhaka | 1 | | 26 May 2019 |
| Prepare and submit draft report with annexes | Home country | 7 | Draft report | 28 May - 3 June 2019 |
| Review of the draft report: Review Board, BDRCS and IFRC submits any requests for clarifications, corrections, changes on the draft report | | | | 4 June - 11 June 2019 |
| Finalize and submit final report with annexes | Home country | 1 | Final report | 12- 13 June 2019 |
| Final report approval by the Commissioner | | | | 14 June 2019 |
| Total days | | 25 | | |

8 REVIEW BOARD

A Review Board will be formed to review, guide and endorse the report and ensure that it upholds the key components of the population movement crisis. The Review Board will consist of up to six National Society leaders who has

extensive experience of population movement crises. The Review Board will be entrusted to guide the MTR process, including by provide strategic inputs across the whole process, from the design phase to the delivery and comment on the final report. It may also offer comparison points with other contexts and RCRC response to protracted crises.

9 EVALUATION MANAGEMENT TEAM (EMT)

An evaluation management team will be appointed to manage and oversee the MTR and ensure that it upholds the IFRC Framework for Evaluation. The EMT will consist of three to four members i.e., two from APRO, one from IFRC Bangladesh, and one from BDRCS. Representative from APRO will be the team leader of the EMT.

10 EVALUATION QUALITY AND ETHICAL STANDARDS

The MTR team should take all reasonable steps to ensure that the evaluation is designed and conducted to respect and protect the rights and welfare of people and the communities of which they are members, and to ensure that the evaluation is technically accurate, reliable, and legitimate, conducted in a transparent and impartial manner, and contributes to organizational learning and accountability. Therefore, the MTR team should adhere to the evaluation standards and specific, applicable process outlined in the [IFRC Framework for Evaluation](#). The IFRC Evaluation Standards are:

1. **Utility:** Evaluations must be useful and used.
2. **Feasibility:** Evaluations must be realistic, diplomatic, and managed in a sensible, cost effective manner.
3. **Ethics & Legality:** Evaluations must be conducted in an ethical and legal manner, with particular regard for the welfare of those involved in and affected by the evaluation.
4. **Impartiality & Independence:** Evaluations should be impartial, providing a comprehensive and unbiased assessment that takes into account the views of all stakeholders.
5. **Transparency:** Evaluation activities should reflect an attitude of openness and transparency.
6. **Accuracy:** Evaluations should be technical accurate, providing sufficient information about the data collection, analysis, and interpretation methods so that its worth or merit can be determined.
7. **Participation:** Stakeholders should be consulted and meaningfully involved in the evaluation process when feasible and appropriate.
8. **Collaboration:** Collaboration between key operating partners in the evaluation process improves the legitimacy and utility of the evaluation.

It is also expected that the MTR will respect the seven Fundamental Principles of the Red Cross and Red Crescent: 1) humanity, 2) impartiality, 3) neutrality, 4) independence, 5) voluntary service, 6) unity, and 7) universality. Further information can be obtained about these principles at: www.ifrc.org/what/values/principles/index.asp

11 MTR TEAM AND QUALIFICATIONS

This is a Federation-wide Mid-term Review. The Team Leader of this MTR must have experience or significant knowledge of humanitarian response mechanisms, deployment of staff and volunteers, and previous experience in conducting evaluations for medium-to-large scale programmes. The Team Leader will be supported by an MTR team from BDRCS, PNSs and IFRC who are not directly involved in the operation. The Team Leader will coordinate directly with the IFRC Asia Pacific Regional Office and IFRC PMO / Bangladesh Country Office.

The **MTR team** will consist of up to five people:

- a) One **external evaluation consultant as Team Leader**, with knowledge of local context who will provide an independent, objective perspective as well as technical experience on evaluations. The Team Leader will be the primary author of the MTR report. S/he will not have been involved or have a vested interest in the IFRC operation or context being evaluated, and will be hired through a transparent recruitment process, based on professional experience, competence and ethics and integrity for this evaluation. The Team Leader will report on progress or challenges to the management team;

- b) One evaluation practitioner from the **IFRC** to provide context on IFRC Framework for Evaluation and with technical experience on evaluations and sectors; and
- c) Two to three evaluation practitioners from **BDRCS and PNS** who will also provide the interface with the Secretariat offices in country and will help to clarify internal processes and approaches for the team.

The Team leader and the MTR team should have the following characteristics:

- (For Team Leader) Demonstrable experience in leading evaluations of humanitarian programmes responding to refugee and displacement crises and preferably previous experience of conducting evaluation in Bangladesh or South Asia.
- Knowledge of activities generally conducted by humanitarian organizations in the sectors (particularly health, WASH and/or, shelter) of response.
- Field experience in the evaluation of humanitarian or development programmes, with prior experience of evaluating RCRC programmes desirable.
- Strong analytical skills and ability to clearly synthesize and present findings, draw practical conclusions, make recommendations and to prepare well-written reports in a timely manner (examples of previous work).
- Previous experience in coordination, design, implementation, and monitoring and evaluation of humanitarian programmes.
- Experience in qualitative data collection and data analysis techniques, especially in emergency operations
- Knowledge and experience working with the Red Cross Red Crescent Movement preferred
- Demonstrated capacity to work both independently and as part of a multi-discipline, multi-national team
- Ability to work within tight deadlines and manage with available resources.
- Fluent in spoken and written English.
- Strong interpersonal skills.
- All individuals of the evaluation team should have relevant degrees or equivalent experience.
- Availability for the time period indicated.

12 APPLICATION PROCEDURE

Interested applicants should submit their expression of interest to the following email: pmer.apzo@ifrc.org and nirprasad.dahal@ifrc.org by 10 April 2019 (Geneva time). In the subject line, please state the consultancy you are applying for, your company name or last name and first name. **(SUBJECT: Bangladesh: Population Movement Operation (MDRBD018) Mid-term Review - Last Name, First Name)**.

Application materials should include:

1. **Curriculum Vitae (CV)** of applicant;
2. **Cover letter** clearly summarizing your experience as it pertains to this evaluation, daily consultancy fees (in Swiss Francs) and two professional references;
3. A **2-pager approach paper** with evaluation methodology; and
4. One **sample of previous written report** most similar to that described in this ToR.

Application materials are non-returnable, and we thank you in advance for understanding that only short-listed candidates will be contacted for the next step in the application process and the selection panel does not have the capacity to respond to any requests for application feedback. Please take note that incomplete applications will be rejected.

13 APPENDICES (TO BE PRESENTED AFTER APPOINTMENT)

1. Package of Reference Documents for MDRBD018.
2. Following BDRCS PMO documents (all EAs and EPoAs, sit-reps, operation updates, OWF, Federation-wide report, PDM reports, exit survey, satisfaction survey data, reached database, contingency plan, BDRCS / PMO Disaster Response Framework, and WASH KAP Survey Report).
3. Stakeholders list.

14 ANNEX 1

The following criteria will be used to guide the MTR recommendations:

Note: below mentioned are standard questions that will need to be adjusted, in agreement with the EMT, at the stage of the inception report.

a. Relevance and appropriateness

- How relevant was IFRC in setting the coordination and strategic direction under the OWF?
- How relevant were the interventions in identifying the most vulnerable among the affected population (displaced and host communities), and responding appropriately to their particular circumstances?
 - Was the beneficiary selection process fair, appropriate and effective?
 - What strategies were used to ensure quality, timely and relevant delivery to target beneficiaries including mechanisms to capture beneficiary complaints/feedback?
 - To what extent were the interventions beneficial to both the displaced and host communities, and did not harm the relations between the communities?
- Was the assistance provided appropriate and sufficient to meet intended needs?
- To what extent were the beneficiaries involved in the assessment, planning, design, implementation, and monitoring of the interventions?
- Were intervention strategies and priorities in line with local customs and practices of the affected population (both the displaced and host communities), the priorities of the Government authorities and other key humanitarian actors?
- Were the interventions in line with BDRCS and IFRC strategies, standard operating procedures (SOPs) and guidelines?
- What problems and constraints were faced during implementation and how did the interventions manage these?
- What important lessons have been identified that can improve future interventions in the Bangladesh and be shared more widely?

b. Coverage

- Did the interventions reach all population groups in need, including those in remote areas and in host communities, who would otherwise have not received humanitarian assistance?
- Were there exclusions or differential impact between groups based on their location?
- How could the coverage and distribution methods be improved?

c. Efficiency / effectiveness / accountability

- Did the interventions meet their immediate and intended results?
- Were there adequate resources (financial, human, physical and informational) available and were they utilized effectively and efficiently?
- Were adequate tracking systems in place to ensure transparency and accountability?
- Were complaints / feedback mechanisms put in place for community questions and concerns to be answered? What were the concerns raised by communities during the intervention?
- Would greater investment in preparedness measures have resulted in more efficient, effective and less costly interventions?
- How were programme activities planned, managed and coordinated, particularly between BDRCS, IFRC, other partners, clusters, and local authorities?
 - What services did IFRC offer to PNSs in Cox's Bazar and Dhaka and how did those services contribute towards the effectiveness of the operation.
- Were there any procedural / legal issues relating to facilitating international assistance coming in (e.g. visas, recognition of licenses and qualifications of international aid workers, customs and taxes relating relief goods and vehicles, satellite phones etc.)? How were these issues resolved?
- Was the capacity of the human resource system enough to fulfil the needs of the interventions and beneficiaries? Were personnel skills utilized in an efficient and effective manner?
- Was there adequate and relevant staffing including: a) decisions concerning the number of staff members needed, where, when, with what competences, at what levels, and at required availability and b) decision-making chain regarding staffing?

d. Impact

- What evidence (both direct and indirect) is available that the interventions contributed to the reduction of suffering and that the affected populations were assisted in maintaining or resuming basic dignity and enhancing disaster preparedness?
- What impact did the interventions have on how the displaced and host communities coped with the protracted displacement crisis and subsequent disasters?



e. Connectedness and Sustainability

- Did the interventions result in enhanced institutional capacity of the BDRCS, in terms of:
 - ability to implement recovery programmes;
 - ability to prepare for and respond to disasters in a timely, efficient, and coordinated manner;
 - ability to mobilize communities at risk to cope with future disasters;
 - its auxiliary role; and
 - influence partners, including authorities, to act in accordance with humanitarian principles and (inter)national law?
- Did the support of the IFRC strengthen and complement the response of BDRCS branch / unit and coping mechanisms, or hinder them?
- How did the support in planning, strategic direction, coordination and NS development enable BDRCS to better face the protracted displacement crisis and future disasters?
- How do the links between the local government, officials, community groups enable both the displaced and host communities to sustain their livelihood activities in the future?
- How did IFRC link with external coordination bodies, such as the UN and government bodies in Dhaka and Cox's Bazar to ensure connectedness and sustainability?

What is the perception of RCRC Movement by external coord

Annex 3 - Evaluation methodology

Methodology and approach

Evaluation phases

Methodology was presented in the Inception report, this consisted of 3 phases shown in the timeline. Timelines were revised to take into consideration field constraints and parallel activities splitting MTR team into groups to increase coverage (high number of KIIs and FGDs).

| Activities | Dates |
|--|------------------|
| Phase 1 – Inception | |
| Kick-off introduction call | 05/05/2019 |
| MTR initial call | 05/05/2019 |
| Commissioner Introduction / feedback call | 08/05/2019 |
| Methodology review – tools development | 05– 09/05/2019 |
| Field trip arrangements | 06 - 09/05/2019 |
| Inception Draft report writing | 05– 06/05/2019 |
| Inception report validated | 09/05/2019 |
| Step # 1 deliverable – Inception report | |
| Phase 2 – Collecting data | |
| Literature review ⁶⁷ | 03 – 25/05/2019 |
| Briefing MTR-BDRCS - IFRC | 11/05/2019 |
| MTR–Stakeholders KII ⁶⁸ | 12/05/2019 |
| MTR–Stakeholders KII | 13-14/05/2019 |
| MTR–Stakeholders KII | 13-16/05/2019 |
| Visits and FGD camps 11, 12, 13, 14; 18, 19 | 15 – 22/05/2019 |
| MTR–Stakeholders KII | 23/05/2019 |
| Discussion and presentation preparation | 24-25/05/2019 |
| 3 Presentation and discussion of the findings | 26 – 30/05/2019 |
| Step # 2 deliverable – Initial findings | |
| Phase 3 – Reporting | |
| Data analysis | 28/05/2019 |
| Final draft report | 30/05- 9/06/2019 |
| Review of draft report | 09-15/06/2019 |
| Finalization of MTR report and annexes | 15-18/06/2019 |
| Step # 3 deliverable – Final MTR report | |

Phase 1 – Inception phase

The inception allowed MTR team to review and adjust the 43 evaluation questions set under 5 sets of criteria (Relevance/Appropriateness, Coherence, Efficiency/Accountability, Coverage/Impact and Connectedness/Sustainability). Annex 5 is presenting the Evaluation framework.

The questions have been integrated into the evaluation framework presented in Inception report to identify the source of information and best tools to use for data collection.

Limited feedback has been received on the inception report and they were all considered for the rest of the research (methodology to address large amount of data and CEA feedback on field approach at community level).

Phase 2 – Data collection phase

The review mainly applied qualitative data collection method from both primary and secondary sources. KII with different key informants and FGD with beneficiaries were conducted for data collection from primary sources. While literature review was carried out as a part of secondary data collection mainly to identify the progress status against key sectoral indicators.

Field data collection regrouped several methods:

- ✓ **Key Informant Interviews** (face to face and distant): 127 individuals have been interviewed by the team. This included RC/RC Movement partners, local authorities and external actors. The list of interviews could be found in Annex 6.
- ✓ **Focus Group Discussions** (FGDs): 21 FGDs were done with about 265 community members from both guest and host communities, ensuring appropriate cultural approach (male/female segregated) and inclusion (people with disabilities, youth, people in remote areas).
- ✓ **Field presentations** – MTR conducted 3 different presentations of main findings: one in CXB, one in DHAKA and one with IFRC APRO. The presentations in country included staff from mainly BDRCS, IFRC, PNS and

⁶⁷ Due to time constraint, the Literature review was also done during the field visit

⁶⁸ Key Informant Interview

ICRC. This allowed the team to discuss findings and main direction for recommendations. External partners were invited but did not provide any feedback.

- ✓ **Documents / literature review:** Wide range of documents related to PMO have been reviewed by the MTR team which includes sitreps, annual report, sectoral PDM reports and so on. Numerical figures especially on the progress against the indicators of different response priorities were identified from this literature review.

Phase 3 – Reporting

Data collection resulted into 3,959 answers to be treated as the result of the 43 questions covered by the MTR. Answers have been recorded simultaneously and coded to ensure they will all serve the analysis in equal manner. Each team member agreed to treat one of the 5 sets of criteria and presented answers against each question feeding findings and rationale to support recommendations. All this data analysis supported the development of the actions presented in Annex 7.

MTR team deliberately presented the findings based on the OWF structure. We are convinced this could serve as a tool for further discussion and support the transition phase.

Limitations of the evaluation

As the team was cobbled together on a tight timeframe, we have done our best to represent what we have learned through reading, speaking and most importantly learning from the people from Rakhine and the host communities in Cox's Bazar. They were very patient with us as we followed an excellent survey team conducting an evaluation for the IFRC Governing Board and just before the Australian Red Cross arrives to carry out localization research. To that, here is a quote from a twelve year old girl we met along the way. She said, "We have had many surveys before you and nothing has changed... and nothing will change." We therefore ask that you take to heart of what was written in the report to the Governing Board and read our report alongside it. We want to prove that innocent young girl wrong by being the change that she needs to see from all of us.

As fitting the evaluation prior to the monsoon season and Eid break, the time for the evaluation process was limited. This impacted the Inception phase and literature review in several ways:

1. Despite the fact we did not have sufficient time to review questions based on literature review, we did manage to treat all the questions presented in the ToR. We gathered a large amount of data in a very short period of time. The tool we used to treat this data was developed by Jessica Letch (part of the EMT). It was extremely useful. Some of the questions had to be regrouped based on findings and to avoid repetitions in recommendations.
2. Applied only qualitative method, not much scope of in-depth research and triangulation through quantitative survey. Therefore the MTR is depending only on available reports to see progress against sectoral indicators.
3. Unavailability of some of the information especially segregated financial statement on program cost, HR - administrative cost, NS development cost etc. This could not be made into the MTR time period.

Additionally allocated time for the EMT was not adequate to conduct a case study. This is therefore being added to the recommendations. The team is convinced that conducting a case study on shared leadership, using the preparedness work as an initial model, could leverage the pertinence of the OWF. We see it as a strong basis for greater collaboration in Bangladesh and beyond. Similarly, we think a deep research into volunteer management is needed as a follow-up step as well. Similarly the MTR length did not permit to go in deep into all PNS projects and results under the PMO as well as deep comparative analysis of Population Movement crisis in the world, common trends and lessons learnt. This second deep analysis will benefit a lot to the Movement and wider humanitarian sector learning for better programming. This has been added to recommendations as well.

There is an urgent need for the transition process to be discussed, sustained and prioritised fixing solutions to be found. This report has used OWF structure (with minor adjustments) to serve as basis to feed this process. Ideally this should happen prior to end of June 2019 to avoid gaps and failures in implementation. We understood this might not happen, but we thought this should be highlighted as a limitation in findings and recommendations if it is not addressed in due time.

The rapid nature of the review (for desk research and field visit phase) did not allow for in-depth follow up on some issues that would require collection of additional data or forensic evidence.

Annex 4 – Bangladesh - PMO – 4W Map

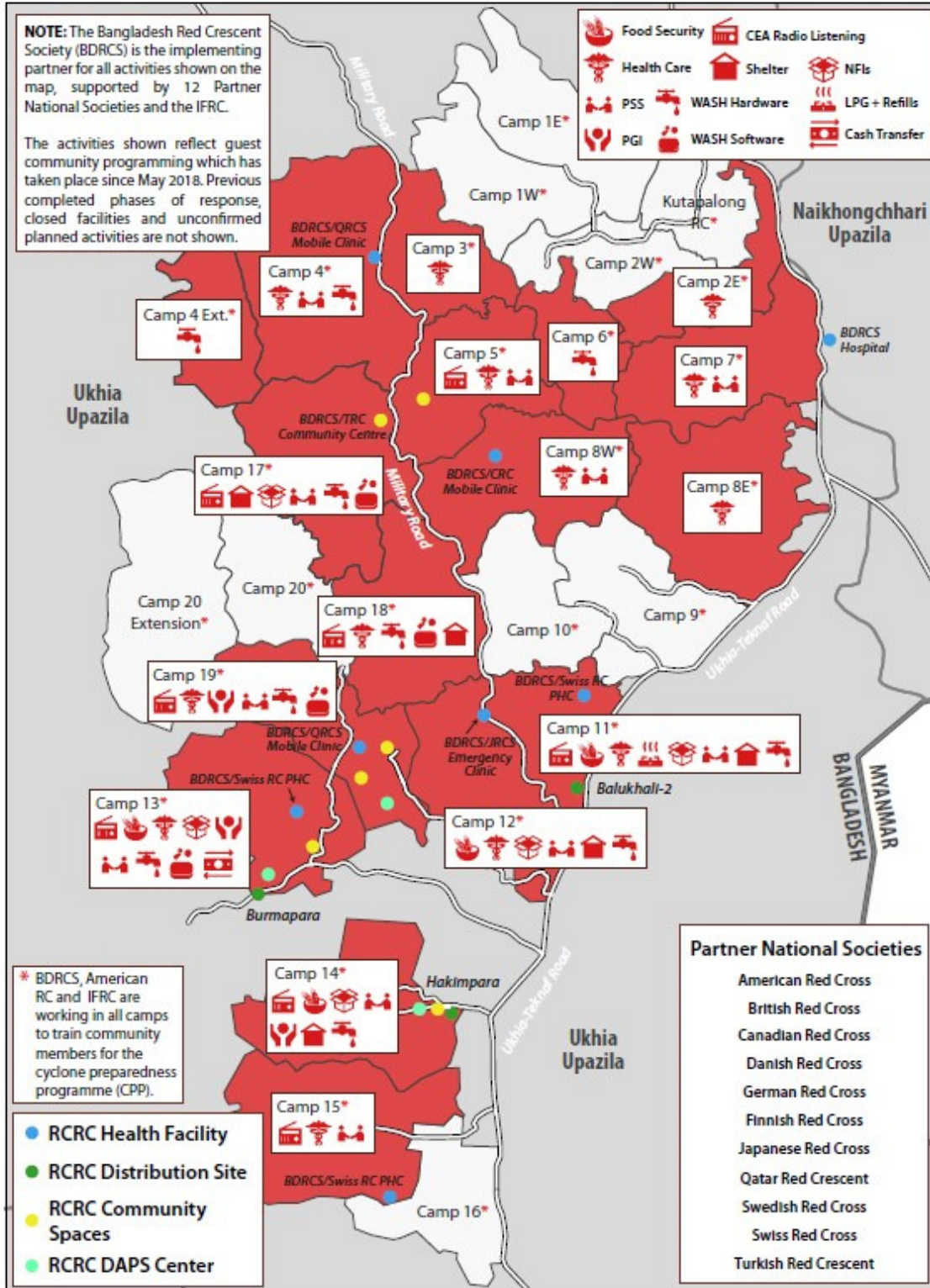


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KUTAPALONG EXPANSION SITE // UKHIA UPAZILA - 4W RESPONSE MAP



Annex 5 – Evaluation matrix

| Criteria | Evaluation questions | Indicators | Data source | Data collection method |
|--|---|--|---|--|
| Relevance and Appropriateness | "How relevant were the interventions in identifying the most vulnerable among the affected population (displaced and host communities), and responding appropriately to their particular circumstances? - Was the beneficiary selection process fair, appropriate and effective? - What strategies were used to ensure quality, timely and relevant delivery to target beneficiaries including mechanisms to capture beneficiary complaints/feedback? - To what extent were the interventions beneficial to both the displaced and host communities, and did not harm the relations between the communities?" | " Existing process in place Y/N Beneficiaries know selection process Y/N" | "PMO Documents PMO staff Beneficiaries" | "Literature review Key Informant Interview (KII) - Semi-structured interview Focus Group Discussion" |
| | | " Process in place Y/N Number of complaints raised and addressed" | "PMO Documents PMO staff Beneficiaries" | "Literature review KII - Semi-structured interviews Focus Group Discussion" |
| | | "% of critical needs of displaced community covered % of critical needs of host community covered" | "Displaced communities Host communities" | Focus Group Discussion |
| | Was the assistance provided appropriate and sufficient to meet intended needs? | "Indicators achieved in OWF/EPoA logframe (Sectors indicators) " | "PMO Documents PMO staff External Stakeholders" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |
| | To what extent were the beneficiaries involved in the assessment, planning, design, implementation, and monitoring of the interventions? | "Participatory mechanisms in place and used Y/N % of beneficiaries who feel involved into PMO programme cycle" | "PMO documents PMO staff Beneficiaries" | "Literature review Key Informant Interview (KII) - Semi-structured interview Focus Group Discussion" |
| | What problems and constraints were faced during implementation and how did the interventions manage these? | Inductive approach, no predefined indicators | PMO staff | " Key Informant Interview (KII) - Semi-structured interview" |
| What important lessons have been identified that can improve future interventions in Bangladesh and be shared more widely? | Inductive approach, no predefined indicators | PMO staff | "Literature review Key Informant Interview (KII) - Semi-structured interview" | |
| Coherence | How relevant was IFRC in setting the coordination and strategic direction under the OWF? | " Stakeholders see importance of OWF Y/N BDRCS/PNSs/ICRC/IFRC see the importance of IFRC's role in coordination and setting strategic direction Y/N BDRCS/PNSs/ICRC/IFRC see the big picture objective & direction of PMO Y/N" | "OWF BDRCS/PNSs/ICRC/IFRC staff at HQ/regional/global PMO staff" | "Key Informant Interview (KII) - Semi-structured interview Focus Group Discussion" |
| | Were intervention strategies and priorities in line with local customs and practices of the affected population (both the displaced and host communities), the priorities of the Government authorities and other key humanitarian actors? | "Intervention strategy aligned with local customs practices Y/N Intervention strategy aligned with Government of Bangladesh and other key humanitarian actors' priorities Y/N" | "Gvt authorities Other Humanitarian Stakeholders External documents" | "Literature review Key Informant Interview (KII) - Semi-structured interview Focus Group Discussion" |

| Criteria | Evaluation questions | Indicators | Data source | Data collection method |
|---|--|---|--|---|
| | Were the interventions in line with BDRCS and IFRC strategies, standard operating procedures (SOPs) and guidelines? | Alignment Low/Medium/High | "Contingency Planning, SOPs documents OWF BDRCS/IFRC strategies" | Literature review |
| | Were there any procedural / legal issues relating to facilitating international assistance coming in (e.g. visas, recognition of licenses and qualifications of international aid workers, customs and taxes relating relief goods and vehicles, satellite phones etc.)? How were these issues resolved? | Inductive approach, no predefined indicators | BDRCS/IFRC staff | Key Informant Interview (KII) - Semi-structured interview |
| Coverage | Did the interventions reach all population groups in need, including those in remote areas and in host communities, who would otherwise have not received humanitarian assistance? | "% of beneficiaries in needs covered by the operation % of hard to reach communities covered" | "PMO documents External documents Beneficiaries Non-beneficiaries" | "Literature review Focus Group Discussion" |
| | Were there exclusions or differential impact between groups based on their location? | Inductive approach, no predefined indicators | "PMO documents External documents Beneficiaries Non-beneficiaries" | "Literature review Focus Group Discussion" |
| | How could the coverage and distribution methods be improved? | Inductive approach, no predefined indicators | "PMO documents PMO Staff" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |
| Efficiency / effectiveness / accountability | Did the interventions meet their immediate and intended results? | % of achievements based on OWF/EPoA logframe indicators | PMO documents | Literature review |
| | Were there adequate resources (financial, human, physical and informational) available and were they utilized effectively and efficiently? | Inductive approach, no predefined indicators | "PMO documents PMO Staff" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |
| | Were adequate tracking systems in place to ensure transparency and accountability? | Existing tracking system - Y/N | "PMO Documents PMO staff Beneficiaries" | "KII - Semi-structured interviews Focus Group Discussion" |
| | Were complaints / feedback mechanisms put in place for community questions and concerns to be answered? What were the concerns raised by communities during the intervention? | "Process in place Y/N Number of complaints raised and addressed" | "Displaced communities Host communities" | Focus Group Discussion |
| | Would greater investment in preparedness measures have resulted in more efficient, effective and less costly interventions? | Contingency Plan used Y/N | "CP documents PMO staff" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |
| | "How were programme activities planned, managed and coordinated, particularly between BDRCS, IFRC, other partners, clusters, and local authorities? - What services did IFRC offer to PNSs in Cox's Bazar and Dhaka and how did those services contribute towards the effectiveness of the operation." | " Inductive approach, no predefined indicators" | "Document review PMO staff BDRCS/PNSs/ICRC/IFRC staff at HQ/regional/global" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |
| | Was the capacity of the human resource system enough to fulfil the needs of the interventions and beneficiaries? Were personnel skills utilized in an efficient and effective manner? | "Nb of staff trained under the operation HR % retention" | "Document review PMO staff" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |

| Criteria | Evaluation questions | Indicators | Data source | Data collection method |
|--|---|---|---|---|
| | Was there adequate and relevant staffing including: a) decisions concerning the number of staff members needed, where, when, with what competences, at what levels, and at required availability and b) decision-making chain regarding staffing? | " Inductive approach, no predefined indicators" | "Document review PMO staff" | "Literature review Key Informant Interview (KII) - Semi-structured interview" |
| Impact | What evidence (both direct and indirect) is available that the interventions contributed to the reduction of suffering and that the affected populations were assisted in maintaining or resuming basic dignity and enhancing disaster preparedness? | Use PMO programme indicators by sectors | "Document review Case study (?)" | "Literature review KII if relevant for case study" |
| | What impact did the interventions have on how the displaced and host communities coped with the protracted displacement crisis and subsequent disasters? | Use PMO programme indicators by sectors | "Document review Case study (?)" | "Literature review KII if relevant for case study" |
| Connectedness and Sustainability | " Did the interventions result in enhanced institutional capacity of the BDRCS, in terms of: - ability to implement recovery programmes; - ability to prepare for and respond to disasters in a timely, efficient, and coordinated manner; - ability to mobilize communities at risk to cope with future disasters; - its auxiliary role; and - influence partners, including authorities, to act in accordance with humanitarian principles and (inter)national law? " | Inductive approach, no predefined indicators | Document review | "Literature review KII if relevant for case study" |
| | | "Existing and used CP - SoPs % of responder staff feeling better prepared to respond" | "Contingency Plan - SOPs PMO staff" | "Literature review KII if relevant for case study" |
| | | % of beneficiaries feeling able to cope better with disaster | Beneficiaries | FGD |
| | | Clear role into NDMP and related management system | "PMO Mgt staff Gvt representatives" | Key Informant Interview (KII) - Semi-structured interview |
| | | HD example | "Gvt authorities ICRC - IFRC" | Key Informant Interview (KII) - Semi-structured interview |
| | Did the support of the IFRC strengthen and complement the response of BDRCS branch / unit and coping mechanisms, or hinder them? | Inductive approach, no predefined indicators | PMO staff (Dhaka/Cox'sBazar) | Key Informant Interview (KII) - Semi-structured interview |
| | How did the support in planning, strategic direction, coordination and NS development enable BDRCS to better face the protracted displacement crisis and future disasters? | Inductive approach, no predefined indicators | "PMO Mgt staff Gvt authorities ICRC-IFRC" | Key Informant Interview (KII) - Semi-structured interview |
| | How do the links between the local government, officials, community groups enable both the displaced and host communities to sustain their livelihood activities in the future? | Use sector related indicators | "PMO staff (sector related) Government authorities" | Key Informant Interview (KII) - Semi-structured interview |
| "How did IFRC link with external coordination bodies, such as the UN and government bodies in Dhaka and Cox's Bazar to ensure connectedness and sustainability? What is the perception of RCRC Movement by external coordination bodies? " | Inductive approach, no predefined indicators | "External stakeholders Government authorities" | Key Informant Interview (KII) - Semi-structured interview | |

Annex 6 – KII – FGD List

Key Informant Interviews⁶⁹

| Name | Position | Organisation | Gender | Qty |
|--|--|--------------------|--------|-----|
| Emmeline Managabanag 'Mae' | Country Coordinator | DRC | F | 1 |
| Thomas Viger | Country Representative | Swedish Red Cross | M | 1 |
| Takudzwa Mushamba | Delegate | Swedish/British RC | M | 1 |
| Azmat Ulla | Head of country office | IFRC | M | 1 |
| Ekram Elahi | Former PMO - Director of training | BDRCS | M | 1 |
| Sirajul Islam Molla | HR Director | BDRCS | M | 1 |
| AHM Mainul Islam | Finance Director | BDRCS | M | 1 |
| Mr. Sikder Mokaddes Ahmed | Youth & Volunteers Director | BDRCS | M | 1 |
| M. Taslim Reza | Reporting & Comms | BDRCS | M | 1 |
| Tauqir/ /Edward Gomes | Finance/Admin/HR/Log | BDRCS | M | 3 |
| Gela Tsuladze, Victor Manan Nyambala, Md. Moshour Rahman, Md. Sharaful Hossain, Mohammad Murad Hossain, Mir Asibul Hasan | Logistics/ Procurement/ Security/ Admin/ Finance/ HR | IFRC | M | 6 |
| Mr. Abu Hena | Secretariat UNIT officer CXB | BDRCS | M | 1 |
| Frank Kennedy | Head of delegation | IFRC | M | 1 |
| Mr. Azhar | Relief and Cash | BDRCS | M | 1 |
| Resty Lou Talamayan | Am RC Country representative | AmRC | F | 1 |
| Joynal Abedin | Deputy Director, PMO | BDRCS | M | 1 |
| Syed Ali Nasim Khaliluzzaman | Head of Operation PMO | BDRCS | M | 1 |
| Sabrina Denuncq - Mohamed | Head of O - Cooperation delegate | ICRC | F/M | 2 |
| Maria Larios | Accountability Coordinator | IFRC | F | 1 |
| Bora Tümer - Cahit Sami Gün | HoD,- Ops Coordinator - Vol | TRCS | M | 2 |
| Isidro Navarro Paya | Livelihood and cash preparedness | IFRC | M | 1 |
| Necephor Mghendi | Head of AP DCPRR | IFRC | M | 1 |
| Sophia Keri | former Resource Mobilisation in Emergencies Coordinator, IFRC APRO | IFRC | F | 1 |
| William Carter | Senior Officer, WASH in Emergencies - GVA | IFRC | M | 1 |
| Louise Mccosker | Humanitarian Analyst | IFRC | F | 1 |
| Noorzat Mehjabin | PGI Officer | BDRCS | F | 1 |
| Jack Frith-Powell | Programme Manager | British RC | M | 1 |
| Mofijur Rahman Mamun / Md. Saidul Islam | ECV Coordinator / PSS Officer | BDRCS | M | 2 |
| Dr. Jeya Kulasingam | Health & Care Delegate | IFRC | M | 1 |
| Md. Amirul Islam (with 2 others) | CEA Officer | BDRCS | M | 1 |
| Saida Marzia / Nahida Arefin | PGI Officer / PGI & CEA Officer | IFRC | F | 1 |
| Norine Naguib | Field Coordinator | Canadian RC | F | 1 |

⁶⁹ KII are presented in meeting chronological order.

| Name | Position | Organisation | Gender | Qty |
|---|---|-----------------------------|--------|-----|
| Ratan Kumar Podder / Bijoy Kumar Barua | Co-coordinator / Sector Associate | Shelter/NFI Sector Cluster | M | 2 |
| Ranjini Paskarasingam | Child Protection Sub Sector Coordinator | Child Protection Sub Sector | F | 1 |
| Khairul Bashar | WASH | BDRCS | M | 1 |
| Samuel Cleary | WASH delegate | IFRC | M | 1 |
| Shanta Ghatak | Health Delegate | Swiss RC | F | 1 |
| Muhammad Azharul Islam | Relief Officer & Cash Focal | BDRCS | M | 1 |
| Asif Arafat | Sector Coordinator - WASH | WASH Sector ISCG | M | 1 |
| Binod Dhungana | Resilience Coordinator | IFRC | M | 1 |
| Bassam Khaddam | HoM - BD | QRCS | M | 1 |
| Hafiz Ahmed | Deputy Director | CPP, MoDMR | M | 1 |
| Mohammad Abul Kalam | Additional Secretary | RRRC, MoDMR | M | 1 |
| Federica Lisa & Marta Pena | Regional Shelter Coordinator / Senior Officer | IFRC | F | 2 |
| Riku Assamaki & Alka Kapoorsharma | Logistics Coordinator / Head of OLPSCM | IFRC | M/F | 2 |
| Grace Yuen Fong Lo / Mausam Bohara | interim Regional Health Coordinator / Emergency Health Delegate | IFRC | F | 2 |
| Panu Saaristo | Community Health and Emergency Care Team Leader | IFRC | M | 1 |
| Shyamkumar & Papaibrahima Sene | RFU | IFRC | M | 2 |
| Zeke Simperingham | Regional Migration Coordinator | IFRC | M | 1 |
| Mr. Feroz Salah Uddin | SG | BDRCS | M | 1 |
| Imam Zafor | Director, RFL | BDRCS | M | 1 |
| Rezina Halim | DD, PGI Focal | BDRCS | F | 1 |
| Gen De Jesus | Country Rep | British RC | F | 1 |
| Surendra Regmi | Prog Coordinator | IFRC | M | 1 |
| M.A.Halim | Director (CEA focal | BDRCS | M | 1 |
| Yirgalem Hirpa | Delegate (Risk Mgt | IFRC | M | 1 |
| Mr. Narendra and Mr.Kamrul Hasan | Shelter | IFRC/ BDRCS | M | 2 |
| Rajanish Raj Ojha, Programme Delegate / ARCHIEVAL P. MOLOS, Relief Delegate / Pritthi Raj Barua, Psychosocial Officer | Delegate | Danish RC | M | 3 |
| Ms. Hiroko SHIMIZU / Ms. Kozue HIRATA | PM/ Health Delegate | Japan RC | F | 2 |
| Margo Baars | Deputy Sr. Coor | ISCG | F | 1 |
| Dr. Mukesh Prajapati | Field Health Sector Coordinator | WHO | M | 1 |
| SM Sweet, Mridha, Rijvi, Nurujjaman | Camp Focals | BDRCS | M | 6 |
| Mr. Zahed | CIC | RRRC/ Govt. | M | 1 |
| Mr. Manuel, Ms Climentine | | IoM | M/ F | 2 |
| Ziaul Huq Himel | Relief | IFRC | M | 1 |
| Atiqur Rahman/ Shajib Munsi | DRR | BDRCS | M | 1 |
| Alfred Hasenohrl | Program Coordinator | German Red Cross | M | 1 |
| Nagore Moran | PGI Coordinator | APRO, IFRC | F | 1 |

| Name | Position | Organisation | Gender | Qty |
|---|---|-------------------|--------|------------|
| Nir/ Rachel/ Salauddin | PMEAL/ IM/ Reporting | IFRC | M & F | 3 |
| Mahbub Ali | Logistic and Procurement Manager | IFRC | M | 1 |
| Motiar Rahman | Senior Manager, Finance and Admin | IFRC | M | 1 |
| Mia Seppo | Resident Coordinator | UNDP | F | 1 |
| Ikhtiyar Aslanov / Stéphanie Eller | Head of Delegation / DHOD | ICRC | M / F | 2 |
| Sayma Ferdowsy, Deputy Director, Planning and Development | DD Planning and development | BDRCS | F | 1 |
| Dr. Tarek Mahmud Hussain | Director, Health and Blood | BDRCS | M | 1 |
| Afsar Ali | Director Logistics | BDRCS | M | 1 |
| Lynette Lowndes | Consultant to the Governing Board | IFRC | F | 1 |
| Rosemarie North / Benoit Carpentier | Communications Manager/Manager, Strategy and Global Network | IFRC | F / M | 2 |
| Pascale Meige / Nelson Castano | DCPRR/Manager Ops Coordo | IFRC | F/M | 2 |
| Pierre Kremer | Head of AP Partnerships and Resource Development | IFRC | M | 1 |
| Mr. Keramot Ali | MRRO | MRRO | M | 1 |
| Winnie Maganda/Tow Jia Yong | HR Dpt | IFRC KL | F/M | 2 |
| Ahmad Sami | NSD Coordinator | IFRC | M | 1 |
| Md Rafiqul Islam | Deputy SG | BDRCS | M | 1 |
| Xavier Castellano | AP Reg Director | IFRC | M | 1 |
| Ahmad Sami | NSD Coordinator | IFRC | M | 1 |
| Md Rafiqul Islam | Deputy SG | BDRCS | M | 1 |
| Xavier Castellano | AP Reg Director | IFRC | M | 1 |
| Prof. Dr. Md. Habibe Millat, MP | Vice Chairman | BDRCS | M | 1 |
| Mr. Hafiz Ahmed Mazumdar, MP | Chairman | BDRCS | M | 1 |
| Sanjeev Kafley | HoSO | IFRC | M | 1 |
| Lotte Ruppert | CEA | IFRC | F | 1 |
| Achala Navaratne | Country Rep | AmRC | M | 1 |
| Latifur | RCEH Manager | Field Hospital | M | 1 |
| Dr. Borha | RCEH Doctor | Field Hospital | M | 1 |
| Valeria Ragni | Anti-Trafficking Advisor | British Red Cross | M | 1 |
| Total - KII | | | | 127 |

Focus Group Discussions

| People | Assistance | Camp/Location | M | F | Total |
|------------------------------|-----------------------|----------------|----|----|-------|
| People with disabilities (F) | IFRC DAPS centre | Camp 13 | | 10 | 10 |
| FGD (F) | IFRC DAPS centre | Camp 13 | | 11 | 11 |
| Radio listening group (M) | CEA | Camp 19 | 13 | | 13 |
| Radio listening group (F) | CEA | Camp 19 | | 10 | 10 |
| Host community shelter (M) | Shelter | Host community | 13 | | 13 |
| Host community shelter (F) | Shelter | Host community | | 20 | 20 |
| Host community shelter (M) | Shelter (anticipated) | Host community | 7 | | 7 |
| Host community shelter (F) | Shelter (anticipated) | Host community | | 12 | 12 |
| FGD | Shelter | Camp 11 | 8 | 3 | 11 |
| FGD | Shelter | Camp 12 | 8 | 5 | 13 |

| People | Assistance | Camp/Location | M | F | Total |
|--|--------------------------|---------------|----|----|-------|
| Youth (male) | DRC Safe Space | Camp 19 | 10 | | 10 |
| Youth (F) | DRC Safe Space | Camp 19 | | 10 | 10 |
| FGD (M) | Cash | Camp 13 | 10 | | 10 |
| FGD (F) | Cash | Camp 19 | | 12 | 12 |
| FGD | Supplementary food packs | Camp 14 | 12 | 9 | 21 |
| Community Health volunteers | RCEH | Camp 7 | 20 | 2 | 22 |
| PSS volunteers | RCEH | Camp 7 | 2 | 1 | 3 |
| Doctor, para-medic, mid-wife, community organizers, volunteers | CRC Health Centre | Camp 8w | 7 | 3 | 10 |
| FGD (M) | WASH | Camp 18 | 13 | 0 | 13 |
| FGD (F) | WASH | Camp 18 | | 12 | 12 |
| CPP volunteers | CPP | Camp 26 | 13 | 9 | 22 |

TOTAL 265

Annex 7 – Enabling actions for recommendations

| WHAT | ACTIONS | WHO |
|--|---|---|
| OVERALL RECOMMENDATIONS | | |
| Review transitional process to avoid gaps in implementation | <ul style="list-style-type: none"> ✓ Identify key activities - sectorial gaps and programme support gaps ✓ Prioritise using as major criteria, where RCRC add value and complementarity and defined operating model (complementary with clear written lead) ✓ How to operate with the Unit – avoid confusion on volunteers/mobilizers and recognise them ✓ Ensure OWF new plan is reflecting changes accordingly to well define measurable targets. ✓ Define agreeable role, recruit and inducted change management coordinator (ideally from the region and/or similar context –culturally sensitive) ✓ Establish a joint in-country based – connected to wider fundraising system – Resources Mobilization committee. ✓ Tackle Operation Management issue – BDRCS DHAKA to structural management issue (level of authorities to PMO CXB, working with CXB unit, resources and staff management). | <p>BDRCS and all partners⁷⁰</p> <p>BDRCS supported by partners</p> <p>IFRC Secretariat in coordination with BDRCS/PNS</p> <p>BDRCS and IFRC in consultation with PNS</p> <p>BDRCS supported by partners</p> <p>BDRCS HQ and Governance in constant consultation with PMO⁷¹.</p> |
| BDRCS strengthen their leadership role into PMO | <ul style="list-style-type: none"> ✓ Based on joint prioritization, affirm where/when and how BDRCS wants partners to be lead ✓ BDRCS, senior management to take part of multilateral meetings (sectorial, inter sectors and inter-ministerial meetings) in CXB and DCA (Requesting support as and when relevant). ✓ Follow-up Humanitarian Diplomacy, anti-trafficking trainings should be provided to all governance and management leadership. ✓ BDRCS long term strategy for engaging with Government within its auxiliary role. ✓ Present, discuss NSD plan for partners to support and long term RM plan. | <p>BDRCS</p> <p>BDRCS supported by partners</p> <p>IFRC Secretariat BDRCS</p> <p>BDRCS with technical support as requested BDRCS with technical support as requested</p> |
| IFRC Secretariat to foster coordination role and lowering implementation | <ul style="list-style-type: none"> ✓ Ensure all PMO partners have a good understanding and vision of the reviewed OWF and all partners activities/capacities are well reflected into it (including new projects) ✓ Shared leadership in-country deep research (what works, what does not work – guidance on move forward). Could be done under consultancy. ✓ Review / update Committees ToRs, alignment of building blocks – endorsed by all partners. ✓ Agreed on lead – Co-lead chair with written decision and agreements which could serve system management and coordination. ✓ Regular follow-up and review (3 monthly for 2019, 2020 then bi-annual) of OWF, its targets, relevancy against evolving needs. | <p>BDRCS with technical support from IFRC secretariat</p> <p>Joint Review group IFRC/BDRCS/PNS (at least 2)</p> <p>IFRC secretariat based on steering committee decision</p> <p>ALL</p> |

⁷⁰ Here partners refer to IFRC, PNS, ICRC.

⁷¹ Here again PMO is understood all partners working under the OWF PMO (IFRC in-country, PNS and BDRCS CXB).

| WHAT | ACTIONS | WHO |
|---|---|--|
| | <ul style="list-style-type: none"> ✓ Review IFRC Emergency response tools and templates (adapting them to protracted crisis). | BDRCS with technical support from IFRC Secretariat, involving all operating PNS IFRC Secretariat GVA in conjunction with regional and country clusters. |
| Streamline Movement partners support to PMO | <ul style="list-style-type: none"> ✓ PNS to review transition plan and how they can support BDRCS. ✓ PNS to agree on shared leadership model to be foreseen – endorse and use it. ✓ ICRC further advise to PMO on protection, how they work with Unit, regional exchanges committee (ICRC/BDRCS/MRCS/IFRC) | PNS together with BDRCS and IFRC ICRC |
| HEALTH | | |
| RCEH & RCEC are covering the needs | <ul style="list-style-type: none"> ✓ Carried out the 2019 planned review⁷² for the need and quality of service ✓ Assess RCEH and RCEC performance (bi-annually) ✓ Find innovative solution to attract medical practitioners in CXB ✓ Ensure longer opening hours of health facilities | BDRCS supported by PMO partners |
| Medicine shortage | <ul style="list-style-type: none"> ✓ Define if it is not possible to go back to 3 monthly medicines procurement to avoid shortage. Identify blocking locks and resolve. | PMO office (health and log) |
| PSS training | <ul style="list-style-type: none"> ✓ List volunteers/mobilisers with training ✓ Train new ones (at least the ones delivering PSS support) | BDRCS PSS service with IFRC, Danish Red Cross, and Japanese Red Cross support |
| Staff/vol PSS support | <ul style="list-style-type: none"> ✓ Define if PSS support could be done to PMO staff and volunteers and how to do it | PMO (all partners) |
| CBHFA - outdated | <ul style="list-style-type: none"> ✓ Review tools used and applied ✓ Ensure last updated tools translated into Bangla ✓ Keep training/updating vol/community mobiliser (IDB funding) | PMO BDRCS/IFRC in coordination with PNS involved in health |
| WASH | | |
| Build upon work done | <ul style="list-style-type: none"> ✓ Define where RC/RC PMO add value in WASH (hygiene promotion, FSM...TBC) – ensure Secretariat phase out do not harm quality delivery. ✓ If identified as key RCRC contributing sectors, further adapt strategy to address larger needs (including formalising shared leadership). ✓ Further cover water needs collaboratively with WASH cluster partners ✓ Recruit/mobilize and train gender balanced hard and soft skills WASH PMO national team ✓ Waste management /FSM – carefully plan the use to of IDB grant for it. | PMO BDRCS/IFRC in coordination with PNS involved in WASH BDRCS with technical sector PMO WASH team BDRCS PMO PMO |
| Protection needs to access to WASH facilities | <ul style="list-style-type: none"> ✓ See how to address security concerns of the most vulnerable to access WASH facilities during night time especially. | PMO WASH team together with PGI |
| PGI | | |
| Further define/clarify PGI strategy | <ul style="list-style-type: none"> ✓ Needs assessment – joint planning – Do need analysis (use anti-trafficking assessment as basis), identify who is best placed to lead what activities – rationalise – maximise use of resources | IFRC PMO/BDRCS PMO and HQ/DRC and TRC/Swiss RC |

⁷² BDRCS Sitrep n.43 – review of the RCEH service delivery

| WHAT | ACTIONS | WHO |
|---|---|--|
| | <ul style="list-style-type: none"> ✓ Define what protection is for PMO vs ICRC protection position and needs of protection mainstreaming –using protection framework – what is priority for the different entities ✓ Ensure PGI team properly managed (working together) and well-resourced to address their portfolio ✓ PGI/Health teams to work closely on defining what are their respective portfolio (including Safe spaces/PSS/DAPS...) to clarify roles and responsibilities, avoid duplications ✓ Use developed guideline for team orientation and improve mainstreaming. ✓ Cooperate in complementary on protection integration ICRC/PMO complementary (follow-up training) | <p>IFRC PMO – BDRCS</p> <p>IFRC PMO – BDRCS with supporting partners</p> <p>IFRC PMO/BDRCS PMO and all PNS involved in Health sector</p> <p>PMO PGI / ICRC</p> |
| SHELTER - NFIs | | |
| More durable and safer mid-term solutions | <ul style="list-style-type: none"> ✓ Ensure the commitment to meet the targets for midterm and transitional shelter⁷³ is honoured / kept during the transition of PMO. ✓ Strengthen communication and beneficiaries selection criteria and participation ✓ Foster cash attribution for NFIs requirement, especially non standards (i.e. fans). ✓ Strengthen assistance for shelter upgrades prior to and repair during, the monsoon season. ✓ Prioritise cash for housing repairs support to HC. | <p>PMO</p> <p>PMO shelter team and CEA team</p> <p>PMO shelter team and CEA team</p> <p>PMO shelter team</p> |
| FOOD SECURITY AND LIVELIHOOD | | |
| More durable solutions | <ul style="list-style-type: none"> ✓ Define a strategy to address further food security and livelihood to be part of the resilience framework. ✓ Develop advocacy plan with technical consultation of related cluster to foster more durable solution for food security and livelihood. ✓ Advocate for in Incomes Generating activities – to benefit the host and displaced communities. ✓ Continue to advocate and pilot cash transfer activities for HC and cash for work for displaced communities. | <p>PMO DRR/Relief</p> |
| PREPAREDNESS – DRR AND RESILIENCE | | |
| Preparedness, DRR and Resilience continue to expend and improve | <ul style="list-style-type: none"> ✓ Use existing DRR related projects to mainstream DRR – learn from others - joint planning for joint strategy under PMO (and/or other if more relevant). ✓ Use 2018 Cyclone Preparedness Lessons Learnt to further expend CPP ✓ Work on Contingency Plan for further population influx, relocation and repatriations – using position (issue) paper as basis. ✓ Relocation plan could encompass 3 perspectives: relocation to Bashan Char island, relocation during cyclone alert and/or internally during prior to monsoon (safer place to live)⁷⁴ | <p>PMO – DRC (mitigation micro-projects) – BRC (V2R)</p> <p>BDRCS-AmRC</p> <p>ALL (including ICRC)</p> <p>ALL (including ICRC)</p> |

⁷³ MTR was informed midterm shelter design has been approved.

⁷⁴ This is the suggestion from BDRCS and it appears important to capture here.



| WHAT | ACTIONS | WHO |
|--|--|--|
| CEA – PMER-IM | | |
| Foster fair beneficiaries' selection process | <ul style="list-style-type: none"> ✓ Continue to engage with CiC and at community to ensure fair beneficiaries selection ✓ Do a risk analysis on beneficiaries' selection and engagement. ✓ Working with close cooperation all humanitarian and Governmental partners to reach remote areas. ✓ Create follow-up mechanisms for community feedback and PDM findings. | All led by IFRC PMO |
| Strengthen reporting and IM system | <ul style="list-style-type: none"> ✓ Ensure OWF PoA update with aligned measurable targets (using existing baseline) ✓ Raise number/standards of need assessment. ✓ Strengthen BDRCS reporting/ PMER team and promote a common/ harmonized monitoring and reporting practice. ✓ Create a Federation-wide information dashboard for ease information sharing (see what is the best option and if access to GO platform will suffice). | <p>IFRC Secretariat for BDRCS with all partners PMO BDRCS with technical support from IFRC Secretariat and all partners. IFRC Secretariat in consultation with PMO partners</p> |

Annex 8: Lessons learned from other reviews and evaluations PMO

Response in Cox's Bazar

Achievements by the humanitarian community are commendable because of its ability to respond immediately to save lives and reduce suffering (Sida et al., 2017⁷⁵; CMC, 2018a⁷⁶; DEC, 2018⁷⁷; UNICEF, 2018⁷⁸). Agencies that were able to work together and deploy skilled staff fared better (Sida et al., 2017). **High staff turnover a common and inevitable problem across all agencies** (Sida et al., 2017; UNICEF, 2018). However, some agencies were able to find solutions as they have well thought out and executed strategy backed by HQ decisions that made sure resources were available and delivery is prioritized (Sida et al., 2017). Staffing affected the effectiveness across the whole response, such as better support system (e.g. supply and logistics) that facilitated the response. In order to prevent from undermining the local capacities, there is a need to call for specific guidance on ethical surge practices and all who are deployed to have mandatory organizational and contextual briefings (CMC, 2018b). They also recommend paying explicit attention to relational dynamics between national and international staff and their stress management. Less-experienced staff should not be placed in decision-making positions and if unavoidable, a more senior staff should have oversight and mentor on more junior staff.

The importance of recognizing this as a refugee crisis with its own set of needs, and providing protection in response (Sida et al., 2017). UNHCR has the refugee protection mandate and has relied on persuasion, advocacy and facilitation to integrate protection in overall plans and strategies. One major example is their effort to implement a biometric registration of refugees and issue cards with clear non-refoulement statement. Community-based protection approaches were a critical intervention as volunteers in camps have contributed to significant progress and the scale of the response made traditional case management system impossible and many protection concerns happen in camps (Sida et al., 2017; CMC, 2018a). UNHCR relies on the volunteers to conduct referrals and raise awareness on protection risks and available services in the community. Human Rights Watch emphasizes the importance of referring to the displaced community as “refugees” to ensure that they receive full refugee protections (2018⁷⁹). They ask for the humanitarian community to urge the GoB to give UNHCR the lead response coordination responsibility as they have the refugee mandate.

Protection is an area that many agencies identified as a gap requiring mainstreaming to all aspects, but many agencies struggle to meet (Sida et al., 2017). Some agencies failed to integrate basic protection measures in the sectors from the beginning, contradicting established good practice and guidance (CMC, 2018a). This is primarily as many agencies do not have refugee protection expertise/background, insufficient experienced staff and funding, leaving mainstreaming protection as an abstract concept (Sida et al., 2017; CMC, 2018a). The complex coordination arrangements and competition among agencies in this response also led to service fragmentation and did not facilitate protection considerations (Sida et al., 2017). Additionally, some agencies face insufficient resources and contextual challenges to invest in protection (CMC, 2018a).

Some agencies consider sex, age and vulnerability disaggregation but that data does not necessarily channel to programming that addresses gender roles, as it is difficult to do so in a population that have been facing decades long oppression (CMC, 2018a).

Mental health and psychosocial services (MHPSS) also remains a prominent gap, especially within a forced displacement crisis which entails many of the displaced experienced trauma (DEC, 2018).

Investing in the available justice system for the displaced and host communities is also another way to address protection concerns (IRC, 2019⁸⁰). Both communities reportedly prefer and depend on informal justice systems such as through the village courts, arbitration council, union parishad (union council) and salish (local village council), which can reinforce harmful gender power dynamics. Issues such as sexual and gender-based violence and assault, drug abuse and trafficking, kidnapping, trafficking and other criminal behavior are some of the conflicts

⁷⁵ Sida, L., Jahan, F., Rashid, M., Nelis, T. and Lakshman, R. (2018). *Independent evaluation of UNHCR's emergency response to the Rohingya refugees influx in Bangladesh August 2017–September 2018*, online at <https://www.unhcr.org/5c811b464.pdf>.

⁷⁶ Conflict Management Consulting (2018). *Real Time Evaluation of IOM's Response to the Rohingya Crisis*, online by request at <https://www.iom.int/external-evaluations>.

⁷⁷ Disasters Emergency Committee (2018). *Responding to the Needs of Refugees and Host Communities: Review of the Dec Phase 1 Responses*, online at https://www.dec.org.uk/sites/default/files/PDFS/dec_rohingya_crisis_appeal_response_review_report270318.pdf.

⁷⁸ UNICEF. *Evaluation of UNICEF's Response to the Rohingya Refugee Crisis in Bangladesh*, online at https://www.unicef.org/evaldatabase/index_103442.html.

⁷⁹ Human Rights Watch (2018). *Bangladesh Is Not My Country: The Plight of Rohingya Refugees from Myanmar*, online at <https://www.hrw.org/report/2018/08/05/bangladesh-not-my-country/plight-rohingya-refugees-myanmar>.

⁸⁰ International Rescue Committee (2019). *Access to Justice for Rohingya and Host Community in Cox's Bazar. Slides presented to the Protection Working Group, Cox's Bazar, March 2019*.

within and between the two communities. These are due to gender hierarchies; disruption of traditional social norms and family dynamics; distress from fleeing and living in poor conditions in camps; lack of livelihood and education opportunities; unequal distribution of goods; and land/resource disputes. Both communities perceive minimal shared recourse and no effective solution for inter-community conflicts. Displaced people who arrived post-2016 are also less aware of access to formal justice mechanisms compared to UNHCR registered refugees. However, humanitarian actors have significant influence on their ability to access justice. According to Christian Aid & GUK's study⁸¹, only 27 per cent of women and 17 per cent of men report understanding rights related to humanitarian assistance, and consistently low understanding of other forms of rights. It is recommended to build the capacity of camp authorities such as the CiC to have survivor-centred approaches according to minimum protection standards for women and children (IRC, 2019). There is a call for awareness raising on legal and humanitarian rights and justice mechanisms; promoting women's leadership in the mechanisms and other programming; and strengthen the formal justice system to address violence against women and children (IRC, 2019; Christian Aid & GUK, 2018).

Some of the more effective agencies in Bangladesh does not necessarily have the same level of effectiveness in navigating the politics of return (Sida et al., 2017). This is due in part to its weaker presence in Myanmar. **The international and national humanitarian communities and infrastructure were not prepared.** There have been repeated recommendations for establishing early warning systems and rethinking existing systems in the lens of complex political environments (Sida et al., 2017). Some agencies report not having intelligence about the situation and lacked a clear structure which affected the response (UNICEF, 2018). It is recommended to have better investment in political, social and economic intelligence to forecast and inform its preparedness within the local context but also across border and region; shared with other agencies for better coordination (UNICEF, 2018).

Localization is front and centre in the Government and many agencies, but elements of a successful localization are yet to be seen. In many ways, Cox's Bazar has very well established local NGOs and a Government that are able and willing to assert control (HPG, 2018⁸²). However, the specific needs of a forced displacement crisis arguably went beyond what the current local capacities can provide. Traditional localization identifies local NGOs as the prime partner that understands the local needs and capacities better than international actors. However, in this response, there are competing priorities between international and some local actors, who are part of the host community. Knowing the differing views and objectives between the host, displaced communities, local and international actors, there is a need to consider context-specific challenges based on a nuanced understanding of displaced-host relations when advocating for localization. Localization in this sense, can be problematic as some NGOs are advocating for quick repatriation, which does not necessarily benefit the displaced population.

Local NGOs carry the sentiment that international actors are biased towards the displaced population. Similarly, international actors find that local NGOs are biased against the displaced population (HPG, 2018). Understandably, international actors are confident about the extent of local actors advocating and responding according to international humanitarian principles and commitments.

Due to a lack of common understanding on what is capacity, discussions tend to focus on organizational needs such as fundraising and reporting needs. This skewed perspective emphasizes on local NGOs to adapt to international models with little happening on the reverse. It is recommended moving localization discussions away from diverging organizational priorities and emphasize on the best way forward for the displaced and host communities by conducting robust and honest assessments on capacities, access and context to determine resource distribution and responsibilities (HPG, 2018).

In conclusion, discussions on capacity, complementarity and localization are only relevant when they remain firmly centred on meeting humanitarian needs and serving the needs of the populations affected.

Government restrictions pose a huge challenge in humanitarian action, which leads being unable to meet international humanitarian standards (Sida et al., 2017). Nevertheless, the international system must work and plan within these set constraints by assisting the host community and working with local NGOs (HPG, 2018). In such situation, it is recommended to continue improving lives through maintaining resources and advocating for greater rights and freedoms at the same time, which involves ensuring regional and international communities hold Myanmar accountable to address root causes (HPG, 2018). It is recommended to utilize informal communication channels with GoB officials to discuss the upcoming investment dilemma and decline of relief funding but also the opportunities for development funding (CMC, 2018a). Focus should be placed on projects and investments with an economic effect and reinforcement of local capacities instead of just basic relief.

Many agencies struggled with medium to long-term strategic planning and thinking, and adapting strategies to context (Sida et al., 2017; UNICEF, 2018). UNHCR was clear in its focus from the beginning due to its clear refugee protection mandate. It focused on promoting access to durable solutions in the medium to long-term,

⁸¹ Christian Aid and Ganna Unnayan Kendra (2018). *Accountability Assessment Rohingya Response Bangladesh*, online at <https://www.christianaid.org.uk/sites/default/files/2018-03/Response-Accountability-Assessment-Feb-2018.pdf>.

⁸² Humanitarian Policy Group (2018). *Capacity and complementarity in the Rohingya response in Bangladesh*, online at <https://www.odi.org/sites/odi.org.uk/files/resource-documents/12554.pdf>.

including prioritizing protection, safety and public health along with advocating for durable infrastructure. Some agencies find it challenging to transition from a needs-based phase dominated by goods and services provision to rights-based and people-centred recovery phase with considerations for developmental programming (CMC, 2018a). It is recommended to have for more clarity on the maximum duration of a Level 3⁸³ status in relation to a protracted crisis, and the division of roles and responsibilities at every level – this could be in the form of agreed assessment criteria and transparent decision-making process (CMC, 2018b). This is important as some agencies has seen an increase in overburdening field office and disconnect between the field and Dhaka office (UNICEF, 2018). The longer-term strategic perspective should also have explicit references to transition, recovery and localization, and should be complemented by having regular strategic reviews and timely clear communications to all concerned when roles are adjusted.

Some identified key determinant factors shaping medium-term scenario are on decongestion of the camps, funding levels and economic investment in Cox's Bazar district (CMC, 2018a). With the likely depletion of relief aid, agencies need better and explicit prioritization and sequencing (UNICEF, 2018).

At least on a medium to long-term, priorities and perspectives of the displaced community are missing from discussions on capacity and influencing humanitarian response (HPG, 2018). Relief and services remains to have limited scope and are mostly short-term, which does not build greater capacity or complementarity. Not much progress has been made on resolving political divisions among government, humanitarian actors and affected population.

Some of the possible reasons behind this short-sightedness is due to fragmented community leadership system within the displaced community, additionally burdened by conflict and competition among the actors. The system is also seen as top-down which may not be representative of the community (HPG, 2019⁸⁴). This participation deficit and fragmented leadership further hampers the protection needs in the community (CMC, 2018a).

According to HPG, some of the medium to long-term priorities of the displaced community are access to education and better future for their children and livelihood opportunities to support themselves (2019). This is part of the larger aspiration for safe return to Myanmar but if they were to remain in Bangladesh, most prefer to stay where they are than face uncertain changes, despite the current difficult living conditions.

HPG recommends going beyond technical capacities and investing in advocacy and diplomatic capabilities among local and international actors to address government restrictions and ensure repatriation is only considered under safe conditions (2018). Additionally, more support of the displaced community's self-determination and future decision-making will contribute towards the long-term response beyond coordination and providing goods and services. They call for more investment in gathering representative individual perspectives among the displaced community through surveys and strengthen community leadership systems by improving accountability and oversight mechanisms (HPG, 2019). Christian Aid & GUK reports that overreliance on mechanisms such as complaint boxes and phone lines can be detrimental as they are the least preferred and trusted and usually not used (2018). Most prefer face-to-face and verbal accountability mechanisms, partly also because there is a low language literacy among the displaced population. The recommend having a diversity of accountability mechanisms and refining existing mechanisms such as the majhi system, particularly as it has reportedly been problematic (especially for women) but is still the most trusted and preferred mechanism. It is recommended to have in place effective communication with displaced and host communities that covers all issues relevant to their present wellbeing and future (DEC, 2018). It is suggested to invest in community-based organizations within the displaced community and encourage their participation in the wider response (CMC, 2018a).

In order to address livelihood needs and recognizing the protracted nature of the displacement, there is also a need to put in place multi-year funding plans which prioritizes cash programming and vocational training, with consideration for women. Addressing education needs would require more advocacy for GoB's agreement on the official language used, the framework and investment on teacher training. Education interventions should consider the provision of formal inclusive education and technical and vocational education/ training.

The importance of working in parallel to advocate for the rights of the displaced community alongside assisting the host community has been repeatedly highlighted as a response priority (HPG 2018; HPG, 2019; CMC, 2018a). Considering the sometimes-polarizing priorities mentioned above, livelihood assistance for the displaced community would need to be complemented by coordinated funding for the host community and infrastructure. At the same time, identify and invest in policy reforms (such as freedom of movement and right to work for the displaced community) that can also address the adverse impact of hosting the displaced community as they would be able to contribute to the development of the local economy and community, increasing social cohesion.

Coordination suffers from issues of power dynamics, competition and diverging priorities amongst humanitarian actors (Sida et al., 2017; HPG, 2018; UNICEF, 2018). The UN placed a collective coordination

⁸³ L3 responses are activated in the most complex and challenging humanitarian emergencies, when the highest level of mobilization is required, across the humanitarian system, to ensure that the right capacities and systems are place to effectively meet needs.

⁸⁴ Humanitarian Policy Group (2019). *Rohingya refugees' perspectives on their displacement in Bangladesh*, online at <https://www.odi.org/sites/odi.org.uk/files/resource-documents/12719.pdf>.

mechanism in the form of a Strategic Executive Group but has yet to agree on accountability lines (DEC, 2018). While this has somewhat improved over time, the coordination is still far from ideal due to excessive competition (CMC, 2018a). Coordination discussions tend to centre on models, agencies and reputational risk rather than practical purposes on meetings needs and strengthening capacities and resilience (CMC, 2018a). Coordination structures does not necessarily generate collaborative attitudes and it is recommended to focus on problem-solving behaviours that formalistic models (CMC, 2018a). It also recommends ensuring deployed coordinators have soft-skills, such as personal and professional competencies to foster collaboration among diverse actors.

The context, protection challenges and different roles of actors are all documented and all humanitarian actors should familiarize with this publicly available documentation (DEC, 2018).

Response in other population movement crises

Protection was highlighted as a gap in the European migration response, despite it being a core pillar identified in the European Migration Framework (Alexander et al., 2016⁸⁵). The Real-time Evaluation done on European migration response found that RFL services were appreciated but with varying successes along the migratory route. The report recommended for RCRC to embed protection measures in all operations with urgency, dedicated resources and from the onset. At the same time, it is important to clarify IFRC's protection offerings and place mechanisms that can ensure basic protection measures at all contact points with migrants. It also suggested proper documentation and evidence collection of protection-related incidents and issues, so that IFRC is able to do advocacy and response. Another recommendation from the Greece IFRC Appeal evaluation is to use the deployment of Joint Protection Working Group (which successfully ensured clear and joint protection plans, approaches and training), as a model for early engagement in protection issues in future population movement responses (ECAS, 2019⁸⁶).

According to a joint-assessment on the protection risks in Greece and Macedonia as part of the European refugee and migrant crisis, **in order to address protection risks for women and girls, it is important to set standards and risk-specific criteria for actors, including government agencies to identify, prioritize and respond to at-risk individuals** (UNHCR, UNFPA & WRC, 2016⁸⁷). They suggest establishing cross-border data sharing protocols, including SGBV case management. Part of this is to collect sex and age-disaggregated data to monitor the needs and flow of refugee and migrants. Another important need identified in the response to the Syrian crisis in Turkey is **psychosocial counselling, crucial in preventing social isolation**, especially for children (Yavçan, 2015⁸⁸).

In their review of the response to Syrian crisis, Pearce & Lee argues that **humanitarian response still view vulnerability as one dimensional instead of a spectrum** (2018⁸⁹). Assessments and analyses do not capture and prioritize households with individuals who have compounding vulnerabilities (Pearce & Lee, 2018). For example, new disabilities needing additional healthcare and adolescent girls taking on caregiver roles. However, targeted protection assessments of population groups do better in identifying protection risks and analyzing SAD intersections. In terms of multi-sector vulnerability assessments, they often fail to integrate positive or resilient traits and coping mechanisms (such as utilizing support networks) when analyzing needs. Humanitarian response also rarely consider self-protection capacities, relegating many as vulnerable instead of partners in capacity and resilience development. They recommend focusing on building personal assets through vocational training, communication and literacy, social assets (strengthening support networks), and physical assets (safe spaces). ECAS evaluation on the Greece IFRC Appeal also suggests humanitarian actors to avoid assumptions in targeting vulnerable groups to ensure proper considerations even for people outside of classic vulnerability criteria (2019).

Livelihoods and jobs are important for the displaced population and some programmes and models are effective, but new approaches will require assessments (Ruaudel & Morrison-Métois, 2017⁹⁰). In a needs assessment on Turkish Red Crescent community centre project for the Syrian crisis, the centre provides vocational and communication skills training to indirectly provide livelihoods assistance (Yavçan, 2015).

It is important to learn from the resources and experience of the development sector during the Syrian crisis, through adapting and piloting operational guidance, documenting outcomes, sharing learning on social inclusion, gender and resilience in humanitarian field (Pearce & Lee, 2018). However, there are **obstacles to complementarity between humanitarian and development actors** (Ruaudel & Morrison-Métois, 2017). For example, funding availability is not up to par to the great needs, which naturally creates competition between humanitarian and

⁸⁵ Alexander, J., Chaplowe, S., Dryza, T. and Paredes, R. (2016). *Real Time Evaluation European Migration Response 2015-2016*, online at <http://adore.ifrc.org/Download.aspx?FileId=156934&.zip>.

⁸⁶ ECAS Consulting (2019). *Final Evaluation of IFRC Emergency Appeal Greece: Population Movement, 2015-2018*, online at <http://adore.ifrc.org/Download.aspx?FileId=228632&.pdf>.

⁸⁷ UNHCR, UNFPA and WRC (2016). *Initial Assessment Report: Protection Risks for Women and Girls in the European Refugee and Migrant Crisis*, online at <https://www.unhcr.org/569f8f419.pdf>.

⁸⁸ Yavçan, B. (2015). *Turkish Red Crescent Community Center Project Needs Assessment Report*, online at

⁸⁹ Pearce, E. and Lee, B. (2018). *From vulnerability to resilience: improving humanitarian response*, online at <https://www.fmreview.org/syria2018/pearce-lee>.

⁹⁰ Ruaudel, H. and Morrison-Métois, S. (2017). *Responding to Refugee Crises in Developing Countries: What Can We Learn From Evaluations?*, online at https://www.oecd-ilibrary.org/development/responding-to-refugee-crises-in-developing-countries_ae4362bd-en.

development programming. Unfortunately, studies have shown that humanitarian needs tend to remain high over years and sometimes decades (Ruauudel & Morrison-Métois, 2017). Interestingly, multi-year funding allows for both humanitarian and development actors to better address longer-term needs and actors are also able to adjust to evolving contexts with flexible funding (Ruauudel & Morrison-Métois, 2017). Inflexibility of funds can adversely affect efficiency and effectiveness as seen in the Rwandan Population Movement IFRC Appeal (Colmenarejo, 2017⁹¹).

Many parties were not prepared for the scale and longevity of a population movement crisis (Ruauudel & Morrison-Métois, 2017; Alexander et al., 2016). International donors to the Syrian crisis reacted slowly and often could not forecast the impact of protracted conflict and instability on population movements (Ruauudel & Morrison-Métois, 2017). Due to institutional gaps and few existing modalities for supporting refugees in middle-income countries, donors were challenged in organizing assistance for refugees displaced from Syria. Many donors also do not have clear policies and strategies to support urban refugees as refugee programming tend to be in camp contexts. It is recommended to extract, connect and embed existing migration resources and expertise throughout the Movement, which involves a long-term and flexible approach to regular assessment and planning exercise (Alexander et al., 2016). This same report also called for regular revisiting of regional contingency plans and evaluate the appropriateness of short-term ERU model for protracted contexts. A pre-empting solution can also be to pre-negotiate and develop MoUs with governments and external actors that can potentially face migration crises.

Protracted crises also have specific and evolving needs that material relief assistance may not be able to meet (Alexander et al., 2016; Stansberry et al., 2013⁹²). For example, the migrants on the move in Europe needed information that was only partly met by the National Societies who were focusing more on providing relief items and immediate first aid during surge. There was a need to deliver items based on practical needs; ensure culturally appropriate and relevant services were provided; a two-way communication and feedback mechanism; and revise of operational support systems for timely and efficient response to a protracted crisis (Alexander et al., 2016). However, in the Greece Appeal, RCRC was able to adapt to the changing phases of the response and moved from traditional approaches to a strengthened integration and urban approach through the Multi-Functional Centres (ECAS, 2019). Another way is by developing a contingency plan with planned actions and monitoring mechanism that ensures early risk assessment and mitigation. The final evaluation on the IFRC Emergency Appeal to South Sudan Population Movement found that the **goods provided were often not addressing chronic issues faced by the returnees** as they are only for relief (Stansberry et al., 2013).

Further investment needed in RCRC's auxiliary role and humanitarian diplomacy, especially in an evolving migration crisis. In the European migration crisis, IFRC was able to exercise strong advocacy at the EU to uphold humanitarian principles and standards amidst government political agendas, but greater evidence-based advocacy remains a need (Alexander et al., 2016). IFRC is at a prime position to communicate priorities and issues in a highly evolving context; and engage actors and partners in IFRC's Humanitarian Diplomacy Policy to clarify roles, responsibilities and actions in migration advocacy. In the evaluation of the Complex Emergency and Population Movement Appeal in Sudan, the report also recommends Sudanese Red Crescent to **invest in humanitarian diplomacy** in order to gain access in inaccessible areas (Yousif & Thiele, 2013⁹³). Part of this involves strengthening relations with government agencies and also ensuring representation of the displaced population (especially women) in coordination and decision-making efforts.

Sustainable solutions to displacement for long-term peace and stability is often a long and gradual process (Ruauudel & Morrison-Métois, 2017). Efforts to address root causes of conflict and promote state building in countries of origin are not effective solutions at the short or medium-term. On the contrary, short-term political pressures and concentrated focus on the immediate and visible results can undermine longer-term positive change. For example, the militarization and politicization of aid in some contexts can be dangerous as foreign policy, domestic priorities and development needs may not always align. The study found that effective solutions to complex crises tend to be long-term and gradual as the failure of some efforts that did not consider the absorption capacity of institutions has shown.

Ownership, capacity building of local branches, IFRC facilitation and inclusive coordination are highly important parts in a response (Stansberry et al., 2013; Yousif & Thiele, 2013). In the South Sudan IFRC Appeal, the South Sudan Red Cross (SSRC) reportedly did not take ownership of the response that required strong leadership, management and accountability (Stansberry et al., 2013). They were also unable to build the capacities of local branches despite its experience. As a consequence, some branches felt constrained by the HQ. This report called for SSRC to take more active leadership role in future appeals, especially in ensuring proper staffing and capacity building through active consideration in the planning and budgeting. It also suggested a comprehensive branch assessment as part of its capacity building initiative that should support volunteers as well. **In several responses, IFRC was found to be taking up implementation rather than facilitation, which can undermine**

⁹¹ Colmenarejo, M. G. (2017). *Evaluation of Rwanda Population Movement Emergency Appeal*, online at <http://adore.ifrc.org/Download.aspx?FileId=162477&.pdf>.

⁹² Stansberry, M., Bourne, D., Katajisto, M., Nkonge, D. (2013). *South Sudan Population Movement Emergency Appeal Final Evaluation*, online at <http://adore.ifrc.org/Download.aspx?FileId=67548&.pdf>.

⁹³ Yousif, F. and Thiele A. (2013). *Sudan: Complex Emergency and Population Movement Appeals Evaluation Report*, online at <http://adore.ifrc.org/Download.aspx?FileId=47897&.pdf>.

National Society capacity building (Stansberry et al., 2013; ECAS, 2019). Stansberry and colleagues pointed out that IFRC and SSRC needed to clarify expectations which further needed to be communicated to all that is involved, including branches. Another key gap as a result of this lack of clarity is that some sectors ended up being under-resourced due to lack of understanding of SSRC capacities. ECAS recommends from its learnings of the Greece response, for IFRC and PNSs to deploy experienced international delegates that have the right skills to collaborate with National Society counterparts (2019).

Capacity building and localization in a protracted crisis also looks different. For example, in the Greece Appeal, the planned phase out, handover and funding decrease meant that the continuously high needs of the migrant population are not fully met after the transition, which is further complicated by the low local capacities (ECAS, 2019). As a result, sustainability of the interventions is still questionable. The transition could have been done earlier in some places and better communicated to the camp community to adjust expectations, even if RCRC was challenged by the lack of national capacity to take over. It could also have embedded community participation in camps and local communities to sustain community engagement and participation.

In terms of external coordination in the South Sudan Appeal, RCRC generally fared well with high participation and appreciation but more could have been done to ensure **better problem solving and decision-making** rather than just information sharing (Stansberry et al., 2013). In the evaluation on the Sudan Appeal, the report recommended for the National Society to be the primary presence and lead at all coordination meetings with IFRC support (Yousif & Thiele, 2013). Conversely, internal coordination in the South Sudan Appeal had bigger gaps due to other SSRC priorities, **lack of planning** and deficient Appeal funding coverage (Stansberry et al., 2013).

Additionally, **inevitable insufficient staffing and high turnover** resulted in planning and implementation gaps. To address this similar problem faced at the Sudan Appeal, the evaluation suggested the need for field staff to take leave away from the crisis areas and regular visits by senior management to care for the staff (Yousif & Thiele, 2013). ECAS also suggests timely PSS, training and support for staff and volunteers throughout the entire response (2019).

Another problem identified in the South Sudan Appeal is that at the beginning, the Appeal planning process **appeared to be done in an inclusive approach, but it was not maintained during the entire planning process**, affecting the budgeting, and operationalization down to the branches (Stansberry et al., 2013). This evaluation recommended regular reviews of the Emergency Appeal with key stakeholders (especially the National Society) to ensure proper alignment. This includes clear emphasis on National Society capacity building in all partnership discussions to ensure clear understanding, ownership and united vision by all actors (Yousif & Thiele, 2013). Regular reviews will also enable any changes and decisions to be made based on funding availability. Further to that, a donor strategy can be developed to promote a strong and well-coordinated RCRC Movement. In the European migration response, IFRC coordinated well under one coordination umbrella and distributed ECHO funding to be implemented by European National Societies based on their competencies, enabling them to receive recognition in their respective countries (ECAS, 2019).

Social integration and inclusion should be incorporated in a response as early as possible and on a long-term basis (Alexander et al., 2016). This should be supported first by identifying RCRC's core priorities in this subject which will influence domestic and regional advocacy and fundraising priorities. Part of this is by ensuring the involvement of the host community in designing the long-term integration approach and maintenance of regular pre-crisis host community activities by the National Society. One way of addressing negative perceptions of migrants is also to outline methods of combatting xenophobia and promoting solidarity using external partnerships, media channels and volunteer networks. Another example from the European response is recruiting migrants as volunteers. This requires tailored volunteer management plans to fit changing profiles of volunteers, and consistent support and recognition for volunteers (Alexander et al., 2016). The Rwandan Appeal was able to create good connectedness with local authorities and the displaced community through a needs-based and strategic decision to support the host community. Sustainability was built through livelihood and environmental activities such as tree planting and stove efficiency. The evaluation also highlighted the importance of an appropriate approach with the government and local authorities to ensure institutional and operational sustainability of the Rwandan Red Cross in emergencies (Colmenarejo, 2017).

In complex emergencies with highly volatile situations, more focus is needed on ensuring knowledge sharing and training on conflict analysis and management (Yousif & Thiele, 2013). The Sudan Appeal evaluation calls highlights the importance of sharing information, best practices and solutions to challenges in complex emergencies that struggle with access and security (Yousif & Thiele, 2013). IFRC can play a role here by establishing rapid and streamlined information sharing protocols for National Societies' migration response (Alexander et al., 2016). It also suggested the development and use of conflict analysis tools with ICRC, who has the mandate to support National Societies in preparedness during armed conflict. This should be complemented by even more emphasis on regular training of branches and senior staff at HQ on conflict analysis and management. **On the other hand, it was found that the South Sudan IFRC Appeal failed to build on previous similar experiences in the same context** (Stansberry et al., 2013), which is a missed opportunity as the National Society has the capability to do so.